MOTHERS REPORT ELEVATED SEPARATION ANXIETY IN CHILDREN WITH CHROMOSOME 22q11.2 DELETION SYNDROME



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Chromosome 22q11.2 Deletion Syndrome

- Chromosome 22q11.2 deletion syndrome (22q11.2DS) includes DiGeorge and Velocardiofacial (VCFS) syndromes.
- Children and their families affected by 22q11.2DS experience significant stressors and anxiety during the course of their lives.
- Socioemotional development is often delayed.

Overview and Purpose

- Anxiety associated with parent-child separation is central to psychosocial development (Hock, McBride, & Gnezda, 1989).
- Experiencing a major stressor in early development, common in children with 22q11.2DS, is the most common risk factor for elevated separation anxiety (Beaton & Simon, 2011).
- Stress in children with 22q11.2DS is associated with short-term memory impairment, decrease in brain volume, and higher risk of psychosis (Sanders et al., 2016; Angkustsiri, 2014).
- We compared self- and parent-reported separation anxiety in children with 22q11.2DS and those typically developing (TD).

Hypotheses

- 1) Children with 22q11.2DS will report higher levels of separation anxiety than typically-developing controls.
- 2) Mothers will report higher levels of separation anxiety in their children with 22q11.2DS compared to their typically developing children.
- 3) Fathers will also report higher levels of separation anxiety in their children with 22q11.2DS compared to their typically developing children.

Participants and Procedure

- Children aged 7 to 16 years and their parents
- 22q11.2DS: n = 20, 10 female; mean age = 10.9 years, SD = 2.5
- <u>TD</u>: *n* = 32, 13 female; mean age = 12.2 years, *SD* = 2.4
- Multidimensional Anxiety Scale for Children, 2nd Ed. (MASC-2): Parent- and Self-Report (March, 1997)
 - Separation anxiety and phobias subscale was used for this study.

Results

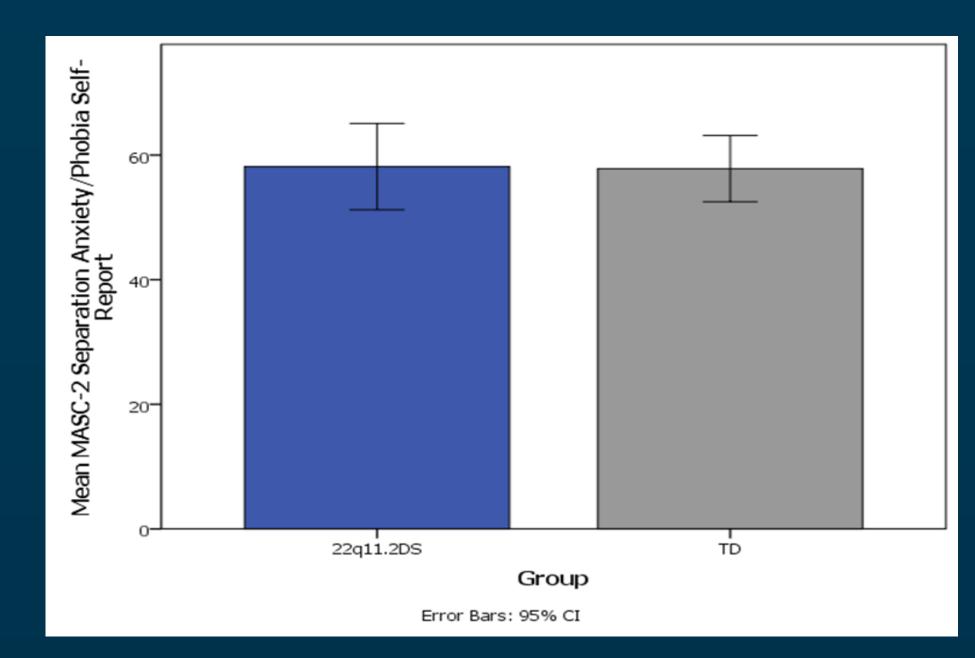


Figure 1. Mean MASC-2 separation anxiety self-report T-score by group.

