Anxiety in Youth: Impact of Pandemic

COA 8th Annual Mental Health Awareness Conference Children's Behavioral Health – Ireland Center Nina Reynolds, PhD Daniel S. Marullo, PhD July 16, 2021



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Objectives

- Describe mental health impact of pandemic among youth
- Identify signs of stress and anxiety in youth
- List strategies and interventions to maximize coping with stress and anxiety



Our Youth are Struggling

• Research shows worsening pediatric mental health over course of pandemic.



Impact of the pandemic on children's mental health

The pandemic has created a perfect storm of stressors for children and youth and experts warn that it may negatively impact mental health

Uncertainty

Stressors:

- Social isolation
- School closures
- Familial challenges & economic instability
- Losing a family member to COVID-19

Barriers to Care:

Lack of internet or technology limiting telehealth access
Fewer mental health screenings due to school closures & delayed pediatric care

The share of mental health-related ED visits among all pediatric visits increased between mid–March and October 2020 compared to the same period in 2019



among adolescents aged 12–17 years





Our Youth are Struggling

 Since 2019, we have seen a 50% increase in Psychology consults being ordered for youth admitted to the medical floors.



COA Psychology Consults Eating Disorders Data

Number of Inpatient Psychology Consults for Eating Disorders:		
2019	2020	2021
<pre>< 1 per month</pre>	1 per month	6 per month (so far)



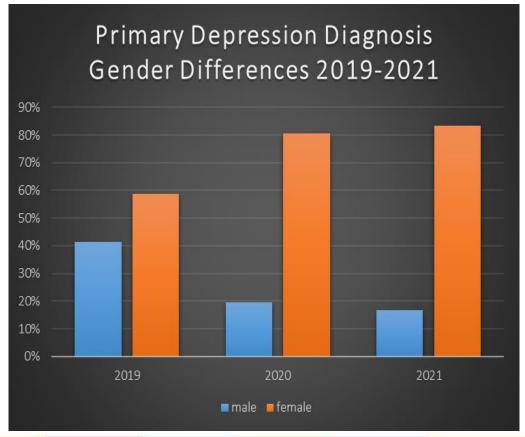
COA Psychology Consults Trauma Data

- Over the pandemic, we have seen a 33% increase in primary diagnosis of Trauma
 - Of these, about 50% have been due to abuse (vs. other traumatic incident)



COA Psychology Consults Depression Data

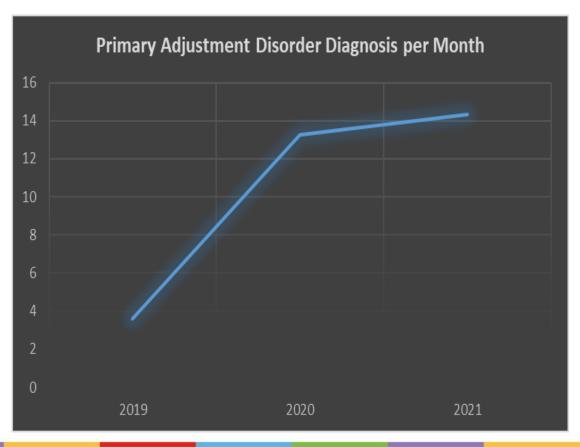
- Since 2019, we have seen:
 - 81% increase in consults with primary diagnosis of Depression





COA Psychology Consults Anxiety & Adjustment Data

- Since 2019, we have seen:
 - 76% increase in consults with primary diagnosis of Anxiety





Basic Facts

- Anxiety and fear meet the criteria for a clinical anxiety disorder when the concerns are **persistent** and excessive, causing notable distress or impairment in day-to-day life.
- Anxiety disorders are the most common psychiatric disorders with onset in childhood, and prevalence estimates ranging from 10 to 30 percent.



