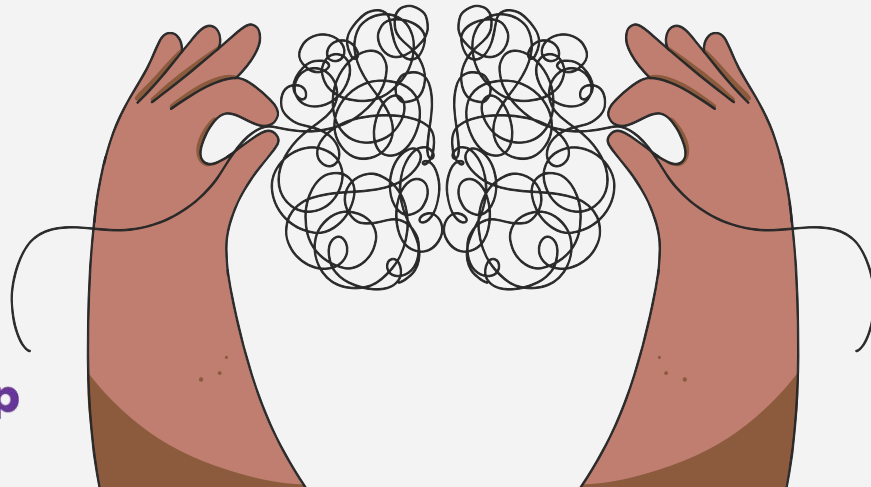


# When Kids Can't Relax: All About Anxiety



# What We're Talking About Today

01

Anxiety Myths & Facts

02

What Is Anxiety?

03

Types of Anxiety

04

Panic Attacks

05

How Youth with Anxiety Present

06

Supportive Strategies

# \* Anxiety Myths & Facts

02

What Is Anxiety?

03

Types of Anxiety

04

Panic Attacks

05

How Youth with Anxiety Present

06

Supportive Strategies





## MYTH OR FACT?

Kids are too young to experience anxiety or other mental illnesses.

## MYTH.

Half of all people who have mental health disorders will show initial signs before they're 14 years old. Anxiety disorders are frequently diagnosed in kids and teenagers.



## MYTH OR FACT?

If a panic attack gets too bad, a person can pass out or lose control.

## MYTH.

It's unlikely a person will faint during a panic attack. Fainting is caused by a sudden drop in blood pressure. During a panic attack, BP doesn't fall; rather, it rises slightly.



## MYTH OR FACT?

Anxiety disorders are the most common mental illnesses in the U.S.

## FACT.

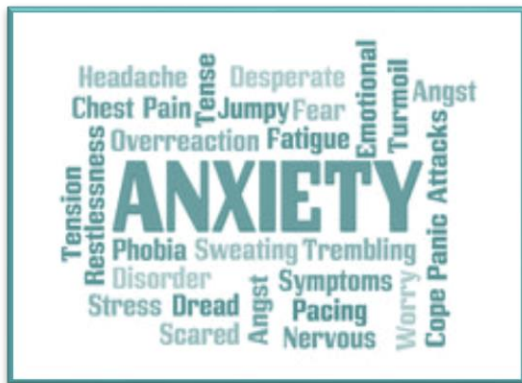
They affect 40 million+ adults in the US age 18 or older (about 18.1% of the population) and about 4.5 million (7.1%) of youth ages 3-17 - and these are just diagnosed numbers.

## MYTH OR FACT?

Eating right, exercising, avoiding caffeine and living healthy will cause anxiety disorders to go away.

### MYTH.

Some of the anxiety might go away, but the disorder won't be cured. Anxiety disorders are sensitive to stress, but stress does not cause them. To address the roots of an anxiety disorder, people may need therapy, medication, to face their fears, reduce avoidance, change how they think/feel/behave relative to situations, and learn about symptom management.



