Addressing Anxiety: What Works and Why?

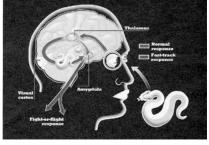
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Anxiety Versus Fear

- The words "anxiety" and "fear" are often used interchangeably. In clinical usage, they have distinct meanings:
- "Anxiety" refers to an unpleasant emotional state...the cause is not readily identified or the person perceives it as uncontrollable or unavoidable.
 - Anxiety is experienced when the danger "MIGHT BE"
- "Fear" refers to an emotional and psychological response to a recognized external threat
 - Fear is experienced when the threat is REAL and IMMEDIATE

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How Fear is Registered By the Brain



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Anxiety Feels Uncomfortable

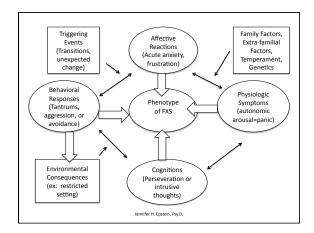


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Anxiety Symptoms in FXS

- ❖ Severe social anxiety, gaze avoidance
- ❖Shyness, frequent worry about social events
- Panic attacks during major transitions or in response to aspects of environment
- Trouble initiating contact-often have difficulty seeking help because of shyness, sometimes may avoid interaction with others, may need frequent social reassurance)
- Obsessive thoughts, repetitive routines

Hyperarousal in FXS EXS Neurobiology Avoidance Sympathetic hyperarousal GABA inhibitiory system is underactive Amygdala hyperconnectivity Poor sensory habituation Hagerman, 2007 Jennifer M. Epstein, Psy.D.



Hyperarousal Leads to a Disorganized State

- · Poor sensory modulation
- · Reduced attention
- · Decreased self regulation
- · Decreased ability to learn
- Decreased access to language
- Increased behavior problems



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Behavioral Signs of Anxiety in FXS

- · Increased handbiting
- Handflapping
- Increased movement such as pacing
- Difficulty modulating voice/behavior
- Flushing

- Tantrums
- Cursing
- Refusal/decreased involvement
- Increased verbal perseveration
- Expresses frequent worries

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Triggers that Increase Anxiety

- · Loud noises, strong lighting, crowds
- · Novelty, new situations, new people
- · Transitions or deviation from a routine
- Performance situations
- Being the focus of direct attention, even if it's praise
- Situations involving confrontation or conflict

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Two Types of Intervention Planning

- First: Prevent escalation of anxiety and maladaptive behavior patterns by planning ahead and using effective strategies to increase predictability, remove triggers for anxiety, preteach calming and coping strategies
- Second: Crisis management, Emergency interventions for when it is too late and anxiety is too great for adaptive functioning or appropriate behavior

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Plan Ahead

- We use our knowledge of FXS emotional, cognitive and behavioral phenotype to plan ahead so that anxiety is reduced and supports are in place
 - Provide support for sensory modulation/arousal
 - Create predictable, functional routines supported by visual schedules and visual supports
 - Teach relaxation strategies that help calm the body and mind
 - Provide support for communication
 - Teach using simultaneous processing

Building a Feeling Vocabulary

- · Pictures to teach identification of feelings, vocabulary
- Books to teach about feelings and situations
- · Label the child's emotions (you look happy, sad, mad) to help them internalize the vocabulary with the feeling
- Use of feeling thermometers that allow them to identify feelings regardless of delays in expressive speech

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Visuals to Communicate about **Feelings**



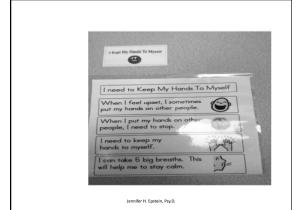
The Incredible 5-Point-Scale, Kari Dunn Buron, 2012.

Social Stories Curriculum-Developed by Carol Gray

- ♦ Method of teaching rote skills using individualized stories:
 - ♦ Teaches specific social skills
 - ♦ Teaches a new skill to replace problem behavior
 - ♦ It is easily implemented across settings
- ♦ Works for many types of individuals:
 ♦ weak social skills

 - ♦ fragile x syndrome
 - †autism spectrum disorders
 - ♦ non-verbal learning disorders
 - ♦ a variety of ages and abilities

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Anxiety Management Techniques

- Teach your child to relax
- Children with FXS and autism can learn calming strategies such as deep breathing or progressive muscle relaxation
- Practice a relaxation routine before you need it, so that it is possible to use it when things become intense.
- Calming music, chewing gum, drawing, thinking of positive things can also provide calming input or distraction
- Provide rewards for practicing skills

