

The Anxious Child

Learning to make stress our friend



Our Goal for Today

Definition What is anxiety?	Risk Factors What are the risk factors?	Prevalence Data of anxiety and stress amongst children	Signs What are the signs we should be looking for?
Intervention When to intervene and how	Prevention Parents role in prevention	Normalizing Stress Functional role of stress in our lives	Resources Finding the right help

Definition: What is anxiety?



INTENSE/EXCESSIVE
FEAR



PERSISTENT



INTRUSIVE
THOUGHTS



PHYSICAL
SYMPTOMS



FUTURE ORIENTED

Common Anxiety Disorders

Generalized
Anxiety
Disorder (GAD)

Obsessive
Compulsive
Disorder (OCD)

PTSD (Post
traumatic
stress)

Phobias

Separation
Anxiety

Social Anxiety

Risk Factors:



BIOLOGICAL

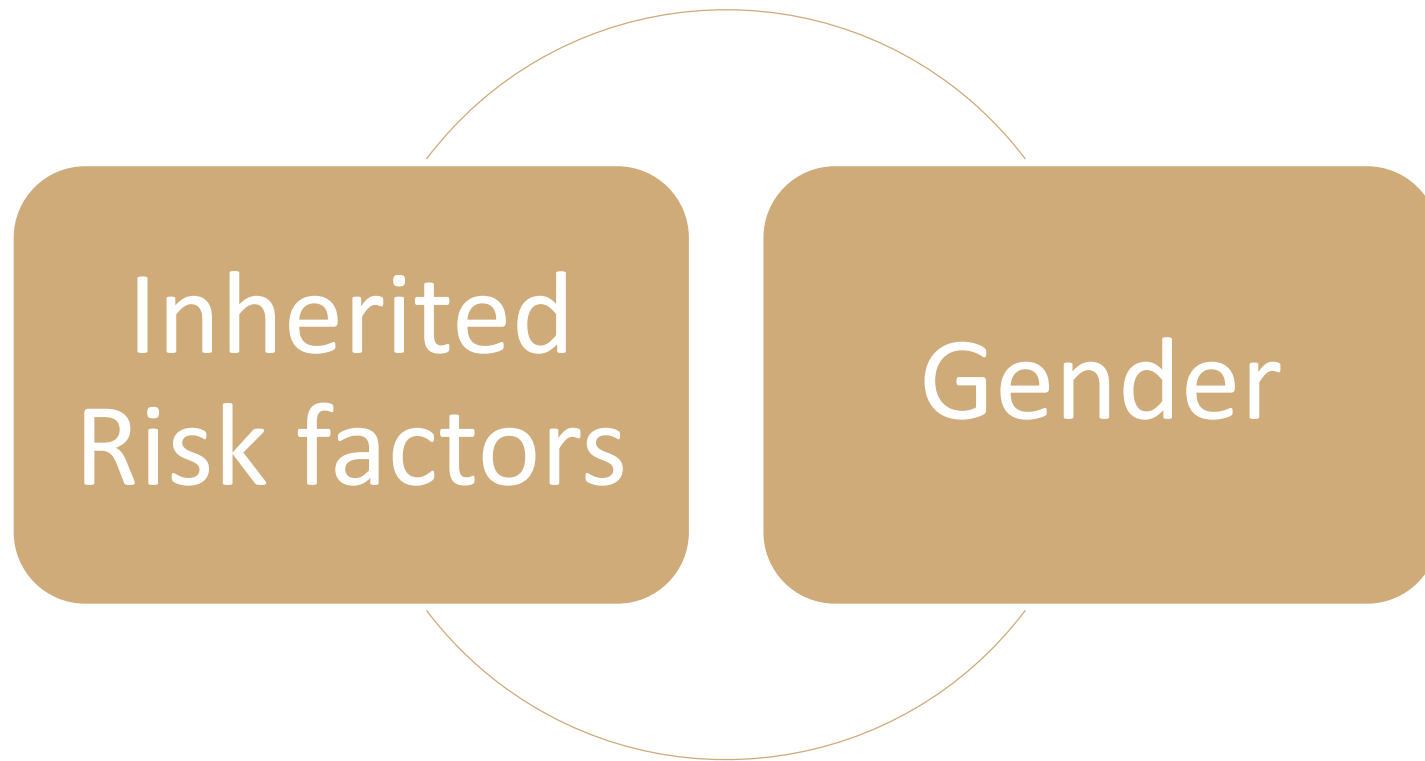


PSYCHOLOGICAL



SOCIAL/EMOTIONAL

Biological



Psychological

Constant Criticism

Lack of emotional connection

Parental Overcontrol

Co occurring mental health diagnosis (depression, substance misuse)