01

Anxiety Myths & Facts



# What Is Anxiety?

03

Types of Anxiety

04

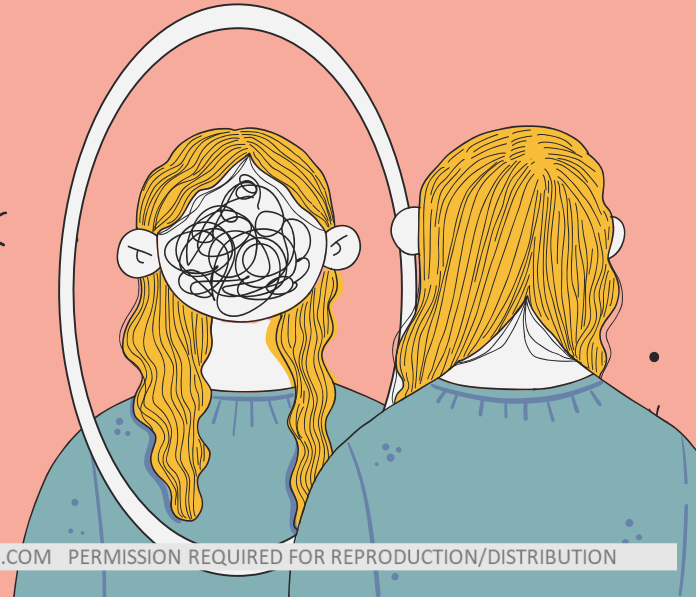
Panic Attacks

05

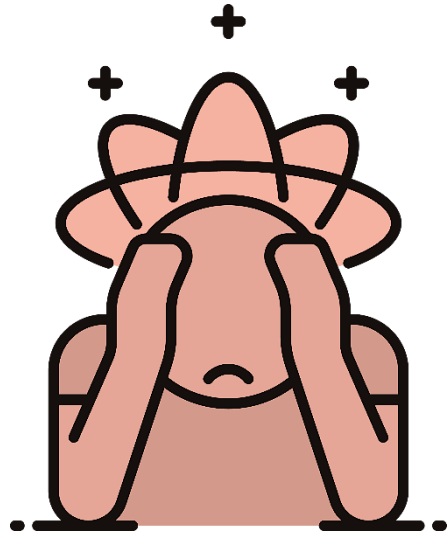
How Youth with Anxiety Present

06

Supportive Strategies







## Anxiety is:

- A normal reaction to many different kinds of events and situations in our lives.
- One of our internal warning systems that alerts us to danger or other threats and **prepares our bodies for the fight, flight, or freeze response.**

**Anxiety is a problem when it becomes overwhelming or unmanageable and it comes up unexpectedly.**

## Typical or “normal” Anxiety:



- Is related to a specific situation or problem
- Lasts only as long as the situation or problem
- Is proportional to the situation or problem
- Is a realistic response to a realistic problem or situation

**Anxiety disorders** are mental illnesses that can have a big impact a person's life. People may:

- Avoid going about their daily lives in order to avoid anxiety or anxiety-provoking situations ("triggers")
- Experience a lot of uncomfortable physical sensations and physical health problems
- Say that they know their anxiety isn't based in reality, but they feel 'trapped' by their thought and feelings.

