

The Anxiety Dance: A Parent's Guide

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Disclaimer

- The information which follows is not meant to be professional advice for treating your anxious child
- All children and their situations are unique and this lecture is not a substitute for an individualized assessment by a qualified mental health professional

In the next hour we will discuss

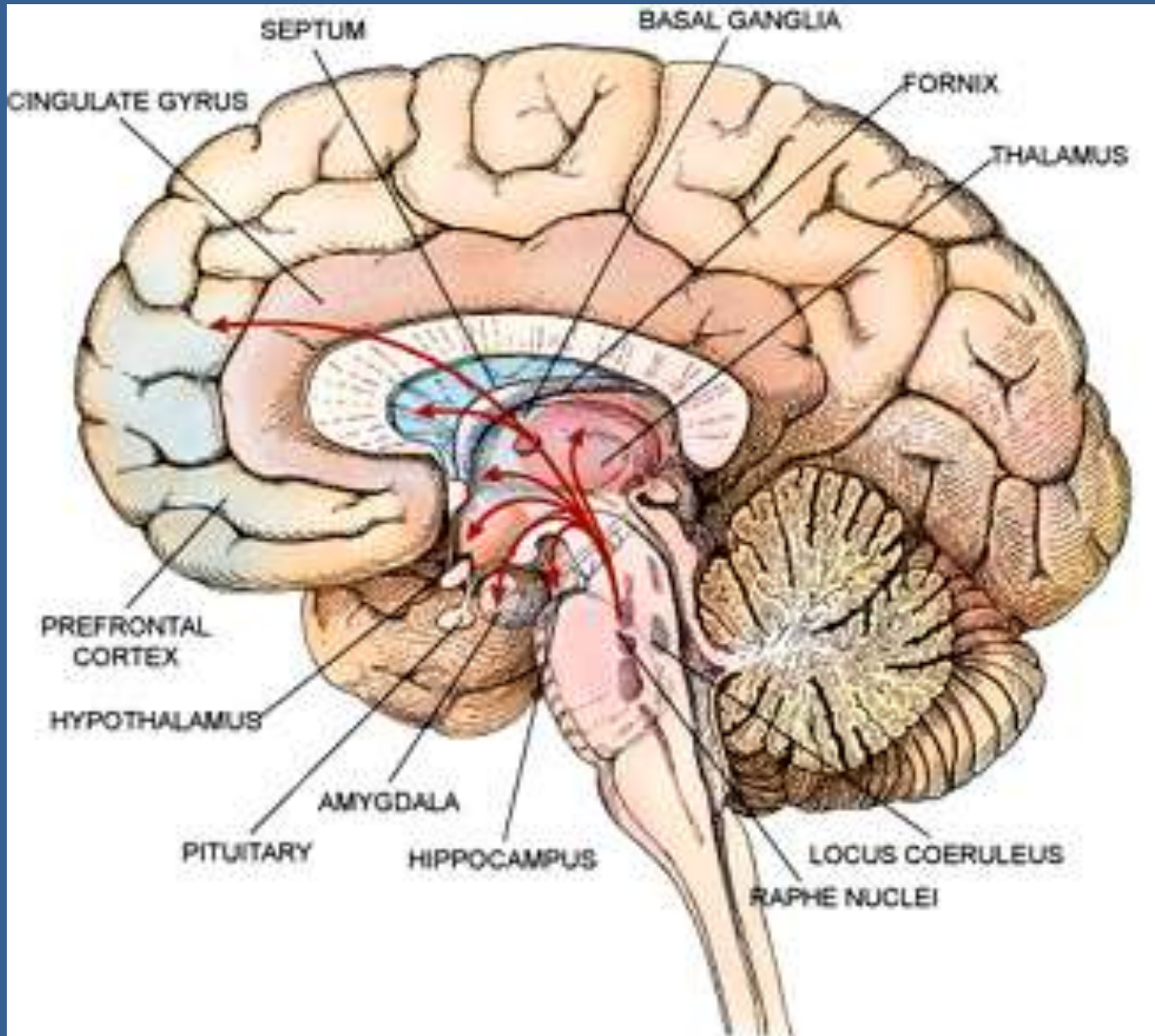
- The origins of child anxiety in biological factors and early experiences, especially social experiences
- The ways a child's fearful and anxious behaviors function to communicate distress and compel the parent to come to the child's rescue
- Strategies for making this "dance" work better: clearer communication, mutual respect, better problem solving, and increased tolerance for distress

FEAR

Fight - Flight - Freeze - Freak Out - Submit

Autonomic arousal characterized by...

