

Anxiety in Preschool-Aged Children

Understanding Fear and Intro to Overcoming Worry

"Hate is the consequence of fear; we fear something before we hate it. A child who fears noises becomes a man who hates noise."

-Cyril Connolly



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Session Overview

1. Who Am I?
2. What is Anxiety?
3. Early Identification
4. Developmental Progression of Anxiety
5. Anxiety Management Strategies
6. Resources for Child Anxiety Locally
7. Questions



Who Am I?

0 Daniel Chorney, Ph.D.

- 0 Registered Clinical Psychologist
- 0 Owner/Psychologist @ [Dr. Daniel Chorney & Associates](#) 
- 0 Former IWK Anxiety Team Leader & Community Mental Health staff psychologist
- 0 Previous research in anxiety development and expression across the lifespan

0 Education:

- 0 B.A. Psychology – UBC 2004
- 0 M.A. Psychology – West Virginia University 2006
- 0 Ph.D. Psychology – West Virginia University 2009
- 0 Clinical Internship – Brown University 2009



What IS Anxiety?

- 0 “a feeling of worry, nervousness, or unease about something with an uncertain outcome” – Oxford English Dictionary

“Scared?”

– Aiden, Age 4, Personal Communication 2006



Anxiety Causes & Maintenance

0 Biological/genetic transmission

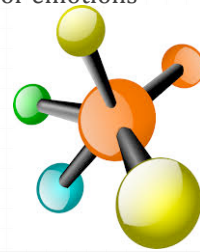
- 0 Not 1:1 match of disorder
- 0 Behavioral inhibition or negative affectivity

0 Parenting Factors & Learning History

- 0 Excessive attention to anxious behaviors
- 0 Child's loss of sense of control over environment or emotions
- 0 Modeling (their own anxious behaviors)

0 Traumatic life events

- 0 Actual negative life experiences/history



When is Anxiety A Problem?

0 Most children, adolescents and adults use anxiety to help them make good decisions - it is transient, normal, we all have it

- 0 e.g., looking both ways before you cross the street, putting on your seatbelt, setting your alarm so you aren't late, studying for tests, budgeting time to complete assignments, not eating food that smells rotten/poisonous

0 Anxiety becomes a problem when it makes the decisions for you, interferes with your life and/or causes significant distress.

- 0 Crosses into functional impairment
 - 0 Avoidance
 - 0 Enduring with extreme distress

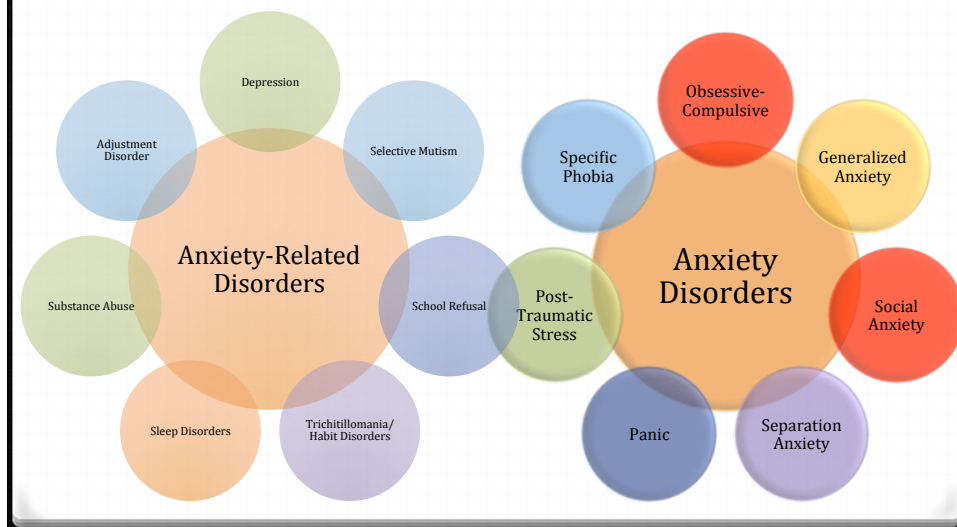


Examples of Early Impairment

0 Functional impairment in children

- 0 Not able to join extracurricular activities
- 0 Not able to separate for preschool/daycare (or at night)
- 0 No longer able to attend school (school refusal)
- 0 Not able to make new same-aged friendships
- 0 Washing hands until they crack/bleed
- 0 Not able to spend time outside (bugs, dogs, etc)
- 0 Not able to travel (plane, car, boat)
- 0 Selective mutism/not speaking (even doctors, police, etc)
- 0 Not able to receive injections, swallow pills, see dentist
- 0 Chronic complaints of physical pains/illness (stomach, head, etc)
- 0 Excessive rigidity and demands ("must be done this way!")

