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Department of
Educational and Counselling Psychology

Effective Parenting



April 2019

Tuesday Evening Seminars

APRIL 9th - 30th, 2019
TUESDAY EVENINGS
6:30-8:30pm
McGill University



April 9 **Sleeping through the night:
From expectations to reality!** Room 522
Dr. Marie-Hélène Pennestri



April 16 **Moving from worry to mastery:
Identifying parenting behaviors that are
associated with childhood anxiety** Room 504
Dr. Tina Montreuil



April 23 **The science of bilingualism:
Implications for your child's development,
learning, and education** Room 504
Dr. Gigi Luk



April 30 **Understanding suicidal risk among
children and adolescents** Room 504
Dr. Marie-Claude Geoffroy



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Moving from **worry** to
mastery: Identifying parenting
behaviors that are associated
with childhood anxiety

Dr. Tina Montreuil

*Assistant Professor, Department of Educational and Counselling Psychology
Director of Childhood Anxiety and Regulation of Emotions Research Group (C.A.R.E.)*



Objectives of the presentation

- What is anxiety
- Predictors of anxiety disorders
- Putting on your mask first
- Tips and strategies to experience mastery over worry



December 14, 2000

Studies Show Normal Children Today Report More Anxiety than Child Psychiatric Patients in the 1950's

Anxiety linked to environmental threats and lack of social connectedness

Read the journal article

The Age of Anxiety? Birth Cohort
Change in Anxiety and
Neuroticism, 1952–1993

(/pubs/journals/releases/psp7961007.pdf
(PDF, 496KB)

WASHINGTON - Two new meta-analytic studies involving thousands of children and college students show that anxiety (</topics/anxiety/index.aspx>) has increased substantially since the 1950's. In fact, the studies find that anxiety has increased so much that typical schoolchildren during the 1980's reported more anxiety than child psychiatric patients did during the 1950's. The findings appear in the December issue of the American Psychological Association's (APA) *Journal of Personality and Social Psychology*.

Anxiety disorders



- Anxiety disorders constitute a sizeable worldwide health burden with profound social and economic consequences.
- The prevalence of anxiety disorders in studies with a child or an adolescent population ranges from 15-20%.
- Earliest age range reported Sx in 6-8 years old (Breton et al., 1999).

The Gap Between Need and Care

ADHD

40% of kids with diagnosable ADHD are not getting treatment

Depression

60% of kids with diagnosable depression are not getting treatment

Anxiety

80% of kids with a diagnosable anxiety disorder are not getting treatment



What Is the Age of Onset for Common Disorders in Children?



Age 6
median age
of onset
**Anxiety
Disorders**



Age 11
median age
of onset
**ADHD and
Behavior
Disorders**



Age 13
median age
of onset
**Mood
Disorders**

These estimates are based on diagnostic interviews done by professionals of a sample of young people 13-18.



CASE EXAMPLE # 1

- “Anne's mother tried everything she could think of to get her 14-year-old daughter to join an after-school club or make new friends at her part-time job. Anne insisted that she would rather stay home and read; she didn't think she fit in with her friends any more and didn't know what to say to them. When she did venture out with a cousin, it took her hours to get ready because she didn't think she looked quite right.”



- Marked and persistent fear of one or more social or performance situations in which child is exposed to unfamiliar people or possible scrutiny by others.
- The child fears he/she will act in a way that will be humiliating or embarrassing.
- Exposure to situation provokes considerable anxiety.
- Feared situations are avoided or else endured with intense anxiety and distress.



- Children with social phobias can also show a range of associated features:
 - Being overly sensitive to criticism
 - Having low levels of self-esteem
 - Having inadequate social skills
- School performance may be impaired due to test anxiety and failure to participate in classroom activities
- Social anxieties can eventually result in school refusal



CASE EXAMPLE # 2

- Mark presented to therapy because he reported that he was unable to concentrate at home, at school, and with friends. He indicated that she had difficulty falling asleep at night because his mind was “constantly racing” with thoughts and concerns about anything and everything. He described feeling constantly tense and uptight, noting significant difficulty in just being able to enjoy a relaxing activity, like reading or watching TV.



