

2017

# Mindfulness as an Effective Strategy for Anxiety Relief in Adolescent Patients

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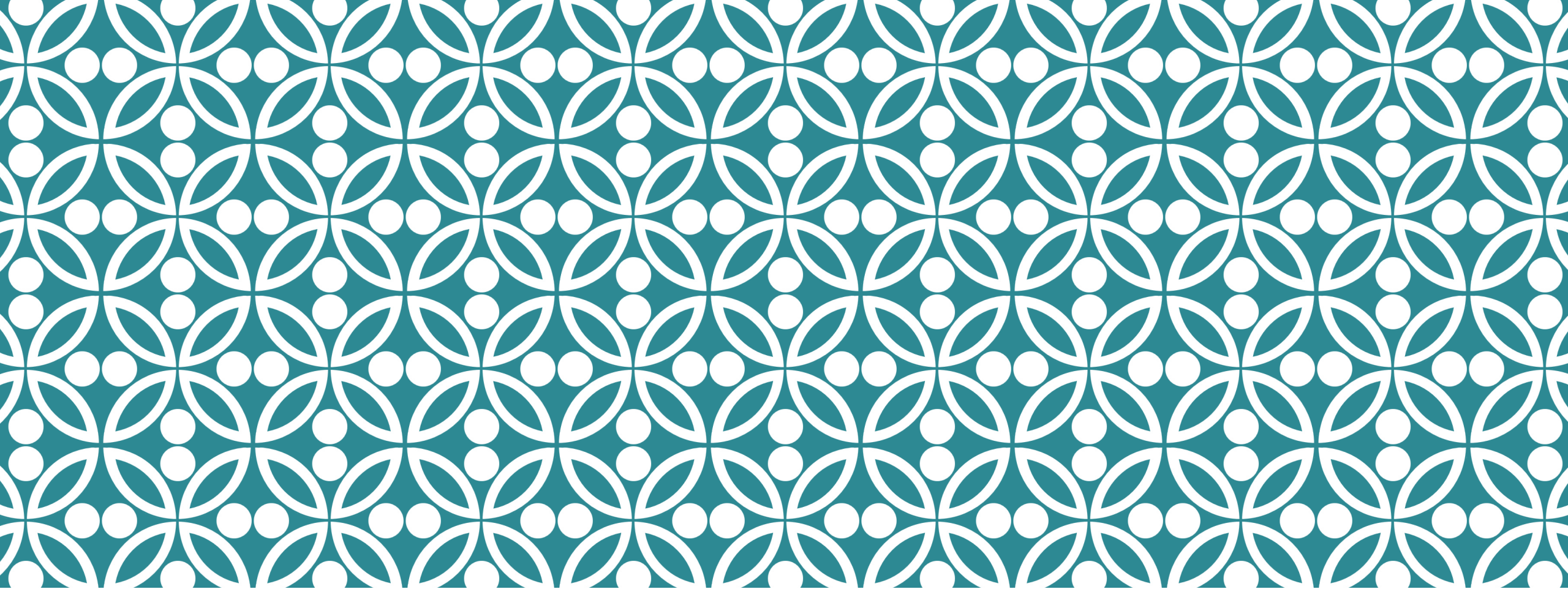
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## Recommended Citation

DiBella, Desiree N., "Mindfulness as an Effective Strategy for Anxiety Relief in Adolescent Patients" (2017). *Family Medicine Clerkship Student Projects*. 299.

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# MINDFULNESS AS AN EFFECTIVE STRATEGY FOR ANXIETY RELIEF IN ADOLESCENT PATIENTS

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South Burlington Family Medicine  
**Mentor:** Dr. Whitney Calkins  
Rotation #4,  
August 21<sup>st</sup>-September 29<sup>th</sup>, 2017

# PROBLEM IDENTIFICATION AND DESCRIPTION OF NEED

- Anxiety disorders affect 6.8 million adults over the age of 18 in the United States, and anxiety disorders are the most common mental health illness in children
- Commonly encountered anxiety disorders in Family Medicine include: Generalized Anxiety Disorder (GAD), Social Phobias, and Panic Disorders

## Risk Factors for anxiety disorders in young adults

- Shyness, or behavioral inhibition, in childhood
- Being of the female sex
- Having few economic resources
- Exposure to stressful life events in childhood
- Anxiety disorders in close biological relatives
- Parental history of mental disorders
- Elevated afternoon cortisol levels in the saliva

# PROBLEM IDENTIFICATION AND DESCRIPTION OF NEED

- Teens and young adults increasingly suffer from anxiety disorders with the CDC reporting the rate of anxiety disorders among 3 to 17 year olds in the range of 3% with current symptoms to 4.7% having ever reported having anxiety
- Social phobias and panic attack disorder in particular have been shown to significantly predict the onset of alcohol use, abuse and persistence of dependence.
- Furthermore mood and anxiety disorders in children are associated with concurrent or subsequent sexual risk-taking behaviors, criminal behavior and poor coping and social skills. Long term effects include poor psychosocial functioning, impaired functioning in work, family and parenting and lower educational attainment.
- Evaluation of possible anxiety disorders generally begins with the primary care physician, and these disorders often go undetected or untreated

