



### SUPPORTING CHILDREN WITH ANXIETY PROBLEMS IN PRIMARY SCHOOLS

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#### **Loddon Primary School**



- Currently 577 pupils on roll expansion project in progress to expand to 3 form entry
- Values Based Education school
- 52 pupils on the SEN register
- 32 pupils in receipt of PPG
- High% of EAL

Both school have nurture provision in place







- Currently 172 pupils on roll expanding to 1 form entry
- Church school
- Family ethos
- 15 pupils on the SEN register
- 18 pupils in receipt of PPG



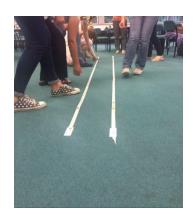


#### ANDY RESEARCH CLINIC









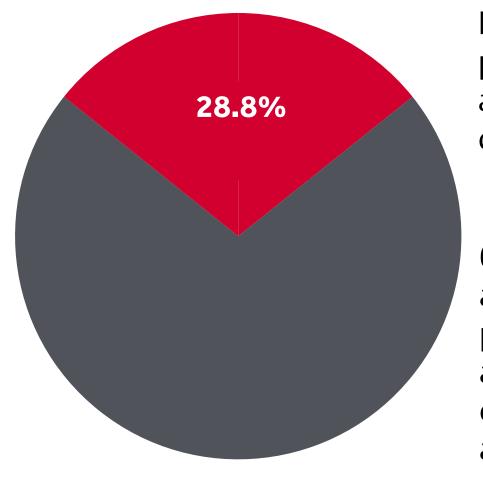








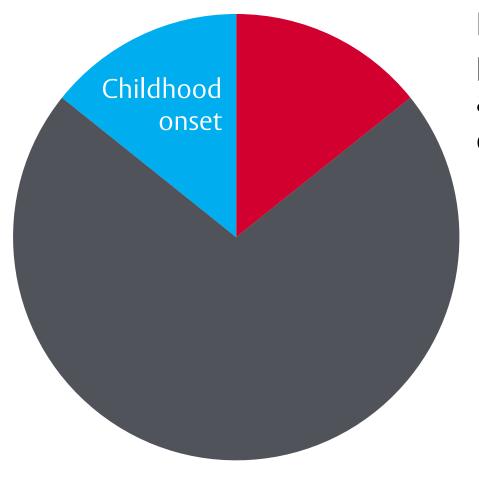




Lifetime prevalence of anxiety disorders

6.5% children and young people have an anxiety disorder at any one time

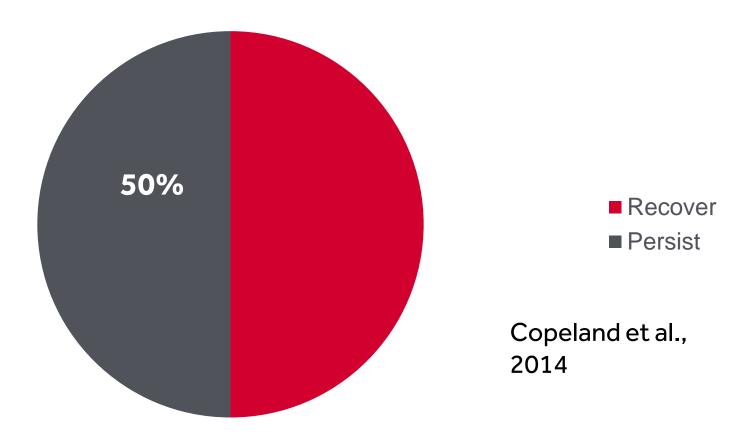




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# PERSISTENCE OF ANXIETY Persity of Reading DISORDERS FROM 9 TO 11 YEARS OF AGE





