



## Anxiety in young people (with additional needs)

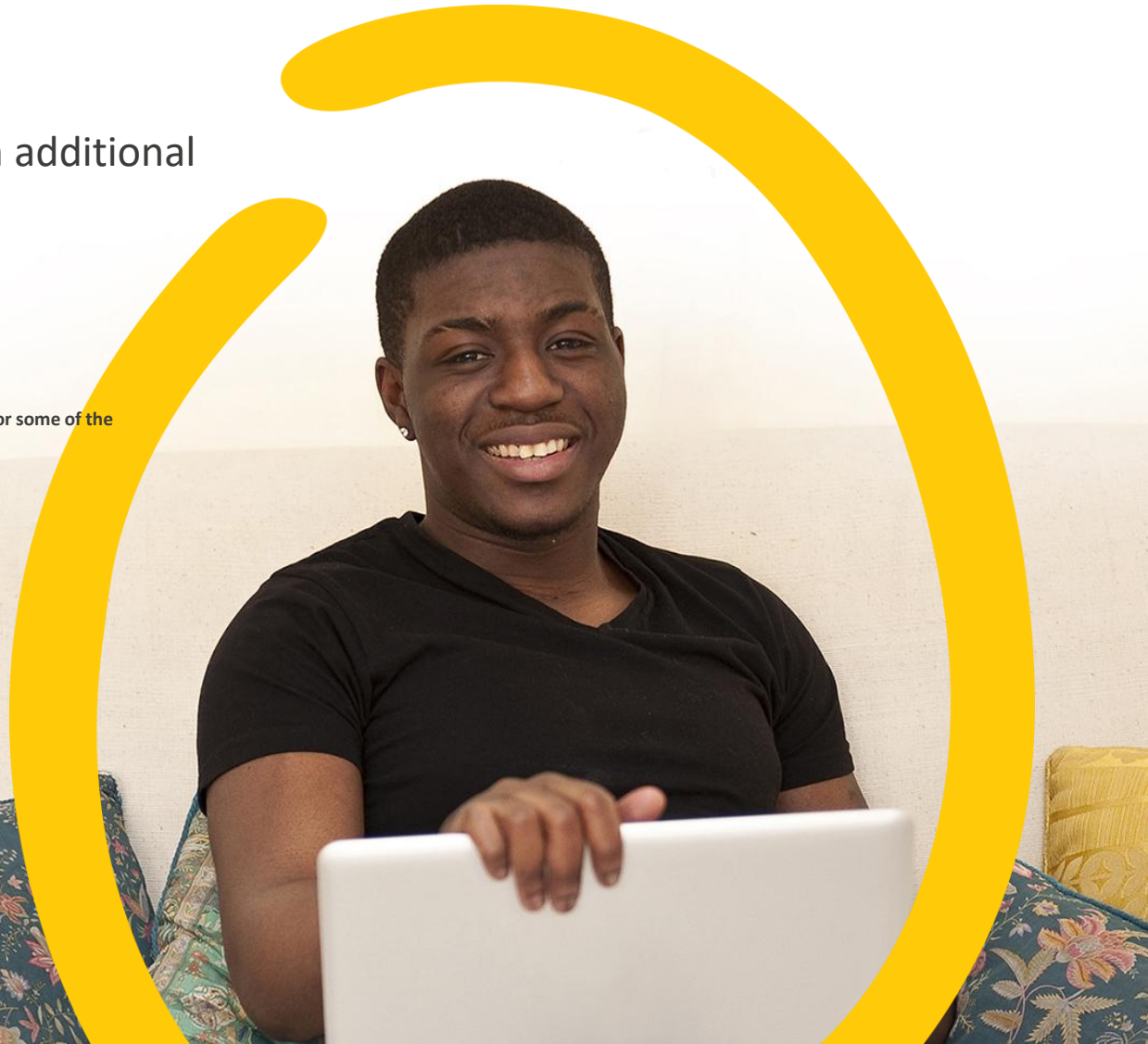
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(With thanks to Drs Anna Moriarty, Alex Oxley and Lisa Dunnigan for some of the slides)

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*Improving lives*



## What we will cover today

- What is anxiety and why do we have it
- Anxiety and children/young people
- Ways of understanding anxiety
- Anxiety and ASD/ADHD
- Management / Intervention
- CAMHS referrals
- Questions and discussion