- Children with generalized anxiety manifest excessive anxiety, unrealistic worries, and fearfulness, not related to a specific object or situation
- Child finds it difficult to control worry
- Usually accompanied by some of the following symptoms:
 - Restlessness or feeling keyed up/on edge
 - Being easily fatigued
 - Difficulty concentrating or mind going blank
 - Irritability
 - Muscle tension
 - Sleep disturbance



Typical Fear or Anxiety

How do I tell the difference?



The emergence and course of typical childhood fears differ from fears and anxiety elicited by chronically or acutely induced stress or anxiety.

As children get older, they develop cognitive, affective and social skills required to understand and perceive their environment's predictability and, gain a better sense of control.

Hence, age-normative fears begin to dissipate.



Signs of Transitory Anxiety	Signs of Problematic Anxiety
Fears and concerns are reasonable and expectable.	Fears and concerns are unreasonable and out of proportion to the event.
The child is responsive to suggestions for change.	The child becomes overwhelmed and inconsolable and may regress or melt down in response to suggestions for change.
The child has many questions, to which there are answers, and the child accepts those answers.	Reassurance is never enough; no answer is good enough. Concerns are taken deeply to heart and create distress in the present and worry about the future.
The child takes pride in doing work neatly and correctly.	The child is perfectionistic; nothing is good enough; nothing is ever right. School work or simple tasks of daily living may take an inordinate amount of time because of the child's insistence on precision.



Signs of Transitory Anxiety	Signs of Problematic Anxiety
Symptoms diminish in intensity over time, and take less time to deal with.	Symptoms increase in intensity over time and the worry takes on a life of its own.
The child understands why he needs to face the situation.	The child is more focused on how to avoid the situation than on how or why to face it.
The symptoms catalyze/facilitate positive change.	The symptoms interfere with growth and productivity.
Themes are in synch with the child's developmental stage.	Themes are out of synch with the developmental stages of the child.

www.ahaparenting.com

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Vulnerability to anxiety

- Personality Traits
 - Perfectionism
 - Anxiety Sensitivity
 - Attributional Style
- Inadequate Parental / Social Support
- Stress Reactivity (Low Threshold)
- Lack of Adequate Coping Skills

26/04/2016



Other risk factors



- **Feeling like the world is a threatening place**
 - Children who experience restricted amount of parental warmth may not develop a secure attachment, and view the world as unpredictable and threatening, and experience more anxiety (Bowlby, 1983).
- **Criticism of Child's Competence**
 - High levels of parental criticism have been linked to risk of anxiety disorders in children and more specifically, social anxiety (Ginsburg et al., 2004).
- **Over-control and Granting of Autonomy**
 - For anxious parents, allowing children to make decisions and have control may be difficult and increase their anxiety ; in turn contributing to greater over-control (Kessler et al., 2005).

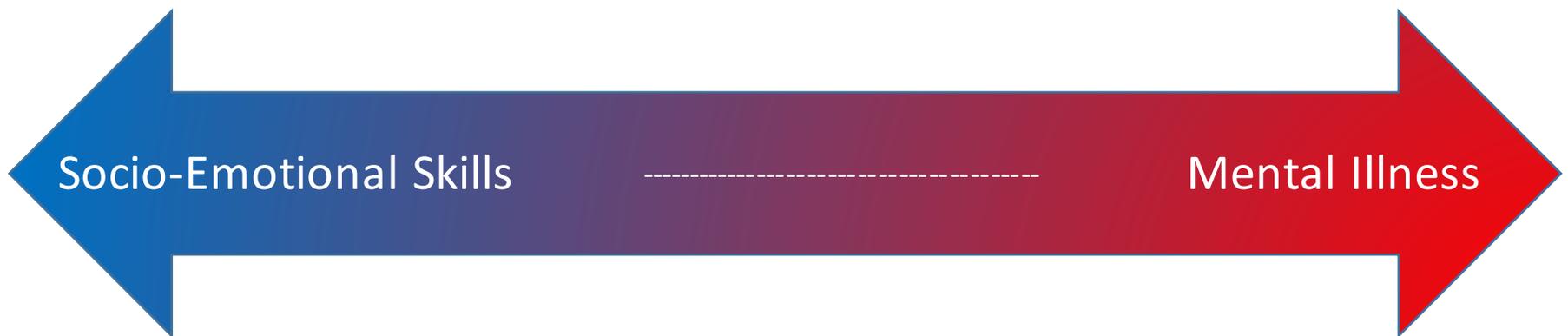
Parental influence on emotion regulation

