



Anxiety is a common emotional issue in childhood, particularly for children who have developmental disorders. This brief hand out is to explain what anxiety is, what may be producing it, and options about how to deal with it.

# What is Anxiety?

Anxiety is an emotional response. It arises from emotional structures within the brain. Anxiety is a stronger form of worry or stress. An anxious response tells the rest of the brain to be careful and vigilant because something may go wrong.

Anxiety differs from fear in an important way. Fears tend to have an object – something that the individual is afraid of. This may be the dark, strangers, crowds, spiders and so on. By contrast, anxiety does not usually have an object. When we are anxious, we do not necessarily know what we are anxious of. Anxiety is the emotion that says be careful – something may go wrong, but we don't know what that something is.

## **Anxiety thoughts**

Anxiety changes children's thoughts and beliefs. If they experience success, anxiety may make it difficult to accept that success, continuing to worry that they are not as good as that success may indicate. Anxiety leads to 'what if' thoughts, always exploring possibilities that may be highly unlikely.

## **Anxiety behaviours**

Anxiety changes behaviour. Anxious children may to be hyper-vigilant. They need to monitor all aspects of the world around in case something may go wrong. This hyper-vigilance can be misinterpreted as an attention disorder. Alternatively, anxiety may lead to a form of detachment. Some children learn how to psychologically separate themselves in order to protect them from potential hurt.

A background of anxiety increases the likelihood of escalation into more overwhelming negative emotions such as anger, fear, and the behaviours these may lead to. Excessive anxiety may lead to obsessional thoughts and behaviour.

Sudden changes, or transition to unknown situations can be particularly distressing for anxious children. Anxiety can lead to 'controlling behaviours' where children need to control the world around them so that nothing unexpected occurs.

## **Anxiety and sleep**

Anxious children may have trouble falling asleep. This is because the act of falling asleep means they lose their ability to use their thought to control their fears. They may stay awake until they are certain that they will fall asleep quickly. Anxiety during the day can also build up and disrupt sleep during the night, leading to recurrent wakening, bedwetting, night terrors or sleepwalking.

## Possible causes of Anxiety

There are three possible causes of anxiety. Firstly, the anxiety may be due to current life experiences. For example if there are problems at home (such as domestic violence or arguments), the stress can carry on through the child's day. Alternatively the stress may come from school, from bullying or unrecognized learning problems.

A second possible cause of anxiety is past life events. Stressful events and memories can change how the brain functions so that anxiety continues even if the current world around the child is safe.

A third cause of stress is genetic and biological. Some children have brains that are 'wired to worry'. In this case, the emotional centers of the brain produce excessive and problematic anxiety responses to normal life events. This occurs regardless of what children may know or believe.

For some children there may be more than one cause. Some learning disorders (such as NLD), or developmental disorders such as Autism, are associated with excessive biological stress in addition to any stress that may result from a lack of understanding.

#### What can be done?

There are four general strategies that can assist anxiety in children.

#### 1) Reduce environmental causes of stress.

Most parents who recognise anxiety in their children strive to make their children's experience of life as predictable and safe as possible. An important first step is to think through all the possible environmental causes of stress, and deal with these as much as possible. Examples include:

- Bullying
- > Unrecognised learning problems
- > Specific fears (such as the dark)
- > Discord or violence at home

#### 2) Calming behaviours

If there is stress that cannot be eliminated through making a child's world safer and more predictable, the remaining strategies assist children in living with their anxiety.

Calming behaviours require an initial recognition of anxiety. This usually requires and adult to identify the stress, though older children can learn to recognise their own stress.

Once it is recognised, then the calming behaviours are intended to relax and minimise the experience of stress. This may include physical exercise, or retreat to a 'calm place' that is safe, and where children can undertake activities that lead to calming.

## 3) Cognitive strategies

When children are old enough, able to understand the concepts of anxiety, and motivated to help themselves, they can use their intelligence to learn about anxiety and how to deal with it. This process usually requires assistance of a professional with training in these strategies.

### 4) Medication

A number of medications are effective in reducing anxiety in children. Medication may be considered when:

- The anxiety is due to biological factors, and not due to modifiable stressors in the child's life such as bullying.
- Calming strategies are not enough to control the stress.
- ➤ The child is not old enough, or does not have the understanding or motivation to benefit from cognitive strategies.
- The anxiety is a handicap in the child's life, producing negative consequences in areas such as sleep, social relationships, self-esteem or learning.

Medications reduce the symptoms, but do not lead to a permanent change or cure. Usually, when the medication is stopped, the symptoms return. Medication can be used to 'buy time' until the child is old enough to learn how to manage the stress and no longer need the medication. Medication can also reduce stress to a level where it may be possible for children to use their intelligence and benefit from cognitive therapy strategies.

