# Addressing Anxiety: What Works and Why?

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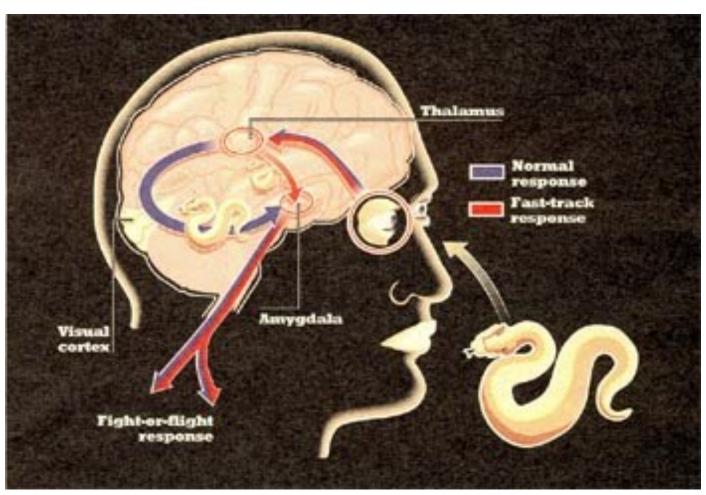
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#### **Anxiety Versus Fear**

- 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**

# How Fear is Registered By the Brain



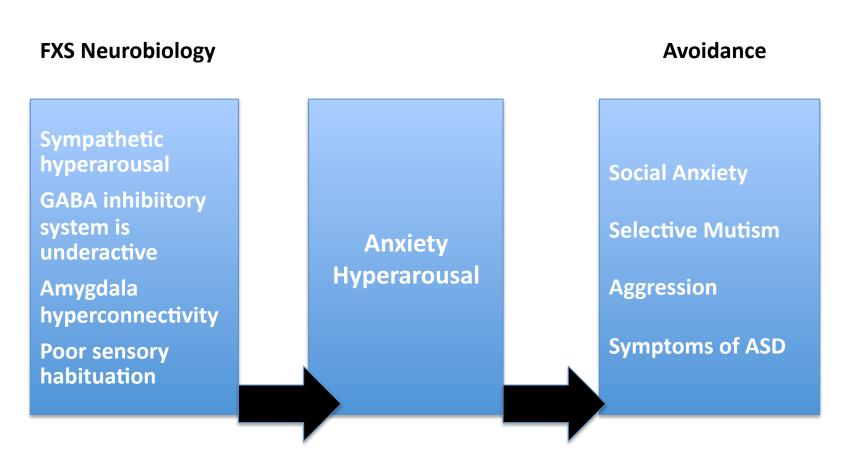
#### **Anxiety Feels Uncomfortable**



### **Anxiety Symptoms in FXS**

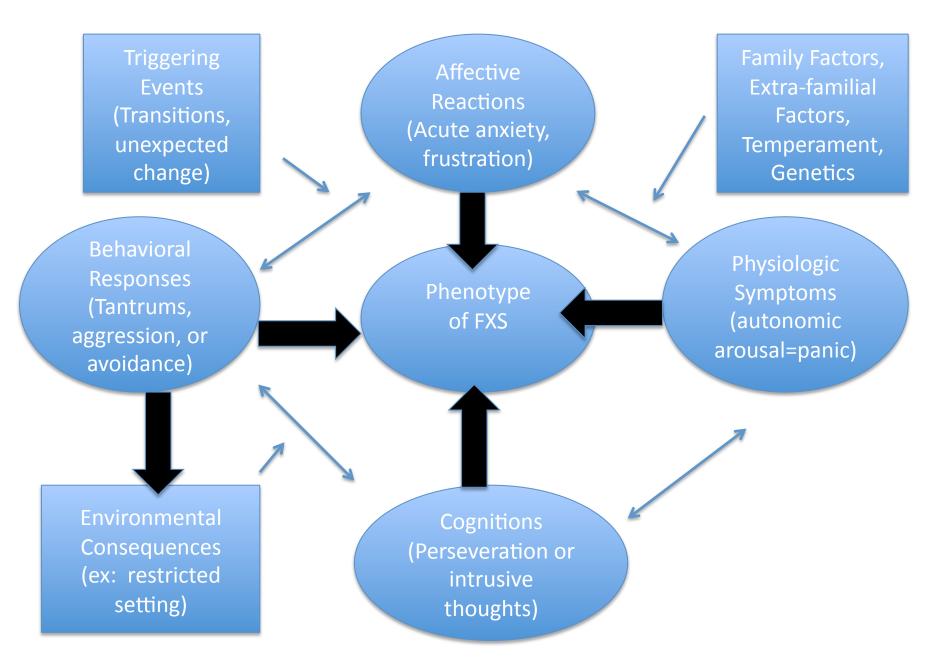
- Severe social anxiety, gaze avoidance
- Shyness, frequent worry about social events
- Panic attacks during major transitions or in response to aspects of environment
- Trouble initiating contact-often have difficulty seeking help because of shyness, sometimes may avoid interaction with others, may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

