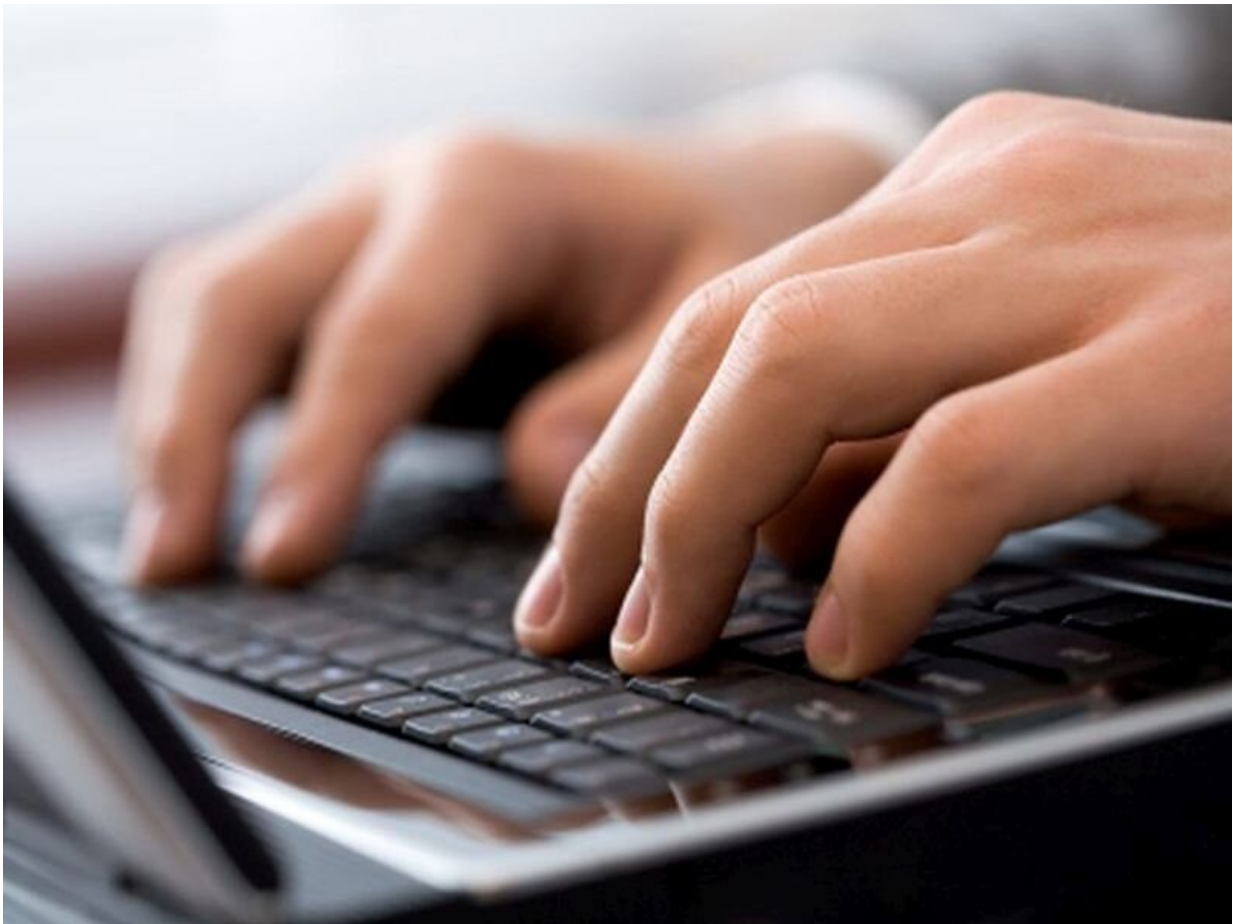


Online therapy works for kids battling social anxiety

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(HealthDay)—Plenty of teens are burdened with a chronic and often

paralyzing fear of being harshly judged by others. Unfortunately, many can't get in-person treatment that could help.

But now a team of Swedish researchers says that an entirely online version of a widely used behavioral therapy technique can deliver significant relief to those affected.

The finding could pave the way for easier and cheaper access to an [effective treatment](#) for a common adolescent condition known as [social anxiety disorder](#) (SAD).

"SAD is one of the more common psychiatric disorders among young people, affecting 5% to 10% of individuals under age 18," explained study author Martina Nordh. She is a psychologist and postdoctoral researcher in the department of clinical neuroscience at the Karolinska Institute in Stockholm, Sweden.

"It manifests as an intense and persistent fear of social or performance situations that most commonly are avoided or endured under great distress," Nordh said.

For [young people](#), "it often leads to problems when playing or hanging out with friends, with performance in school, and with participation in leisure activities," she added.

Standard treatment typically involves some combination of antidepressants and in-person sessions rooted in cognitive behavioral therapy (CBT).

According to the study team, CBT aims to foster [positive thinking](#), new social skills and increased engagement with others. And, by slowly increasing exposure to the kinds of social situations that patients find most daunting, the approach has, in fact, proven effective at helping

patients better understand and overcome their anxiety.

The problem is that setting up and maintaining an in-person CBT treatment program can be tricky for teens, said Nordh.

On the one hand, many localities lack a sufficient number of trained pediatric CBT therapists. And, "for SAD specifically, the symptoms of the disorder itself can also make it hard to seek help," Nordh noted. That's because many individuals with SAD fear meeting new people, such as unfamiliar health care professionals, and "hesitate to visit unknown settings, such as mental health care clinics," she said.

Might providing CBT online prove to be a practical and effective alternative? To find out, the researchers looked at just over 100 SAD patients aged 10 to 17 between 2017 and 2020.

About half of the teens received CBT therapy delivered entirely online. The other half were offered supportive therapy, also delivered exclusively online.

The latter also involves providing education about SAD, while stressing the value of friendship, socializing and fostering healthy habits, such as exercise. Gradually increasing exposure to stressful social situations is not, however, part of the supportive therapy agenda.

Both formats lasted 10 weeks, with [therapist](#) support provided on a weekly basis. In total, each group had three face-to-face online video sessions with a therapist.

The result: Teens, their parents and the study team all agreed that online CBT was significantly more effective than online supportive therapy when it came to helping curb anxiety, stress and depression. It also proved superior in terms of helping teens to function better on a daily

basis.

"We also saw that [internet] CBT was more cost-effective than supportive therapy," said Nordh. And she added that providing an online-based program means that "families don't have to take time off from school and work to participate in the program, and therapists can support more patients at the same time since [internet] CBT requires less therapist time compared to regular CBT."

Nordh said that she and her team hope the findings will "encourage health care providers nationally and internationally to facilitate further research and implementation of this accessible and effective treatment for SAD in youth."

Still, the effectiveness of web-based [therapy](#) largely depends on exactly how it's structured, cautioned David Miklowitz, director of the University of California, Los Angeles child and adolescent mood disorders program.

"It is tempting to say that psychotherapy can be delivered in digitized format without any loss of effectiveness," Miklowitz said. "But the current findings are more nuanced. They indicate that internet-based CBT is effective *if* it is therapist-guided, which in this case included three therapist/child video sessions."

That approach, he noted, is "consistent" with past research indicating that online CBT can be of benefit when "delivered in the context of a human therapist/child working alliance, with a certain amount of face-to-face contact."

By contrast, Miklowitz warned, "treatments that are purely digitized without contact with clinicians are unlikely to provide the same level of benefit."

The study was published online May 12 in *JAMA Psychiatry*.

More information: There's more on SAD at the [U.S. National Institute of Mental Health](#).

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