

# Overview of Anxiety Disorders and Current Best Practice Care

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MEADOWS  
MENTAL HEALTH  
POLICY INSTITUTE

The Meadows Mental Health Policy Institute provides independent, nonpartisan, data-driven, and trusted policy and program guidance that creates equitable systemic

changes so all Texans can obtain effective, efficient behavioral health care when and where they need it. We work with funders and partners to bring profound, much-needed change to Texas and beyond, helping shape policy and practice from the halls of the Capitol to the health systems of every town and community across our state.

## Healthy Anxiety Versus an Anxiety Disorder

Anxiety is a feeling of worry, nervousness, or unease, typically about an imminent event or something with an uncertain outcome. It is a normal reaction to stress and can be beneficial in some situations. It can alert us to dangers and help us prepare and pay attention. Anxiety disorders differ from normal feelings of nervousness or worry and involve excessive fear or anxiety that present with emotional and other physical symptoms that can adversely affect an individual's ability to function at school, home, or in social settings. Anxiety disorders are the most common of mental disorders and affect nearly 30% of adults at some point in their lives. Half of all lifetime cases of mental illness begin before the age of 14. Half of all anxiety disorders manifest by age 11, but some types of anxiety disorders begin at much younger ages, including pre-school age. Earlier onset of anxiety disorders has been associated with more severe illness, higher rates of comorbid mental illness (such as depression or bipolar disorder), more avoidant behavior, and higher rates of suicide.<sup>i</sup> **The Good News: Anxiety disorders are treatable and effective treatments are available. Treatment helps most people lead normal productive lives.**

## The Importance of Early Detection

Anxiety disorders are the second most common mental health disorders among children ages 3 to 17, affecting nearly six million children a year or 9.4% of all children (slightly less than the 9.8% of children with attention deficit hyperactivity disorder and more than twice the 4.4% of children with depression).<sup>ii</sup> The U.S. Preventive Services Taskforce (USPSTF) recommends screening to detect anxiety early for all children and youth ages 8 to 18 years of age.<sup>iii</sup> Validated screening tools for anxiety in this age group that are freely accessible are the Screen for Child Anxiety Related Disorders (SCARED) Child and Parent Version and the Social Phobia Inventory (SPIN).

This is particularly important post-COVID-19, as rates of underlying anxiety are significantly higher. The Centers for Disease Control and Prevention (CDC) has been tracking levels of anxiety and depression on a regular basis throughout the pandemic, and the most recent survey (completed in mid-February 2023)<sup>iv</sup> found symptoms of anxiety disorders in the overall population to be up more than 3.5 times (from a pre-COVID-19 baseline of 8% to 28% of all Americans currently). The situation is even worse for young adults (ages 18-29), where the increase is more than five-fold, currently affecting two in five (41%) of all young adults. Earlier detection and

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linkage to treatment for anxiety is also critical because anxiety is often the first sign of more severe mental illness (especially when it manifests early). Anxiety is highly comorbid with depression, and the CDC suggests that underlying rates of depressed mood nationally for young adults (ages 18-29) are up more than four-fold (from 7% to 33%).

### Treating Anxiety with Evidence-Based Care

The first step in providing evidence-based care is early detection – the sooner a medical condition is found, the better the prognosis. Not only is care more efficacious when delivered early; in addition, less intrusive care options are more likely to work. A range of options is available, including:

- **Psychoeducation** is the process of providing education and information to caregivers and their children about their mental health condition and strategies to manage it, including causes, symptoms, and self-care. The goal is for the family to increase their knowledge and understanding of their child's needs to help them thrive.
- For families that need help managing more challenging behaviors, the Think:Kids **Collaborative Problem Solving (CPS)**<sup>v</sup> approach focuses on helping the child and their

family understand why they struggle in the first place. This approach recognizes what research has pointed to for years – that kids with challenging behavior are already trying hard. They don't lack the will to behave well. They lack the skills to behave well. CPS helps adults shift to a more accurate and compassionate mindset and embrace the truth that kids do well if they can, and it empowers caregivers to teach needed skills.

- For youth that need more focused treatment, **Cognitive Behavioral Therapy (CBT)** is the approach of choice for anxiety. CBT helps children and youth with anxiety disorders to function better by addressing the thoughts, feelings, actions, and physical experiences in an interconnected way. It helps the child or youth identify and change thinking and behavior patterns that are harmful or ineffective, replacing them with more accurate thoughts and functional behaviors. CBT is effective for children as young as 6 and is well proven to help with anxiety and depression in children, youth, and adults.
- Sometimes medication is needed, and best practice **Pharmacological Treatment** involves several classes of medications that can effectively treat anxiety disorders, including SSRIs (sertraline, fluoxetine), SNRIs (duloxetine), and antihistamines (hydroxyzine).