ER consists of all extrinsic and intrinsic processes responsible for monitoring, evaluating, and modifying one's emotional reactions.

- Parents of anxious children manifested less supportive emotion socialisation practices than those of non-anxious children.
- Parent reactions to children's emotions can directly influence children's developing emotion management styles, such that **supportive responses** tend to facilitate appropriate emotional expression, communication and ER, and **non-supportive responses** to children's greater use of emotional inhibition and dysregulated affect (Fabes et al., 2001).



- Emotion Regulation plays an essential role in social-emotional development; skills that are critical for cognitive functioning.
- RE skills are associated to an improved social adaptation and achievement.



Anxious children have greater difficulty managing negative emotions and hence, poorer emotion regulation skills compared to non-anxious children.
(Hurrell et al., 2015)

Positive Emotion Socialization

- Implementing skills
- Regulating your own emotions
- Teaching your children about emotional management



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Putting on one's mask before assisting the other



<http://gregorybknapp.com/put-your-oxygen-mask-on-first/>

Your children's Point of Reference: IS YOU



Images from parenting.com

Your children's Point of Reference



- You are listening to your child's needs
- You take time to connect with your child(ren)
- You validate your child(ren)'s emotions
- You set empathic limits / structure / reasonable expectations
- You create/model a family culture of problem solving and being solution-focused
- You provide room for autonomy

- You react negatively and intensely to your child(ren)'s emotions
- You are overwhelmed with your own issues/problems
- You have ill-defined or not set rules / structure (too permissive or too rigid)
- You diminish emotional reactivity
- You attempt to control with fear & threat(s)
- You are overly involved



Regulated Parenting



- Emotionally available and regulated
- Connected with your children – when setting limits
- Coach / model & support mastery instead of threaten and control
 - Empathic limits (connected while setting limits) instead of punishment

Positive Emotion Socialization

EMOTIONAL SELF-CARE



www.care.lab.mcgill.ca

Positive Emotion Socialization (2)

EMOTIONAL SELF-CARE

No self-care



Self-care

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Emotion Socialization Milestones

- Empathic Support (Warmth and Structure/Limits)
- Eliminate Negative Reinforcement (avoidance)



Developing Empathy

What is my child feeling? Can I put myself in my child's "shoes"?

Developing Empathy

- Empathy = ...i.e., putting yourself in someone else's shoes.
- Key component of building a strong relationship with your child is understanding and listening to your child's emotions.
 - **When children understand they can freely express their emotions with their parents, a trusting and respectful relationship can develop.**
- If children believe that their parents will **dismiss** the emotions that they express, **they may become ashamed, guilty, and act to suppress their emotions.**
- Sometimes children's emotions may seem silly, bizarre, or unfounded, but it's important for parents to help them through the experience of each positive and negative emotion.
- Listening, validating, and helping children work through their emotions can support their emotion regulation development.

