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PSYCHIATRY ACADEMY

Treating Anxiety in Young Children

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Disclosures

Neither I nor my spouse/partner has a relevant financial relationship with a commercial interest to disclose.

Anxiety in Preschoolers



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- Rates of anxiety disorders in preschoolers is estimated at 9%-11%.
- Similar persistence and impairment to older children.
- Symptom profiles in 2-5-year-olds match those in older children.
- Among 1375 consecutive referrals (mean age 10.7) to a pediatric psychopharm clinic, the median age of onset of first anxiety disorder was 4 years.



***Anxiety often goes
untreated for many years.***

Bufferd 2011; Eggar 2206; Mian 2011, 2025; Hammerness 2008

Temperamental Precursors to Anxiety



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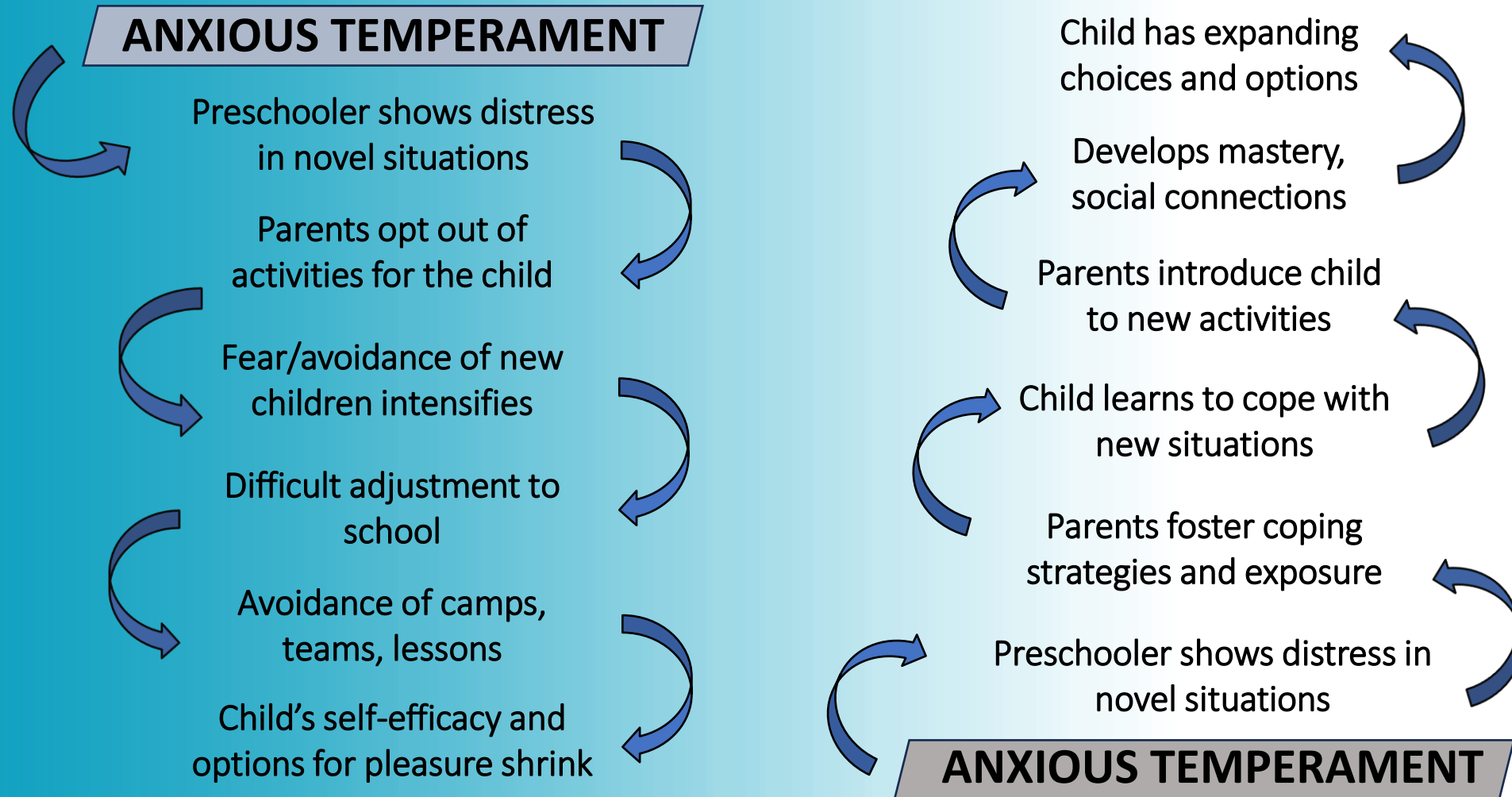
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- Behavioral inhibition to the unfamiliar (BI), is an established risk factor for social anxiety disorder.
- BI is the tendency to be quiet and behaviorally restrained in situations of novelty.
- Inhibited preschoolers are more likely to develop social anxiety disorder by age 6 years.
- 2-year-olds with high shyness show elevated social anxiety symptoms at age 3; those with high fear show elevated generalized, separation, and total anxiety at age 3.



Biederman 2001; Hirshfeld-Becker 2007; Ver Pault 2024

Cycles of Untreated and Treated Early Anxiety



Effective Intervention with Anxious Children Under Age 8



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- Family-based CBT is the only intervention to meet criteria for categorization as a “well-established treatment.”
- Based on 38 studies of CBT for anxiety in children age 7.9 or younger (N=2,228).
 - Group Parent CBT and Group Parent CBT + Group Child CBT was “probably efficacious”
 - Play therapy “experimental”; relaxation “questionable”; no evidence for individual child CBT or medication in this age range.