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<sup>1</sup> Lijster JM, Dierckx B, Utens EM, Verhulst FC, Zieldorff C, Dieleman GC, Legerstee JS. The Age of Onset of Anxiety Disorders. *Can J Psychiatry*. 2017 Apr;62(4):237-246. doi: 10.1177/0706743716640757. Epub 2016 Jul 9. PMID: 27310233; PMCID: PMC5407545.

<sup>2</sup> Bitsko RH, Claussen AH, Lichtstein J, Black LJ, Everett Jones S, Danielson MD, Hoenig JM, Davis Jack SP, Brody DJ, Gyawali S, Maenner MM, Warner M, Holland KM, Perou R, Crosby AE, Blumberg SJ, Avenevoli S, Kaminski JW, Ghandour RM. Surveillance of Children's Mental Health – United States, 2013 – 2019 *MMWR*, 2022 / 71(Suppl-2);1-42.

<sup>3</sup> Viswanathan M, Wallace IF, Cook Middleton J, et al. Screening for anxiety in children and adolescents: evidence report and systematic review for the US Preventive Services Task Force. *JAMA*. Published October 11, 2022.

<sup>v</sup> <https://www.cdc.gov/nchs/covid19/pulse/mental-health.htm>

<sup>v</sup> <https://thinkkids.org/cps-overview/>

We work to transform mental health care across Texas and the nation, with the vision of making Texas the national leader in treating all people with mental health needs.



# Leading the Way: Programs Addressing Anxiety in North Texas

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changes so all Texans can obtain effective, efficient behavioral health care when and where they need it. We work with funders and partners to bring profound, much-needed change to Texas and beyond, helping shape policy and practice from the halls of the Capitol to the health systems of every town and community across our state.

## Ending Untreated Mental Illness

The **Lone Star Depression Challenge (LSDC)** is working to free thousands of Texans from anxiety, depression, and other common mental health conditions. Designed to drive systems-level change across the state, the LSDC will enable the early, effective, and equitable identification and treatment of mental illness by:

- **Expanding** evidence-based integrated care by giving primary care doctors the tools and extra help they need to screen, detect, and monitor symptoms of anxiety, depression, and other common mental health disorders and to tailor the delivery of effective care.
- **Improving** health insurance coverage by using the purchasing power of businesses and governments to harness market-driven forces and push public and private health insurers to provide mental health care coverage on par with physical health care.
- **Supporting** health equity by equipping community health workers to reach communities of color and other Texans lacking access to mental health care.

With an initial and transformative investment from Lyda Hill Philanthropies and additional private and public investments, by 2026 LSDC will reach seven regions across Texas, including North Texas, Central Texas, West Texas, the Panhandle, and the Rio Grande Valley. The LSDC is a partnership among the Meadows Institute, UT Southwestern Medical Center’s Center for Depression Research and Clinical Care, the Path Forward for Mental Health and Substance Use and the GlobalMentalHealth@Harvard initiative.

## Helping Children and Youth

Children’s Health and the Meadows Institute launched the **Behavioral Health Integration and Guidance (BHIG)** initiative in 2022 to address the growing pediatric mental health crisis. Born from a shared commitment to improve the mental health and wellbeing of children in Dallas and beyond, BHIG trains, equips, and supports pediatricians to identify and treat mental and behavioral health concerns among their patients. Its three pillars are to:

- **Train** pediatricians and family doctors to address most children’s mental health conditions, including mild-to-moderate anxiety and depression.
- **Evaluate** patient-, provider-, and community-level outcomes to continually refine evidence-based practices that improve the consistency and quality of how mental health is integrated into primary care settings.
- **Advocate** for the sustainability and scalability of integrated behavioral health models by changing the way stakeholders, including policy makers, legislators, insurance carriers, and health system administrators, understand and view the mental health needs of children and youth.

Through this innovative approach, BHIG is enabling children and families to receive effective mental health care in a reliable and familiar place—their pediatrician’s office—while ensuring that emerging mental health issues are identified and managed before they advance in severity. This program is made possible through the generosity of the Crystal Charity Ball.

