

## Anxiety Disorders and Children

An anxiety disorder is a mental health problem that can affect people of all ages, including children. In fact, anxiety disorders are the most common type of mental health disorder in children, affecting as many as ten percent of young people.

All children experience some anxiety; this is normal and expected. For example, when left alone at preschool for the first time, many children will show distress; a young child with his or her own room may develop a fear of the dark. Such anxiety becomes a problem when it interrupts a child's normal activities, like attending school and making friends or sleeping. Persistent and intense anxiety that disrupts daily routine is a mental health problem that requires intervention.

### What Are the Most Common Anxiety Disorders in Children?

#### Generalized Anxiety Disorder

Children with generalized anxiety disorder (GAD) have recurring fears and worries that they find difficult to control. They worry about almost everything—school, sports, being on time, even natural disasters. They may be restless, irritable, tense, or easily tired, and they may have trouble concentrating or sleeping. Children with GAD are usually eager to please others and may be “perfectionists,” dissatisfied with their own less-than-perfect performance.

#### Separation Anxiety Disorder

Children with separation anxiety disorder have intense anxiety about being away from home or caregivers that affects their ability to function socially and in school. These children have a great need to stay at home or be close to their parents. Children with this disorder may worry excessively about their parents when they are apart from them. When they are together, the child may cling to parents, refuse to go to school, or be afraid to sleep alone. Repeated nightmares about separation and physical symptoms such as stomachaches and headaches are also common in children with separation anxiety disorder.

#### Social Phobia

Social phobia usually emerges in the mid-teens and typically does not affect young children. Young people with this disorder have a constant fear of social or performance situations such as speaking in class or eating in public. This fear is often accompanied by physical symptoms such as sweating, blushing, heart palpitations, shortness of breath, or muscle tenseness. Young people with this disorder typically respond to these feelings by avoiding the feared situation. For example, they may stay home from school or avoid parties. Young people with social phobia are often overly sensitive to criticism, have trouble being assertive, and suffer from low self-esteem. Social phobia can be limited to specific situations, so the adolescent may fear dating and recreational events but be confident in academic and work situations.

#### Obsessive-compulsive Disorder

Obsessive-compulsive disorder (OCD) typically begins in early childhood or adolescence. Children with OCD have frequent and uncontrollable thoughts (called “obsessions”) and may perform routines or rituals (called “compulsions”) in an attempt to eliminate the thoughts. Those with the disorder often repeat behaviors to avoid some imagined consequence. For example, a compulsion common to people with OCD is excessive hand washing due to a fear of germs. Other common compulsions include counting, repeating words silently, and rechecking completed tasks. In the case of OCD, these obsessions and

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# What You Need to Know...



compulsions take up so much time that they interfere with daily living and cause a young person a great deal of anxiety.

## **Post-traumatic Stress Disorder**

Children who experience a physical or emotional trauma such as witnessing a shooting or disaster, surviving physical or sexual abuse, or being in a car accident may develop post-traumatic stress disorder (PTSD). Children are more easily traumatized than adults. An event that may not be traumatic to an adult—such as a bumpy plane ride—might be traumatic to a child. A child may “re-experience” the trauma through nightmares, constant thoughts about what happened, or reenacting the event while playing. A child with PTSD will experience symptoms of general anxiety, including irritability or trouble sleeping and eating. Children may exhibit other symptoms such as being easily startled.

## **What Can Parents and Caregivers Do?**

By identifying, diagnosing and treating anxiety disorders early, parents and others can help children reach their full potential. Anxiety disorders are treatable. Effective treatment for anxiety disorders may include some form of psychotherapy, behavioral therapy, or medications. Children who exhibit persistent symptoms of an anxiety disorder should be referred to and evaluated by a mental health professional who specializes in treating children. The diagnostic evaluation may include psychological testing and consultation with other specialists. A comprehensive treatment plan should be developed with the family, and, whenever possible, the child should be involved in making treatment decisions.

## **Additional Resources**

American Academy of Child and Adolescent Psychiatry, [www.aacap.org](http://www.aacap.org)

American Psychiatric Association, 888-357-7924, [www.psych.org](http://www.psych.org)

American Psychological Association, 800-964-2000, [www.apa.org](http://www.apa.org)

Anxiety Disorders Association of America, 240-485-1001, [www.adaa.org](http://www.adaa.org)

Children and Adults with Attention Deficit/Hyperactivity Disorder, 800-233-4050, [www.chadd.org](http://www.chadd.org)

Federation of Families for Children’s Mental Health, 703-684-7710, [www.ffcmh.org](http://www.ffcmh.org)

Freedom From Fear, 888-442-2022, [www.freedomfromfear.com](http://www.freedomfromfear.com)

Obsessive-Compulsive Foundation, 203-401-2070, [www.ocfoundation.org](http://www.ocfoundation.org)

Head Start Mental Health Resources, 866-763-6481, [www.headstartinfo.org](http://www.headstartinfo.org)

Knowledge Exchange Network, 800-789-2647, [www.mentalhealth.org](http://www.mentalhealth.org)

National Association of School Psychologists, 301-657-0270, [www.nasponline.org](http://www.nasponline.org)

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