Comer 2019; Abel 2025



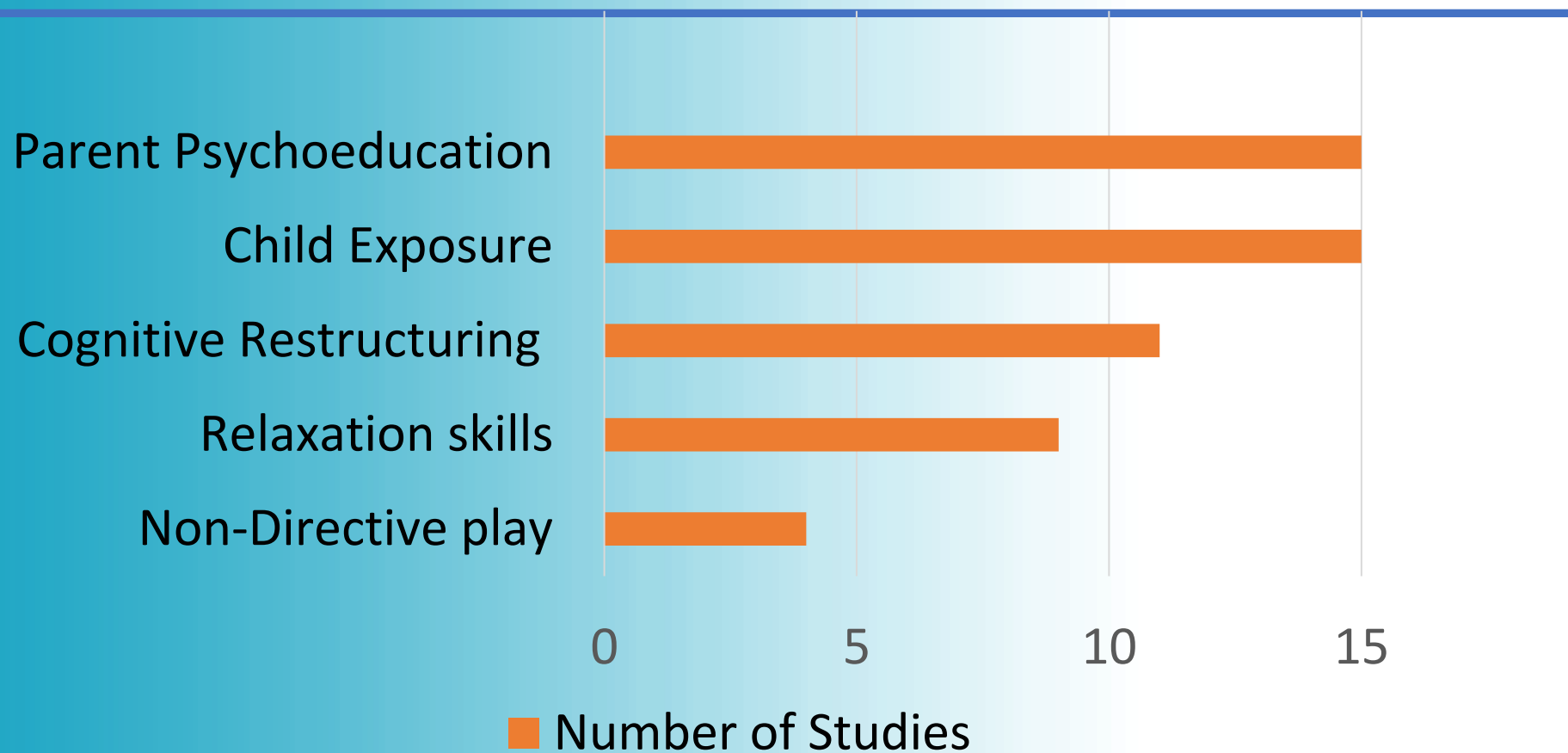
Altering the Trajectory of Anxiety in Young Children

- Children with BI (ages 3-5 years) whose parents were randomized to a 6-session parent group teaching them to use CBT strategies to reduce their child's anxiety had lower rates of anxiety at 3-year follow-up, compared with controls.
- Girls whose parents were randomized to the CBT group had lower rates of depression as adolescents

Rapee AJP 2010; Rapee JCCP 2013



Components of CBT for Early Childhood Anxiety in 15 Protocols Tested in RCTs



Abel, 2025



Diagnostic Assessment Relies Heavily on Parent Report



- Structured diagnostic interviews
- Parent-report questionnaires
- Teacher-report questionnaires
- Behavioral observations
- Child report