Assessment of Child Anxiety



Developmental Progression of Anxiety

0 Infants

- 0 Fear of separation and strangers
- 0 (6 months – 30 months, typically peaking 9-13 months)

0 Toddlers/Preschoolers

- 0 Fear of the dark, dogs, imaginary creatures

0 School Years

- 0 Injury/sickness/harm (to self or others), social-evaluative, natural disasters

- 0 Many are **developmentally normative, transient**, and do not derail a child's cognitive, social, or emotional development



Early Identification

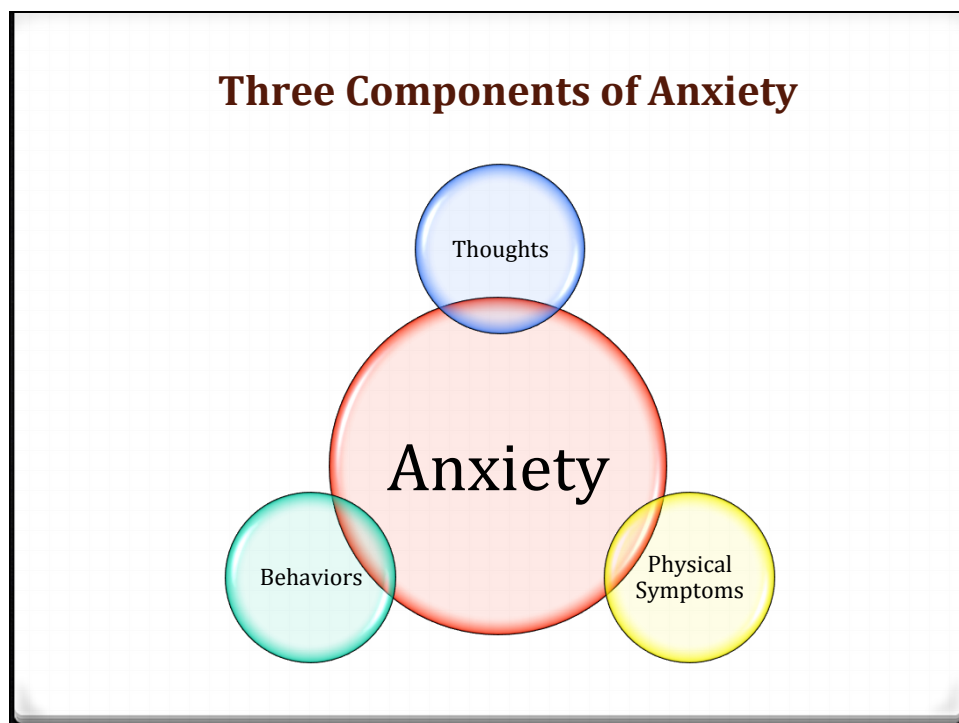
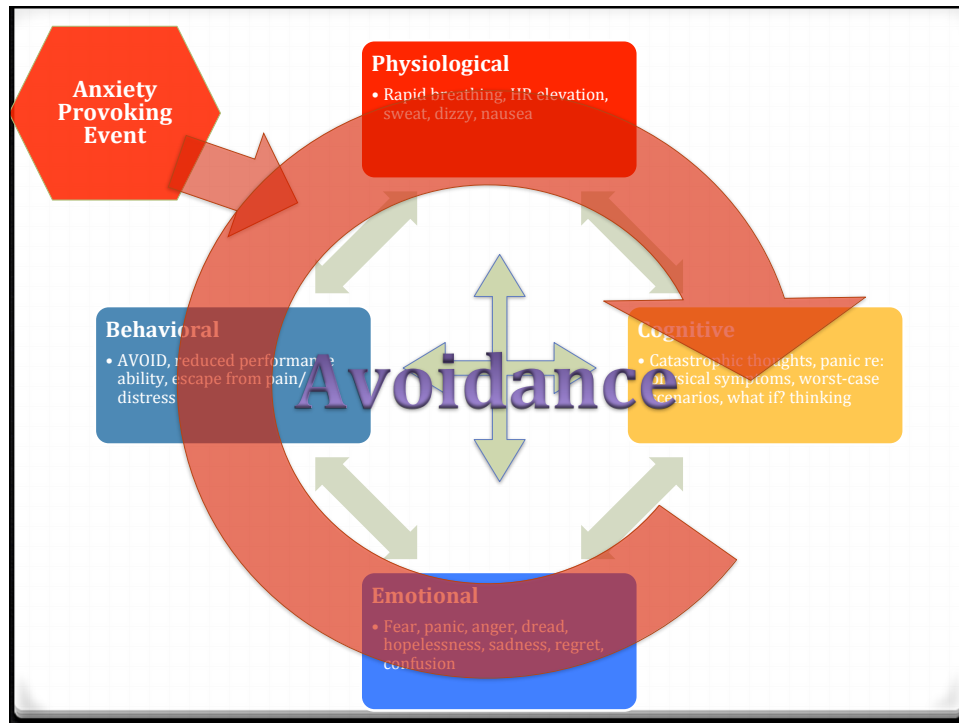
0 Behavioral inhibition

