

Anxiety Disorders and Kids



Anxiety disorders affect people of all ages. And they are the most common type of mental health disorder in children, affecting as many as 10 percent of young people.

All children experience some anxiety. For example, when left alone at preschool for the first time, many children will show distress. But anxiety becomes a problem that requires intervention when it interrupts a child's normal activities, like attending school, making friends or sleeping.

What Are the Most Common Anxiety Disorders in Children?

Generalized anxiety disorder—Children with 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 this disorder have intense anxiety about being away from home or caregivers, which 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. They 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 common.

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, and typically respond by avoiding the feared situation. They are often overly sensitive to criticism, have low self-esteem and trouble being assertive. Their fears are often accompanied by physical symptoms such as sweating, blushing, heart palpitations, shortness of breath or muscle tenseness. Social phobia can be limited to specific situations, so the adolescent may fear dating, recreational events and parties but be confident in academic and work situations, for example.

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. Common compulsions among people with OCD are excessive hand washing, counting, repeating words silently, and rechecking completed tasks. These obsessions and compulsions take up so much time that they interfere with daily living and cause 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 PTSD. Children are more easily traumatized than adults. 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, and may also be easily startled.

What Can Parents and Caregivers Do?

Anxiety disorders are treatable. By identifying, diagnosing and treating anxiety disorders early, parents and others can help children reach their full potential. 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 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.

To learn more, contact your local Mental Health Association or the National Mental Health Association at 800-969-NMHA (6642), or visit www.nmha.org.