HEALTHY MINDS

HEALTHY SCHOOLS

CHILDHOOD ANXIETY AND REGULATION OF EMOTIONS

RESEARCH GROUP

MINDFULNESS

METACOGNITION

CAORE

Evidence Gathering

Getting my child to play detective – “Thoughts are just thoughts – NOT FACTS”

Evidence Gathering



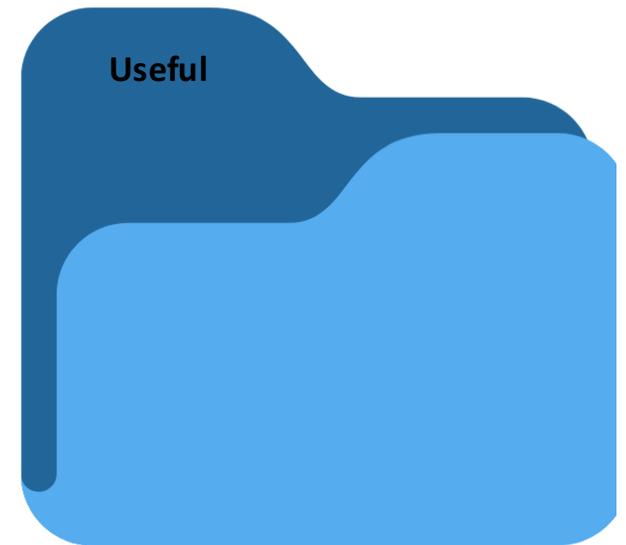
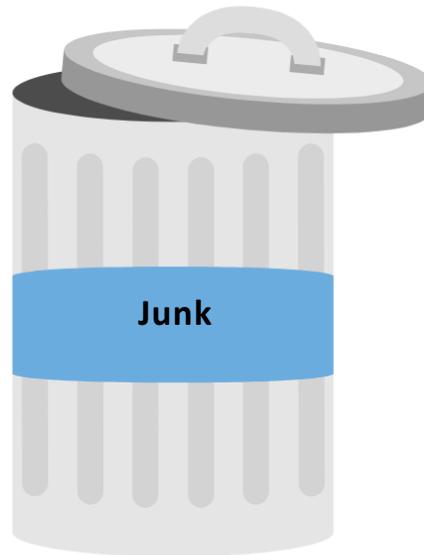
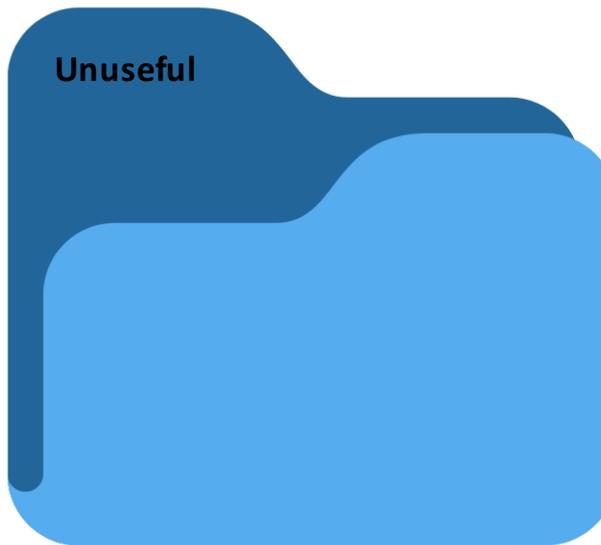
Feelings	Facts
I'm afraid I'm going to fail	I have never failed a test; its not likely that this will happen now.
I have no idea how I'm going to do on this test.	I have a pretty good idea of how I'm going to do, because I pretty much always do well, even I feel scared like this.
I have to keep studying – what if I'm not prepared?	I am good at studying. I tested myself and I do know the material. There may be a curveball or surprise, but I am prepared as I can be.

Essential Tools – Emotion Socialization



- 1 Take a Step Back
- 2 Name “Anxiety” as the emotion felt
- 3 Remind your child that anxiety doesn’t define him/her but it an emotional state that will pass
- 4 Validate the emotions and offer support, warmth and empathy
- 5 Try to have your child identify the thoughts and categorize them into “useful” or “unuseful” category

Categorizing Thoughts



Answering using your Smart Brain

How might a significant person / others react to worry?

