Student Anxiety in the Clinic:
What to know and how to Build Resiliency

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Introductions and Your Challenges

You never know what hides behind a smile.
Mental Health Matters

• Living with mental illnesses and substance use disorders impact healthy functioning-It is a human issue and a public health issue.

• 43.6 million (20%) Americans experience some form of mental illness—most notably anxiety and depression.

• 9.8 million adults (4.1%) live with a serious mental illness.

• Adults with serious mental illness and co-occurring substance use disorders, rates were highest among those ages 18 to 25 (35.3%) in 2014.

(Substance Abuse Mental Health Services, 2014)
Why It Matters

- Mental health and wellness are essential to overall health. The World Health Organization defines health as “… a state of complete physical, mental, and social well-being....”
- For all of us, our mental, physical, and social health are interdependent.
- The co-morbidity epidemic
- Positive mental health is strongly correlated to academic success, retention, and ultimately vocational success and adult resiliency / Return on Investment

(Douce & Keeling, 2014; Eisenberg, Golberstein, & Hunt, 2009)
Our Shared Responsibility

• Support the mental health, wellness and resiliency of students.

• Promote the connection between positive mental health and successful educational and social roles.

• Understand how adverse life experiences and resiliency affect learning and development.

• Develop our knowledge, skills & strategies to build student resilience.

• Recognize our own need for self-care
Adverse Childhood Experiences

• They are common and they cluster (47.9 % experience more than one, 22.9% >2):
  • Chronic neglect & Resource insecurity/poverty
  • Abuse of all types
  • Parental Mental Illness and Substance use
  • Parental incarceration
  • Domestic & Neighborhood Violence
  • Household dysfunction
  • Parental divorce/separation
  • Racism
The World We Live In

- Culture of Anxiety/Anger and reality of increasing disparities
- Soaring Expectations and Crushing Realities
- Social Media, pseudo-communication and Alternative “facts”
- Snow Plow Parenting in some families
Students’ Experiences

• 3 Types of stress:
  • Tolerable
  • Acute
  • Toxic: Can change brain!
  • Mediated by cultural beliefs, social supports and developmental stage of the student

• Three types of self-reported distress have demonstrated slow but consistent growth over the past five years including anxiety and depression in students.

• **Suicide** is the second leading cause of death of students between the ages of 10-24.

YouTube: [BU Secret 2017](#)
What does this continuum of distress look like in our students?

• Difficulty trusting and benefiting from relationships: Loneliness
• Disrupted cognitive tasks such as memory, attention and thinking
• Increased physical health conditions that disrupt education.
• Inability to cope with normal strains and disappointments of daily life
• Inability to regulate emotions and how to express emotions

• Non-suicidal self injury such as cutting
• Abuse of substances (including food) as students age
• Express powerlessness through questioning of authority and disruptive behaviors in classrooms, internships, work
• Lack of empathy for self and others.
• Experience struggle as a weakness and shameful; reluctant to ask for help
• At its very worst, hopelessness, overwhelming shame may lead to suicide attempts.
ANXIETY

• Our brain and body's reaction to stressful, dangerous, or unfamiliar situations. It is protective. Fight or Flee response.

• It's the sense of uneasiness, distress, or dread you feel before a significant event.

• Worrying about a job interview or stressing out over a test is healthy, normal anxiety.

• This Healthy kind of anxiety encourages us to properly prepare for situations we're uneasy about, and helps us stay alert and aware.
An Epidemic

- Anxiety disorders are the most common mental illness in the U.S.
- Over 40 million American adults are afflicted by anxiety disorders
- 20% of the U.S. population is currently suffering from an Anxiety Disorder
- 40% of American adults have experienced an Anxiety Disorder at some point in their life
- Prevalence rates for children for any anxiety disorder are 20% → 1 in 5.
- Many do not receive any kind of treatment, but their functioning is negatively impacted in their roles.
An Issue, not an Identity

• Anxiety disorders are not a personality problem, or a character problem.

• Anxiety is always accompanied by courage and strength.

• The principle of personhood
Anxiety

- Can cause significant role dysfunction: academics and work.
- Excessive need for reassurance
- Work relationships-supervisors, co-workers, productivity, errors.
- Isolation + Emotional dysregulation.
- Restlessness or feeling wound-up or on edge, Fatigue, panic attacks
- Difficulty concentrating, memory issues
- Irritability, muscle tension,
- Sleep, food, substance issues
- Stomach issues: IBS, Crohn’s, ulcers
Young Adult Anxiety

• Physical whirlwind of changes in adolescence and young adulthood demands can fuel the emergence of anxiety.