- Pupils dilate to let in more light and enhance vision
- Heart rate increases to move oxygen- carrying blood cells quickly through the body
- Breathing quickens to provide oxygen and expel carbon dioxide



More Fear Responses

- Capillaries near the surface of the skin close off; reduces blood loss in case of injury
- Palms become damp, which improves grip
- Blood is shunted away from the digestive system and out to the large muscles in the arms and legs- causes the nausea associated with fear

Anxiety

- Closely related to fear
- *But-* associated less with actual events in the present moment than with the *anticipation* of danger or discomfort (2012: World Ends)
- Thought-driven
- Often involves negative self-evaluations, especially around competence
- Content often involves low probability events (2012: World Ends)

Anxiety Prevalence

- Percentages of normal school children 4 to 12 years of age reporting:
 - fears 75.8
 - worries 67.4
 - scary dreams 80.5
- One year prevalence rate of anxiety *disorders* is between 6 and 20%
- Equal to from 3 to 8 million U.S. children

Anxiety Factoids

- About half of all children with an anxiety disorder meet criteria for a second anxiety disorder
- Girls are somewhat more likely to have anxiety disorders than are boys
- Anxiety is more common than ADHD

The #1 cause of
anxiety in children is

scary information

We are all the
descendants of the
paranoid people

Developmental Factors

- Fears and nightmares peak between ages 7 and 9 and then decline
- Worries become more prevalent from age 7 on, declining a little after age 9

Developmental Factors

- Anxiety conditions by age group
 - Preschool- specific phobias, separation anxiety
 - School age- selective mutism, social anxiety, G.A.D.
 - Adolescence- panic disorder
- Content changes by age
 - The dark, monsters, separation
 - Animals, natural disasters, illness
 - Academic and social failures, the future

