

Managing anxiety problems

Practical guidance for schools in Cornwall and the Isles of Scilly.



Cornwall and the Isles of Scilly Health and Care Partnership

Contents

Aims and guidance	3
What is anxiety?	4
What is an anxiety disorder?	5
Understanding the early developmental roots of anxiety	8
Spotting the warning signs of increasing anxiety	9
Understanding anxiety as a driver of behaviours that challenge in school	10
Manifestations of anxiety across age ranges	11
What increases anxiety at school?	14
Helping anxious children at school	16
Top 10 tips for managing anxiety in schools	20
Confidentiality, information sharing and safety planning	21
Talking about anxiety problems	22
Things to remember	24
Getting mental health support for anxious children	25
References and information	26
Appendix 1: I-Thrive pathways of care and support	27
Appendix 2: Advice to parents and carers	29
Notes page	31

Aims and guidance

Welcome to the latest information and resources to help anyone who works within education recognise the signs, understand the risks and know what support is available when dealing with students who have anxiety problems, an anxiety disorder, or at risk of developing an anxiety disorder.

The updated information contained within these pages has been put together at the request of the Cornwall children and young people's mental health implementation board.

The guidance recognises the growing number of young people who experience anxiety problems and anxiety disorders in Cornwall and the Isles of Scilly. This has become especially marked following COVID-19 and its repercussions.

Teachers have described the difficulties they face in working with children and young people in schools who are anxious or have an anxiety disorder. The guidance also acknowledges the work of public health and the educational psychology service in promoting mental health and wellbeing, resilience, self-esteem and confidence among children and families.

The information and suggestions within this guidance will support and complement the policies and practices within your school, in relation to safeguarding and working with children and young people with emotional, psychological and mental health problems.

The guidance also supports the local transformation plan for children and young people's mental health services document, which is called <u>Turning the Tide</u>, and the really valuable work that is already taking place across the county through the <u>I-Thrive Framework</u>.

Aims of the guidance



- Increase understanding of the nature and development of anxiety.
- Increase understanding and awareness of anxiety problems and anxiety disorders across the whole school community.
- Support school staff to recognise warning signs and risk factors.
- Provide guidance for school staff to support anxious children.
- Raise awareness in educational settings about what support is available locally for anxious children and those with anxiety disorder.
- Help senior leaders within schools support their staff to manage the feelings that supporting anxious children can evoke.

What is anxiety?

Anxiety is a normal, human feeling of fear, apprehension or panic – a sense that something fearful or even disastrous may happen. It occurs when we don't feel safe, and is a normal human response to perceived threat.

When we face scary situations, the brain's built-in alarm system warns us that something may harm us and should be attended to. The system makes us feel more alert, stops us thinking about other things in order to focus on the potential threat and sets off the alarm (arousal) system to prepare us for action, to problem solve or to get help.

Anxiety affects our body, the way we think and our feelings. When we feel in danger, our bodies react automatically by releasing hormones to trigger survival responses. These include fight, flight and freeze responses, when children may become angry (fight), avoidant (flight) or simply stop responding (freeze). It is important to remember that these are automatic responses, which we cannot control.

Most of us worry at times about our safety, friendships, relationships, sexuality, parents, our health or the health of others, bereavement, school pressures, bullying, disasters, family finances, or news items. Usually worries pass because we get support, find ways of sorting them out or the things we fear improve.

What are anxiety problems?

Sometimes, however, worries don't go away; they start to get worse and affect all aspects of life. This may be because real threats to the child remain. These threats may include: bullying, abuse, neglect, domestic violence or conflict in the home. When this is the case, anxiety can be understood as a communication of their ongoing distress or a result of the adversity they face.

Other children may become preoccupied with their everyday fears (about family, health, relationships, friendships, school work pressures, and concerns about the threats they hear about in the news), whilst at the same time they have a sense that there is nothing they can do about them. It is as though the fears take over their minds. It makes it more difficult for children to attend to everyday things such as friendship, play, social activities and learning.

When this happens, anxiety itself becomes a problem, and is likely to require specialist help. This has become a greater problem as a consequence of the perceived threats of COVID-19 and its repercussions, including social isolation, fears about health and wellbeing, bereavement, increased family conflict, and problems related to online learning, school tests and examinations.

What is an anxiety disorder?

Problem anxiety may increase further and may become an anxiety disorder if the child's behaviour meets the criteria for a diagnosis of anxiety disorder. A mental health clinician will look at the pattern of anxiety in order to make a diagnosis, including its pervasiveness and severity, and the impact of anxiety on functioning.

Information from NHS-inform states that nearly 300,000 young people in Britain have an anxiety disorder (February 2020). In the UK, anxiety disorders are estimated to affect 5% to 19% of all children and adolescents, and about 2% to 5% of children younger than 12.

Anxiety disorders tend to have their initial onset in childhood, take a chronic course if left untreated, and predict later mental health problems including depression and substance abuse. Early identification and treatment of anxiety disorders in children and young people is important.

Anxiety in children compromises academic achievement, friendships and relationships, and is associated with bullying, school absenteeism and school refusal. It restricts children's enjoyment of the academic and social aspects of school life, limiting participation in classroom activities, sports, public speaking and school productions. It is important to emphasise that children and young people with emerging anxiety problems can receive early help and support from:

- school
- community mental health teams (including mental health support teams, clinical associate psychologists, primary mental health teams)
- voluntary sector services, such as Young People Cornwall and Penhaligons Friends (for bereavement)
- Headstart Kernow as part of the I-Thrive Framework of support (getting advice and getting help quadrants)

In seeking advice, school staff can talk to the early help hub and/or the local BLOOM network of support. Children and young people who have an anxiety disorder can access help from children and adults mental health specialist services (see <u>appendix 1</u> for I-Thrive mental health care pathways for anxiety and accessing specialist mental health services).

