



Thriving Minds Behavioral Health Center

When to Worry About Your Student's Worries

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Anxiety: Normal or not?

- Anxiety is a normal and adaptive system in the body that tells us when we are in danger.
- Anxiety becomes a problem when our body tells us there is danger when there is no real danger.



What is normal anxiety?

<p>Situation or Trigger:</p> <ul style="list-style-type: none">• First date• Preparing for an exam• Performing at a concert• Giving a speech• Moving from home• Climbing a tall ladder	<p>Anxiety:</p> <p>Apprehension Nervousness Tension Edginess Nausea Sweating Trembling</p>	<ul style="list-style-type: none"><input type="checkbox"/> Transient<input type="checkbox"/> Does not significantly interfere with a person's well-being<input type="checkbox"/> Does not prevent a person from achieving their goals
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What is abnormal anxiety?

<p>Situation or Trigger:</p> <ul style="list-style-type: none">• First date• Preparing for an exam• Performing at a concert• Giving a speech• Moving from home• Climbing a tall ladder	<p>Anxiety</p> <p>Symptom Domains:</p> <p>Signaling Cognition Thinking Behaviour Physical</p>	<ul style="list-style-type: none"><input type="checkbox"/> Persistent<input type="checkbox"/> Excessive & Inappropriate<input type="checkbox"/> ↑ Intensity<input type="checkbox"/> Causes Impairment<input type="checkbox"/> Leads to dysfunctional coping:<ul style="list-style-type: none">- Avoidance- Withdrawal
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When To Worry About Anxiety

- ▶ Disorder of excessive self-protection – and we help them!
 - ▶ Have a false signal of danger – the worry trick is doubt (“What if...” thoughts) that they treat like danger
 - ▶ Reacting to this false signal doesn’t make them any safer
 - ▶ Instead of realizing that the signal didn’t help, they double down their effort to protect or avoid!
 - ▶ We tend to help them!

Common signs of anxiety in schools

- ▶ **Often well-behaved, compliant children**
- ▶ **School refusal/frequent absences**
- ▶ **Students asking to leave in the middle of class**
- ▶ **Complaints of racing heart, stomachaches, headaches**
- ▶ **Crying/pleading to call parents**
- ▶ **Worry about school (“what if” questions)**
- ▶ **Refusal to speak at school**
- ▶ **Test anxiety**
- ▶ **Inattention, distraction**
- ▶ **Defiance, refusal to do work or engage in classroom/extracurricular activities**



What's the problem with anxiety?



Affects approximately 13% of American children and adolescents



Greatest predictors of mood disorders, chronic depression, and alcohol abuse in adulthood



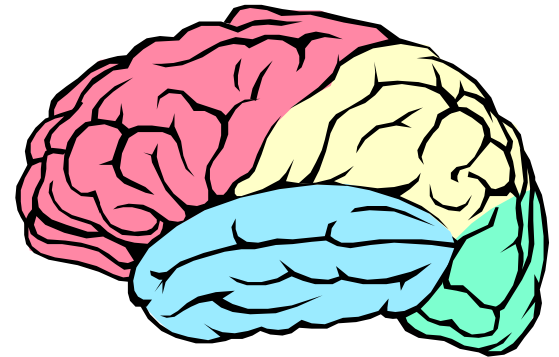
More than 40 million adults in the US (18%) have reported disabling anxiety that negatively impacts their lives



“Imagine
trying to
learn
calculus
right now”

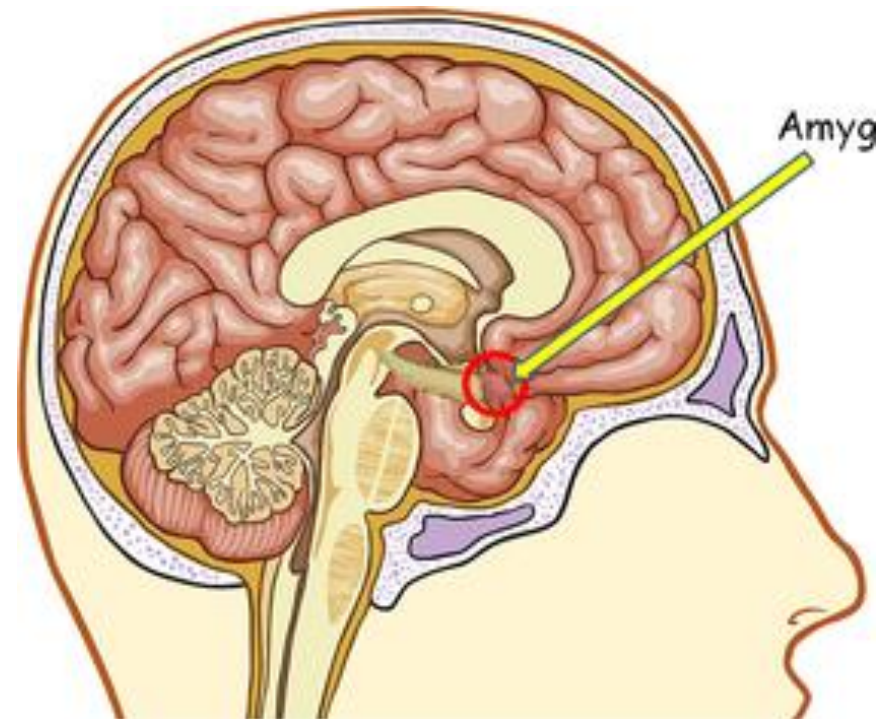
How Does Anxiety Develop?

