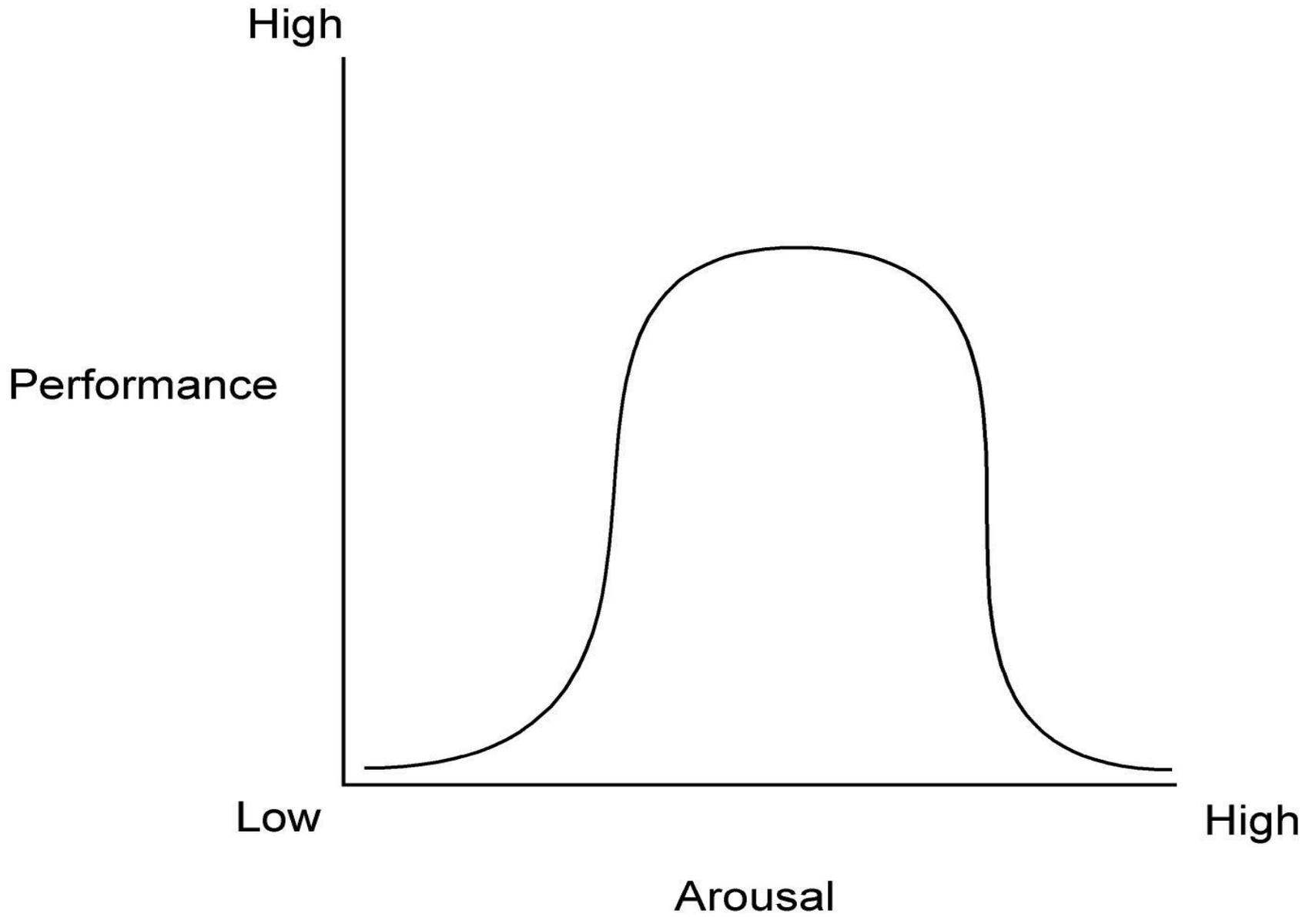


Patrick B. McGrath, PhD
Anne Marie Albano, PhD

Treatment of Anxiety and Mood
Disorders

Definitions

- Anxiety is..
 - Normal, natural, and a product of evolution.
 - Response to the perception of future threats or experiences.
 - Needed to help us prepare for the future.
 - Beneficial to a point (Yerkes-Dobson Principle).



For our Purposes

- Panic is...
 - Normal, natural, built in through evolution.
 - A response to the perception of an immediate threat or danger.
 - A way that we protect ourselves.

So, Anxiety...