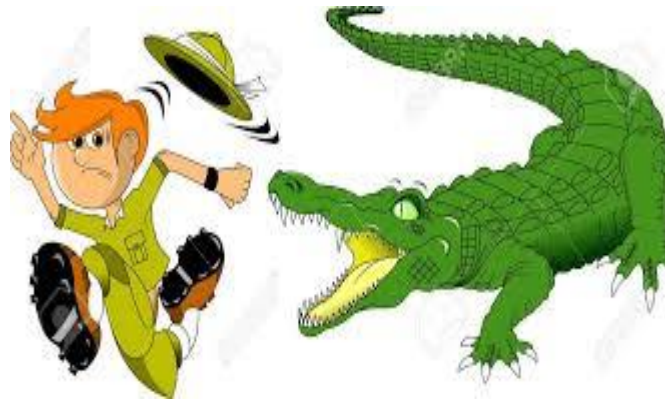
## What is anxiety?

Anxiety refers to feeling nervous, worried and afraid in situations which are demanding



## What is anxiety?

It is an evolutionary adapted mechanism to protect us in dangerous situations and triggers the body into fight/flight response



### What is anxiety?

Anxiety becomes problematic when we start reacting to stimuli that are not actually dangerous



Particularly when this impacts on our daily lives....



## Anxiety in children

Worries and fears are a natural and adaptive part of childhood development.

### Toddlers

- Fears of imaginary creatures
- Fears of darkness
- Normative separation anxiety

### • School-age Children

- Worries about injury and natural events (e.g. storms, death of a loved one)
- Worries about a new class, school test, friendships

ALL AGES – anxiety in response to uncertainty, distress or significant change at home e.g. parental separation, moving house

## Anxiety Disorders

Anxiety disorders:

- most common childhood-onset psychiatric disorders (9% - 32% prevalence rates)
- diagnosed when concerns are persistent and excessive, causing significant distress or impairment in day-to-day life

Anxiety disorders in children are associated with

- educational underachievement and
- co-morbid mental health problems
- functional impairments that can extend into adulthood