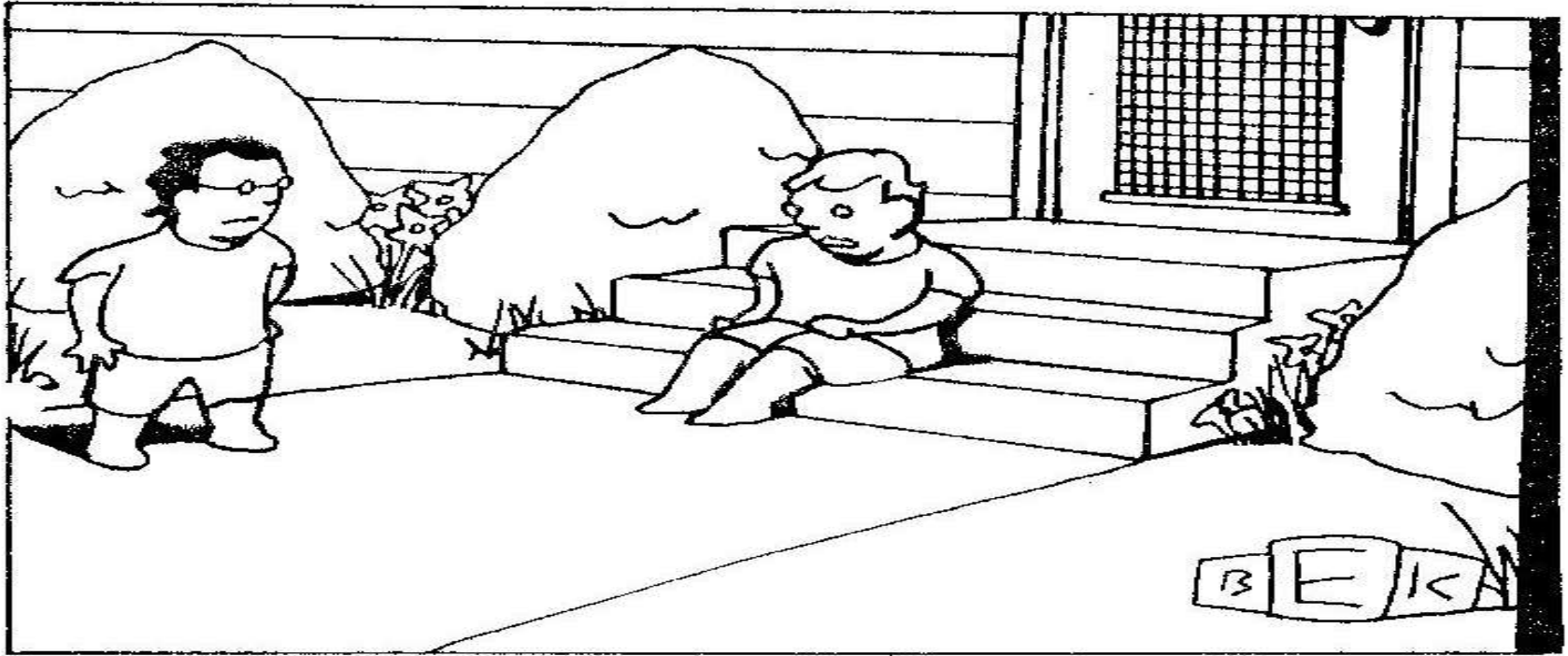
Developmental Factors

- The child may not identify himself as anxious, worried or distressed
- Somatic complaints (stomach ache, headache) are common anxiety/stress reactions
- Crying, irritability, anger and defiance are common
- A return of bedwetting, thumb sucking, or clinginess can be a sign of stress

Fear, anxiety, and stress are a problem when...

- The child is unable to meet age-appropriate and required challenges
- The child's response to these challenges is disproportionate to the situation or his age
- Everyone's more stressed than they want to be

Anxiety Diagnosis



“They’re trying to figure out whether it’s a chemical thing or I’m just a crybaby”

DSM 5 Anxiety Disorders

- Separation Anxiety D/O
- Selective Mutism
- Specific Phobia
- Social Anxiety D/O (Social Phobia)
- Panic D/O
- Agoraphobia
- Generalized Anxiety D/O
- Anxiety Disorder due to a medical condition
- Substance Induced Anxiety Disorder
- Unspecified Anxiety Disorder

Shuffling the Deck

- Obsessive Compulsive D/O is now under *Obsessive-Compulsive and Related Disorders*
- Includes Body Dysmorphic Disorder and Hoarding
- Acute Stress D/O and Posttraumatic Stress D/O are now under *Trauma- and Stressor-Related Disorders*
- Includes Disinhibited Social Engagement Disorder

The Hairball Model of Psychopathology

t
s



"Could we up the dosage? I still have feelings."

“I can act my way into feeling better sooner than I can feel my way into acting better”

O.W. Mower

“We acquire [virtues] by first having put them into action... we become just by the practicing of just actions, self-controlled by exercising self-control, and courageous by performing acts of courage”

Aristotle

Two Varieties of Anxiety

Classic

Traditional worries about the future: the picture is too big

Modern

Anxious arousal in the present: the picture is too small

Stella: Classic Anxiety

- Age: 8
- Younger sibling, age 4
- Many worries; intruders, accidents, fires, illness, harm to self or parents if separated
- Prolonged bedtime routine; “curtain calls”
- Won’t go to a different floor of the house alone: “Marco Polo”
- Stomach aches on Monday morning
- School drop-off drama
- Fine mood and behavior once she’s at school