# CHILDHOOD ANXIETY DISORDERS ARE RISK FOR..

Educational underachievement

Restricted social functioning

Negative impact on family life

Short term Ongoing anxiety disorders

Depression

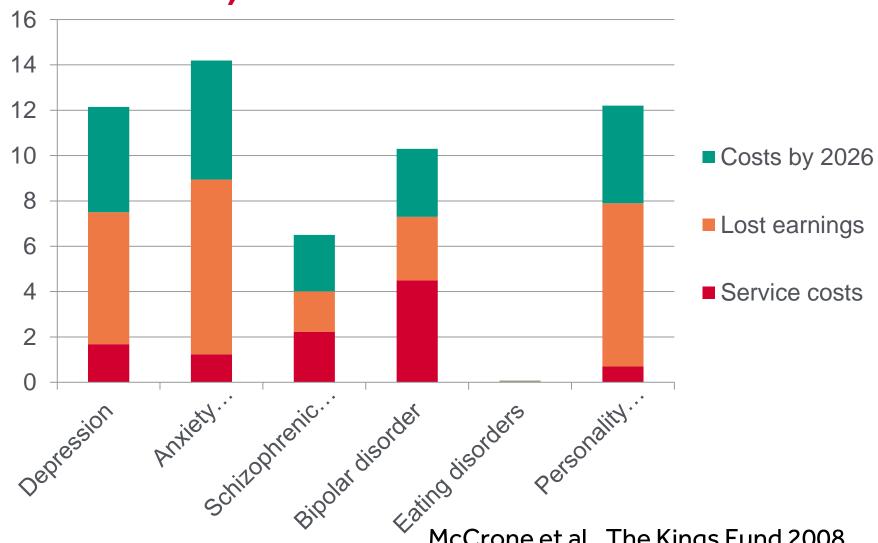
Substance and alcohol abuse

Longer term

Negative impacts on longer term personal relationships, employment etc

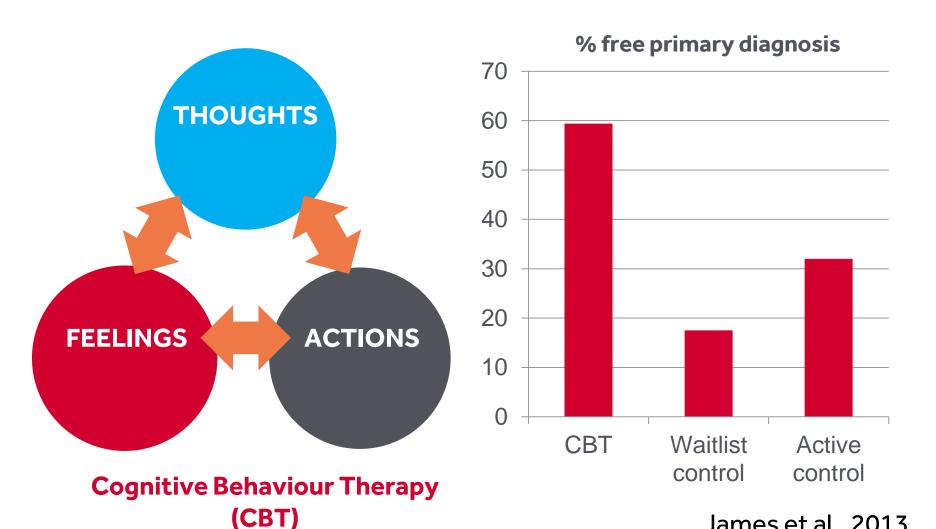
### **UK COSTS OF MENTAL HEALTH DISORDERS, EBILLION**







#### The Good-ish news





#### THE BAD NEWS

Waits for child mental health care are 'real problem'

England's child mental health services 'failing three-quarters of kids'

Child mental health wait increases 'are

horrifying'

NHS child mental health services are failing the next generation, say GPs

NHS 'turning away children referred for

mental health help'

Child mental health wait increases 'are horrifying'





Accessed support in the last 6mths



Accessed a mental health specialist



Accessed an evidencebased treatment (CBT)



Are we exaggerating, this is what you think. Maybe .. we're freaking out about something which is perfectly normal

Yeah I've .. started looking on the internet and stuff but it's .. there's so much, you know crap really on there that you don't know where to trust or anything



**Parent** recognises child's anxiety difficulties



**Parent** recognises need for professional help



**Parent** willing to seek professional help



**Parent** contacts professionals



**Family** accesses professional help

...they're normal .. childlike you know personality traits. All children get nervous and anxious about things but is it too much or is it just you know regular...?