Different forms of anxiety disorder

Anxiety and school refusal

School refusal is often linked to anxiety, and sometimes linked to other positive effects of avoiding school. Careful assessment to understand the reason behind the school refusal is always the first step in understanding how best to intervene.

The school refusal assessment scale is a really good starting point for understanding the reasons for school refusal. For some young people it can be due to school-related anxieties around peers, academic work, or even the environment. For others, school refusal may be linked with separation anxieties and worries about leaving home and parents. For yet others, the school refusal is associated with the benefits of staying at home; for example, more time to spend gaming or with friends).

Generalised anxiety

When a child feels anxious in a wide range of situations and places. Children with generalised anxiety may feel anxious most or many days, and often struggle to remember the last time they felt truly relaxed. There may not be a clear and obvious cause, and the anxiety is not associated with particular objects, people, events or places. Generalised anxiety may be related to experiences of ongoing harm and adversity and the resultant sense of feeling unsafe and insecure.

Health anxiety

This is when a child worries a great deal about their health (usually without cause), thinking that they are currently physically ill, or worrying about getting ill. A child with health anxiety may frequently check their body for signs of illness, ask others for reassurance that they are not ill, or may act as if they are physically ill (for example, saying that they need to rest and avoid physical activity).

Obsessive compulsive disorder (OCD)

This is when a child has consistent worrying, unpleasant and often unwanted thoughts, which are often accompanied by feeling compelled to do something (such as checking, counting or cleaning activities). Feeling compelled to do something often carries with it the sense that the activity neutralises the dangers associated with the intrusive and unwanted thoughts. The thoughts and behaviours are very worrying and distressing and can significantly interfere with a child's life.

Panic disorder

A panic attack is an experience of extreme distress with feelings of terror and panic, which is short lasting but feels highly debilitating. The feeling of panic is accompanied by intense physical and psychological sensations.

These include:

- rapid breathing
- increase in heart rate
- butterfly tummy
- sweating, shaking and trembling
- feeling that something terrible is about to happen

Although they are frightening, panic attacks will not cause any physical harm. If these panic attacks occur frequently, it is referred to as a panic disorder.

Separation anxiety

A strong fear of separating from trusted people with whom they feel safe and secure. The anxiety is experienced as an overwhelming sense of being unsafe and unprotected when away from loved and trusted adults. In terms of development, all infants and very young children seek the proximity of loved and trusted adults to feel safe enough to play and explore. Gradually, most children develop the capacity to be alone and trust a greater number of adults. Starting school may be challenging for many children, but with the support of loving carers and trusted adults in school, most children learn to manage the challenges and enjoy the opportunities for learning and play at school.

Some children continue to find these challenges overwhelming, or an event triggers fears about leaving loved and trusted adults. These triggers may be something that happened at school or at home. The child may fear being away from the parent because of fears relating to the wellbeing of the parent, or fears about their own safety.

Social anxiety

An overwhelming fear of social situations. Social anxiety is more than shyness; it is an intense fear that does not go away and affects everyday activities, self-confidence, relationships and school life.

Children describe this in terms of feeling unsafe and very anxious when in groups of other children. They describe many fears associated with being in groups of children and adults – including saying the wrong thing; looking silly; being mocked; getting lost; feeling overwhelmed; things feeling unpredictable, too noisy and complicated.

Specific phobias

Overwhelming and debilitating fears of an object, place, situation, activity, feeling or animal. They develop when a person has an exaggerated or unrealistic sense of danger about a situation or object. They may arise when a child has an adverse experience of the object, event, place or activity that is associated with powerful feelings of panic and lack of safety.

66

Having anxiety at school is absolutely horrible. You have all these thoughts going through your head and being around everyone makes me feel worse because all my insecurities are hard to cover. It really brings me down. It's not nice.

77

66

(Anxiety)... feels like a swarm of bees just buzzing, not stopping, making it impossible to focus and seemingly impossible to slow down and take a breath. Infants are vulnerable and utterly dependent upon their carers (their survival depends on them) to understand and attend to their needs in trusted, reliable and consistent ways.

Infants and young children experience strong feelings of fear, rage and distress, and require their carers to think for them, calm and attend to them to contain their anxiety and regulate their feelings. This is the basis of secure relationships and a safe base.

When young children feel calm, safe and secure in their relationships, they are able to trust, explore, play and learn.

Soothing distressed infants and young children is vital to support emotion regulation, and to ensure that the young brain is not overwhelmed by high levels of arousal, anxiety, distress and associated toxic stress.

Infants and children require adults to calm and reassure them when they feel afraid. Young children face many common fears. These include separation from loved ones; heights; crowds; getting lost; dark; thunder storms; big animals and spiders and other insects.

Unresponsive, unpredictable, unsafe or harmful care responses or separation from carer causes stress responses and anxiety in young children, and renders them more vulnerable to anxiety later in childhood, and across the life cycle.

Children adapt to these stressful situations, though their adaptations and defences may be unhealthy in the long-term in safe settings, and render them more vulnerable to anxiety and less able to trust adults and seek safety (a port in a storm).

Their underlying vulnerability and anxiety may also act as drivers for a range of challenging behaviours often seen in school.

Access to trusted, attuned and reassuring adults and a safe base in school will support school aged children to overcome their anxieties, become more trusting, and develop coping, problem-solving skills and an optimistic and hopeful outlook.

Common childhood fears

There are a number of common early childhood fears, which are linked to our evolutionary past. These include fear of heights; the dark; thunderstorms; snakes; big animals; spiders and other insects; being alone; getting lost or abandoned (more common among children aged 2 to 7 years). These normally pass with time, explanation and reassurance. Although they normally pass, they may lay early fault lines, which are revealed under later stress.

