

Strategies to Cope with Middle School Stress and Anxiety

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PYLE MIDDLE SCHOOL-OCTOBER 19, 2017

Presentation Overview

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- How anxiety develops and what factors maintain anxiety
- The basics of behavioral change and anxiety reduction
- Practical strategies to promote positive behaviors and coping strategies
- Tips for parents on promoting a less stressful environment
- Q & A with a psychologist with child anxiety expertise

What is Fear?

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What is Fear?

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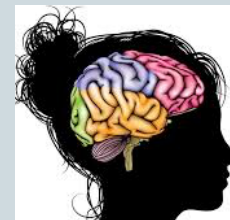
Fight, flight or freeze!



Increased
Heart Rate



Rapid
Breathing



Tunnel vision

What is Anxiety?

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- What's different?

Key Definitions

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Fear

- Emotional response to real/perceived *imminent* threat
 - ✦ Autonomic arousal necessary for fight or flight
 - ✦ Thoughts of immediate danger
 - ✦ Escape behaviors



Anxiety

- Anticipation of *future* threat
 - ✦ Muscle tension, vigilance
 - ✦ Preparation for future danger
 - ✦ Avoidant behaviors



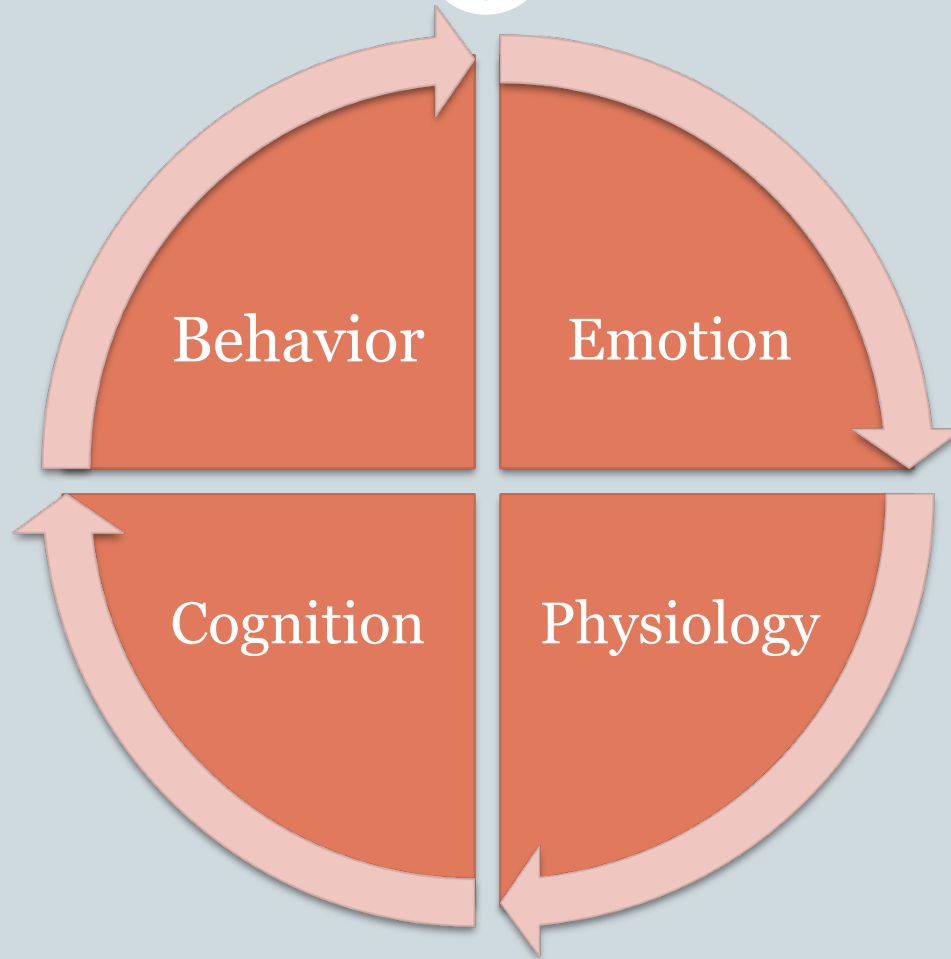
Stress

- Perceived environmental demands *exceed* perceived coping abilities



Components of Anxiety

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Physical Signs of Anxiety

“Is it a real alarm or a false alarm?”

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Rapid heart rate

Muscle tension

Shallow and rapid breathing

Perspiration

Dizziness

Stomachache; Headache;
Backache

Loss of sleep

Emotional Signs of Anxiety

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Fear

Anger, Irritability

Anxiety impedes positive emotions (i.e. happiness)



Cognitive Signs of Anxiety

“What if...”