DSM-5 Categories

- Generalized anxiety disorder
- Social anxiety disorder
- Panic disorder with or without agoraphobia
- Agoraphobia without a history of panic disorder
- Specific phobia
- Separation anxiety disorder
- Selective mutism



Comorbidity & Course

- Anxiety disorders in youth
 - Frequently co-occur:
 - Other anxiety disorders
 - ADHD, ODD, language disorders, learning disabilities, and depressive disorders
- Childhood anxiety disorders associated with:
 - Educational underachievement, increased risk for depression, substance abuse and/or dependence, and suicide
 - More severe/ greater impairment → persistence into adulthood



COVID-19 Pandemic Impact on Anxiety

- Exacerbates existing anxiety and/or can trigger new anxiety
 - Increased isolation
 - Promotes avoidance
 - Chronic, unknown nature of pandemic
 - Sense of vulnerability, especially if loved ones have died



Special Populations Affected

- Youth with Special Needs:
 - Loss of structure/ routine.
 - Decreased access to necessary resources/ therapies.
- Underprivileged Youth:
 - Housing and food insecurity.
 - Limited access to distance/ virtual learning.
 - Increased separation from parents, who may be seeking or working additional jobs.

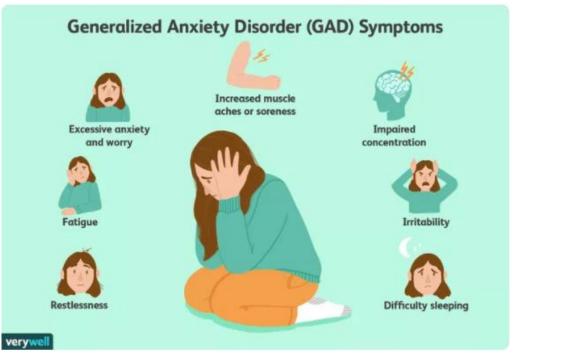


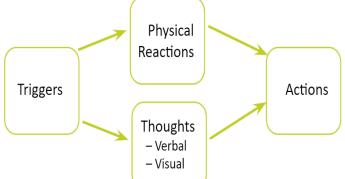
Clinical Manifestations of Anxiety

- Expressed fears and worries
- Avoidance, escape (FLIGHT)
- Clingy, excessive need for reassurance
- Irritability and oppositional behavior (FIGHT)
- Silly behavior or dysregulation
- Poor school performance, difficulty concentrating
- Sleep and eating problems
- Somatic symptoms
- Panic, shutting down, withdrawal (FREEZE)



What Happens When Kids are Anxious?







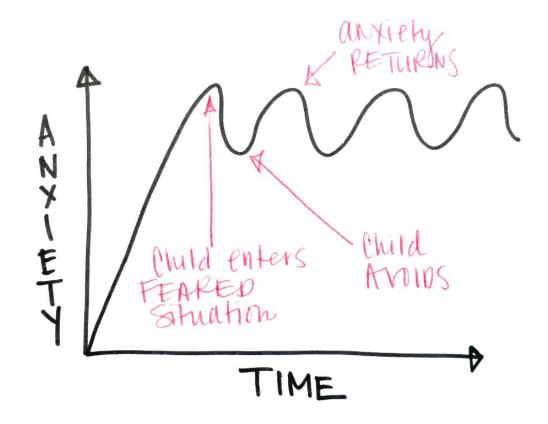


What Maintains Anxiety?

- Cognitive distortions
- Avoidance
 - Caregivers allowing/ inadvertently supporting avoidance
- Rescuing/ "taking over"
- Excessive reassurance
- Limited or poor coping skills

