

# Anxiety – topping up the toolkit

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# The Christchurch Context

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2010 & 2011: Earthquakes (with EQC claims & rebuilding ongoing!)

2019: Mosque attack

2020-present: COVID-19

- We are aware of the effects of early adversity on the developing nervous system (changes in brain structure and architecture create a more sensitised stress response and vulnerability for mental health difficulties)

- *The Body Keeps the Score – Bessel Van der Kolk*
- *What Happened to You? – Bruce Perry & Oprah Winfrey*

- Our children and teens' mental health needs are increasingly complex

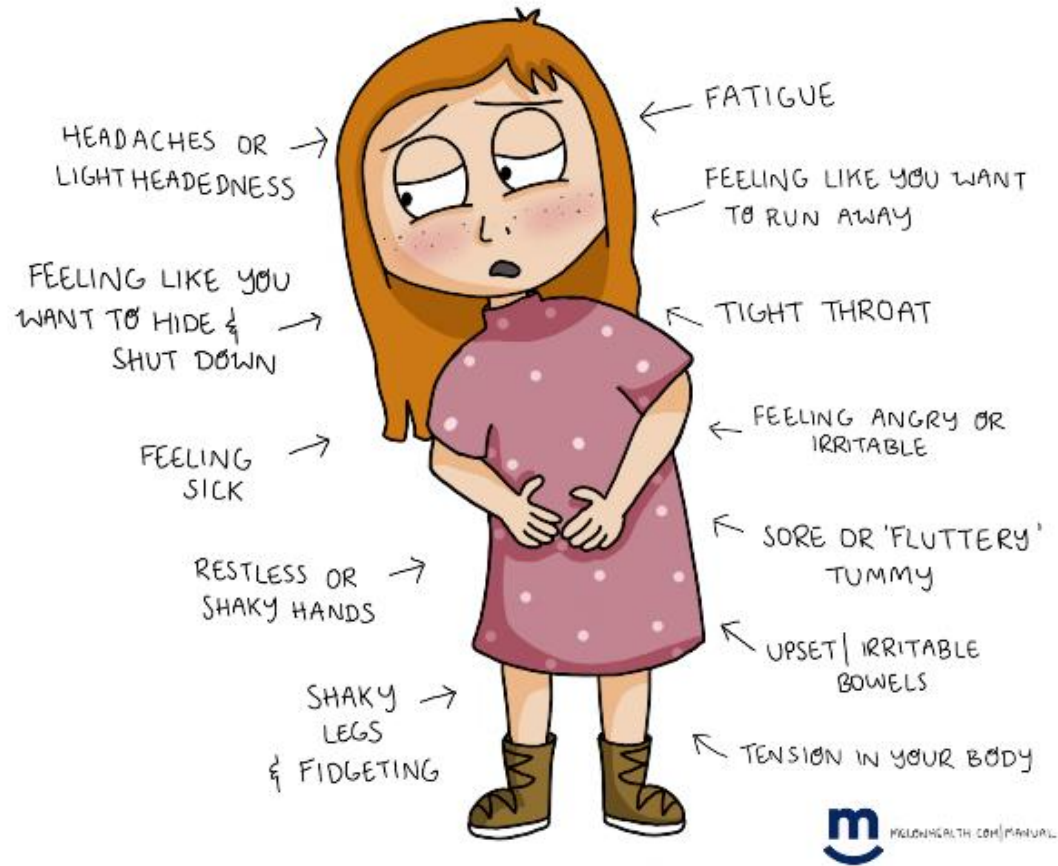
# Emotion Regulation & Development

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- Emotion regulation definition: “the processes by which people monitor, influence and adjust their emotions and how they evaluate and demonstrate emotions to achieve their individual objectives in relation to their emotional context” (Callear, 2014)
- Emotion regulation is at the heart of most mental health difficulties, including anxiety
- “Good” or “adaptive” emotion regulation is often considered in terms of which regulatory strategies help reduce subjective distress most effectively. *However*, this leads us to define certain emotions as positive, and others as negative. Kashdan and Rottenberg (2010) advised caution against this, because doing so undermines the functional nature of emotions.
- *All* emotions have a functional basis and all need to be regulated effectively – regulation does not always mean getting rid of unwanted or unpleasant emotions
- Developmentally, the process of developing emotion regulation skills begins in utero and continues throughout childhood and adolescence (and probably adulthood!) (Zimmer-Gembeck and Skinner, 2011)
- Emotion regulation development occurs relationally; it is socialised through interactions with adults who respond to children’s emotions and model emotional responses. This can include school staff!

