

Mental Health 101: Navigating Anxiety among Children & Youth in the School Setting

Eddie Chau (School Teacher, R.N.)
Dr. Jennifer Russel (Child & Adolescent Psychiatrist)



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LAND ACKNOWLEDGEMENT



We respectfully acknowledge that the the land we work on is the traditional territory of the Coast Salish peoples, including the Musqueam, Squamish, and the Tsleil-Waututh Nations.





DISCLOSURES

Dr. Russel has a small consulting business.



Mitigation of Bias

- We are health care professionals not School Counsellors
- We all bring our own lens goal today is to collaborate together to ensure our province's children and youth receive the support they need, when they need it

What we talk about today, could be upsetting for some people. Please take care of yourself and get the support you need.

Schedule of the Day

3:00 Introduction

3:10 Overview of the Role of Counselors

3:20 Anxiety Overview

3:30 Case Example

3:40 Q&A

4:00 End



How comfortable do you feel with approaching students with anxiety?

Please go on our Slido and answer the question on a scale of 1-10



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Acknowledge our current context

- Lack of mental health resources, greater in rural and remote areas
- The system is extremely difficult to navigate – even for those of us in it
- Parents, teachers and others are often overwhelmed
- Primary care isn't adequately resourced to manage mental health (short appointments)
- School Counsellors have the trust and longitudinal relationship which is crucial in managing pediatric mental health
- There are things we can do...which do make a difference



Mental Health by the numbers

- 1 in 4 youth globally are experiencing clinically elevated depression symptoms
- 1 in 5 youth globally are experiencing clinically elevated anxiety symptoms
- Rates have doubled pre-pandemic estimates
- Suicide is the second leading cause of death in adolescents
- Mental Health Disorders in Children and youth respond to treatment



Racine et al 2021 al.,

Impact of Colonization on Children and Youth in British Columbia cannot be overstated



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Role of Counselors

1. Detection
2. Engagement
3. Intervention



Detection

- Obtaining collateral information
 - Counselors may be first mental health contact
 - Counselors hear from multiple sources: teachers, parents, peers of the youth, youth themselves
 - Youth spend more hours in school than any other activity, while under stress, so school is often where issues first present
- Use Screening Tools to detect and document concerns

Engagement: Trauma Informed

1. Trauma Awareness

- a. Recognize that trauma is COMMON and LIKELY
- b. Trauma is by definition an overwhelming emotional experience

2. Emphasize Safety and Trustworthiness:

- a. Ask them if they feel safe, have concerns
- b. Transparency:** Go over your responsibilities and the limits to confidentiality



Engagement: Trauma Informed

3. Choice and Collaboration:

- a. Give as much **choice** as possible - what they share, when they share, and who they share with. This includes options for treatment.
- b. **Collaborative** stance: doing this **together**, following their lead.

4. Strengths-Based and Skills-Building:

- a. **Validate** the stressful experiences
- b. **Remind** them that they are coping the best they know how right now
- c. **Build** on a shared goal of getting to a better place



Intervention

1. Be a part of a student's care team
 - Relay concerns/observations to the team
 - Help with the development of IEPs
 - Seek educational opportunities to increase capacity
 - Help families and staff navigate the system



Intervention is also advocacy

2. Raising school awareness:
 - a. Providing Professional Development opportunities for staff to understand the prevalence of Mental Health and supportive strategies
 - b. Posters, events, awareness days for mental health throughout the school year
 - i. Ex. Pink & Orange shirt day, Dyslexia & Autism awareness events, etc.





Advocacy Continued...

3. Creating a safe space for students
 - Having a Positive Presence: Students know who you are, and what you do
 - Ex. Be a part of school events to increase your presence
 - Cultivating a culture of safety, and a non-judgmental environment for their concerns

Why this matters

Research has shown that having just one trusted adult reduces the rates of suicide and attempts in youth. This is reduced further with:

- Additional support for those adults
- Education around suicide and mental health
- Developing trust with student peers





Summary of Counselor Role

1. Detection (using screening tools)
2. Engagement:
 - a. Be Trauma Informed
 - b. Arrange meetings with the care team (GP, caregivers, teachers)
3. Interventions:
 - a. Developing IEPs
 - b. Providing psychoeducation, building awareness and hope
 - i. De-stigmatize: Normalize the condition and there is treatment

