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Did You Know?

Anxiety Disorders in Childhood and Adolescence

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Did you know that anxiety is the most prevalent psychiatric disorder diagnosed in children and adolescents?

In fact, it is estimated that between 8 and 10 % of young people ages 9 to 17 suffer from one (or more) of the following eight major anxiety disorders:

1. Specific (simple) phobia
2. Social phobia
3. Agoraphobia
4. Panic disorder
5. Generalized anxiety disorder (GAD)
6. Separation anxiety
7. Posttraumatic stress disorder (PTSD)
8. Obsessive-compulsive disorder (OCD)

According to researchers, children who suffer from anxiety are two to four times more likely to develop depression, and are much more likely to become involved in substance abuse in their teenage years. As such, left unrecognized and untreated, anxiety disorders represent a serious and debilitating condition which has the potential to impair an individual from childhood right through to adulthood.

It is noteworthy that, although anxiety disorders are the most common disorders of childhood and adolescence, there is relatively little research on the efficacy of psychotherapy. One of the most promising

approaches, which has its origins in cognitive-behavioural therapy (CBT), was pioneered by Kendall and his colleagues. It has four major components: 1) recognizing anxious feelings, 2) clarifying conditions in anxiety-provoking situations, 3) developing a plan for coping, and 4) evaluating the success of coping strategies.

These four components represent the foundation of the highly successful C.O.P.E. programme which is outlined in *Your Anxious Child: How parents and teachers can relieve anxiety in children* by John S. Dacey and Lisa B. Fiore. Their programme is based on fifteen years of work with children and adolescents diagnosed with anxiety disorders. "C.O.P.E." is the acronym for the four steps that make up their method:

1. C = Calming the nervous system
2. O = Originating an imaginative plan
3. P = Persisting in the face of obstacles and failure
4. E = Evaluating and adjusting the plan

The first step, calming the nervous system, involves developing specific strategies for coping in stressful situations and suppressing the neurological alarm response to stress. These strategies must include both physical (e.g., controlled breathing) and mental (e.g., positive thinking, distraction) techniques. Step two, originating an imaginative plan, is based on the notion

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that anxious children are less likely than other children to use new and imaginative ideas to problem-solve when faced with a stressful situation. However, once they have calmed the nervous system, it has been demonstrated that anxious children can develop skills to be better problem-solvers and improve their ability to design a successful plan. Persisting in the face of obstacles and failure, step three, is a most important component to working with anxious children. They must learn to persevere in the face of uncomfortable physiological responses as well as when a specific coping technique is not successful. Finally, step four, evaluating and adjusting the plan, means just that. Any plan to be successful must be evaluated, monitored, and fine-tuned in order to meet the ongoing needs of anxious children.

Each child experiences anxiety in his or her own way. It is important to remember that, even if the anxiety is all in the child's mind, this does not make it any less real for the child. As adults, whether we are parents, educators, or mental health professionals, it is incumbent upon us to identify anxious children and assist them whenever possible to find creative ways of coping with their fears and worries. When those fears become overwhelming, the child or adolescent may require professional assistance in order to develop anxiety reducing strategies and successful long-term coping techniques.

REFERENCES

Brown, J.L. (1995). No more monsters in the closet: Teaching your children to overcome fears and phobias. New York: Prince.

Dacey, J.S., & Fiore, L.B. (2000). Your anxious child: How parents and teachers can relieve anxiety in children. San Francisco: Jossey-Bass Publishers.

Kendall, P.C., Flannery-Schroeder, E., Panichelli-Mindel, S.M., Southam-Gerow, M., Henin, A., & Warman, M. (1997). Therapy for youths with anxiety disorders: A second randomized clinical trial. *Journal of Consulting and Clinical Psychology*, 65, 366-380.