## Different types of anxiety

### Anxiety disorders

Generalised anxiety disorder

Social anxiety disorder

Panic disorder

Agoraphobia

Specific phobias

Separation anxiety

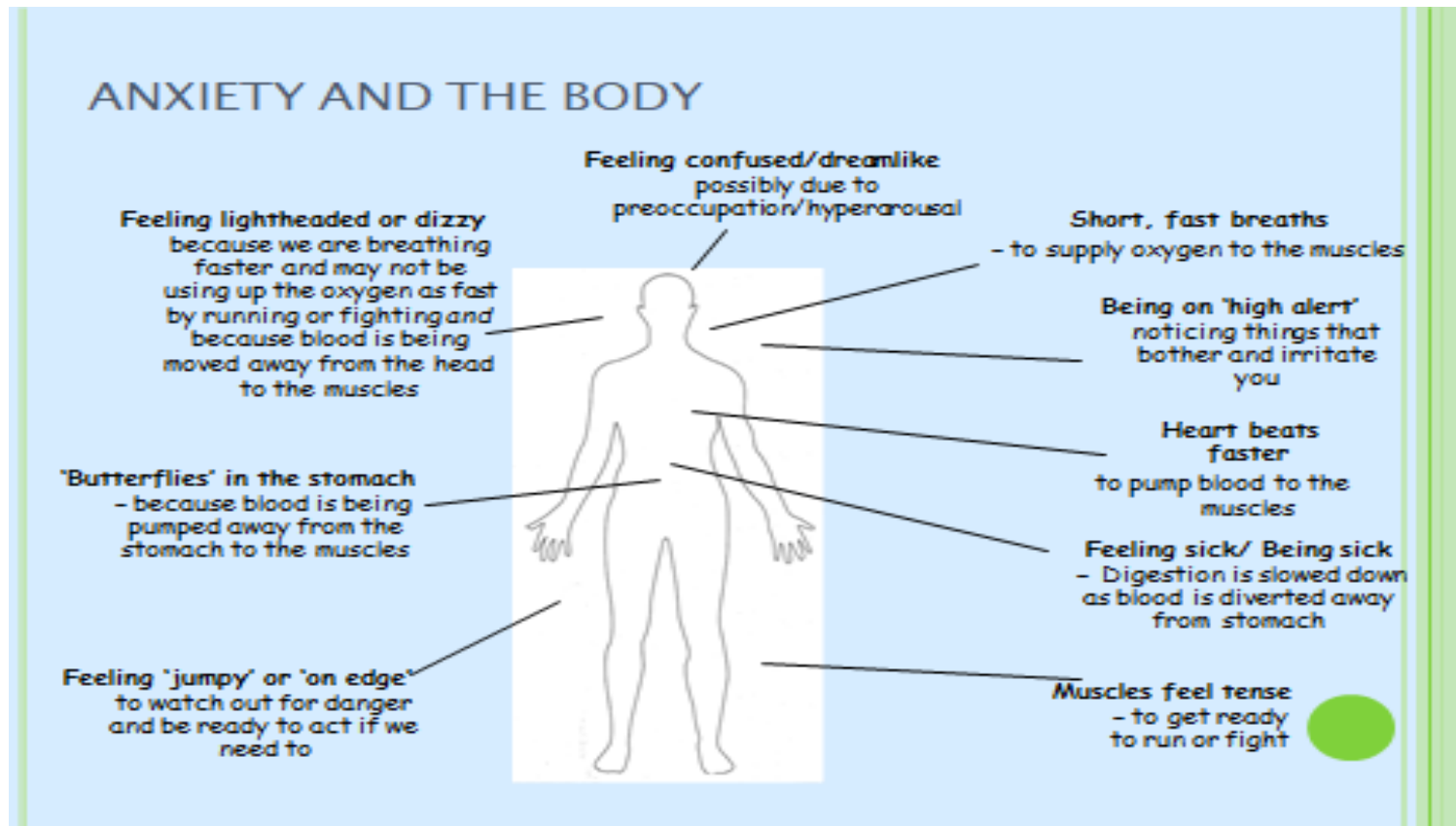
Selective mutism

### Obsessive-compulsive and related disorders

obsessive-compulsive disorder, post-traumatic stress disorder and acute stress disorder



### Physical symptoms of anxiety



## Impact of significant anxiety

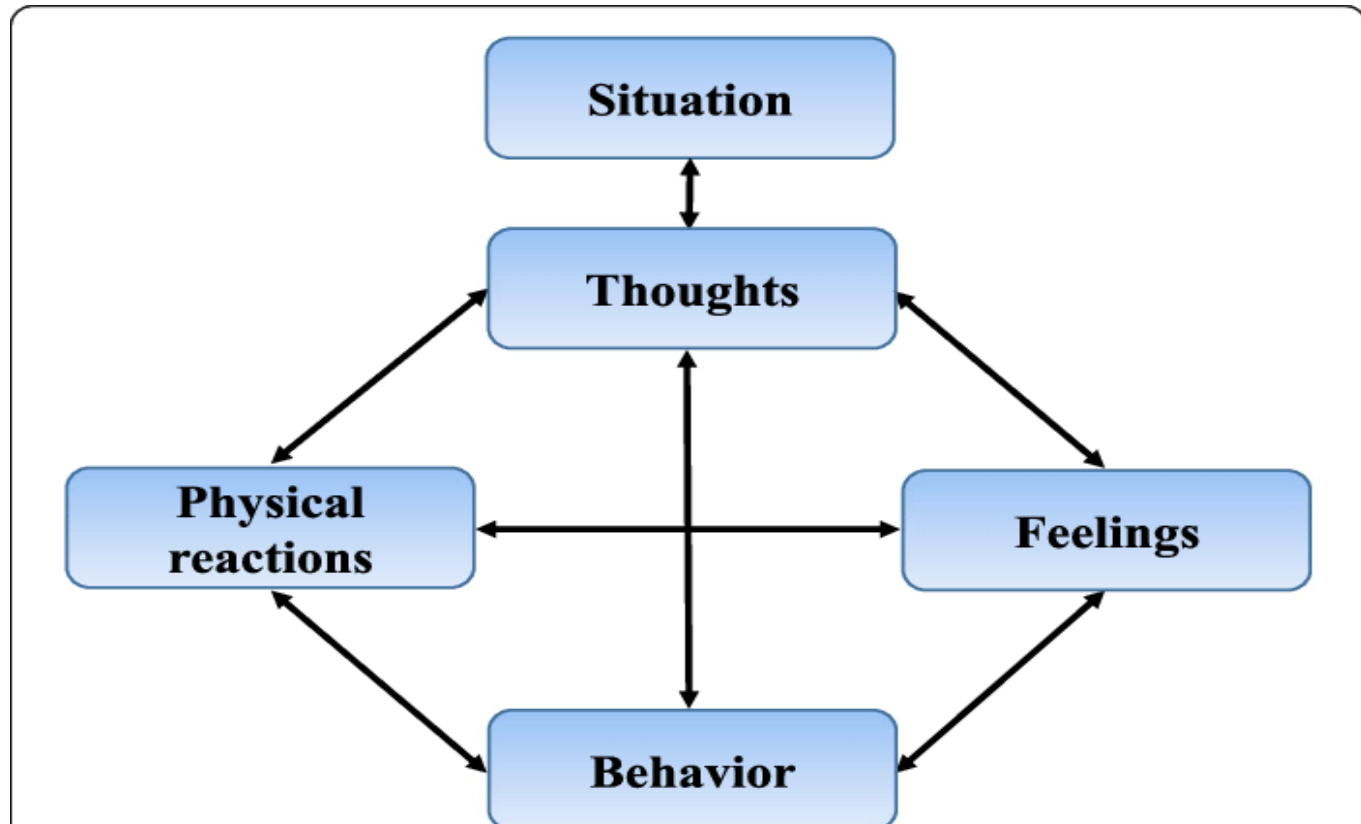
- Feeling tense / fidgety
- Difficulties concentrating and processing information
- Poor sleep
- Changes in eating
- Rumination – negative thoughts
- Anger / irritability / oppositional behaviour
- Physical symptoms
- Clinging to care-giver
- Avoidance/disengagement/withdrawal
- School refusal
- Relationship difficulties
- Social isolation