# ANXIETY

↳ MAY PRESENT ITSELF AS...



## Key psychoeducation points for anxiety

Anxiety is an important emotion

- It motivates us to prepare to face a threat

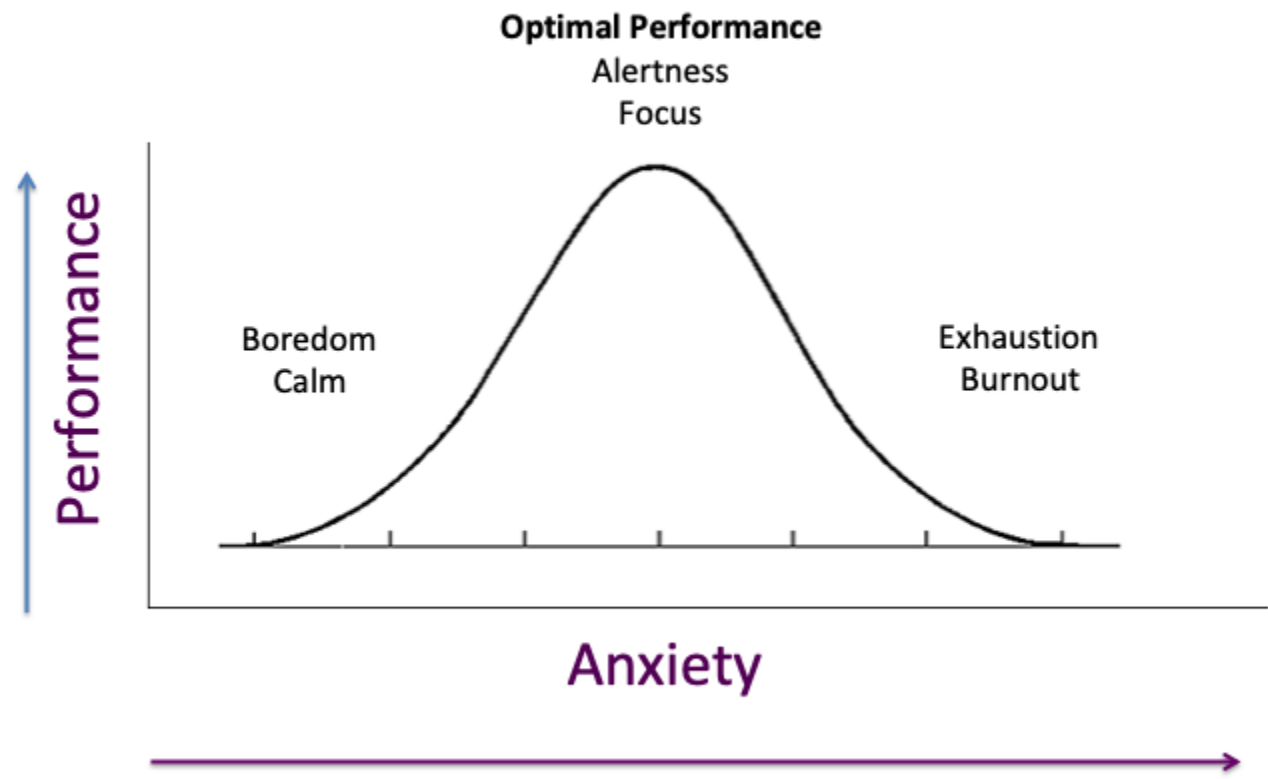
Physical sensations of anxiety are not dangerous

- Physiological responses have stemmed from early evolution – high alert, increased heart rate, redirection of blood flow