Low self esteem

Repetitive negative thinking

Social/Environmental

Learned behaviors – anxious parent

Trauma – bullying, LGBTQ+

Adverse Childhood Experiences - ACEs

Social Media

Social Media and Self Doubt



Perfect Storm of Self Doubt

- Vulnerability
- Need for validation
- Need to compare to others
- Impossible standards
- Curated lives that do not reflect reality
- Best and most enviable moments shared
- Struggles and ordinary things omitted

Prevalence



Anxiety Specific - Co Occurring mental health diagnosis

Social Media effects – need to compare, bullying

Screen time

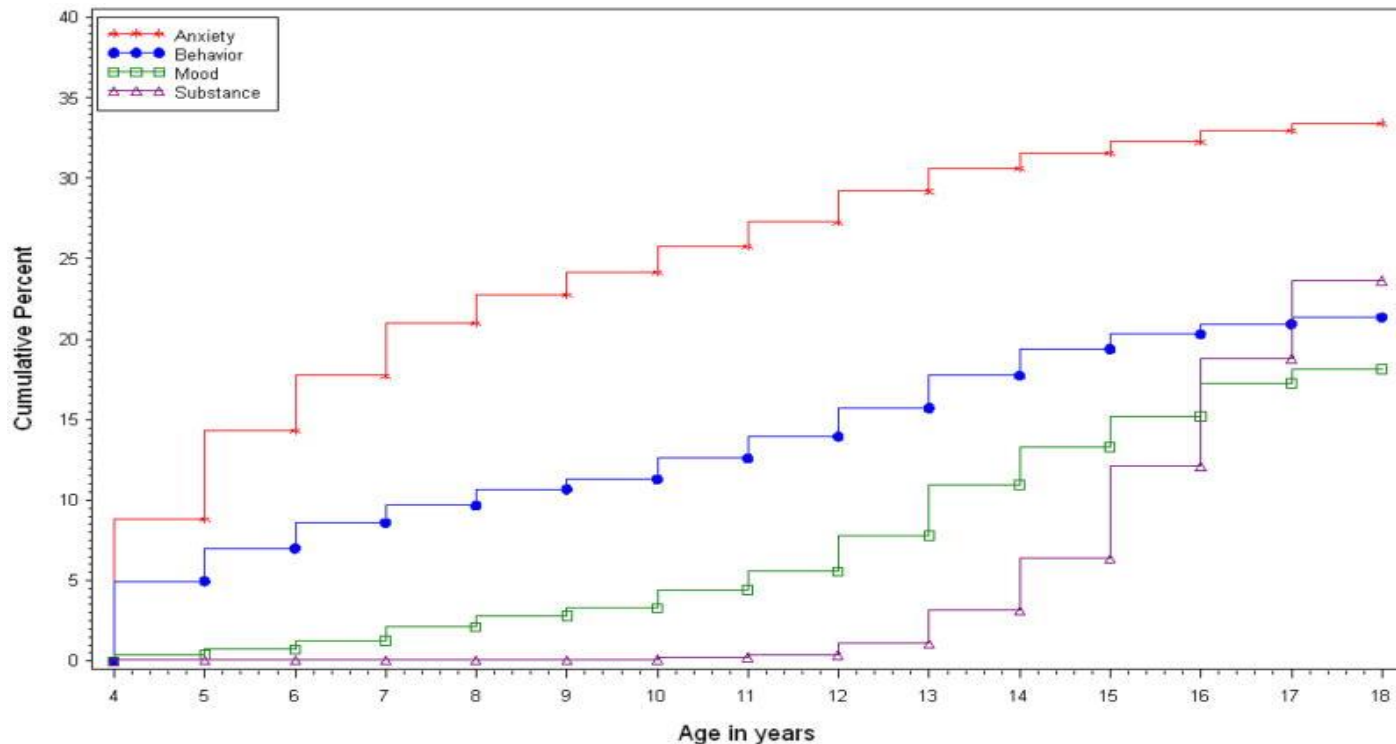
Sleep data

Self reported mood data for teens

Anxiety

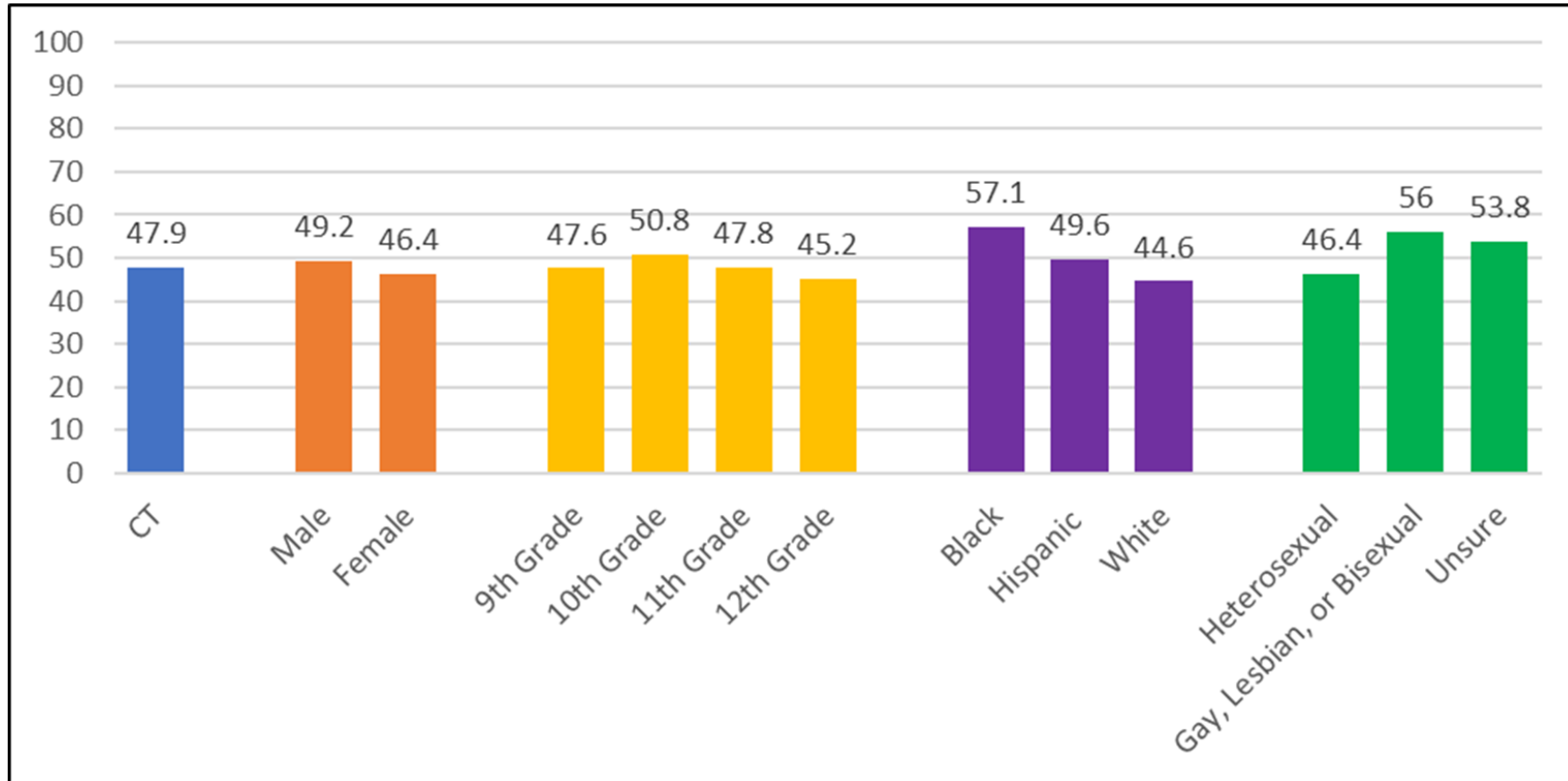
The National Comorbidity Survey-Adolescent Supplement NCS-A (2010)

10,123 adolescents (13-18yo)



- Median onset age is 6 years
- Comorbidity/Dual Diagnosis
- 1:3 adolescents (31.9%) met criteria for anxiety disorder
- More common in females

Percent of High School Students With At Least 3 Hours of Screen Time per Night - Connecticut



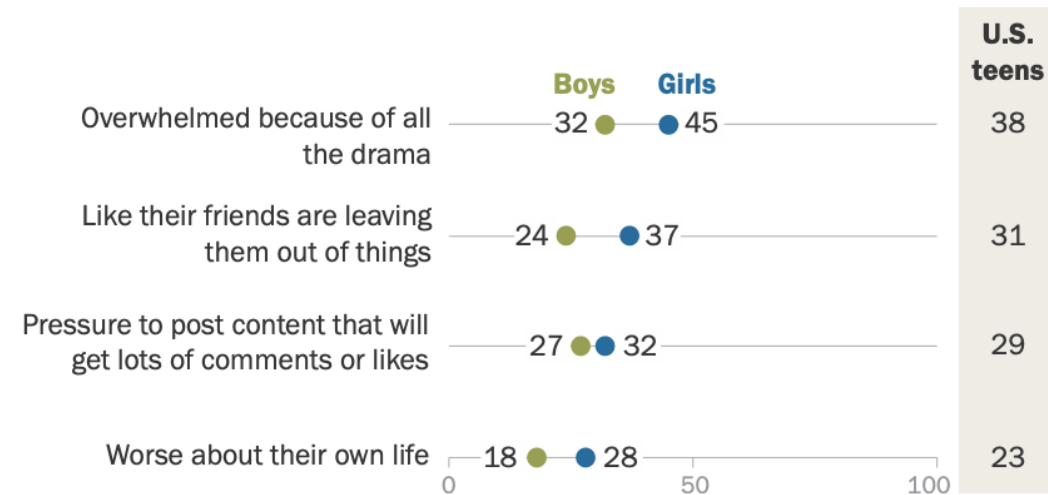
Source: Connecticut School Health Survey, 2019