“Being Brave”: A Program for Coping with Anxiety for Parents and Young Children



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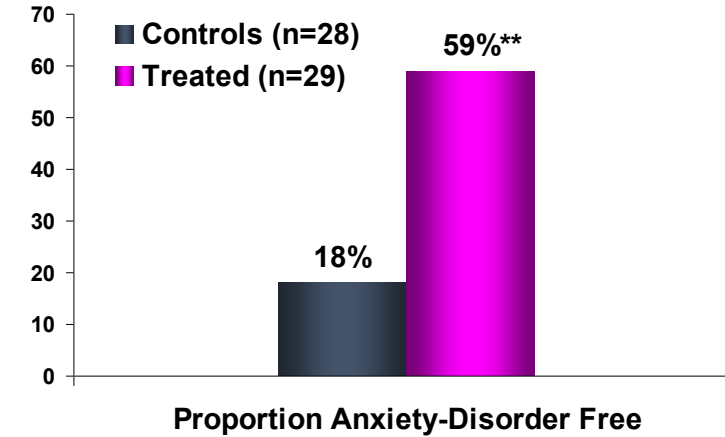
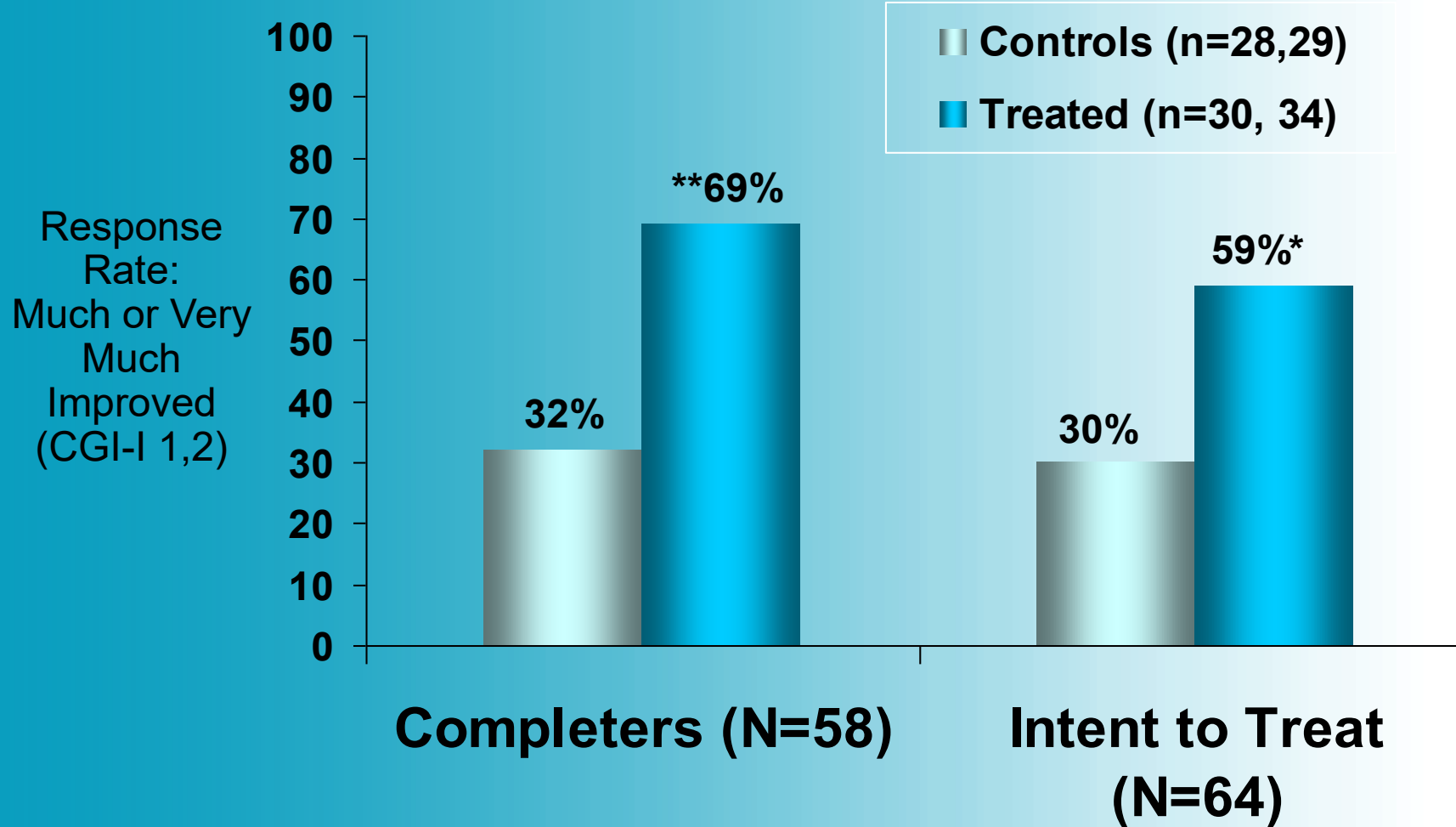
PSYCHIATRY ACADEMY

- **Parenting a Brave Child** (5-6 sessions)
 - Teach parents the CBT model, how to model coping plans, coaching skills, and how to plan and start and reinforce exposures
- **Child Anxiety Management** (6-13 sessions)
 - Model planning and practicing exposure with contingent reinforcement
- **Final Parent Session** (maintaining gains)



Hirshfeld-Becker et al., 2008, 2010

“Being Brave”: Randomized Clinical Trial



Hirshfeld-Becker et al., 2010

Open Pilot of “Being Brave” in 3-7-Year Old Autistic Children with Anxiety Disorders



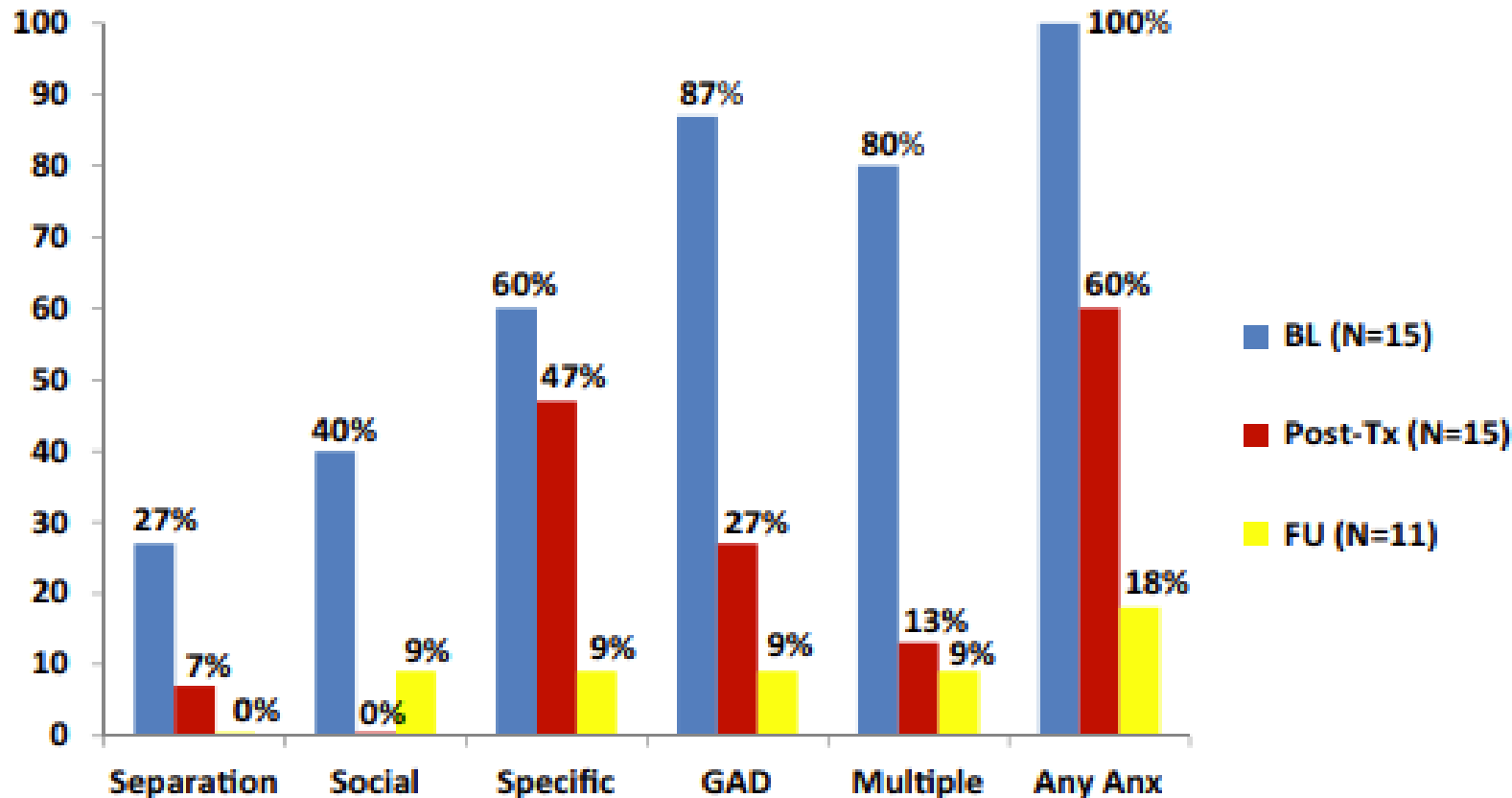
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Post-Intervention Response Rate (CGI-I 1,2): 81%