- Protects us from real harm
- Improves our performance
- Protects those around us
- Keeps us safe
- Helps us make choices
- Might be overly sensitive
- Interferes with our performance
- Interferes with other's functioning
- Shuts us from others
- Prevents decisions

Four Basic Fears

Threats to the integrity of:

- *Physical Status
- *Mental Status
- *Social Status
- *Spiritual Status

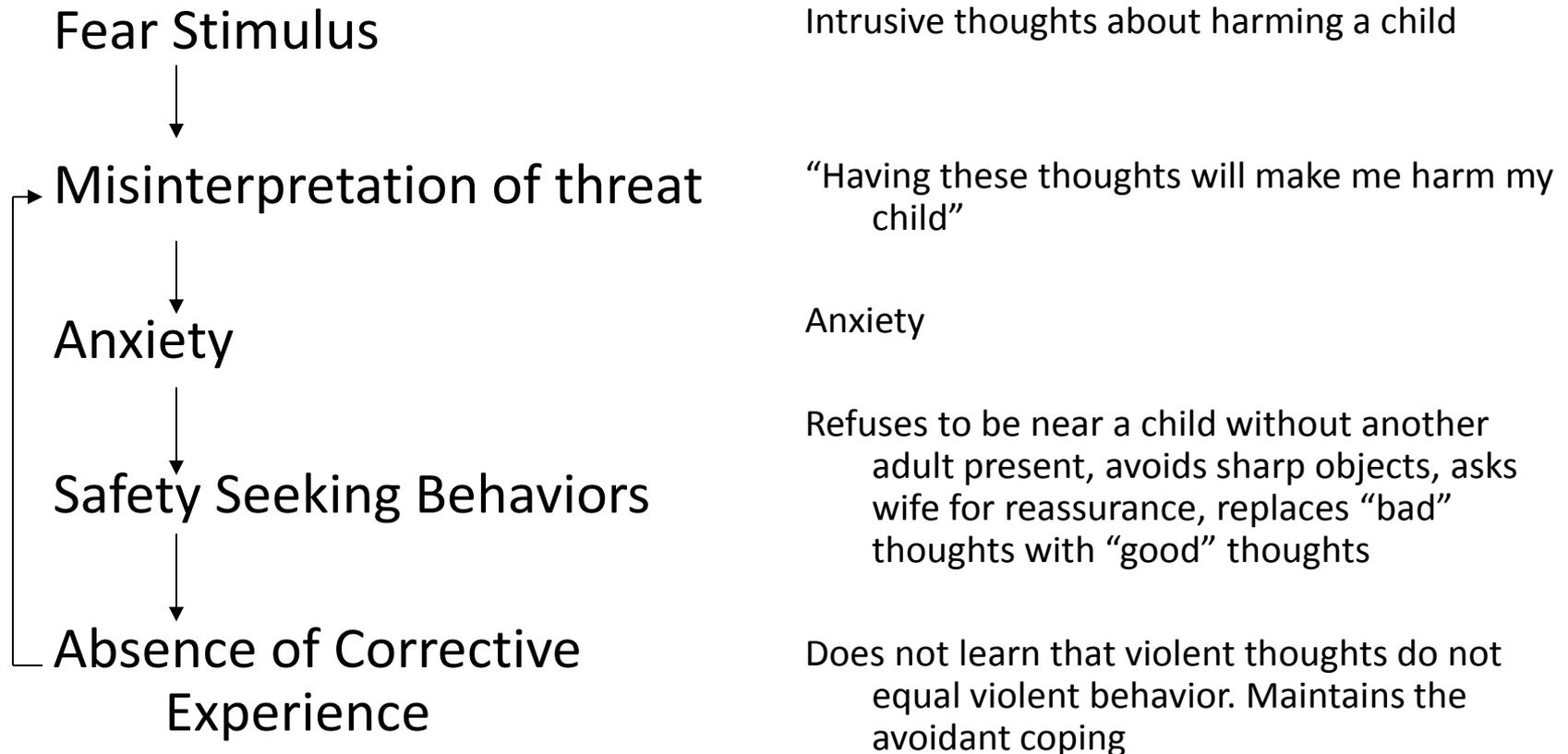
Common Distortions

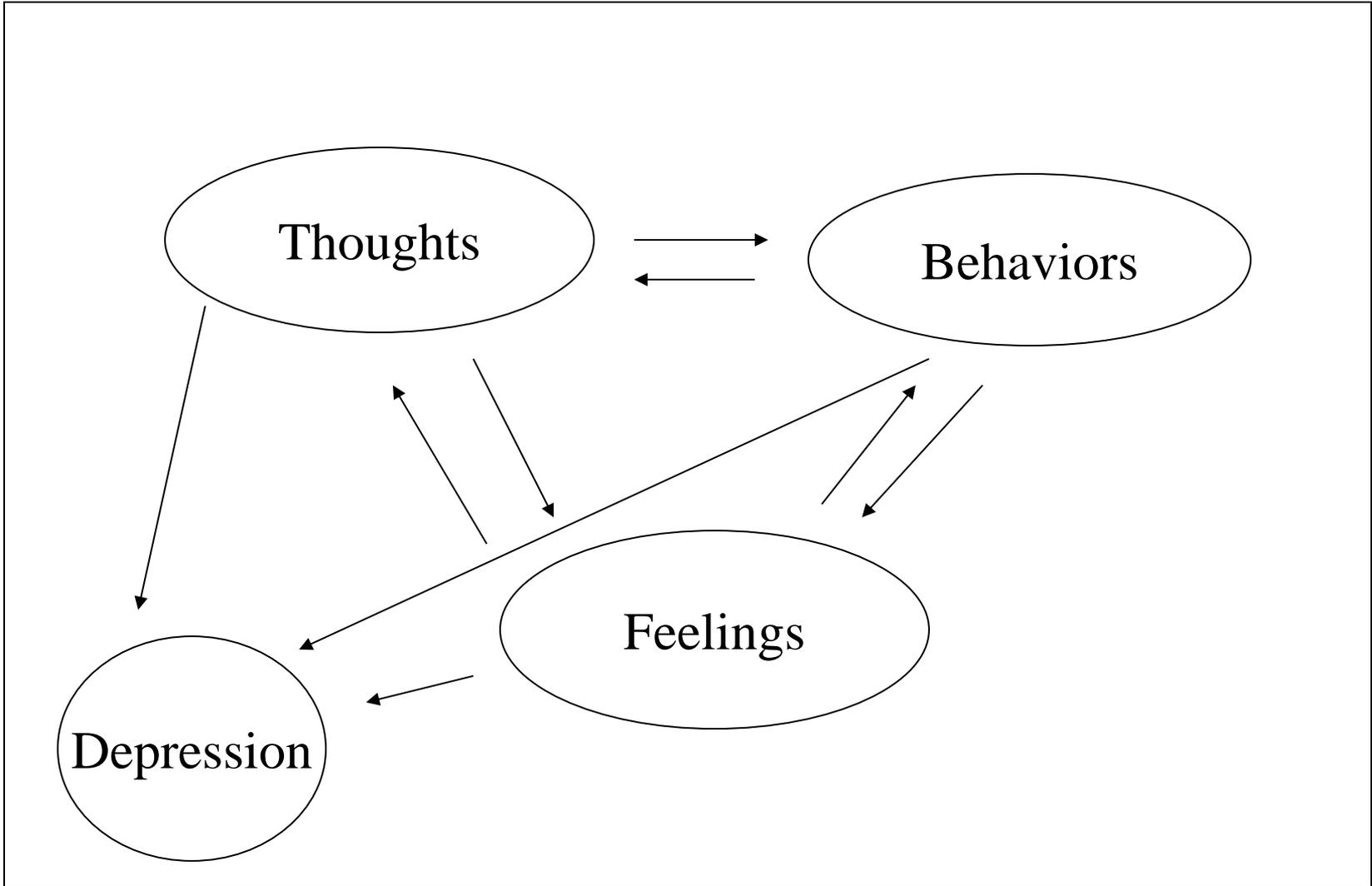
- Severity
 - It will be the worst thing in the world and I will die.
- Probability
 - It will definitely happen, no question.
- Efficacy
 - I will not be able to handle it.