Social Challenges – Increased Anxiety

- Overwhelmed (38%)
- Pressure to post (29%)
- Feeling left out (31%)
- Feeling worse about their own life (23%)

Teen girls more likely than teen boys to say social media has made them feel overwhelmed by drama, excluded by friends or worse about their life

% of U.S. teens who say that in general, what they see on social media makes them feel a lot or little ...



Note: Teens are those ages 13 to 17. Those who did not give an answer or who gave other responses are not shown.

Source: Survey conducted April 14-May 4, 2022.

“Connection, Creativity and Drama: Teen Life on Social Media in 2022”

PEW RESEARCH CENTER

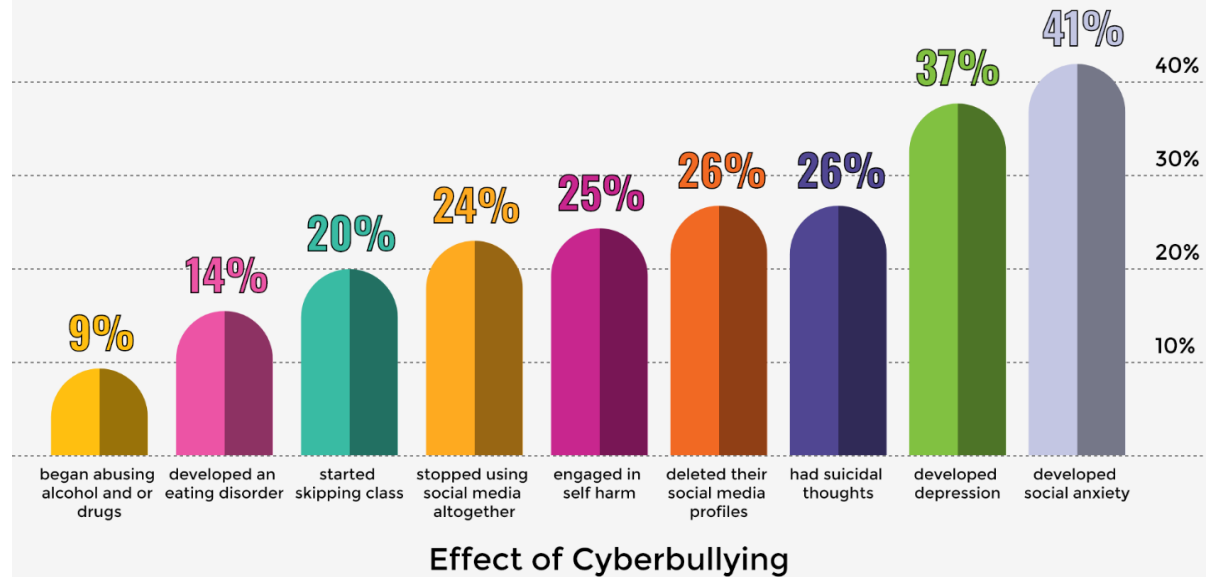
Online Bullying

Self reported bullying statistics are not accurate as kids are bullied on sites they shouldn't be on or are bullied for their actions they are embarrassed to admit – so do not report

