

Case Study



This is what the teachers might see in Alexis:

Alexis is a 16-year-old Hispanic female with red hair, she is tall and slightly overweight for her age. Alexis is currently in 10th grade at Skyline Senior High School. She is an excellent student that receives As with an occasional B. She is involved with extracurricular activities including choir, softball, and volleyball. She seems to enjoy school and rarely has difficulty completing assignments correctly. Alexis is respectful in class and never seems to have any issues with her peers or with her teachers. She is quiet in the classroom and doesn't speak out of turn.

This is what Alexis is thinking inside:

Alexis reported that she hates school. She stated that the work is getting harder and she worries that she is not going to do her assignments correctly. Alexis hates to be around the people at school, she fears her teachers. She stated that she worries they are going to call on her, or that they will yell at her if she doesn't understand something. She stated that she is an A student, recently she has had a few Bs but has been able to raise them back to As. Alexis has panic attacks at home when trying to complete her homework because she does not want to make a mistake. Her mother does not understand what Alexis is struggling with and does not understand the assignments enough to help Alexis with the coursework. Alexis stated that generally she understands the material and she struggles with the instructions on her assignments. She does not want to bother her teachers by asking questions at all, especially after class to clarify the assignment requirements.

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Alexis reported that her peers throw paper wads at her on the bus; she has not reported this because she doesn't want to be a "snitch." Alexis has been in and out of Cyber School since 3th grade. In 3th grade a peer bullied her so badly that she was taken out of her public school. She did not report what type of bullying, and just stated that her peer was "very rude." In 4th grade, she started in a public school and then was transferred to Cyber School again due to bullying. This year there were multiple children who bullied her. She stated that they pushed her on the bus and made fun of her. She has been made fun of for having red hair, being fat, tall, and Hispanic. She also reported that in the past her teachers were not nice to her.

Alexis's top stressors currently are:

1. School
2. Peers
3. Family

Currently Alexis has suicidal ideation (SI) with a method. She stated that she has done research about ways to die and has found Excedrin to be effective. She last did research two weeks ago. She doesn't know how many pills she would have to take but guessed about a handful and stated that a whole bottle would be excessive. She indicated that she does not want to fail. She has contemplated when she could commit suicide and determined that she would want to be home alone (she stated she is never home alone), because she wouldn't want anyone to see her. She stated that she could probably get to the point of holding the pills in her hand but nothing further. Alexis reports that she is scared to act on her thoughts and that she is "too much of a wimp" to follow through. She also stated that she doesn't want others to think that she was not strong enough to make it through this hard part of her life. Alexis reports that most of her thoughts are occurring after school when it gets dark out. She stated that they will last at least an hour and they are daily thoughts. Alexis stated that once she is done thinking about suicide she almost feels better. Alexis stated that if she is alone and feeling "in a bad mood" than that would increase the chances of her acting on her thoughts. Alexis stated that her current urge to die is a 3-4/5; her ability to distract is a 2/5 because the thoughts remain in the back of her mind; and her ability to keep herself safe is a 99%.

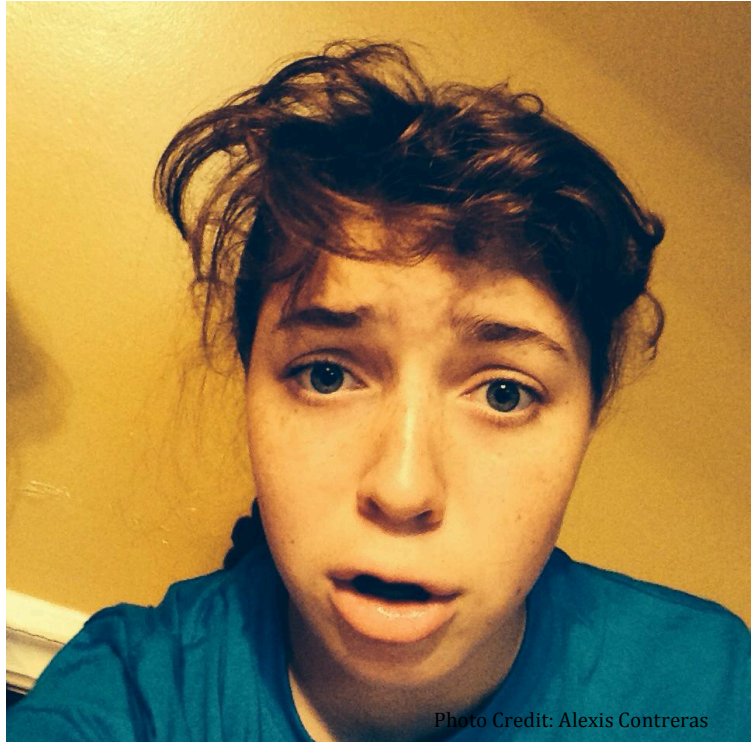


Photo Credit: Alexis Contreras

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Alexis meets criteria for the following:

Major Depressive D/O: Symptoms include, hypoactivity, listless speech, depressed facial affect; excessive weeping daily; depressed feelings daily; low self-esteem; excessive guilt; excessive fatigue; physical complaints, stomach aches; fluctuating appetite; anhedonia; social withdrawal; sleep disturbance with nightmares

Social Anxiety D/O: symptoms include marked and persistent fears of one or more social performance situations; exposure provokes anxiety; avoidance of social situations; significant interference of daily living; recurrent unexpected panic attacks: heart palpitations, shaking; fear of having additional panic attacks; reported having 2 attacks in her lifetime; social situations are avoided

Generalized Anxiety D/O: symptoms include excessive worrying and anxiety; difficulty controlling her worries; sleep disturbance with nightmares; anhedonia; loss of concentration; fatigued; significant distress and impairment

R/O Panic D/O w/Agoraphobia: symptoms include recurrent unexpected panic attacks: heart palpitations, shaking, feelings of choking, dizziness; fear of having additional panic attacks; reported having multiple panic attacks in her lifetime; social situations are avoided

R/O Obsessive Compulsive D/O: symptoms include compulsions, checking the oven, checking locks, switching phone ringer on and off, making sure he homework; possible interference in her normal routine

Reflection:

What differences do you notice in how you perceive Alexis and how she perceives herself?

What types of behaviors might you notice in Alexis?

What are some accommodations that can be made in your classroom to reduce anxiety?

How might you address Alexis to gain a better understanding of her anxiety symptoms and triggers?