Anxiety will always reduce, even if we do nothing

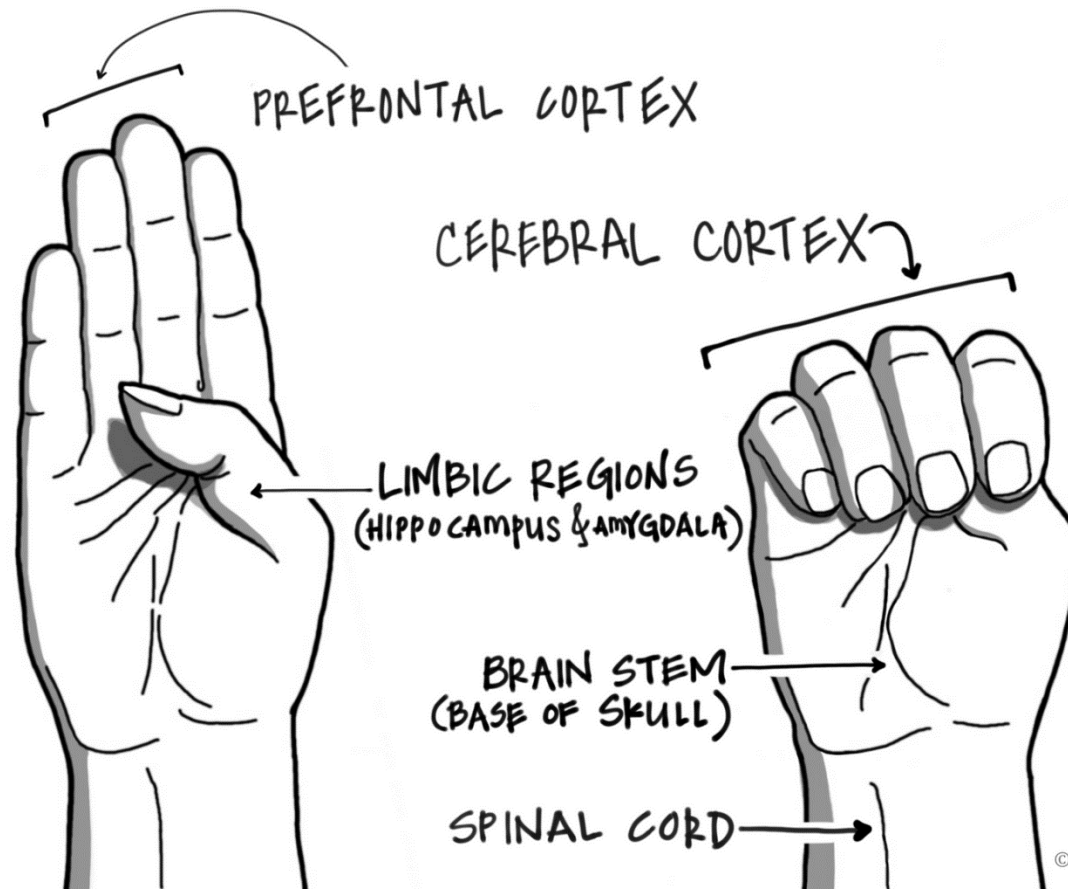
- And there are things we can do to reduce it faster

Psychoeducation resource from [www.melonhealth.com/manual/anxiety-toolbox](http://www.melonhealth.com/manual/anxiety-toolbox)



# Hand Model of the Brain

“Flipping the lid” occurs when anxiety overwhelms us. We can imagine this by raising our fingers – the limbic system is firing so strongly that it overwhelms our cortex and we are less able to use logic, reasoning etc.



# So, how do we keep the lid on?

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## Prevention and Intervention

Regulate, Relate, Reason (Neurosequential Model – Bruce Perry)

Regular practice of grounding/regulating strategies

- Breathing, mindfulness, sensory kits/toys
- More coming up soon on what to do when you hear “I tried that, it doesn’t work!”