Normal tween curiosity takes on a serious level of risk due to 24/7 access

Online gaming is often the portal of entry to cyber bullying and pornography

Issues Kids Feel Result From Cyberbullying



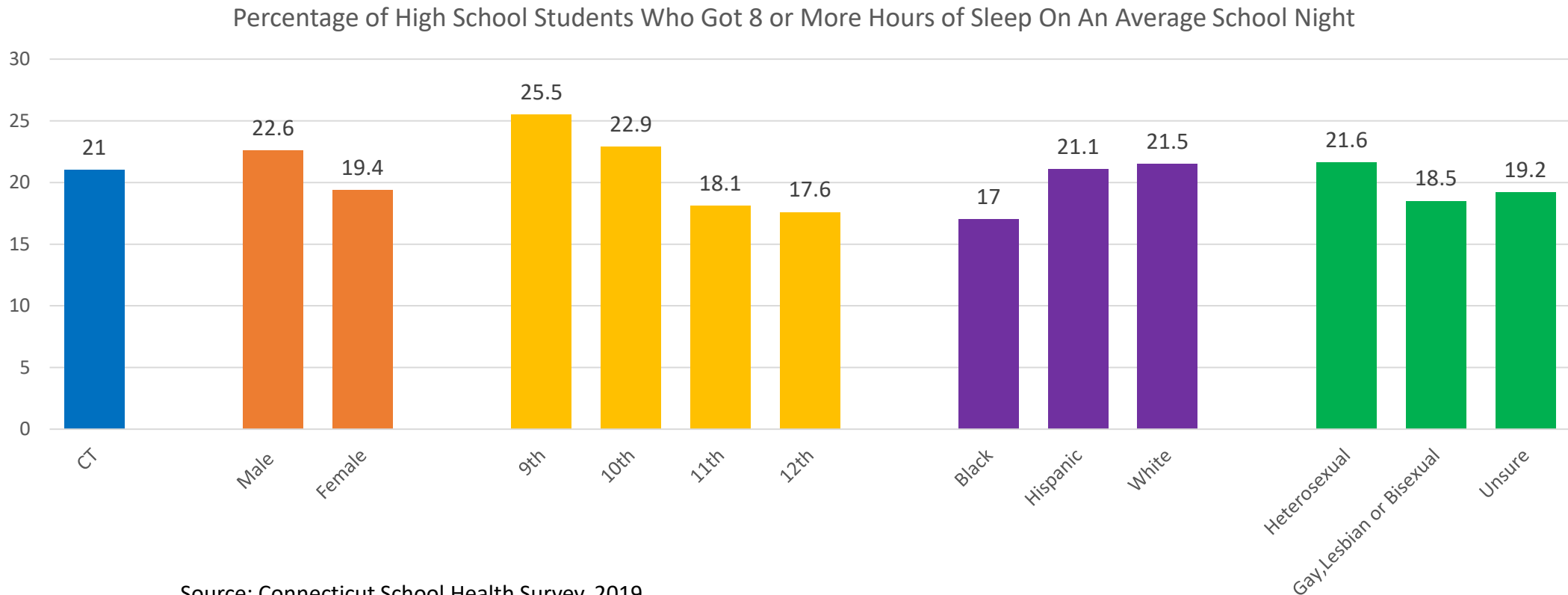
<https://www.broadbandsearch.net/blog/cyber-bullying-statistics>

SLEEP

The Connecticut High School Survey asked, “On an average school night, how many hours of sleep do you get?” The percentages of students who responded “8, 9, 10 or more” are shown in the graph below.

Compared to other Connecticut high schoolers, the percentage of students who get less than 8 hours or more of sleep was highest among:

