# Understanding Service Pathways in the Treatment of Childhood Anxiety while Identifying Key Components of Parent Supported Intervention Models



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#### Introduction

- Globally and provincially, anxiety disorders are the most common mental health disorders in children and youth<sup>1,2</sup>
- Majority of children will not receive treatment for their mental health disorder<sup>3</sup>, if they do the treatment offered is often not evidence-based nor the most effective treatment method (i.e. Cognitive Behavioural Therapy)<sup>4,5</sup>
- Parental involvement in treatment for childhood anxiety is expanding, but the elements that are included in these treatment methods remain unclear compared to more traditional methodologies<sup>6,7,8,9</sup>.

#### Two Research Aims:

- Understand families help-seeking behaviours & what barriers to treatment are perceived by parents
  - Examine the therapeutic elements of parent-led intervention models

## **Methodology: Study 1**

#### Participants

- 27 parents of children 12 years of age or under exhibiting anxiety symptoms
- Resided within Southwestern Ontario
- 93% were female, identifying as the child's mother

# Procedure

- Completed an online questionnaire entitled Service Use Questionnaire
- Modified from the 2014 Ontario Child Health Study's section on Service Use with additional questions on barriers added by researchers

#### Data Analysis

- Descriptive statistics were used to describe characteristics of parents and their child
- Frequency counts were used to compare parents of children with and without a diagnoses help-seeking behaviour

# Methodology: Study 2

#### Procedure

- Scoping review was constructed using PRISMA-ScR guidelines
- Keywords were inputted into 3 databases; PsycINFO Ovid, PubMed, & Cochrane Library
- Inclusionary criteria: children 13 & under, parental component, anxiety primary target, published after 2000, English
- Exclusionary criteria: parental component unclear/missing, comorbid diagnosis of neurological disorder, therapist-child interaction
- After screening 74 results, 7 studies were included in final analysis

#### Data Analysis

The charting framework outlined by Arksey and O'Malley<sup>10</sup> was used to extract information on each intervention

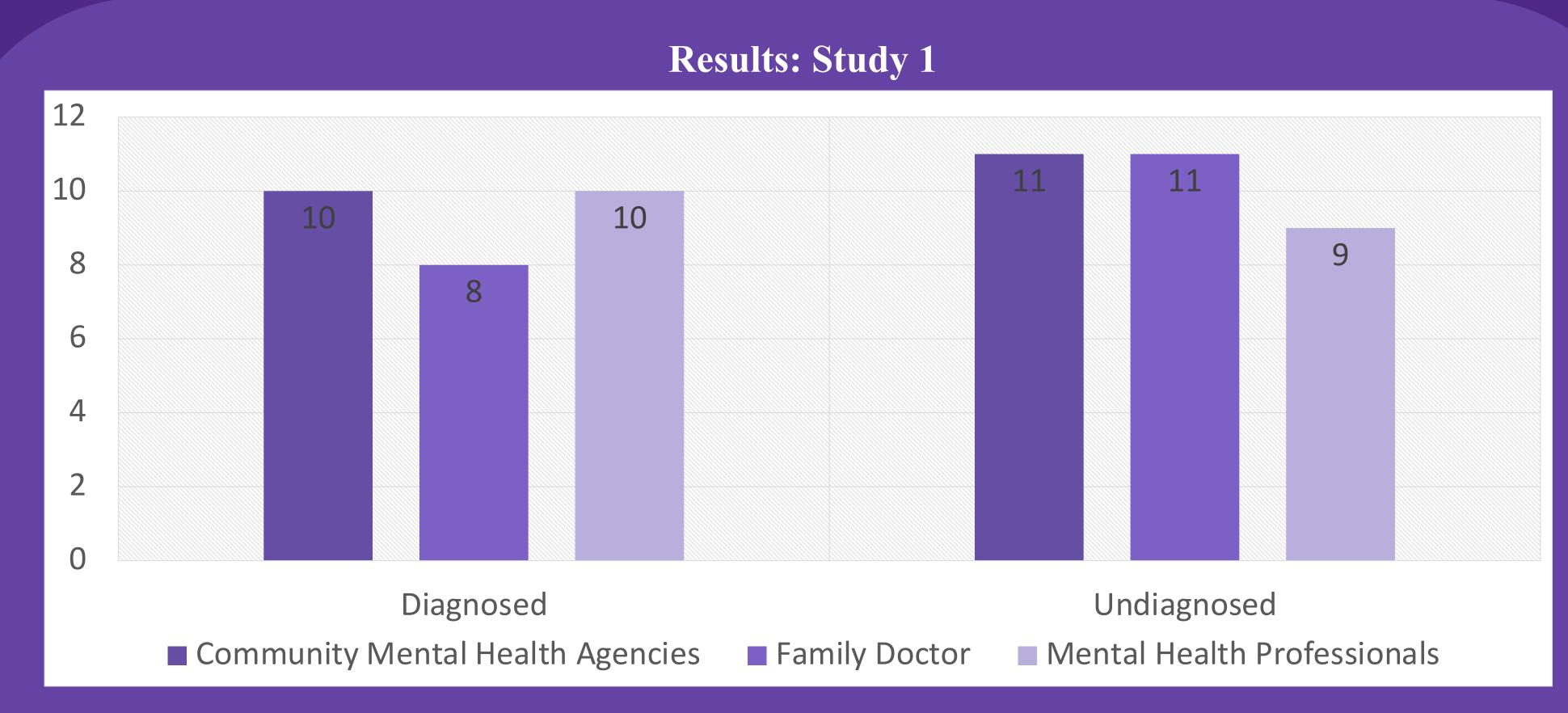


Figure 1. The top three service providers accessed by families in Southwestern Ontario and corresponding number of families who indicated accessing services in the past 6 months