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Frightening thoughts and scenarios

Misinterpretation of cues

“Tunnel-vision” – Focus on anxiety related thoughts

Exaggeration of the likelihood of negative events



Behavioral Signs of Anxiety

“Anxiety and Avoidance are Teammates”

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Avoidance \neq learning

Preference for familiarity and repetition

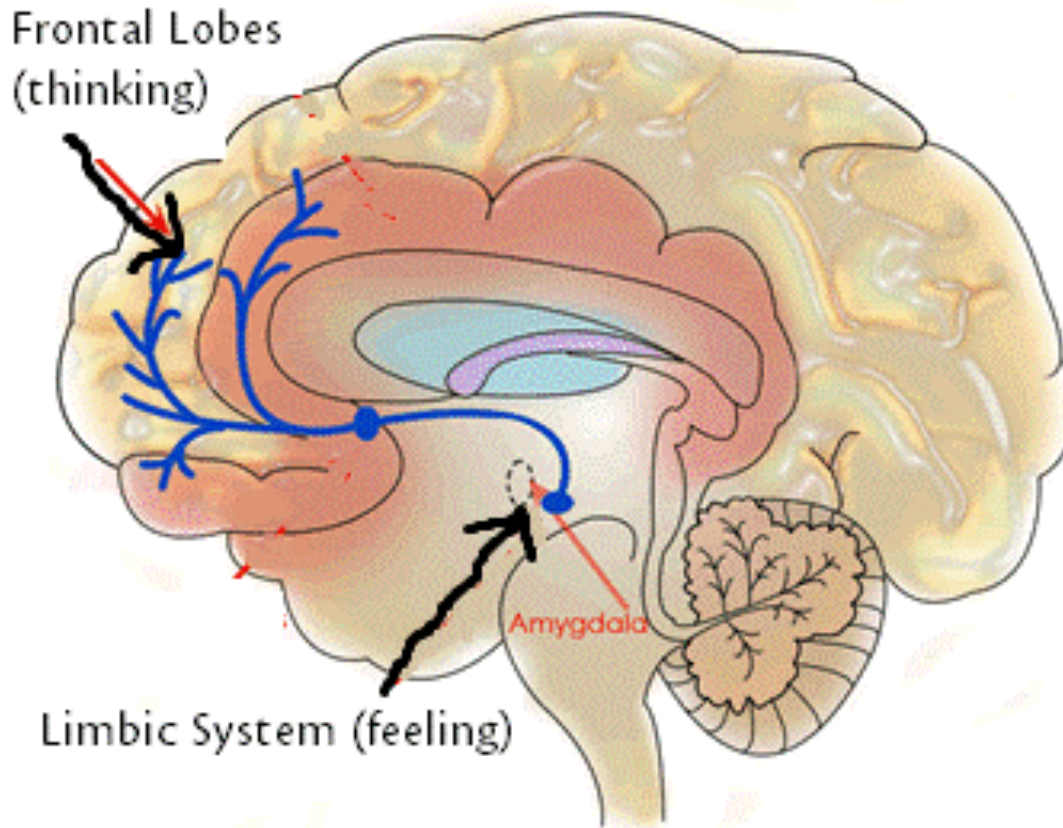
Heightened need for control



Biological Perspective

“Stay Frontal, Don’t Go Limbic”

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How Anxiety Affects the Learning Process

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Try to learn calculus right now!



How Anxiety Affects the Learning Process

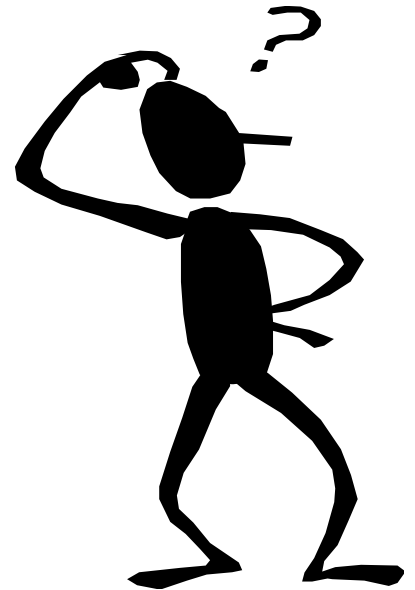
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- Working memory has a limited capacity
- Intrusive thoughts compete for limited resources
- Threat cues are prioritized in cognition
- Fatigue occurs more quickly
- Anxiety can sometimes look like inattention



What is causing *your* children anxiety?