### Hyperarousal in FXS



Hagerman, 2007

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# 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



### 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

### 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

# 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

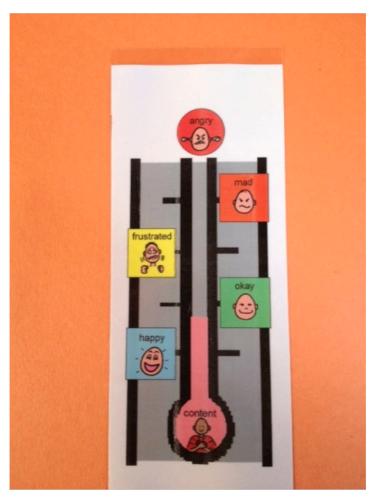
#### Plan Ahead

- 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

# Visuals to Communicate about Feelings



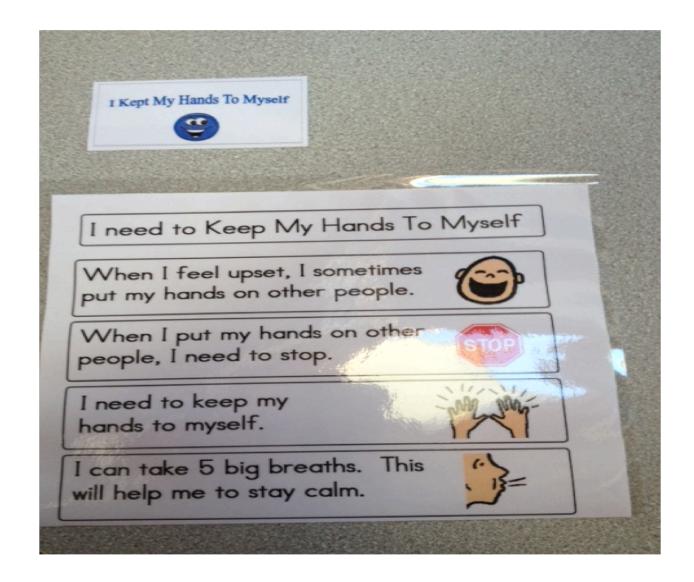
The Incredible 5-Point-Scale, Kari Dunn Buron, 2012.

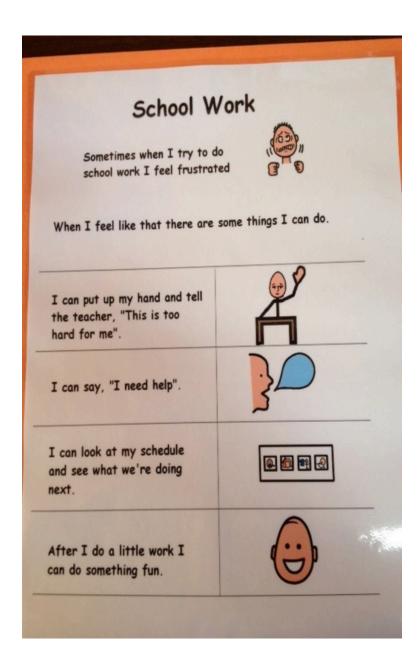
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## Social Stories Curriculum-Developed by Carol Gray

- 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

  - ♦ non-verbal learning disorders
  - → a variety of ages and abilities





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#### **Anxiety Management Techniques**