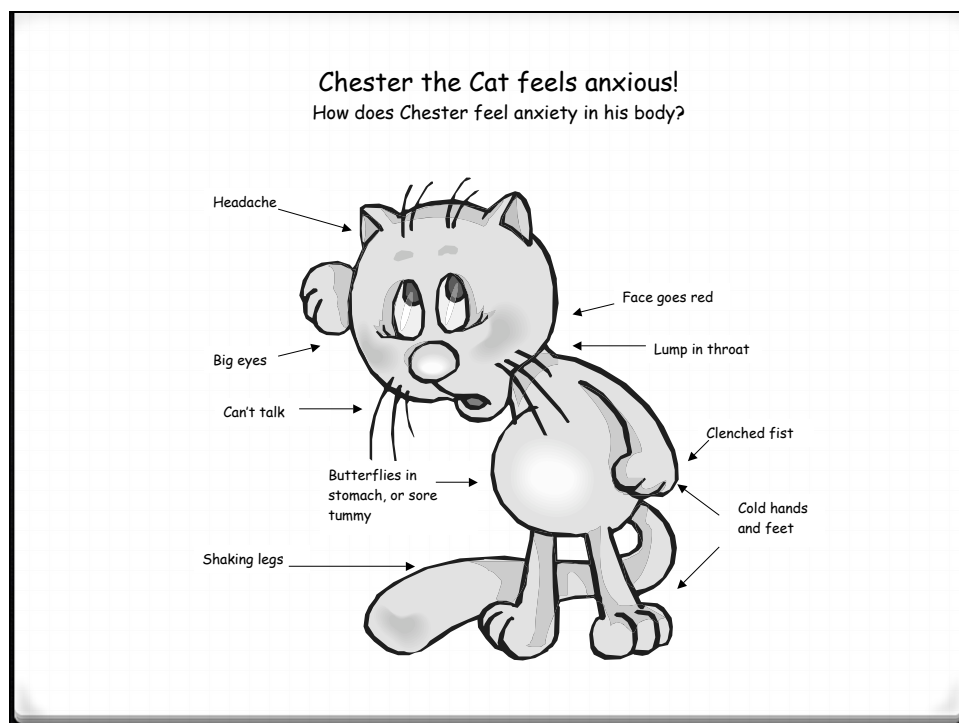
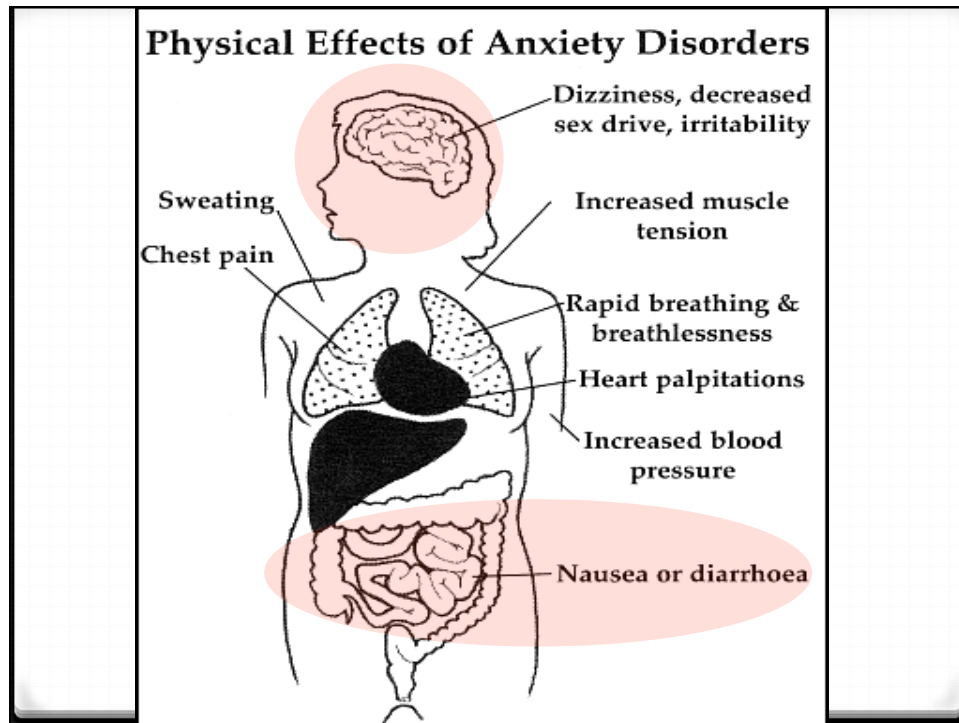
- 0 Consistent tendency to show marked behavioral restraint or fearfulness with unfamiliar people, situations, or events (Kagan, Rezman, Snidman 1988)
- 0 Shy vs. sociable
- 0 Cautious vs. bold
- 0 Sensitive vs. adaptable