## Living with anxiety

YoungMinds – Living with anxiety clip

<https://www.youtube.com/watch?v=mprhqMRz5PU>

## Cognitive Behavioural model of anxiety



## Anxiety – how it affects us

**Physical:** heart racing, sweating, muscle weakness, hyperarousal, hyperactivity, pains (stomach), nausea, inability to concentrate, sleep problems,

**Thoughts:** 'all-or-nothing', assume the worst, dwell on the worrying thought

**Feelings:** fear, irritability (anger, frustration)

**Behaviours:** physical/verbal aggression, repetitive behaviours, withdrawal & avoidance, swearing, biting, destroying things, humming, rocking, shouting

Coping strategies:

- Avoidance of anxiety provoking situations – reduces opportunities for learning and increases anxiety
- Need for sameness/rituals and routine – repetitive stereotyped activities e.g. repetitive questioning

## Anxious Thinking Styles (taken from 'Think Good, Feel Good' by Paul Stallard)

**NEGATIVE GLASSES** – Only let you see the negative things

**POSITIVE DOESN'T COUNT** – Rubbishing the good things that happen

**BLOWING THINGS UP** – Negative things become bigger than they really are

**MIND READERS and FORTUNE TELLERS** – Expect things to go wrong

Look at these thoughts and see if you can find the thinking error.

*'People are always unkind to me.'*

*Luke went on a school trip to a great theme park. When asked if he had a good day Luke said, 'No, I didn't like my sandwiches.'*

*'My friends will think I look really stupid in these trainers.'*

*Amy played her flute brilliantly in the school concert. When her teacher said how well she had done Amy thought, 'That was just lucky, I don't usually play that well.'*

## Vicious cycle of anxiety



## Safety behaviours

Safety behaviours are used to protect against anxiety states in situations where anxiety cannot be prevented

### **They reinforce and maintain anxiety**

- Examples:
  - Asking for reassurance
  - Being over-prepared
  - Rituals

Anxious responses from others (parents) feed anxiety



## Anxiety in ASD

- Anxiety is high in people with ASD due to their struggle to understand the 'neuro typical' world
- Social difficulties (leading to decreased self-esteem), communication difficulties and problems finding flexible responses to may also lead to anxiety.
- Prevalence rates 40% of CYP with ASD (van Steensel et al., 2011)
- Anxiety leads to frustration, leading to anger
- Many people on the autism spectrum may have difficulty describing the symptoms they experience.

