

Parent-led anxiety treatment could improve children's lives, study finds

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A new study by the University of Reading has found that delivering Cognitive Behaviour Therapy (CBT) via parents could be an efficient and effective way of treating childhood anxiety disorders.

The study, published in the *British Journal of Psychiatry*, concerned the treatment of [anxious children](#) aged 7-12. Over an eight week period parents received brief weekly sessions of guidance in using CBT principles to help their child. Compared to a group who had not received any treatment, these children were three times more likely to have recovered from their anxiety.

Psychological disorders are becoming increasingly common in children, with approximately 20% of children suffering from significant symptoms of anxiety and between 5% and 10% of children meeting [diagnostic criteria](#) for an anxiety disorder.

Children with [anxiety disorders](#) may have fewer friends, lack confidence in trying new things, and are known to underachieve at school and risk social exclusion. Childhood anxiety is also known to be a risk for development of future problems, including [depressive disorder](#), substance and [alcohol problems](#), and poorer physical health.

The lead for the current study, Dr Kerstin Thirlwall, who was supported by a Fellowship from the Medical Research Council, said: "We studied 194 children who had a variety of diagnoses, including generalised anxiety disorder, social phobia, separation anxiety disorder, panic

disorder/agoraphobia and specific phobia.

"The results of our trial are extremely encouraging. Compared to those who were still waiting for treatment, twice as many children who received our intervention recovered from their main anxiety disorder, and three times as many no longer had any clinical [levels of anxiety](#). At the six-month follow-up, positive [clinical outcomes](#) were maintained and there was evidence of even further improvement."

After being referred to The Berkshire Child Anxiety Clinic, jointly run by Berkshire Healthcare NHS Foundation Trust and the University of Reading under the Clinical Direction of Dr Lucy Willetts, the 64 families who received guided parent-delivered CBT were sent a self-help book². The parents were then supported by trained clinicians, via a mixture of face-to-face and telephone sessions, to implement the skills and techniques outlined in the book. These included helping their child challenge their anxious thoughts, to face their fears gradually, and to use problem solving methods.

"CBT is a specialist treatment and can be difficult to access," continued Dr Thirlwall. "The number of trained CBT professionals in the UK is low and waiting lists for NHS Child Mental Health Services (CAMHS) are high. Furthermore, CBT commonly involves around 16 one hour treatment session over four months - a significant time commitment for families, while private treatment sessions cost on average between £90-£100 per session.

"The form of treatment we have developed has major cost advantages over the standard CBT treatments. It involves under five and a half hours of therapist time with just four face to face appointments. Furthermore, the treatment is conducted entirely with parents thereby minimising the disruption to normal child activities, such as going to school, attending after school clubs and being with friends.

"Training parents in applying CBT principles is a cost-effective treatment that could enhance the lives of children and families affected by childhood anxiety."

This study forms part of a University of Reading research programme led by Professor Peter Cooper and Dr Cathy Creswell from the School of Psychology and Clinical Language Sciences, which is developing and evaluating novel treatments for child anxiety in order to improve both efficiency and efficacy.

More information: Thirwall, K. et al. The treatment of child anxiety disorders via guided parent-delivered CBT: A randomised controlled trial, *British Journal of Psychiatry*, ePub ahead of print, bjp.bp.113.126698, 22 August 2013.

Provided by University of Reading

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