0 Behaviors

- 0 Slow to approach unfamiliar or novel objects, places, things (reticent)
- 0 Lack of speech, laughter, eye contact, and hesitation to leave the caregiver to explore
- 0 Irritable and reactive to stressors – “temperamentally reactive”
- 0 Lower tolerance for stimulation, predictive at 4 months





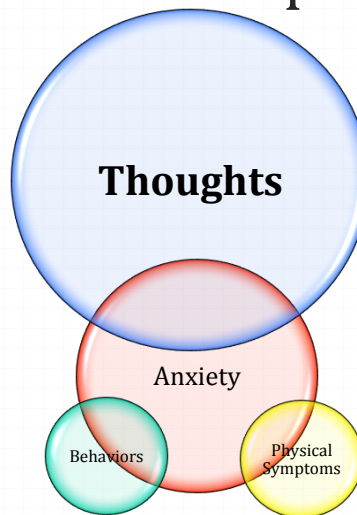


When I Worry I Feel...

When I worry too much, my worries are
at a 4. Sometimes a 4 makes
my stomach hurt.



Cognitive Component



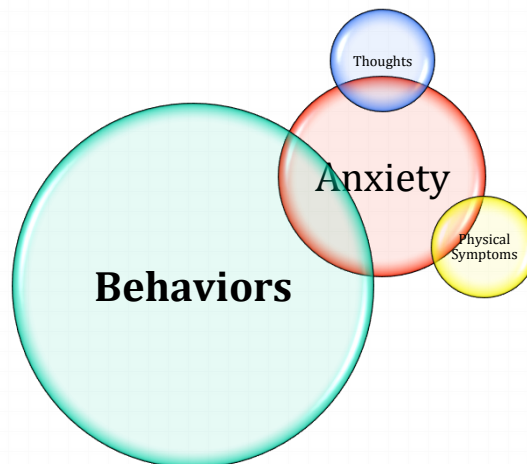
Anxious Thoughts in Early Childhood

- 0 **Tendency to overestimate**
 - 0 The **frequency** of negative experiences
 - 0 The **severity** of negative experiences
 - 0 "Bad things happen often, and are REALLY bad."
- 0 **Center around harm or threat.**
 - 0 "My parents/friends are late, they've been in a car accident." (Separation)
 - 0 "I can't do show and tell - I'll look stupid!" (Social)
 - 0 "What if I die from the bee sting/pill swallowing/dentist??" (Phobias)
- 0 **Future-oriented thoughts (these become more prevalent in later childhood)**
 - 0 "Mind-reading" and predicting negative outcome
 - 0 Cognitive distortions
 - 0 "If I worry enough today, maybe tomorrow will be calmer."
 - 0 thought-action-fusion
 - 0 "What if...?" thinking
 - 0 Catastrophizing/Overreacting



"It hasn't happened yet, but I know it will be bad!"