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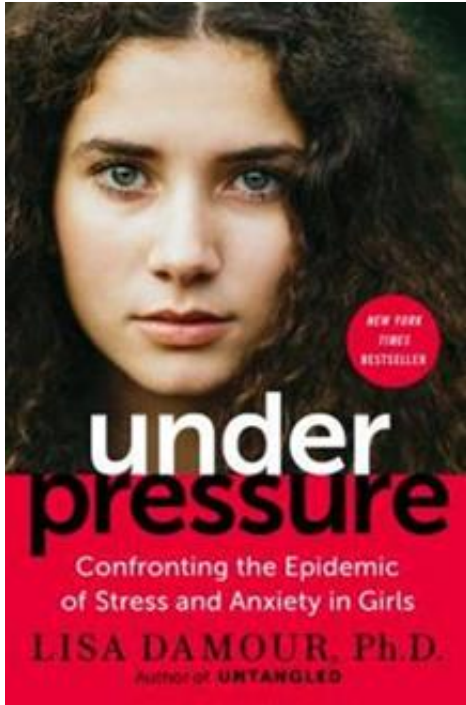




Anxiety

Definition, Presentation, Approaches

Anxiety



“Anxiety is **a feeling of fear, dread, and uneasiness**. It might cause you to sweat, feel restless and tense, and have a rapid heartbeat. It can be a normal reaction to stress. For example, you might feel anxious when faced with a difficult problem at work, before taking a test, or before making an important decision.”

MedLine Plus - 2020

- Anxiety is a normal physiological reaction that we all have
- It can be extremely helpful and even save our lives!
- The goal is to develop the skills to manage one's anxiety so that these feelings don't interfere with one's ability to enjoy life or pursue activities that one wants



Pathological Anxiety

- Strong physiological fear response in absence of danger
- High frequency uncontrollable panic and worry
- High intensity panic and worry
- Avoidance behaviours (ie, School Refusal)
- Impairment in social, home, or school functioning





The Many Faces of Anxiety

- Irritability
- Angry outbursts/tantrums
- Somatization
- Poor sleep and appetite
- Nightmares
- Behavioral regression
- Poor school attendance
- Self harm
- Substance use
- Perfectionism
- Poor concentration
- Distractibility
- Lack of emotion (“freeze” response)
- Refusing to speak

School Refusal Presentation

- Frequent physical ailment complaints, trips out of classroom, seeing counsellor, texts to caregivers to go home
- Difficult transitions to school or between classes
- Decreasing attendance





What can you do?

1. Detect
2. Engage
3. Intervene





Detecting Anxiety: Compass Toolkit

- Use the SCARED scale or GAD7
 - Completed by student and 1-2 caregivers
 - If scores suggest an anxiety disorder, get consent to share with the care team
 - Use the scores to share with your observations to make a case for further supports/assessments

Can be found on our Compass Website under Toolkits

We all feel anxiety, and the goal is not to remove it, but to learn how to manage it

Detecting Anxiety Continued...

Questions for parents:

- Does your child worry or get nervous a lot?
- Does your child have a lot of irrational fears or worries?
- Do they regularly avoid situations that cause them to be afraid?
- What kind of impact have these symptoms had on your child at home? School? With friends? Other important activities/relationships?
- Does it ever feel like your child's anxiety causes you to do things differently than before? Tell me some of the things you would

Questions for children/youth:

- Do you worry or get nervous a lot?
- Do you often feel afraid, nervous or panicked?
- What kind of things make you feel the most nervous or worried? E.g., How about being around new people? Answering questions in class? Taking tests? Doing new things? Making mistakes? Being away from your parents?