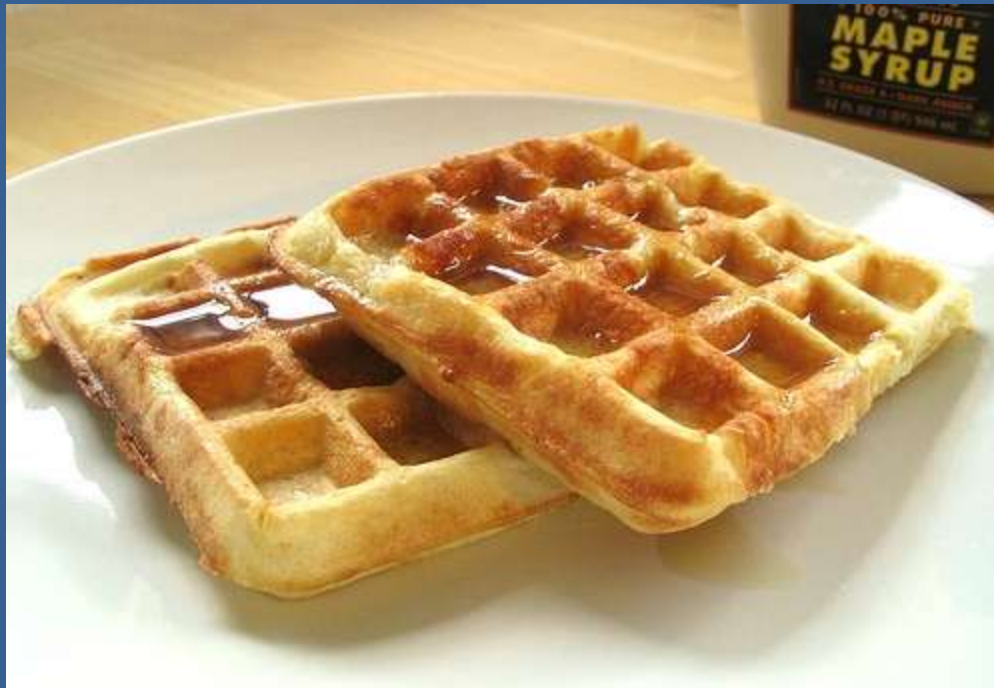
Sterling: Modern Anxiety

- Age: 8
- Only child
- Always wants to know what the schedule is or what's going to happen next, but few actual worries
- Veneer of super bright affect alternating with huge blow-ups
- Becomes frantic, raging when plans are changed, expectations are not met
- Controlling with peers
- Variable and temporary “compulsive” behaviors: e.g., won't leave house for school because shoe laces aren't exactly the same length

Foundation Factors: Very Young Thinking

- Egocentric
- Idiosyncratic / Magical
- Psychic Equivalence / Literality
- Rigidity
- Binary
- Fusion



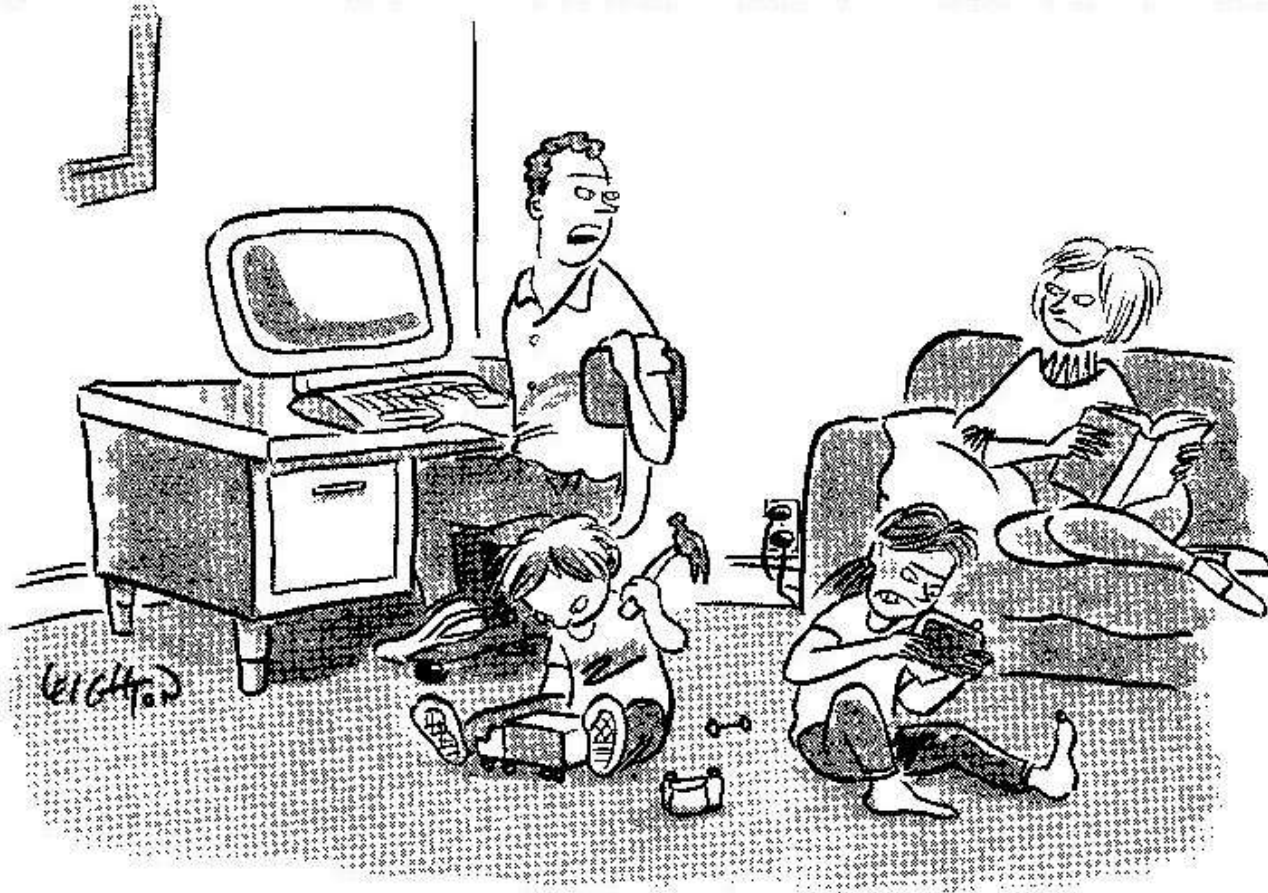


Under stress, they
(and we) will
regress

We need an understanding of

“the common processes involved in how anxiety-related problems develop and are maintained”

Eifert and Forsyth



“Me? I thought *you* were raising them.”