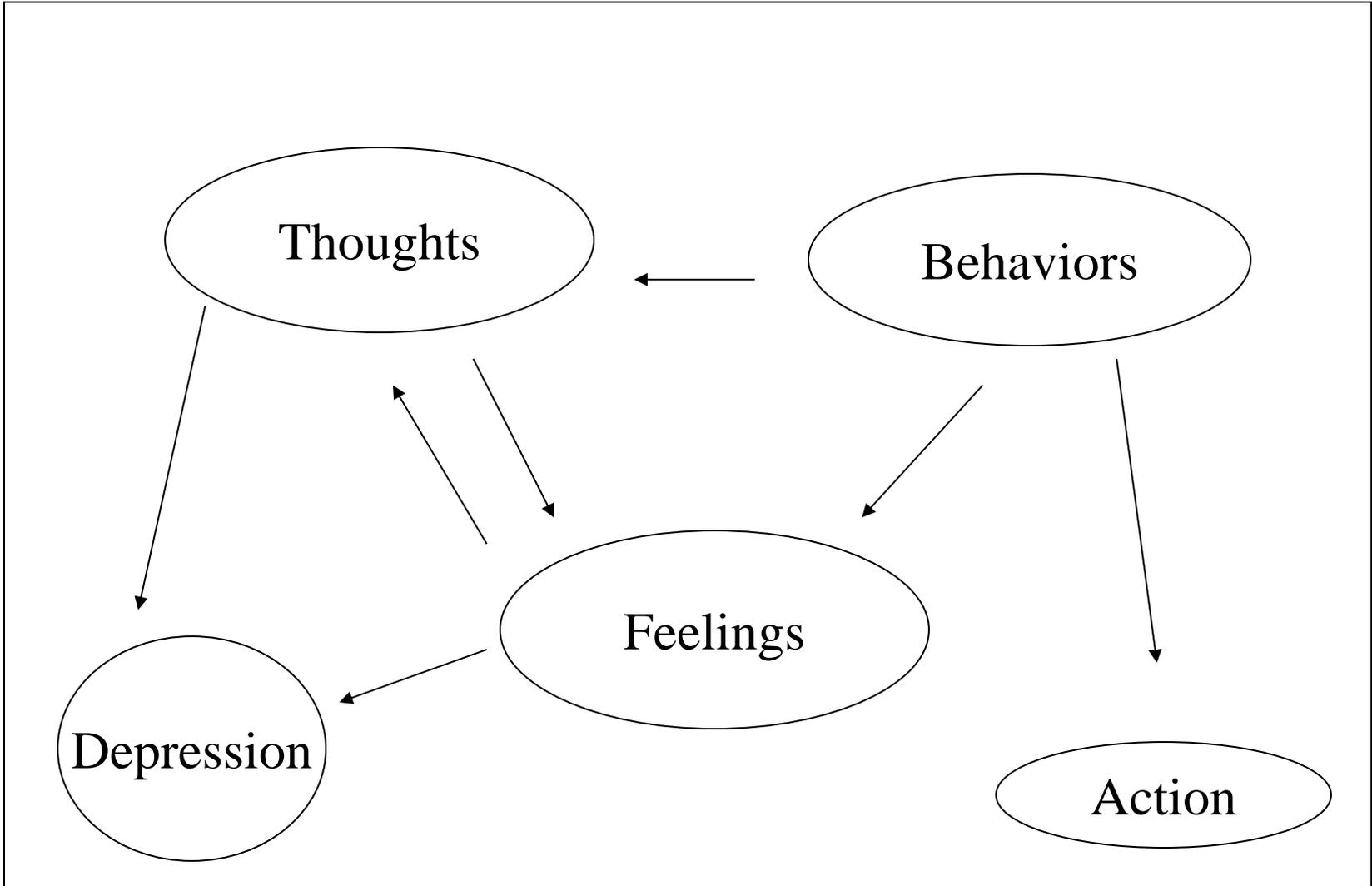
Anxiety Disorders are:

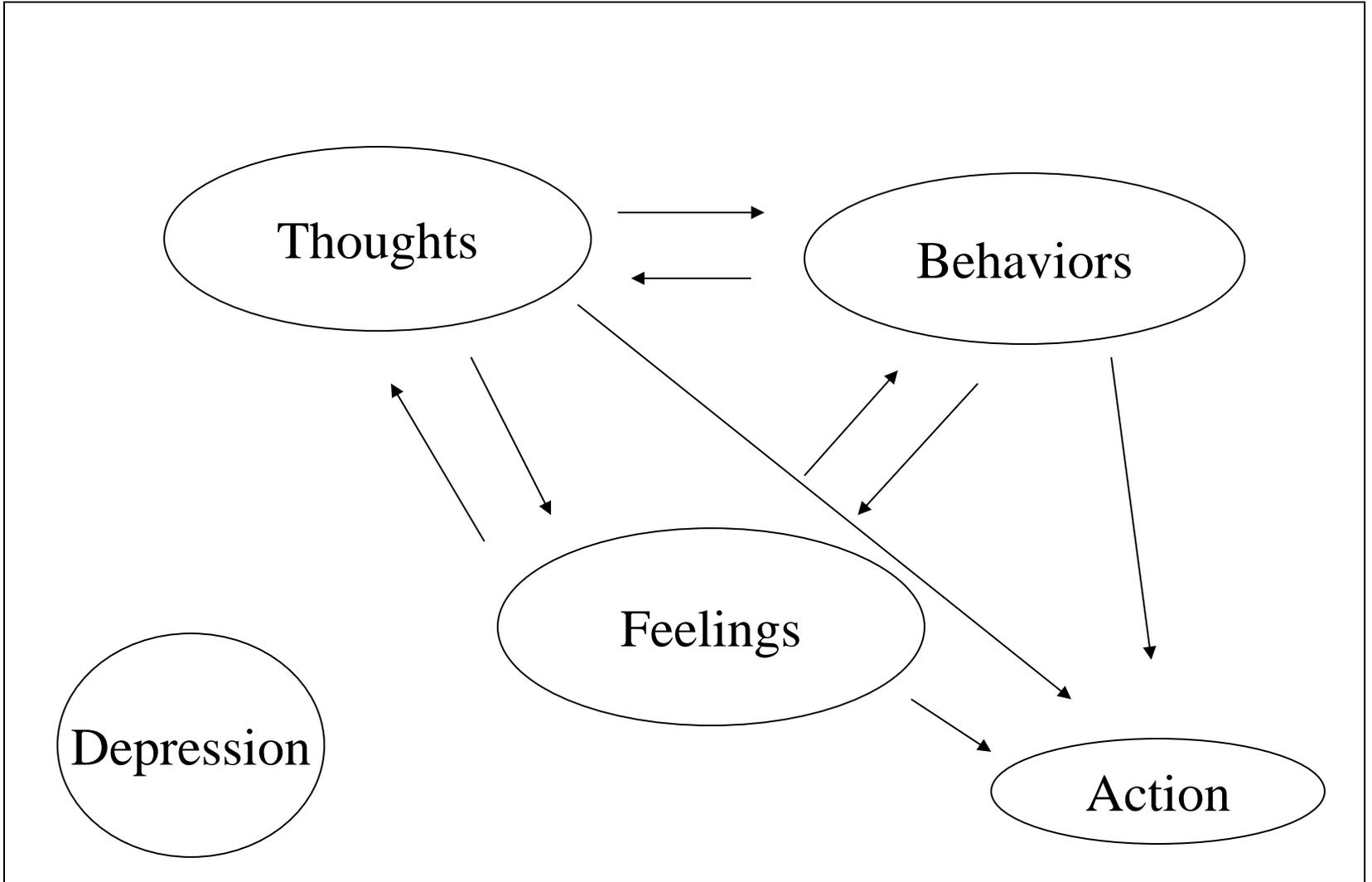
- Highly prevalent (most common class of mental disorder, > 5% of the population).
- Real & potentially disabling.
- Found in all groups of people.
- Under-recognized & under-treated.
- Variable in presentation.
- Treatable