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Anxiety Across Development

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❧ Elementary School

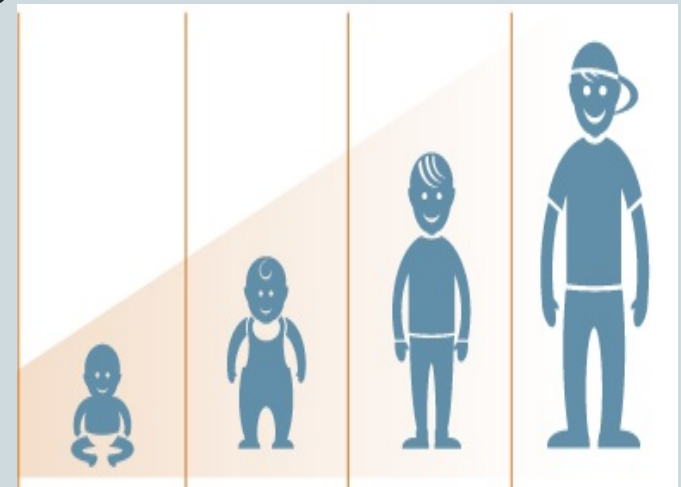
- ❧ Separation from parents
- ❧ Fear embarrassment, social fears
- ❧ Specific triggers (e.g., bugs, heights)

❧ Middle School

- ❧ Changes in demands for academics
- ❧ Social changes, acceptance
- ❧ Bullying

❧ High School

- ❧ College pressure
- ❧ Social pressure
- ❧ Time management



Anxiety is Typical For All of Us!

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- Adaptive, keeps us safe, can help us succeed
- Associated with new or unexpected events
 - 1st day of school, thunder
- Associated with uncertainty
 - Awaiting college decisions; results from medical tests
- Can be handled by self and/or minimal reassurance and encouragement from others

Typical versus Problematic Anxiety

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- What to look for?
 - Performance/behavior deterioration in functioning (school, social, family, physical):
 - ✦ Persistent aches and pains
 - ✦ Sleep difficulty
 - ✦ School work deterioration
 - ✦ High rate of absenteeism
 - ✦ Social isolation
 - ✦ Refusal to attend parties and events



How are children impacted by anxiety disorders?

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Prevalence of Anxiety Disorders

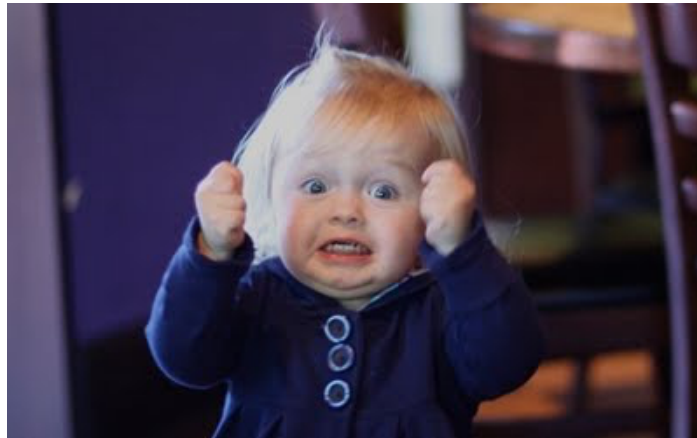
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- **40 million** U.S. *adults* suffer from an anxiety disorder
 - 75% experience 1st episode of anxiety by age 22
- **1 in every 6** *college students* have been diagnosed with or treated for anxiety within the past year (American College Health Association, annual national survey)
- **30%** of *teens* ages 13-18 will an anxiety disorder
 - 8% will have a “severe” anxiety disorder
- Mean age of *onset* is **11**– earliest of all mental health conditions
- Only **18 %** of youth receive treatment

The Good News...



Coping strategies can help!



Your children are already coping!

