

Childhood Anxiety

When to be concerned

Feared and anxious reactions are a normal part of development. Everyone, from infancy to adulthood, experiences anxieties and fears at one time or another. Feeling anxious in a particularly uncomfortable situation is never a good feeling. However, with kids, such feelings are not only normal, they're also necessary. Experiencing and dealing with anxieties help prepare children to handle the difficulties and stressors they will inevitably face as they grow up.

What is anxiety?

Anxiety is defined as "apprehension without apparent cause." It usually occurs when there's no immediate threat to a

person's safety or well being, but the threat feels real.

We all know the telltale signs of anxiety--the kind of feeling that makes us want to escape, and fast. The heart beats quickly, the body might begin to perspire, the stomach flutters. Not all anxiety, however, is bad. It can help children stay alert and focused. A healthy dose of fear can prevent children from playing with matches, jumping off high surfaces, and running into the road.

What are age-typical fears?

The nature of anxieties and fears change as kids grow and develop.

Separation anxiety occurs between 8 and 15 months of age, as a baby begins to



understand his own self-hood—or understand that he is a separate person from his parent. At the same time, the concept of object permanence emerges, which is when children learn that something still exists when it is not seen or heard. As babies begin to understand that they can be separated

from their parent, they do not understand that their caregiver will return, nor do they have a concept of time. This, naturally, causes a normal and healthy anxious reaction.

Separation issues persist into the preschool years as young children are torn

(Continued on page 8)



View Connections on the Web!

Thanks to our friends at Parent to Parent of New York State, *Preschool Connections* can be viewed online at the Parent to Parent Web site. Visit <http://www.parenttoparentnys.org/> Go to "Information," then "Library," and then "Newsletters"

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About Helping Hands School

Helping Hands School is a private, nonprofit preschool for birth to 5 with special needs. Situated on 5 acres of rolling hills, woods, and fields in Clifton Park (Exit 9 off the Northway), Helping Hands School currently provides special education preschool and early intervention services to children from Saratoga, Rennselaer, Schenectady, Washington, and Albany counties. A nursery school for typically developing children is also offered.

Services

- A continuum of services for preschool children with disabilities, including various integrated and self-contained special education classroom models.
- Early Intervention home and community-based services for infants and toddlers with developmental delays.
- Intensive program options for children with a diagnosis along the autism spectrum.
- Developmental play groups for toddlers with special needs.
- Special Education Itinerant Teacher services provided in home, nursery school, daycare and community settings.
- Related services, including speech/language, occupational, and physical therapies.
- Comprehensive evaluations for infants, toddlers, and preschoolers suspected of having a developmental delay or disability.
- Family support services available including parent support groups and social work services.
- Parent education workshops and newsletters for families of preschoolers and families of children with special needs, birth to 5.

About the Newsletter

Preschool Connections is a quarterly publication of Helping Hands School. The newsletter provides parents with up-to-date information about issues related to raising children of all abilities. Readers are welcome to copy and share information from this publication, but please credit Helping Hands School and *Preschool Connections*.

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Happenings

Family Events

Pop Go the Wiggles Live. It's time to learn how to do Romp-Bomp-A-Stomp, The Monkey Dance and Move Like an Emu during the all-new Pop Go The Wiggles Live! tour. November 2; 1:30 pm at the Times Union Center, Albany. *To purchase tickets, call 1-800-30-EVENT.*

Saratoga Springs Public Library. November 15: Family Dance. Learn some of the most popular dances and songs for children, including The Hokey Pokey, YMCA, and others. Hosted by Babywearing International. For ages 2 and older. **December 7: For the Holidays.** Listen to Abigail Reid tell stories and join Anna and Monte Sugarman as they sing holiday songs. This will be a joint celebration of Christmas and Chanukkah. For ages 4 and older. **December 30: Holiday Puppet Show with The Puppet People.** For ages 5 and older. *To register and more information, call 584-1198.*

Happy Holidays. Step into the spirit of the holiday season at the Saratoga Springs City Center for the 13th Annual Saratoga Festival of Trees. December 4-7. December 6 is *Family Day*, including Breakfast with Santa, Santa's Workshop, and Sundaes with Santa. Join Santa, Mrs. Claus, Rudolph, Frosty and other costumed friends for special activities, photos, and fun. 587-5000; <http://www.saratogafestivaloftrees.com/contact.asp>

Zucchini Brothers. Jack, Steve & Sam are back for their annual holiday show – performing their original songs of the season and other family favorites. December 14; 2:00 pm at The Egg, Albany. *Call the box office for ticket information, 473-1845.*

The Children's Museum at Saratoga. The Museum offers plenty of hands-on learning and fun for young children. Special programs geared for preschoolers include Tuesdays for Tots, Wiggle and Giggle, and Katie's Kitchen. 584-5540; <http://www.childrensmuseumatsaratoga.org/>

DSM-IV (...What's that mean?)

