Anxiety in Youth: What You Need to Know and How You can Help

PRESENTATION WILL BEGIN SOON

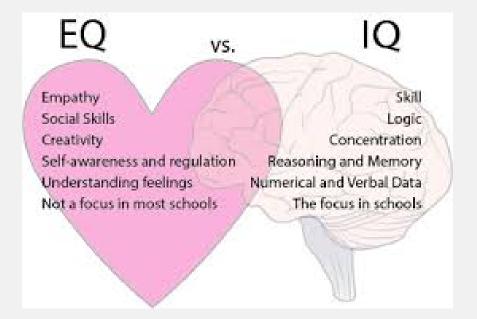




Anxiety in Youth: What You Need to Know and How You can Help Dr. Paula Yanes-Lukin **OLENTANGY PARENT PROGRAMS TEAM** (PPT)



WHY TALK ABOUT EMOTIONS?





ANXIETY IN YOUTH

- Prevalence: 31.9% of youth have an anxiety disorder (National Comorbidity Study, 2017)
- Highly comorbid: 55.3% have more than one (Kendall et al., 2010)



WHAT IS ANXIETY?

Feelings of*:

- Nervousness
- Fear
- Unease
- * Generally, in anticipation of a future event



WHAT IS ANXIETY?

Unpleasant thoughts:

- Worries, fears, obsessions
 - "What if _____?"
- Catastrophes
 - "lf___, then ___, then ____, then _____;"
- Images



WHAT IS ANXIETY?

Physiological experiences

- Stomachaches/headaches
- Nausea
- Rapid/difficult breathing
- Lightheadedness/dizziness
- Heart pounding
- Sweating
- Muscle tension





WHAT DOES ANXIETY LOOK LIKE?

- Fight
- Flight (AVOIDANCE)
- Freeze

Children With Anxiety May... Display changes in Appear more clingy Complain of Be restless and fidgety eating and sleeping than normal stomachaches habits 00 Express negative Have bouts of Get upset or Struggle to thoughts or worries unexplained crying angry more concentrate quickly verywell

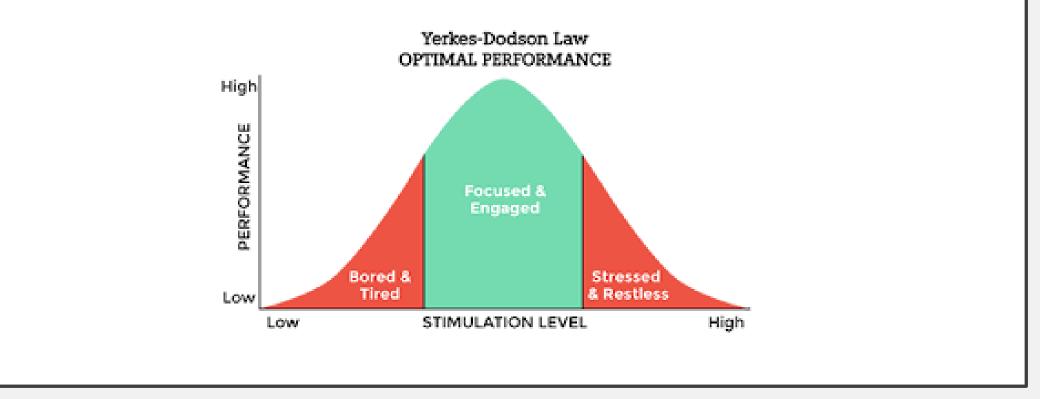


WHY DO WE EXPERIENCE ANXIETY?

Anxiety is **necessary** and often **adaptive**

- Alerts to threat
- Prepares for action
- Pushes one to act





WHY DO WE EXPERIENCE ANXIETY?