Rates of Anxiety Disorders:



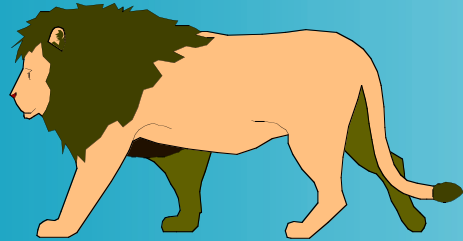


Helpful vs. Unhelpful Anxiety

- **Helpful Anxiety** is a feeling that most of us experience regularly, and it helps us survive and function.
- **Unhelpful Anxiety** is an exaggerated or mis-timed response that gets in our way.

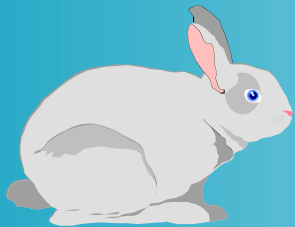


Adaptive Anxiety



- Fight-or-flight response

- Attachment behaviors



- Freeze response

- Worry



HOW TO HELP CHILDREN WITH ANXIETY



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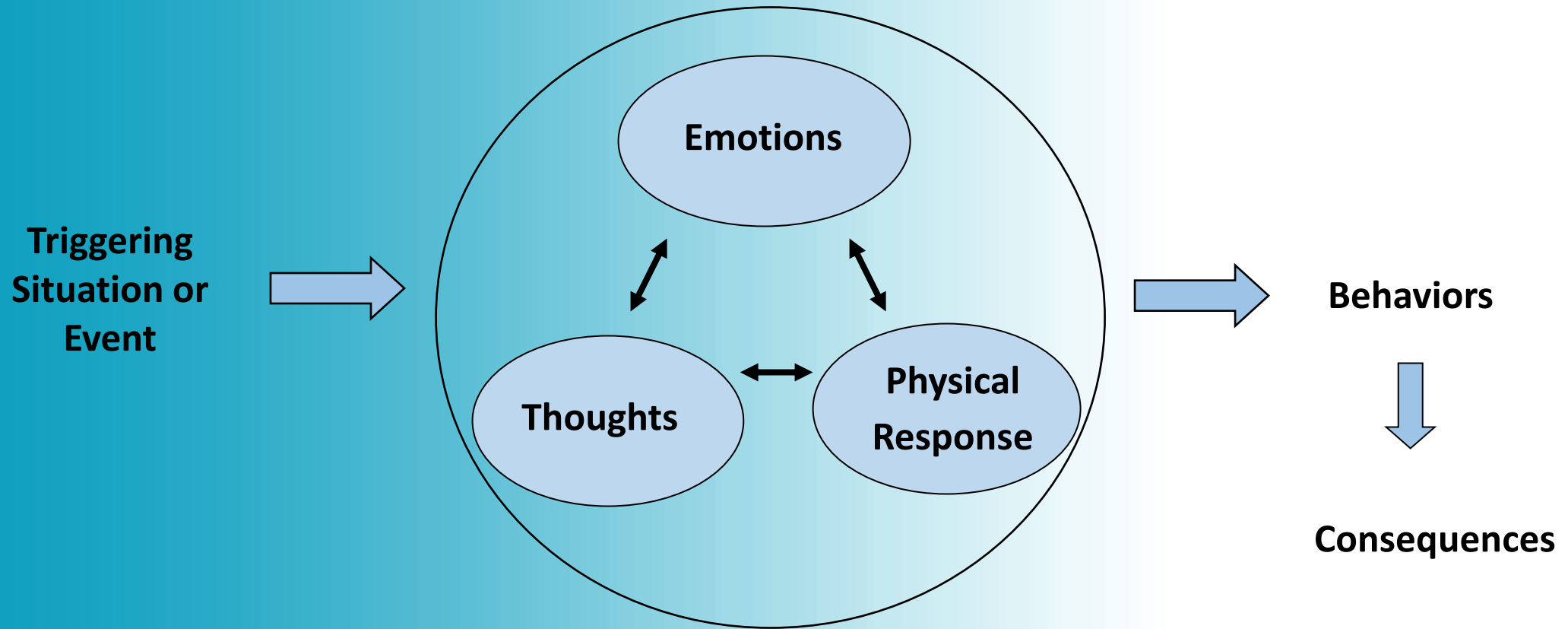
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- For real DANGER...
 - the helpful response (for the child) is to avoid/escape the situation,
 - and the helpful response (for the parent) is to protect or rescue the child.
- But in the case of a “FALSE ALARM,”
 - the helpful response (for the child) is to stay in the situation and cope with the anxiety
 - And the helpful response for the parent is to prompt and reinforce adaptive coping.