In addition to common fears, some children develop fears about things that they have seen on films, TV, social media, news items or reading material. These include: ghosts; kidnappers; monsters; dangerous adults; health threats (more common among 6 to 12 years) – these fears normally pass with support and reassurance. Older children are more likely to worry about friendships; relationships; bullying; self and body image; intimate relationships; sexuality; leaving home; increased responsibilities; school work; increasing independence.

Anxiety becomes a problem if fears become more severe and interfere with everyday life, activities and functioning, and don't pass with time.

Page 8 - Managing anxiety problems

Spotting the warning signs of increasing anxiety

- Feeling nervous, on edge, panicky, clingy a lot of the time; needing a great deal of reassurance.
- Feeling full of dread or a frequent sense that something bad is going to happen.
- Finding it hard to concentrate, learn, relax or play; feeling out of control or having inadequate control.
- Having trouble sleeping; being worried about bedtime or going to bed; frequent bad dreams or nightmares.
- Losing appetite; or wanting to eat more for comfort; frequent tummy aches or feeling sick.
- Feeling tired, grumpy, irritable, temper outbursts, showing greater distress.
- Physical feelings, like 'butterfly tummy', heart beating faster, dry mouth, trembling, feeling faint, sweating more than usual, fidgety.
- Feeling afraid of things that were previously enjoyed, such as anxious about: separation from parents; going to school; going out with friends; going to clubs, sports or leisure activities; attending previously liked activities.
- Wanting to stay at home; wanting to remain in familiar places (including school) because they feel safe there.



Understanding anxiety as a driver of behaviours that challenge in school

- Facing early adversity (for example family conflict; violence; bullying harm; trauma) increases vulnerability and provokes anxiety in children.
- Children learn to adapt to adversity however their defensive adaptations may not work well in safe environments.
- Some children become demanding or controlling because of their anxieties about unpredictable adults, unsafe environments, overwhelming demands. This represents their attempt to make things happen in predictable ways in order to feel less anxious.
- Some children (with history of neglect, abuse or other harm) may be demanding or controlling in order to be seen and attended to (because they fear they are, or their needs are, invisible or unheard by the adults around them).
- Some vulnerable children become disruptive or controlling as a means to manage the anxiety and shame they feel in relation to the everyday challenges of schoolwork (fears of not understanding or managing work), friendships and their underlying low self-esteem.
- Some vulnerable children fear getting things wrong, facing criticism, judgement or punishment and become wary of their peers and adults at school. They may avoid contact, seem aloof, alone, cut-off, isolated and lack social confidence and self-esteem. This compromises the process of learning (they fear 'having a go'), as well as their prosocial development and coping and life skills.
- It is important to understand that anxiety underpins many behaviours that are challenging at home and at school.

56

Anxiety triggers can result in a sudden eruption of violence or distress. Confrontation is likely to escalate the situation. It is helpful to remind oneself at such times that eruptions of aggressive behaviour are often triggered by fear, and when apparently most aggressive, children can actually be at their most afraid. Understanding that fear often fuels aggression can help to begin to change the reaction process in the child.

Heather Geddes, Attachment in the classroom, 2006

Page 10 - Managing anxiety problems

Manifestations of anxiety across age ranges

Young children (aged 0 to 5 years)

When anxious may become clingy, fretful, and irritable and may regress in their behaviour. For example, may have outbursts of distress and rage. They may want to remain close to parents at all times; or at particular times, such as bedtime. They may have increased and frequent nightmares or bad dreams. They may wet the bed again. Normal fears (such as separation; dark; animals; abandonment) may become more severe and pervasive in young children and are highly distressing and have great impact on their functioning and daily activities.

Primary school aged children (5 to 11 years)

Become more aware of ordinary and extraordinary dangers but may not possess the resources and problem solving skills to be able to overcome and manage those fears (through the news; overheard adult conversations; family conflict; illness; death). They also have much greater imagination, including the capacity to imagine the worst case. They may experience anxiety, in ways that are readily recognised: worrying; feeling sick; butterfly tummy; constantly seeking reassurance; being afraid of many things (that are not dangerous); constantly fearing the worst; irritable; demanding; need to keep checking things; feeling overwhelmed by negative thoughts.

Secondary school aged children (11 to 18 years)

May experience anxiety in ways similar to younger children, but also experience more marked and severe anxiety, including panic attacks and debilitating anxiety. They become more aware of dangers and life challenges including new challenges, such as growing independence from family ties; greater demands upon them in terms of study and work; new challenges in relationships and sexuality; drugs and alcohol; and bullying, including cyber bullying. They face exams and decisions, which sometimes feel 'life defining'. There is greater propensity for loneliness, isolation, and poor peer relationships. They face growing responsibilities, which may feel overwhelming. All this in the context of huge changes in body, brain and hormones, which generate volatile and destabilising feelings.

Young people (aged 16 to 25 years)

Face huge challenges in the transition from childhood to adulthood, which they may feel ill equipped to manage. They may experience the challenges facing teenagers, but in addition need to find new sense of belonging and face greater responsibilities. Moving away from family home; increased separation from family ties; exam pressures; finding a way of living more independently, without being overwhelmed by feelings of loneliness and isolation (find new ways of achieving a sense of belonging and connection). The young adult also faces the growing challenges of relationships, intimacy, and sexuality – but may also face the threats of exploitation, drugs, alcohol and homelessness. All these increase feelings of anxiety, including acute and pervasive anxiety.

How does everyday anxiety become an anxiety problem or disorder?

There are many ways in which everyday anxieties are increased and become a problem.