# PUBLIC HEALTH COST

- Although the first generation of the Global Burden of Disease initiative rated mood disorders more costly than anxiety or stress disorders, later focused cost-of-illness studies strongly suggest that the true costs of anxiety disorders are comparable to those of mood disorders especially when considering comorbidities and the following factors:
  1. Anxiety and stress disorders are among the most commonly occurring chronic diseases and are increasing in prevalence in many areas
  2. Earlier age of onset than many chronic conditions
  3. Wide range of adverse effects on secondary outcomes that have substantial economic implications (example: educational attainment)
  4. Associated with impairments in role functioning
  5. Despite the availability of affective treatments, a minority of people with anxiety and stress disorders receive treatment.

# UNIQUE COST CONSIDERATIONS IN VERMONT

- In Vermont, 1 in 5 people are affected by mental illness—approximately 6,000 youth and teenagers not accounting for those individuals who are undiagnosed
- There were approximately 15 child psychiatrists seeing outpatients in Vermont in 2016
- Rural areas and areas of socioeconomic status have reduced access to child psychiatrists placing a burden on pediatricians, family physicians, and other primary care providers to identify patients for referral and treatment decisions
- Untreated mental health conditions cost the state in emergency room visits, corrections facilities, homeless shelters, law enforcement, education funding and other public services

# COMMUNITY PERSPECTIVE AND SUPPORT FOR PROJECT

## **On using mindfulness as a strategy for anxiety and relief in adolescents and young adults**

- *“I usually start by bringing up presumptions about both anxiety/stress and mindfulness, as well as normalize the process. My initial focus is on getting [patients] to practice mindfulness. It’s like farming—you tend to the seed regardless of visible growth or evidence of immediate, overt benefit. It’s a balance of being patient in not seeing the seed sprout yet persistent in continuing to tend the land. Later, you can harvest the subtle changes as further momentum to keep going.”*

—Mark Reck, Psy.D., Staff Psychologist at CAPS

# COMMUNITY PERSPECTIVE AND SUPPORT FOR PROJECT

- *“[In order to practice mindfulness successfully], I encourage students to think realistically about what feels possible for them. Often times people can be overwhelmed by the time commitment they feel they have to make when developing a personal mindfulness practice. So I encourage them to try a practice daily for whatever small amount of time possible. Though everyone is different, I have found that many people are successful if they practice more often and briefly as opposed to once a week for a longer period of time. [Patients] can learn to practice catching self in patterns of thinking or being, practice viewing those patterns without judgment, and practice making intentional choices for their next steps.”*

—Christine Germano, MS, LCMHC; Assistant Director for CAPS\*

\*CAPS-Counseling and Psychiatric Services





# EVALUATION OF EFFECTIVENESS AND LIMITATIONS

- Effectiveness of resources will primarily be based on patient buy in and compliance as well as provider fidelity in recommendation and follow up.
- While many mindfulness smartphone apps and websites have become available, it is important for the provider to review each resource being recommended as well have some familiarity of practices being recommended.
- When providers are familiar with recommended practices they are better suited to answer patient questions regarding the practices and are prepared to guide patients in next steps
- Major limitation is time allotted for patient visit within the office setting. When possible, the last 5 minutes of the visit should be dedicated to reviewing therapies and next steps including mindfulness instructions.
- When possible, at least one recommended strategy should be practiced in the office.

# RECOMMENDATIONS FOR FUTURE INTERVENTIONS

- Community Health Team leader, social workers, or primary care providers can lead weekly-monthly sessions on the “Basics of Mindfulness”
- This introduction to mindfulness class could be offered to patients as a means to learn and practice mindfulness strategies together and a space to ask and answer questions.

By incorporating a group approach, mindfulness as well as feelings of stress and anxiety are normalized. Individuals participating can communicate their own approaches for incorporating practices within their lives and additional resources.

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# INTERVIEW CONSENT FORM

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Mindfulness as an effective strategy for anxiety relief in adolescent patients  
Desiree DiBella  
9/20/2017

Thank you for agreeing to be interviewed. This project is a requirement for the Family Medicine clerkship. It will be stored on the Dana Library ScholarWorks website. Your name will be attached to your interview and you may be cited directly or indirectly in subsequent unpublished or published work.

The interviewer affirms that he/she has explained the nature and purpose of this project.

The interviewee affirms that he/she has consented to this interview.

Yes

Name: CHRISTINE GERMANO / Christine Germano

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Yes

Name: \_\_\_\_\_

Name: MARK I. RECK / Mark I. Reck