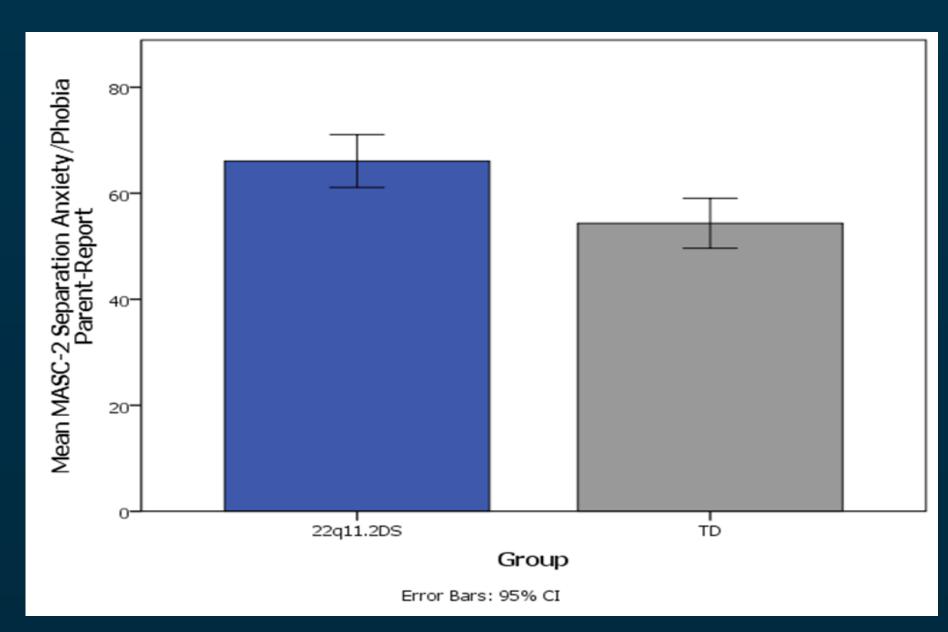


Figure 2. Mean MASC-2 separation anxiety parent-report T-score.

