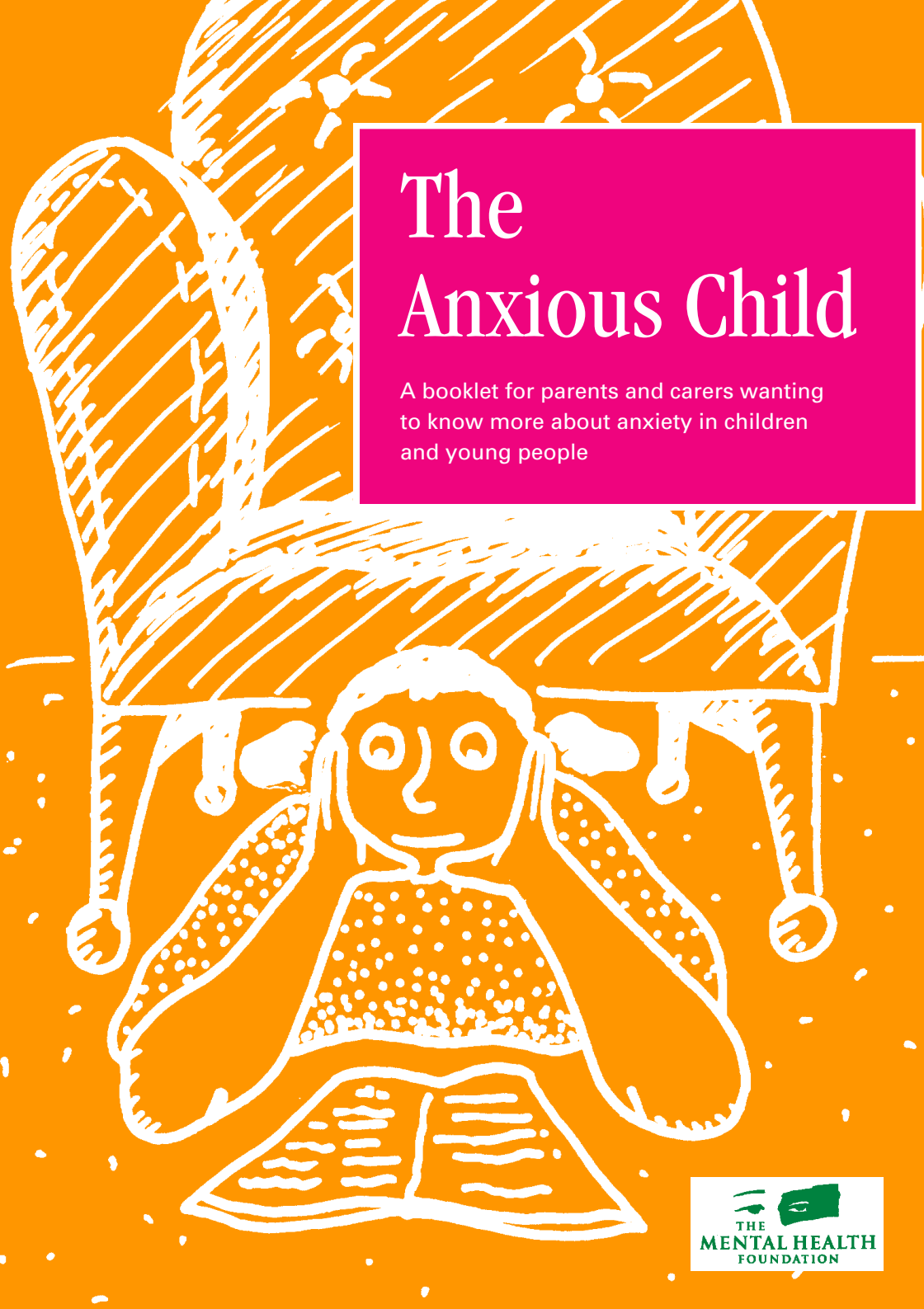


The Anxious Child

A booklet for parents and carers wanting to know more about anxiety in children and young people

THE MENTAL HEALTH FOUNDATION

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THE MENTAL HEALTH FOUNDATION

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What do we mean by anxiety in children, and should parents be concerned about it?

