Could adventurous play decrease anxiety in childhood?

Adventurous play → Children’s risk for anxiety

49% increase in emotional disorders in 5-15 year olds between 2004 - 2017

Anxiety disorders are the most common emotional disorder

Anxiety is a ‘gateway’ disorder

Anxiety is associated with a range of negative outcomes including long-term mental health problems and substance abuse

Pathways to anxiety disorders begin early in life (Hudson & Dodd, 2012)

How are anxious children different from non-anxious children?

What do we try to change in treatment and prevention programmes?

What predicts the development of anxiety in children?

What needs to change in treatment and prevention programmes for anxiety to change?

Anxiety disorders are the most common emotional disorder

COPING

‘Efforts to regulate emotion, cognition, behavior, physiology, and the environment in response to stressful events or circumstances’ (Compas et al., 2001).
COPING

• Anxious children use more maladaptive and less adaptive coping skills in response to negative life events than non-anxious children (Legerstee et al., 2009).
• Anxious children are less likely to think that they would be able to cope in a hypothetical situation (Dodd et al., 2015).
• Kendall (2011) – an effective treatment is one that leads the child to acquire a ‘coping template’.
• Improvements in coping mediate outcomes in treatment for child anxiety (Kendall et al., 2016; Lau et al., 2010).

To learn to cope and build a coping template, children need exposure to situations where they are required to cope.

INTOLERANCE OF UNCERTAINTY

Evidence that IU is associated with anxiety and worry broadly.

IU has a robust association with anxiety and worry in children and adolescents. Osmanagaoglu, Creswell & Dodd (2018)

Treatments that change IU reduce symptoms of anxiety (Boswell et al., 2013; Bomyea et al., 2015).

Targeting IU is likely to require exposure to uncertainty.

PHYSIOLOGICAL AROUSAL

Catastrophic misinterpretation

“When my heart beats rapidly, I believe I’m having a heart attack”

Anxiety sensitivity (fear of fear)

Tendency to fear anxiety and anxiety-related body sensations.

Anxiety sensitivity predicts anxiety symptoms and diagnoses over time.

Treatment studies show it is possible to change anxiety sensitivity.

Changing anxiety sensitivity is likely to require exposure to physiological arousal in a positive context.

AVOIDANCE

Removes opportunity for learning.

Adjust threat expectations. Extinction
Adjust fear expectations.
Adjust coping expectations.
Challenge misappraisals.
Avoidance is central to understanding anxiety.

Children who are avoidant (BI) are at increased risk for anxiety disorders (Hudson & Dodd, 2012)

Risk is exaggerated when parents support avoidance.

Early intervention/prevention programs target avoidance and parental support of avoidance

Exposure is central component of effective treatment (Bouchard et al., 2004; Kendall et al., 2005).

Adventurous play

‘Exciting, thrilling play where the child experiences a level of fear and is able to take age appropriate risks.’

(Dodd & Lester, in prep)

Adventur...
Adventurous play provides a positive context where children are motivated to engage in situations that they fear.

Provides natural exposures and an opportunity to learn about:
- Physiological arousal
- Coping
- Uncertainty

Theory that is derived from what we know about the development of anxiety in children.

Evaluation of the benefits of adventurous play and an understanding of the mechanisms.

Thank you!