Traumatic experience

Or aseries of stressful life events in which child does not feel safe, such as witnessing or experiencing harm, abuse, or family conflict or violence; parental threats; bullying; bereavement; car accident; frightening news items; crime; parental separation or divorce.

Health threats

Parental illness, long-term health conditions in child, threats to child's health, and serious illness in loved adults.

Experiencing lots of change

In short period of time, so that child feels that the ground beneath them no longer feels secure.

Repeatedly hearing scary things or having responsibilities child can't cope with

These may include heightened family conflict, parental separation when child becomes a pawn between warring parents, insults and threats and intimidating interactions.

Being around someone who is constantly anxious and worries about many things

Parent directly and indirectly conveys that the world is a scary place; in addition parental anxiety may compromise their ability to attend to the child's worries and offer reassurance.

Some children find school a constant struggle

They feel overwhelmed by the work, relationships, teasing, bullying, or are simply faced with problems they feel they can't solve, which causes great anxiety.

Thinking styles

Some children have a long-standing tendency to constantly imagine the worst possible scenario. They feel they must be constantly on guard in case something bad happens. They believe that by thinking about all the things that could go wrong, they will be better prepared to cope. However, thinking in these ways mean that they are on constant alert, fearful and find it difficult to relax and play. Children with vivid and powerful imaginations may be particularly vulnerable to this.



Anxiety and the recent impact of COVID-19 restrictions

There is a national increase in the numbers of children experiencing anxiety problems and disorders as a consequence of COVID-19 and the associated impact of its restrictions. It has increased anxiety among children and young people in the ways described below.

The perceived threats associated with COVID-19 has made many children feel less safe. It has increased their worries about the health and wellbeing of self, family and friends.

The world itself may be experienced as less predictable and simply more scary; it is as though our assumption of safety is challenged. It has decreased access to playful, relaxing, fun, leisure, musical, sporting and creative activities. This increases anxiety. It has reduced opportunities for children to enjoy outside play, and connection with the natural world (which are relaxing activities).

Many children (and their parents) find not being able to go to school and working from home very challenging and anxiety provoking. They miss friends and teachers and find doing work online line difficult. Many children are overwhelmed by the lack of clear structures and routines of home learning (including the clear distinction between school and home activities).

Many children miss the school based opportunities for outdoor, sporting, musical and creative activities with their friends and teachers, which help them to manage their anxiety. Many children are struggling with the particular challenges of home schooling. These include:

- difficulties in accessing digital learning
- no space to learn; no computer or internet access
- struggling to cope with remote learning because they are not used to being on screen for long periods
- find learning by screen presentation very difficulty because they prefer auditory and interactive learning

They may not be able to manage the 'chat functions' on the screen; miss the supportive presence of a helpful teacher who explains tasks or feel overwhelmed by all the organisational challenges of home learning. All this in the context of fearing getting behind in learning and failing tests and exams.

Increased experience and feelings of isolation, loneliness, because COVID-19 limits access to those friends and family members who are sources of love, friendship, comfort, reassurance, and safety. Our connections and routines are disrupted.

Economic pressures on families increase parental distress, anxiety and conflict, which increase children's anxiety. Parental distress undermines their capacity to reassure and calm children, and play and have fun with them.

What increases anxiety at school?

Both children who possess effective prosocial, problem-solving and life skills with no history of harm, and vulnerable children who have a history of harm and trauma, may experience increasing anxiety and will need help from school staff to understand their difficulties and mobilise their problemsolving skills.

Vulnerable children are more likely to be overwhelmed by anxiety and associated difficulties at school and may also be less able to overcome their fears because they lack prosocial and problem-solving skills. They also require trusted adults to attend to the real threats that they may be facing, at home and at school, by working effectively with all agencies of support and care.

It is important to recognise the ways in which the school environment and the challenges of schoolwork may be stressful for children and provoke or exacerbate existing anxiety. There are many ways of adapting school life to attend to the needs of anxious children, as well as supporting children to find ways of meeting challenges by supporting a sense of safety and problemsolving.

The factors that may increase anxiety at school include that the child may:

- experience increased anxiety at school about things worrying them at home that they can't put into words or deal with, but are experienced as ongoing threats
- worry about peer relationships at school, such as being excluded from friendships; being teased or bullied; not being liked; not getting on with other children; frequent conflict with other children; shaming relationships with children

- feel anxious and overwhelmed by large groups of children and find it hard to access quiet and peaceful spaces
- not get on with teacher; may find the subject hard; may find the process of learning shaming (classroom is a public space)
- fear particular situation or lesson in school (changes in routine; PE or showers; playtime; meal times; eating in front of others)
- feel very anxious and overwhelmed by the pressure of tests and exams

How can anxiety become embedded?

An example of school refusal. Understanding the maintenance cycles of anxiety and avoidance of feared situations is really important in planning how to help child or young person.

When children feel anxious, they tend to avoid the place, situation or activity that triggers this, resulting in an immediate sense of relief as they have removed the threat. However, when faced with the same situation again, their anxiety returns, usually at a higher intensity. This is because children continue to fear the situation, and the belief that they cannot manage the fear, except by avoidance, becomes embedded.

If this pattern continues, the relief felt from avoiding the situation acts as powerful reinforcement to continue avoidance, and children can get stuck in a vicious cycle, with their anxiety increasing over time.

Example of a vicious cycle around school anxiety Powerful sense Thinking about of relief going to school Scary thoughts, images and Decrease in memories: negative thoughts "Everyone laughed and physical when I answered a feelings question wrong." Decide not to Physical feelings of go into school anxiety (butterflies, (avoid) shaking, sweating) Increased intensity of Sense of impending physical sensations doom: "All my (feeling sick or scary thoughts will shortness of breath) come true".