Creating a safe & calm space, being a regulated presence

Targeting anxiety therapeutically

- Regardless of therapeutic modality, at the core of any anxiety work should be supporting young people to face and move through anxiety rather than avoiding it
- Don’t forget the basics of wellbeing (sleep, diet, routine, stability) – we can’t run before we can walk

# “I tried breathing, it doesn’t work”

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Analogy – You’ve probably also tried to get fit for cross country at some stage in your life. If you went for one run, that wouldn’t work either. You have to practice regularly to see a difference

Psychoeducation about the science behind breathing

- Deep breathing is one of the main ways we can stimulate the vagus nerve, which in turn activates the parasympathetic nervous system
- For this to be effective, the exhale should be longer than the inhale

Encourage regular practice when calm

If someone is in a heightened state of anxiety, prompting them to take a breath may not be received well (unless they have recognised this is helpful and you have a good therapeutic relationship to prevent this prompt being heard in a patronising manner) – in this situation, just being a regulated presence and breathing yourself can be most helpful



# The role of avoidance

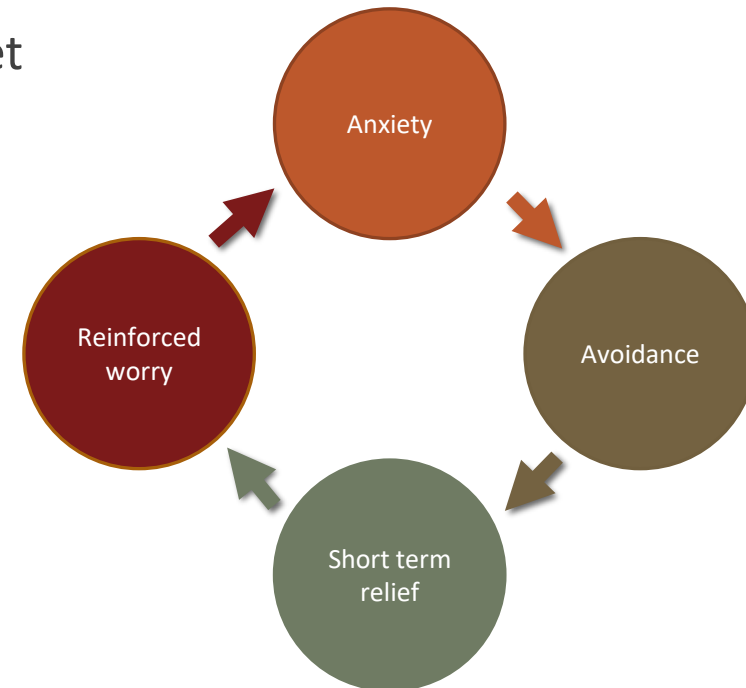
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Avoidance is the core maintaining factor of any anxiety – it serves to help the person cope in the short term, but in the long term creates a vicious cycle and increases anxiety

We need to target avoidance in our interventions if we want to create meaningful change

Exposure may be as simple as supporting someone to get to school and class, or it may involve more planning to progressively target steps to work toward a higher level challenge

Being proactive may reduce need to decide between participating and being exempt (e.g. for speeches)