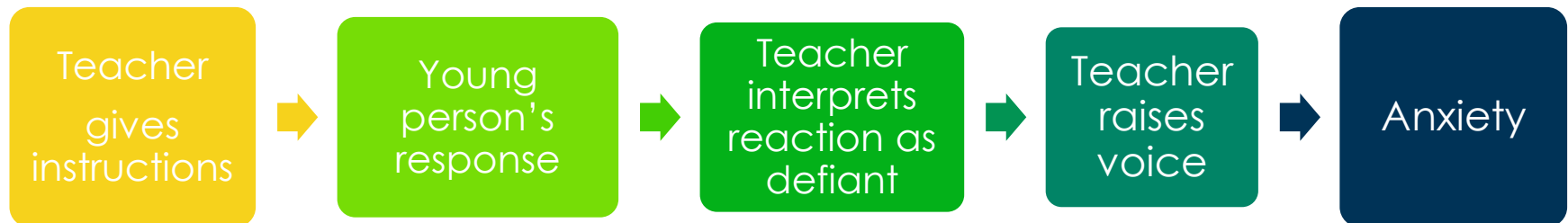
## Why do children with ASD struggle to regulate emotions?

- Difficulties understanding and predicting other people's thoughts and behaviours.
- Difficulties reading others' body language
- Problems with social learning
- Difficulties with planning; problem solving; strategy formation
- Difficulties in seeing an overview of a situation
- More likely to experience negative situations

## Triggers for anxiety in ASD

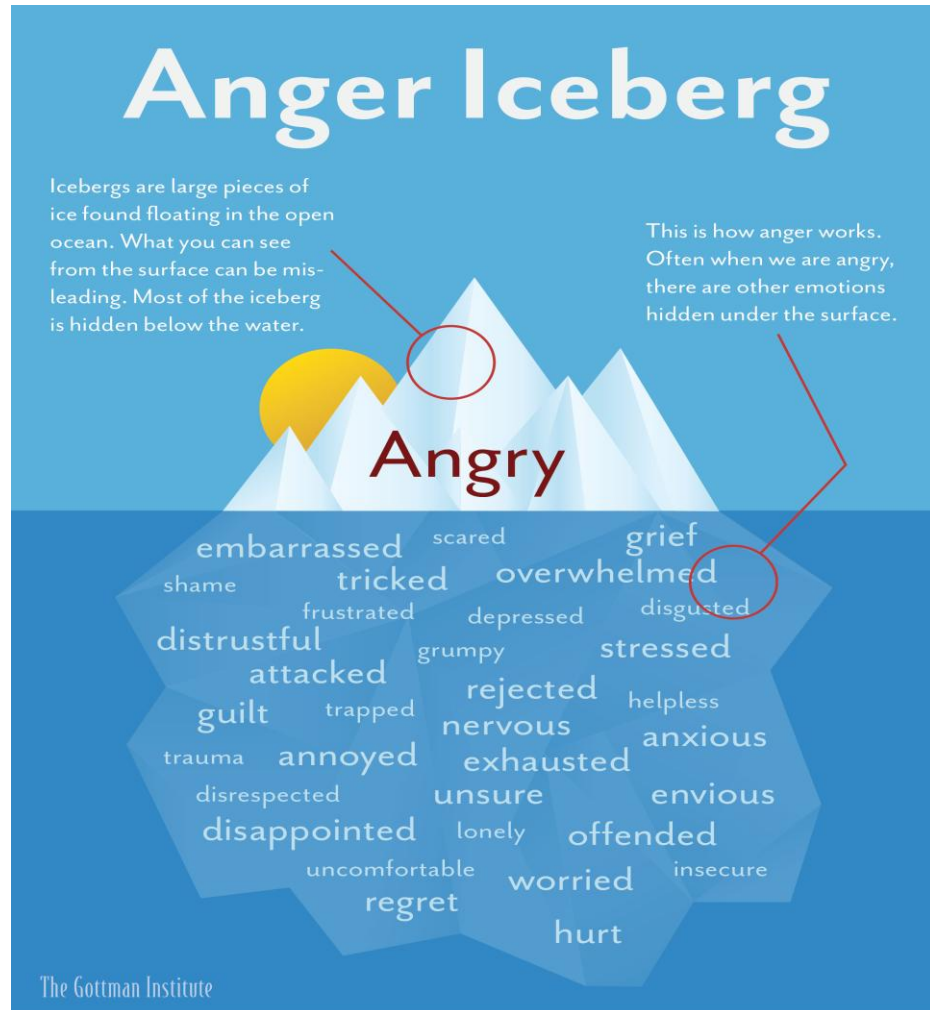
- Change in routine
- Preference for sameness
- Environment / Sensory experience
- Unstructured time
- Social situations
- Situations which require processing of feelings
- Peer rejection
- Demands from teacher/care-giver
- Difficulties asking for help
- Combination of these factors

## Communication difficulties & anxiety









How often do you hear....