Many parents are unsure about when their child's behaviour is something for them to worry about, or whether it is fairly typical behaviour for children of that age. Many parents are not sure whether to be concerned when a usually talkative 8 year old becomes withdrawn and pre-occupied, when an 11 year old feels sick every school morning or when an adolescent suddenly begins to refuse to leave their room.

It can often appear like a minefield for parents, trying to find out whether their child's behaviour is expressing real worry or unhappiness, and if so, to understand what is behind it.

For many years it was believed that children did not experience depression or anxiety, and that those who appeared to were merely malingering or attention seeking. This is no longer the case. It is now widely accepted that as many as 8 - 11% of children and adolescents suffer from an anxiety that affects their ability to get on with their lives.

So what are anxiety disorders amongst children, what are they caused by and how can parents help children who are affected?

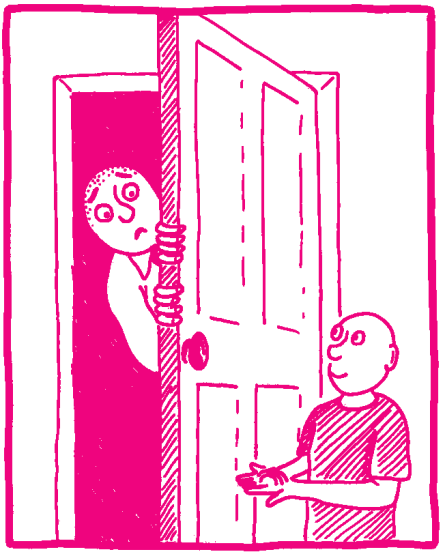
Section 1

Children and their emotions

All children, of whatever age, experience powerful emotions. The world of young children can be a frightening and uncertain place, as can that of adolescents, who are facing a time of rapid physical and emotional change.

Many parents can remember times in their own childhood when they were very frightened, anxious, miserable or worried. Such feelings are part of growing up, and confronting the many changes being presented to us throughout childhood.

Children are sensitive to what happens around them, and young children in particular can feel that it is their fault when things go wrong at home (such as parents becoming ill). This makes them feel worried and guilty. Part 2. of this leaflet, examines the range of issues that can lead to children and young people becoming anxious.



Not all children's emotions are logical. Small children ordinarily have fears about the dark, insects, ghosts, kidnappers and getting lost or abandoned. Such fears

are common and normal in all young children. Usually children grow out of their fears but sometimes they persist as the child grows up - there are plenty of adults who are anxious about spiders or dogs. Only when such fears stop your child doing ordinary activities is there real cause for concern.

Anxiety in young children

Children can develop fears and phobias at any age, but they are especially common during early childhood, and again during puberty. Infants can appear to be upset, to be irritable and sleepless, but in very small children, such behaviour is more likely to be caused by hunger, cold, and physical diseases than anxiety.

The situation is not so clear cut as children get a little older. Certainly, it may appear to many parents of toddlers that their children are overly anxious or clinging. All toddlers express distress at being separated from their carers, along with occasional sleeplessness. Parents can help their children by offering them reassurance that everything is alright.

It might feel as if your child clings excessively. Some children are naturally more timid and anxious than others, and for them the stress of new experiences is greater than for other children. However in time this behaviour will usually pass.

For other children, however, excessive clinging is a sign that they are extremely anxious. It is important when deciding what is excessive clinging in your child to take into account their nature, as well as what is happening within the child's immediate environment. However, if your child clings so much that they are unable to play with other children, if they are unable to sleep alone, or be in a different room from you, this might indicate that they are overly anxious.

Parents may worry that other behaviours in young children indicate that they are insecure or worried. However, often these are exactly the opposite. For example, many young children constantly carry comforting pieces of blanket or favourite toys. They do not indicate insecurity and there is nothing to be gained by removing a young child's comfort object, in fact there are grounds for thinking that children who have comfort objects are better able to cope than those who do not develop the habit.