**Anxiety disorders can be treated.**



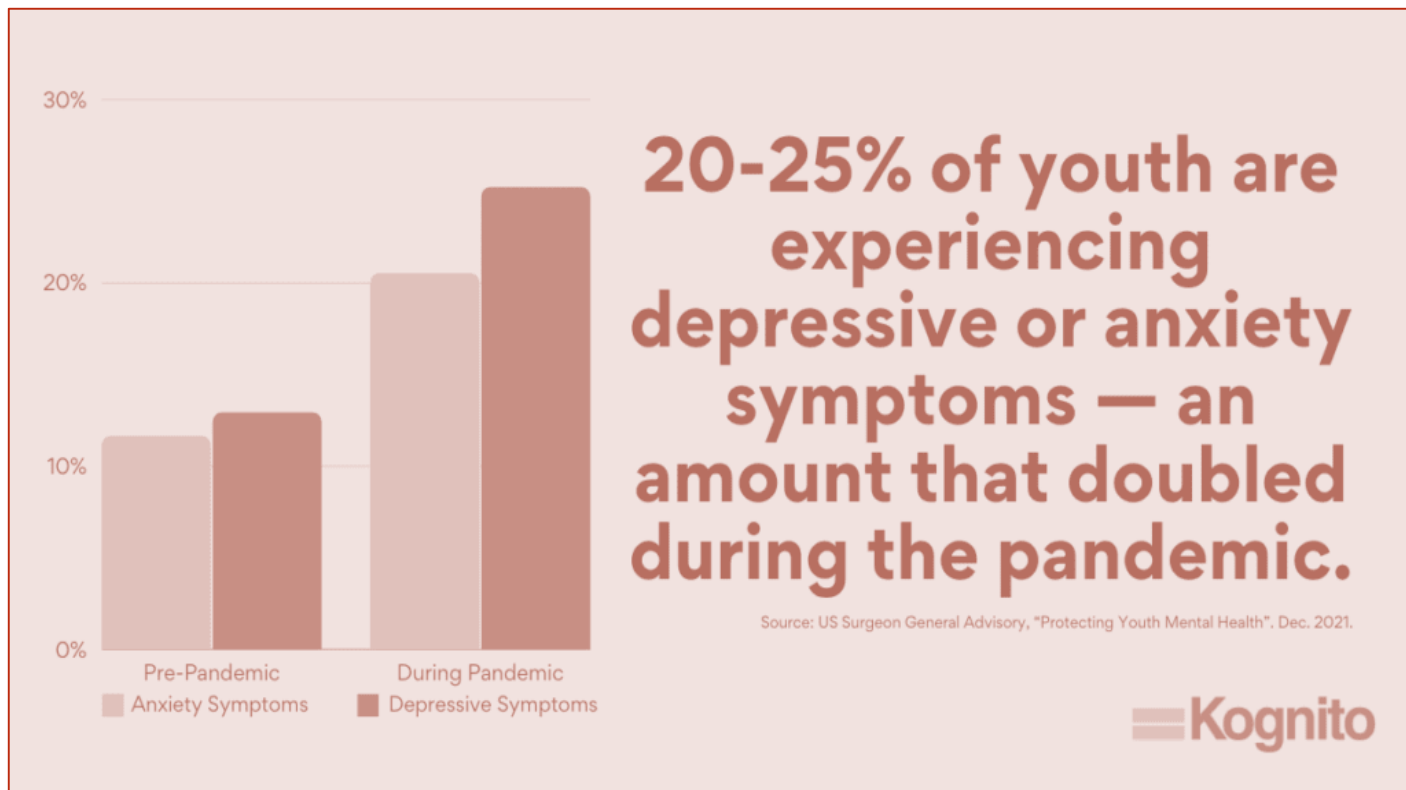


## When someone has an **anxiety disorder**:

- Anxiety may come up unexpectedly, for seemingly no reason
- The anxiety response to a situation or problem may be much stronger than they would expect
- They may experience a lot of unrealistic anxiety, such as fear of a situation that likely will never happen
- Anxiety may last for a long time, even when the situation or problem has been resolved
- Anxiety may feel impossible to control or manage



Typical	Disordered
Fear in a dangerous neighborhood where prior incidents have happened.	Fear in your own neighborhood or community where no prior incidents have been recorded.
Worrying about catching a cold from others.	Worrying about contracting ebola or other rare diseases.
Concern around unfamiliar animals.	Concern that you'll be attacked by bears in your backyard.
Nervousness about public speaking.	Nervousness about going out in public.



01

Anxiety Myths & Facts

02

What Is Anxiety?