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## Emotionally Managing COVID-19: A Parent and Caregiver's Guide

The COVID-19 pandemic is impacting the mental health of children, youth, their caregivers, and families, and we expect these challenges to increase mental health needs both now and in the future. Under the best of circumstances, being a caregiver can be difficult, and the pandemic and its associated effects can make it even harder; and with the right supports, caregiving, even in a pandemic, can be both manageable and fulfilling. We have compiled the information below to help parents and caregivers recognize common reactions that children and youth may experience, as well as tips on supportive response.

### Common Behavioral Reactions Among Children and Youth:<sup>1</sup>

- **Preschool age children:** Fears of being alone, bad dreams, bed-wetting, appetite changes, temper tantrums, or difficulty separating from caregivers;
- **Children ages 6-12:** Irritability, aggression, nightmares, sleep disturbance, changes in appetite, physical symptoms such as stomachaches and headaches, withdrawal from peers, or forgetfulness with respect to chores and schoolwork.
- **Adolescents ages 13-18:** Physical symptoms such as headaches and rashes, sleep disturbance, changes in appetite, agitation, apathy, isolation from peers, ignoring advice on their personal health, excessive concerns about stigma and injustices.

### Provide reassuring and accurate information about COVID-19 to help children and youth understand their current reality.

- **Parents and caregivers can reassure children through their own emotional tone:** Try to stay calm; children will react to and follow your reactions.
- **Be reassuring and honest:** The most important thing across all ages is that

children know you are focused on helping them be okay. It's also important to be honest and factual when responding to their questions.

- **It's okay not to have all the answers:** Remember that you may not have answers to all their questions, and that's okay.
- **Focus discussions on what the family is doing to stay safe:** This includes hand washing and social distancing.

### Maintain healthy lifestyle habits and daily routines:

- Do your best at keeping your child's regular sleeping routine.
- Help your child follow proper hygiene practices – e.g., make sure they are brushing their teeth and hair – and consider making a checklist to help them get into a new home routine.
- Encourage children's participation in household chores.
- Limit their exposure to news and social media.
- Practice relaxation techniques, such as breathing exercises, meditation, yoga.

**Schedule time with your children and do your best to be present with them during your time together.** Through positive relationships with parents and caregivers, children learn to trust others, regulate their emotions, interact with and develop a sense of the world (e.g. whether it is safe or unsafe), and come to understand their own value as individuals.<sup>2</sup>

**Find ways to stay connected as a family:**

Schedule fun family activities; some could count as classes for school-age children!

- Walks or bike rides (*this could count as PE class or recess*),
- Game night with board / video games,
- Working on a puzzle,
- Cooking together (*this could count as a science lesson*),
- Eating meals together,
- Movie night,
- Completing a craft activity as a family (*this could count as an art class*),
- Completing a science experiment, and
- Having a family dance party (*this could count as a music class*).

**Make time to take care of yourself and seek help for your own needs as a caregiver.** Taking care of yourself by engaging in self-care and leaning on others for support is important not only for your own mental health, but also for your family's well-being. Parenting right now is

really hard, so show yourself compassion. Some key strategies that can help you feel more in control during this time include:

- Limiting exposure to news and social media,
- Making time for exercise,
- Eating healthy meals regularly,
- Getting plenty of sleep,
- Making time for activities you enjoy,
- Connecting with others – e.g., set up a video call with family and friends or text your best friend, and
- Avoiding increased use of alcohol or tobacco.

If your own anxiety or sadness worsens or feels unmanageable, it is important to know that additional mental health resources are available. In addition to your local primary care and behavioral health care providers, there are additional support lines available, such as:

- **Texas Health and Human Services** COVID-19 Mental Health Support Line at 833-986-1919, 24 hours a day, 7 days a week.
- **The Substance Abuse and Mental Health Services Administration (SAMHSA)**, also has a 24/7 Disaster Distress Helpline at 1-800-985-5990, or text "TalkWithUs" to 66746.
- **The National Suicide Prevention Lifeline:** 1-800-273-TALK.
- **Veterans Crisis Line:** 1-800-273-8255

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<sup>1</sup> The National Child Traumatic Stress Network. Parent/Caregiver Guide to Helping Families Cope With the Coronavirus Disease 2019 (COVID-19). [https://www.nctsn.org/sites/default/files/resources/fact-sheet/outbreak\\_factsheet\\_1.pdf](https://www.nctsn.org/sites/default/files/resources/fact-sheet/outbreak_factsheet_1.pdf)

<sup>2</sup> The National Child Traumatic Stress Network. What is Child Trauma? Available at: <https://www.nctsn.org/what-is-child-trauma/trauma-types/complex-trauma/effects>