There are a number of things that parents can do to help children get through this stage of development.

- try to make sure that small children get a wide range of experiences, particularly meeting people outside the home and playing with other children.
- try and ensure that your child is able to make their own decisions over small things - this will help them grow in confidence.



- help children to learn how to fall asleep on their own when they have a nap in the afternoon as well as at night. Make their bedroom a nice place to be, with a night-light. Keeping

to a regular bedtime is often beneficial, as is a set routine of getting children into bed. Explain what you want them to do (lie quietly in bed waiting to fall asleep; they can't fall asleep by will-power), return to their bedroom at regular intervals to comfort them if necessary but leave the room before they fall to sleep and praise them for lying in bed quietly.

- try to make sure they spend at least a day away from home and parents before starting school. By experiencing such a separation they will be less apprehensive about having to spend time away from home.
- try and ensure that you are not always worried and anxious. Bringing up children can be stressful, but, if your child feels that you are always worried, they are more likely to be anxious themselves. Remember to take time out for yourself - to relax.

If you feel that your child is over-anxious, section 3 of this leaflet, sets out where you might go for help.

School age children

Like young children, some school age children can become over-anxious. This can be a real concern for parents and professionals working with them. Signs of anxiety in children of this age include children who:

- are extremely shy, timid and clinging
- have real difficulties mixing with other children
- have difficulty getting off to and staying asleep
- have repeated nightmares (more than one a week)
- have repeated complaints of headache or tummyache

- are constantly asking if things are all right or other ways of asking for reassurance

Some children will have panic attacks in which they feel that it is difficult to breathe and that they are going to die.

Anxious children can be irritable and demanding. They can also be a source of extreme worry for parents. In addition to this, it often takes a great deal of patience for parents to see that behind the difficult behaviour there is anxiety and uncertainty. Many parents will respond angrily to their children's behaviour, when what the children want is for their parents to be calm, to know exactly how they are feeling and why. If parents seem not to understand, children can feel that the parents are ignoring their feelings on purpose, which can in turn exacerbate their difficult behaviour. It is important for parents to try and talk calmly to children about the things that are worrying them, and to reassure them whenever possible.

Teenagers

The teenage years can be a fraught time for adolescents and parents alike. It is a time of rapid physical development and emotional change and this can be very uncomfortable. Signs of anxiety amongst adolescents might be revealed through over-eating or under-eating, excessive sleepiness, and over-concern with appearance. Some adolescents will experience phobias and panic attacks may occur. For the majority of young people the feelings of uncertainty, turmoil and unhappiness that are all part of adolescence, do not mean that they will go on to develop more serious problems. However, for a minority of adolescents, specialist help may be necessary.

Parents can play an important role in helping their children through this difficult time. Strategies that parents can develop include:

- setting clear ground rules for the young person - these should be reasonable and become less restrictive as older children become more responsible.
- be prepared to really listen to your child - adolescents are much more likely to confide in you and trust you if they feel that you will respond to their worries and not automatically criticise them.
- find support for yourself - many parents feel rejected by their adolescent offspring and are uncertain how to support them. Talking to other parents and to your partner can make you feel less isolated.

When the young person's anxiety is such that it is causing them prolonged distresss or it is interfering with their lives; stopping them going out with friends, having relationships or hobbies, for example, then you might want to consider asking for professional help. For further information on where to go for help, see Section 3.

Section 2

Why do children become anxious ?

Reasons for being generally anxious

There are a range of reasons why children and young people become anxious. In most cases, when children are extremely anxious there is a very real cause to this; perhaps they are having difficulties at school, (for example) being bullied. Anxiety can also have no apparent cause, but be very real in its own right, and cannot be overcome by will-power. However,

attempts to get children to master their anxiety by telling them "not to be so silly" will fail.

Below are a number of reasons why children and young people might become anxious.