# Types of Anxiety

04

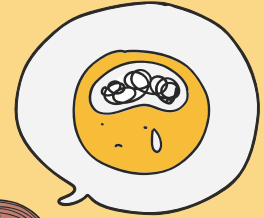
Panic Attacks

05

How Youth with Anxiety Present

06

Supportive Strategies



## Generalized Anxiety Disorder (GAD)

**Characterized by persistent, excessive, unrealistic worries that are not specific to an object/situation.**

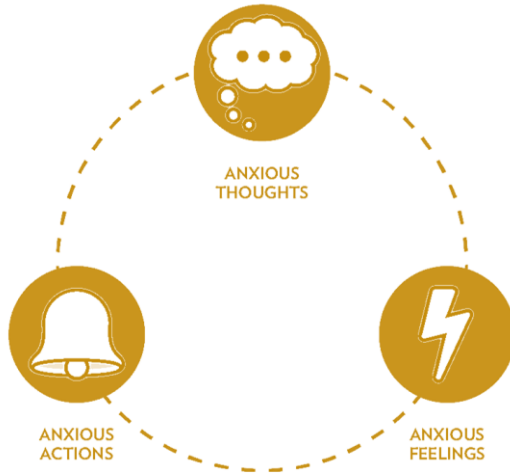


- Find it difficult to turn off their worrying, leading to difficulty concentrating, learning, and being social.
- Often focuses on performance at school/sports/clubs, personal safety and safety of family members, sports, natural disasters
- Insecure, frequently seek reassurance, may be overly concerned about meeting others' expectations



# Obsessive-Compulsive Disorder (OCD)

Experiencing recurring obsessions/compulsions that interfere with daily functioning



- **Obsessions** are intrusive and unwanted thoughts, images, or urges that cause distress or anxiety.
  - Common: concerns about contamination, cleanliness, aggressive impulses, or the need for symmetry.
- **Compulsions** are repetitive actions, rituals, or routines the person feels compelled to perform to relieve the anxiety associated with the obsessions
  - Common: checking, washing/cleaning, and arranging

## Panic Disorder

Spontaneous, unpredictable, unexpected periods of intense fear or discomfort compounded by **panic attacks**



- **Panic Attacks:** shortness of breath, dizziness, tingling, lightheadedness, shaking, fear of losing control, and an increased, racing heart beat
- Panic attacks can be caused by severe anxiety, but panic disorder is panic attacks without any apparent trigger
- May become preoccupied with anticipating future attacks

## Specific Phobias

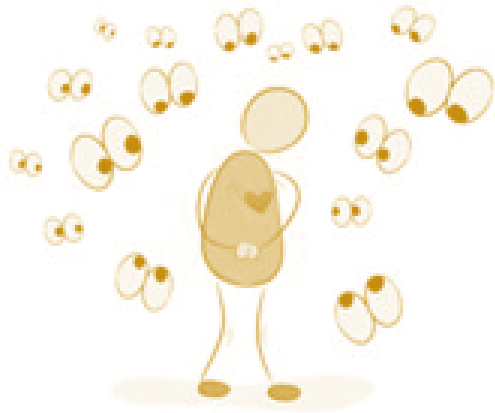
**Identifiable, persistent, irrational, seemingly excessive and unreasonable fear in the presence of, or in anticipation of, a specific object, place, or situation.**



- Does not decrease with reassurance (but “usual fears” do)
- Will work hard to avoid common places, situations, or objects even though they know logically there's no threat or danger.
- Common: animals, insects, blood, heights, thunder, closed spaces, flying, medical procedures, elevators, driving
- In children/adolescents, the identified fear must last at least six months to be considered more than a transient fear.

## Social Anxiety Disorder/Social Phobia

**Intense, excessive fear of being judged, humiliated, embarrassed, or rejected in a social or performance situations in an age-appropriate setting with peers**



- May worry about acting or appearing visibly anxious or being viewed as stupid, awkward, or boring.
- Often avoid social or performance situations (including eating in public), and when a situation cannot be avoided, they experience significant anxiety and distress.
- May experience strong physical symptoms, such as a rapid heart rate, nausea, and sweating, and may experience full-blown panic attacks when confronting a feared situation.