Behavioral Component



Anxious Behaviors

0 Anxious children and teens often behave differently:

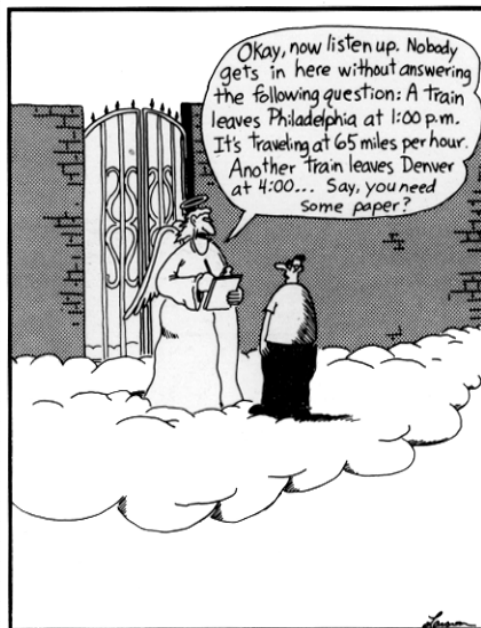
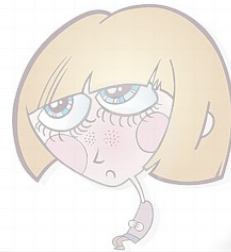
- 0 Pace, fidget, cry, cling, shake, sweat, numb
- 0 Teens can become defiant, irritable, oppositional

0 Reassurance Seeking Increases

- 0 "Am I going to die/get hurt/get sick?"
- 0 "When are you coming back?"
- 0 "What's next?"
- 0 Difficult to ever provide enough reassurance or information
 - 0 Often similar questions asked repeatedly

0 Avoidance

- 0 Negatively reinforces fear
- 0 Denies opportunity for exposure
 - 0 Extinction process can not begin,
 - 0 creating feedback loop of fear & avoidance



Math phobic's nightmare

Questions Re:
Anxiety
Overview?



Evidence Based Treatment of Anxiety

How You Can Help



Goal Setting

- 0 **Setting an appropriate goal is an important step**
 - 0 Can you taste it, touch it, smell it, or hear it?
- 0 **What would you like to see the child DO that they can not do today because of anxiety?**
- 0 **Chasing an emotion can be an endless pursuit**
 - 0 “Feeling better” might be the wrong goal – it’s not normal to feel calm all the time!
 - 0 Goal should never be to be “not anxious”
 - 0 Choose an achievable behavior, and PRAISE when met!



Treatment Overview

- 0 Five major components of cognitive-behavioral therapy (CBT) for child, adolescent, or adult anxiety:

- 0 **Psychoeducational**

- 0 With both child/parents re: anxiety and CBT itself

- 0 **Somatic management skills training**

- 0 (e.g., relaxation, diaphragmatic breathing, self-monitoring)

- 0 **Cognitive restructuring**

- 0 (challenging negative expectations and modifying negative self-talk)

- 0 **Exposure methods**

- 0 (imaginal & in-vivo exposure with gradual desensitization to feared stimuli)

