



303-1; 303-3
Anxiety and Related Disorders in
Children and Adolescents

A Training Outline

Developed by
H. Elizabeth Coyle, M.S.

For The
Pennsylvania Child Welfare
Training Program

University of Pittsburgh
School of Social Work
Pittsburgh, PA

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303: Anxiety & Related Disorders in Children & Adolescents

Agenda for a Full-Day of Training on Anxiety and Related Disorders in Children and Adolescents

Estimated Time	Content	Page
30 minutes	Section I – Introductions and Expectations	4
1 hour	Section II – Overview of Anxiety and Related Disorders	6
1 hour	Section III – Assessment and Treatment of Anxiety and Related Disorders	8
1 hour and 15 minutes	Section IV – Strategies for Children/Adolescents, Parents, and Educators	11
1 hour and 15 minutes	Section V – Building a Support Network for Children/Adolescents Diagnosed with Post-Traumatic Stress Disorder	14
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An Overview of the Curriculum

Rationale:

It can be difficult to sort out the multiple symptoms presented by children and adolescents diagnosed with anxiety and related disorders. It can also be challenging to help these children, adolescents, and their families find the most effective treatment and assist in accessing services. Caseworkers need the latest information on the symptoms, etiology, and treatment of anxiety and related disorders in children and adolescents so that caseworkers can provide optimal support and intervention.

Competency:

303-1: The child welfare professional can communicate with and interview children using a variety of age-appropriate methods and strategies to elicit and transmit information.

303-3: The child welfare professional knows the behavioral indicators and dynamics of common emotional disorders of children including depression, ADHD, conduct disorders, anxiety, and suicide; and can refer the child to the proper professional for further assessment and/or treatment.

Learning Objectives:

Participants will be able to:

- Identify the symptoms, etiology, and treatment of anxiety and related disorders in children and adolescents.
- Implement effective strategies for supporting and intervening effectively with children and adolescents diagnosed with anxiety and related disorders.
- Collaborate effectively with all parties of the treatment team assembled to support children and adolescents diagnosed with anxiety and related disorders.

Length of Workshop:

6 Hours

Materials Needed to Present the Workshop:

The following materials are needed to present this workshop:

- Color Markers
- Name Tents
- Overhead Projector/Screen
- Tape Recorder
- Easel Stand/Flip Chart
- Tape “Energy and Me”
- Curriculum With Transparencies
- Handouts for Participants

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An Overview of the Curriculum (continued)

Target Audience:

Child Welfare Caseworkers and Supervisors

Expectations of the Trainer:

The trainer should have a strong knowledge base and experience working with children and adolescents diagnosed with Anxiety and Related Disorders. Additionally, the trainer should have extensive experience collaborating effectively with the family, school, medical, and mental health systems that support effective treatment and interventions with children and adolescents diagnosed with Anxiety and Related Disorders.

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Section I - Introductions and Expectations

Estimated Length of Time:

30 minutes

Learning Objectives: Participants will be able to:

- Connect their own responses during anxious moments in their own lives to the difficulties experienced by children and adolescents diagnosed with anxiety and related disorders.
- Understand the workshop rationale, learning objectives, and agenda.
- Become familiar with the other participants.
- Articulate their own learning objectives .

Method of Presentation:

Lecturette and large group discussion

Materials Needed:

- Name tents, markers, flip chart paper
- **Overhead 1a: Agenda**
- **Overhead 1b: Learning Objectives**
- **Handout 1: Agenda and Learning Objectives**

Resources Used:

None

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Section I - Introductions and Expectations

Outline of Presentation:

- Introduce Trainer and participants.
- Review agenda and learning objectives for the day.

Step 1:

The trainer introduces himself/herself. The trainer asks participants to think of an anxious moment in their lives and to recall the physical, emotional, or behavioral response that they experienced during that moment (i.e., sweaty palms, rapid heart beat, confusion, fidgeting, etc.) The trainer asks participants to introduce themselves and to state one of those responses when they introduce themselves. The trainer lists these responses on flip chart paper and states that all of these physical, emotional, and behavioral responses are intensified for children and adolescents diagnosed with anxiety and related disorders to the point of interference in their daily functioning. The trainer asks participants to imagine how difficult it must be for these children and adolescents who experience these responses on a regular basis.

Step 2:

Distribute **Handout 1: Agenda and Learning Objectives**. Using **Overhead 1a: Agenda** and **Overhead 1b: Learning Objectives**, the trainer reviews the agenda, rationale, and learning objectives and asks participants to add their learning objectives for the day.

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Section II – Overview of Anxiety and Related Disorders

Estimated Length of Time:

1 hour

Learning Objectives: Participants will be able to:

- Identify the eight major categories of anxiety disorders in children and adolescents.
- Recognize the symptoms associated with anxiety disorders in children and adolescents.
- Identify the prevalence and etiology of anxiety disorders in children and adolescents.