• Symptoms can include:
  • Too much/too little food & sleep
  • Emotional dysregulation
  • Isolation
  • Excessive need for reassurance in school, friendships and internships
  • Non-Suicidal self-injury
  • Substance use/abuse
  • Suicidal thoughts, attempts, completions
Effective Treatments

• Individualized and personalized Treatment works for anxiety and depression.

• Medications

• Cognitive Behavioral Therapy (CBT) →
  • thought-feeling-behavior skill strategies that empower children, teens and adults to unpack these dimensions of cognition. Skills and homework practice.

• Acceptance Commitment Therapy (ACT) →
  • combines strategies of acceptance, mindfulness and commitment to behavior change. Focus not only on skills, but personal values and life aspirations.

• Dialectical Behavior Therapy (DBT) →
  • combines CBT with mindfulness and change. Distress tolerance skills, emotional regulation skills and interpersonal effectiveness. Group and individualized work.
TRANSFORMATIVE RESILIENCE

• Resilience: Adapting well and improving because of the challenges, adversity, trauma, tragedy, threats or whatever one experiences as significant sources of stress.

• It is a person’s capacity to not only bounce back from adverse events but use them as life’s learnings and change.

• When our students are resilient, they will grow, flourish and thrive as healthy adults living in a turbulent world.

“I am not what happened to me, I am what I choose to become.”
—Carl Gustav Jung
Principles of Resilience

• Everyone has the capacity for resilience. It is not just for students from high risk populations.

• It is a process, not a trait.

• Resilience is ordinary—not extraordinary.

• Resilience isn’t a program or a curriculum. It requires that we shift from a “problem based deficit model to a strengths-based model”. It is part of our mission. It is a culture. It is an outcome.

• Challenges of all kinds are opportunities for growth and change. (Truebridge & Benard, 2013)
7 Factors of Resiliency

- Emotional Regulation
- Impulse control
- Causal Analysis
- Self-Efficacy
- Realistic optimism
- Empathy
- Social Connectedness

- I AM (strengths)
- I CAN (skills)
- I HAVE (supports)
Skills for Transformative Resilience

• Responding to self with empathy and to others.
• Defining personal values and goals.
• Mindfulness: using apps and in person tools.
• Problem-solving and Planning skills.
• Tolerating and respecting differences.
• Merging Perspectives.
• Resolving interpersonal conflicts.
• Identifying Personal daily rhythms & wellness tools.
• Connecting Skills.
• Resisting Shame.
• Distress tolerance skills.
• Refusal Skills.
EMOTIONAL AGILITY

• Emotional agility is a skill set that builds a student’s ability to face their emotions, label them, understand them and then choose to move forward deliberately.

• It is the ability to recognize when they are feeling stressed, be able to step out of their stress, and then decide how to act in a way that is congruent with their personal values and aligned with their goals.

“The past does not have to be your prison. You have a voice in your destiny. You have a say in your life. You have a choice in the path you take.”
— Max Lucado

WWW.POSITIVEOUTLOOKSBLOG.COM
Key Strategies for Instructors, Faculty and Supervisors

• DEVELOP RELATIONSHIPS
  • Trusting, mentoring, empowering and inspiring relationships are paramount in helping students develop resiliency.
  • Build social connections, empathy for self and others and realistic optimism
  • Just one person can change a life.
Normal is an illusion. What is normal for the spider is chaos for the fly.

YouTube: Brené Brown on Empathy
Responding to Anxiety

• Responding with empathy is the most powerful tool we, as helpers can use.

• Acknowledging negative realities and offering a more balanced perspective can help people reduce their negative thoughts that lead to anxious feelings.

• It requires that we be present and just lead with intentional listening.
Coaching for Agility in Internships and classes

- Encouraging Students to “show up” to their emotions or face their emotions. Helping them see that they don’t need to be dominated by one emotion.

- Coach them that they are big enough to contain all their emotions and they can drop the struggle about whether their feelings are right or wrong or if they should or should not feel a certain way.

- Coach students about “stepping out”...creating space between themselves and their emotions-emotional mindfulness.

- It is the part of themselves that is wise enough to know that when they have a thought or feeling, it doesn’t mean it is right and it doesn’t mean they have to act on it.

- It is just what they are feeling.

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Inspiring Hope and Sharing Balanced Perspectives

- Struggle is seen in today’s world as a weakness.
- Student’s world view can become very narrow especially when confronted with chronic struggles and distress.
- Offering a strengths oriented view of the student’s experience and struggles, expands how they see themselves.
- This will help them garnish and feel hope even when faced with these challenges.

-Vulnerability is not a show of weakness, but proof of how strong and emotionally stable you are.
-Rich Simmonds
Strategy for Building Resiliency

Help people see their strengths in their struggles.

Offer a key life learning that the person has experienced through the negative reality and/or their anxiety.

