Anxiety Disorders

Adapted from: Abnormal Child Psychology, 3rd Edition, Eric J. Mash, David A. Wolfe Chapter 7: Anxiety Disorders

What is Anxiety?

- Strong negative emotion and tension in anticipation of future danger or threat
- · Moderate amounts of anxiety is adaptive
- Anxiety disorder when amount or intensity of anxiety is excessive and debilitating

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Anxiety involves:

- Three interrelated anxiety response systems:
 - Physical system
 - · Fight or flight response
 - Sympathetic nervous system mediation
 - Cognitive system
 - Attentional shift and hypervigilance, nervousness, difficulty concentrating
 - Behavioral system
 - · Aggression and/or avoidance

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Symptoms experienced in the

· Physical System

Sweating, blushing...

· Cognitive System

Thoughts of going crazy, forgetfulness...

· Behavioral System

Immobility, excessive talking...

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Table 7.1 The Many Symptoms of Anxiety Table 7.1 The Many Symptoms of Anxiety PHYSICAL Increased heart rate Fatigue Blurred vision Dry mooth Numberss Stomach upset Hear palphation Thoughts of being scared or hurt Thoughts of form the palphation COGNITIVE BEHAVIORAL Avoidance Trembling Sp Nail being Nail being Trembling Sp Avoidance Or progretion or forgetfulness Thoughts of contamination Thoughts of contamination Trembling Sp Avoidance of pysical proximity Trembling voice Stuttering Thumb sucking Thumb sucking Adapted from: Abnormal Child Psychology, 3rd Edition, Eric J. Mash, David A. Wolfe Chapter 7: Anxiety Discreters

Anxiety vs. Fear and Panic

- Anxiet
 - Future-oriented mood state
 - May occur in absence of realistic danger
- Fea
 - Present-oriented reaction to current danger
 - Characterized by alarm & strong escape tendencies
- Panic
 - Sudden and unexpected fight/flight response
 - Absence of obvious danger or threat

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Normal Fears, Anxieties, Worries & Rituals

- · Many fears are developmentally appropriate
 - Most decline with age
- · All ages worry
 - Anxiety disorders worry more intensely
- Ritualistic,repetitive activity common in young children
 - Helps gain control & mastery of their environment

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Separation Anxiety Disorder

- Age inappropriate, excessive anxiety about being apart from parents or away from home
- · Prevalence 10% of children
 - · Equally common in boys and girls
- · Earliest onset of all anxiety disorders
- · Often associated with school refusal

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Generalized Anxiety Disorder

- · Excessive, uncontrollable anxiety and worry
 - About numerous events and activities
 - Minor everyday occurrences
 - Experience it more days than not
- · Often physical symptoms
 - headaches, stomachaches, muscle tension, trembling
- Prevalence: 3% to 6%
 - Equally common: boys and girls
- Onset: late childhood or early adolescence
- · High co-morbidity: other anxiety disorders & depression

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Specific Phobia

- Extreme, disabling fear of specific objects or situations that pose little or no danger
- · Often leads to avoidance or disrupted routines
- Children may not realize fear is extreme or unreasonable
- Five DSM-IV subtypes: animal, natural environment, blood-injection-injury, situational, "other"
- Prevalence 2%-4% children; Boys > Girls
- Peak onset between ages 10 and 13

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Social Phobia

- Marked, persistent fear of being the focus of attention or doing something humiliating
- · Children with social phobias more likely
 - Highly emotional
 - Socially fearful and inhibited
 - Sad
 - Lonely
- Prevalence: 1-3% of children; Girls > Boys
- Age of onset often early to mid-adolescence

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Obsessive-Compulsive Disorder

- Obsessions: Repeated, intrusive, irrational, and anxiety causing thoughts
- Compulsions: Ritualized behaviors to relieve the anxiety
- · Extremely resistant to reason
- Often severe disruptions in health, social, family, school
- Prevalence: 2-3% of children; Boys = 2 x Girls
- Age of onset 9-12 years
- · High co-morbidity
 - Other anxiety, depression, disruptive behavior problems

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Panic Disorder

- Panic attack: Sudden, overwhelming period of intense fear or discomfort with characteristics of flight/fight response
- Panic disorder (much more rare)
 - Recurrent unexpected panic attacks
 - persistent concern about having attack & consequences
- · High anticipatory anxiety and situation avoidance
 - May lead to agoraphobia
- Age of onset 15-19 years
- · Worst prognosis of all anxiety disorders

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Posttraumatic and Acute Stress Disorders

To be covered in Child Abuse and Neglect

- PTSD: characterized by persistent anxiety following an extremely traumatic experience
- Three core features of PTSD:
 - 1) persistent re-experiencing of the event,
 - 2) avoidance of associated stimuli and numbing of general responsiveness, and
 - 3) symptoms of extreme arousal
- Acute stress disorder: development of dissociative symptoms within one month after a traumatic experience, lasting at least two days but not longer than a month (short-lived)

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Associated Characteristics of Anxiety Disorders

- · Cognitive deficits
 - Memory, attention, speech, or language
- · Interference with academic performance
- · Hypervigilance; avoidance of threatening stimuli
- Misattribution of threat
- · Somatic complaints
- Social withdrawal, loneliness, low self-esteem, difficulty initiating and maintaining friendships

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Gender, Ethnicity, and Culture

- Higher incidence in girls probably both genetic vulnerabilities and gender role orientations
- Ethnicity & culture may affect the expression and developmental course of fear and anxiety
- Cultures that favor inhibition and compliance may have increased levels of fears in children
- Child psychopathology reflects a mix of actual child behavior and the lens through which others view it in a child's culture (Behavior + Lens Principle)

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