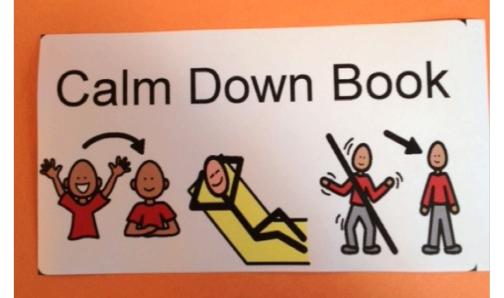
- Teach your child to relax
- Children with FXS and autism can learn calming strategies such as deep breathing or progressive muscle relaxation
- Practice a relaxation routine before you need it, so that it is possible to use it when things become intense.
- Calming music, chewing gum, drawing, thinking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

#### Suggestions to Practice Calming

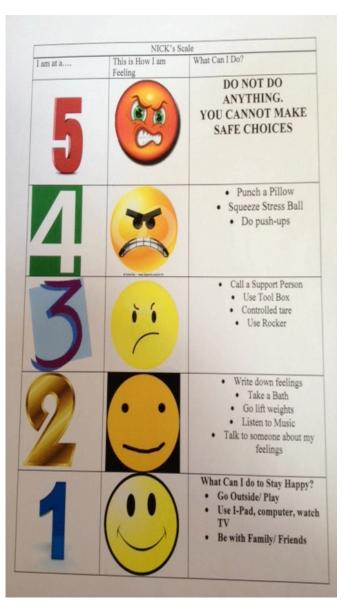
- Model taking 3 deep belly breaths before transitioning from one activity to another, especially before something that takes effort
- Practice blowing bubbles, feathers, or blowing through straws to emphasize taking in a belly breath, use scents to encourage breathing
- Have stress balls or koosh balls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

#### 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"

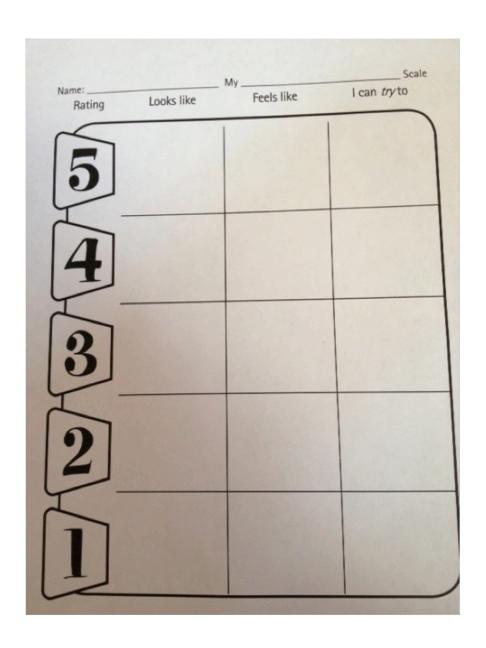


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#### ...When It's Too Late

### 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

#### 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

#### **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

#### 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".

### 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 to do so
- Remove others from the area
- Ignore verbal challenges
- Remain quiet

## 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.

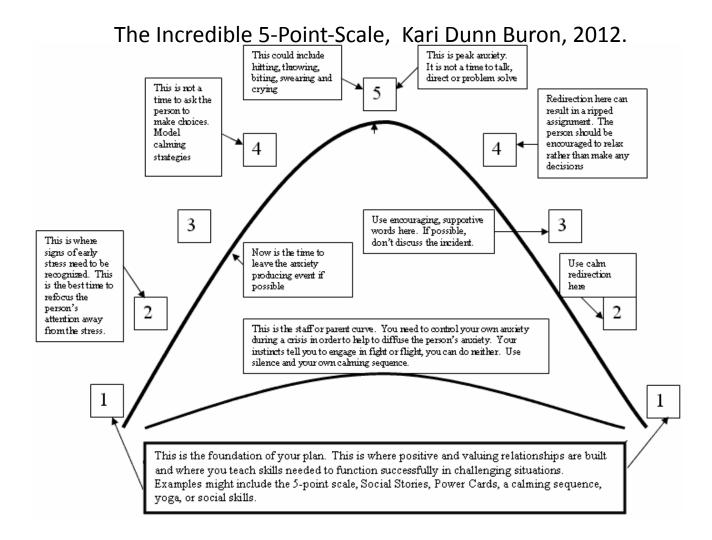
#### De-escalation

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

### 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

#### Intervention



#### 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.

## Questions