Helping anxious children at school

Children spend much time at school, and teachers often notice and interact with children when they are anxious. The presence of trusted adults, who are able to respond in attuned and reflective ways with anxious children, plays an important role in supporting anxious children.

7 ways to support anxious children and young people

Create a safe space for conversation: show you are available to talk; this may be easier to do while doing another activity, such as drawing.

2 Demonstrate calm: model a calm and measured response; children are vigilant and watch the behaviours of others to feel safe. Your calmness is very reassuring to children and helps them problem-solve.

3 Empathise and validate: Spend time listening to and understanding the child's fears; help them to recognise that these feelings are understandable. Attend to real threats to children's wellbeing.

Introduce other ways of thinking: a worry is a thought not necessarily a fact. Attend to the worries of children and understand them, whilst at the same time think of other ways to make sense of them. Reframing worries helps to support problem-solving and coping, and helps children keep their fears in perspective.

- 5 Reduce environmental stresses: understand what makes anxiety worse (for example social media) and reduce exposure; increase kindness to self and self-care activities. Use grounding techniques (see Anna Freud Centre website for examples).
- 6 Problem-solving and coping: support child and young person's confidence in finding coping strategies. Support child to develop: a more hopeful and optimistic outlook; more healthy habits; improved problem-solving and life skills; a range self-help activities (supported by good advice and guidance from trusted sites).
- Check in and monitor progress: check with child or young person to see if coping strategies are working. This can be helped by an 'anxiety thermometer' – where 0 is calm and 10 is extremely anxious (see Anna Freud Centre website for this).

Supporting anxious children in primary school

- Calm them, listen, and attend to what is worrying the child, validate their experience and then problem-solve.
- 2 Show the child that you are available to talk with them about their worries; let them know that you have noticed they are worried, and that you want to listen and understand. Children often find it easier to open up when doing something else, like drawing or walking.
- Although it is helpful to reassure a child, it is important to begin by understanding and taking the depth of the child's fears seriously.
- Work out ways with child to calm and soothe (for example using helpful relationship, objects and safe places).
- 5 Suggest different ways of looking at and thinking about their worries (reframing their concerns). Help them find outcomes that are not catastrophic. Help children to problem-solve and come up with new and helpful solutions to keep their worries in perspective.
- **6** Don't put pressure on a child who is shy and worried about big social events to join in big gatherings; gently encourage working in small groups.
 - Prepare children for changes in routines and school events.
 - Use helpful resources and books. For example Huge Bag of Worries (Ironside); The invisible String (Karst); Once I was very scared (Ghosh Ippen).

Supporting anxious children in secondary school

- Let the young person know that you have noticed they seem worried; be curious about their anxiety; take their concerns seriously.
- 2

6

- Help the child to become calm; tune into what is worrying them; convey some understanding and then help them problem-solve.
- Find ways of reassuring child of their safety in school setting; make sure there are safe places the child can go to when very anxious.
- Help child understand anxiety and support them to soothe and calm down (co-regulation), using grounding and breathing techniques.
- Support child to engage in activities that help them become calm when they are anxious, such as using objects that calm: colouring; walking; finding or imaging safe space.
- Help child problem-solve (often very helpful in small steps); help child get things in perspective (reframing the nature of worries).
- Wc bae we
- Work out what is in their control and what isn't help the child pass back worries that do not belong to them. Attend to threats to child's wellbeing both in the school and at home. Liaise with all agencies supporting children to ensure safeguarding.
- 8

Support them to get helpful guidance and advice from safe and recommended sites and helpful books.

Helping a child in very anxious moment to calm down and feel safe

- 1
- Sit with them and offer calm reassurance; this helps the child feel connected to safe and trusted adult. Sharing worries is very helpful.
- 2 Breathe slowing and deeply together; count as you breathe in and out (breathe in to the count of 7 and out to the count of 11); this helps the body to relax and helps the child feel connected to the adult (which is reassuring).
- Reassure them that the anxiety will pass and that they will be OK it may be helpful to describe the anxiety as a wave in a storm that they can ride and then land safely, as the surf gets smaller. Panic attacks are transitory and do pass.
- Ask them to think of a safe and relaxing place or person. Encourage child to describe the safe place, then imagine being there using all the senses.

- Try describing something present using all senses together, for example describe something they can see – including its smell, what it feels like; what it sounds like, what it tastes like. This helps the child to focus and feel grounded.
- 6 Encourage child to do something that helps them to feel calmer, for example, colouring, reading, listening to music, walking, and imaging their safe place.
 - Help child to find something to look forward to.
- 8 Encourage child to access helpful self-help guidance. For example Young Minds or Anna Freud Centre websites) to find helpful advice, such as using grounding techniques (make a self-soothe box with favourite things inside, or play the alphabet game, naming something for each letter of the alphabet); breathing exercises; progressive relaxation exercises and relaxing activities.

What anxious children tell us they find helpful in schools

"The red card system at school really helped me, as well as having places like Compass (nurture space) I knew I could go to if I needed to".

"It was helpful...when teachers just understood and let me have space.". "What helped most was having somewhere quiet and calm because when I was panicking, I'd completely focus on everything around me." "Confidentiality is really important to me. If I tell a teacher something in private, I don't want them to ask me about it in front of my mates".

"The general

understanding from teachers made a difference for me and they allowed me to have a moment to myself when I needed it".

General advice to schools supporting children and young people with anxiety problems

66

When schools suspect a pupil has a mental health problem, they should use the graduated response process (assess – plan – do – review) to put support in place. There are a number of identification and measurement tools, such as the strengths and difficulties questionnaire and Boxall profile, which can support this process". Department of Education, 2018

Consider additional allowances for young people with anxiety, such as: seating near the door, communication aid to leave class, allocated staff member when child is in distress, safety plan, additional time or different time during class change-over, agreement around class engagement (for example, putting up hand or talking in class).