CBT Model of Anxiety: OCD Example









What maintains Stress?

- Avoidance
- Reassurance seeking
- Distraction

Rewards

- *Short Term* - People with anxiety want to feel good right now, so they do rituals to get that immediate good feeling, or they avoid what it is they are afraid of, or seek a great deal of reassurance.
- *Long Term* - In order to overcome anxiety, you need to practice being anxious right now so that you can learn that you can handle the anxiety. That anxiety will dissipate, therefore allowing you to feel better in the long run.

CBT for Early Childhood Anxiety

- Targets children's maladaptive behavior indirectly by modifying parents' behavior.
- Focus is on reshaping the primary context of early children development – parent-child interactions.
- Change parent-child interactions that maintain anxiety

“Borrowed” from DBD literature

The Role of Modeling in Learning

- Many behaviors can be observed by watching others (modeling)
 - Fear reactions
 - Aggression
 - Altruism
 - Moral behavior
 - Academic tasks
 - Motor tasks
 - The list can go on and on.....



Coercive Process/Negative Reinforcement Trap

Parent: “Mike, please sleep in your own room.”

Mike: I don't want to.
I DON'T WANT TO.
I DON'T WANT TO!

Child begins to cry louder and louder

- From Rex L. Forehand

And on it goes . . .

- Parent gives in . . .
 - “Okay, but tomorrow night you have to sleep in your bed, okay?”
- Outcome:
 - Mike’s inappropriate behavior is REINFORCED because his parent gave in and withdrew the request/direction.

Yet another reinforcement trap

- **Parent: (in a louder voice)**
 - “I really mean it! Get into your bed!”
- **Child does not comply**
 - NO! I won’t! (while spitting and kicking)
- **Parent intensifies her/his reaction**
 - “That’s it mister! I’ve had it with you!” (while grabbing and make angry faces at child)
- **Outcome:**
 - Child complies but the parent’s angry and intimidating behavior is reinforced through the child’s compliance

• Also from Rex Forehand

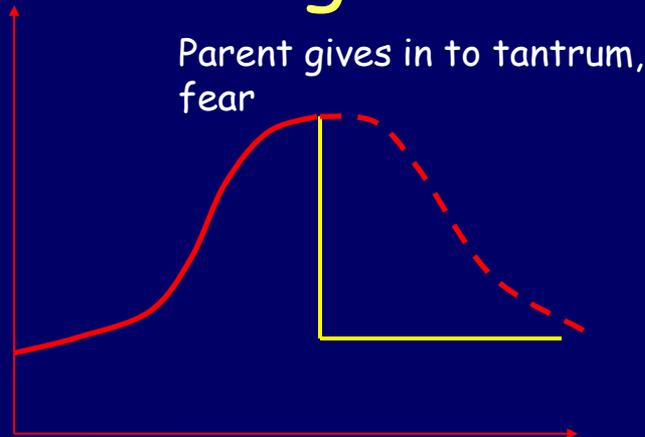
How do you undo
anxiety?