- a temperamental disposition. Anxiety can run in families. There is a genetic predisposition to some children being anxious.
- physical illness or disability
- family problems
- school worries
- problems with friends and activities out of school.

Physical illness and disabilities

Being physically ill may cause children to become anxious. For example, if a child has a severe asthma attack, fears of dying may be aroused, or overprotective attitudes by parents or carers may be provoked.

Children and young people with physical disabilities may be caused a great deal of anxiety as a result of other children's responses to them.

Reasons within the family

Rows between parents

Young children feel insecure and threatened when they hear

their parents rowing, especially when children hear threats by one parent to hurt the other, or to leave home, or when they overhear insults which they do not know whether to believe.

Many parents, when faced by an unsympathetic partner, turn to their children, for support and a listening ear. This can be destructive for the child, placing them in an impossible situation and often resulting in the child feeling extremely anxious.

During and after a row parents are angry and unlikely to be able to comfort their child. Either parent may be upset at a time when their child needs them. The parent may push them away, which can confirm the child's sense of guilt at being somehow to blame.

Recent parental divorce

Parental separation and divorce is usually painful and distressing for children They continue to love the parent who leaves the home and cannot understand why their parents cannot live together. The child may think that it is their fault that their parents have separated, and this, in addition to divided loyalties between the parents, can result in the child feeling very insecure and anxious. It is important for parents who divorce to tell their children that they will not be abandoned, and that the divorce is not their fault. It is also important not criticise the other absent parent in the children's hearing or ask the children to take sides.



Parental illness

If a parent is ill, young children may also assume that this is their fault. Children readily think that the illness is because of something they thought or did (or didn't do).

Some children start to think that they should be ill or die themselves instead of their parent. This sort of thinking is very private and children do not talk about it easily. It is often wise to answer children's questions about illness in a factual but not overly detailed way and take the opportunity to state that its cause was nothing to do with them.

Parents seeking reassurance from their children

A few anxious parents ask their children for reassurance that they are loved by them, that they are doing the right thing, or that their children will never leave them in later life. This places a huge burden on children who easily come to believe that they are responsible for their parents' state of mind. Parents should reassure children, not the other way round.

Parents using excessive threats to control their children

Managing children's behaviour is difficult. Clear instructions and the use of praise, coupled with clear limits to bad behaviour such as sending children to their room or withdrawing privileges, are usually sufficient. However, a few parents find that these are too difficult or are insufficient and resort to issuing wild threats. After a while most children discover that these are bluff and the harassed parent makes the threats more terrifying. When these involve threats of abandoning the child ("I'll put you in a home"..... "I'll just go away one of these days...") children can become seriously anxious. This can result

in making them feel irritable so that they offend the parent more and the threats intensify. Positive disciplining, giving encouragement to the child's good behaviour and not constantly highlighting the bad, can be a much more effective way of promoting the desired behaviour and increasing your child's confidence.

Reasons at school

Troubles with other children

Bullying, rejection and teasing are widespread in schools. It can sometimes be difficult for adults to understand the distress and misery bullying causes, especially if the bullying is "only" teasing and name-calling. But being persistently teased can make children very unhappy. It can lead to low self esteem, with the child feeling that they deserve to be bullied. It can also lead to problems in later life. Some adults who were bullied as children find that they often get depressed, lack self-confidence and feel resentful.

There are positive steps that schools can take to stop bullying. Effective ways include the school making it clear that all pupils have a right not to be bullied, encouraging pupils that is not wrong to "tell" and that when bullying occurs measures will be taken to stop it.

Parents too can play an important role in supporting children who have been bullied; by listening to what the child is saying about their experiences and believing them, and by working with them to re-build their sense of self esteem.



Troubles with school work

Children can become extremely depressed as a result of unattainable academic expectations that they feel teachers or parents have of them. For example consistent low achievement, or a fear of failure can lead to a child fearing rejection from parents and friends and becoming extremely anxious. Constant encouragement and support is the best way of encouraging children to fulfil their potential.