#### Satisfaction Ratings

• Family doctors were rated as less helpful for families of children without a diagnosis when compared to the satisfaction ratings of families of children with a diagnosis

#### Barriers to Seeking Help

- Parents did not know where to get help
- Parents thought they could manage the symptoms themselves

#### Results: Study 2

Article & Date	PSYC ED (1)	EXP (2)	RLX (3)	PS (4)	PASM (5)	PP (6)	RM (7)	CT (8)	Treatment Sequence
Salari et al. (2018)	X	Х	X	Х		X	X		1,3,4,2,6,7
Hiller et al. (2016)	X	X	X	X	X			X	Condition 1: 1,8,2,4
									Condition 2: 1,8,5,2,3,4
van der Sluis et al. (2012)	X	X		X	X				1,4,2,5
Comer et al. (2012)	X	X				X			1,2,6
Lebowitz et al. (2014)	X			X*				X	1,4,8
Comer (2020)	X	X				X			1,2,6
Novick et al. (2019)	X	X		X	X		X		Condition 1: 7,2,4 Condition 2: 1,7,2,5

Table 1. Eight identified therapeutic elements and the treatment sequence of the included elements identified from the reviewed interventions

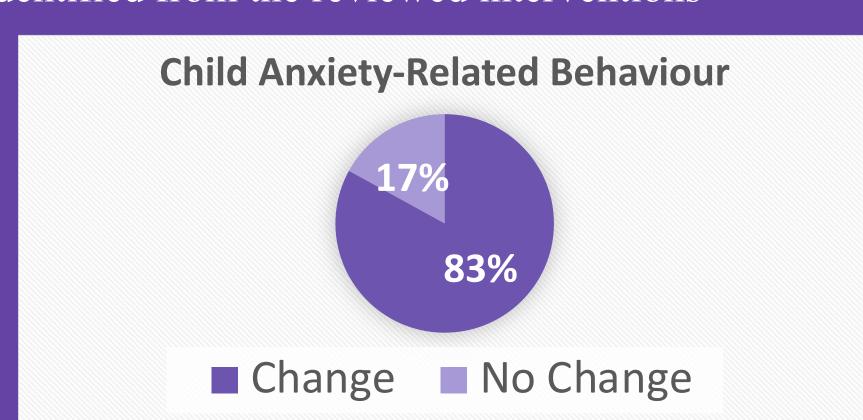


Figure 2. Interventions that reported changes in child anxiety-related behaviour

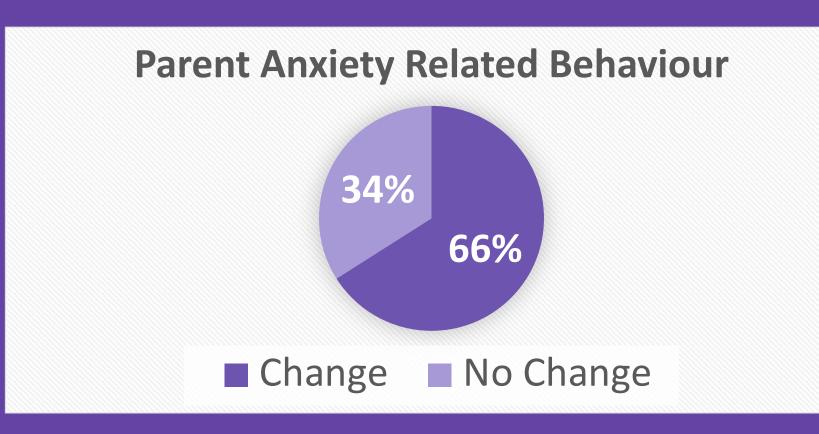


Figure 3. Interventions that reported changes in parent anxiety-related behaviour

# Diagnostic Concerns

- 86% of interventions required a diagnosis or diagnostic levels of concern Telepsychology
- Over half of the reviewed interventions included a telepsychology component

# Conclusion

#### Implications

- There are still barriers present in accessing evidence-based treatment especially for those without a formal diagnosis
- Parent-led interventions show that when parents are provided with knowledge to help them advocate, participate, and even lead the mental health care for their child they can have a positive influence on treatment for childhood anxiety Future Directions

### Future Directions

Early interventions involving parents are needed, as these could provide opportunities for children to get evidence-based support for less severe symptoms possibly combating levels of diagnostic concern later in the child's life

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