

Adherence and Skill Checklist

Adherence Checklist

1. Preparing the child for the exposure

a. Feeling Frightened/Somatic Symptoms of Anxiety

i. Did the therapist help the child identify what physical feelings they might experience during the exposure (e.g. stomach ache)?

Yes No

b. Expecting Bad Things to Happen/Anxious Cognitions

i. Did the therapist help the child identify what anxious thoughts they might have during the exposure (e.g., I might make a mistake)?

Yes No

c. Attitudes and Actions that can Help

i. Did the therapist mention or have the child practice deep breathing and/or progressive muscle relaxation to cope with anxious bodily feelings (e.g., belly breathing, squeezing lemons)?

Yes No

ii. Did the therapist help the child generate a coping thought as a way to cope with anxious thoughts (e.g., I can do it, Even if I make a mistake, I can get through it)?

Yes No

iii. Did the therapist walk the child through problem-solving possible problems that may come up during the exposure (e.g., what to do if you make a mistake – walk away, ask the question again)?

Yes No

d. Rewards

i. Did the therapist plan a reward with the child for facing their fear (e.g., special time with therapist, ice cream)?

Yes No

Core Adherence: /6

2. Other general considerations