This helps the person shift their thinking that is solely focused on the negativity, anxiety or barriers they are experiencing.
Tips

Building Resilience

1. Listen for persistence, grit, determination, courage, fierceness, independence, assertiveness, etc.

2. Aim to connect their strengths to what the person has learned

3. Remember that great struggle requires great character strengths

4. Point out how that experience will or can support their wellbeing.

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Inspiring 2nd SALE – Sharing Balanced Perspectives
Encourage Skill and Support Building

• Mindfulness skills are highly effective and courses are very available. Can be taken and used anywhere... school, work, internships, home, relationships.

• Smartphone apps support the use of these skills
Mindfulness

• “Paying attention in a particular way on purpose, in the present moment, non-judgmentally” - JKZ

• 18,000 studies demonstrate that mindfulness benefits us.

• Reduces brain inflammation, stress, anxiety, depression, sleeplessness, overeating.

• Increases positive mood, focus, memory, sense of control, quality sleep.

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Strategies

• Yoga, acupuncture, meditation have growing evidence base.

• Encourage and assist students and interns to build and rely on culturally relevant social supports and social activities.

• Evidence has demonstrated they are very powerful and helpful in helping people be resilient and emotionally agile.
How to do mindful breathing
Encourage Behavioral Strategies

- Self Care strategies are paramount!!!
  - Sleep
  - Food $\rightarrow$ mind:gut connection
  - Exercise
- Wellness Recovery Action Plans (WRAP)
  - What I do to stay well
  - Anxiety triggers
  - Strategies to combat triggers
  - School, home, work, internships
CREATING A RESILIENCY CULTURE

• Promote a “growth mindset” in classes or Internships:
  • Set high expectations that students can meet high expectations.
  • Promoting the message that faculty, staff and programs BELIEVE they can learn, they can struggle and they can persist successfully.
  • Use the language of Productive struggle + persistence!
  • Share the reality that EVERYONE struggles…it is the human condition. Role Model and tell stories of surmounting struggles and changing as a result…from the daily struggles to the life changing ones.
Reasonable Accommodations

• If a mental health condition such as anxiety is “disclosed” as a disability, reasonable accommodations can provide equal access and opportunity at school and work.

• Examples might include: Written instructions instead of verbal, alternative testing formats, quiet space to use for wellness strategies, a seat near the door, etc.

• It is a legal right to seek a reasonable accommodation for a diagnosis of anxiety.
CREATE A CULTURE of CARING

• Message and market empathy, connection, community, diversity and strengths in classes, programs, and employment sites

• A mission is not enough. ALL Students/interns/employees need and want to feel cared for and valued.

• Include your students/interns in building this culture so it reflects their expertise, their values and their strengths.

• Practice what you preach! Practice excellent self-care and compassion.
Case Studies, Stories, Questions & facilitated Conversations

• Case Study #1
• Case Study #2

• What strategies would work in your clinic? Why?
• What do you feel comfortable teaching, coaching or doing to help this student?
• How do you take care of yourself so you can be there for your interns and students?
Case Study #1

• Student Description
  • Student is high performing and at the top of her class for GPA. She is very outgoing, has strong attention to detail and very high expectations of herself. She strives to be the best in anything she attempts and pushes herself farther than most people as to reach a goal.

• Clinical Site
  • Student was placed at a prestigious and competitive clinical site. She had spoken to the Clinical Education faculty about her strong desire to be placed there in advance of the placement process. The site is a physically and emotionally challenging site, which has high expectations of students.

• Clinical Instructor
  • CI is an experienced clinician, but had only had a few students prior to this student placement. CI has attended the CCIP and is also an NCS. CI has very high expectations of herself and her students.
Case Study #1 (cont.)

• Scenario:
  • Because of the similar personalities of the student and CI, there was a gap in communication. The student drove herself harder. Even with ongoing encouragement, the student continued to pressure herself. This led to illness and absences from the clinical site, and less attention to basic skills, performance, and safety when present.

• What strategies would work in your clinic? Why?
• What do you feel comfortable teaching, coaching or doing to help this student?
• How do you take care of yourself so you can be there for your interns and students?
Case Study #2

• Scenario
  • Type A personality student, paired with a difficult, demanding site for her 3rd and final clinical. This student was at the top of her class, personable, compassionate and did well throughout the curriculum.
  • Student would get anxious during evaluation and was unable to retrieve information in the moment and had a hard time focusing on the task. She was SO afraid of being wrong, she eventually had a panic attack and fainted.

• What strategies would work in your clinic? Why?
• What do you feel comfortable teaching, coaching or doing to help this student?
• How do you take care of yourself so you can be there for your interns and students?
Support? Questions?

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