#1 Principle to teach parents:

- The Premack Principle
 - High frequency behaviors serve to reinforce low frequency behaviors
 - Grandma's Rule: "You can't get your ice cream until you finish your spinach!"
 - e.g., School refusal = no computers/tv/gameboy



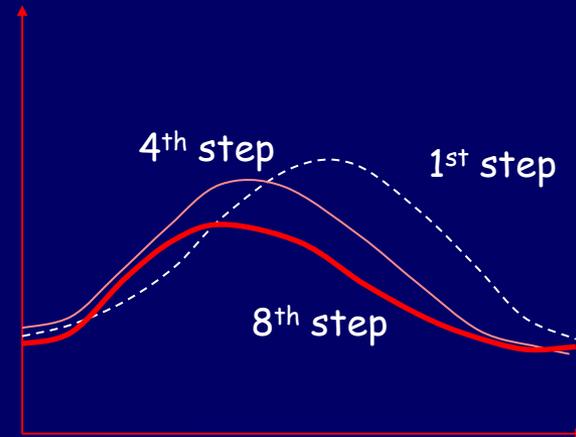
#2 Principle to teach parents: How negative reinforcement works



Impact of rescue:

- remembers situation at the height of fear
- prevents habituation
- no experience of mastery
- escape is reinforced

From Chansky (2004)



Impact of exposure:

- remembers success that allows habituation
- learns anxiety passes on its own
- willing to approach increasingly challenging situations
- feeling of mastery
- reinforcement for hanging in

#3 Principle to teach parents: How to use reinforcers

- CONTINGENT on performance of the target behavior
- CONSISTENTLY applied
- Administered IMMEDIATELY after the behavior
- Initially on CONTINUOUS schedule, then changed to INTERMITTENT
- Kept POTENT
 - use small amounts and change reinforcers periodically
 - involve natural reinforcers whenever possible

The child should be aware that a reinforcer is a consequence of the target behavior

#4 Principle to teach parents: Shaping via reinforcement

- Start small, build as you go
- Shaping
 - Components of a target behavior are reinforced in a step-by-step manner

Parents taking Action

- Identify potential role in child's behavior
- Understand the problem
- Examine what keeps it going
- Use "If-Then"
- Parents as "coaches"



The CALM Program

(Comer, Puliafico & Albano, 2008)

Coaching

Approach behavior and

Leading by

Modeling



Rationale: Targets child's maladaptive behavior indirectly by modifying parents' behavior. Focus is on reshaping the primary context of early children development – parent-child interactions. Addresses overprotection and overcontrol, proposed mechanisms in reinforcing and maintaining anxiety.