Engagement

- Anxiety is contagious!
 - Be aware of how you are feeling and avoid passing it onto others (ie, Staff and students)
 - Take stock of what coping tools you need
- Use trauma informed principles discussed earlier
- Explore the reasons for anxiety presentation
- Collaborate on developing a safe space in school

Intervene - Avoid Avoidance

- Avoidance makes anxiety worse
- Goal is always to engage the student to build the skills to manage their anxiety so they can achieve their goals
- Combination of relaxation skills, education and building competence
- Anxiety is very treatable
- Medications and Therapy are very effective



Intervene

- Build or add onto an IEP that works for the student
 - Incorporates their coping mechanisms and needs
 - Student centric with choices
- Advocate for the students needs
 - Help involved staff apply IEP/interventions
 - Relay concerns to the care team from staff or students
- Explore new coping strategies with the student
- Help liaise with treatment



Intervention Implementation

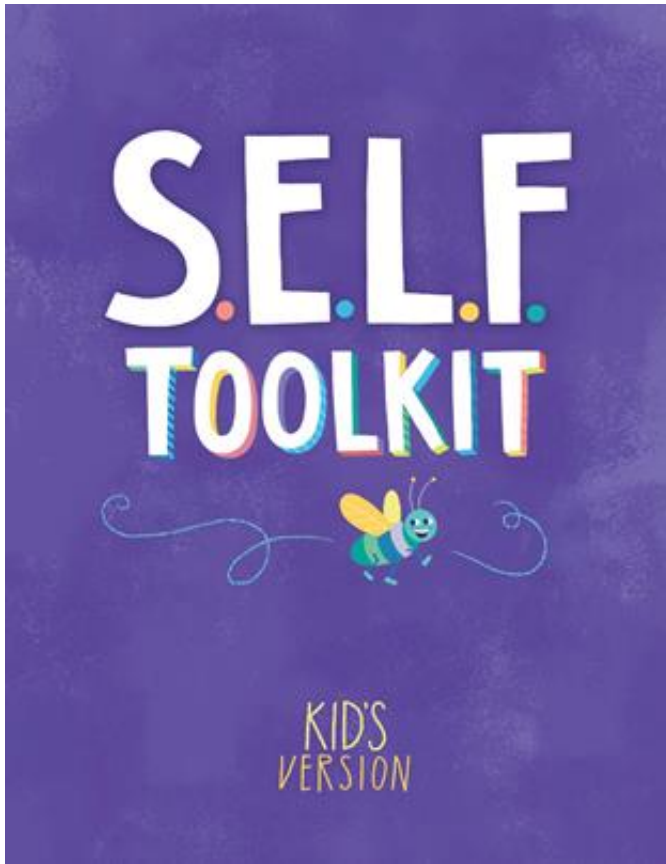


Group

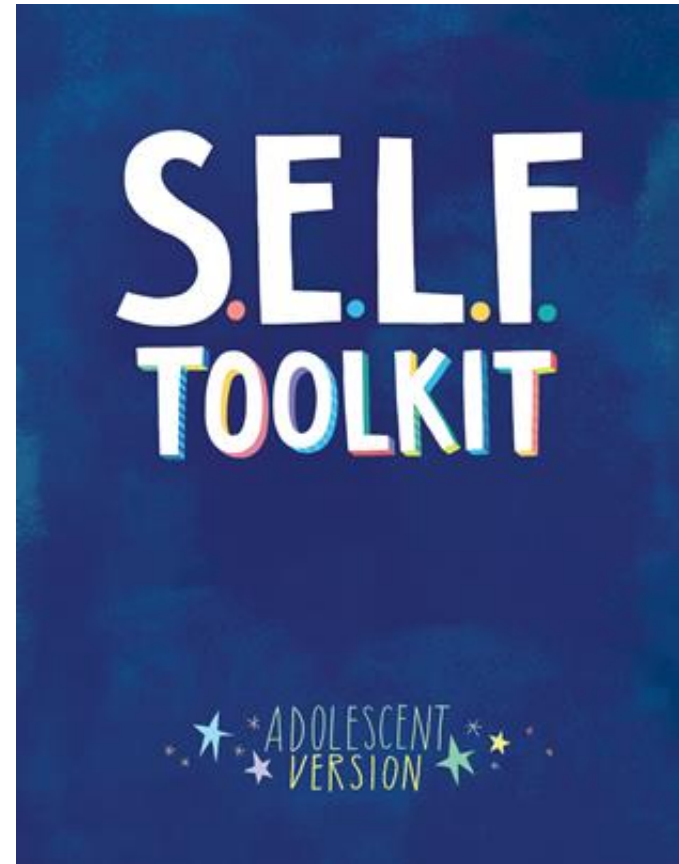
- Visit the class and teach coping strategies and skills
 - Mindfulness sessions, Breathing exercises, visualizing success, exercise
 - Done before stressful situations (ie, transitions, tests)
 - Do it as a class to normalize feeling anxious and managing it
- Verbalize your feelings and model coping strategies
 - “We’re all excited about Santa’s visit, let’s do some deep breathing”