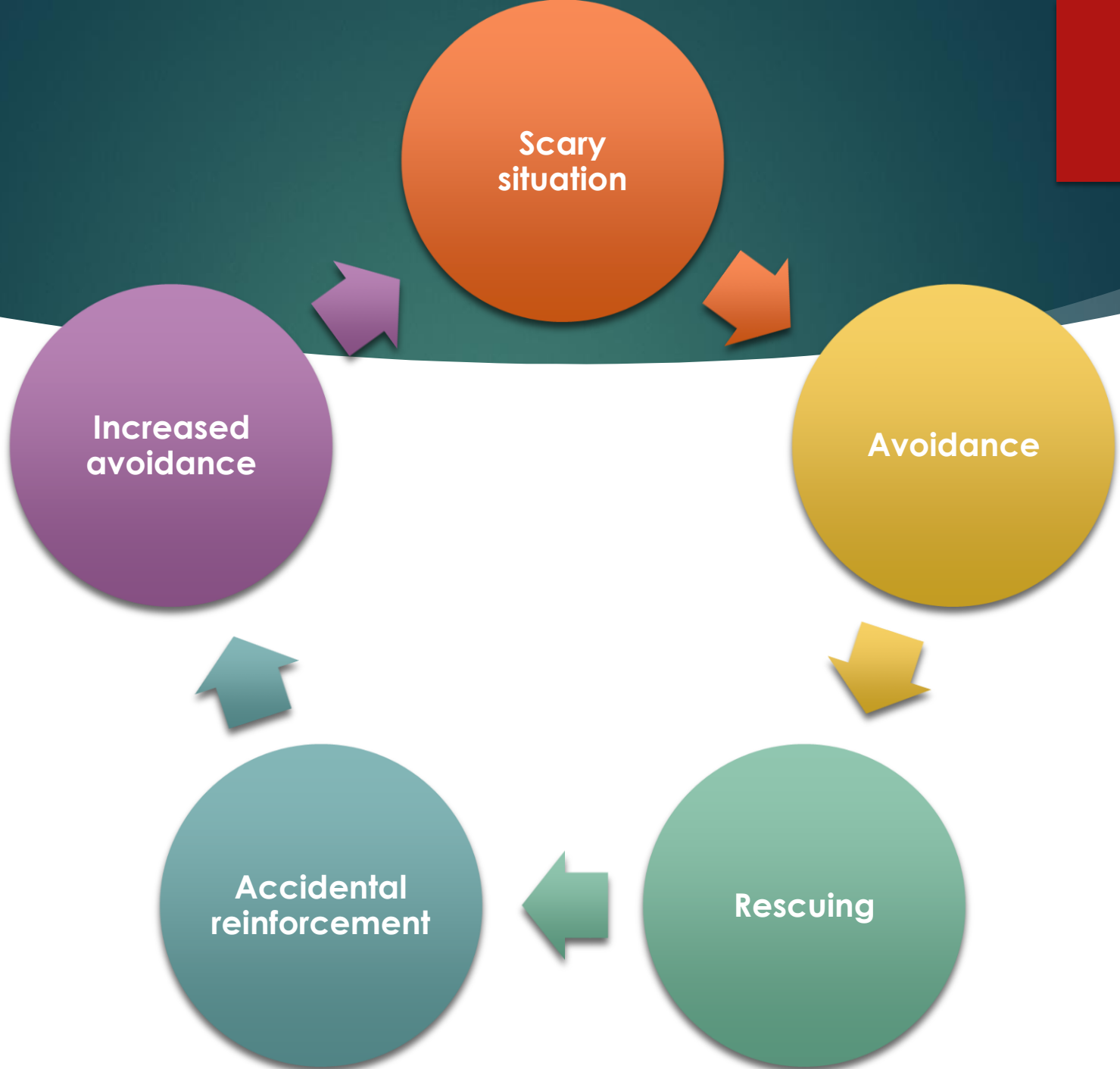
- ▶ **Nature vs. Nurture?**
- ▶ **Two main components involved are the amygdala and the hippocampus**
 - ▶ **Amygdala- Emotional memories are stored here and alerts brain that a threat is present**
 - ▶ **Hippocampus- Encodes specific threatening events into memories**