‘Angry, aggressive,  
violent child’???



## Helping anxiety in children with ASD

- Make sure you prepare for any change in routine
- Think about how you can adapt the environment
- Use visual supports and timetables
- Try social stories or comic strip conversations to develop social understanding

lunch	
dinner	
pyjamas	
story time	
bath time	
Bed time	

## Management of anxiety in ASD and ADHD

- Shared **understanding** of anxiety triggers – preventing and intervening early (school, care-giver & young person)
- Addressing other factors e.g. bullying, parental mental health, social skills training
- Psycho-education
  - understanding anxiety and role of safety behaviours (parent & child)
  - Scaling emotions, identifying real dangers vs. false alarms
- Understanding ADHD/ASD diagnosis (accessing support services)
- Try not to take things personally when your child comes home from school is rude or offensive. S/he may be letting off steam after a stressful day. A child with ADHD/ASD may need quiet time before you start asking about school.
- Evidence-based interventions for anxiety

*For overview Creswell C, Waite P, Cooper PJ (2014). Assessment and management of anxiety disorders in children and adolescents. Archives of Disease in Childhood: 10.1136/archdischild-2013-303768*

### 'Incredible 5 point scale'

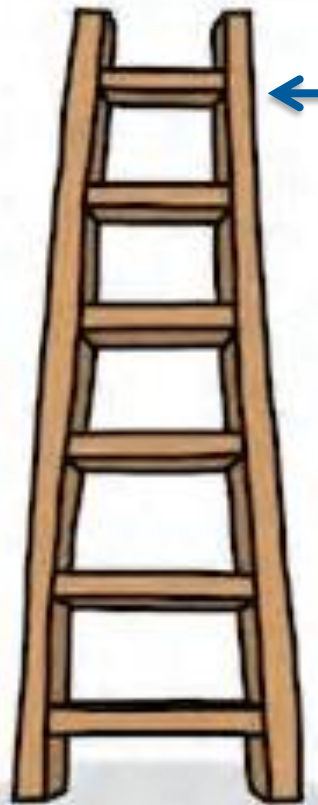
- If your child is verbal it may provide them with phrases to appropriately communicate their thoughts and feelings.
- This can also help to remind your child of their strategies used to calm down when they are feeling anxious.





## Tackling avoidance

- Help your young person select what they're going to try and how



Going to a party



Going to a sleep over



Having a friend around

### Hierarchy of fears

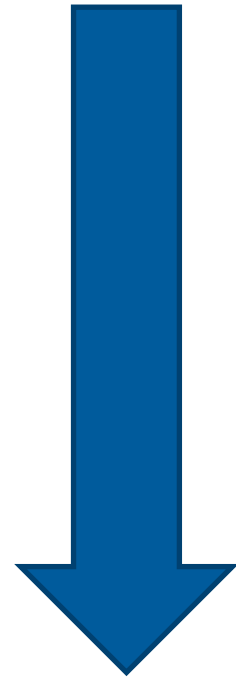
Pick an activity or thing that you are scared of and break it down in to activities ranging from least scary to most scary. Then rate each one on a scale from 0% to 100% anxiety. For example "going out" may start with "standing outside your front door for 5 minutes" may be 10%. Then may go up to "being out all day with different people" may be 100%.