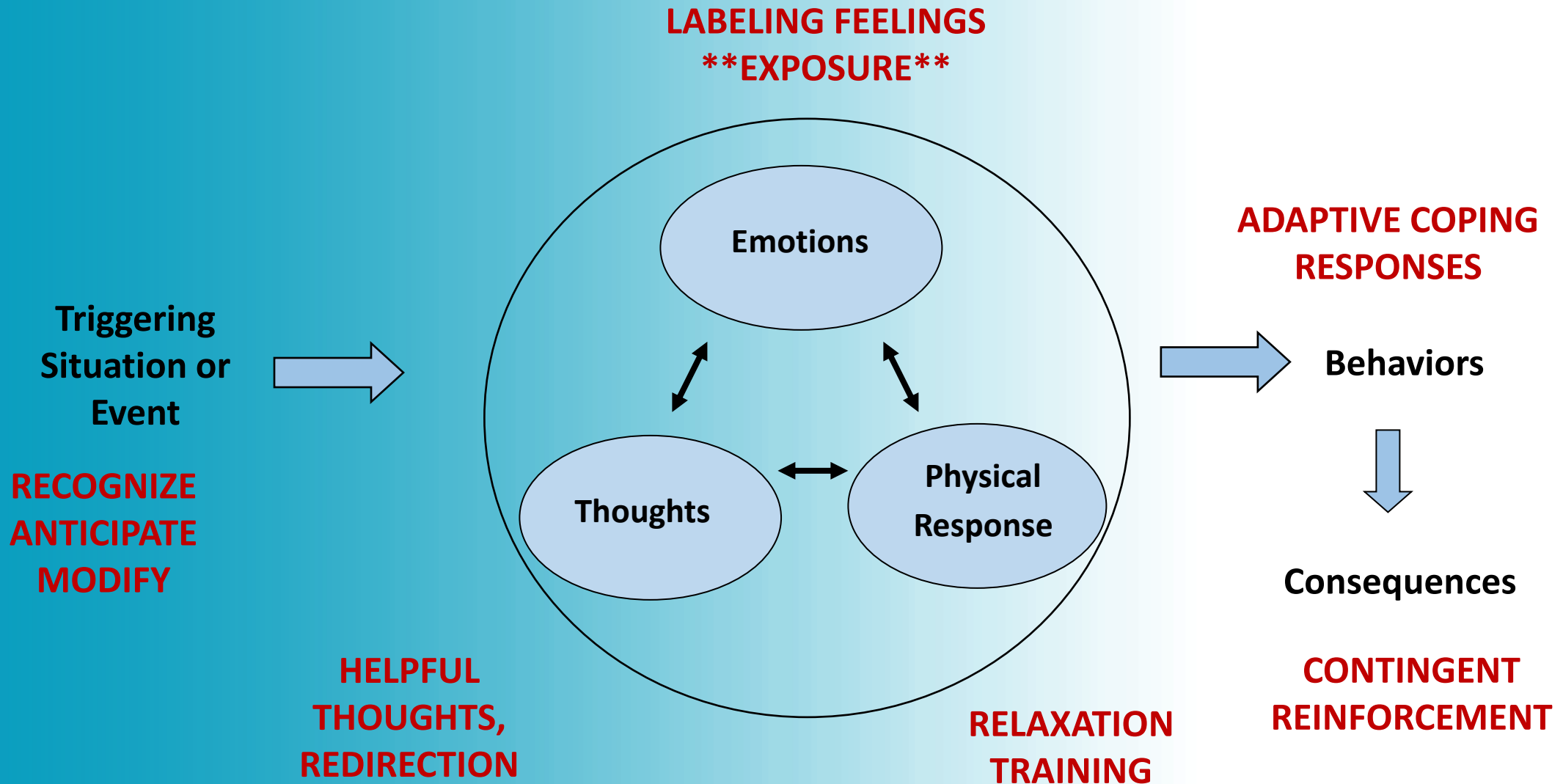




CBT Model for Treatment of Anxiety



CBT Model for Treatment of Anxiety





Parents' Responses to Anxiety

UNHELPFUL:

“Oh no!” response
Amplifies anxiety

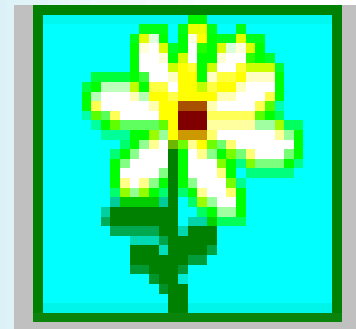


HELPFUL:

1) “Ho-hum” reaction

- Low-key, calm
- Reduces anxiety

2) Model using anxiety as a “cue-to-cope”





Parents' Responses to Anxiety

UNHELPFUL:

Focusing attention on child's anxiety, and on frightening aspects of the situation



HELPFUL:

Redirect attention to the rewarding aspects of the situation

Unhelpful Parental Responses to Fear



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UNHELPFUL:

Allow or encourage avoidance

- Child keeps pairing situation with anxiety
- Child misses the chance to realize their feared outcomes don't occur
- Child misses the chance to build skills for coping with anxiety



UNHELPFUL:

Force or pressure the child to face a fear before ready

- Can sensitize the child to be more fearful



HELPFUL RESPONSE TO FEAR: EXPOSURE

In a step-by-step way, practice facing the feared object, activity or situation

- PRACTICE EACH STEP UNTIL ANXIETY DECREASES

- MAKE A GAME OF IT WHEN POSSIBLE

- USE REWARDS



END GOAL

MOST-FEARED SITUATION

MUCH FEARED SITUATION

MODERATELY FEARED SITUATION

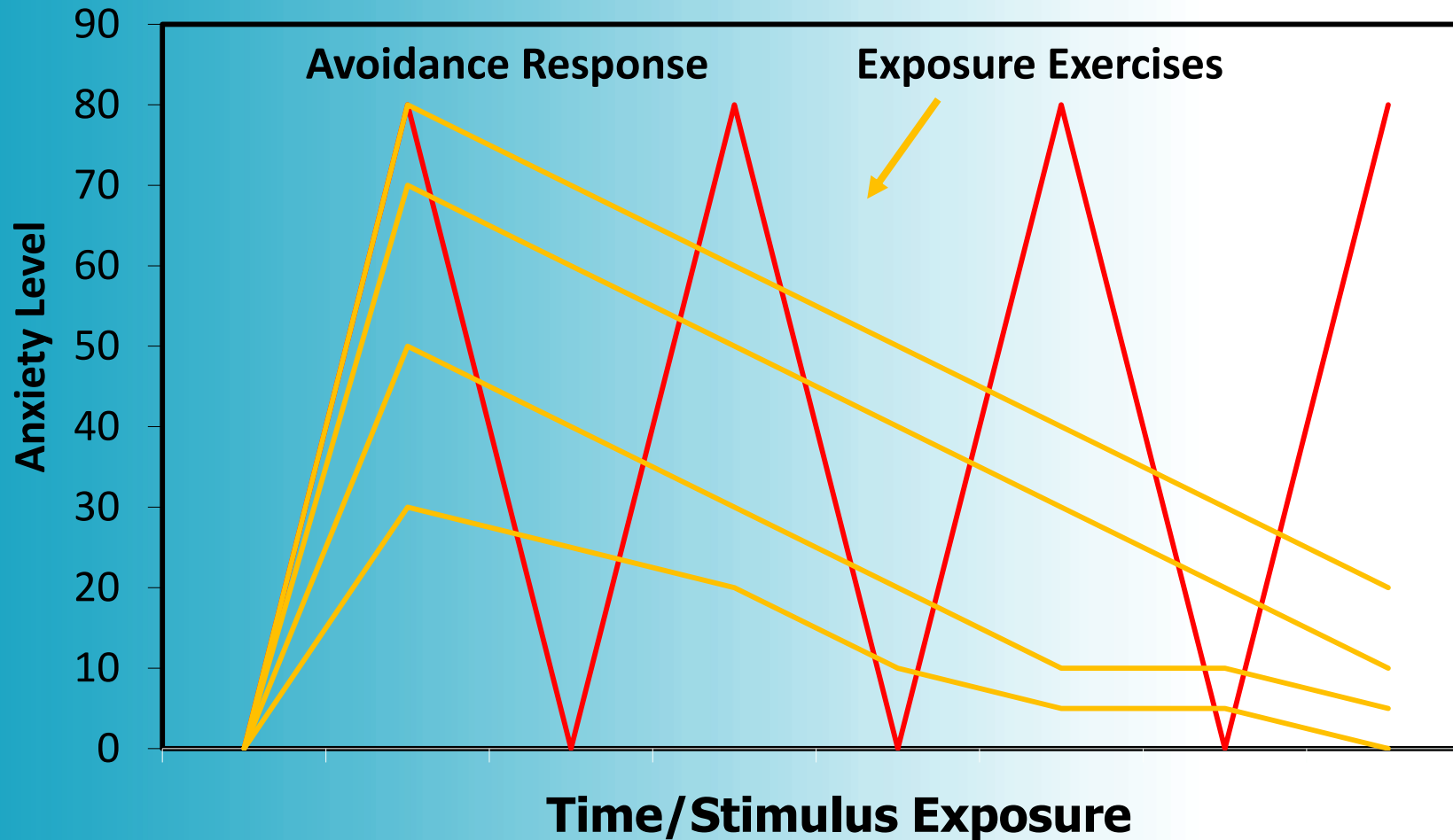
MILDLY FEARED SITUATION

SLIGHTLY FEARED SITUATION

STARTING POINT

EXPOSURE: Central to Treating Anxiety

“Do the thing you’re scared of, the more you do it the easier it gets”
-M. Franklin



Graduated Exposure in One Event



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- Exposure can involve practice in a group of situations of increasing difficulty, or within one activity.
- At a new setting or activity: the child could first watch from the back until calm, then take a step closer and watch until calm, then do the activity in parallel until calm, then get closer to the group, etc.
- This can be done at new stores, parties, new afterschool classes, etc.



Modeling Good Coping

Acronym Used to Remind Child of Skills:

- **F**eeling Frightened?
- **E**xpecting Bad Things to Happen?
- **A**ctions and Attitudes that Can Help
- **R**esults and Rewards