“There is no such thing
as a baby”

D. W. Winnicott

Anxious *Behavior*

Characterized by

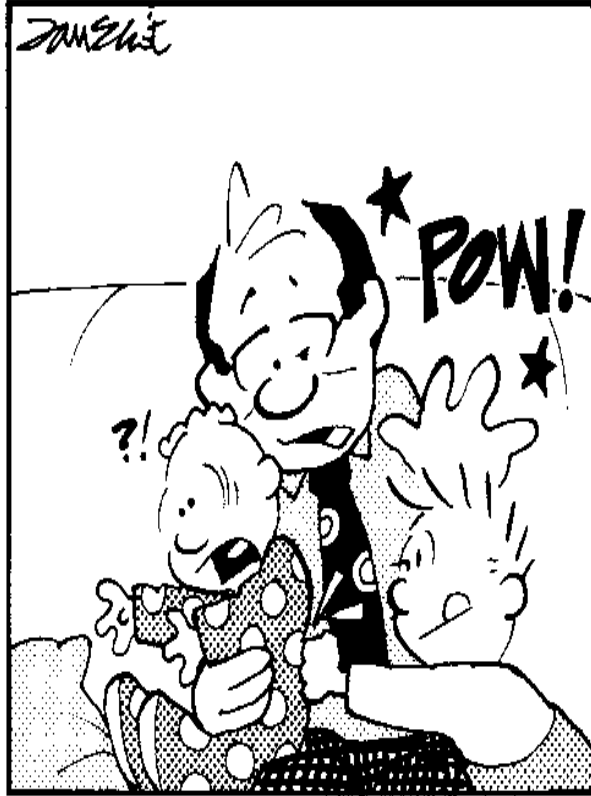
- Avoidance or escape (e.g., refusing to go to the park)
- Freezing up (not leaving adult's side once at the park)
- Attempts to get help (hitting adult or begging to be taken home)
- General distress and dysregulation (crying, anger, aggression, etc.)

The Anxiety Gambit

A child's anxious *behavior* invites (compels) the caregiver to participate in the anxiety as a witness, confidante, cheerleader, task master, lifeguard, *or most commonly, as a rescuer*



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The Anxiety Agenda

- *Anxiety behaviors* are an effort to engage the caregiver in *the anxiety dance*, in order to achieve ...
- Emotional Avoidance utilizing ...
 - Escape/Avoidance
 - Attempts at Control

The *Reactive Dance*

1. Child becomes distressed (and regressed)
2. Child, seeking rescue, acts out his distress in dramatic, regressed, or confusing ways
3. Parent becomes distressed
4. Parent seeks escape from this situation
5. The immediate goal *for both parent and child* becomes escape or control in the present, avoidance in the future

Stella and Dad's Dance: #26a

- Dad tells Stella to go upstairs to get her shoes and socks (knowing she's likely to balk, Dad is already tense)
- Stella stands at the bottom of the stairs for several minutes
- Dad comes to her and impatiently repeats the direction, telling her there's nothing to be afraid of
- Stella whimpers but does not budge
- Dad angrily grabs Stella's arm and leads her upstairs, or angrily goes up himself, angrily gets the damn shoes and socks, comes down and angrily shoves them on his daughter's feet

Sterling and Mom's Dance

- Minutes before they have to leave for school and work Mom announces there will be a change in the normal after-school routine that day
- Sterling becomes anxiously aroused; breathing increases, grimacing, clenching fists
- Tries to tie his shoelaces (a new skill). Becomes frustrated when not perfect
- Arousal increases
- Starts running in circles, shrieking "I'm stupid. I'm stupid"
- Mom comes into the room and repeatedly tells him to "chill out", getting louder each time
- Mom grabs onto Sterling and holds him until he calms down. They leave the house late.

Changing *The Dance*

1. Increase awareness
2. Change the focus of attention
3. Take values-driven action


A *Responsive* Dance

1. High-risk situations are identified and planned for
2. Aware of history, parent *is alert to* possible distress and regression in this situation
 - Child becomes anxious/fearful
 - Child, seeking rescue, acts out his distress in dramatic, regressed, and/or confusing ways
 - Parent becomes distressed, *but then...*
3. Parent acknowledges the anxiety/fear with specific language
4. Makes connections to the cause of the distress and to the child's current "wanna-do's"
5. Models distress tolerance
6. Orients the child to the original goal, coping skills, or to a viable solution to the *actual* problem, if there is one

S.O.B.E.R.