## Selective Mutism



**A rare condition causing inability to speak in specific situations or around certain people, when the person is otherwise able to speak freely in familiar situations.**

- May find social situations very stressful, causing an anxiety so severe the child feels unable to speak.
- NOT a willful refusal to speak, and not due to other communication disorder (i.e. Autism) or language spoken
- Often co-diagnosed with other anxiety disorders
- Can be a result of trauma, but not exclusively

## Separation Anxiety Disorder

**Significant fear and distress surrounding being away from home or separated from caregivers**

- Separation anxiety that is age- and stage-appropriate is expected and normal
- The disorder affects a child's ability to function socially and academically
- May refuse to eat, sleep, or participate in activities outside the presence of their attached caregiver



## PTSD (Post-Traumatic Stress D/o)

A serious, potentially debilitating condition that can occur in people who have experienced or witnessed a life-threatening/altering event such as natural disaster, serious accident, terrorist incident, sudden death of a loved one, or violent personal assault



- PTSD is diagnosed when long-term symptoms remain after such a trauma and these interfere with relationships/activities
- The child could have experienced the trauma directly OR witnessed it happening to someone else
- Often confused with ADHD symptoms

01

Anxiety Myths & Facts

02

What Is Anxiety?

03

Types of Anxiety



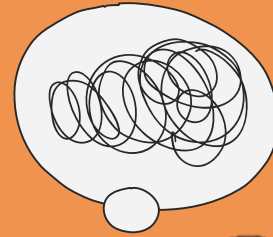
# Panic Attacks

05

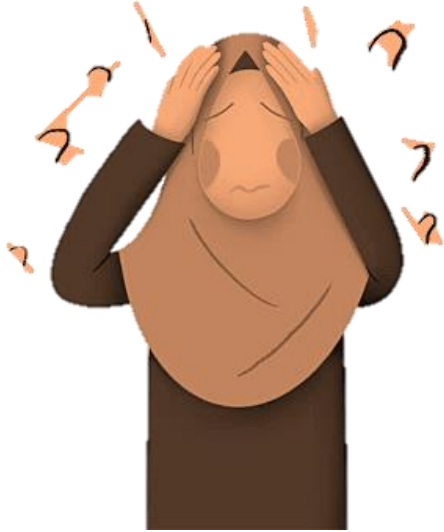
How Youth with Anxiety Present

06

Supportive Strategies







## PANIC ATTACK SYMPTOMS



Racing heart



Trembling  
or shaking



Chest pain



Sweating



Fear of dying



Nausea or  
upset stomach



Numbness



Breathing  
difficulties

## How to Help When Someone is Having Panic Attack Symptoms

Express concern and willingness to help.

Ask whether the person knows what is or has happened

### If you don't know it is a panic attack:

- Check for a medical alert bracelet and follow the instructions
- Seek immediate medical assistance

### If the person believes it is a panic attack:

- Reassure the person that it is a panic attack
- Ask the person if you can help



## How to Help When Someone is Having Panic Attack Symptoms



- Remain calm
- Speak in slowly, clearly, and in a reassuring but firm manner
- Use short sentences when speaking
- Be patient with the person
- **Acknowledge** that the terror feels very real
- **Remind** the person that while a panic attack is frightening, *it is not life threatening*
- **Reassure** the person that they are safe and that the symptoms will pass
- Avoid expressing your own negative reactions

## Ways To Redirect Anxious Thinking Before or After a Panic Attack



Use deep breathing



Find a focus object



Take a walk



Doing light exercise



Use muscle relaxation techniques

01

Anxiety Myths & Facts

02

What Is Anxiety?

03

Types of Anxiety

04

Panic Attacks



# How Youth with Anxiety Present

06

Supportive Strategies





Appear more clingy than normal



Be restless and fidgety



Complain of stomachaches



Display changes in eating and sleeping habits



Express negative thoughts or worries



Get upset or angry more



Have bouts of unexplained crying



Struggle to concentrate



## Excessive Worry

- May exhibit excessive worry about various aspects of the program, such as being away from home, making friends, participating in activities, or being in unfamiliar environments.
- May constantly seek reassurance from staff or express concerns about potential negative outcomes.

## Overthinking & Rumination

- May replay past events or worry about future scenarios.
- May struggle to let go of worries or intrusive thoughts, affecting their ability to fully engage in the present.