Method of Presentation:

Lecturette and large group discussion

Materials Needed:

- **Overhead 2: Eight Categories of Anxiety Disorders**
- **Overhead 3: Prevalence and Etiology of Anxiety Disorders**
- **Handout 2: Eight Categories of Anxiety Disorders**
- **Handout 3: Prevalence and Etiology of Anxiety Disorders**

Resources Used:

American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders: Text revision*. (4th ed.). Washington, D.C.

Dacey, J. S., & Fiore, L. B. (2000). *Your anxious child: How parents and teachers can relieve anxiety in children*. San Francisco, CA: Jossey-Bass, Inc.

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Section II – Overview of Anxiety and Related Disorders

Overview of Presentation:

- Review eight categories of anxiety disorders with participants.
- Review the prevalence and common causes of anxiety disorder in children and adolescents.

Step 1:

Distribute **Handout 2: Eight Categories of Anxiety Disorders**. Using **Overhead 2: Eight Categories of Anxiety Disorders**, the trainer overviews each anxiety disorder and the symptoms associated with each disorder. The trainer asks participants to share the most common forms of anxiety disorders that they encounter with the children and adolescents on their caseloads.

Step 2:

Distribute **Handout 3: Prevalence and Etiology of Anxiety Disorders**. Using **Overhead 3: Prevalence and Etiology of Anxiety Disorders**, the trainer reviews the prevalence and common causes for anxiety disorders in children and adolescents.

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Section III – Assessment and Treatment of Anxiety and Related Disorders

Estimated Length of Time:

1 hour

Learning Objectives: Participants will be able to:

- Articulate the common areas of assessment employed to identify anxiety disorders in children and adolescents.
- Identify the most effective treatment for anxiety disorders in children and adolescents.
- Experience one form of treatment for anxiety so that they can more fully help clients implement this technique.

Method of Presentation:

Lecturette, small group discussion, and large group discussion, guided imagery for relaxation

Materials Needed:

- Tape recorder
- **Overhead 4: Assessment of Anxiety Disorders**
- **Overhead 5: Treatment Approaches for Anxiety Disorders**
- **Handout 4: Assessment of Anxiety Disorders**
- **Handout 5: Treatment Approaches for Anxiety Disorders**
- **Tape: Energy and Me (First Exercise Only)**

Resources Used:

American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders: Text revision*. (4th ed.). Washington, D.C.

Dacey, J. S., & Fiore, L. B. (2000). *Your anxious child: How parents and teachers can relieve anxiety in children*. San Francisco, CA: Jossey-Bass, Inc.

Wicks-Nelson, R., & Israel, A. C. (2000). *Behavior disorders of childhood*. (4th ed.). Upper Saddle River, NJ: Prentice Hall.

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Section III – Assessment and Treatment of Anxiety and Related Disorders

Overview of Presentation:

- Review with participants the three types of assessments used in anxiety and related disorders (Behavioral, physiological, and subjective).
- Review with participants common treatment approaches for anxiety and related disorders in children and adolescents.
- Lead participants through one type of treatment: A guided imagery.
- Apply the above information to current practice through small group discussion.

Step 1:

Distribute **Handout 4: Assessment of Anxiety Disorders**. Using **Overhead 4: Assessment of Anxiety Disorders**, the trainer reviews the three response systems (behavioral, physiological, and subjective) that are the focus of treatment and the aspects of the environment that may contribute to the anxiety difficulties. The trainer indicates that direct observation and behavioral approach tests that include a specific list of response behaviors checked off during direct observation are employed to assess overt behavioral aspects. The subjective aspects of anxiety are assessed through a variety of self-report measures such as the State-Trait Anxiety Inventory for Children and the Revised Children's Manifest Anxiety Scale. However, self-report measures are difficult to obtain from very young children. Physiological responses are measured through heart rate, skin conductance, and palmar sweat. However, because of the problems and expense in obtaining these measures, physiological aspects of anxiety are not often obtained.

Step 2:

Distribute **Handout 5: Treatment of Anxiety Disorders**. Using **Overhead 5: Treatment of Anxiety Disorders**, the trainer overviews the common treatment approaches utilized with children and adolescents diagnosed with anxiety disorders (systematic desensitization, modeling, contingency management, cognitive-behavioral treatments, progressive relaxation and guided imagery, and medication).

Step 3:

The trainer asks participants to discuss in small groups how assessment and treatment unfolds for the children and adolescents on their caseloads who are diagnosed with anxiety disorders. The trainer asks groups to report out and compares the best practice standards for assessment and treatment with the common practices of assessment and treatment of the children and adolescents diagnosed with anxiety disorders in their work setting (i.e., are they being assessed and treated properly).

