



Trends is published regularly throughout the school year by **Cornerstone Day School** as a service to New Jersey school professionals. Each issue highlights one important topic with practical applications for those working with students with emotional problems.

TRENDS

WHEN IS ANXIETY A CAUSE FOR CONCERN?

What is anxiety?

Anxiety is an unpleasant, future-oriented emotion: discomfort or unease about something that may happen in the future. Experiencing anxiety is not itself a cause for concern; it is a normal, and even helpful, human emotion. It provides a motivating force to get important things done (like filing taxes on time) and points us towards things we care about.

Sometimes, though, anxiety can develop into more of a problem, such as an anxiety disorder. When anxiety prevents kids from doing important things like attending school, seeing friends, or missing out on activities and when anxieties are unrealistic and excessive, this may constitute an anxiety disorder in about 5-7% of youth.

General signs of anxiety in kids include excessively seeking reassurance, avoiding certain situations, trouble sleeping, clinginess towards caregivers, feeling tired or ill because of worrying, and self-consciousness. 'Acting out' disruptive behaviors can also be a sign of anxiety disorders that mask the underlying anxiety. For instance, kids may throw tantrums, ask a lot of questions, be fidgety, or lash out, be oppositional or aggressive. While these behaviors can be frustrating for parents and teachers, it may be driven

by an overpowering need to avoid the anxiety-inducing situation, requiring careful assessment by a mental health professional.

Anxiety disorders – some types

Generalized anxiety disorders.

We think of kids with GAD as 'worriers'. Kids with GAD worry about everyday problems, but to the point it is excessive. For example, they may worry about their health, their academic performance, athletics, or natural disasters. These worries are very hard control or 'switch off'. Kids with GAD can be irritable, tense, have a hard time sleeping or concentrating, or get tired out when anxious: all that worrying is a lot of work.

Separation anxiety disorders. Kids with separation anxiety disorder show excessive upset when they are separated from their caregivers that is not age appropriate. They also may worry about things that could cause their

caregivers to be separated from them, like worrying about parents dying, and showing physical symptoms when separation is impending. Refusing to go to school can be associated with separation anxiety disorder and has a domino effect by increasing stressors in the long term, so is typically the first problem addressed with this disorder.

Social anxiety disorder. Social anxiety disorder is a strong fear of being rejected or embarrassed in front of others. This includes fears of broad social situations with potential for embarrassment, such as starting conversations, using public restrooms, or eating in front of others. This disorder is most common in adolescents. Kids with social anxiety disorder may avoid the feared social situation directly by opting out. However, avoidance can also be more subtle, known as a 'safety behaviors', which may have goals of

Continued next page



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trying to hide the anxiety (which can itself be embarrassing), trying to avoid attention, or to downregulate anxiety. For instance, kids and adolescents may use their phone or wear headphones so others won't talk to them, rehearse what they will say, keep the focus of conversations on other people, or drink alcohol. They may sometimes need 'comfort' person to face the situation, e.g. only going to parties if a certain friend will be there.

Selective mutism. While social anxiety is characterized by fear in wide ranging situations, selective mutism is specific to intense fear of speaking in certain social situations (e.g. at school) while being able to speak in others (e.g. at home with family). It usually affects younger, pre-school aged kids (i.e. those younger than 10). Even

though these kids may enjoy social situations, they may freeze up due to anxiety and avoid speaking or have a close friend speak for them.

Panic disorder. A panic attack is an intense rush of fear and anxiety that reaches its peak within just a few minutes (different than the 'slow burn' of worry). Panic attacks can include physical symptoms, like dizziness, stomach upset, or heart racing or can feel like you are dying or 'going crazy'. In addition to occurring in response to a specific trigger, panic attacks occur 'out-of-the-blue'. The defining feature of panic disorder is that even if a child has just one panic attack, they may be very preoccupied with having another or worry about the consequences of panic attacks (e.g. concerns about effects on physical health

or dying from panic attacks). They may do things to avoid having panic attacks or their possible consequences, like going to the nurse frequently, avoiding caffeine, or avoiding physical activity. Most often, panic disorder begins in adolescence.

Specific phobias. Certain fears, like fear of the dark, are common in childhood but outgrown with age. However, when fears are severe, persistent, and irrational, it may represent a phobia about an object or situation. This can include fear of flying, snakes, insects, injections, heights, thunder, the dentist, or other situations. Peak age of onset for phobias is early childhood (ages 5-9), typically appearing before age ten. While fears can be normal in kids, phobic fears seriously disrupt kids' lives.



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