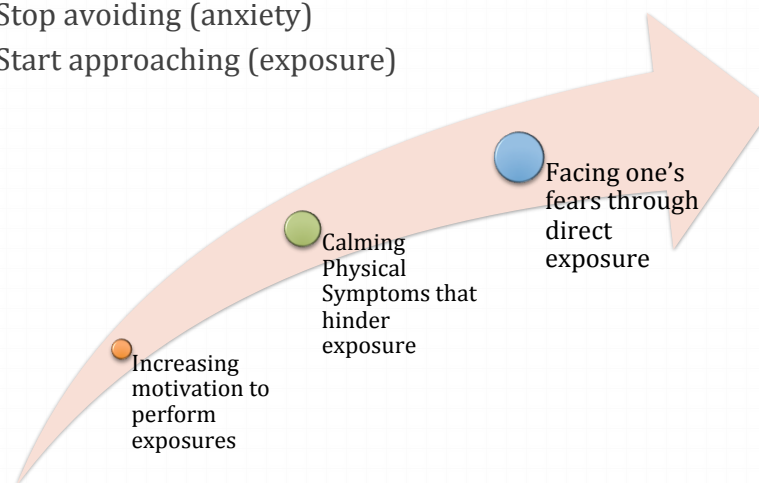
- 0 **Relapse prevention**

- 0 (booster sessions to problem-solve, coordination with school and parents)

Albano & Kendall (2002)

The Foundation

1. Stop avoiding (anxiety)
2. Start approaching (exposure)



Parent Behavior Modification

- 0 **Comprise a LARGE component of preschool-aged anxiety management**
- 0 Labeling & identifying anxiety for the child
- 0 Removing attention from anxious whining/complaining
- 0 Removing excessive reassurance providing
- 0 Providing positive attention to brave behavior
- 0 Preventing avoidance by encouraging approach daily
- 0 Building in exposure exercises to everyday tasks
- 0 Modeling positive coping strategies
- 0 Providing child with tools to combat their anxious thoughts and feelings and ensuring they actually use them



Anxiety Treatment

Physical Strategies

Cognitive Strategies

Behavioral Strategies

What About Thoughts?

- 0 **Not typically a focus of intervention for preschoolers/ young children**
 - 0 Difficulty accurately understanding and self-reporting thoughts
 - 0 Challenges with thoughts → emotions link (Flavell, 2001)
 - 0 Difficulty understanding how one can think/feel one thing yet show/display another (Southam-Gerow & Kendall, 2000)
 - 0 Use of concrete, physical descriptors at a young age rather than psychological traits (e.g., "I'm a boy with dark hair" instead of "I'm patient and brave")
- 0 **We can help by introducing the concept of separating oneself from one's worries**
 - 0 This is especially helpful with younger children, who may show a harder time understanding why they feel anxious

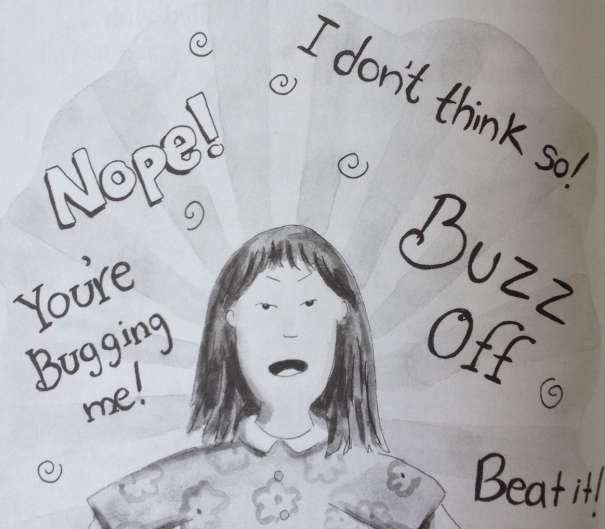
Introduce Mr. Worry



Bossing Back

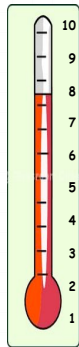


Talking Back to Worries



Fear Thermometer

My Fear Thermometer



- 0 Worry scale ("Fear Thermometer") helps describe the intensity of the fear
 - 0 As opposed to all fears being "big and unmanageable" some fears are smaller & "OK"
- 0 Assists in objectifying/externalizing the worry
 - 0 Makes anxiety more concrete rather than abstract for children
- 0 Helps monitor progress/reduction in anxiety over time
 - 0 Critical during exposure hierarchy development

Basic Relaxation/Physical Skills

- 0 Strategies to help counter physical symptoms
- 0 **Diaphragmatic Breathing (5-5-2)**
 - 0 Inhalation of 5s, exhalation of 5s, pause of 2
 - 0 Mentally focus on breathing rhythm and surroundings, concentration on the present
- 0 **Progressive Muscle Relaxation (PMR)**
 - 0 Gradual tensing and release of tension in various muscle groups that hold tension (note re: panic)
- 0 **Guided Imagery**
 - 0 Thorough imagination of calming words, phrases, places, or things