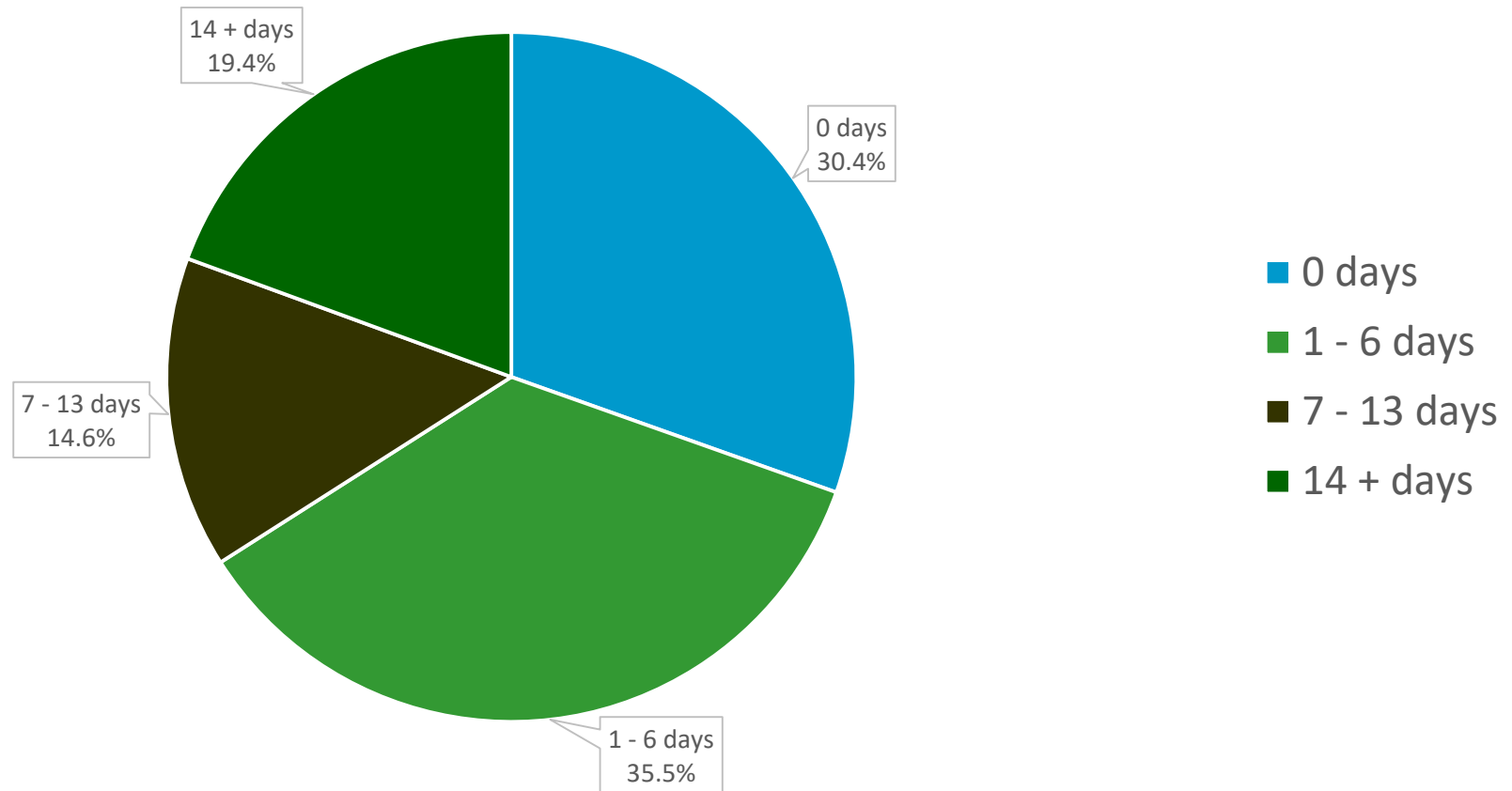
- Females (19.4%)
- Students in 11th (18.1%) and 12th (17.6%) grades
- Black students (17%)



Source: Connecticut School Health Survey, 2019

Number of Poor Mental Health Days in the Past 30 Days – Connecticut

“During the past 30 days, on how many days was your mental health not good? Mental health includes stress, depression, and problems with emotions.”