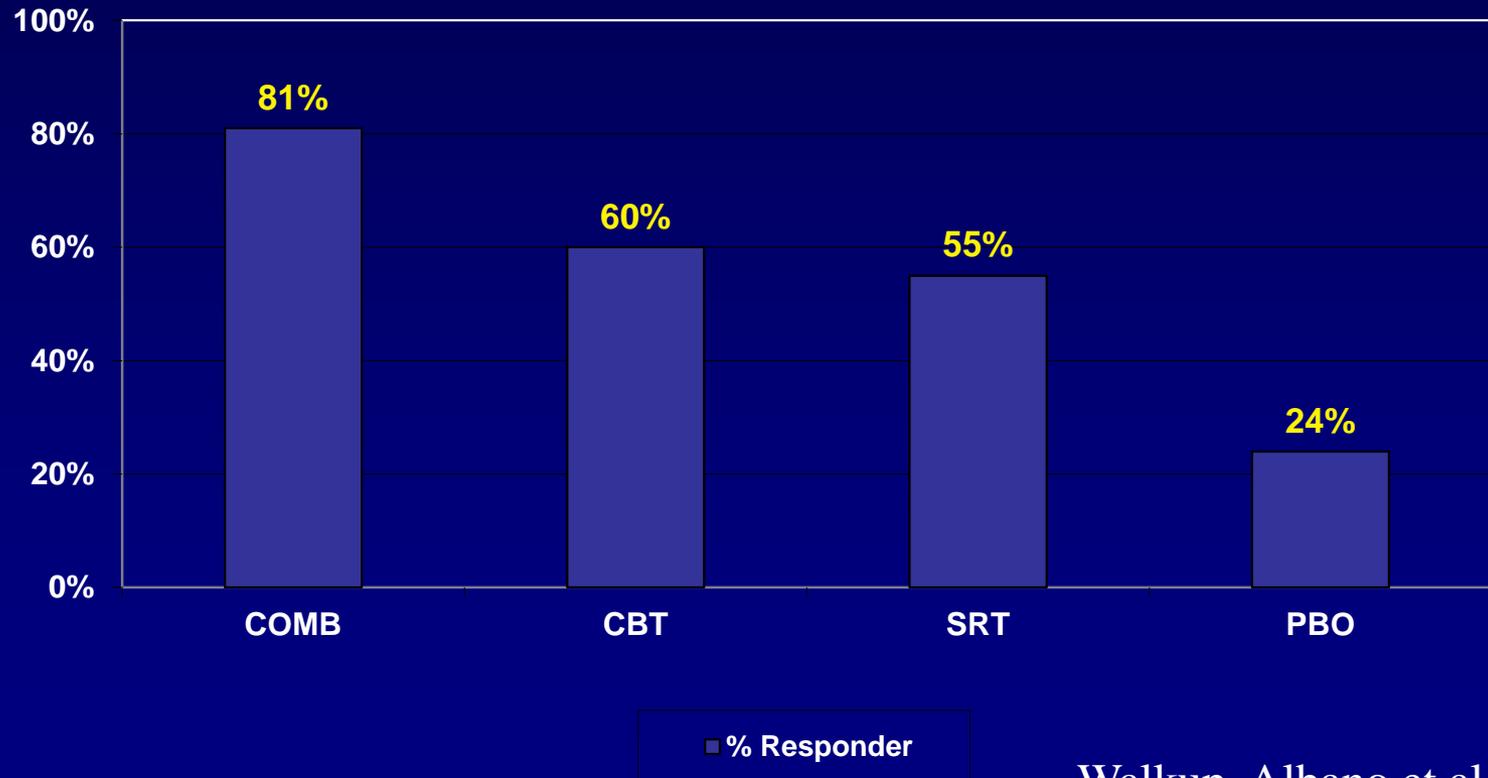
CBT for Anxiety

- Education about anxiety and CBT
- Training in somatic management
- Changing maladaptive cognitions
- Encouraging proactive behavior
- Extinguishing anxiety reactions
- Solidifying acquired skills
- Promoting generalization

Child/Adolescent Anxiety Multimodal Study (CAMS)

- SAD, SoP, GAD
- N = 488, ages 7-17
- 12-week acute trial: CBT, SRT, Comb, Pill PBO
- Pills-only double blinded
- Random assignment, blind Independent Evaluators
- Phase II: 6 month maintenance for treatment responders

Child/Adolescent Anxiety Multimodal Study Acute Outcomes



Multi-Component CBT for Depression

- Psychoeducation
- Mood Monitoring
- Activity Scheduling
- Cognitive restructuring
- Behavior change
 - Problem solving
 - Contingency management
 - Social skills training
 - Assertiveness training

See: Lewinsohn P et al. (1990). Behavior Therapy, 21:385-401

TADS

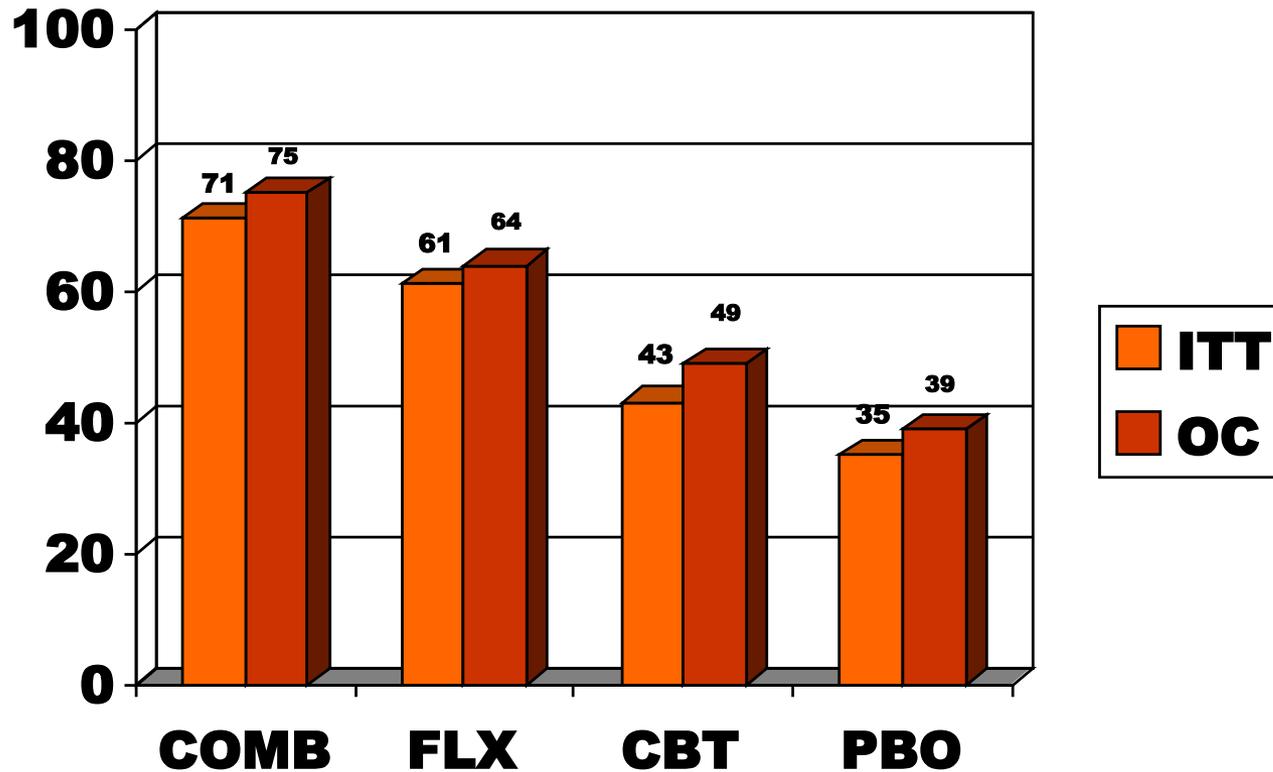
Treatment for Adolescents with Depression Study