The **Diagnostic and Statistical Manual of Mental Disorders (DSM)** is a handbook for mental health professionals that lists different categories of mental disorders, such as "bipolar disorder" or "ADHD," and the criteria for diagnosing them. The manual is published by the American Psychiatric Association. It is used in the United States, and in varying degrees around the world, by clinicians, researchers, psychiatric drug regulation agencies, health insurance companies, pharmaceutical companies and policy makers.

There have been five revisions since it was first published in 1952, gradually including more disorders. The last major revision was the DSM-IV published in 1994, although a "text revision" was produced in 2000. The DSM-V is due for publication in May 2012. **TIP: If school professionals use words or acronyms you don't understand, speak up immediately. Most people will be happy to slow down and explain anything that is unclear.**





Books for Kids

Bringing Home Baby

Good books to help your child cope with the change of having a new baby brother or sister

Preparing for a Positive Experience

The following books take a positive, but realistic, approach to welcoming a new baby into the household. Young children will learn what babies are like, why they cry, what they can and can't do, and how much parents love their older children. Siblings (ages 2-4) will find these simple books reassuring and informative in words and pictures they can easily understand.

I'm a Big Brother and **I'm a Big Sister** by Joanna Cole (*Harper Collins, 1997*) Two books with identical text, except one is for brothers, the other for sisters. Children learn what to expect when the baby arrives and the important role a big brother or sister can play.

The New Baby by Mercer Mayer (*Random House, 2001*) Through trial and error, Little Critter finally learns what he can do with a new baby--and becomes a very good brother.

Hello Baby! by Lizzy Rockwell (*Crown Publishers, 1999*). This is one of the few books that starts when Mommy is pregnant. Simple

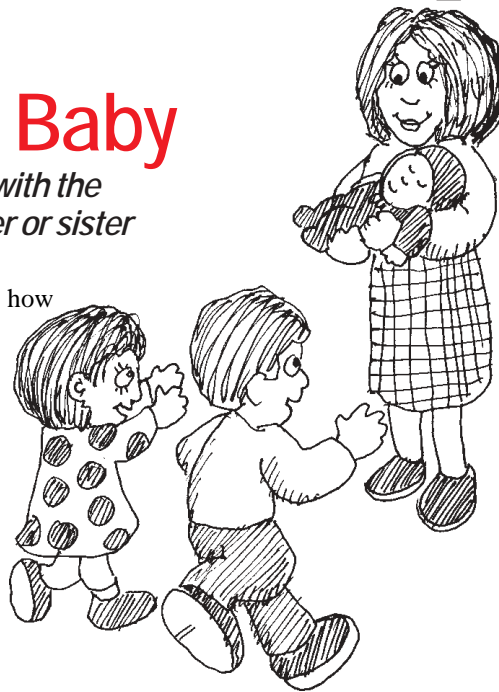
pictures show how the baby grows in the womb. Preparation includes going to the doctor, getting baby's room ready, staying with the grandparents the night the baby is born, and arrival.

The New Baby by Fred Rogers (*Putnam Juvenile, 1996*) In his characteristically warm fashion, Mr. Rogers talks directly about what to expect when a new baby joins the family. The text deals with siblings' feelings of jealousy, but it is not a major focus of the book.

Adjustment Issues

If your child is not happy about having to share Mom and Dad's attention, try one of these books that directly focuses on siblings' feelings of resentment and envy.

Darcy and Gran Don't Like Babies by Jane Cutler (*Scholastic Inc., 1993*) Unabashed about her feelings, Darcy claims "I don't like the baby!" but nobody seems to take her

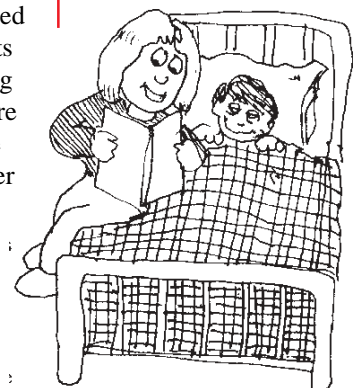


Books about Other Life Events

Books are wonderful ways to prepare your child about upcoming changes, or deal with difficult situations when they arise. Thanks to an ever-growing body of literature for the very young, there are books about everything from potty training and starting kindergarten, to more serious subjects such as divorce and hospitalizations. Reading about difficult subjects can help your child understand his or her own feelings, assure your child that there are others in the world with the same problem, and show ways to manage the situation. Reading is often a good springboard for further conversation between you and your youngster.

seriously. Until, that is, grandmother arrives and says she doesn't like babies either. From then on the two spend time having fun together, which eventually softens both of them, allowing Darcy to feel validated and reassured enough to admit maybe she really does like the baby, deep down.

