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Warning Signs and Signals of Anxiety

According to the U.S. Surgeon General, 13% or over 6 million children suffer from anxiety disorders, making it the most common emotional problem among youngsters. Parents, teachers and pediatricians may be the first to see the early signs and signals of childhood anxiety.

The following clues are suggestive of anxiety, but do not imply a definite case of anxiety in isolation, as many other factors have to be taken into consideration. Neither are the signs and signals described below exclusive markers of anxiety. They may also be clues to other problems for which a child may benefit from intervention. It is important that you seek consultation with a qualified professional if you see signs of the following for over a month:

- ❑ ***Out-of-character behaviors:*** Behaviors that are described as “not acting his age,” or “not like himself,” such as sudden, unexpected resistance from an otherwise compliant child. An 8-year-old who insists on an elaborate bedtime ritual is not acting his age, because such behavior is more fitting for a preschooler or kindergartner. Sudden rigidity, inflexibility or stubbornness that comes across as noncompliance or defiance. A generally bold and curious child who is abruptly afraid or unduly cautious.
- ❑ ***Agitation and easily-triggered distress:*** Unusual tearfulness, clinging, fear of being alone in situations that most children their age do not mind, pacing, restlessness, agitation, crying, irritability, hair-trigger “meltdowns,” unhappiness, poor self-esteem, depression or withdrawal.
- ❑ ***“What if?”:*** Asking, “*But what if?*” more than the average child. Questions pertain to issues from the trivial to the profound, and cover topics such as friends, grades, performance, family safety, the family pet, natural disasters or the weather.

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- ❑ **Reassurance seeking:** Incessant and insatiable need for reassurance. “*Am I going to be OK? Am I going blind? Am I going to throw up? Can you feel my forehead and see if I have a fever? Are you sure there’s no paper under my desk?*”
- ❑ **Decline in attention, concentration and organization:** Distraction, preoccupation, difficulty focusing or disorganization that appears initially to be willful daydreaming or an attention problem.
- ❑ **Frequent physical complaints:** Nausea, vomiting, feeling on edge, or many aches and pains for which no medical cause can be found.
- ❑ **Perfectionism:** High and unattainable self-imposed standards with regard to schoolwork, behavior or socialization. Repeating tasks endlessly, easy frustration with perceived imperfection, refusal to accept parents’ or teachers’ satisfaction with the quality of the performance.
- ❑ **Inability to complete tasks:** Assignments or tasks that are clearly within the child’s capability are not completed due to perfectionism, or other repetitive rituals such as checking, re-reading or counting. Sometimes, a child may get “stuck” and be unable to proceed.
- ❑ **Reluctance or refusal to go to school:** Reluctance or refusal to attend school due to avoidance of anxiety triggers or inability to cope with expectations and demands of schoolwork.
- ❑ **Sleep problems:** Insomnia, nightmares and frequent awakenings, followed by exhaustion and drowsiness during the day. May be the result of staying up late, absorbed in rituals or obsessions, trying to get homework done to perfection or procrastination.
- ❑ **Avoidance:** Sudden, strong avoidance and reluctance in situations that were formerly not an issue. Fears of contamination, death or harm may persuade children to avoid all manner of potential triggers of these fears.
- ❑ **Wasted logic:** The child is seemingly impervious to common sense. Logic, reassurance, explanations, and distraction do not appease the child’s anxiety.