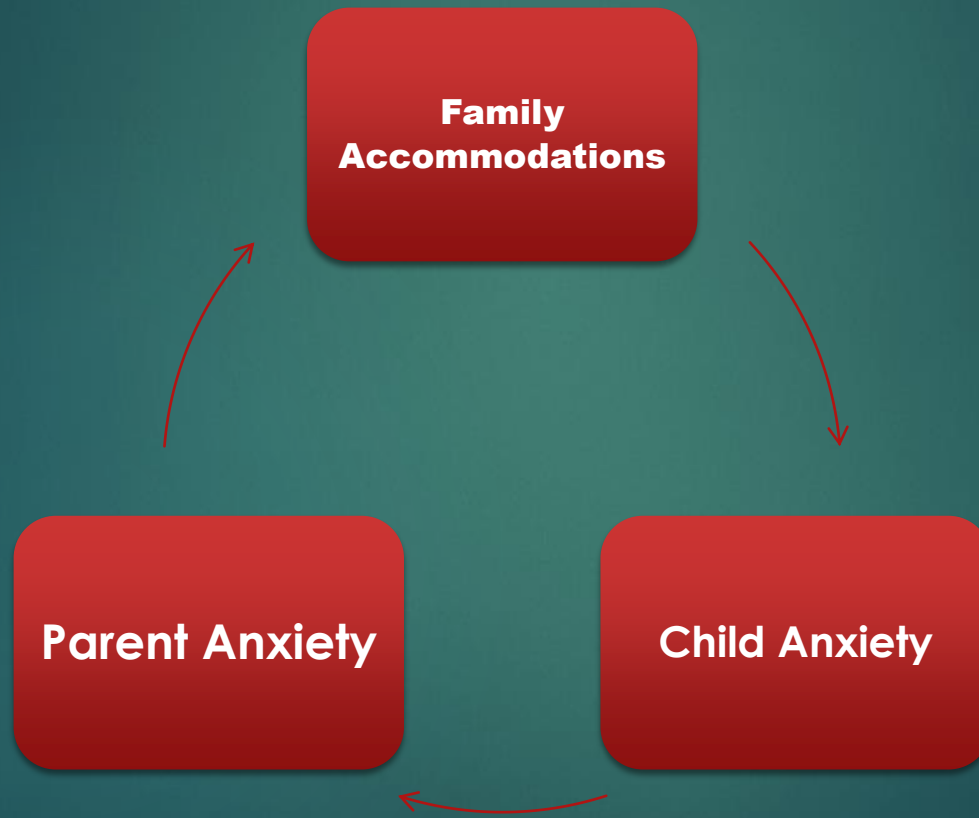
The Role of the amygdala

- ▶ Our “guard dog”
- ▶ Gives us feedback on danger – over-estimates always!
- ▶ <https://www.youtube.com/watch?v=0vhBkRipwis>





Family Rescuing/Accommodating



Generalized Anxiety Disorder

- Excessive and exaggerated anxiety about every day life events with no reasons for worry
- Can emerge in childhood or adolescence
- Signs and symptoms
 - Constant “worrier”
 - Seek reassurance
 - Rigid, irritable, restless
 - Physical symptoms
 - Frequent trips to the bathroom
 - Difficulty concentrating
 - Difficulty falling asleep



Ordinary worry vs GAD worry

Ordinary Worries

- ▶ Leads to planning and problem solving
- ▶ Attention is focused on developmentally important issues
- ▶ Doesn't interfere
- ▶ Ends with choices made and action taken

Chronic Worries

- ▶ Interferes with problem solving and planning
- ▶ Attention focused on unlikely disasters
- ▶ Crowds out ordinary activities
- ▶ Worries don't get solved – just repeated and then replaced with other worries
- ▶ Focus of your life

What is Social Anxiety?

- ▶ Extreme fear of being scrutinized and judged by others in social or performance situations
- ▶ About 15 million American adults have social anxiety disorder
- ▶ Equally common among males and females
- ▶ Typical age of onset: 13 years old
- ▶ 36 percent of people with social anxiety disorder report symptoms for 10 or more years before seeking help
- ▶ Can lead to:
 - ▶ School refusal
 - ▶ Lack of social or romantic relationships
 - ▶ Depression
 - ▶ Suicidal ideation



Social Anxiety is a chronic condition that typically doesn't go away on its own. It can be either performance or interaction based.

Specific Phobias

- Disorders characterized by an excessive and irrational fear of an object or situation not normally considered dangerous
- Common childhood phobias
 - Natural environment
 - Animals
 - Blood injury



Panic Disorder

- ▶ Recurrent Panic Attacks
 - ▶ Panic Attack: discrete period of intense fear or discomfort
 - ▶ Physical symptoms
 - ▶ Fear of fear
- ▶ At least one month or more of persistent worry about having panic attacks
- ▶ Panic attack occurs *out of the blue*



I CAN'T
KEEP CALM
BECAUSE
I HAVE
ANXIETY

Selective Mutism

- ▶ An anxiety disorder in which a child is unable to speak in some settings and to some people
- ▶ May seem like the child is willful and *refuses* to speak, but the child experiences it as an inability
- ▶ Parents often notice signs of SM when a child is 3 or 4 years old; may not be diagnosed until the child goes to school



Obsessive Compulsive Disorder

- ▶ Obsessions
(unwanted, intrusive thoughts, images or impulses) that cause great anxiety
- ▶ Compulsions
(repetitive acts to reduce the anxiety from the obsessions)
- ▶ OCD can manifest as early as 5 years old