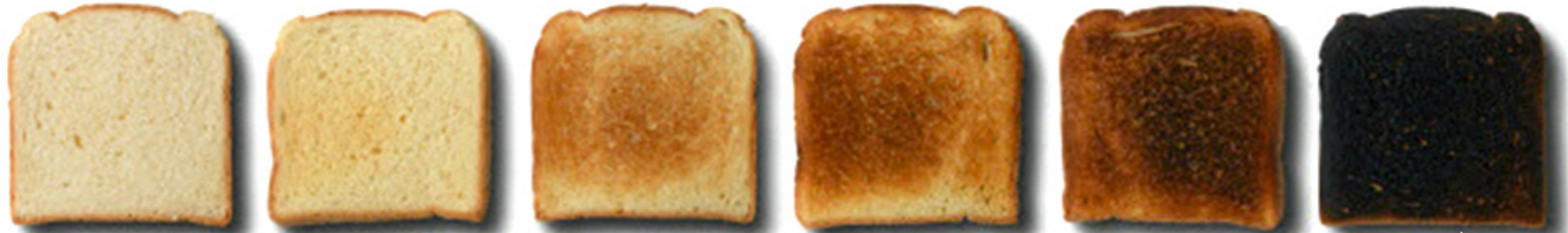
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**What stress management
strategies do your children
currently use?**

Individual: Recognize Signs of Anxiety

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How can you tell you are getting crispy?

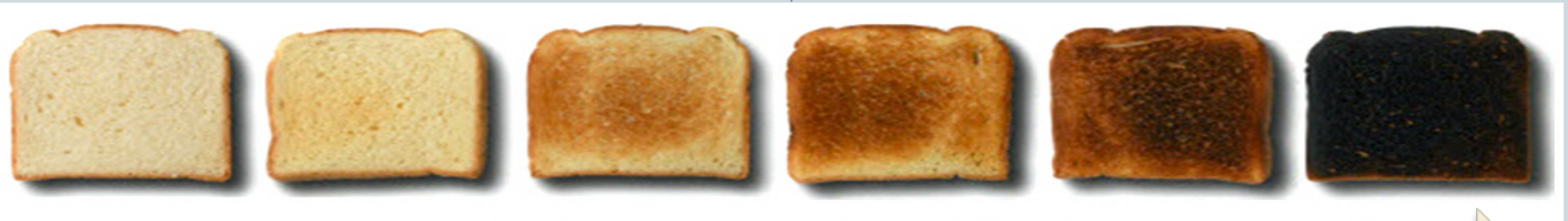


Low

High

Individual: Identify What Works and *When*

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Low

High

- Deep breathing
- Squeeze stress ball
- Take a quick break
- Text/talk to a friend

- Meditation
- Exercise
- Step away until calm
- Ask for help

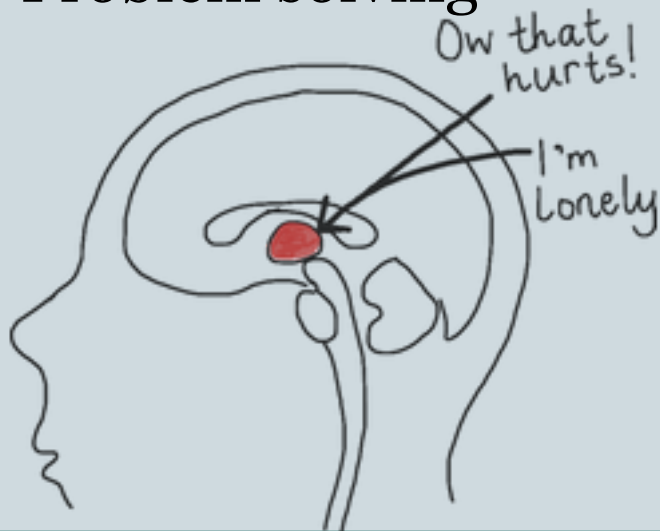
Individual: Label *your* Emotion(s)

“Stay frontal, don’t go limbic!”

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Why?

- It *decreases* the intensity of the emotion
- And *jump starts* your frontal lobe
 - ✦ Logic, reasoning
 - ✦ Problem solving



Individual: Avoid Avoidance, Face your Fear

“Courage is what you do, not what you feel”

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- Exposure to the feared situation in the absence of the feared consequence produces fear reduction
- Take it slow or jump right in



Individual: Graduated Exposure

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- Akin to entering a cold pool slowly
- Preferred technique for most pediatric anxiety disorders
- Child co-creates the fear hierarchy
- Child earns more points, tokens, etc. for more difficult exposures



Individual: Reframe Thoughts to Reduce Anxiety

“Don’t believe everything you think.”