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Section III – Assessment and Treatment of Anxiety and Related Disorders (Continued)

Step 4:

The trainer explains that the group will experience one form of treatment, i.e., progressive relaxation and guided imagery and that participation is voluntary. The trainer dims the lights in the training room, asks participants to find a relaxed position in their chairs or on the floor in the training room, listen to the tape, and follow the instructions on the tape. The trainer plays the first exercise on the **Tape: Energy and Me (approximately 10 minutes in length)**. After the guided imagery and progressive relaxation exercise, the trainer guides participants back to the moment and gives participants a few minutes to regroup. The trainer asks participants how this technique might be beneficial to their clients diagnosed with anxiety disorders.

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Section IV – Strategies for Children/Adolescents, Parents, and Educators

Estimated Length of Time:

1 hour and 15 minutes

Learning Objectives: Participants will be able to:

- Demonstrate their ability to teach the COPE technique to children and adolescents.
- Demonstrate their ability to teach the COPE technique to parents and educators so that children and adolescents diagnosed with anxiety disorders can be supported in their use of the technique at home and at school.

Method of Presentation:

Lecturette, large group discussion, small group discussion, case study, and role play

Materials Needed:

- **Overhead 6: COPE Intervention**
- **Handout 6: COPE Intervention**
- **Handout 7: Case Study of James (OCD)**
- **Handout 8: COPE Intervention Procedures**

Resources Used:

Clark, L. (1998). *SOS: Help for emotions*. Bowling Green, KY: Parents Press.

Dacey, J. S., & Fiore, L. B. (2000). *Your anxious child: How parents and teachers can relieve anxiety in children*. San Francisco, CA: Jossey-Bass, Inc.

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Section IV – Strategies for Children/Adolescents, Parents, and Educators

Outline of Presentation:

- Review the COPE intervention method with participants.
- Apply the COPE intervention method to a case study.
- Review cultural aspects of anxiety and related disorders in children and adolescents.

Step 1:

Distribute **Handout 6: COPE Intervention**. Using **Overhead 6: COPE Intervention**, the trainer describes the four step process for implementing the COPE technique. The trainer asks the group how this information may be received by children/adolescents, parents, and educators and addresses any barriers that may arise in their implementation of the COPE intervention.

Step 2:

Distribute **Handout 7: Case Study of James (OCD)** and **Handout 8: COPE Intervention Procedures**. The trainer instructs participants to read the case study of James and **Handout 8: COPE Intervention Procedures**. The trainer explains that some groups of three will be role playing the teaching of COPE to James, some groups will be explaining COPE to James' mother, and some will be explaining COPE to James' guidance counselor or teacher. The trainer asks participants to move into groups of three (one person is the caseworker, one person is the observer/feedback person, and one person is either James, James' mother, or James' guidance counselor/teacher) to practice the application of the COPE technique with children/adolescents, parents, and educators. The trainer assigns the roles to each group of three and instructs them to begin. When the role plays conclude, the trainer instructs the observer/feedback person to provide feedback to the caseworker.

Step 3:

The trainer asks the groups to report out to the large group regarding the parts of the role play that were easy or difficult. The trainer explains that this technique can be used with children/adolescents diagnosed with all eight categories of anxiety disorders. The trainer asks the large group to discuss how they might implement this technique with any children/adolescents diagnosed with anxiety disorders on their caseload and how they might help their families and educators support the children/adolescents in the implementation of the COPE technique.

Step 4:

Reminding participants to consider the cultural issues evident in the case of James, the trainer asks participants to move into small groups and discuss what additional avenues of treatment/strategies that they might suggest for James and his family. Each small

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Section IV – Strategies for Children/Adolescents, Parents, and Educators (continued)

group also identifies resources in their local community that provide these treatment/intervention services. The trainer then asks the small groups to report out their suggestions and findings. The trainer lists these responses on flip chart paper.

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Section V – Building a Support Network for Children/Adolescents Diagnosed with Post-Traumatic Stress Disorder

Estimated Length of Time:

1 hour and 15 minutes

Learning Objectives: Participants will be able to:

- Build a support network to assist children/adolescents diagnosed with post-traumatic stress disorder.
- Collaborate effectively with families, schools, medical professionals, and mental health professionals who commonly comprise treatment teams to support children/adolescents diagnosed with post-traumatic stress disorder.

Method of Presentation:

Large group discussion, small group discussion, and role-play of treatment team meeting

Materials Needed:

- **Overhead 7: Support Roles of Treatment Team Members**
- **Handout 9: Case Study of Melanie**
- **Handout 10: Support Roles of Treatment Team Members**
- **Handout 11: Background and Directions for Role Play**

Resources Used:

Matsakis, A. (1994). *Post-traumatic stress disorder: A complete treatment guide*. Oakland, CA: New Harbinger Publications, Inc.