Find a helpful balance between protecting anxious children and gently encouraging them to problem-solve and take on manageable challenges. Anxiety may get worse over time if the child's coping strategies only involve avoiding feared situations and activities. Children build up confidence by taking on manageable challenges and learning that it is safe to do so; not taking on challenges deprives them of opportunities to develop coping, social, life and academic skills.

Criticism, rejection, and punitive discipline exacerbate anxiety in children, creating a sense of low self-worth and confirm the child's fear that the world may be hostile and threatening.

- Normalise mental health issues. Provide a non-stigmatising environment in relation to anxiety and mental health.
- Attend to the threats that may compromise the child's wellbeing.
- Raise awareness of how and where pupils can access support in school and locally.
- Make sure that there are supportive, trusted and emotionally available staff in school, and that children and staff know to whom they can go.
- Support development of emotional literacy and resilience throughout the curriculum, including those subjects with those specific topics (social and emotional education subjects).
- Ensure there are worry boxes, safe places to go to, or drop-in sessions for advice and guidance for anxious children.

Top 10 tips for managing anxiety in schools

0

Make space for a stress free, quiet zone, where people can go if they feel stressed, overwhelmed or anxious.

All schools should nominate a head of wellbeing, who we know we can talk to.

We want to learn about out mental health and emotional wellbeing. Find ways to include this in PHSE and our core curriculum.

Please take our mental health and wellbeing as seriously as our physical health. Just because you can't see it doesn't mean it's not real.

Take the pressure off! We learn better when we are not so stressed and anxious.

Encourage an open culture around mental health, so it's easy for us to talk.

Please don't punish us if our attendance or attainment drop because of mental health difficulties.

•

Offer activities to improve our emotional wellbeing, such as yoga, mindfulness, relaxation, sports and music. Ensure all staff are able to complete training in mental health and wellbeing so they can understand and support us.

Please don't assume you know how we are feeling. Take time to listen and we will explain when we are ready.

For more top tips and information, visit the Mind Your Way website.

Confidentiality, information sharing and safety planning

If there are concerns about marked anxiety problems, it is important that children know about issues of confidentiality, and what to expect if they disclose a problem to a member of staff.

Confidentiality may be of concern, and they need to know that staff will need to share information with the Safeguarding lead and the team who support the emotional wellbeing and mental health of pupils.

Issues of confidentiality will need to be explained to the child or young person. It can be challenging to decide whether to break a young person's confidentiality and disclose to their parents, or other important adults in their life. However, a young person with a marked anxiety problem may struggle to manage intense distress without adequate support.

Very often, they can be helped to tell (or let you tell) their parents about what is happening for them, and in this way engage the support and help of their parents where appropriate.

Seeking support with this from the wider staffing team, particularly the safeguarding lead, is important. However, making confidentiality clear before a child discloses will enable them to make a more informed choice regarding sharing.

There are no hard and fast rules in deciding to break confidentiality, but ask yourself the following 3 questions:

Will you put child at greater risk by telling parents? If you are concerned about their safety you must discuss with safeguarding lead.

What is their family situation? It's important to remember that if you do disclose, give the young person as much control as possible over the process. For example, do they want to tell their parents themselves or do they want to be present when you discuss with their parents? Ensure that you follow up with the young person after this conversation to check the impact and outcomes of this conversation on the young person.

Do you need to seek the advice from the multi-agency referral unit (MARU)?



Talking about anxiety problems

Normalising anxiety for young person is essential, as it can often feel overwhelming and scary, as though they are the only one who has such difficulties. The experience of anxiety may impact on feelings of self-esteem and make children feel isolated and alone. Remind young people that anxiety is a natural human response, a way to protect us from danger when we feel threatened, and can be overcome by talking with trusted adults and problem-solving. Be aware of the warning signs, and support students as early as you can. Don't be afraid to take the first step and start a conversation. Help young people to develop more balanced ways of thinking – this is most effective when a student is calm. Remember that anxiety is a personal experience, and what works for one individual may not be the same for others, and may change over time. The best way to find out what helps a child is to think with the child about what works for them.

Conversation prompts

Coping strategies and support

- "What has helped you get through the previous term?"
- "What would be the worst outcome if that worry were to play out? This can be expanded to look at the probability of other outcomes, to find more realistic ways of thinking. You think that would feel like the end of the world; let's think together about more realistic outcomes"
- • "We all learn by trying new things and trying it may teach our brain that it isn't something to worry about or that the outcome might not be nearly as bad as we imagine".
- "It might feel difficult, but we need to challenge ourselves in gentle and gradual ways; what would feel like a manageable challenge [today, this week or term]?"
- "It was really good you managed that last time. What made it different? Did anything help you to reduce your anxiety? Now can we keep practising that?"
- "This seems like it is too difficult today, let's take some time to relax and then reflect on what wasn't manageable and what might be a good strategy to cope better when we try again".

Confidentiality

• "I appreciate that you may tell me this in confidence but it's important that I let you know that your safety will always be more important than confidentiality. If I am sufficiently worried that you are unsafe, part of my job is to let other people, who can help you, know what's going on. I will always have that discussion with you before and let you know what the options are so that we can make these decisions together."

Ongoing support

- "Why don't we write down a plan that we have agreed together, then you
 will always have a copy that you can look at if you need to remind yourself
 about anything. Sometimes when you are feeling anxious it is difficulty to
 remember the things that we have put in place –this can help to remind
 you."
- "Shall we fill in together the Heath and Wellbeing map, which includes our safety plan, and the things that help you cope? This will be a good reminder of our agreed plan to help and support you".

