

# Anxiety in Children and Youth: Information for Parents and Caregivers



Image credit: Adobe Stock

**Summary:** It is natural for children to have various fears, but when those fears become so excessive that it starts causing physical symptoms and getting in the way of school and relationships, then it may be an anxiety problem.

## Does Your Child Have..

Does your child have any of the following:

- Gets fearful or worried about leaving the home, e.g. school or activities?
- Require a lot of reassurance to calm down?
- Fears that are so extreme, that it gets in the way of life?

## Introduction

Dylan is afraid of the dark. Tricia hates to eat in front of other people. Eric becomes sick to his stomach and throws up if he has to speak aloud in class.

Life is stressful. It is normal to have fears and worries. Being worried about things can help us prepare for potential dangers. E.g. being worried about failing a test helps us study for a test.

However, when those worries are so severe that they they get in the way of life, it may be an anxiety disorder.

People with anxiety usually have:

- Worries and fears (depending on the type of anxiety they have)
- Physical symptoms (e.g. headaches, stomachs)
- Problems functioning due to their severe anxiety.

## How Common are Anxiety Disorders?

Anxiety disorders are the most common mental health condition in children and adults. Roughly 6% of children and youth have an anxiety disorder that is serious enough to require treatment.

## What Causes Anxiety Disorders?

---

There are many things which can contribute to a child developing anxiety:

- **Genetics:** Some children are simply wired to be more sensitive. Especially if parents have anxiety, then your child will be at a higher risk. The good news, is that this means parents hopefully will have more sympathy and understanding on how to support their child.
- **Stresses in life:** Everyone has a 'stress bucket' that fills up with stresses in their life. When a child has to face too many stresses (e.g. parental separation; bullying; school stress; peer stress; trauma, etc.), or lacks the support of parents and family, this can add to anxiety.

## Types of Anxiety Disorders

---

### **Separation Anxiety Disorder.**

**Red flags:** Is there distress separating from parents or caregivers? If so, it may be separation anxiety disorder. It is natural for infants and younger children to be fearful of leaving parent, as this is developmentally normal. But if an older child continues to have extreme fear, this is no longer helpful.

**Symptoms:** The child may refuse to go to school; have troubles sleeping without parents; have nightmares about being lost or kidnapped.

### **Generalized Anxiety Disorder (GAD)**

**Red flags:** Are there many worries about many different things? Are these worries excessive, and hard to control? If so, it may be generalized anxiety disorder.

**Symptoms:** Multiple worries and fears about many areas.

### **Social Phobia (aka Social Anxiety Disorder)**

**Red flags:** Is there extreme shyness? Does the shyness lead to avoidance of social situations (e.g. speaking in public, eating in front of others, asking questions in class, etc.)?

**Symptoms:** Extreme fear, distress and embarrassment with social situations. Physical symptoms include blushing extremely easily.

### **Selective Mutism**

**Red flags:** Is the child able to speak in certain safe situations (e.g. at home), but unable to speak in social situations outside the home (e.g. school, doctor's offices, etc.)?

**Symptoms:** The child's alarm system is so sensitive that the child does not feel safe speaking in front of other people. Typically the child is able to speak with parents, but not to other adults. When they know they are going to have to speak, these children may blush, look down, or withdraw. When they do communicate in such situations, they may point or use other gestures, or whisper rather than talk. Some children may "outgrow" the condition but their anxiety persists as social anxiety.

### **Obsessive-Compulsive Disorder (OCD)**

**Red flags:** Are there obsessions (e.g. worries about being contaminated?) Are there compulsions (i.e. repetitive habits such as hand washing, cleaning)?

**Symptoms:** Children and young people with OCD have frequent, distressing thoughts ("obsessions"), e.g. worries about being dirty or contaminated with germs. They may have a need to perform certain routines or rituals ("compulsions") in order to feel better, e.g. washing their hands over and over again. The obsessions and compulsions cause distress, and can take up so much time that the young person can't lead a normal life.

## Panic Disorder

Red flags: Are there sudden bursts of extreme anxiety out of the blue?

Symptoms: Usually happens in teenagers as opposed to children. Symptoms are the body's alarm ("fight / flight" system) going off. A surge of adrenaline in the brain leads to thoughts of feeling in danger, along with physical feelings of shakiness, dizziness, shortness of breath. The symptoms are so distressing that often people try to avoid situations where they have had a panic attack. For example, a youth who has had a panic attack at school may start avoiding school in an attempt to avoid having panic attacks.

## Post-Traumatic Stress Disorder (PTSD)

Red flags: Has the child been through a stressful experience? Examples include life threatening experiences, but can also include repeated stressful experiences such as bullying.

Symptoms: Jumpiness, muscle tension, being overly aware of one's surroundings (hypervigilance), nightmares and other sleep problems. Children and young people with PTSD sometimes also report feeling like they are "re-living" the traumatic experience. There can be "flashbacks" that include vivid memories of the triggering event(s), which may involve physical, emotional or sexual abuse.