Source: Connecticut School Health Survey, 2019

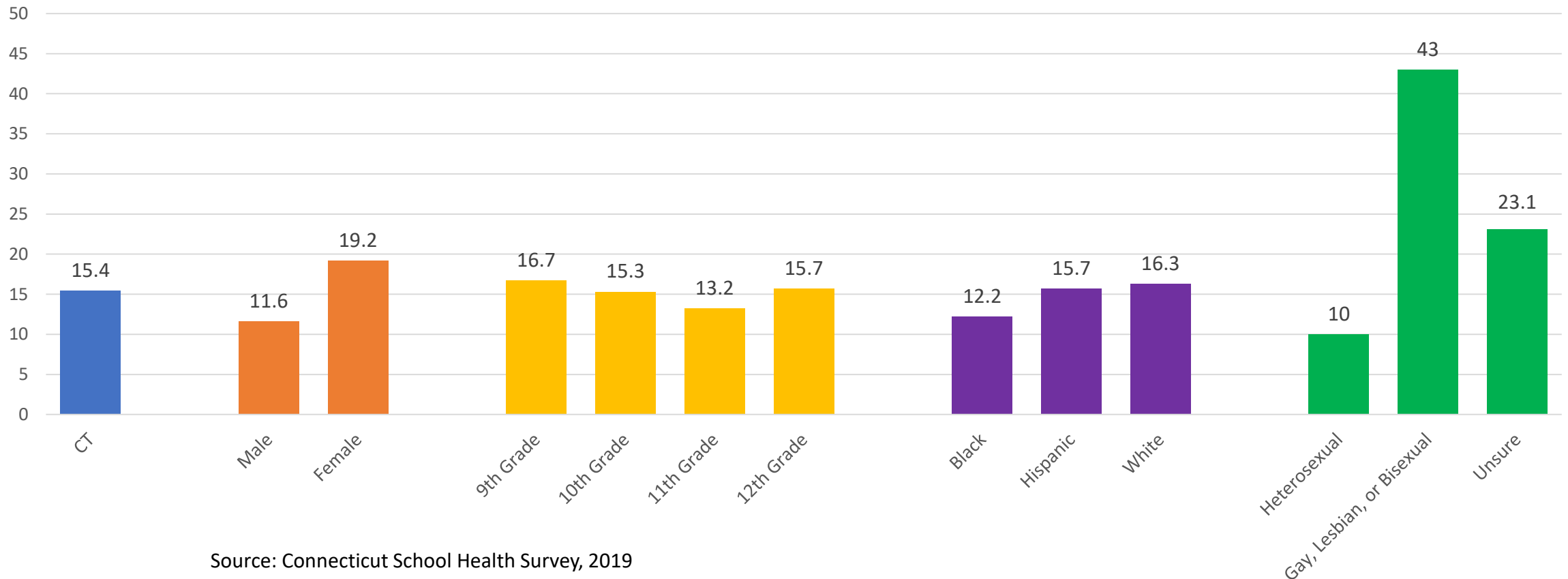
SELF HARM

The Connecticut School Health Survey asked, “During the past 12 months, how many times did you do something to purposely hurt yourself without wanting to die, such as cutting or burning yourself on purpose.” Percentages of students who responded to doing this “one or more times” are shown below.

Compared to other Connecticut high school students, the percentage of students who did something to purposely hurt themselves without wanting to die were higher among:

- Females (19.2%)
- Hispanic (15.7%) and White (16.3%) students
- Gay, lesbian, or bisexual students (43%) or students unsure about their sexual orientation

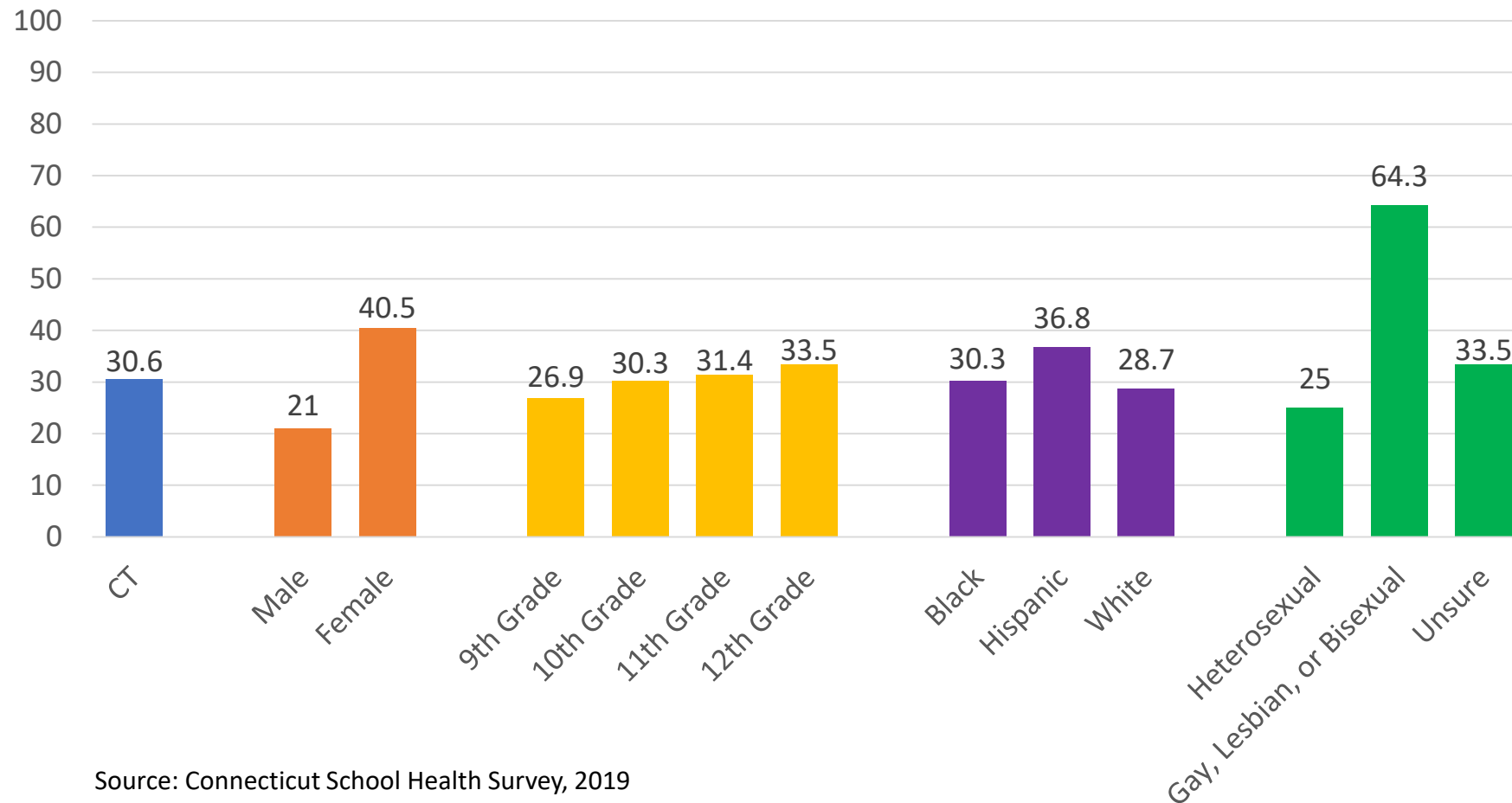
Percentage of High School Students Who Did Something to Purposely Hurt Themselves Without Wanting to Die