From Kendall et al. *Coping Cat Workbook*,, 1992

“Being Brave”: Child Anxiety Management Parent-Child Sessions



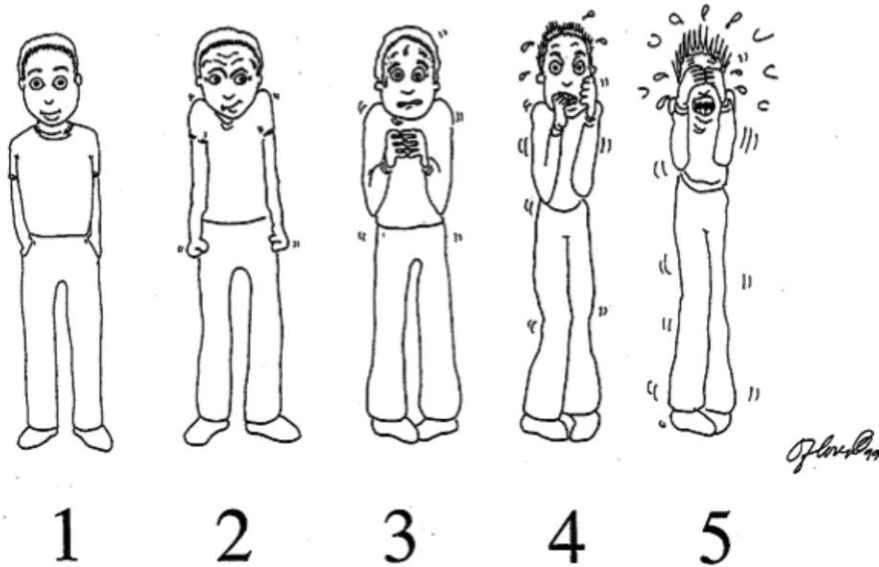
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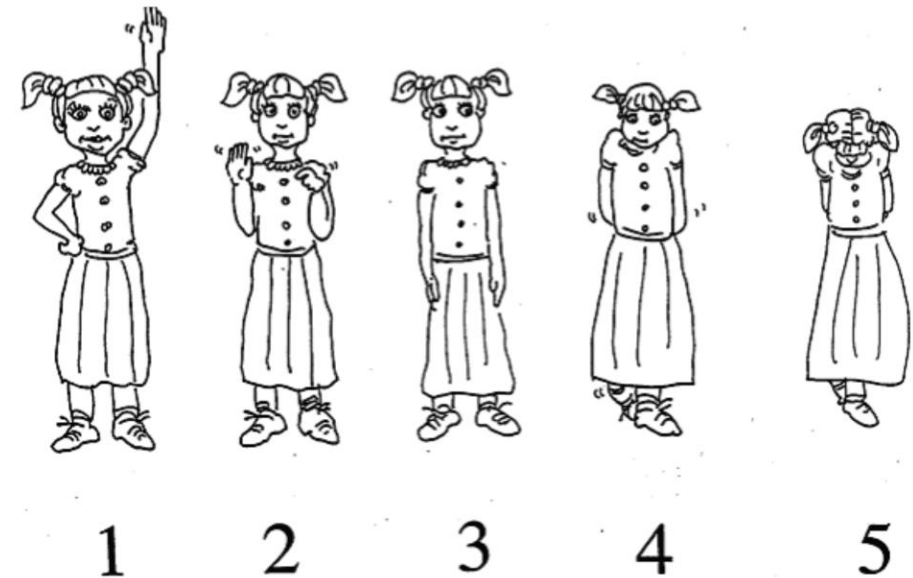
Session	Content
First	<ul style="list-style-type: none">— Use a story to teach the child the idea that the way to learn not to fear something is to practice doing it— Teach child and parents relaxation— Discuss reinforcers
Next	<ul style="list-style-type: none">— Introduce 4-step coping plan— Begin in session exposure
Remaining sessions	<ul style="list-style-type: none">— Plan and carry out in-session exposures, with reinforcement— Plan between-session exposures
Final sessions	<ul style="list-style-type: none">— Child does a project demonstrating or illustrating what they learned— Celebration of the child’s progress and accomplishments
Final parent meeting	<ul style="list-style-type: none">— How to maintain gains

Example of Pictorial Scales

Anxiety Rating Scale



Shyness Rating Scale



Progressive muscle relaxation



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Tense and relax...

... hands and arms (squeeze play-doh and let it go)

...arms and shoulders (stretch like a kitty)

...the neck (shrug like a turtle and then come out)

...the jaws (bite on a carrot and then slowly stop)

...the stomach and chest (stand like a toy soldier)

...your legs (stand on tippy toes and come down)



Four-Step Coping Plan



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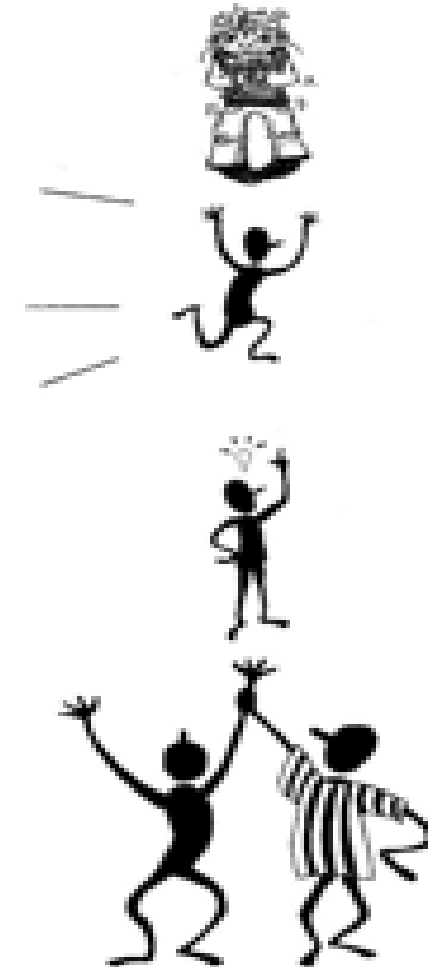


Feeling scared
or nervous?

Wanting to
run away?

I can use my
coping plan.

And then be
proud and say
“Hooray, I did it!
Yay!”





Coping Plan

- This may be an “in the moment” plan, e.g.
 - ❖ At drop-off: “I’ll do a quick goodbye and start my morning activity and see how long it takes to feel better. Usually I feel better by the end of circle time.”
 - ❖ At a new soccer practice: “I’ll watch at first from the bench, and then I’ll get a little closer when I’m ready.”
 - ❖ When tense at bedtime: “Imagine I’m squeezing a lemon and relax my body. Think about fun things that will happen tomorrow.”



Coping Plan: Longer Term

- Coping plans can also involve step-by-step practice, to get ready for a feared event or situation, designed with parents' help, e.g.
 - ❖ Anxious about a new school or grade: Visit the school playground over the summer; go to a meet-up for children entering the grade; have playdate(s) with class- or grade-mates from the neighborhood; arrange to meet the teacher and see the classroom the day before.
 - ❖ Anxious about a school concert: Practice the songs at home. Sing them to parents, the grandparents, then neighbor, then a few neighbors, building up to the event.