Reasons for anxiety

• "I wonder if something specific has happened to you, or whether there are several things going on at the moment that may be making you feel very worried? Can you tell me a little more about what is on your mind and worrying you?"

Speaking to parents (where appropriate)

• "I wonder if you are happy for me to talk with your parents or carers about what is worrying you? I understand it may be very hard to think about talking with your parents about this, but I am worried about your wellbeing and safety and this is important. Would it be helpful if we did this together? Do you have an ideas on what would make it easier to talk with your parents?"

Starting the conversation and establishing rapport

- "I can see that things are making you anxious in school and this is making certain school activities more difficult. Can you say a bit more about what's hard for you? What might make things better or easier?"
- "Let's see how we can work this out together. I may not have the skills to give you the help that you need, but we can find that help together if you like."
- "Can I check with you that I have understood what you are feeling correctly?"



Things to remember

Anxiety disorders affect people of all ages, races, ethnicities, genders, sexual orientations and socio-economic backgrounds.

- 2 There are many types of anxiety, and young people can experience a number of these. For some children anxiety is a general feeling of tension or worry, and for others anxiety is related to specific events or situations.
- 3 Anxiety may act as a driver for a range of challenging behaviours; anxious children find it very difficult to engage with study and all learning activities.
- Anxiety can occur alongside other mental health problems, and symptoms can overlap; for example, anxiety often accompanies depression and self-harm in children and young people.
- 5
- Marked anxiety can be incapacitating and lead to avoidance of anxiety provoking activities; this in turn leads to reduced confidence, self-esteem and causes isolation.

- Sleep may be significantly disturbed among anxious children, further impacting on wellbeing, cognitive functioning, and engaging with school work.
- Anxious children and young people may resort to unhealthy coping to manage their anxiety, such as self-harm or drugs as a way to temporarily relieve or distract from anxiety.
- 8 The support of calm and reassuring adults, who help anxious children problem-solve and keep fears in perspective, is helpful.
 - Supporting children to gradually and gently face their fears is helpful in the long term; avoidance may be part of vicious cycle of deterioration of anxiety.

6

9

Most young people fully recover from an anxiety disorder and manage everyday anxiety.



Getting mental health support for anxious children

The I-Thrive Framework supports mental health pathways across all levels of care and treatment. Within this framework there are different levels of support for anxious children and those experiencing anxiety disorders. The Bloom network of consultation and support provides advice and guidance for schools and signposts to supportive therapeutic interventions. Clinical associate psychologists are linked to secondary schools and mental health support teams are linked to some primary schools to support mental health.

There are a number of early help mental health agencies that support mild to moderate anxiety problems. Discussions about what is support is available take place in the local Bloom meetings (check the schedule of meetings with the early help hub). The main route for referral is via the early help hub, unless there are safeguarding concerns, and then the multi-agency unit is the first point of help. It may be helpful to discuss concerns with staff from the early help hub to plan most effective intervention.



References and information

Useful websites

- Autism spectrum team: Email <u>ast.advice@cornwall.gov.uk</u>.
- Cornwall Early Help Hub: Call 01872 322277.
- Educational psychology service: Email <u>eps.advice@cornwall.gov.uk</u>.
- <u>Education Scotland</u>: Applying a whole school nurture approach.
- NHS mental health response line for support and advice in Cornwall: Call 0800 038 5300.
- <u>NSPCC</u>: Offer support to help manage children and young people's emotions.
- <u>Turning the Tide</u>: Transformation plan for children's mental health services.
- Young People Cornwall: Call 01872 222447.

Helpful books for younger children

Once I was very scared (Chandra Ghosh Ippen, 2017) The invisible string (Patrice Karst, 2018) The huge bag of worries (Virginia Ironside, 1996)

Resources for young people and parents

- <u>Anna Freud Centre</u>
- <u>Anxiety UK</u>: Information, support and self-help.
- <u>BBC Own It</u>: Website and wellbeing app that children can use.
- <u>Happy Maps</u>: Mental health advice for parents of children of all ages.
- <u>Headstart Kernow</u>: Resilience and mental wellbeing in young people.
- <u>Health and wellbeing map</u>.
- <u>Mind Your Way</u>: A place for young people in Cornwall to get help with mental health and wellbeing. Email <u>headstart@your-way.co.uk</u> or call 01872 222447.
- The Mix: Essential support for under 25s. Call 0808 808 4994 (24 hours).
- Penhaligon's Friends: Cornish Children's Bereavement charity
- <u>StartNow Cornwall wellbeing action plan</u>
- <u>Stop, Breathe and Think</u>: Supports mindfulness.
- Young Minds UK: Charity for children and young people's mental health.

Anxiety apps

- Big White Wall: Round the clock support from therapists to help cope with stress and anxiety.
- Calm: The number 1 app for sleep and meditation.
- Headspace: Relaxation techniques to help manage stress and anxiety.
- Thrive: Use games to track your mood and teach yourself methods to take control of stress and anxiety.

For a full list of recommended mental health apps visit the <u>nhs.uk website</u>.

Appendix 1: I-Thrive pathways of care and support

Anxiety is a state of worry, anxiety, fear and avoidance causing distress and impairment, accompanied by physical symptoms of anxiety.

Getting advice

Anxiety is very common in children, young people and adults. Getting advice is useful if signs of anxiety and worry are beginning to cause mild distress or mildly effecting functioning.

Reading information about anxiety and learning tips and strategies from books, videos, and apps can be an effective intervention for mild anxiety. Learning relaxation and mindfulness techniques is helpful.