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- Reframe anxiety as “false alarm” that is an annoyance
- Label the anxiety as a “bully”
- Coping thoughts (coping card)
 - “I am stronger than fear”
 - “Anxiety is what I feel, it’s not who I am”
- Mindfulness
 - “Watching thoughts”



Individual: Coping Card Example

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- “Fear is temporary and harmless”
- “Scary thoughts can’t hurt me”
- “Just because I feel scared doesn’t mean anything bad is going to happen”
- “Just because it feels hard doesn’t mean I can’t do it”
- “I’ve managed difficult situations before”
- “When I feel challenged, it means I’m working hard”
- “I am stronger than my fear”

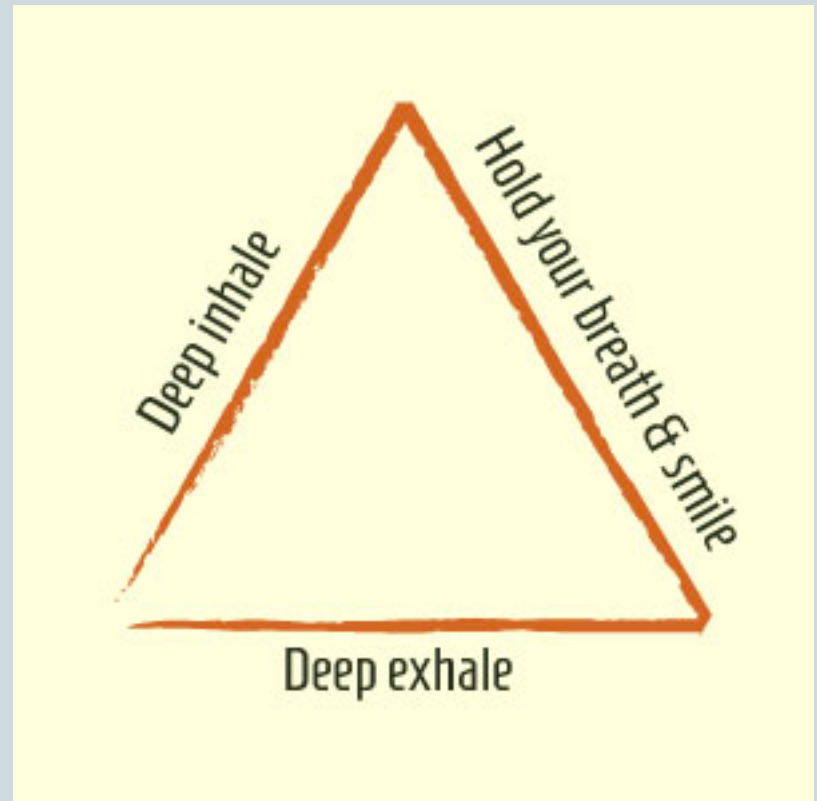


Individual: Relaxation Strategies

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- Diaphragmatic Breathing
 - Breathe2Relax app
- Mindfulness
 - Headspace app
- Muscle relaxation
- Exercise
- Self-care



What strategies do you currently use to support your children?

Parent Management Training

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- 40% of parents of children with anxiety disorders have also had an anxiety disorder
- Caregivers are often complicit with child's avoidance and perceive the child's experience of anxiety as dangerous

Video - Parent Training

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When child is distressed, keep in mind...
“Anxiety is temporary and harmless, but avoidance can ruin lives”

[Video - Ray Charles](#)



Parent: Setting Limits

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Video: How Not to Talk to Someone with Depression

- ❑ Focus more on contingency management than punishment because, punishment:
 - ❑ Often more linked to parent mood than child behavior
 - Kids get use to it, and parents escalate the punishments
 - Teaches kids to do things covertly
- Focus on **consistency** instead of the **intensity** of the punishment



Parent: Positive Reinforcement

“Water the Seeds and Not the Weeds”

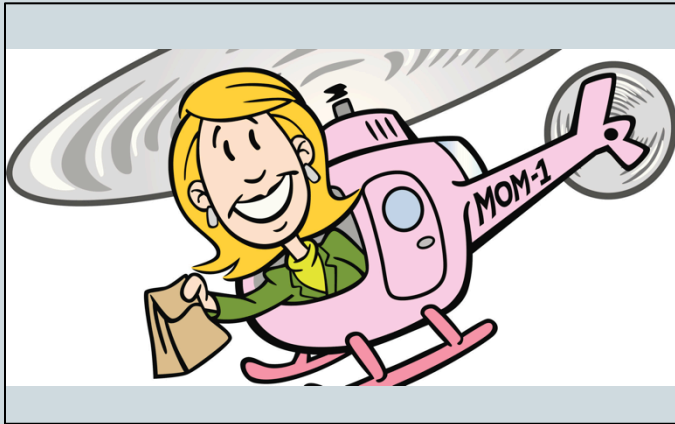
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- Labeled praise
- Focus on process versus outcome
- Attend to positive behaviors

Parent: Defining Parent Role

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Vs



When to look for help

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- ⇒ Emotional hygiene
- ⇒ Sudden changes in behavior
- ⇒ Avoidance of normal activities
- ⇒ Excessive irritability
- ⇒ Frequent somatic complaints
- ⇒ Social isolation
- ⇒ Child asks for help
- ⇒ Safety concerns
- ⇒ Trust your instincts!