Troubles with teachers

Some teachers and children just do not hit it off. If you think that your child is being treated unfairly by a teacher, take it up with that teacher but not in a confrontational way. Parents do not always realise that children can be very different at home than at school.

Reasons outside home and school

There are a host of things which children, especially teenagers can get anxious about. Worries about girl- and boy- friends are near the top of the list. Anxieties about getting into trouble with authorities such as the police sometimes feature. If parents have managed to keep talking to their children then it is more likely that they will ask for their help with anything which is worrying them.

Specific fears

It is common sense that a child may learn to fear something because of a frightening experience. More perplexing are the irrational phobias which some children develop. Mostly these are severe forms of the common fears which affect many young children, but in the teens more complicated fears can develop. When these cannot be reasoned away and prevent someone from carrying out ordinary activities they are called phobias. Several characteristic patterns of phobias are recognised in children and teenagers.

Social phobia

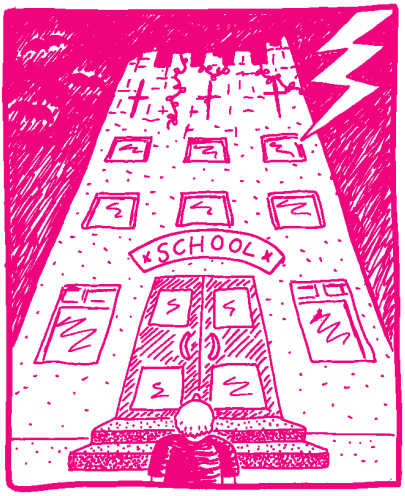
It is not uncommon for teenagers to be shy, but if a fear of talking or eating in public or of being looked at becomes so strong the young person cannot face other people at all, then a phobia has developed.

Agoraphobia

Just as with adults, some teenagers (but not young children) come to fear open space, waiting in queues, and brightly lit public places. This may stop them being able to attend school, or take part in social activities.

School phobia

Many children are fearful of starting a new school but get over their anxiety within a few days of actually attending. A few children, however, develop a powerful fear of attending school and find themselves unable to leave home and to go school - even though they may have said they intend to go. This often becomes an issue after a child has been off school for a while, for example as a result of a lengthy illness.



Obsessions

Anxious repetitive thoughts that crowd the mind and are difficult to get rid of (even though the person knows they are senseless) are obsessions. Often they give rise to compulsive rituals such as counting, hand-washing or cleaning, which are intended to ward off such thoughts or deal with the anxieties that they produce. For instance, children may feel they have to say good night nine times or they might die in their sleep. These obsessive rituals can be unpleasant and severe, much more distressing than the simple rituals that children put into

their games. Their cause is not known but it is now recognised that they are not as uncommon in childhood as was once thought.

Eating disorders

A frequent cause of stress for many young people, and also increasingly for children, is their appearance and the desire to be thin, resulting in many children and young people experimenting with diets or refusing to eat certain foods. For some young people, a difficult relationship with food can become a serious eating problem that can have a damaging effect on physical and emotional health.

Anorexia nervosa

Children and young people with anorexia nervosa have an extreme fear of normal body weight and feel fat, even when they have lost a great deal of weight. The young person may starve themselves by eating only tiny quantities of food, many may also take quantities of laxatives and may exercise vigorously in order to lose more weight. Anorexia affects many more girls than boys, although boys do suffer from this too.

Bulimia

Bulimia tends to affect slightly older people, although adolescents can suffer from it. People with bulimia gorge themselves with food in "binges" and then make themselves sick to get rid of the food. They may also take large numbers of laxatives. They may not look overweight or underweight, which can make their eating problems difficult to detect. Continuous bingeing and vomiting can eventually do serious harm to the body.

As well as having a serious effect on a young person's physical health, eating disorders are often a sign that something is

troubling them emotionally. They may be linked to unhappiness at home, pressures at school or major changes to family life.