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Section V – Building a Support Network for Children/Adolescents Diagnosed with Post-Traumatic Stress Disorder

Outline of Presentation:

- Apply the symptoms of post traumatic stress disorder to a case example.
- Role play a treatment team approach to apply techniques learned for anxiety and related disorders.
- Small group activity to apply knowledge learned today.

Step 1:

The trainer refers participants to the symptoms of post-traumatic stress disorder listed on **Handout 2: Eight Categories of Anxiety Disorders**. The trainer distributes **Handout 9: Case Study of Melanie** and asks participants to read the case study. Using **Overhead 2: Eight Categories of Anxiety Disorders**, the trainer reviews the symptoms of post-traumatic stress disorder and asks participants to look for any symptoms exhibited by Melanie in the description of the presenting problems described in the case study. The trainer asks participants what symptoms they noticed in Melanie.

Step 2:

Distribute **Handout 10: Support Roles of Treatment Team Members**. Using **Overhead 7: Support Roles of Treatment Team Members**, the trainer reviews the various roles of treatment team members commonly assembled to support the success of children/adolescents diagnosed with post-traumatic stress disorder.

Step 3:

The trainer asks for volunteers to role play a treatment team meeting (lasting approximately 25-30 minutes in length) gathered together to develop an effective treatment response for Melanie. Volunteers are needed to role play the following parts: grandmother, grandfather, caseworker, therapist, third grade teacher, and school guidance counselor. The meeting was called at the request of the caseworker. It was held at the school because the grandparents live across the street from the school, which is a more convenient location for the grandparents, and because the school is located only two blocks from the therapist's office.

Distribute **Handout 11: Background and Directions for Role Play**. The trainer explains that the treatment team is gathered together at Melanie's school to: garner support for Melanie and her grandparents who are overwhelmed by the loss of Melanie's mother and the demands of suddenly raising a nine year old granddaughter; assess the current plan in place; and determine the need for further support, if necessary.

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Section V – Building a Support Network for Children/Adolescents Diagnosed with Post-Traumatic Stress Disorder (continued)

Step 4:

At the end of the role play, the trainer asks the members of the role play team to discuss what went well and what changes they would make if they could hold the treatment team meeting a second time. The trainer asks all of the participants in the large group to provide feedback to the members of the role play treatment team.

Step 5:

The trainer asks participants to move into small groups and discuss how they might apply the information learned during this section of the training day to the children/adolescents diagnosed with other anxiety disorders on their caseload. The trainer asks the small groups to report out and records their responses on flip chart paper.

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Section VI - Action Planning

Estimated Length of Time:

15 minutes

Learning Objectives: Participants will be able to:

- ◆ Develop an action plan to implement the strategies learned in this workshop.

Method of Presentation:

Individual completion of action plan and large group discussion

Materials Needed:

Handout 12: Action Plan

Resources Used:

None

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Section VI - Action Planning

Overview of Presentation:

- Trainer distributes action plans to participants and has them complete a plan.

Step 1:

Distribute **Handout 12: Action Plan**. The trainer instructs participants to complete **Handout 12: Action Plan**.

Step 2:

The trainer asks participants to share one or two strategies learned throughout the workshop that they will implement in their work setting.

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Section VII - Wrap-Up and Evaluation

Estimated Length of Time:

15 minutes

Learning Objectives: Participants will be able to:

- ◆ Bring closure to their day of training.
- ◆ Evaluate the training.

Method of Presentation:

Lecturette, evaluation

Materials Needed:

Handout 13: Bibliography

Evaluation Form

Resources Used:

None

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Section VII - Wrap-Up and Evaluation

Overview of Presentation:

- Trainer summarizes learning for the day.
- Distribute bibliography to participants.
- Trainer distributes evaluation to participants.

Step 1:

The trainer summarizes the learning objectives of the day and encourages participants to implement their action plans in their work settings.

Step 2:

Distribute **Handout 13: Bibliography**. The trainer suggests that the materials listed on the bibliography are further sources for learning more about anxiety and related disorders.

Step 3:

Distribute evaluation forms. The trainer asks participants to complete evaluation forms.

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REFERENCES

Books

American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders: Text revision*. (4th ed.). Washington, D.C.

Clark, L. (1998). *SOS: Help for emotions*. Bowling Green, KY: Parents Press.

Dacey, J. S., & Fiore, L. B. (2000). *Your anxious child: How parents and teachers can relieve anxiety in children*. San Francisco, CA: Jossey-Bass, Inc.

Wicks-Nelson, R., & Israel, A. C. (2000). *Behavior disorders of childhood*. (4th ed.). Upper Saddle River, NJ: Prentice Hall.

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