Etiology of Anxiety Disorders



Biological causes	Psychological causes	Social causes
 Heredity Neurotransmitter imbalance Illness Medications Nutritional factors 	 Personality traits Low self-esteem Cognitive dissonance Negative emotions Inter and/or intra-personal conflicts Developmental crises Perception of situational factors 	 Adverse Life Experiences Lack of social support Work stress Lack of social skills Changing values Conflict of societal norms Terrorism Natural calamities

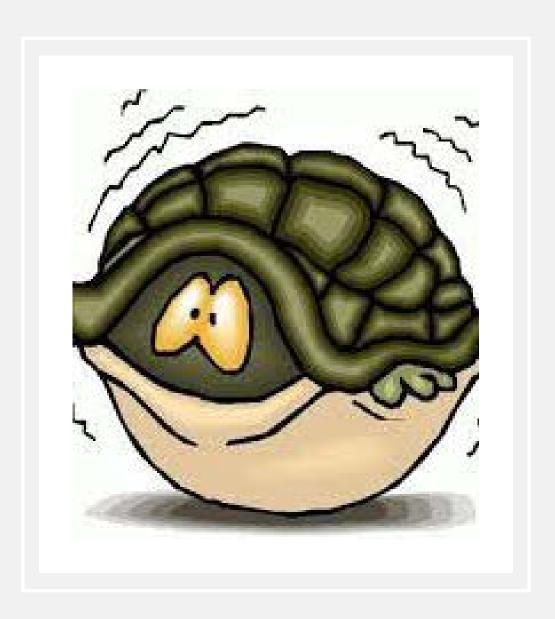








PARENTS: ADDITIONAL SOURCE OF INFORMATION REGARDING DANGER



WHEN SHOULD WE BE CONCERNED?

Anxiety — significant avoidance

- Not going to school or doing schoolwork
 - Missing
 - presentations/performances/etc.
- > Not talking to friends
 - Skipping social activities
- > Not going places with family

WHEN SHOULD WE BE CONCERNED?

Anxiety — impaired **functioning**

- Home: Frequently texting/calling parents, checking/asking for reassurance
- School: Trouble concentrating, taking longer to complete tasks, distracted by worries
- Social: Dismissing invitations, extreme shyness, existing friendships compromised, pre-rejection due to anxiety



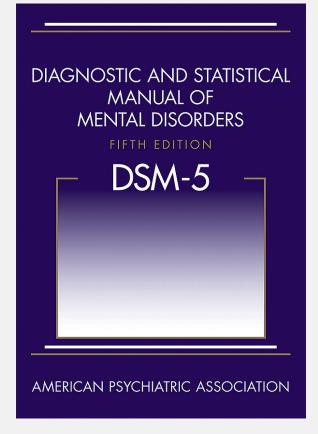
WHEN SHOULD WE BE CONCERNED?

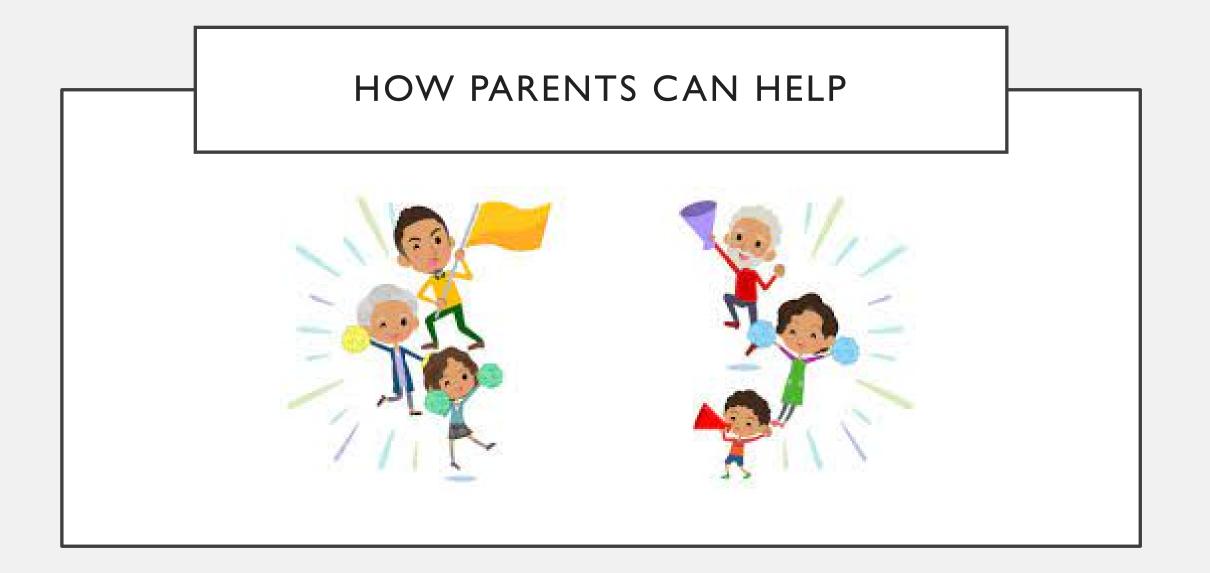
- Anxiety significant distress
 - Consistently
 - Extended period of time