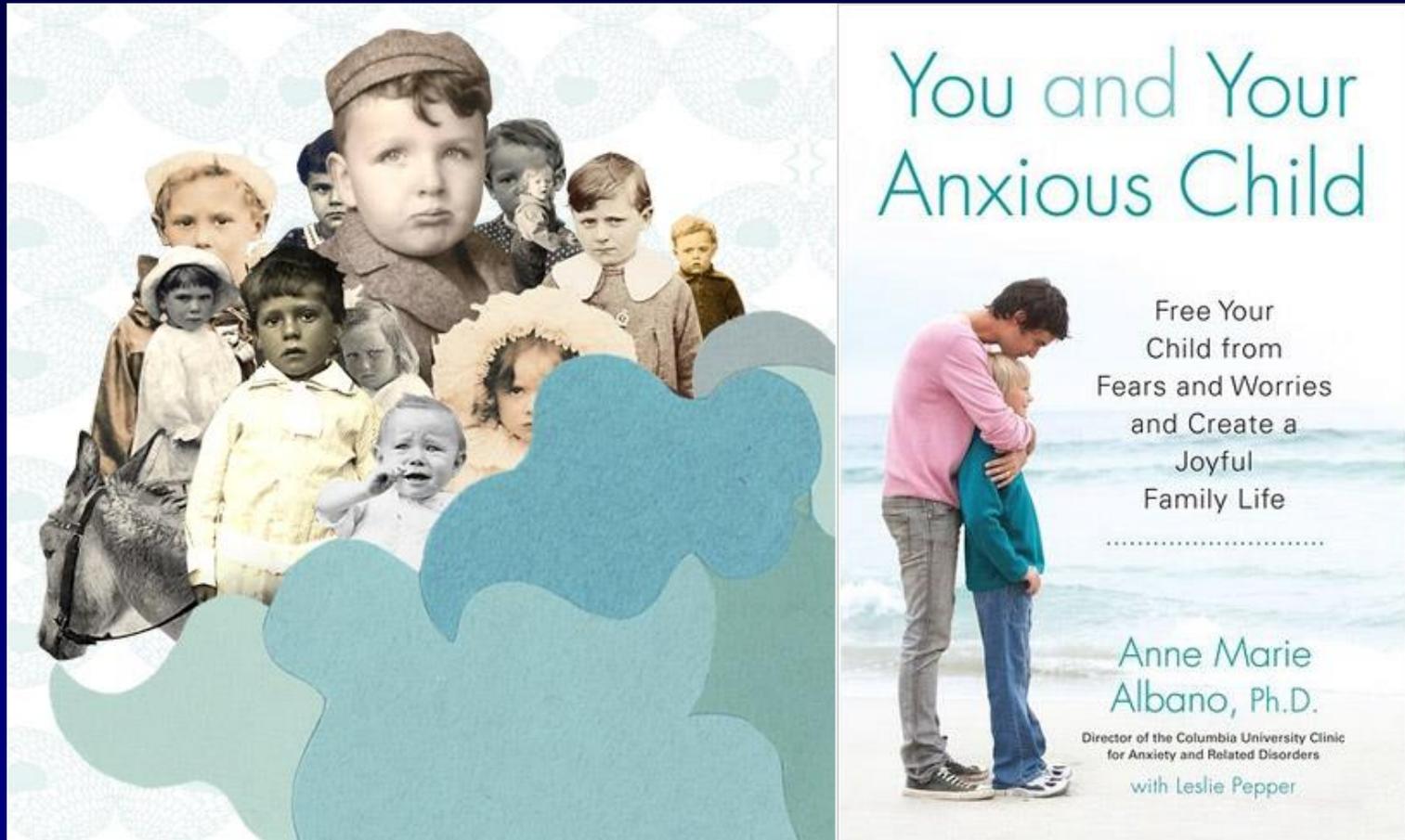
Effectiveness Outcomes

- 439 Subjects
- Average Age = 15 (12-17)
- 54% Male

Treatment Response: Week 12



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