

Parenting behaviors of parents of young children with anxiety disorders: Relations to parental psychopathology and child temperament

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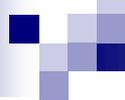
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Author Disclosures

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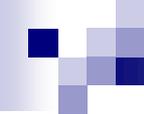
Anxiety disorders in childhood

- Are among the most common disorders (Albano et al., 2003)
- Preschoolers present with persistent anxiety disorders (Egger & Angold, 2006; Lavigne et al., 1998)
- Symptom presentations are strikingly similar to those found in older children (Eley et al., 2003; Spence, Rapee, McDonald, & Ingram, 2001).



CBT for anxiety in young children

- Protocols used to treat anxiety in young children include a parent component training the parents to apply CBT strategies with their anxious children.
- e.g., the “Being Brave” manualized treatment (Hirshfeld-Becker et al., 2008, 2010)

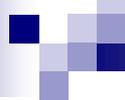


Open questions

- What type of parenting strategies are used by parents of young children with anxiety disorders to respond to the child's anxiety in specific situations?
- Which parent and child factors are related to parental use of such strategies?

Parenting strategies

- Both parental acceptance and parental control are related to anxiety (McLeod et al., 2007).
 - Styles and parenting practices/behaviors
- Very few studies of anxious children assessed both parenting styles and actual parental behaviors (Wood et al., 2003).
- Our knowledge about how parenting behaviors others than acceptance and control are related to childhood anxiety is limited.
- It is not clear what behaviors parents use in actual real-life situations that provoke anxiety in the child.



Study Approach

- We wanted to study how parents of clinically anxious young children respond in real-life situations when their children are anxious.
- We used descriptions of children's expressions of anxiety and parents' reactions in real-life situations, as reported by parents in initial CBT parent sessions, to characterize parenting behaviors in response to children's anxious episodes.
- We compared these descriptions with questionnaires about parenting attitudes.
- We examined whether parental diagnoses or children's temperament influenced which parenting behaviors were used.

Participants and procedure

- 44 children (21 boys and 23 girls) and their parents attending CBT (using the “Being Brave” protocol)
- Mean age = 5.39 (SD = 1.08, 4 to 7 years)
- 84.09 % (n = 36) were Caucasian

Measures

- Childhood anxiety
 - Child version of the Schedule for Affective Disorders and Schizophrenia, Epidemiologic Version (K-SADS-E) for DSM–IV (Orvaschel, 1994)
 - the DSM–III–R avoidant disorder module from the Diagnostic Interview for Children and Adolescents, Parent Version (Herjanic & Reich, 1982)
- Parenting style - Questionnaire measure
 - Warmth/nurturance and restrictiveness (Rickel & Biasatti, 1982)

Measures

- Parental anxiety and depression
 - Structured Clinical Interview for DSM–IV (First et al., 1995)
 - the Beck-Depression Inventory and the Beck Anxiety Inventory
- Behavioral inhibition
 - Behavioral observations (using protocols adapted from Kagan et al.)
 - Shyness scale - Emotionality-Activity-Sociability Temperament Survey for Children (Buss & Plomin, 1984)

Parenting Strategies

- Coded 72 vignettes taken from the first or second session of treatment (parent only sessions)
- 56 concerned mother's responses to anxiety, 29 concerned father's responses, and 13 concerned responses by both parents.
- In teaching parents to monitor their child's anxious reactions, the therapist asks about an example of a recent time the child got anxious, and asks for antecedents, the child's response, and the consequences

Parental Strategies

Interrater reliabilities calculated based upon 40 vignettes

- Positive reinforcement (i.e., reward), $k = 1$
- Verbal reinforcement (i.e., praise), no K value
- Punishment/criticism
 - Punishment, $k = 1$
 - Criticism/shaming, no k value
- Basic CBT strategies
 - Verbally encouraging exposure , $k = 1$
 - Graduated exposure, $k = 1$
 - Prompting coping skills, $k = .88$

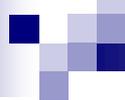
Parental Strategies

Interrater reliabilities calculated based upon 40 vignettes

- Modeling
 - Modeling the non-anxious behavior for the child, no k
 - Doing the non-anxious behavior with the child, $k = 1$
- Providing comfort
 - Physical contact, $k = 1$
 - Reassurance, $k = .94$
- Information, $k = .87$
- Forced exposure, $k = 1$
- Parent facilitation of avoidance versus exposure, $ICC = .99$

An example....

- Feared situation: bus ride to school
- Child's response: takes off running up to the garage; "I am not going", refuses, stomachaches
- Parent's response: mom gets her, calms her down, make her take the bus anyway
- Child takes the bus

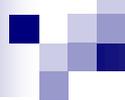


An example...

- Feared situation: going to a birthday party without mom
- Child's response: decides not to go
- Parent's response: mom "does not push it"
- Child stays home

An example...

- Feared situation: birthday party
- Child's response: does not want to go, feels sick, wants mom to come with him
- Parent's response: mom reminds him that he was looking forward to it and what to expect when he gets there, drives him to the party and drops him off
- Child attends the party



Results

What types of parental strategies do parents of anxiety-disordered children have in their repertoire?