In Closing...

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- Anxiety is typical for all of us
- Not all anxiety is an anxiety disorder
- A small dose of anxiety can spring us into action
- A large dose of anxiety can *interfere* with social and emotional development as well as learning processes
- Early *identification and intervention* can help children foster learning potential and emotional health



Thank you!

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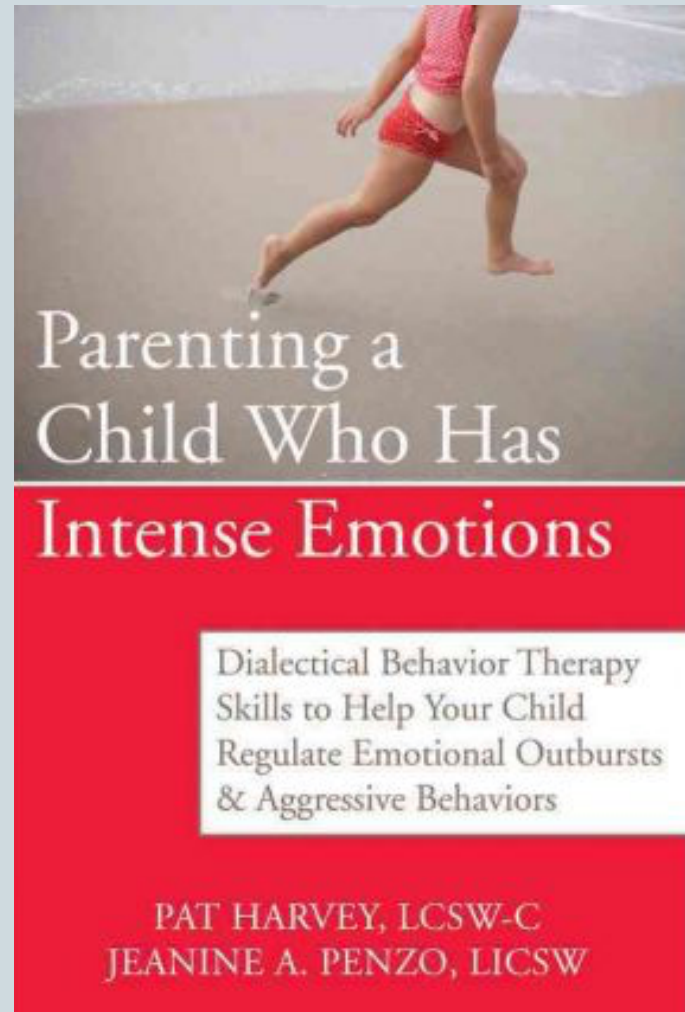
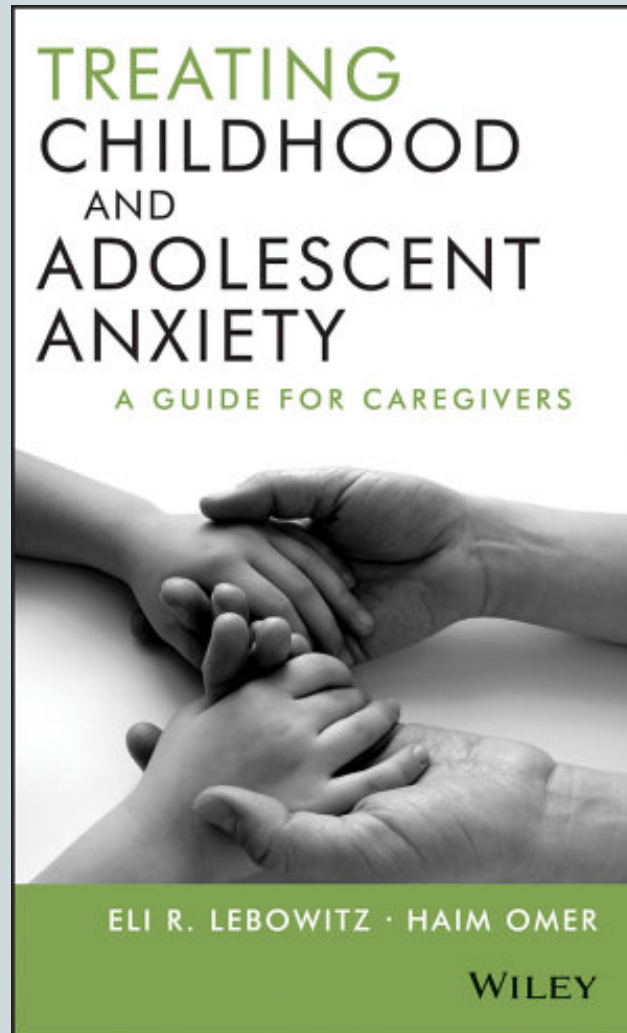
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Additional Resources