## What Parents Can Do

Do's

- Accept that you have a sensitive child, with a sensitive alarm system that becomes easily triggered to make them feel in danger. In order to support your child, do things that will help your child feel safe.
- Provide unconditional validation. First, ensure that your child feels comfortable to express their fears, worries or any other distressing feelings to you. Validate those concerns. Do not minimize them. If a child feels that they can safely come to a nurturing adult for their worries, it helps them deep down feel a bit safer about the world.
- Ensure your child has a healthy lifestyle with:
  - Healthy nutrition.
  - Daily time outside in nature, along with physical activity.
  - Good sleeping habits (8-11 hrs /day)
  - Limits on screen time, i.e. no more than 1-2 hrs/day of recreational screentime (entertainment videos, video games) for a school-aged child.
- Thank your child for doing the best they can. If they are able to face a challenge, just say "Thank you." Try to avoid using praise, as many anxious kids are actually insecure with praise. Although praise is positive judgment, it is still judgment. Deep down, insecure people don't really want judgment, i.e. conditional approval -- they want unconditional approval.

For example, imagine your anxious child does something difficult. It is tempting to say, "Good job for \_\_\_!" But for an anxious child, that can lead to pressure -- they may worry, "What if I don't do \_\_\_? Have I disappointed my parent?" Instead, just say, "Thank you for \_\_\_. I know it wasn't easy. Thank you for trying." If you really want to praise, use "I statements" like, "I am so proud of you. I am so lucky to have a child like you, etc."

- Manage your own anxieties. Be a model for your child and show him how you do everyday things without being fearful or anxious. Do seek professional help if you need help for your own anxiety.
- Avoid the avoidance. Instead of avoiding the issue that is causing fear or anxiety, reinforce exposure. If your child is afraid of spiders, you can start to read a book about spiders. If your child is afraid of speaking out in front of a group, perhaps he can talk about his favourite toy at the next family gathering. Give your child

opportunities to work through his fear, by reinforcing exposure and allowing small victories along the way.

- Teach your child positive "self-talk". Like the little engine that could, teach your child to repeat a positive phrase that will help her face her fear. "I know I can do this" or "I'm brave and I'm not afraid" can help them be strong when they are feeling afraid or anxious. Or self-compassion, such as "I am anxious. Its okay to feel anxious. A lot of people feel anxious. Its part of being human."
- Teach your child to imagine being in relaxing or pleasant places, places where they feel safe. Distraction can work wonders when trying to deal with anxiety-provoking situations. Children can also learn how to manage anxiety by learning how to calm their breathing and how to reduce tension in their muscles; techniques for learning these are easily available through the Internet (see websites below).

#### Don'ts

- Don't do things that would make your child feel unsafe. Children can begin to feel insecure and anxious if there is conflict between their parents. Difficult conversations between spouses should happen when children are not present.
- Don't get emotionally overwhelmed in front of your child, e.g. break down crying, yell or shout or scream. If you are feeling overwhelmed, do take some time to chill out and go somewhere quiet (e.g. bathroom, a quick walk outside, to the corner store for milk, etc.)

## Where to Get Help

---

Despite your best efforts to help your child cope with his fears and anxiety, there may come a time when your child's thoughts and feelings begin to overwhelm him to such an extent that you do not feel that you can handle it on your own.

Here are some things you can do about it:

- Talk to your child's teacher and other adults (coaches, instructors) who are interacting with your child. There might be an issue you are not aware of.
- Learn more about anxiety through books or websites.
- Contact your family doctor or pediatrician. It might be time for a check up and a good time to talk about what is causing these symptoms in your child. Your physician can help you to decide if your child should see someone, such as a child psychologist, to help him/her deal with her fears and/or anxiety.

## How is Anxiety Treated by Professionals?

---

When you see a mental health professional, they will start by doing an assessment to better understand your child's anxiety. If they recommend treatment, examples of anxiety treatments include:

- Psychotherapies such as
  - Cognitive behavioural therapy (CBT)
  - Mindfulness-based therapies
  - Advantages of psychotherapy is that it teaches practical life skills that a person will remember for a very long time.
  - Disadvantages of psychotherapy are that it can be challenging finding a provider, and it also takes a lot of effort for psychotherapy which can be hard if someone's anxiety is very severe.
- Yoga / meditation
  - Deep breathing, mindfulness, and other features found in yoga and meditation can be calming and soothing for the nervous system, thus providing a natural antidote for anxiety.
  - Advantages is that yoga and meditation are generally readily available.
  - Disadvantages are that for more severe issues, it may be insufficient.

- Medications:
  - If a child/youth does not respond to talking therapies such as CBT, then medications such as selective serotonin reuptake inhibitors (SSRIs) can be helpful. They help regulate important brain chemicals, namely serotonin.
  - Advantages of medications are that they can be useful if the anxiety is so severe that other strategies haven't worked.
  - Disadvantages of medications are that they can have side effects.

## About this Document

---

Written by the health professionals at the Children's Hospital of Eastern Ontario (CHEO). Special acknowledgements to Don Buchanan, McMaster Children's Hospital; Dr. Anand Prabhu, Psychologist, Ottawa.

## Disclaimer

---

Information in this pamphlet is offered 'as is' and is meant only to provide general information that supplements, but does not replace the information from your health provider. Always contact a qualified health professional for further information in your specific situation or circumstance.

## Creative Commons License

---

You are free to copy and distribute this material **in its entirety** as long as 1) this material is not used in any way that suggests we endorse you or your use of the material, 2) this material is not used for commercial purposes (non-commercial), 3) this material is not altered in any way (no derivative works). View full license at <http://creativecommons.org/licenses/by-nc-nd/2.5/ca/>