Those concerned about anxiety and looking for further information can find good quality information about anxiety and worries.

- Anxiety apps see <u>references and information</u>
- Anxiety UK
- Bloom: A referral may be helpful, if a better understanding of why the young person is anxious and what help is available, via the child and adolescent mental health services access team in the early help hub.
- Cornwall Early Help Hub: Call 01872 322277
- Happy Maps
- Headstart Kernow
- <u>Mind Your Way</u>
- Young Minds UK

Getting help

This is for those who have anxiety that is leading to moderate distress and or moderate impact on functioning.

It is also appropriate for those where guided self-help and provision of evidence-based information has not led to an improvement.

Intervention for anxiety can be directly sought from <u>Young People Cornwall</u> who have team of emotional wellbeing practitioners. Call 01872 222447.

Assessment and intervention can also be sought from the child and adolescent mental health services access team. After assessment a young person could be offered work with either a primary mental health worker, or a specialist mental health specialist depending on the clients needs.

Cognitive behaviour therapy is the intervention most recommended for anxiety disorders. It can be delivered individually or in groups.

For younger children parent led anxiety management, psycho-education and skills training for parents, and creative arts and play based interventions may be most appropriate.

Getting more help

The anxiety is causing severe distress and severely impacting on the young persons functioning and/or the young person does not show improvement after 12 sessions of CBT informed intervention.

Offer a combination of treatment including CBT and medication together with care co-ordination. Ensure evidence based intervention is tailored to the formulation of the presentation for panic disorder, generalised anxiety disorder, separation anxiety and health anxiety. If progress not made consider factors impacting and maintaining the difficulties. For some young people consider additional parent work and/or family therapy.

If a person does not respond to intervention or is unable to engage consider an integrated multi-agency psychosocial approach including educational needs, social development and risk management if needs are not met.

Risk support

The level of distress or impact on functioning is impacting upon the young persons risk to self, others or from others with a potential to cause significant harm.

If there has been no response to adequate treatment in outpatient settings or the young person does not engage in support and treatment and there is significant ongoing risk to self or others, work collaboratively across different professional groups and agencies to promote safety, minimise risk and encourage young person's engagement with care, support and treatment.

Provide a team around the worker approach; develop a shared safety plan; work with crisis team.



Appendix 2: Advice to parents and carers

Supporting anxious young children

- Try to make sure small children get wide range of experiences outside the home meeting other people and playing with children.
- Try and support your children to make their own choices and decisions. This helps them to problem-solve and develop a sense of growing independence and confidence. Be calm and reassuring with your child.
- Help children to fall asleep on their own. Make bedroom a nice place with soft night light. Read the child lovely bedtime stories.
- Encourage spending time away from home and family; experiencing safe separations and happy reunions is helpful.
- Help your child to soothe and regulate emotions, when feeling upset or worried. Help them to talk about things that they fear and problem-solve with them. Reassure them and emphasise their safety.
- Have fun with your child; joy and play is an antidote to anxiety.
- Protect child from family conflict, disputes and pressures. If parents separate, do not expect the child to take sides; ensure that children feel protected from parental disagreements.

Supporting anxious primary aged children

- Show children that you are available to talk about their worries; let them know that you have noticed they seem worried, and you want to listen and understand. Children often find it easier to open up when doing something else, like drawing or going for a walk.
- Prepare children for changes in routines or changes in school.
- Although it is important to find ways to reassure child, it is important to begin by understanding and taking worries seriously first. Take the depth of feeling seriously.
- Suggest different ways of looking at or thinking about their worries; help them see outcomes that do not feel catastrophic; help children problem-solve or come up with solutions to things they worry about.
- Don't put pressure on child who is shy, and worried about big social events and gatherings; gently encourage working and engaging with small groups.
- Protect child from family conflict, disputes and pressures. Do not expect child to take sides. Never use child as pawn in parental conflict

Supporting anxious teenage children

- Teenage years can be fraught times. Bodily and emotional changes can feel very uncomfortable and scary. This may lead teenagers to be very concerned with their body; friendships and relationships; may have changed sleeping problems; may experience eating problems. Connect with teenage children and show understanding.
- Feelings of uncertainty, turmoil, anxiety and unhappiness are relatively common among teenagers. Mostly, they need attuned and trusted adult to talk with; help with emotion regulation and problem-solving; show compassion and reassurance, and help with self-esteem. Children need their parents to be calm and reflective.
- Set clear ground rules; these need to be reasonable and less restrictive as the child gets older and more responsible. Children need reasoned and flexible rules.
- Listen to your child; connect with compassion; be patient and calm (even when you do not feel calm); be a trusted adult and adopt a non-judgemental and non-overly critical approach. Support problem-solving.
- Find plenty of support for yourself! It is often hard to get it right for teenagers.

Helping children with school refusal and anxiety

- Ask child what it is about school that makes them not want to go; stay calm; take worries seriously; listen and understand.
- Even though situation may be stressful, it is not helpful to shout, tell them off or use physical force this will increase anxiety. Instead, think together about ways of coping and developing helpful ways forward.
- Support coping strategies and things that help child cope (soothing aids).
- Plan regular routines before school.
- Speak with the school and child's teacher. Find out if there are pressures at school with work or friendships or bullying. Work out a plan with the school.
- Discuss with school about possible triggers moments when they seem to particularly struggle, such as breaks; playtime; subjects.
- Keep in regular contact with key school staff.
- Be consistent in strategies to support return to school.
- Support child to problem-solve with you; think of strategies together; encourage pride in problem solving. Think about changes that can be made.







C Anxiety disorders are the most prevalent mental health problem in the west. **?**



get this information in another format

If you would like this information in another format or language please email: kccg.engagement@nhs.net