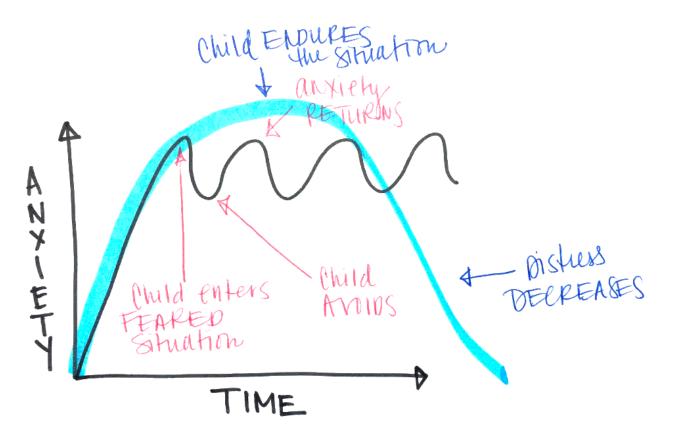


Avoidance











CALM Strategy for Caregivers

- Catch your breath:
 - Pause to think and plan a response
- Accept negative feelings:
 - Wait, listen, respond "I see, ok, uh-huh"
- Label emotions:
 - "You seem nervous" or "your body seems scared"
- Model coping skills:
 - Show child how to remain calm by using a coping skill



General Coping Skills

- Get the basics down
 - Sleep, healthy food and exercise
- Create routines!
- Talking about anxiety... to a point
 - Can create "worry time"



- Limit access to news, scary shows/movies, etc.
- Connecting with family, friends, animals, and nature
 - FaceTime, letters
- Build on strengths and interests
- Leaving time to "just be a kid"





- Heart beats faster.
- Muscles get tight or feel shaky.
- Breathing gets faster.
- Face gets red and hot.

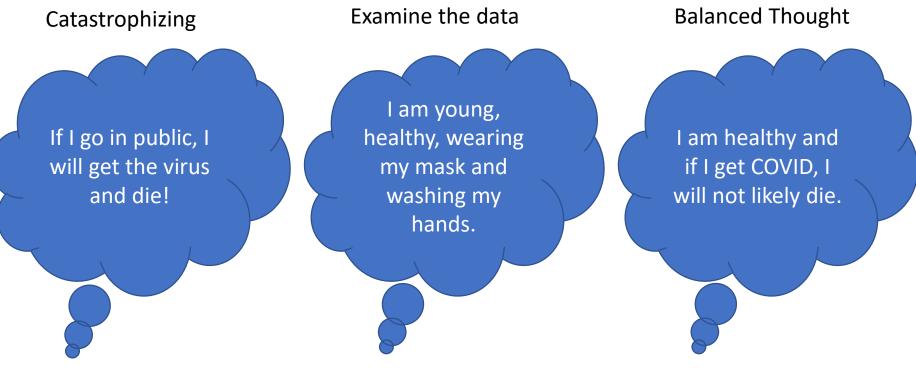
Body Awareness & Relaxation

- Teach children about physical signs of anxiety
- Model/ teach relaxation
 - Deep breathing
 - Hot chocolate / soup
 - Muscle relaxation (passive or active)
 - Imagery



Managing Anxious Thoughts







Reward Good Coping

- It's important to remember that it takes hard work to use coping skills – so it's important to reward our children for doing it!
 - Praise and attention
 - Can use small, tangible rewards for daily/weekly coping
 - Larger rewards for bigger, future events



Educators

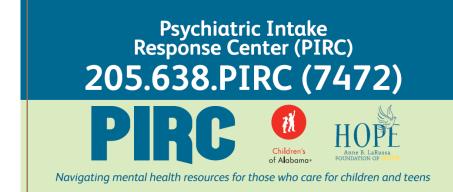
- Anxiety can look like inattention.
 - Child may need extra time to complete work if anxiety is interfering.
- Giving a "heads up"
 - E.g., you would like for them to answer a question on a topic that they are familiar/ interested in – to help them practice speaking up in class
- For the perfectionists, model that making mistakes actually HELPS learning!
 - Praising effort



When to Seek Help



- Level of interference
 - How much is anxiety getting in the way of everyday life
- Not responding to trialed coping strategies
- Prior or comorbid diagnoses impacting functioning
- Increased family distress





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Questions?