Nobody's sort of come to me and said we think [he] is really anxious and that he should see somebody or something like that.

It's really tough...feels like a constant uphill battle it seems like every time I try and get somewhere I'm just hit with brick walls





Parent recognises child's anxiety difficulties

Parent recognises need for professional help

Parent
willing to
seek
professional
help

Parent contacts professionals

Family accesses professional help

\*Child anxiety identification tools

\*Resources to help parents to manage their child's anxiety \*Child anxiety
educational
resources
&
online resources
for parents

\*Increased service provision

\*Training for professionals

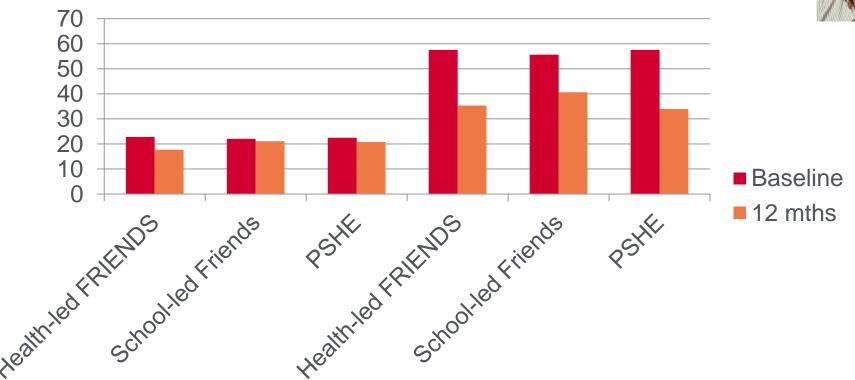
\*Guidance on help seeking process for parents

Reardon, Harvey, Young & Creswell, 2018



#### **PACES (STALLARD ET AL., 2014)**





Low anxiety group (<90%ile)

Small, sig effect of health-led vs PSHE High anxiety group (>90%ile)

No sig time x group differences



#### **IDENTIFICATION IN SCHOOLS**

	Sensitivity Ability to correctly identify those affected	Specificity Ability to correctly identify those not affected
SCAS-8-P	.85	.75
SCAS-8-C	.65	.56
SCAS-8-T	.72	.71

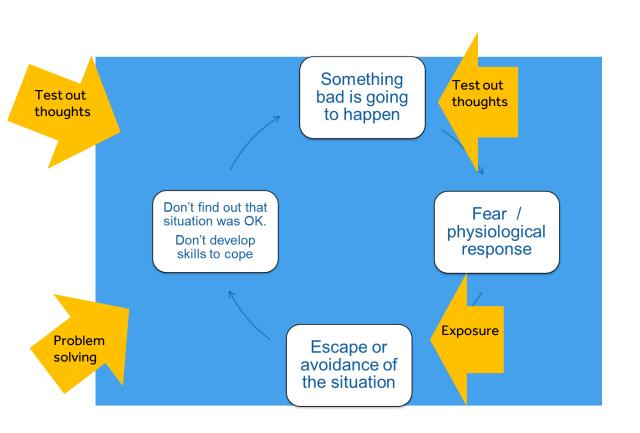
Worries about things Feels afraid Worries about being away from parent/carer Afraid will make fool of self Trouble going to school Worries something bad will happen to him/her Worries what others think All of sudden feel scared for no reason

Reardon, Spence & Creswell, 2018



### BRIEF INTERVENTIONS FOR CHILD ANXIETY DISORDERS:

#### **GUIDED PARENT-DELIVERED COGNITIVE BEHAVIOUR THERAPY**



Provides parents with strategies for helping their child put CBT principles in to place in their day to day lives (and alternatives to responses that may accommodate child anxiety).