Suggestions to Practice Calming

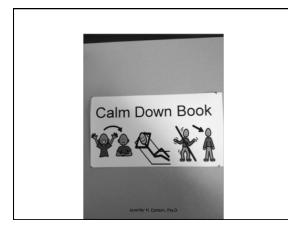
- Model taking 3 deep belly breaths before transitioning from one activity to another, especially before something that takes effort
- Practice blowing bubbles, feathers, or blowing through straws to emphasize taking in a belly breath, use scents to encourage breathing
- Have stress balls or koosh balls ready to squeeze to differentiate between tensing and relaxing
- Teach stretching

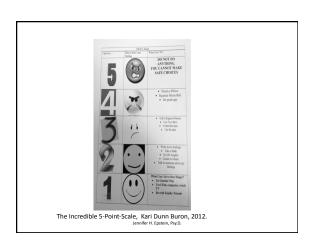
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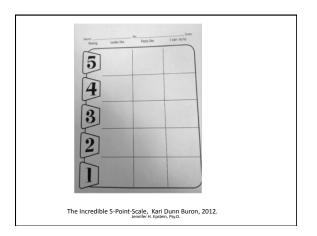
More Suggestions

- Use humor
- Teach visualization/imagery (use a concrete picture of a favorite activity or place that child can look at to think positive thoughts)
- Sing a song for distraction
- Have a mantra for breathing "breathe in relaxation breathe out the tension"

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...When It's Too Late

Anxiety is Increasing

- Pay attention to signs of increasing anxiety
- Intervening at the start of the cycle is much more successful than after anxiety has reached "panic"
- Watch for physical signs: overstimulation or increased anxiety
- Use effective calming techniques early in the sequence
- · Attempt to distract or redirect to new activity

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Once Anxiety Has Arrived....

- Try to interrupt perseveration-reflect back how he is feeling and attempt to help him move on to the next activity or event
- "Reframe" her perception- I know you are feeling anxious but I think it's because you're body is excited to be at this new place
- Distract-Try to transition to a preferred activity to reduce stress and anxiety, then when calm you can return to situation that has been more challenging

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During Crisis

- Decrease stimulation (lower lighting, keep noise to a minimum)
- Keep talking to a minimum
- Do not argue or continue to talk about the issue
- Decrease/remove demands
- Allow time for individual to calm
- · Stay as calm as possible
- Remove child from situation if possible
- Remove other children if easier
- Consider and address possible sensory issues
- Have a mantra, it will keep you calm too

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Take Care of Yourself

- Self awareness: Be aware of your own triggers, personal preparedness, confidence and comfort level to manage the situation.
- Anger management: Know your triggers, relax your muscles, breath, count backwards, use self statements "I can do this" "It will be OK".

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Choose Intervention Style

- VERBAL
 - Use the person's name
 - Label the behavior specifically
 - Use a neutral tone of voice
 - Use positive body language
 - Use distraction, change topic introduce humor
 - Make requests for actions "put your hands down"
- NONVERBAL
 - Disengage
 - Stay an arms length away
 Leave the area if it is safe
 - Leave the area if it is safe to do so
 - Remove others from the area
 - Ignore verbal challenges
 - Remain quiet

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Respect the Person in Crisis

- Be aware of the need for privacy and safe space.
- Match your verbal and nonverbal body language.
- Respect personal space, avoid getting too close, stay calm.
- Be aware of the individual's reactions
 - Physiological changes-Fight or Flight
 - Mental changes-Attention, focus
 - Emotional changes-Feeling threatened
 - Behavioral changes-Level of activity, speed of movement, flailing, flopping, targeting others.

De-escalation

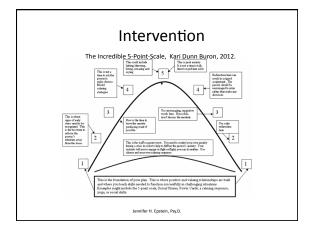
- Safety is the priority!
- Follow the behavior plan that should already be
- Don't draw attention to the individual, remain calm and in control. Project a calm and relaxed presence. Move slowly, approach quietly, keep interactions
- Do not explain or argue.
- Avoid direct confrontation and allow the individual to
- Physical intervention should be the last resort for most situations.

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Cycle of Crisis Behavior

- Triggering phase: Individual is not out of control but disruptive behavior has occurred.
- Escalation phase: Signs of anxiety are present (red face and ears, rocking, agitation)
- Crisis phase: Out of control (verbally and/or physically)
- Recovery Phase: Immediate crisis has passed. Though the individual still has signs of distress, stability is beginning.
- Post crisis phase: Individual often may be subdued

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After the Crisis

- · Regain composure.
- Re-establish "normal/typical" relationships.
- · Engage in an activity that is non threatening.
- Time to let it go, do not dwell on what just happened.

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Questions