Answering with your Smart Brain



Worry Says	Turn It into a Question	Answer with Your Smart Brain
“You’re going to get lost!”	“Am I really going to get lost?”	“No. I am going with another family. I’ll stick with them. And they want to stick with me!”
“You’re going to have a bad time!”	“Am I really going to have a bad time?”	“No. I’m going to a movie – and movies are fun! Mom wouldn’t let me go to something bad.”
“I’ll get hurt or bad things are going to happen.”	“Do I really think I’ll get hurt or bad things are going to happen?”	“No,, There’s no reason for me to get hurt. Bad things don’t just happen. I’m just uncomfortable because its new and unfamiliar.”

Problem Solving

A Step-by-Step Approach

Problem Solving

- Step 1: Empathize with your child
- Step 2: Relabel the fear
- Step 3: Reevaluate the size of the fear
- Step 4: Identify how the body reacted to the feared situation
- Step 5: Plan a way out / come up with options
- Step 6: Refocus on goal and choose an alternative
- Step 7: Reinforce your child



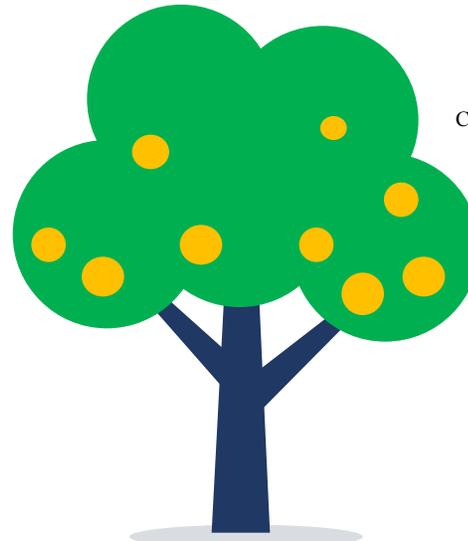
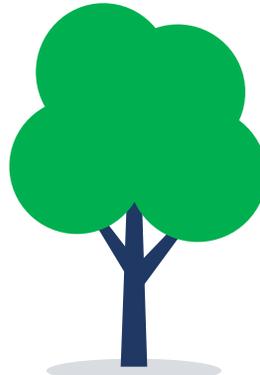
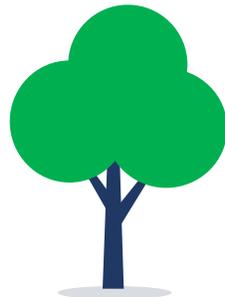
“Keep Your Eyes on the Prize”