#### Free of primary diagnosis

#### 80 70 60 50 40 ■ Full (5hrs) 30 20 ■ Brief (2.5 10 hrs) 0 Waitlist

Full GPD-CBT > WL (RR: 1.77, 95% CI 1.11-2.82, p=.02); Brief GPD-CBT-WL (RR: 1.50, 95% CI .87-2.59, p= .15)

#### **CGI: Much/Very much improved**



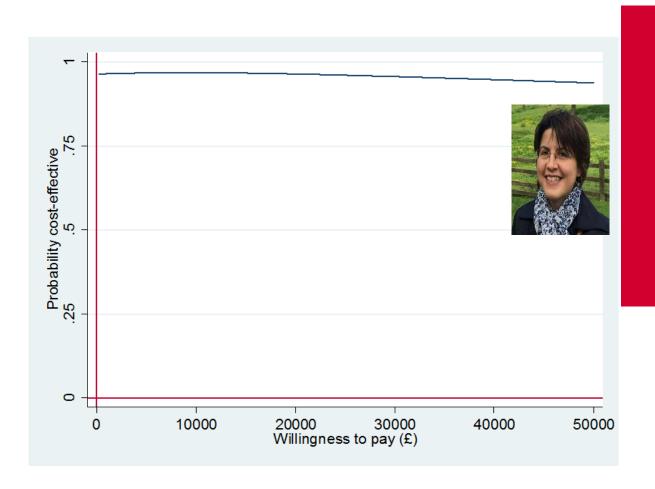
Full GPD-CBT > WL (RR: 2.64, 95% CI 1.70-4.11, p< 001); Brief GPD-CBT-WL (RR: 1.89, 95% CI . 1.16-3.09, p= .01)

Thirlwall, Cooper, Karalus, Voysey, Willetts & Creswell, British Journal of Psychiatry (2013).



#### Quality of Life Adjusted Years (QALYs)

Derived from CHU-9D (child report)

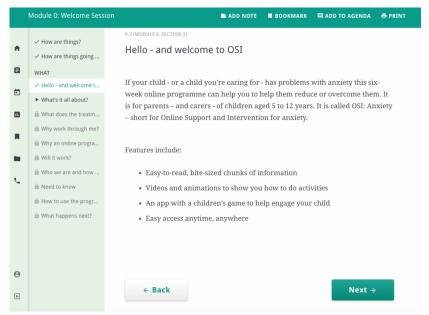


96% probability that **GPD-CBT** is costeffective in comparison to SFT (at NICE threshold for willingness to pay of £20,000)

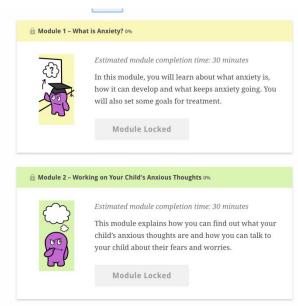
Stronger effects with parent reported CHU-9D

## **COMING SOON...ONLINE SUPPORT**& INTERVENTION (OSI) FOR ANXIETY















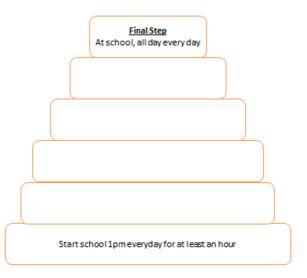
#### **IDENTIFYING THOUGHTS**

- Showing curiosity
- Identifying thoughts
- Making predictions to be tested



#### **TESTING PREDICTIONS**

- 'Have a go'
- Gradually, to help child motivation
- Show confidence in their ability



 Rewards to help child motivation and acknowledge efforts made



#### PROBLEM SOLVING

- Generating solutions
- Considering outcomes
- Having a go
- Building problem solving confidence

If another child says something unpleasant to you You will...

- Not rise to it and distract yourself
- Say 'There is no need to be mean'
- Walk away

If another child stares at you **You will....** 

- Smile normally
- Ignore them / look away
- Pretend it didn't happen



# HOW TO PROMOTE IMPLEMENTATION IN SCHOOLS

- School ethos
- Strategic use of other adults (e.g.TAs)
- Set small goals
  - Must be manageable
  - Important for both child and school staff to have early experience of success
- Seek help when feel it's needed



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The views expressed are those of the author(s) and not necessarily those of the NHS, the NIHR or the Department of Health.





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