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Notes from Presentation by Dr. Lindsay Scharfstein of the Center for Anxiety & Behavioral Change
Pyle Counseling Advisory Committee, October 19, 2017

Please note: these notes were compiled by a parent during the presentation to capture some of the comments by Dr. Scharfstein and other parents in the room; this document is intended as a helpful supplement to the presentation slides (also available as a PDF on Pyle's website), but are not comprehensive and were not written or reviewed by Dr. Scharfstein.

Anxiety manifests in different ways but is often associated with behavior issues, frustration

- What is Fear? (slide 4)
 - An emotional response to imminent danger – how would you feel if a tiger charged into this room?
 - Reactions to fear are fight, flight or freeze (an evolutionary strategy to help you think through what is best for you to do next).
 - Fear triggers physical responses. There are evolutionary reasons our bodies respond this way. For example, increased heart rate and rapid breathing bring more oxygen to help your brain and body be more capable of responding to a threat; sweat makes you a slippery target for predators and cools you down.
- How is anxiety different from fear? (slide 6)
 - An emotional response in anticipation of a future threat
 - Future-oriented – what if....I get in trouble, don't get invited to the party, trip in front of everyone in the cafeteria, etc.
 - Your body is responding appropriately if you were facing an imminent threat, but in the case of anxiety, the threat is anticipated; "having a tiger response to a kitten"
 - Explain to a child: your body is responding, but doesn't always get it right. Your mind may trick your body into a fear response, even if fear isn't warranted (no imminent danger, real or perceived)
- Stress is the amount on your plate compared to what you think you can cope with
- Components of anxiety (slide 7)
 - Anxiety has a bad rap, but some anxiety is helpful – e.g., drives preparation for tests
 - Anxiety can also be unhelpful, can lead to avoidance, e.g., kids afraid of making mistake, so won't raise their hand
- Ask your kids – where do you feel anxiety in your body? Help them learn the physical signs. (slide 8)
- Anxiety may be expressed as anger, irritability (slide 9-11)
 - E.g- if you're anxious about preparing for an upcoming test, you'll react negatively if someone adds something to your plate, like a chore or more homework
 - Can dampen other positive emotions
 - If they're nervous about a test, may not laugh at your jokes
 - When anxious, people are likely to think about worst-case scenarios
 - Example for parent to consider: what would you think if you were summoned to your boss' office at the end of the day? Most of us are more likely to be anxious (to expect to get fired) rather than optimistic (to expect a promotion).

- Analogy for child: Even if it's not likely that no one will talk to your child at a party, your child will still think it's a real threat. Leads to avoidance.
 - Work with your child to recognize that their thoughts are just thoughts; "it probably won't be as bad as you think. Be brave, and figure out how you'll cope with it." Parent should reassure child that they can cope; give them confidence in their ability to handle tough situations.
- Brain development (slide 12) – "thinking" part of brain doesn't fully develop until we reach our mid-20s; middle schoolers' brains are much more driven by feeling
- Kids are so worried (what does that person think of me?) it can be distracting; corollary is if you are distracted at work because you are thinking about a big meeting, a family event, etc. (slides 13-14)
- Discussion moment: what is causing your children anxiety? (slide 15)
 - Parents in the room offered: kids anxious about too much work, not enough sleep, too much stress, making friends, being included, irreconcilable tension between being unique and fitting in at the same time.
- Remember – anxiety is healthy! (slide 17)
- As a parent, how do I differentiate between normal anxiety and problematic anxiety? (slide 18)
 - Healthy – anxiety propels child to study for test, but they still come to dinner, sleep well
 - Problematic – freeze and can't study, beg you not to go to school, refusing to do things they like to do; physical symptoms like stomachache
 - Use your gut instincts – you know your kid best; is this a departure from their normal behavior?
- Treatment should always include "exposure" – if your child is getting treatment but not doing "active practicing" in treatment, find someone who does it. E.g. Center for Anxiety & Behavioral Change (Dr. Scharfstein's practice) takes kids into stores to face real-life situations such as asking a store employee how much things cost. They also have kids, as part of treatment, ask ridiculous questions of strangers so they can see that they can cope; e.g, ask in the library where the library is, ask someone on the street "where is Rockville?" (slide 21)
 - Want them to experience mistakes
 - After they've done it, ask the child to consider, "How long will that person be thinking about your embarrassing question?" 2 minutes? 3 minutes?
- Discussion moment – what coping strategies do people use? (slide 22) Parents in the room offered:
 - Going outdoors; playing sports;
 - Netflix – immerse herself in electronic device to help her relax; provides immediate reinforcement; parents recognize need for limitations, but can be very positive in moderation
 - Escape into mindless internet surfing; ditto on positive in moderation
 - Animals - Hugging the dog; Horseback riding
- Ask kids to recognize signs that emotions are building – where do you feel anxiety in body? (slide 23)
 - what do you feel when you're 10 out of 10 nervous vs 2/10? Ask child to try to identify the "2 out of 10" signs, so they can start to cope and, ideally, prevent the rise to 10
 - Devise strategies for coping at each level: 2/10 – may be deep breathing