Source: Connecticut School Health Survey, 2019

Percent of Students Who Experienced Persistent Sadness or Hopelessness

“During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?”



Source: Connecticut School Health Survey, 2019

Intervention: Signs to Look For

Children

- Irritability
- Shyness
- Sleep problems/nightmares
- Constant worry
- GI issues
- Tantrums/anger management
- Difficulty making and keeping friends

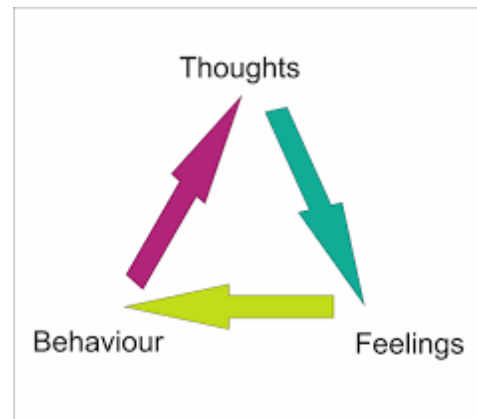
Teens

- Withdrawal from friends/activities
- Irritability
- School avoidance
- Sleep problems
- Substance use/misuse
- Reassurance seeking
- Change in grades
- Increased or decreased social media use

Intervention:

Treatments

- Cognitive Behavioral Therapy(CBT)
- Managing Parental Stress
- Family Therapy
- Individual Therapy
- Medication #



Self Management

- Mindfulness
- Emotional Regulation
- Relaxation/Grounding
- Learn triggers
- Support system
- Positive mindset
- Peer connections
- Acceptance
- Distraction
- Apps for devices

Prevention

- Parental Stress Management
- Emotional Regulation
- Mindfulness
- Model stress management (corrective actions)
- Learn triggers
- Build personal toolbox for management
- Mental Health Professional



Prevention: How can parents help?

- Watch your talk – Modelling matters
- Talk about your child's worries – reassure, support, reframe
- Empathize – no shame/blame
- Supportive/Not Controlling – brainstorm/problem solve
- Build Coping Skills – positive feedback, try new things together
- Positive role model – sleep, eat, exercise, manage stress
- Relaxation techniques – Practice together – try new things
- Manage Social media/screen time
- Socialize in person
- Build Self esteem

Normalizing Stress – The intolerance of Uncertainty

Everyday Worry – Helpful

- ‘anxiety’ can be helpful/healthy
- Skin in the game – care about something
- Normal to feel ‘worried/stressed’ about certain things
- Can increase drive, focus, desire to learn/improve

Chronic Anxiety – Harmful

- Constant – intrusive
- Overwhelmed – paralyzing
- Interfere with ability to live, laugh, love and learn



CHILDHOOD ANXIETY

Resources

Helpful Web sites

Help Guide –Mental Health & Wellness <https://www.helpguide.org/home-pages/anxiety.htm>

Child Mind.org

<https://childmind.org/topics/anxiety/>

<https://ymhproject.org/factsheets/>

Tools for anxiety management

<https://copingskillsforkids.com/calming-anxiety>

<https://www.worrywisekids.org/>

<https://gozen.com/>

Apps for devices

<https://www.common sense media.org/articles/kids-mental-health-apps-and-websites-for-anxiety-depression-coping-skills-and-professional-support>

The FVHD Community Health Assessment is Complete:



A dark blue banner with white text. The main title 'COMMUNITY HEALTH ASSESSMENT' is in large, bold, white capital letters. Below it, a subtitle reads 'A comprehensive, systematic look at health in the Farmington Valley Health District.' At the bottom of the banner are three buttons: 'Download Full Text' (white background), 'Summary PDF' (white background), and 'Share Your Voice!' (red background with white text). Faint background text on the banner includes 'Protect good health from health members' and 'Programs and'.