

Teen Girls and Anxiety: Programs and Interventions



Centre for
Youth & Society 

Anxiety disorders are the most common mental health disorders among youth. Every anxiety disorder subtype is more common among adolescent girls than boys.

Why This Matters

Adolescent girls with anxiety are particularly at risk for developing later problems (e.g. more severe anxiety symptoms in adulthood and chronic depression). Early intervention can reduce the likelihood of later problems and improve current functioning across multiple domains.

Key Points

- ❖ Anxiety disorders confer significant impairment in several domains of functioning (e.g. academic and familial) and cause personal distress that negatively impacts self-image (Drake & Ginsburg, 2012).
- ❖ A Finnish study found that girls had lower self-esteem, more depressive symptoms, and higher levels of social anxiety than boys. Screening for low self-esteem may help identify youth in need of an intervention (Isomaa et al, 2013).
- ❖ Cognitive behavioural therapy and relaxation response training can both help to decrease symptoms of adolescent anxiety.

What the Research Says

A U.S. study (N=10,123) found that 32% of adolescents aged 13-18 met criteria for an anxiety disorder (Merikangas et al 2010).

To prevent negative outcomes such as anxiety in adulthood, chronic depression, and substance use/abuse, treatment should be initiated as soon as possible (Sulkowski, Joyce, & Storch, 2012).

Anxiety during pregnancy can have short- and long-term implications for both mother and baby, and pregnant adolescents may experience even greater anxiety than adult pregnant women (Schiefelbein, Susman, & Dorn, 2005).

Cognitive behavioural therapy programs are effective for approximately 65% of youth. Group programs may be more effective than individual computer-based programs. (Christensen et al, 2010).

“...the consequences of early anxiety may be greater for girls than for boys” (Chaplin, Gillham, & Seligman, 2009).

What the Research Says

Universal preventative anxiety and depression interventions implemented by school staff yielded similar outcomes to those delivered by research staff. School facilitators may require some specialized training to deliver CBT interventions to youth who already manifest significant symptoms of anxiety (Mychailyszyn, Brodman, Read, & Kendall, 2012).

Programs that have had some success treating youth internalizing problems (e.g. anxiety) include CBT, TF-CBT, CARE, CRCS, EMDR, Functional Family Therapy, Seeking Safety, and Yoga for Treatment of Eating Disorders (Terzian et al, 2011).

A relaxation program, Transformative Life Skills, was used in a U.S. alternative high school setting. Students reported significant reductions in anxiety, depression, and global psychological distress (Frank, Bose, & Schrobenhauser-Clonan, 2014).

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What You Need to Know

- ❖ Cognitive behavioural therapy involves psychoeducation, challenging unhelpful thoughts, and engaging in graded exposure tasks. Exposure tasks involve intentionally putting oneself into an anxiety-provoking situation while using coping strategies.
- ❖ Relaxation training may involve any of the following: progressive muscle relaxation, mindfulness, meditation, yoga, breathing techniques, or tai chi.
- ❖ Anxious youth may withdraw from peers, leading to feelings of loneliness and isolation and lowered self-image – this may be particularly true for girls. (Chaplin, Gillham, & Seligman, 2009).
- ❖ Youth may benefit from programs tailored to their specific needs. For example, CBT non-responders may find relaxation techniques more helpful; youth with school-related dread may benefit from graduated exposure to participate in class (Nail et al, 2015)); and teen girls may benefit from interventions that increase self-esteem.

“Early identification and treatment of anxiety disorders in youth are critically important for improving functioning and protecting long-term health.”

(Mychailsyn et al 2011)