Client Information

Population Served

The CCBT-Child Division primarily serves clients up to age 18 years with problems related to inattention, impulsivity, hyperactivity, anxiety, trauma, depression, and/or disruptive behavior. Because our clinic is not designed to assess or treat youth with pervasive developmental delays or thought disorders, youth with these problems are accepted only on a case-by-case basis.

Cost

Clients referred by the Departments of Education or Health pay no out-of-pocket costs. Privately referred clients are accepted only when openings are available and are provided services on a sliding fee scale based on household income and size. No third party insurance is accepted. Please contact (808) 956-9559 for more information.

THE CENTER FOR COGNITIVE BEHAVIOR THERAPY

Child and Adolescent Stress & Anxiety Program

The University of Hawai’i at Mānoa

Center for Cognitive Behavior Therapy
Child Division

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What are Anxiety Disorders?

Stress, fear, and anxiety are among the most common emotional difficulties for children and adolescents. Everyone experiences some amount of anxiety. However, when these fears, worries, or feelings of distress become so strong that they interfere with school, friendships, or being with family, there may be a more serious problem, such as a disorder in the area of anxiety or depression.

How do I know if my child has anxiety problems?

The signs of anxiety are familiar to many of us: worrying, feeling tense, having stomachaches or headaches, avoidance of feared situations, and even crying. Anxiety disorders typically involve many of these feelings. Here are some examples of common anxiety concerns for youth:

**Separation Anxiety**: excessive fear of being away from parents

**Social Anxiety**: extreme shyness and becoming easily embarrassed

**Generalized Anxiety**: excessive and frequent worry about many things

**Panic**: feeling very afraid all of the sudden for no reason at all

**Phobia**: extreme fear of specific things

**Obsessions & Compulsions**: anxiety provoking thoughts and repetitive rituals

Description of Evaluation

The CCBT offers comprehensive assessments involving child and parent interviews and completion of questionnaires by the child, parent, teacher(s), and other important adults in the youth’s life (e.g., counselor, therapist, pediatrician).

Description of Treatment

Once an evaluation has been completed at the CCBT, youth may receive cognitive behavioral therapy (CBT). CBT is typically short-term and does not involve the use of medication. Children are first taught skills to help them manage their anxious thoughts. Then, children participate in guided practice to get comfortable being around the things they fear. Often, parents are also coached in ways to help their child overcome their anxiety. With everyone working together, the child begins to find the exposure practices easier and easier, and feelings of distress and anxiety will often subside.

Other Concerns

Children with anxiety concerns may also exhibit difficulties with depression, school refusal, and/or selective mutism. We also offer comprehensive assessment and treatment services for these concerns, similar to the approach and style mentioned above.

Documentation

Our referral process is simple and requires only a few steps. First, please call us by phone at (808) 956-9559 to let us know you are interested receiving services from our clinic.

If services are being requested from the Departments of Education or Health, referral sources are asked to fax the following to (808) 956-2218:

1. The consent for evaluation or the consent for release of information (signed by the youth’s legal guardian)
2. Current contact information for the youth’s legal guardian

Consent forms include any document indicating (a) the legal guardian’s consent for evaluation or exchange of information and (b) the procurement of CCBT services by the DOE or the DOH.

We also request that as much of the following be provided to us via fax or mail:

- Documents from the youth’s current or past IEP meetings
- Teacher-report forms (i.e., BASC-2, ASEBA)
- Student Status Reports
- Past mental health evaluation reports for the youth, recent report cards, attendance records, prior mental health treatment summaries, and intellectual and achievement evaluations.