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| Generalized Anxiety Disorder  2018 |
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# Glossary

* Cognition –a mental action that occurs when you learn, think, experience, when you take information in
* Stress –a mental or emotional strain
* Anxiety – nervousness and uneasiness about a future event.
* Emotion regulation – the ability to control our emotions and actions to prevent doing or saying something considered hurtful or wrong by those around us.
* Internalizing – the anxious thoughts and stress takes place in someone’s mind
* Avoidance – a behavior that escapes or avoids feelings of stress or anxiety.
* Prevention – action taken to stop something from happening or arising.
* Interventions – action taken to improve a situation

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| ResourcesArticle Resources Jarrett, M. A., Black, A. K., Rapport, H. F., Grills-Taquechel, A. E., & Ollendick, T. H. (2015). Generalized anxiety disorder in younger and older children: Implications for learning and school functioning.*Journal of Child and Family Studies, 24*(4), 992-1003. doi:10.1007/s10826-014-9910-y  Children can have different ideas about the future whether they are in middle childhood (6-11) or adolescence (12-17). This means that their worries often change in adolescence to worries surrounding social performance, or even fears about death. However, this does not mean there is a distinct difference between ages because children go through different experiences and may have various worries as a result of these unique experiences. Thus, teachers should be careful when observing a child struggling with GAD. When a student has GAD, these worries are complex and often develop into more than one symptom. Further, students with GAD could be vulnerable to having other disorders at the same time such as depression or social phobia. If you are concerned about a child, speak to the school counselor, learning or emotional support person, or school psychologist. Don’t immediately assume the child has a disorder, keep track of what you see and talk to someone first.  Maslowsky, J., Mogg, K., Bradley, B. P., McClure-Tone, E., Ernst, M., Pine, D. S., & Monk, C. S. (2010). A preliminary investigation of neural correlates of treatment in adolescents with generalized anxiety disorder.*Journal of Child and Adolescent Psychopharmacology, 20*(2), doi:105-111. 10.1089/cap.2009.0049  The current study took place in a hospital and a therapists’ office. For this study, the authors were interested in a type of therapy called Cognitive Behavioral Therapy (CBT) and a type of medicine called fluoxetine. The medication changes areas of the brain to decrease anxiety and increase normal day-to-day tasks. CBT helps an individual decrease anxiety by teaching them skills to relax, cope, and change negative thoughts. The researchers found that both the treatments helped the patients have better control over their anxiety.  Moran, K. (2016). Anxiety in the classroom: Implications for middle school teachers, Middle School Journal, 47:1, 27-32, doi: 10.1080/00940771.2016.1059727  Much research encourages prevention by giving teachers lessons for their classroom on what anxiety is, relaxation strategies, and positive self-talk. Teachers can also help by observing signs and symptoms a student is experiencing to give to the school psychologist. To begin, teachers can help students directly by providing a consistent routine for everyone. Creating an environment and giving positive comments that are encouraging effort (task-focused) rather than ability. For example, giving more group activities as opposed to individual work could inspire positive peer interaction and decrease competition and stress. Additionally, teachers can allow a student with GAD to sit closer to the door and give them a pass to quietly exit the classroom when experiencing difficulties with anxiety. Similarly, teachers can give copies of a selected students notes if student misses class time. Tests are also a source of anxiety; allowing for extra time or a quiet environment could help considerably. Research has also found that writing down one’s fears ten minutes before a test helps reduce anxiety. Giving these small supports to students shows that you want them to succeed and helps them control their anxiety.  Tomb, M., & Hunter, L. (2004). Prevention of anxiety in children and adolescents in a school setting: The role of school-based practitioners.*Children & Schools, 26*(2), 87-101. doi:10.1093/cs/26.2.87  Research has found that disorders involving anxiety begin to show in childhood and adolescence. Anxiety that disrupts daily life can be detected in many parts of school. For example, disruptive anxiety can be seen through learning, achievement, increased aggressive moods to oneself. This is also shown through relationships with teachers and other peers. Therefore, teachers are crucial in the effort to find and prevent anxiety in children. The school setting is an ideal place to use strategies to prevent the development of anxiety disorders. Tomb and Hunter found multiple programs that teachers can use to help to prevent disorders from developing and aide students that already have a disorder.  One preventative intervention Tomb and Hunter recommend is Ready, Set, R.E.L.A.X. This intervention is for all students to learn strategies to cope with stress and anxiety. Another prevention intervention is School Transitional Environment Project (STEP) which helps children when transitioning from one school environment to another such as elementary school to middle school. This research is based on the fact that much anxiety comes from transitional periods that disrupt routine. FRIENDS for children is another prevention intervention that targets children at risk for anxiety disorders. FRIENDS (Feeling worried?, Relax and feel good, Inner thoughts, Explore plans of action, Nice work, reward yourself, Don’t forget to practice, Stay cool) was created to help children remember coping strategies. Parents are also involved to learn some of the strategies their child is learning. Website Resources http://www.nasponline.org/resources-and-publications/resources/mental-health/mental-health-disorders/anxiety-and-anxiety-disorders-in-children-information-for-parents  This website is a great resource for understanding what anxiety is, signs of anxiety, and different anxiety disorders. They also list great school- and home-based interventions.  **https://www.nami.org/Learn-More/Mental-Health-Conditions/Anxiety-Disorders/Support**  Similarly, this website also discusses what anxiety is and types of anxiety disorders. This website also covers professional treatment options for anxiety disorders. Importantly, the website mentions what those with anxiety can do to support themselves, and what others can do to support family or friends with anxiety disorders.  **https://www.nimh.nih.gov/health/topics/anxiety-disorders/index.shtml**  Finally, this website goes into depth with professional treatments of anxiety disorders. They also describe symptoms and risk factors for anxiety disorders. |