- Stop
- Observe
- Breathe
- Expand
- Respond

Study: Majority Of “Calm Downs” Ineffective

ITHACA, NY—A study published recently in the *Journal Of Mental Health* found that attempting to reverse a loud emotional display by asking an individual to calm down was effective only 9 percent of the time. Researchers at Cornell University’s behavioral lab induced anxiety in subjects by administering a series of electric shocks, after which everyone was told to “calm down” and “take it easy.” “We were surprised to find that not only were these phrases ineffective, but in an overwhelming number of cases they actually exacerbated the situation,” psychologist Kenneth Pulaski said. “Even when participants were told to ‘just take a deep breath,’ they became more and more irate and were eventually reduced to a screaming mess.” The study also concluded that telling someone to “just mellow out” would invariably lead to a researcher being punched in the face. 

Graybar's First Law of Human Behavior

“All behavior is a message, and a behavior won't begin to change until the person knows his message has been received”

Validation

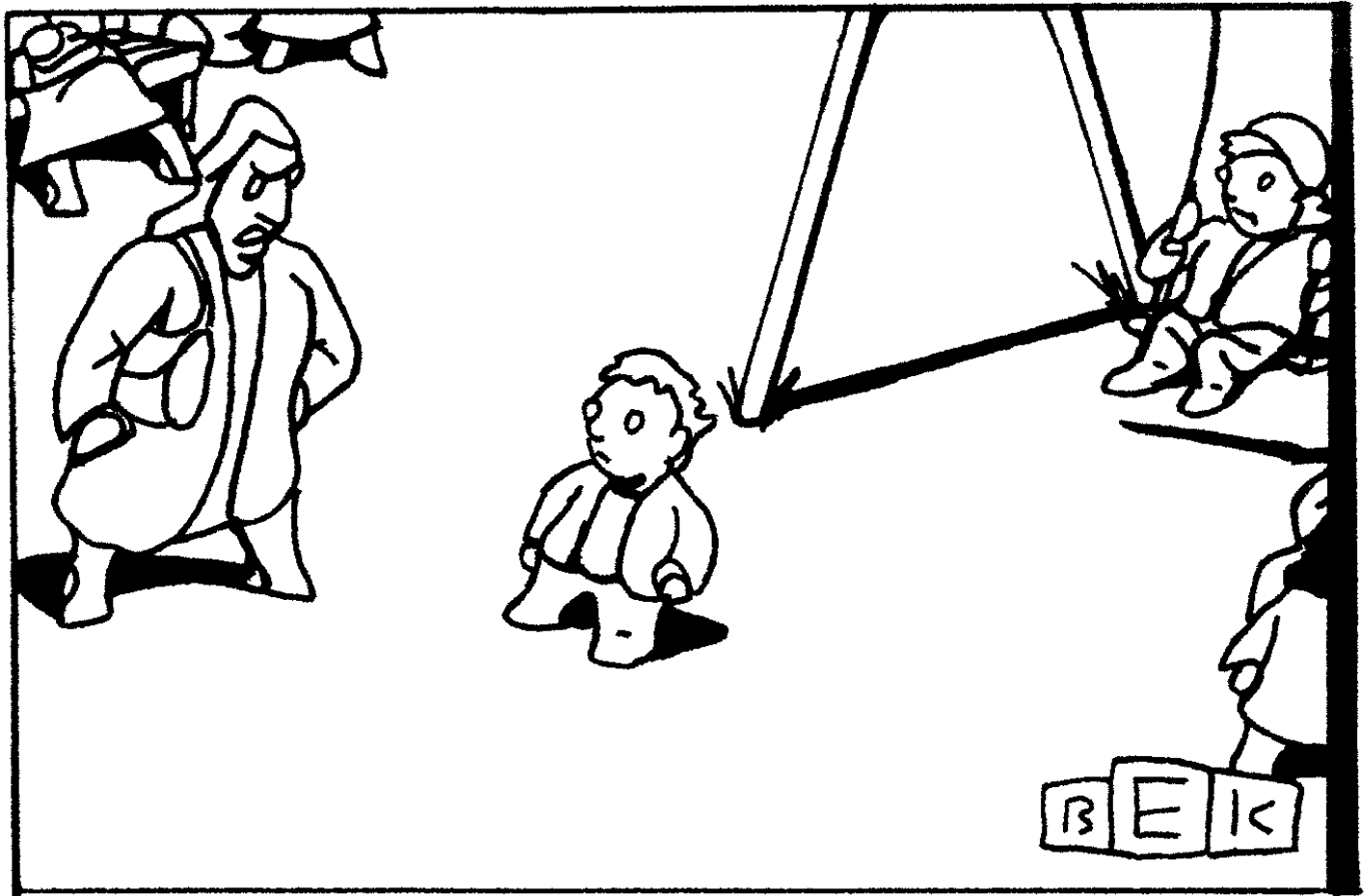
- Closes the communication loop: “message received”
- Provides accurate and nuanced emotional vocabulary
- Replaces ineffective *reassurance* in many situations
- Says nothing the “appropriateness” of that thought or feeling at the time

