

# How to help children cope with anxiety

By Liza Finlay on November, 12 2012



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Olivia Lee\* would not get on the bus. The fourth-grader stood with her arms crossed staring down the vehicle as if it were a yellow behemoth. Her mother's urging turned to pleading. As the clock ticked and the other children looked on, Vivien Lee\* fairly begged her recalcitrant child to board the bus. Olivia flatly refused. As parental pressure mounted, the normally cooperative child's sober defiance became almost violent; she began yelling at her mother, flailing her arms. And then, as if a plug had been pulled, Olivia stopped. Her eyes welled up with tears and, deflated, she sank to the ground with sobs wracking her little body.

"I'm too scared, I'm too scared," Olivia repeated, over and over.

"Scared of what?" asked her baffled mother.

"I'm scared I might get car sick and barf and you won't be there and all the kids will laugh at me."

Olivia had always been what her mother called a worrywart – she worried that it might rain on picture day, she feared for Daddy if he was driving in a snowstorm. But this was the first time Olivia's fears had overcome her. When Olivia's "worries" began to interfere with her ability to live life, to meet the demands of school and family, she crossed over from normal worry to worrisome worry. Anxiety disorders are a group of conditions characterized by excessive worry that's persistent and difficult to control, and that impedes a sufferer's ability to live life.

Sadly, Olivia isn't the only one to be gripped by "worry dragons", as Dr. Jane Garland, clinical director of the mood and anxiety clinic at the British Columbia Children's Hospital, calls them. According to the Mood Disorders Association of Ontario, 12 percent of Canadians suffer anxiety disorders, making it the most prevalent of mental illnesses. And it seems kids are becoming increasingly affected. They hear the adults around them talking about their stresses, they are bombarded by bad news and sinister images from multiple mediums and, adds parent educator and author Alyson Schafer, they're simply less equipped to deal with it all. "Let's face it," she says, "kids are more vulnerable. They're smaller, they're less experienced, they haven't had the time to develop the tools and competencies that adults have. So they feel more helpless, more out of control."

Loss of control is a common theme in childhood anxiety. So is humiliation. Whether it's fear of vomiting, blood, needles, new situations or crowds (some of the most common sources of anxiety), the underlying issue is a heightened concern from a child that he or she will either lose control or lose face. And that makes sense, says Alyson, because feeling competent and feeling connected are two of the most primal human needs, so anything that the child believes might sabotage either will trigger fear.

It doesn't really matter what we parents think. Our nattering about how unlikely it is that a short bus ride will lead to a barf-fest, or that a scraped knee will become a blood bath requiring hospitalization, is inconsequential. It's the child's belief system that counts and if we want to help them manage their anxieties, we need to get inside their heads.

What's inside those heads is revealing. Often, children with anxiety disorders can recount a singular moment of trauma (remember, it was traumatic for them even if it wasn't for you). Maybe they were in class and the boy next to them threw up and started crying. Or maybe they were in the waiting room at the doctor's office listening to the shrieks of a child being given an injection. Whatever the precipitating event, the anxious child concludes – whether rightly or wrongly – “I'll never let that happen to me.” And so they begin to construct a world in which they will be safe. They build their symptoms to insulate themselves from their fears.

Everyone has fears. And that's a good thing. Fear is a valuable emotion – it raises red flags in situations where caution is required. Fear served a crucial evolutionary role; if our ancestors didn't listen to their fears our species would have been subsumed by the woolly mammoth.

And if your anxious kid doesn't know that, tell her. There's nothing to fear from, well, fear. Those feelings tell us we have an alarm system that's armed and ready. The trick is to control your alarm system and not let it control you. And that's tough for kids with anxiety disorders. Why? Because it appears that they have an alarm system that's super-charged and ultra sensitive. It makes kids blow common concerns way out of proportion.

There is some evidence of a genetic component to anxiety disorders; the highly sensitized fear button may be hardwired, which explains why it often pops up in family trees along with other mood disorders. So if Grandma is mildly obsessive about hand washing, Dad is a bit reclusive at big parties, or Aunt Lucy sometimes struggles with the blues, there's a good chance that this will affect the genetic programming of your child's emotion centre.

But there are other clues. Dr. Garland says symptoms of anxiety disorder show up in three areas: body, mind and behaviour. As a parent, you're looking for things like headaches or stomach aches, accelerated heart rate and muscle tension, as well as negative thoughts, excessive worry and emotional fragility. Finally, watch for behavioural signs such as irritability, tantrums (especially when being pushed to do something that provokes the anxiety) and, importantly, avoidance (of situations that trigger the anxiety).

Avoidance is a particularly worrisome by-product of anxiety, warns Dr. Garland, because children who sidestep stressful situations may fail to achieve key developmental tasks, which could jeopardize their futures.

Moms Lynn and Lisa\* know all too well the hazards inherent in an anxious child's avoidance strategy. Their daughter Sophie is so terrified of vomiting that she once refused treatment for hugely infected bug bites because she was convinced the antibiotics would make her throw up. “She had overheard the pharmacist say that a rare side effect of penicillin is nausea,” says Lynn. “So she simply refused treatment. It was a battle worthy of Napoleon to get her to take the drugs.”

Ultimately, though, the key to building confidence is encouragement. Pointing out a child's successes – however small – will nudge an anxious child along the road to resilience. Positively reinforcing a child's efforts at overcoming an obstacle has a ripple effect farther reaching than the dreaded school bus, or the much-feared first day of school. Learning that you can solve life's problems is a gift, it's the building block of an “I can” attitude. “No life is exempt from sticky situations,” says Alyson, “but the child who has courage manages those situations because they have learned to be resourceful, they've learned one of life's most essential lessons: I can count on me.”

## What you can do

Leaving an anxiety condition untreated can have serious consequences (medically, emotionally and developmentally). But here's the good news: treatment is highly effective. Ask your pediatrician or family doctor to recommend a therapist (cognitive behavioural therapy has proved to be particularly useful); meanwhile, here are some strategies to employ at home.

**Listen.** Curb the urge to lecture your child about how irrational their anxieties are. Sure, a crippling fear of, say, Halloween masks may seem unreasonable to you, but for your child the fear is all too real. Honouring their perspective, a child may be willing to reveal more about their fears; the more you know the better.

**Reframe.** Your child already feels fragile. Don't fan the flame of their inadequacy by focusing solely on the negative. Highlight the positive and help your child befriend their alarm system. “Your body is doing a really good job of protecting you. No one has a better alarm system than you do!” Or, “You know I just love how intune you are with your feelings. Being aware of feelings is a really useful tool.”

**Teach.** Give your child some tools to help curb excessive worry. "I tell anxious kids that thoughts come first and feelings follow," says Alyson. "So if you can learn to control your thoughts, you can control your feelings." There are many methods to manage self-talk. Your child could endeavour to push in one empowering thought for every fearful one, for example. Or, Alyson has kids practice thought blocking with bubbles and a wand; every time her young clients burst a bubble they are whacking a fearful thought, refusing to listen to negative or anxious self-talk.

*\*The names in this article were changed.*

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