Parenting strategies	Mother		Father	
	n	%	n	%
1. Positive reinforcement	2	3.57%	1	3.45%
2. Verbal reinforcement (i.e., praise)	1	1.79%	0	0%
3. Punishment/criticism	6	10.71%	3	10.34%
Punishment	3	5.36%	2	6.90%
Criticism	3	5.36%	1	3.45%
4. Basic CBT strategies	14	25%	7	24.14%
Verbally encourages exposure	6	10.71%	3	10.34%
Graduate exposure	4	7.14%	1	3.45%
Prompting coping skills	8	14.23%	3	10.34%

Note: total number of observations for mothers = 56, for fathers = 29

Parenting strategies	Mother		Father	
	n	%	n	%
5. Modeling	13	23.21%	7	24.14%
Modeling the non-anxious behavior for the child	3	5.36%	2	6.90%
Doing the non-anxious behavior with the child	10	17.86%	5	17.24%
6. Providing comfort	21	37.5%	10	34.48%
Physical contact	8	14.23%	4	13.79%
Reassurance	15	26.79%	9	30.03%
7. Information	16	28.57%	6	20.69%
8. Forced exposure	11	19.64	5	17.24%

Note: total number of observations for mothers = 56, for fathers = 29

Avoidance v. exposure

Avoidance v. exposure	Mothers		Fathers	
	n and %		n and %	
Did not encourage exposure at all	6	10.71%	3	10.34%
Made a weak effort to encourage exposure	14	25%	11	37.93%
Asked child to do an intermediate step	12	21.42%	2	6.90%
Got the child to perform the exposure	21	37.5%	11	37.93%

n observations mothers = 56, n observations fathers = 29

Which parent and child factors are related to parental use of such strategies?

■ Parental anxiety and depression

- Theoretical models postulate that certain parenting behaviors may be more prevalent among anxious parents or depressed parents (e.g., Ginsburg & Schlossberg 2002)
- Mixed empirical evidence (e.g., Ginsburg et al. 2004; Hirshfeld et al., 1997)

- We examined whether mothers' and fathers' questionnaire-reported parenting style, and anxiety and depression relates to their parenting strategies in these situations.

Parenting styles of warmth and restrictiveness

- Mothers and fathers who reported a more restrictive parenting style were more likely to use punishment/criticism when their children faced a feared situation
 - Mothers: $B (SE) = .10 (.5)$, $p < .05$, odds ratio = 1.11, Wald chi-squared test = 4.13, $p < .05$
 - Fathers: $B (SE) = .09 (.04)$, $p < .05$, odds ratio = 1.10, Wald chi-squared test = 5.43, $p < .05$
- No other results were significant

Maternal anxiety and depression

- Mothers who were diagnosed with MDD in the past were less likely to use modeling with their child
 - $B (SE) = -1.16 (.62)$, $p = .06$, odds ratio = .32
Wald chi-squared test = 3.46, $p = .06$.
- Mothers who were diagnosed with MDD in the past were less likely to provide information to their children
 - $B (SE) = -1.30 (.69)$, $p = .06$, odds ratio = .27
Wald chi-squared test = 3.51, $p = .06$.
- Mothers who reported experiencing more anxiety symptoms on the BAI were less likely to use forced exposure
 - $B (SE) = -.39 (.16)$, $p < .05$, odds ratio = .67
Wald chi-squared test = 5.76, $p < .05$.

Paternal anxiety and depression

- Fathers with past and current anxiety disorders used less exposure (allowed more avoidance)
 - $B (SE) = -1 (.34), p < .01$ for past AD
 - $B (SE) = -1.14 (.31), p < .01$ for current AD
- Fathers who reported higher anxiety on the BAI were less likely to use modeling
 - $B (SE) = -.27 (.12), p < .05, \text{odds ratio} = .76$
Wald chi-squared test = 5.16, $p < .05$.
- Fathers who reported higher depression on the BDI were less likely to use punishment/criticism
 - $B (SE) = -.23 (.11), p < .05, \text{odds ratio} = .79$
Wald chi-squared test = 4.04, $p < .05$.

Associations with Child Temperament

- Child Behavioral inhibition
 - Parenting styles and behaviors are associated with level of BI in offspring (Hirshfeld-Becker et al., 2008, Degnan & Fox, 2007)
 - Little is known about how BI children versus non BI - children are parented when encountering anxiety provoking situation
- We evaluated whether behavioral inhibition is related to mothers' and fathers' parenting strategies in anxiety provoking situations for the child.

Behavioral inhibition

- Behavioral assessments of children's behavioral inhibition were not related to mothers' or fathers' parenting strategies in specific anxiety provoking situations for children.
- Higher shyness as reported by parents was more likely to be associated with paternal use of basic CBT strategies compared to lower levels of shyness
 - $B (SE) = 1.26 (.61)$, $p < .05$, odds ratio = 3.55, Wald chi-squared test = 4.32, $p < .05$
- No other results were significant.

Discussion

- This study extended the literature by evaluating specific parenting strategies used by both mothers and fathers, when their anxious children face an anxiety-provoking situation. These may differ from parenting style reported on questionnaires.
- Parents of young anxious children did seem to naturalistically use some positive parenting strategies, suggesting that parents have the ability to help their anxious children
 - Perhaps consistency of using these parental strategies across situations may be more relevant?
- Parental anxiety did not appear to relate to the use of more facilitation of avoidance for mothers, but did for fathers.
- Further study is needed to determine if the patterns found here generalize beyond parents seeking CBT for their children.