Coping Self-Statements: “Helpful thoughts”

Making mistakes

It doesn't have to be perfect, just good enough.

Separating

My tummy is having nervous butterflies. It will feel better soon.

Getting scolded by a teacher or parent

She still likes me, Just not what I did.

Facing feared situation

The more I practice, the easier it gets.



Coping Plan for _____



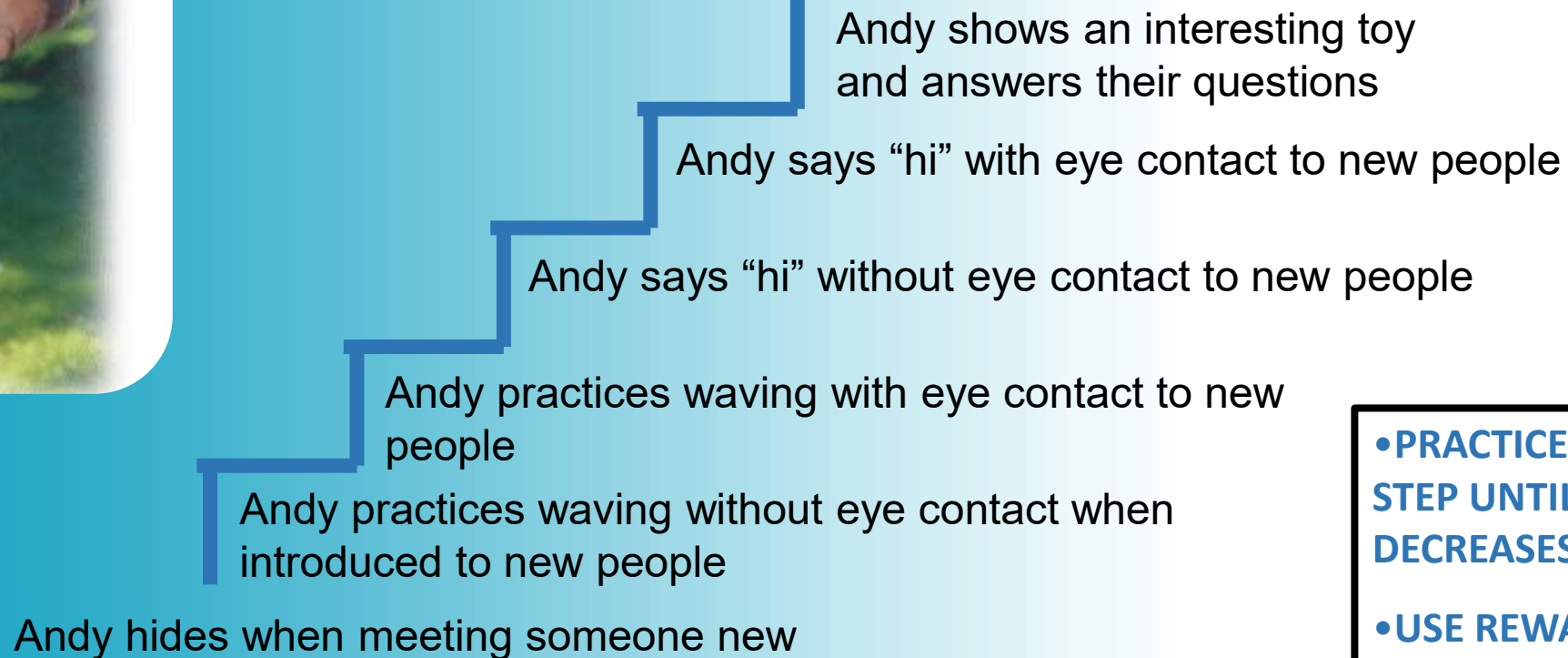
	What to Do:	
Step 6		
Step 5		
Step 4		
Step 3		
Step 2		
Step 1		

Actions that can help:

- Deep Breaths Tense and Relax
- Saying: _____
- Thinking: _____
- Pretending: _____
- Other: _____



SAMPLE STEP-CHART: SOCIAL ANXIETY



- PRACTICE EACH STEP UNTIL ANXIETY DECREASES
- USE REWARDS

SAMPLE IN-OFFICE EXPOSURES: SEPARATION ANXIETY



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Sarah can stay in the session without her mom

Sarah stays with the therapist while mom leaves for a longer errand (to coffee shop to get her a donut).

Sarah stays with the therapist while her mom goes on a series of errands (gets her water, a coloring sheet, etc.)

Sarah and the therapist say “good bye” to mom and leave for quick outings (tour of the waiting room, floor, building)

Sarah and mom role-play “quick goodbye’s” as she walks out the door for a few seconds or mins and returns (she plays with the therapist in between)

Be creative! Use humor!



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Ideas for exposure games:

- For fear of being in a separate room: treasure hunts
- For darkness fears: hunt for glow-in-dark toys
- For fears of new people: survey questions.
- When it can't be fun, use fun rewards!



“Being Brave”: Final Child Session



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- Child plans a videos or dictates/illustrates a book, or makes a collage teaching other children how to be brave.
- Child gets a copy of the commercial or book and a certificate of bravery to take home.





“Being Brave:” Final Parent Session



- Review with parents what worked for their child.
- Plan for stressful times or transitions: symptoms may re-emerge but strategies used before will work again.
- Review helpful ways to interpret and handle “lapses”.
- Encourage using new fears as cues to plan or re-initiate coping plans.
- Review when to come back (open door policy).



Future Directions

- Extending Family-Based CBT to even younger children (ages 2-3).
- Examining the use of online self-directed parenting interventions for young children.
- Finding practical ways to screen young children for anxiety or anxious temperament and offer tiered intervention early to mitigate worsening symptoms.





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Unhelpful anxiety can be overcome!

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