Self-harming behaviour

Another worrying sign of distress and depression amongst young people is self-harming behaviour. Young women are twice as likely to self-harm as young men. The most common form of self-harming behaviour is cutting but it can also include bruising, scraping, burning or other self-inflicted wounds. These injuries can release feelings of self-hatred, anger and anxiety, and can provide a means of self-punishment or of taking control. It used to be believed that self-harming behaviour was "attention seeking", however there is now a greater understanding of the underlying problems and low self-worth associated with self-injury. Help should be available to all young people who self-harm, both immediately following episodes of self-harming and follow up help. This is especially important as a number of young people who self-harm do also attempt suicide.

Suicide

Suicide amongst 15-24 year old young men increased by 85% from 1980 to 1990. A variety of causes are seen to be responsible for this: fear of unemployment, an increase in drug use, having parents with marital problems or inconsistent parental discipline, and crises in relationships.

Young people who reveal suicidal behaviour or thoughts should receive medical help, initially from the General Practitioner but also more specialist help. In addition to this, the young people should receive social support, this might include support from a social worker or a support group. Parents have a key role to play as well, encouraging the young person to talk about their difficulties and discuss with them ways of coping in difficult circumstances.

Section 3

What to do

It is clear that a number of causes of general anxiety in childhood can be prevented or managed by sensible handling. This is also true for many of the specific fears - as has been outlined in this leaflet, there are practical things that parents can do when these arise. For the illogical fears which are not severe enough to be called phobias, simple explanations and reassurance will help many children gradually get over them.

Anxiety or fear which is causing the child or teenager prolonged distress, or is interfering with everyday events such as going out with family or friends or having relationships or hobbies, will often need special treatment. This treatment will nearly always take place in a clinic without the child having to be admitted to hospital.

There are a number of professionals who can help children and young people who are extremely anxious.

The GP

An important starting point in getting help for your child is often your local GP. It is important to be clear with the GP the nature of your worries, and s/he should carry out a detailed interview with you and your child, enquiring into such areas as the relationship between you and your child, concerns regarding school and friends, and other difficulties that your child might be experiencing. Some GPs have counsellors attached to their practices, and they might suggest that your child talks to the counsellor about their anxiety, or they might refer them to counsellors outside the practice.

Specialist help

For other children and young people, the GP might feel that more specialist help is appropriate. If this is the case, they will refer your child to another professional for further assessment. These will most likely be:

- Child and adolescent psychiatrists. These are doctors specially trained to help with anxiety in children. Child psychiatrists work from a range of settings, including hospital departments, child guidance clinics and community child and family consultation centres.
- Clinical psychologists use psychological methods which can be particularly helpful with phobias. Both groups of professionals often work together.
- Educational psychologists and education welfare officers may become involved in helping your child if their anxieties are about school.
- In some instances, social workers might also become involved, particularly if your child's anxieties are specifically to do with their home life. The social worker might meet all the members of the family in order to help resolve any difficulties. One form of this help is called Family Therapy, although social workers can help in many other ways.
- Many professionals are part of a multi-disciplinary teams. These multi- disciplinary teams are often an important part of child and adolescent mental health services within a given area.

How are most anxieties treated?

- This is usually achieved by talking to or helping children and parents to understand how the problem has developed so that children can understand and overcome the anxiety.

- Specific fears are usually treated by helping children confront their fear in a way and at a pace that they can manage, for example by carefully planning a gradual return to school in the case of a school phobia.
- Some older children can be taught how to relax.
- Some children with general anxiety, which is hard to understand, can benefit from psychotherapy - intensive talking with a psychotherapist or professional skilled at this.



- Talking with small children about worries is quite often helped if they are encouraged to draw or play with small toys. Children tend to reveal their preoccupation in some of their play, and skilled observation can understand this.

It is very unusual for anxious children to be treated with drugs although some obsessional problems and a few young people with panic attacks may find these helpful.

Anxiety and fear are unpleasant and can be the cause of substantial suffering in childhood and adolescence. Within the National Health Service there are a number of professionals, particularly within the Child and Adolescent Psychiatry and Clinical Psychology Services, who are expert in such matters. If you think that your child or teenager is unusually anxious, you may be able to use the information in this booklet to help matters yourself. There are also helplines for parents to discuss worries and concerns confidentially. These can also refer you to sources of specialist help in your local area. For more information on these, see Section 4.