Activity	Anxiety rating
1. _____	_____ 100%
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____ 0%

## Breaking down goals into baby steps

Goal: go into school and stay in lessons

- Step 1: Go to the school gate with Mum/Dad
- Step 2: Go into the reception for 5 minutes
  - Step 3: Go in for part of break / lunch
- Step 4: Go into *easiest* lesson with a time out card to leave if needed
  - Step 5: Go into *easiest* lesson and stay for full lesson
  - Step 6: Go from *easiest* lesson into start of next lesson
- Step 7: Go into more difficult lesson with a time out card
  - Step 8: Go into *easier* day and staying in
- Step 9: Go into a more difficult day and stay in
  - Step 10: Go into school and stay in lessons



**MISSION:  
ACCOMPLISHED**

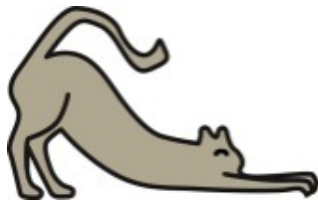
It may be hard for your child to engage with any strategies you put in place until they start to relax. Why not try the following:-

**Breathing exercises-** Ask your child to put their hand on their tummy, take a deep breath in and then breathe out slowly like they are blowing the biggest bubble/ bubble gum ever... repeat as many times as they need



**Muscle relaxation-** Ask your child to squeeze their hands tightly into a fist like they are squeezing lemons, stand on their tiptoes and reach up to touch the ceiling, stretch like a cat and curl up like a ball as tight as they can.

### Children's yoga/ meditation



**Be active -** bounce on a trampoline, run, jump like a bunny, hop like a frog


**Sensory based activities -** play with play dough, use a shaker (can be a toilet roll tube filled with rice and paper at the ends) or tight hugs



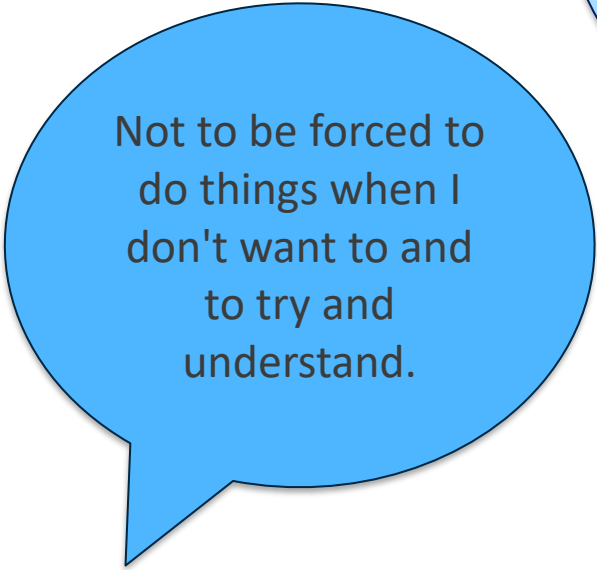
## Responding to your Child's Anxiety

- Support child in staying calm, e.g. doing relaxation exercises/mindfulness together
- Lead by example - Show them how to cope well with anxiety in how you do it
- Challenge your own worries about your child and how they will manage
- Manage your own anxiety and worries
- Seek support

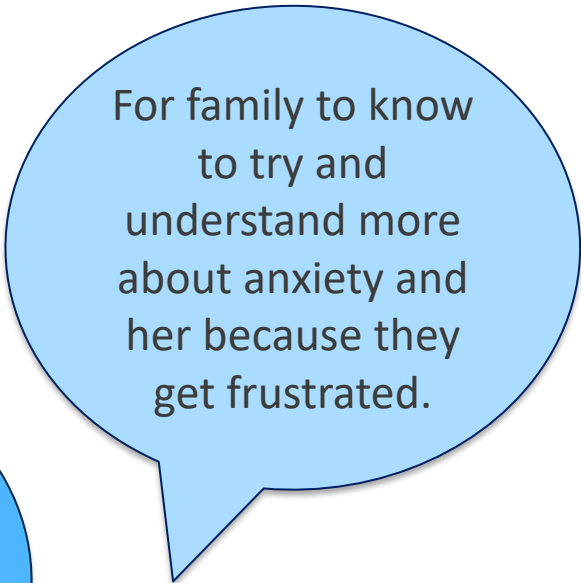
## Young people's thoughts on how parents can help



For parents to try  
and stay calm. (in  
stressful  
situations)



Not to be forced to  
do things when I  
don't want to and  
to try and  
understand.



For family to know  
to try and  
understand more  
about anxiety and  
her because they  
get frustrated.