Physical Symptoms



Exposure

Fight Fear by Facing Fear



Approaching Exposure

- Important for both parent and child to understand the goal of exposure exercises – **anxiety never “goes away” completely (nor should it!)**
- Teaching **distress tolerance**, and avoiding avoidance (“Ride the worry wave”)
- Goal is **NOT** to practice *eliminating* or *controlling* anxiety – this is unrealistic
 - Instead, aim is to accept the anxious/worried state through increased awareness of both the cognitive and physical aspects of anxiety
 - When exposures are practiced with **gradual intensity** and over **repeated** sessions, this goal is achievable as anxiety slowly decreases (both in duration and intensity)



Exposure Must Be...

- 0 **Endured** – we are committing to beat this!
 - 0 until the anxiety generated by the exposure recedes to a minimal level
- 0 **Repeated** – practice practice practice
 - 0 until the maximum anxiety experienced in each consecutive exposure is minimal
- 0 **Gradual** – build on success
 - 0 from lowest anxiety-evoking to highest anxiety-evoking situations
- 0 **Clear** – no surprises!
 - 0 specified, explained, and agreed upon steps on the fear ladder
- 0 **Relevant** – does it matter in real life
 - 0 Able to evoke significant anxiety in **relevant** situations
- 0 **Attended** – distraction is sneaky
 - 0 Conducted in a manner that the individual **attends** to and interacts with the feared stimulus so that anxiety is truly provoked



Creating a Stepladder

These things are really hard to do:	
These things are hard to do:	
These things make me just a little worried:	

Sample Fear & Worry List

These things are really hard to do:	If parents are away for a whole evening (10)
	Spending the night alone in my bed (8)
These things are hard to do:	Spending the whole day at a friends birthday party (5)
	Being away from parents when they go get groceries – about 1hr (6)
These things make me just a little worried:	Going to a friend's house who I don't know very well (4)
	Being on a different floor of the house when my parents are home (3)

Creative Stepladders

- 0 **WHAT** is the child avoiding & things to consider modifying:
- 0 **Environment/location**
 - 0 How close to the feared situation
- 0 **People who are present**
 - 0 Number of people, how comfortable they make child, amount of reassurance they provide
- 0 **Duration of time**
 - 0 Both time to prepare and/or spent in anxious situation
- 0 **Intensity/frequency of anxiety producing behavior**
 - 0 Number or magnitude of stressors
- 0 **Control**
 - 0 Reducing variables under their control



Exposure – Sample Stepladder

Situation: Being stung by a bee	Fear Rating	Reward
Holding a dead bee (by it's wings) and looking at it	10	10 stickers
Watching a bee on a flower outside (near)	8	6 stickers
Holding a live bee in a jar	7	5 stickers
Looking at a dead bee in a jar	5	3 stickers
Watching YouTube videos of bees	3	2 stickers
Drawing pictures of bees	2	1 sticker
Making buzzing sounds like a bee	1	1 sticker

Exposure – Sample Stepladder

Situation: Fear of swallowing pills	Fear Rating	Reward
Actual medication/pill	10	\$5
Empty gel-capsule	8	\$2
Pez	7	\$1.50
Tic-Tac	5	\$1
Nerds	3	50 cents
Mini M&M's	2	25 cents
Cake sprinkles	1	10 cents

Exposure – Sample Stepladder

Situation: Fear of talking in front of class	Fear Rating
Giving a talk in front of my class	10
Giving a talk to my teacher and a few close friends in my classroom	8
Giving a talk to just my teacher during lunch hour/ afterschool in my classroom (no one else present)	7
Giving a talk to my two closest friends at home (mispronounce selected words in my talk)	5
Giving a talk in front of my parents and sister at home	3
Giving a talk in front of a mirror in my house	2
Giving a talk alone in my room	1