# How do we target avoidance safely?

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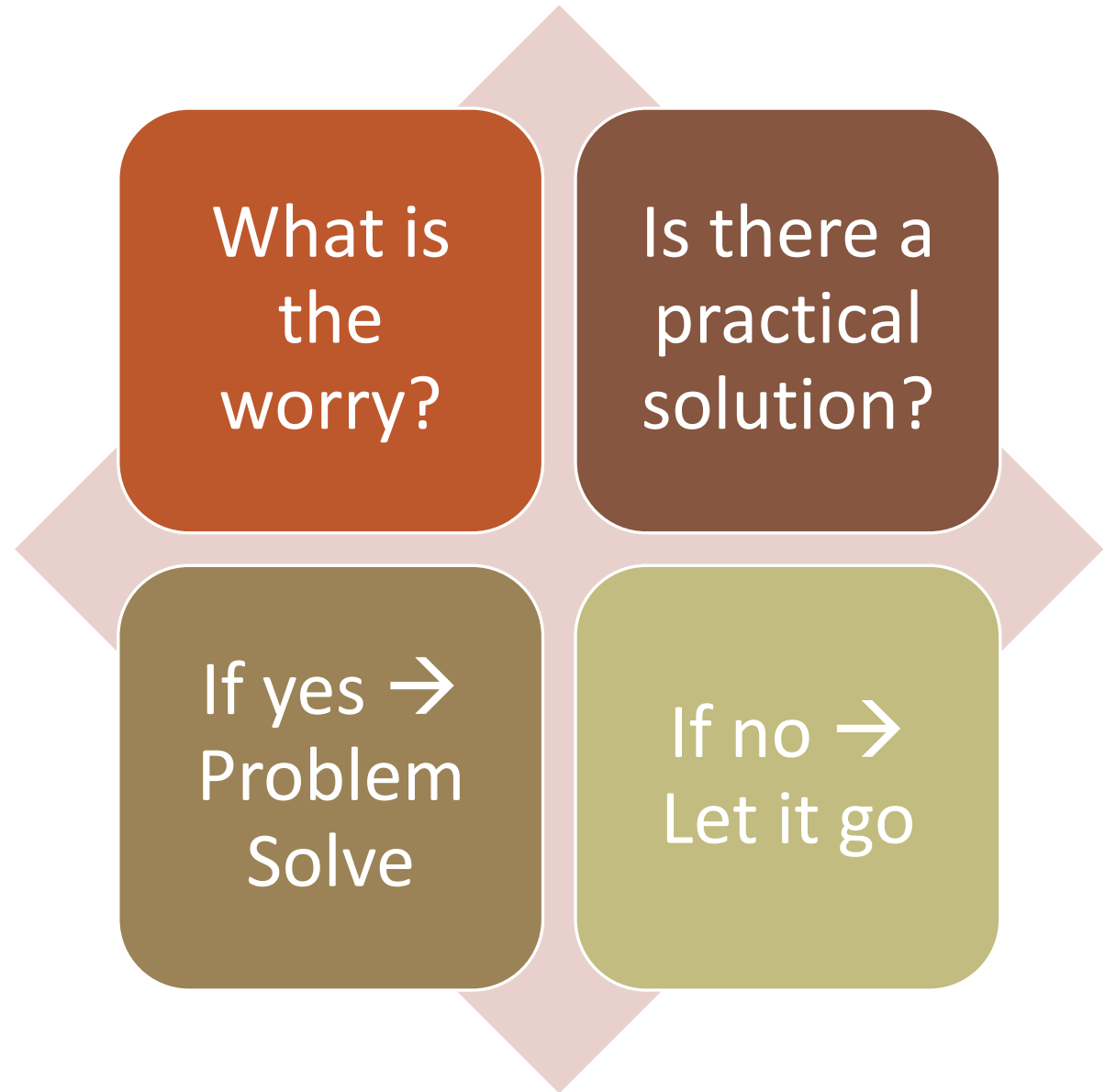
Support the young person to challenge their anxiety, starting where you know the young person will experience success

Spend some time (but not too much!) practicing grounding strategies beforehand

Be a supportive, regulated presence

Increase difficulty of challenges over time

Productive  
versus non-  
productive  
worry



# Resources

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Books: *The Body Keeps the Score* (Bessel Van der Kolk); *What Happened to You?* (Bruce Perry, Oprah Winfrey)

Early Adversity and Development: <https://www.gse.harvard.edu/news/09/10/impact-early-adversity-childrens-development>

Bruce Perry explaining the Neurosequential Model:  
[https://www.youtube.com/watch?v=LNuxy7FxEVk&ab\\_channel=InfoNMN](https://www.youtube.com/watch?v=LNuxy7FxEVk&ab_channel=InfoNMN)

Dan Siegel explains the hand model: <https://www.psychalive.org/minding-the-brain-by-daniel-siegel-m-d-2/>

Melon Health Anxiety Toolbox: <https://www.melonhealth.com/manual/anxiety-toolbox/>

Small Steps: <https://www.smallsteps.org.nz/>

# References

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Callear, A. (2014). *Children's Emotion Regulation Inventory (ChERI): Measure development, item domains, and summary profiles*. Massey University, Palmerston North, New Zealand.

Kashdan, T. B., & Rottenberg, J. (2010). Psychological flexibility as a fundamental aspect of health. *Clinical Psychology Review*, 30(7), 865–878. <https://doi.org/10.1016/j.cpr.2010.03.001>

Zimmer-Gembeck, M. J., & Skinner, E. A. (2011). The development of coping across childhood and adolescence: An integrative review and critique of research. *International Journal of Behavioral Development*, 35(1), 1–17. <http://dx.doi.org/10.1177/0165025410384923>