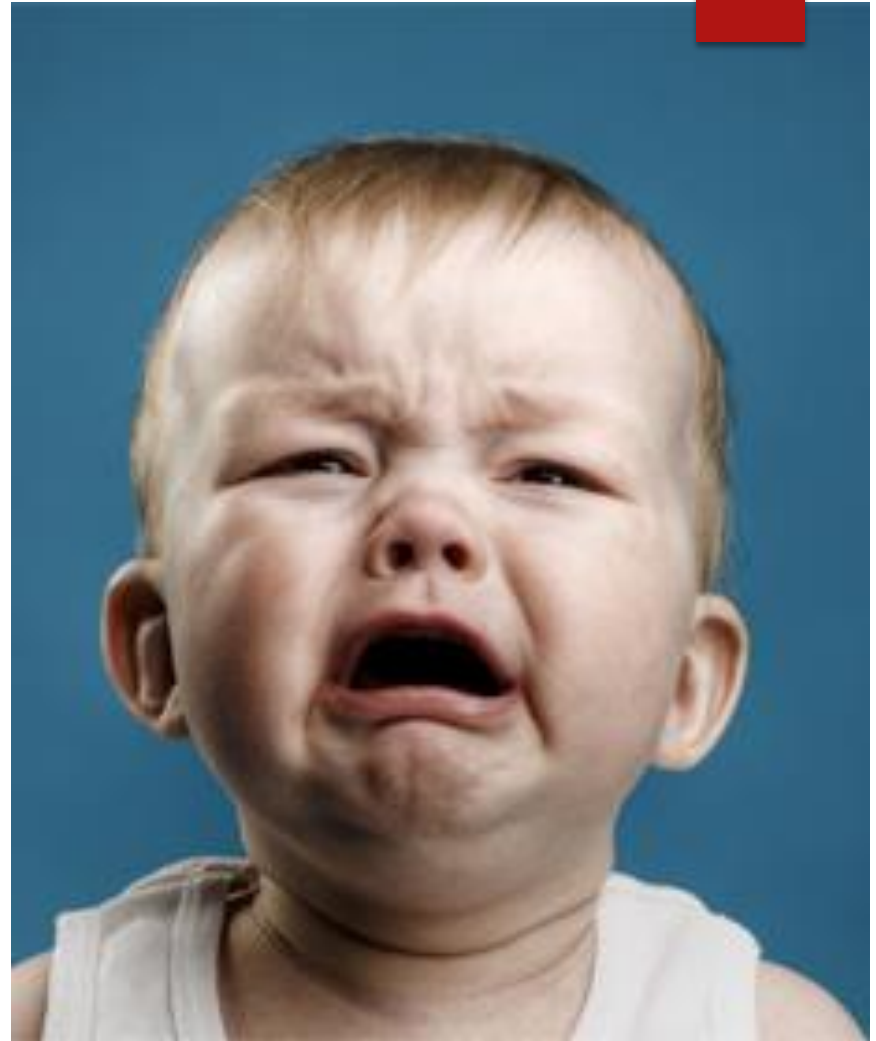
OCD cycle

- ▶ Self-maintaining
- ▶ Neurological
- ▶ Accommodated by other people



Separation Anxiety

- ▶ Great difficulty separating from parents/caregivers
- ▶ Typical between 1-2 years of age
- ▶ Inhibits daily functioning
- ▶ Does not get better with time/experience



School Refusal?

- ▶ Child-motivated refusal to attend school and/or difficulties remaining in class for an entire day
- ▶ Refers to children ages 5-17 who:
 - ▶ Are completely absent from school for periods of time
 - ▶ Attend but then leave school or skip certain activities
 - ▶ Arrive late to school (chronic tardiness) – must be child motivated
 - ▶ Attend school following intense morning misbehaviors (temper tantrums or refusal to move, designed to induce absenteeism)
 - ▶ Display unusual distress during school days that leads to pleas for future non-attendance directed at parents or others

Kearney and Albano,
2007)

Related to Anxiety

I DON'T WANT TO GO TO SCHOOL! I HATE SCHOOL! I'D RATHER DO **ANYTHING** THAN GO TO SCHOOL!



- ▶ ...but not a diagnosable anxiety disorder
- ▶ We actually aren't treating anxiety – we are intervening with avoidance!



Keeps kids from learning that fear is a warning, not a prediction. Gets in the way of them learning that just because they think something doesn't mean it will happen.



Becomes default way of responding to the world



Teaches kids to steer themselves away from unpredictable or uncomfortable situations

Avoidance – the oxygen of anxiety

How to communicate concerns to parents

Discuss

Discuss specific observations you have made

Share

Empathetically share your concerns about the effect it has on academics, behavior, mood, or socialization

Provide

Provide good information to parents about anxiety, or point them to someone who can

Realize

Realize that most parents KNOW this already, but are waiting to hear it from someone else!

Therapeutic Techniques for Anxiety

Our goal in intervention....

Worrying is like sitting
in a rocking chair. It
gives you something to
do but it doesn't get you
anywhere. ~English proverb

picsmeme.com

- ▶ NOT to make the anxiety go away!
Let it pass and do what is important
- ▶ Help create coping strategies
- ▶ Learning to act brave and therefore
be in charge of the anxiety/stress.
Don't fight it – accept it!
- ▶ Help parents and teachers manage
and react appropriately to anxiety
 - ▶ [Ray movie](#)
- ▶ Create accommodations and
interventions in school, if necessary



“The way to respond to anxiety is just as counterintuitive as diving into the wave that’s about to hit you.”