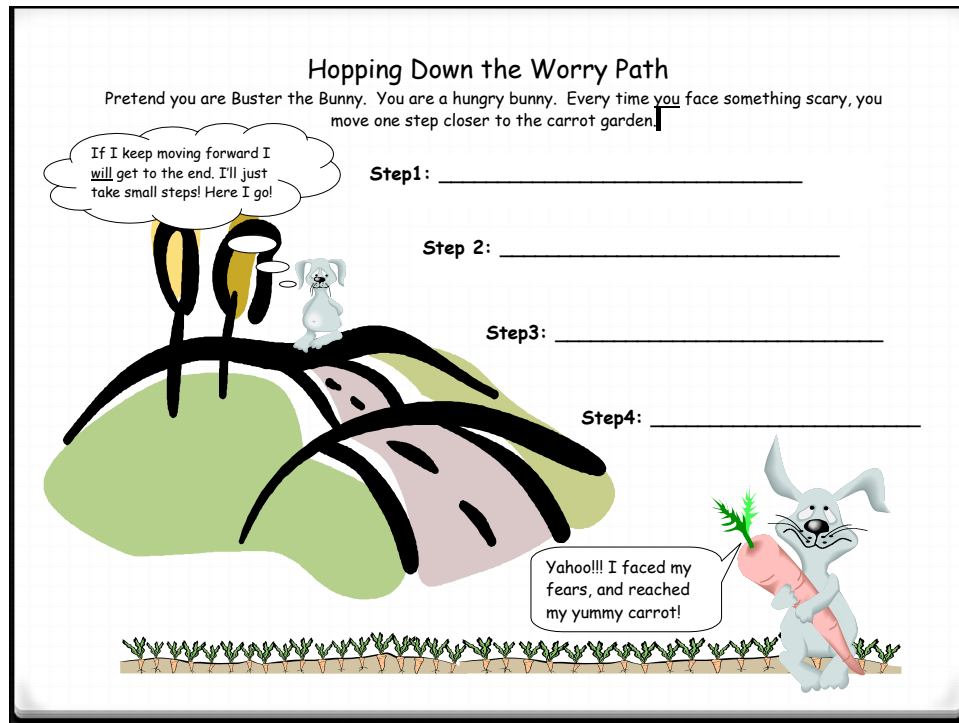
Rewarding Approach

0 Rewarding brave, non-anxious behaviors (approaching)

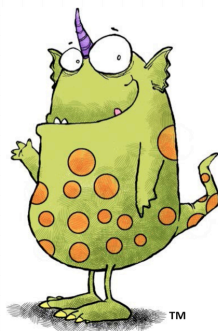
0 Do not have to be financial – can be:



- 0 Access to a preferred activity (e.g. 20min extra computer time)
- 0 More choice (e.g., what to watch on TV, what's for dinner, etc)
- 0 Flexibility on a house rule (e.g., allowed to stay up 30min later)
- 0 Family together time (e.g., board game with Mom, movie with Dad, etc)
- 0 Should be **appropriate size** for difficulty of the step
- 0 Should be given as **soon** afterwards as possible
- 0 Not given if the step not completed (no points for "thinking about it")
- 0 Reward for completion of step, even if scared (then repeat step)



Psst.... Hey, forget about me?



When To Get Help



- 0 Impairment becomes daily, chronic, or severe
- 0 You start living your life AROUND anxiety
- 0 You're spending more time on anxiety prevention or reduction than time having fun or living life
- 0 The list of "things to avoid" grows
- 0 School, friends, family, family doctor start noticing anxiety is more than just temporary
- 0 When you've been thinking "they'll grow out of it" for years/months
- 0 When it's causing the family significant distress (you, your relationship(s), siblings, etc)



Resources

0 Professional Information

- 0 Private Practice(s) that focus on children & adolescents & evidence-based treatments such as CBT (www.chorneyandassociates.com or 444-1160)
- 0 IWK Treatment of Anxiety Group (Central Referral = 464-4110)
- 0 Family Service Association of Nova Scotia (fshalifax.com)

0 Websites

- 0 www.anxietybc.com (MindShift app – free)
- 0 www.apns.ca (Find local psychologists)
- 0 www.teenmentalhealth.org

0 Books

- 0 Helping Your Anxious Child (**Rapee, 2008**)
- 0 Freeing Your Child From Anxiety (**Chansky, 2007**)
- 0 Scaredy Squirrel – Various Titles (**Watt, 2008**)
- 0 Getting Your Child to Say “Yes” to School (**Kearney, 2007**)
- 0 Get Out of Your Mind and Into Your Life for Teens (**Ciarrochi, 2012**)



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