Validation

- Promotes *mentalizing* and undermines *fusion* and *psychic equivalence*
- Links outer events with private events and the *wanna-do's*
- Articulates the process; both currently and what's possible

Validation Strategies

- Simple and specific statements;
 - “You’re feeling ...”
 - “You’re having those ‘I can’t do it’ ideas”
- Identify expectations;
 - “You thought your friend would be able to have a playdate today”
 - “You weren’t expecting a fire drill today”
- “I wonder” and “Ah” statements



“Mommy needs to get mad at you in a weird calm voice now”

Whole Body Validation

Stella and Dad's New Dance: Phase One

- Dad tells Stella to go upstairs to get her shoes and socks
- Knowing Stella is likely to balk, Dad monitors the situation, especially his own thoughts and feelings
- Stella stands at the bottom of the stairs
- Dad notices right away and moves in quickly but calmly with slow breathing

Stella and Dad's New Dance: Phase One

- Dad says, “I wonder if you’re having those scary thoughts about upstairs right now”
- Stella nods, still whimpering
- Dad says, “Usually when that happens you want me to go upstairs with you. I will today, but you need to ask me to do that in your strong, clear voice”.
- Stella asks in a strong, clear voice. Dad accompanies her upstairs and they quickly retrieve the shoes and socks.

Locket Therapy

Sterling and Mom's New Dance

- Mom, knowing there's upsetting news to deliver, makes sure the morning routine goes as smoothly as possible giving Sterling lots of support and positive attention
- Mom begins her announcement by getting Sterling's attention, leaning in close, and saying, "I have something to tell you that might make you frustrated. [brief pause] Today's a special occasion and so after I pick you up from school today we will..... And then we'll get right back to our regular routine that you like. You can pick what we have for dinner tonight".

First Arrow – Second Arrow

- “Tunes up” the child’s defenses
- Warns him that some feeling or thought is coming his way along with some information
- Gives him specific and helpful words to use when thinking about the experience that’s about to come
- “Low ball” the emotion or thought

Sterling and Mom's New Dance

- Sterling becomes anxiously aroused; breathing increases, grimacing, clenching fists
- Mom says, “I can see that you’re feeling frustrated because we’re going to be doing something different this afternoon. I know you just *HATE* last-minute changes. Errrg, so frustrating. But right now I want you to breathe slowly, like we practiced, while I take care of those shoes”.
- Mom quickly ties Sterling’s shoes and gets them both out the door talking about the friends who are waiting for Sterling at school

The Role of Attention

The word “attention” comes
from the Latin *attendere*,
meaning
“to stretch forward”

As opposed to “vigilance”

The Attention Spotlight

- Orienting to an “affect neutral” stimulus: breathing, muscle tone
- Shifting attention from negative Feelings and ideas to actionable goals
- The “distraction paradox”

Breathing Exercises

- Belly Breath
- Finding Your Breath
- Ferris Wheel Breath
- Up and Over Breath
- Darth Vader Breath
- Alien Breath

“Defusion” Exercises

- Naming and Cataloging
- Emotional Vocabulary
- Boats on a River
- Center of the cyclone
- Anxiety Goggles

Emotional Vocabulary

- Angry
- Annoyed
- Frustrated
- Belligerent
- Indignant
- Dudgeon

“Defusion” Exercises

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The Curious Case of Stanley: When Your Child Isn't Anxious *Enough*

- Stanley, age 12, and cool
- Carries ADHD diagnosis
- Older academic superstar sister
- Procrastinates, work habitually turned in late
- The Source is never correct, unless the grades are good
- Deeply into team sports; somewhat more organized and responsible with related tasks

Stanley and His Parents' Dance

- Parents nag, cajole, and threaten when schoolwork isn't getting done
- Stanley retreats or lashes out or both
- Blames his ADHD or lack of "motivation"
- Complains about the "pressure"
- Parents back-off, frustrated
- Cycle repeats

Waiting for the Motivation Fairy



Graybar's Second Law of Human Behavior

He who cares least has the
most power

or

The more you care the more
you must be willing to bear

Projective Identification

The Hot Potato

Failure after *low effort*
results in guilt

Failure after *high effort*
results in humiliation

Which would you rather feel?