Tier I Interventions

- ▶ Build relationships with students (mentors)
- ▶ Build relationships with parents (coffee for parents once per month with the principal and staff)
- ▶ Bullying prevention
- ▶ Generally talking about being confident and brave to do things that are uncomfortable – helpful for whole class
 - ▶ Discuss our amygdala – watch dog
 - ▶ Our amygdala can LEARN
 - ▶ It learns by doing what we are afraid of or uncomfortable about
- ▶ Effective attendance monitoring policies (to reduce school avoidance) and awards for good attendance

Caregiver Behaviors Associated with Anxiety

- ▶ **Overprotection – enabling, accidental reinforcement, or accommodating!**
- ▶ **Modeling of Anxious Interpretation**
- ▶ **Tolerance or Encouragement of Avoidance Behaviors**
- ▶ **Rejection or Criticism**
- ▶ **Conflict**

*** Adapted from Chansky, 2014**

Common Caregiver Mistakes.....

- ▶ **Try to convince kids nothing bad will happen**
- ▶ **Reassure them by overdetailed schedules or upcoming events**
- ▶ **Tell them everything will be okay if they calm down**
- ▶ **Alter family plans to accommodate fear and keep them comfy**
- ▶ **Excuse tantrums and outbursts of anger**
- ▶ **Allow them to see anxious behavior without role modeling coping strategies**
- ▶ **Become angry and make unreasonable demands for them to “just do it”**

Positive Cargiver Behaviors that Buffer Stress

- ▶ **Reward Coping Behavior**
- ▶ **Extinguish Excessive Anxious Behavior**
- ▶ **Manage Own Anxiety**
- ▶ **Develop Family communication and Problem-Solving Skills**
- ▶ **Authoritative/Democratic Parenting Style (allowing children to fail and/or struggle)**

*** Adapted from Chansky, 2014**

“Model what you want
the child to feel”



Components of Research-based Intervention

- ▶ Psychoeducation
- ▶ Family support and training
- ▶ Medication
- ▶ Cognitive-Behavioral Therapy
 - ▶ Restructuring of thoughts
 - ▶ Reinforcement of brave behaviors
 - ▶ Teaching coping skills
 - ▶ Targeted exposures

Cognitive Behavioral Therapy (CBT)

- ▶ Found to be highly effective in treating anxiety in children and adolescents (Otte, 2011).
- ▶ More effective than any other intervention alone.
- ▶ CAMS study outcomes for anxiety:

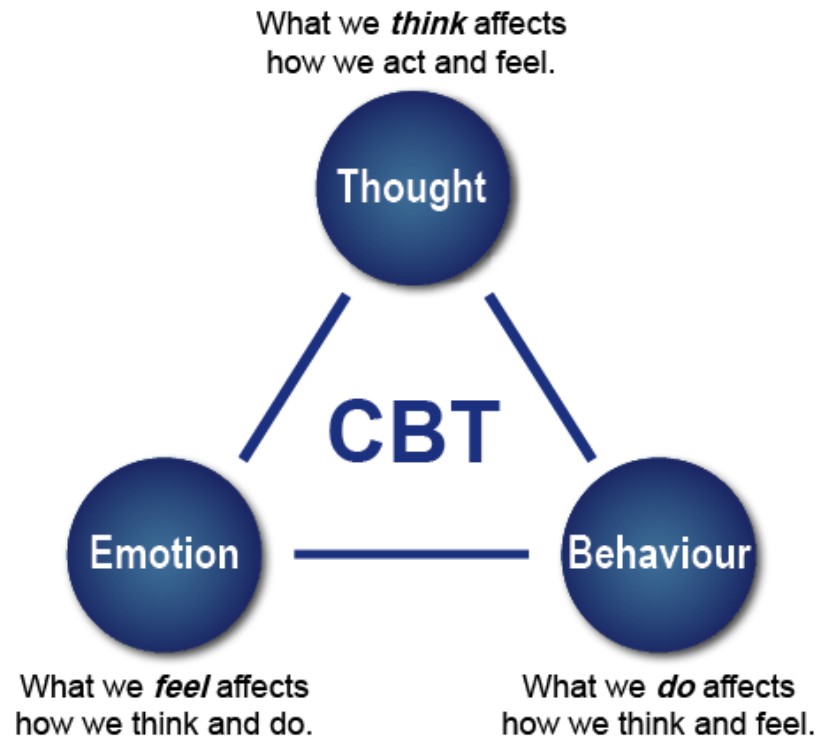


Integrated CBT Model of Anxiety Disorders



Cognitive Behavioral Therapy (CBT)

- ▶ Teach kids to identify their feelings
- ▶ What thoughts are getting the way?
- ▶ How can I keep my thoughts from bossing me around?



Cognitive Strategies

- ▶ Don't believe everything you think!!
 - ▶ Kids get tricked into believing they are in danger when they are not
- ▶ Thoughts happen outside our control but we chose how we value them
- ▶ Courage isn't what you feel, it's what you do.
- ▶ False alarm
 - ▶ Gives no useful information
 - ▶ Annoying, not alarming
 - ▶ Just because you are anxious does NOT mean you are in danger
 - ▶ Worry brain turns "maybe" into "definitely"

Cognitive and acceptance strategies



Anxiety tricks us into believing we are in danger when we are actually just uncomfortable.



Can you think of times when anxiety tricked you into believing you were in danger?



Are there times when this “trick” was untrue?