## What you communicate to your child about anxiety

- Children will often look to adults for confirmation of their worries
- Show them that you are calm and confident
- Demonstrate that you believe it is nothing more dangerous than anxiety
- Communicate that you know that they are safe and that they will be fine
- Help them chill out and think it through



## Remember to look after yourself

- **Take care of yourself:** Anxiety in one child can cause stress or anxiety in other family members. Try to stay healthy and positive yourself and don't ignore your own needs. Stress can affect your own mood/emotions, so it will be important to make time for things you enjoy and look after yourself too.
- **Support:** It can be overwhelming being a parent of an anxious child/teenager with ADHD or autism. If you feel comfortable, talk to friends, join a support group, or perhaps see your GP about possible help of your own. It's important to talk about how your child's difficulties are affecting you, rather than bottling up your emotions or you may become depressed too.

## Remember to look after yourself (2)

- **Managing difficult feelings:** Relaxation, self-nurturing or Mindfulness
- **Avoid blame:** Try not to blame yourself for your child's anxiety as it is unhelpful and can make things more stressful. You may find it reassuring to remember that in most cases the cause of difficulties are linked to a number of factors, so it's unlikely any one person is "responsible".
- **Set achievable goals:** Motivation & energy levels decrease when emotional difficulties are present. Set small but achievable goals during low periods to boost a sense of accomplishment and act as encouragement



## Recommended interventions - Psychosocial interventions

- Interventions to expand the child or young person's communication, interactive play and social routines.
- Interventions to increase parent/carers', teachers' or peers' understanding of, sensitivity and responsiveness to, the child or young person's patterns of communication and interaction

## Self-help resources

- Moodjuice self-help packs (e.g. for anxiety, panic, sleep problems) available on the internet
- 'Overcoming Your Child's Fears and Worries – A self-help guide using cognitive-behavioural techniques' – Cathy Creswell & Lucy Willetts
- YoungMinds website (young people's mental health)
- National Autistic Society (NAS) website
- <http://headscapebexley.co.uk> – Bexley CAMHS website with tips/advice etc.

## Evidence based intervention - Cognitive Behavioural Therapy

For children who have verbal & cognitive ability to engage

- Helping child to understand links between situation, thoughts, feelings and behaviours
- Reduce safety behaviours and avoidance
- Recognise anxious thinking and learn ways to challenge

## Adaptions to CBT

- emotion-recognition training
- more use of written, visual information and structured worksheets
- a more concrete and structured approach
- simplified activities, e.g., multiple-choice worksheets
- involving a parent/carer to support intervention/ home tasks
- maintaining attention by offering regular breaks
- use young person's special interests in therapy

## Referral to CAMHS....

### **Bexley Child & Adolescent Mental Health Service**

How to contact us:

- Main Reception Telephone number: 020 3260 5200
- Fax: 020 3260 5273
- Email: [oxl-tr.BexleyCAMHSReferrals@nhs.net](mailto:oxl-tr.BexleyCAMHSReferrals@nhs.net)

Bexley CAMHS provides specialist mental health assessment and treatment services for:

- Children and young people with significant, complex or enduring emotional or **mental health difficulties** (i.e. in addition to ADHD/ASD)
- From birth to 18 years
- Intervention for families/carers
- We provide high quality, evidence based interventions to children, young people which are adapted to individual needs

## Referral to CAMHS cont...

### **Who can refer to CAMHS?**

ANY professional working with the child/young person OR  
Self-referrals through Bexley CAMHS Headspace website

### **Who can be referred?**

- Children and young people from birth to 18 years who meet the clinical eligibility criteria and have a Bexley GP
- Young people who are close to their 18th birthday (aged 17 years 9 months and over) should be referred to adult mental health services in the interests of continuity of care

## In a crisis...

Bexley CAMHS 0203 260 5200

- Opening hours: Mon - Fri (9am-5pm) - Ask to speak to duty clinician

Weekends, evenings & bank holidays, emergency support is available from:

- Oxleas NHS Crisis Line – 0800 330 8590
- South London Partnership NHS CAMHS Crisis Line (5-9.30pm): 0203 228 5980
- Queen Elizabeth Hospital – 0208 836 6000
- Child Line – 0800 11111
- Samaritans – 08457 909090
- Call emergency services (999) or go to nearest A&E
- Call the police if necessary (999)

## Discussion – Learning from each other

- Talk in 3s about some of the key difficulties you are facing responding to your child's anxiety
- Come up with your 3 best tips that you find helpful when supporting your child