Individual

- IEP specific strategies
- Private and safe spaces for students when feeling overwhelmed
- Referring to counselor/GP



<https://keltymentalhealth.ca/sites/default/files/resources/SELF%20Toolkit%20for%20Kids.pdf>



<https://keltymentalhealth.ca/sites/default/files/resources/Adolescent%20Toolkit%20Provincial.pdf>

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Anxiety Example:

8 year old student with decreasing attendance to school. Friends tell you the student “never wants to do anything”. Teachers note student does not participate in class at all, and does activities alone. Student has informed you they are worried about how they look towards others, and says they need to “take breaks” to the bathroom in the day to be alone in a stall because they feel it’s “too much”.



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Anxiety Example

Consider your role, and what to do with each

1. **Detection:** You have been made aware of the situation, obtain consent with the student.
2. **Engagement:** How can we approach this student?
3. **Advocate:** What does this student need?



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Detection

- Gathering information:
 - Attendance records: Avoidant of specific subjects, classes, staff?
 - Worries: What is the student worried about? Is it realistic/plausible? How often do they worry?
 - Social: Are they being bullied?
- Screening tools to score the student's anxiety and provide as collateral to the care team
 - SCARED Scale (For Elementary Students)
 - GAD7 (For 13 years and older)



Engagement (Trauma Informed)

1. Trauma Awareness
 - Aware of any incidences (ie, bullying) that affect their connection to the school community
2. Emphasis on Safety and Trustworthiness:
 - In this example, the student shows some trust by confiding their anxieties with you
3. Opportunity for Choice, Collaboration and Connection:
 - Explore their coping mechanisms, and build a plan for a gradual return to school
4. Strength Based and Skills Building
 - Give praise for what they are capable of doing (ie, confiding in you, trying to attend school despite being anxious) and developed shared goals to build towards





Intervention

Develop shared goals for the student, and build a plan:

- Be a voice in the development of an IEP to return to school
- Check in with care team to provide feedback on progress
- Be a voice for the student's concerns and situations



You are not alone!

1. Compass Program
2. Kelty Mental Health
3. Schools Mental Health Promotion team
4. Ants in your Pants!
<https://www.collectivetherapy.ca/>
5. Foundry
6. CYMH



How Can Compass Support School Counsellors?

- Rural and remote focus
- Risk assessment, safety planning (self harm, suicidality)
- Diagnostic support - screenings and brief assessment tools
- System and resource navigation
- Participate in multi-disciplinary meetings (without parents/youth)
- Brainstorming with school staff re: IEP accommodations for youth with MHSU diagnoses



Mental Health Supports & Resources for School Communities

The BC Children's **School Mental Health Promotion** team supports school communities with mental health promotion planning and implementation by providing resources, professional development and consultation.

Questions about mental health promotion in schools? Looking for resources?

Contact:

schoolmentalhealth@cw.bc.ca



For resources and information, visit keltymentalhealth.ca/school-professionals

For Parents and Caregivers:

The **BC Children's Kelty Mental Health Resource Centre** provides mental health and substance use information, resources, and parent peer support to families across BC.

keltymentalhealth.ca





Taming Worry Dragons

Taming Worry Dragons



E. Jane Garland, M.D., F.R.C.P.(C) and Sandra L. Clark, Ph.D.

Illustrated by Vicky Earle

4th Edition

Taming Worry Dragons

Therapy Group for Anxious Children

CHILDREN'S WORKBOOK

3rd Edition



Sandra L. Clark, E. Jane Garland, and Noel Doggenweil

©2008, 2010, 2012

WORRY TAMING FOR TEENS



E. Jane Garland & Sandra L. Clark

Illustrated by Vicky Earle

©2008, 2012

Self-Care

Get those massages!

Self-Compassion

Be aware of Vicarious Trauma

Have your own safe group to
debrief with - we need
support too!



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Q&A:

Please also let us know if you have any questions or topics you'd like to know about



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