Cognitive and acceptance strategies

- ▶ Retrain your guard dog!
- ▶ Can't talk your amygdala out of a fear – it's not listening! (signals between the cortex and amygdala run mostly one way)
- ▶ Anxiety will end no matter what – just make yourself comfy waiting for it to end!
 - ▶ Breathing
 - ▶ Humor the fears (follow it to it's conclusion)
 - ▶ Is it danger or discomfort?
- ▶ Our amygdala has to be activated to learn something new – activate it, hang around and nothing terrible happens, amygdala learns.

Cognitive Strategies

- ▶ Develop coping cards
 - ▶ “in this moment, I’m having a thought that _____”
 - ▶ What is going on is my fear thoughts, and nothing else
 - ▶ No one has ever died from a fatal thought or a lethal idea
 - ▶ Fear is temporary and harmless
 - ▶ Just because I feel scared doesn’t mean anything bad is going to happen
 - ▶ I’m stronger than my fear
 - ▶ Just because I feel afraid doesn’t mean I can’t do it

Coping Cards

Recorder Concert: June -, 2012


What will happen?

First, I will line up with my class and we will walk to the cafeteria.

Then, I will find my seat. Ms. -- will help me if I can't remember where to sit.

Next, Mrs. -- will signal to the class when to begin playing. I should not play the recorder until I see this signal.

Finally, when the concert is over I can say "hi" to my family.

 **How I might feel:**

I may feel happy and excited because I am going to play in the concert and will have my family watch me.

If I am excited I can quietly squeeze my fidget.

I should not talk or yell during the concert.

Worry time

- ▶ **Scheduling “worry time”**
 - ▶ **consistent time -10 minutes or so**
 - ▶ **Child can sit with parent or teacher and talk about worries**
 - ▶ **focusing only on child’s worries**
 - ▶ **During the rest of the day, worries are OFF LIMITS!!**
 - ▶ **If child needs to, can write a worry down and put it in a shoebox to lock away.**



Relaxation

- ▶ Progressive Muscle Relaxation
- ▶ Diaphragmatic breathing
- ▶ Visualization



RELAXATION ROUTINE

1. SIT ON A CHAIR...

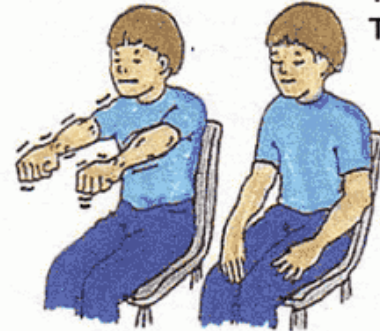


2. "SCRUNCH" UP YOUR FACE...



THEN... RELAX IT...

3. TENSE YOUR ARMS...



THEN... RELAX THEM

4. TENSE UP YOUR SHOULDERS AND CHEST...



THEN... RELAX THEM

5. TENSE UP YOUR LEGS...



...THEN RELAX!

6. BREATHE IN RELAXATION...



...BREATHE OUT TENSION

Behavioral interventions – facing fears

- ▶ Snake phobia
- ▶ Small steps toward bravery
- ▶ Encourage facing fears even though it's difficult
- ▶ Help kids understand that this is the way to make things easier later – like learning to play soccer or read

Exposure

- ▶ Three golden rules of exposure:

- ▶ 1. Fears are faced gradually, moving from least to most difficult
- ▶ 2. The client must stay in the feared situation long enough to learn that the bad things s/he fears will not happen.
 - ▶ If withdrawal occurs too quickly-fear can increase
- ▶ 3. Practice and repetition are the keys to success
 - ▶ If withdrawal occurs too quickly-fear can increase



Practice Being Brave!

Teach child/adolescent to rate their anxiety or
the “difficulty level”

1 (easy) – 10 (very hard/anxiety provoking)

Ordering
food at a
restaurant

Answering
a question
in class

Interrupting
conversation
between peers

Talking to
a boy I
like

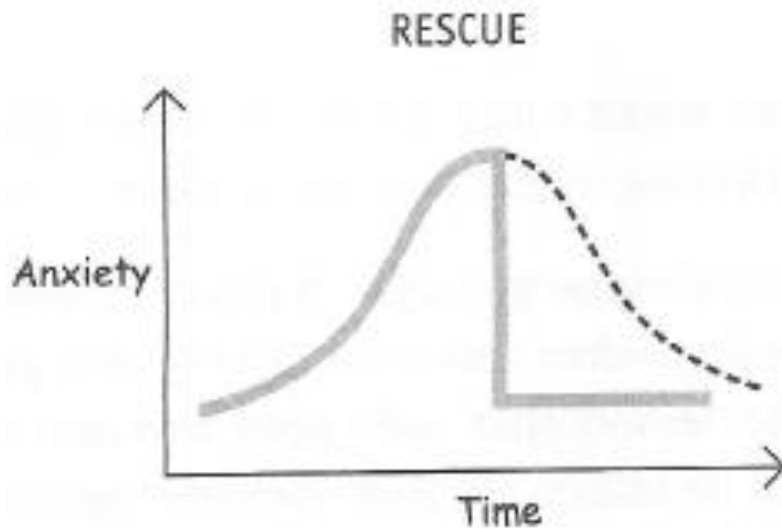
Asking for a
job
application
at a coffee
shop

What can teachers do?