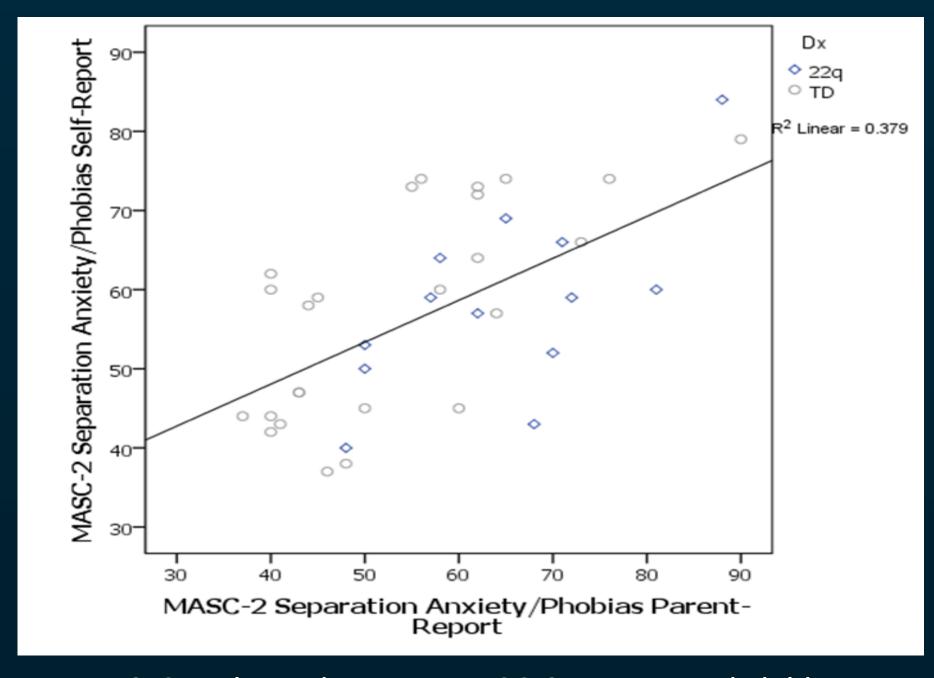
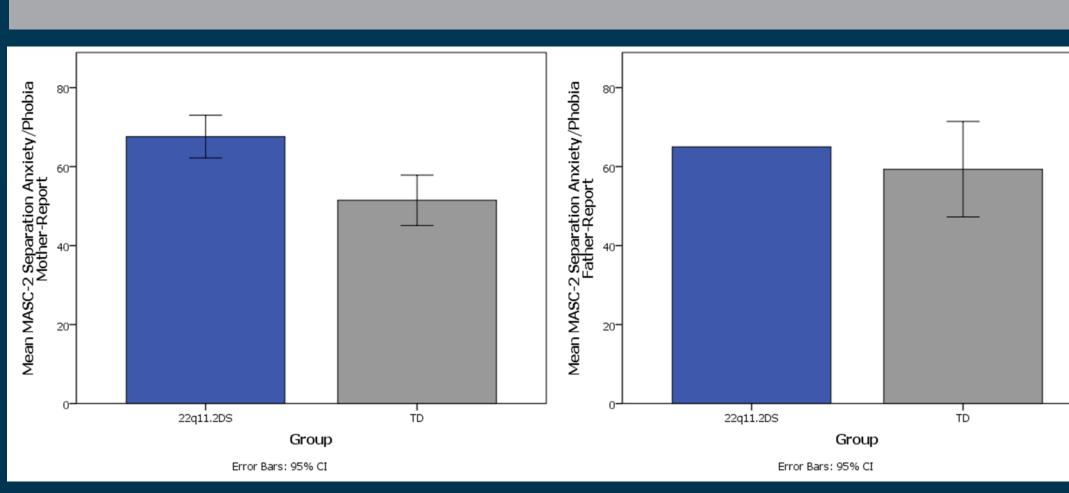


Figure 3. Correlation between MASC-2 Parent- and child self-Reports on separation anxiety.

- Children with 22q11.2DS (M = 58.15) reported similar levels of separation anxiety as their TD peers (M = 57.83): t(40) = -0.07, p > 0.05
- Parents reported higher separation anxiety in their children with 22q11.2DS (M = 66.08) versus those TD (M = 54.33): t(46) = -3.87, p < 0.001
- MASC-2 parent- and self-reports were positively correlated: r(52) = 0.62, p < 0.001

Results Continued



Figures 4 and 5. Mean MASC-2 mother- and father-reports in children with 22q11.2DS and those TD.

- Mothers reported higher separation anxiety in their children with 22q11.2DS (M = 67.60) than those TD (M = 51.47): t(37) = -4.06, p < 0.001
- Preliminary: Fathers reported no difference in separation anxiety in their children with 22q11.2DS (M = 65.00) compared to those TD (M = 59.33): t(5) = -0.46, p > 0.05

Summary and Implications

- There is no difference of <u>self-reported</u> separation anxiety between children with 22q11.2Ds and TD children.
- Independent reports by parents about their children indicate higher separation anxiety in children with 22q11.2DS.
- The difference between maternal and paternal reports on children with 22q11.2DS require further investigation.
- Preliminary findings suggest that parents' experience of their children's anxiety may differ significantly with implications for understanding the role of family in stress and development for children.
- Although very preliminary given the small sample, fathers may perceive their child's anxiety differently than mothers.
- Although parents and children appear to agree based on the positive correlation between self- and parentreports, children with 22q11.2DS may be less aware of their social behavior and anxiety.

References

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