Otherwise you can go to your GP who may be able to help directly or will refer your child to the most appropriate local service. Again, if you are unsure what this will entail, do not be afraid to ask. There are many organisations, listed in Section 4 who will be able to help you.

Asking for help does not mean that your child is seriously disturbed nor does it mean that they are going to be taken away from you or admitted to hospital against your will. It does mean that they will be helped.

Section 4

Sources of help for parents

Association for Child Psychology and Psychiatry
St Saviour House,
39/41 Union St., London SE1 1SD
Tel: 020 7403 7458

British Association for Counselling
1 Regent Place, Rugby,
Warwickshire CV21 2PJ
Tel: 01788 578328

British Psychological Society
St. Andrew's House,
48 Princess Road East,
Leicester LE1 7DR
Tel: 0116 2549 568

Carers National Association
20/25 Glasshouse Yard
London EC1A 4JB
Tel: 020 7490 8818

Activities include information and advice serivce for carers.

Childline
(Confidential helpline for children and young people)
Tel: 0800 1111, 24 hours, free.

Eating Disorders Association
First Floor, Wensum House
103 Prince of Wales Road
Norwich, Norfolk NR1 1DW
Tel: 0870 7703278.
Helpline: 0845 634 1414
Open Monday to Friday
8.30am-8.30pm

Exploring Parenthood
4 Ivory Place,
20 Treadgold Street,
London W11 4BP
Tel: 020 7221 4471
Advice Line: 020 7221 6681

Manic Depression Fellowship
8-10 High Street,
Kingston upon Thames, KT1 1EY
Tel: 020 8974 6550

Mind *info*line
Granta House, 15-19 Broadway
Stratford, London E15 4BQ
Tel: 020 8522 1728 (London)
08457 660 163 (outside London)
Mon-Fri 9.15am - 4.45pm

Rethink (National Schizophrenia Fellowship)
28 Castle Street,
Kingston upon Thames
Surrey KT6 4NS
Tel: 020 8547 3937
020 8974 6814 (advice line)

Parentline
Endway House, The Endway,
Hadleigh, Essex SS7 2AN.
Tel: 01702 554782

Offers help and advice to parents on all aspects of bringing up children and teenagers. (Helpline Tel: 01702 559900 open 9 - 6pm Monday to Friday and 10am - 2pm Saturday)

Parent Network
44-46 Caversham Road,
London NW5 2DS
Tel: 020 7485 8535

Co-ordinates a national network of self help groups for parents.

The Samaritans
10 The Grove, Slough SL1 1QP.
Tel: 01753 532713/
Helpline: 08457 90 90 90

The Samaritans offer confidential emotional support at any hour of the day or night, to anyone in personal crisis and in danger of taking their own life.

The Self Injury Project, Bristol Crisis Service for Women
PO Box 634, Bristol B15 1XH.
Tel: 0117 923 1119

For women in emotional distress. Focuses on self injury. Publications and information on self injury.

Trust for the Study of Adolescence
23 New Road, Brighton BN1 1WZ
Tel: 01273 693311

Youth Access
1a Taylors Yard,
67 Alderbrook Road,
London SW12 8AD
Tel: 020 8772 9900

Young Minds
102 - 108 Clerkenwell Road,
London EC1M 5SA
Office Tel: 020 7336 8445
Fax: 020 7336 8446
Parents information service:
0800 018 2138

Young Minds, the national children's mental health charity works to promote the mental health of children and young people.

Young Minds runs a Parents information service, and produces a range of leaflets for parents and young people.



As the UK’s leading charity concerned with both mental health and learning disabilities, the Mental Health Foundation plays a vital role in pioneering new approaches to prevention, treatment and care. The Foundation’s work includes: allocating grants for research and community projects, contributing to public debate, educating and influencing policy makers and health care professionals.