## Separation Anxiety

- May have difficulty separating from their parents or guardians, show distress when away from familiar faces, or express a strong desire to return home.



## Physical Symptoms

- Anxiety can manifest in physical symptoms, such as stomachaches, headaches, nausea, dizziness, sweating, or trembling.
- May complain of feeling unwell without a clear medical cause (“somatic complaints”).



## Social Withdrawal

- May feel overwhelmed in social situations and prefer to withdraw or isolate themselves from others.
- May struggle to initiate conversations or participate in group activities, leading to feelings of loneliness or exclusion.

## Perfectionism/Fear of Failure

- May fear making mistakes or disappointing others.
- May avoid taking risks or trying new activities to prevent potential embarrassment or criticism.



## Avoidance Behaviors

- Might avoid certain activities, refuse to participate in group games, or isolate themselves from their peers to minimize anxiety-provoking situations. These are coping mechanisms.

## Increased Irritability or Emotional Sensitivity

- May become easily upset, irritable, or emotionally reactive.
- May have frequent mood swings or react strongly to perceived criticism or negative feedback.



01

Anxiety Myths & Facts

02

What Is Anxiety?

03

Types of Anxiety

04

Panic Attacks

05

How Youth with Anxiety Present



# Supportive Strategies



## When offering support, **AVOID** doing these things that don't help:



- Tell the person to “snap out of it”
- Act hostile or sarcastic
- Blame person for symptoms
- Adopt an overinvolved or overprotective attitude
- Nag the person to do what they normally would do
- Trivialize the person’s experiences
- Belittle or dismiss the person’s feelings
- Speak with a patronizing tone
- Try to “cure” the person

## Listen Non-judgmentally

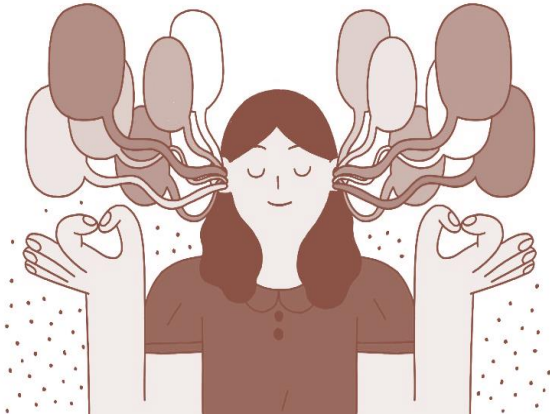


### Try to:

- Understand the symptoms for what they are
- Empathize with how the person is feeling about his or her beliefs and experiences

### Try not to:

- Confront the person
- Criticize or blame
- Take comments personally
- Use sarcasm or patronizing statements
- State any judgments about the content of the beliefs and experiences



**Key attitudes** to make an anxious individual feel respected, accepted, and understood:

- Acceptance
- Genuineness
- Empathy

**Key nonverbal skills** to show you are actively listening:

- Attentiveness
- Comfortable eye contact
- Open body posture
- Being seated
- Sitting next to the person rather than opposite them
- Be still with your body (no fidgeting)



## Build Trust and Rapport

- Create a calm, safe, welcoming environment where youth feel comfortable sharing their feelings/concerns.

## Actively Listen & Validate Feelings

- Actively listen to the child's worries without judgment. Empathize with their experience and let them know their feelings are valid.



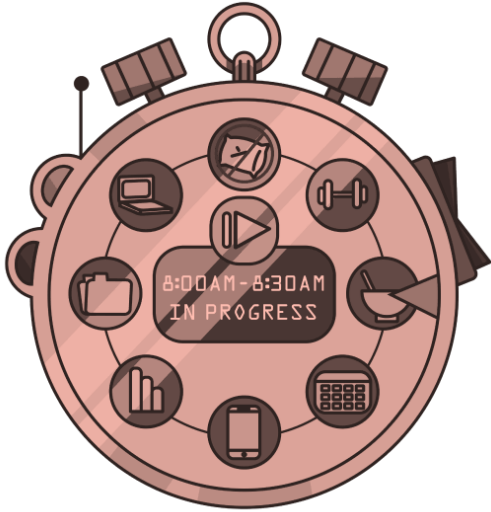
## Educate the Child

- Teach the camper about anxiety in simple, age appropriate terms, letting them know their feelings are normal and others also experience similar emotions.