The Road to Mastery is a Process

Emotion Socialization Growth

**YOUR
CURRENT
SITUATION**

SEED THAT IS
PLANTED



**YOUR
GOAL**

BETTER PARENTAL EMOTION
REGULATION



PROACTIVE CHILD EMOTION
SOCIALIZATION



CHILD EXERCISING MORE CONTROL
OVER ANXIETY



Ongoing Projects - Recruitment

C.A.R.E. Research Group

Ongoing Projects - Recruitment



- Parental Intervention
- Child / Parent ER Study



Facilitator/Teacher Training

C.A.R.E. Parenting Program

Childhood Anxiety and Regulation of Emotions Research Group



McGill

Jewish General Hospital – Child Day Program

Facilitators:
Dr. Tina Montreuil
Rayna Edels Ed.M

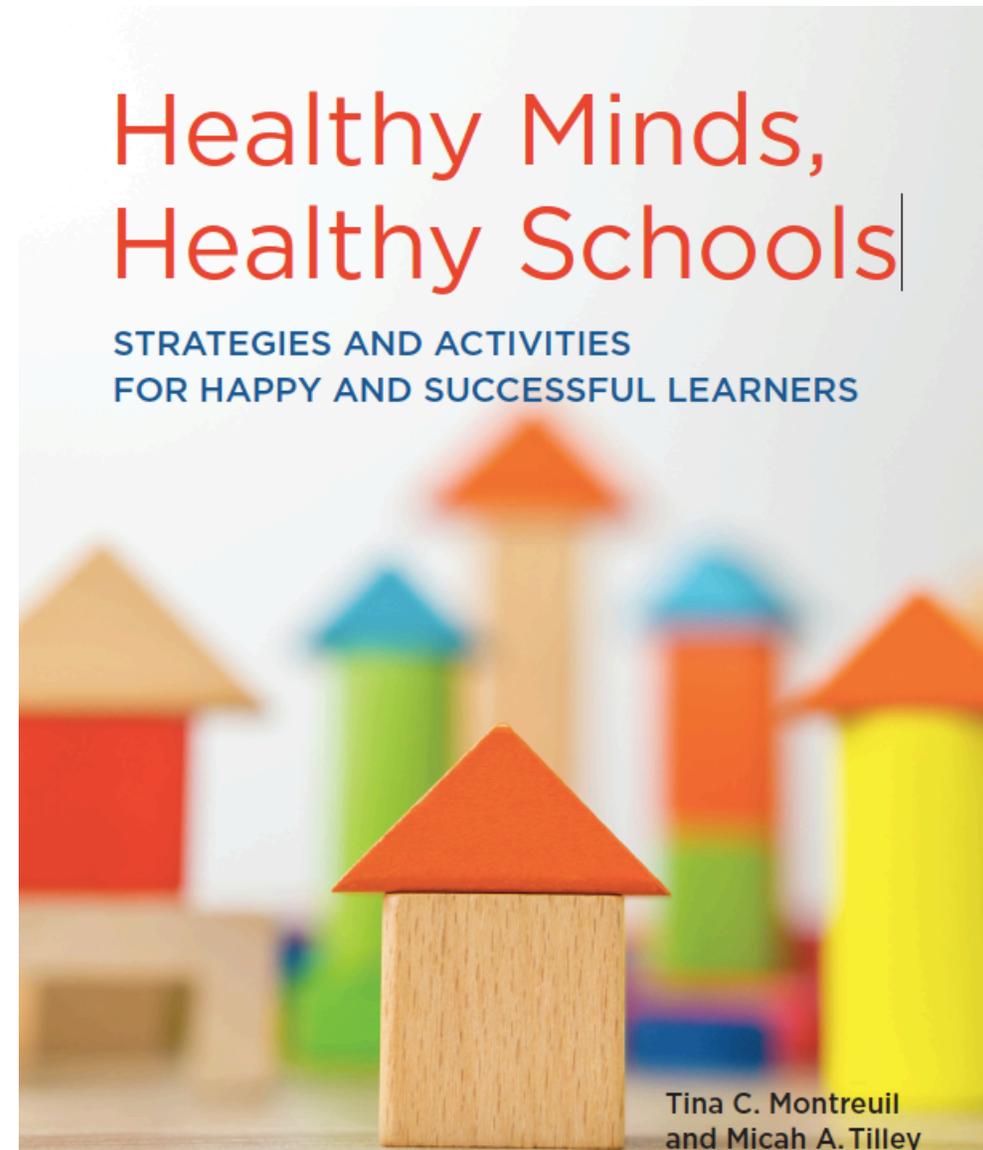
In Conclusion...



- Your reaction matters in socializing emotion regulation in your child.
- Your personal emotional “self-care” and well-being is critical in achieving mastery with your child.
- The importance of setting “Empathic Limits” – Warmth/Connectedness + Structure and Clear Expectations.
- There are concrete strategies and skills that can be taught to your children in order to help them, and you achieve mastery.

Program manual available at:

- [Amazon.ca](https://www.amazon.ca)
- [Chapters.ca](https://www.chapters.ca)
- <https://www.canadian-scholars.ca/books/healthy-minds-healthy-schools>



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Be sure to check out our Parent & Teacher Resources



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