- ▶ Support children with anxiety
- ▶ Try to be matter-of-fact with information, and be careful not to reassure too much
 - ▶ “you look anxious. I know you have learned some things you can do when you are anxious. Would you like to do one of those things?”
- ▶ Be careful not to accidentally reinforce avoidance
 - ▶ But.....do be open to accommodating when the demand is far out of the child's ability (e.g., giving oral presentations to just the teacher instead of the whole class)
- ▶ Be consistent with expectations and rules
- ▶ Model resilience and bravery
- ▶ Give time expectations for homework (perfectionism)
- ▶ Allow extra time on tests
- ▶ Cool down passes

What can teachers do?

- ▶ Give parents information about anxiety
- ▶ If anxiety is severe, research highly recommends outside treatment and/or medical intervention
 - ▶ Anti-depressant medication
 - ▶ CBT
 - ▶ “I’m concerned about your child, and research shows that treatments can be helpful. I have heard through the grapevine about a few clinics that families seem to really appreciate.” (can’t directly recommend but can give info)
- ▶ Help build **grit** – **encourage parents to allow their child to fail or struggle sometimes!**

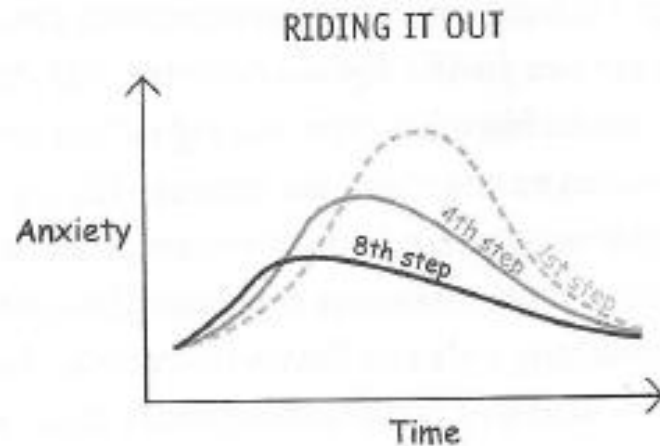


IMPACT:

- remembers situation at height of fear
- prevents habituation
- no feeling of mastery
- negative reinforcement for escaping

From
Tamar
Chansky,
2015

AVOIDANCE IS
REINFORCED



IMPACT:

- remembers success that allows habituation
- learns that anxiety passes on its own
- willing to approach increasingly challenging situations
- feeling of mastery
- positive reinforcement—feeling of pride for hanging in

From
Tamar
Chansky,
2015

APPROACH IS
REINFORCED

What not to do!

- ▶ Rescue kids too soon
- ▶ Give a LOT of attention to the anxiety
- ▶ Accidentally reinforce anxiety
- ▶ Call home immediately
- ▶ Allow avoidance
- ▶ Assure kids over and over that it will be okay
- ▶ Show anxiety or frustration
- ▶ Ignore the issue



If Suicidality is a Concern...

- ▶ **Don't be afraid to ask.**
- ▶ **Encourage parents to monitor social media.**
- ▶ **Examine pros and cons; maximize deterrents**
- ▶ **Negotiate agreement to “put suicide on hold” until other alternatives have been tested**
- ▶ **Dismantle any preparations**
- ▶ **Make guidelines for emergency contacts**
- ▶ **If highly suicidal, send child to ER for further assessment**

Books for Kids

- ▶ **Blink, Blink, Clop, Clop: Why do we do Things we Can't Stop? An OCD Storybook, by E. Katia Moritz, PhD 2001.**
- ▶ **Up and Down the Worry Hill: A Children's Book about Obsessive-Compulsive Disorder and it's Treatment, by Aureen P. Wagner PhD 2004.**
- ▶ **Playing with Anxiety – Casey's Guide for Teens and Kids (free e-book)**

Blink, Blink, Clop, Clop **An OCD Storybook**

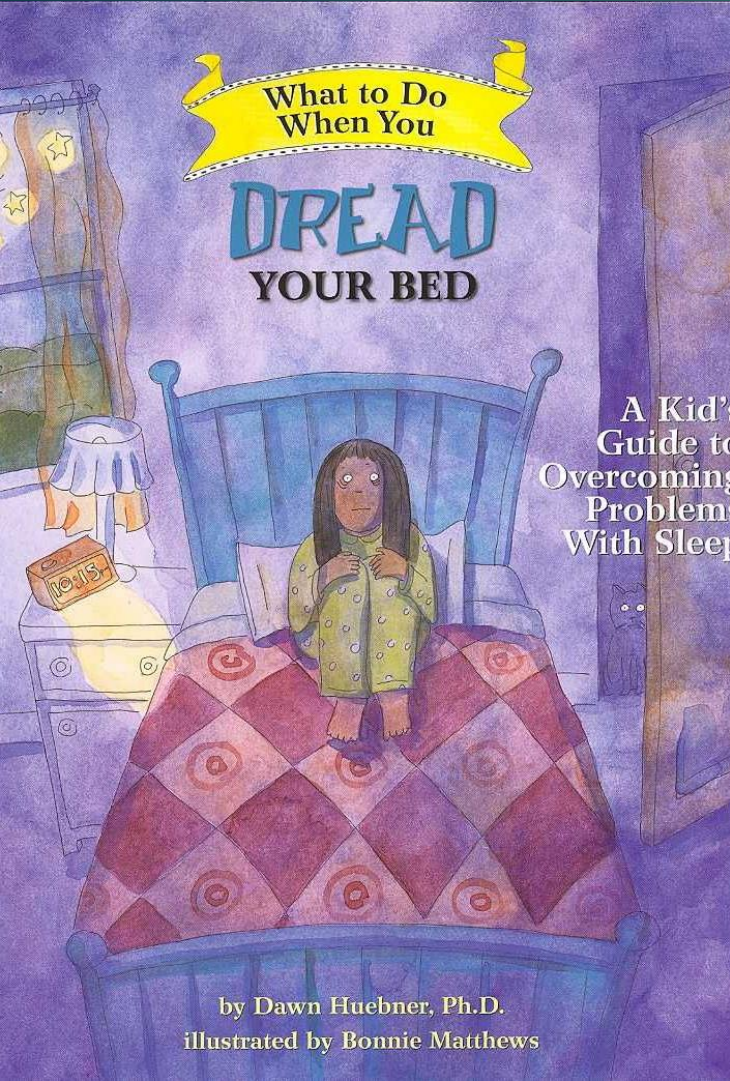
by E. Katia Moritz, Ph.D.