- At 5/10 – right strategy may be to talk to a friend
- At 10/10 – earlier strategies (e.g., deep breathing) may not help! At that level, sometimes need to just ride it out and know that you will get through it
- If one hasn't been looking for early warning signs and always been attempting coping strategies at 10/10, they may feel that coping mechanisms are ineffective. E.g., deep breathing may be perceived as unhelpful because it's attempted too late.
- Practice the strategies at lower levels of stress and anxiety – don't always pull them out at top levels of anxiety
 - Also, explain to child there may be a delay before the strategy works; doesn't always help you right away – like a Tylenol – may take 30 minutes
- Ask kids to label emotions – express what they're feeling (slide 25)
 - Need to be a role model on this: parents should cope out loud in front of kid. Use “I feel...”; “I get stressed when xyz happens”, “I'm excited to watch you play” – empowers your child to use emotional vocabulary
- Avoid avoidance
 - Analogy of slowly getting into a cold pool step by step (slides 26-27) – if you dip your toe in and walk away and then try again in 5 minutes, the pool still feels just as cold; if you step onto the top step and wait 5 minutes, you will adapt to the temp and feel ready to step to the 2nd step
 - the temp of the pool doesn't change but your body adapts; when you encounter things that make you nervous, going away (avoiding it) won't make it easier to eventually face – the situation doesn't change, but if you summon the courage to take the first step, your body will adapt to it and become more comfortable
 - Parents should reward/ positively reinforce courage in the face of exposure
- Reframing (slide 28)
 - Consider how you would feel hearing a fire alarm in a skyscraper without notice (fear-sign of imminent danger) vs if someone told you there would be a fire drill (no fear)?
 - Ask child to consider: How do you predict when you might feel nervous?
 - This is a false alarm; anxiety is an annoyance
- Discussion moment– what are ways you naturally support your kids? (slide 31) Parents offered:
 - Giving undivided attention, listening, letting them talk
 - “Catching the wave” when it comes (often at bedtime; letting them work through the anxiety)
 - Hugging – some kids really benefit from physical contact
 - Talk through worst- case scenario – what will really happen if you do fail the test? Will that keep you from going to college? How will it affect you later in life? Is the consequence truly as bad as you think?
 - Note from Pyle Counselor Becky Best
 - Pet therapy dog that comes to Pyle routinely
 - Mindfulness during TAG 2x per month – first one coming up on 11/1/17
 - Q from a parent: what about the kids who think they don't need strategies?
 - Turn it back to them – what do you think will work?

- Verbally recognize every time you see them doing something to cope – “great to see you handled that test/ party well. How did you do that? What was most helpful?”
 - Explain there are a lot of different options for coping
- Parents need to model that everything is fine – show you that we are safe and not worrying (slide 32)
 - Example of toddler who falls and looks to parent for reaction– do you fuss with concern over possible injury versus saying “oopsie” and redirecting to a toy?
 - What is the hardest part for you as a parent (Ray Charles clip)? Very hard to watch child struggle, but you need to let it happen, so they know they can handle it on their own.
- Never want to shame someone for feeling pain or anxiety (slide 34)
 - As parent, must recognize that feelings are real; validate their experience, but communicate “I know you’ve got this” – tricky balance
 - Center for Anxiety & Behavioral change doesn’t advocate punishment; encourages giving attention to successes and positive steps rather than giving attention when they’re struggling

Contact information for presenter:

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