## Teach Coping Strategies

- Teach deep breathing, muscle relaxation, visualization techniques, mindfulness activities. These build resilience and reduce immediate anxiety symptoms.





## Set Achievable Goals

- Break down tasks or challenges into smaller, more manageable steps to alleviate anxiety.
- Celebrate achievements along the way to help build self-confidence

## Implement Structured Routines

- Use consistent daily routines to provide a sense of **security** and **predictability**



## Encourage Peer Connections

- Facilitate opportunities for peer inclusion and support. Encourage group activities, teambuilding, and cooperative games to foster positive interactions.

## Collaborate with Parents/Guardians

- Share observations, discuss progress, and exchange strategies between the staff in program and the home support system
- Helps ensure a comprehensive approach to supporting the child's well-being.



## Remember that you are not a mental health professional.

- If a child's anxiety symptoms are severe or persist over time, it may be necessary to involve a licensed therapist or counselor for evaluation and/or treatment.

## Try the "Be A..." Activity

**BE A KOALA**

FIND SOMEONE YOU CARE ABOUT AND ASK THEM FOR A HUG



**BE A HEART**

MAKE YOUR HANDS INTO A FIST. RELAX AND REPEAT 10 TIMES



**BE A BIRD**

HUM "THE ABC'S", "ROW ROW YOUR BOAT" OR YOUR FAVORITE SONG



**BE A TREE**

STAND TALL, TAKE A DEEP BREATH AND COUNT TO 10



**BE A SLOTH**

SLOWLY, STARTING WITH FINGERS AND TOES AND WORKING IN, RELAX AND SLOW DOWN YOUR BODY



**BE A LLAMA**

CHEW A PIECE OF GUM



**BE THE WIND**

PLACE YOUR HANDS IN FRONT OF YOUR FACE AND BLOW LONG DEEP BREATHS INTO YOUR HANDS



**BE A MONKEY**

TAKE A FEW MINUTES TO STRETCH, SHAKE IT OUT, OR EVEN DO SOMERSAULTS



**BE AN ARTIST**

DRAW A PICTURE SHOWING YOUR EMOTIONS



**BE A CATERPILLAR**

WRAP YOURSELF SNUG IN A BLANKET



**BE A FISH**

GO TO A SINK.

RUN YOUR HANDS UNDER THE WATER OR SPLASH SOME ON YOUR FACE



**BE A WOLF**

GO TO A QUIET PLACE FOR SOME ALONE TIME. SIT QUIETLY



## Teach Youth Specific Skills for... DISTRACTION



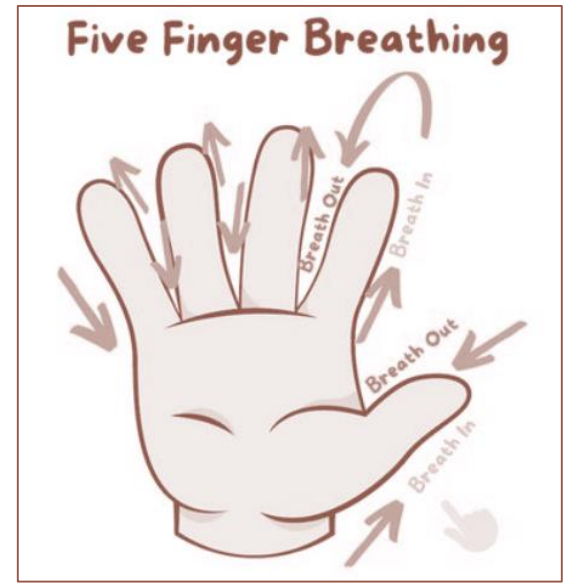
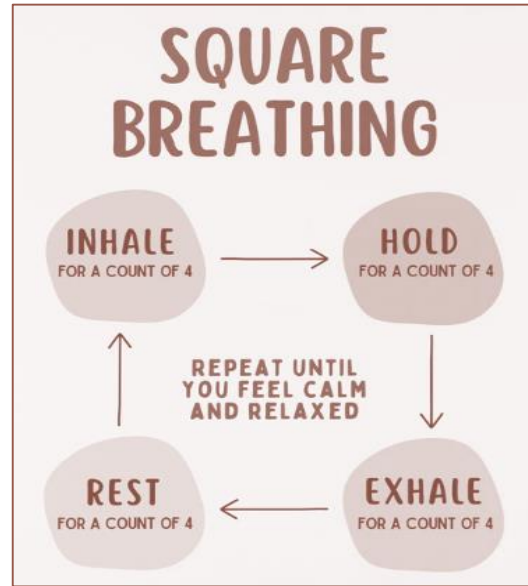
- Count from 1 to 100 (if still anxious, count backwards from 100 to 1). Try counting back from 100 by 3's.
- Find a trusted person to tell about your worries
- Watch a funny video or movie
- Listen to music or play music on an instrument
- Get creative! Draw, paint, color, write, build
- Do a fun hobby