Illustrated by Rick Geary



A
Bugz
Me
Book



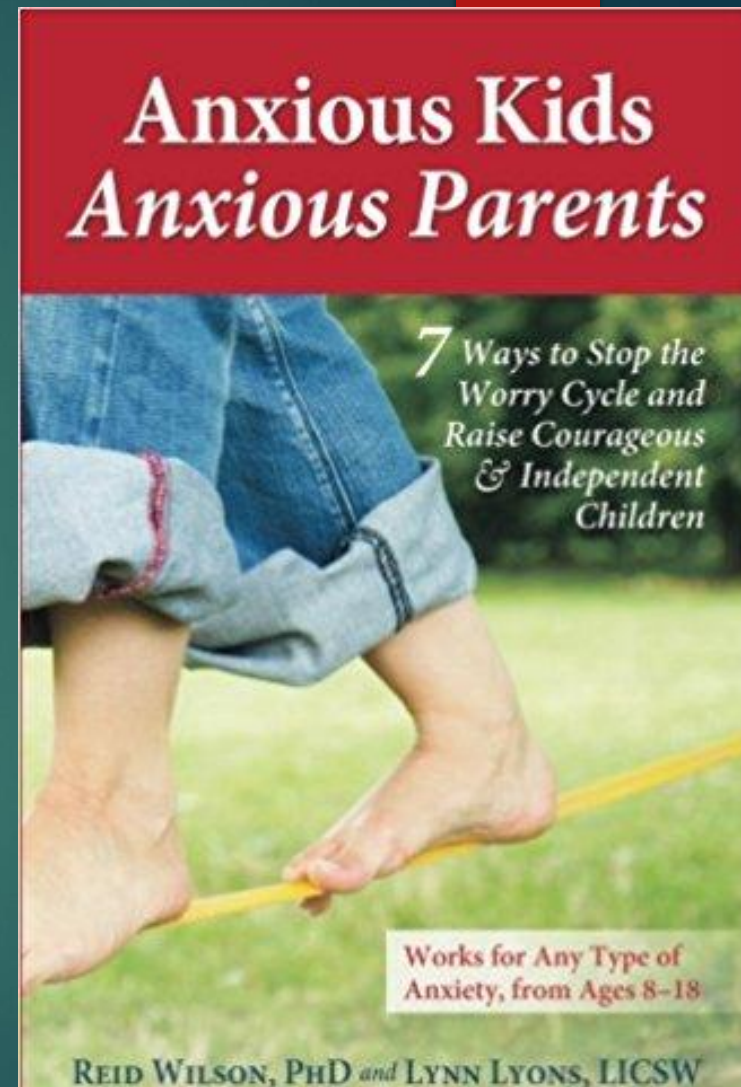


Books for Kids

- ▶ **What to do When Your Brain Gets Stuck: A Kid's Guide to Overcoming OCD by Dawn Huebner, PhD, 2007.**
- ▶ **What to do When You Worry Too Much: A Kid's Guide to Overcoming Anxiety by Dawn Huebner, PhD, 2006.**
- ▶ **What to do When Bad Habits Take Hold by Dawn Huebner**
- ▶ **What to do When You Dread Your Bed**

Books on anxiety

- ▶ **Your Anxious Child: How Parents and Teachers Can Relieve Anxiety in Children, by John Dacey and Lisa Fiore.**
- ▶ **Keys to Parenting Your Anxious Child, by Katharina Manassis.**
- ▶ **Freeing Your Child From Anxiety by Tamar Chansky**
- ▶ **Anxious kids, anxious parents by Reid Wilson**
- ▶ **Overcoming Selective Mutism: A Field Guide for Parents by Aimee Kotrba and Shari J. Saffer**



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- ▶ Kaitlin J. Hinchliffe and Marilyn A. Campbell. (2015) Tipping Points: Teachers' Reported Reasons for Referring Primary School Children for Excessive Anxiety. *Journal of Psychologists and Counsellors in Schools*, DOI: <http://dx.doi.org/10.1017/jgc.2015.24> (About DOI), 16 pages. Published online: 11 December 2015
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