ANXIETY DISORDERS

- Separation Anxiety Disorder
- Social Anxiety Disorder
- Generalized Anxiety Disorder
- Specific Phobia
- Panic Disorder
- Agoraphobia
- Obsessive-Compulsive Disorder
- Posttraumatic Stress Disorder





PARENTING VALUES EXERCISE: VALUES FOR CHILD

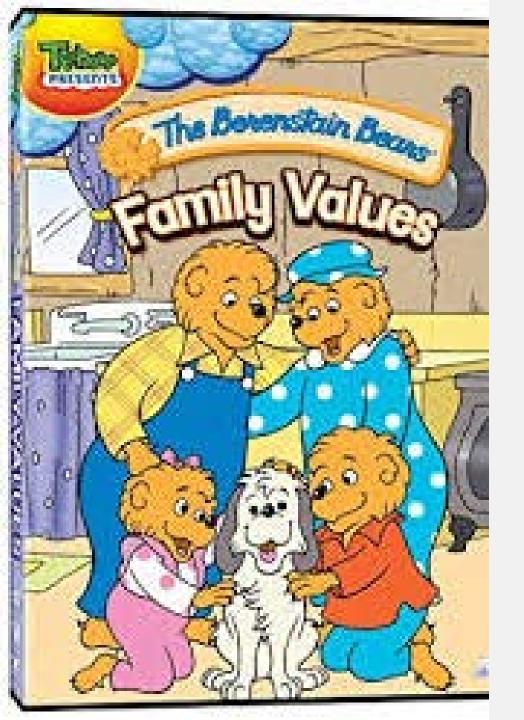
- Responsible
- Hard Working
- Helping Others
- Well-Mannered
- Independent
- Integrous
- Creative

- Empathic
- Persistent
- Tolerant
- Obedient
- Curious
- Religious
- Sense of Humor

PARENTING VALUES EXERCISE: VALUES AS PARENT

- Encouraging
- Teaching
- Leading
- Accepting
- Good Listening

- Disciplining
- Connecting with Child
- Providing Opportunities
- Providing Structure
- Providing Safety



PARENTING BY VALUES

Consider:

- How might you respond differently to your child?
- What might you highlight in their behavior?
- Might you do different activities with your kids?

HOW TO HELP: PARENTS' EXPERIENCE

Parent out of Love vs. Fear

- Parenting is rife with uncertainties and anxieties
 - Paralleling children's experiences: LOTS OF FIRSTS!!
 - Encourage your child to do the tough thing



TIPS:

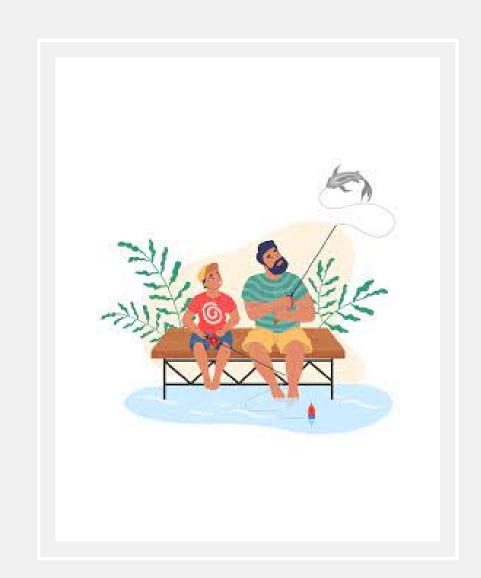
- I. Be mindful of your own values/goals for parenting
- 2. Check in to see if your actions are purposeful/intentional and aligned with those values/goals
- 3. Be mindful of what you are modeling

HOW TO HELP: CHILD'S EXPERIENCE

Do you have a relationship built on **respect**?

