ANXIETY IN CHILDREN WITH ASD

All children worry, become nervous, or are scared of particular items or situations. However, sometimes these worries or fears occur more frequently than what would be expected for a child of that age, interfere with a child’s functioning, or result in families changing what they do because of these worries or fears. While many children with Autism Spectrum Disorder (ASD) are anxious or uncomfortable about new situations or changes to routine, some children experience symptoms of anxiety that are above and beyond what can be explained by ASD alone. In such cases the child may have both ASD and an anxiety disorder.

There are many types of anxiety disorders, and they tend to have different labels, such as Generalized Anxiety Disorder, Specific Phobia, Obsessive Compulsive Disorder, and Separation Anxiety. A careful evaluation of a child’s symptoms and the environments in which they occur can help clarify which type of anxiety the child may be experiencing. It is important to note that anxiety in children may look different than how one might expect anxiety to look in adults. For example, while adults may be able to describe what is happening to them, young children may express their anxiety in the form of a behavioral outburst, meltdown, or tantrum.

Why it matters: Anxiety can be highly distracting for children in social, academic, or home settings and can prevent children from engaging in activities. For example, children who are anxious about the safety of their parents may then spend their time with peers or friends worrying about their parents, instead of engaging with their friends. Children with intense fears of germs or a specific fear of insects, might then avoid playing with or interacting with peers in some social situations that may expose them to bugs (playing outside). In school settings, children with anxiety may be distracted by worries and find it harder to concentrate on the tasks at hand. Families who have children with anxiety disorders may find themselves frequently reassuring their children or changing their plans to work around their child’s anxiety. When children have both an
anxiety disorder and ASD, difficulties associated with each disorder may make it harder to treat, unless both disorders are targeted. For example, if a child is taught social skills, but is anxious the entire time he is around peers, the anxiety may overpower the child’s ability to make use of the social skill or make it even harder for the child to think flexibly.

**Diagnosis:** A trained clinician such as a psychologist or psychiatrist may engage in an extensive interview with a child’s family and, when the child is old enough, with the child as well. The interview will ask about the child’s symptoms, the environments in which the symptoms appear, the frequency and severity of symptoms, and how the symptoms are interfering with the child’s life. The child or child’s family may also be asked to complete questionnaires.

**Treatment:** Research suggests that Cognitive Behavioral Therapy (CBT) is an effective way to treat anxiety disorders. This type of therapy teaches children and their caregivers to identify emotions, to practice exercises or complete homework to tackle anxiety, and to engage in relapse prevention strategies once a child has tackled or gained mastery of his anxiety. For children who are cognitively not yet ready to engage in CBT, modifications are often available to help address a child’s anxiety (for example relaxation techniques using concrete objects and tools, distraction techniques, etc.). For some children, medication is prescribed.

Related Articles:

- [Co-Occurring Conditions or Co-Morbidities](#)
- [Cognitive Behavioral Therapy](#)
- [How Do I Choose a Treatment?](#)
- [Will Medication Help?](#)

Additional Resources:

- [The Indiana Resource Center for Autism](#)