# Case Study

Part 1

Consider the case of 16-year old Maya. She is a 10th grader, has high grades, and is a hard worker. Her parents have high expectations for her to succeed in school and often talk about her future after high school. Additionally, Maya has even more pressure because her two other older siblings have difficulty with school. Maya constantly worries about school and future, and it has been this way ever since she started earning grades. Recently, Maya started having trouble with back pains and has trouble breathing normally while thinking about goals and her future. Her teacher, Ms. Park often notices that Maya is staring out of the window, vigorously tapping her foot, and not paying attention. Recently, it has been so bad that Ms. Park had to repeat herself more than four times in a short conversation. Ms. Park is also concerned because Maya has been making careless mistakes in her assignments and gets angry with Ms. Park when she takes off points.

Part 2

Now we will revisit the case with Maya. By learning information about generalized anxiety disorder and Maya’s individual case, Ms. Park can now recognize when Maya is becoming anxious when she has trouble concentrating, especially during conversations, when she complains about her back pain frequently, and when she fidgets during class lessons a lot. When these signs appear, Ms. Park can let Maya take a break, reminder her to use her coping strategies, and offer her a time to talk about it further. Now that Ms. Park understands her unique situation and symptoms, she is able to recognize Maya’s difficulties and be more patient with her. Ms. Park praises Maya’s efforts and success often, and she gave Maya a special job that helps her keep her mind off of other work and lets her interact with her peers more. Ms. Park also helps Maya plan and make realistic goals for herself. Lastly, for the entire class, Ms. Park ensures that the daily schedule is posted, any changes are made every day and discussed the day prior. She gives rubrics to each assignment that details expectations and reminds students to ask questions during free time.

Now Maya is able to manage expectations and create attainable goals with her teacher and family. She is learning how to organize her time and materials, while giving herself breaks. Maya is able to recognize when she is feeling anxious and go talk to someone when she is overwhelmed. If she is not ready to talk, Maya can find a quiet area and implement breathing strategies she learned with the school psychologist. Maya continues to work every day to change negative thoughts to positive thoughts.

# FAQ

*What is the difference between students that have GAD and normal anxiety?*

If you look at the student’s age and developmental level and behaviors are not typical, this could be one sign. Also consider if the behavior is unsuitable or extreme for the current situation. Finally and crucially: as the DSM states, the symptoms must persist for at least 6 months. If a child is showing warning signs, consider taking steps to prevent further development as discussed throughout this handout and PowerPoint. Crucially, if you are concerned about a child speak to the school counselor, learning or emotional support person, school psychologist. Don’t immediately assume the child has a disorder, keep track of what you see and talk to someone first.

*How long does GAD last?*

GAD tends to be chronic. Symptoms may come and go, especially when left untreated. Teaching coping skills early and having understanding adults present can help students learn how to deal with their symptoms and increase the chance of recovery.

*What are treatments for GAD?*

Treatments include psychotherapies and different medications. Cognitive behavior therapy (CBT) is a popular psychotherapy that has shown great success in individuals with GAD. To learn more, you can go to <https://adaa.org/node/1393>

*There were a lot of different solutions, where do I start?*

Start with the child. Each child is unique, as is their anxiety. Understanding their case can give you great insight into what to start with. Keep in mind that what works for one child, may not work with another. Also, if something does not work, keep trying new things. Asking the child what they need could help you and give them a sense of control over their problems. To read more about how children can self-advocate, go to the following website and click on “Student Self Advocacy Booklet”. <https://www.sbbh.pitt.edu/For-Professionals/9/default.aspx>