Gently, but Firmly, Hand Back the Potato

- ✓ “I imagine you’d be pretty anxious about your schoolwork if you let yourself think about it
- ✓ I’m guessing that’s why you try not to think about it
- ✓ So then you get mad at me for making you think about it
- ✓ That makes sense
- ✓ But it’s your job to think about it, and do something about it
- ✓ I’m here to help, but I can’t do it for you
- ✓ Have a nice day”

The Heartbreak of I.D.D.

Intention Deficit
Disorder

Commitment and Acceptance: Two Sides of the Same Coin

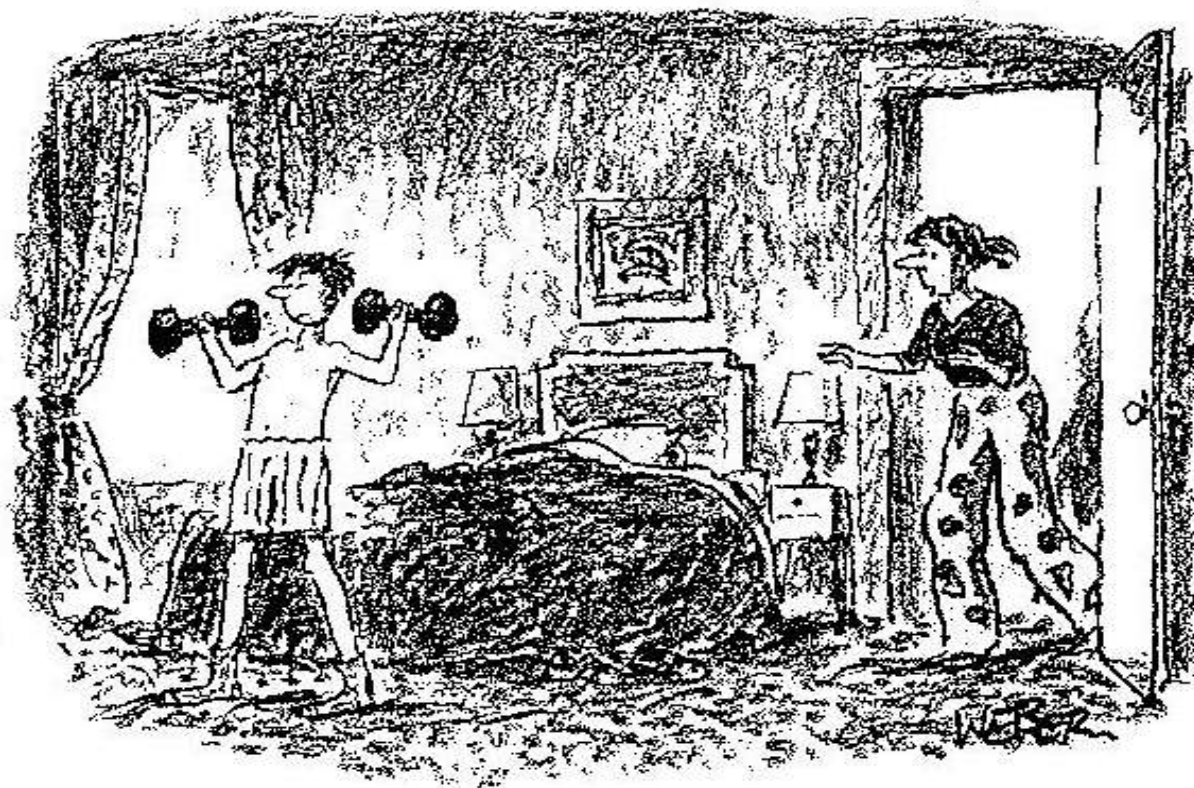
To Be A Good
Teammate

Effort, Anxiety,
Frustration,
Sacrifice,
Conscientiousness

Commitment and Acceptance: Two Sides of the Same Coin

To Be A Good
Student

Effort, Anxiety,
Frustration,
Sacrifice,
Conscientiousness



“Let me help you, dear.”

Carl Gustav Jung

“Life’s truly important problems cannot be solved, they can only be outgrown”

Parenting Your Anxious Child with Mindfulness and Acceptance

a powerful new approach to
overcoming fear, panic, and worry using
acceptance and commitment therapy



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