## Teach Youth Specific Skills for... RELAXATION

- Take 3 deep breaths
- Get a hug or give a hug
- Think of a peaceful place
- Tense and relax your muscles one area at a time
- Take a nap
- Lay quietly and tell a story in your head
- Practice meditation



# Practice Breathing Techniques



## Teach Youth Specific Skills for... MOVEMENT



- Take a break
- Exercise
- Run/Jog/Race
- Jump up and down for 1 minute
- Do Yoga poses
- Try to beat a record # of push ups or situps
- Do wall pushups



## Teach Youth Specific Skills for... MENTAL/THINKING



- Talk yourself into being calm by repeating “be calm...be calm...” or “I can handle this.”
- Think of 3 things you are grateful for
- Choose 10 minutes of the day for worry time; all worries need to wait their turn!
- Imagine putting your worries on a rocket to space, in the trash can, on a raft downriver, etc.
- Make it a Boggart - what would the worry be if you took away it’s biggest power?

# Try the 5-4-3-2-1 Grounding Exercise

Things you can ...



**See**



**Hear**



**Touch**



**Smell**



**Taste**



# When Kids Can't Relax: All About Anxiety

## SUMMARY:

You're not a mental health professional, although sometimes lately it feels like you need to be! That's because over the past several years we have seen a marked increase in participants who are experiencing anxiety symptoms, panic attacks, and related mental health challenges during youth programs. This session was developed with guidance from an LICSW who specializes in youth and anxiety; it is designed specifically for those of us who work in youth programs but are not mental health professionals. In this session, we will look at anxiety signs & symptoms and learn about how those symptoms present in youth (which differs from what we see in adults). We will cover signs of a panic attack and how to provide on-the-spot help to a person who is experiencing one. And, we will cover specific strategies you can implement to support youth in your programs who present with anxiety-based needs.

## IMPORTANT NOTE REGARDING COPYRIGHT & USE OF MATERIALS

Some of the source material in this presentation is original and some is summarized from various educational, mental health, training and services resources, both online and in person from professional/clinical personnel. Links/attributions have been included on the "source material and research" slide whenever they are known. Please reach out directly to Emily for a full list of these resources if you would like to access the source material in depth. Emily Golinsky and Bright Moose LLC do not claim ownership of the independent intellectual property of others compiled within this presentation. This particular presentation format and delivery, however, is copyright by Emily Golinsky and Bright Moose LLC. *Slide background art, transition page clipart, and Handlee title font used with permission from Slidesgo.* This PDF copy of the presentation is for reference purposes following attendance at the live/virtual presentation. Please feel free to use this material and this presentation to inform and engage those working in your organizations with the goal of providing top quality care for all your participants. Please do not use it to present to other groups outside your organization or reproduce it in bulk. Thank you for respecting these expectations.



## CONNECT WITH EMILY:



call/text: 781-430-8358



emily@BrightMooseTraining.com



www.BrightMooseTraining.com