Consider these elements:

- I. Children need to feel seen and accepted
- 2. Children need to **trust** and feel trusted



HOW TO HELP: CHILD'S EXPERIENCE

First Step:

Create a space where children feel seen and accepted

- Children are unlikely to seek parent support if they don't feel tolerated or seen for their own experience
- Example: Parent-Child Interaction Therapy
 - Child-Directed Interaction FIRST, then Parent-Directed Interaction



TIPS:

- I. Listening/reflecting (should dominate over speaking)
- 2. Get to know your child
 - Talk about their interests, show genuine engagement, compliment

HOW TO HELP: CHILD'S EXPERIENCE

Second Step: Build trust by being honest As much as possible!!

As parents we lie and pretend all the time

• E.g., "You're not going to fail the test," "Stop worrying, you won't get hurt," "You're going to do great," "They're not going to judge you."

But... YOU DON'T REALLY KNOW!!

TIPS:

- I. Avoid reassurance
- 2. Be honest about possibility of failure/bad thing



HOW TO HELP: THE "MAGIC" FORMULA

Validation + Encouragement = Parental Support



Eli Lebowitz, SPACE Program

HOW TO HELP: VALIDATION

When they do come to you for support...

Use VALIDATION!!

(LOTS AND LOTS AND LOTS OF VALIDATION)

 Sincere understanding (not agreement) with emotional experience



Examples:

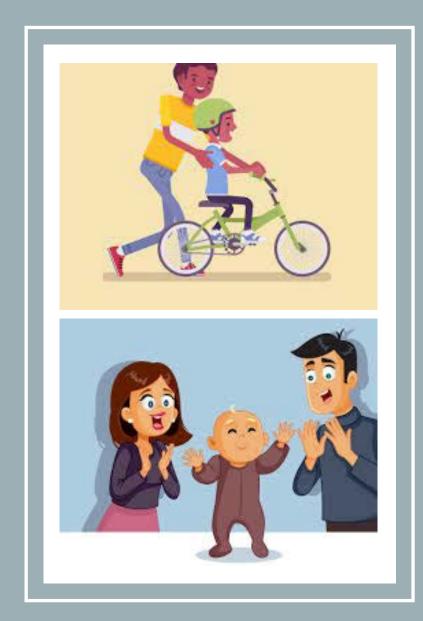
- "Wow"
- "That must have been hard, I'm so sorry"
- "That DOES sound embarrassing"
- "Sounds like you're feeling hurt, is that right?"
- "I hear you, I would be angry too"

Avoid:

- "Calm down"
- "Don't worry"
- "It's not that bad"
- "You're being lazy"
- Jumping to problem solving

HOW TO HELP: ENCOURAGEMENT

- Encourage approach/tolerance
 - Set (appropriate) expectations to face hard tasks or emotions
 - Or at least try!
 - Give space to allow child to problem-solve
 - Confirm belief that child can manage distress or failure



HOW TO HELP: THE "AND" STATEMENT

Validation COMBINED with encouragement:

- "I know this makes you very nervous and any person in your situation would feel scared, *and* I've seen you take on some pretty big challenges and I know you can handle whatever happens."
- "I can imagine you might feel ashamed and sad, I hear you, that's really hard. I want you to know that I see how hard it is and that I believe in you and know you will get through this."



HOW TO HELP: RECAP

- Bottom line: Anxiety is important to feel!
 - Stress is normal and important to tolerate
 - Anxiety turns into problems when youth do not learn how to face and sit with negative feelings
 - Parent out of love and values
 - A strong relationship with your child, which gives space for their distress, will help them learn how to effectively manage negative feelings like anxiety
 - Validate and encourage problem-solving and resilience (keep trying!)



WHAT GETS IN THE WAY OF HELPING?

- Difficulty managing child's distress
 - Seeing your child upset is hard!
 - They need to learn how to swim before being thrown in the ocean
- Going to extremes
 - Pushing too much vs. overprotecting
- Too high expectations
 - Perfect is the enemy of good



TYPICAL BEHAVIOR VS. ANXIETY PROBLEM

- Most common parent concerns:
 - Worry if punishing anxiety
 - How much leeway to give since child is in distress and trying to cope the best they can?
- Doesn't really matter → similar formula:
 - Validate (may require more validation than usual) and set appropriate limits



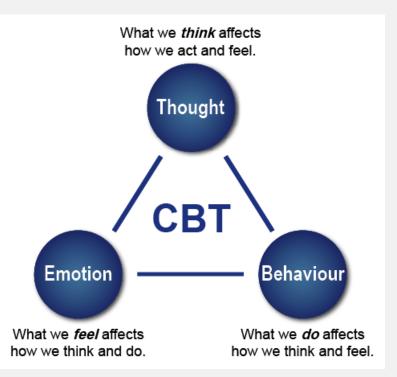
WHEN NEED TO SEE A PROFESSIONAL

- You feel like nothing is working/too difficult to manage
- Symptoms are really getting in the way/not functioning in a certain area
- Significant distress on a consistent basis



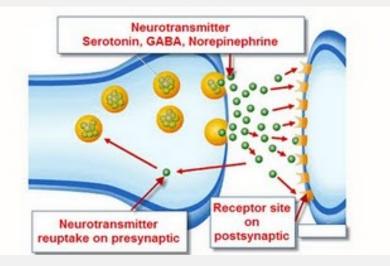
TREATMENT FOR ANXIETY DISORDERS IN YOUTH

- Cognitive-Behavioral Therapy
 - Target avoidance by engaging child in gradual exposures
 - Target cognitions (in older kids)
- Role of parents in CBT
 - Support child
 - Increase understanding of anxiety
 - Strength of relationship with child



TREATMENT FOR ANXIETY DISORDERS IN YOUTH

- Selective Serotonin Reuptake Inhibitor (SSRI) medications
 - Prescribed by:
 - Psychiatrist
 - Psychiatric Nurse Practitioner
 - Occasionally Pediatricians
- Usually taken for a minimum of 6 months
 - Take a long time to work, need time to build up to and stay on an effective dose (~12-16 weeks)



OTHER TREATMENT OPTIONS

- Other types of therapy
 - Dialectical Behavior Therapy
 - Acceptance and Commitment Therapy
 - Interpersonal Psychotherapy



- Other types of medication
 - Benzodiazepines (clonazepam, lorazepam)
 - Tricyclic antidepressants (clomipramine)
 - SNRIs (Effexor)



THANK YOU!!

Contact Information:

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Please complete our PPT survey by opening the link through the QR code below:

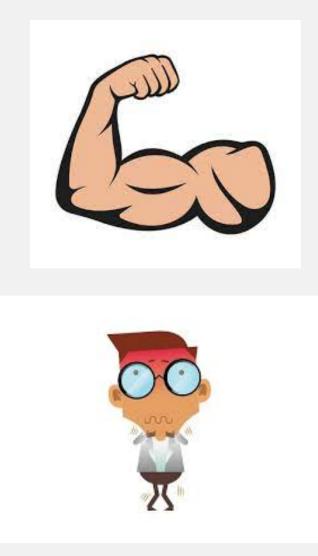




OLENTANGY SCHOOLSSM



THANK YOU



EFFECTS OF COVID



Overall, greater anxiety and depression in youth during COVID-19

Vulnerable populations are at greater risk (e.g., previous diagnoses/worst symptoms prior to pandemic, greater difficulties with online learning, greater family conflict, female, minorities; Asmundson et al., 2020; Magson et al., 2021; Veldhuis et al., 2021)

Greater avoidance=atrophied bravery muscles

• Social anxiety in particular may be impacted