Hi New Baby! by Robie H. Harris (*Candlewick Press, 2000*) It's not easy being a big sister! New baby gets all the attention. He can't feed himself. He cries and spits up. "What about me?" big sister says in actions more than words. In telling the tale, the father assures her that she is loved and cherished, which slowly helps her connect to her baby brother.



Parent Resources

Notables

Home-School Students with Disabilities

As of July 7, 2008, a new law stipulates that students with disabilities who are in home instruction programs pursuant to section 100.10 of the Regulations of the Commissioner of Education (home-schooled students)

are eligible to receive special education services from their public school districts. Parents of home-schooled students with disabilities must submit a written request for such services to their school district.

After the Diagnosis

A new downloadable publication from Autism Speaks is designed to help families who have just received a diagnosis of autism for their child make use of the following 100

days after diagnosis to understand the condition and deal with issues such as getting services and interventions.

www.autismspeaks.org/docs/family_services_docs/100_day_kit.pdf

Support Groups

Educational Advocacy Parent Group

Mary Fornabia, a parent of a child with a disability in Saratoga County and a social worker, would like to start networking with others to form an advocacy group to better support her family as well as others. The first meeting is October 22. *If you can't make the meeting but are interested in future meetings, call Mary at 588-3166 or e-mail parentsasadvocates@yahoo.com*

Autism

The Albany Chapter of the Autism Society of America currently holds monthly support group meetings in Albany and Saratoga. *Times and locations are posted on their Website <http://www.albanyautism.org/> or call 355-2191.*

Fathers Network

Jim Swart is the father of a 10-year-old daughter with Down syndrome and a regional coordinator in the Capital District office of Parent to Parent of NYS. He is interested in hearing from fathers of children with special needs to build a "Fathers Network." 381-4350 or e-mail JMSwart1@verizon.net



Programs

Project Link

November 5: Using the ABLLSTM-R to Identify and Compare Differences in Acquisition of Specific Language and Learning Skills Between Typically Developing Children and Children with Autism

This is a pre-conference workshop presented in partnership with NYSABA (The New York State Association for Applied Behavior Analysis) and open to anyone who wishes to attend. Presenters: Dr. James Partington, Ph.D, BCBA and Nissa Intarachote, BCBA ; 4:00-7:00 pm

November 7: Teaching Advanced Verbal Behavior

Presenter: Dr. James Partington, Ph.D, BCBA; 8:30 am - 4:00 pm

November 8: Questions and Answers Day for Parents and Professionals

Presenter: Dr. James Partington, Ph.D, BCBA; 8:30 am -3:00 pm.

November 12: Beyond the ABLLS-R Models for Inclusion

Presenter: Dr. James Partington, Ph.D, BCBA and Nissa Intarachote, BCBA.

The above workshops are offered at no cost to participants.

461-1576 ; <http://projectlinkforkids.org/index.htm>

Center for the Disabled

November 7: Hitchiker's Guide to Planet Earth: Play Therapy Tools for Kids Who Don't Fit In, presented by Brenda L. Bierdeman, Psy.D., CPT-P. This program, sponsored in conjunction with Sage Colleges, is an approved course by the Association for Play Therapy. 9:00 am-4:30 pm. 384-3060 ; <https://www.cfdsny.org/>

Center for Autism & Related Disabilities

November 7: Seventh Annual Conference. Supporting Students with ASD: The Science and Practice of Effective Interventions. 7:30 am -3:30 pm. 442-2574; http://www.albany.edu/psy/autism/2008_cardconference.html

PESI Seminars

November 7: Sensory Processing, Learning Difficulties and Challenging Behaviors

December 17: Resolving Chronic Misbehavior at School and Home Both workshops are offered in Albany, 8 am -4 pm. 1-800-844-8260; <http://www.pesi.com/>

Wildwood Programs --Sibling Program

Boys and girls ages 8 to 12 who have a sibling with a developmental disability have an opportunity to meet other siblings in a relaxed recreational setting. The monthly group will be facilitated by a social worker and an adult sib role model. First Tues of the month, beginning November 4; 6:30-8:00 pm. Latham. *Eileen Marrone, 640-3373.*

What is...

ADHD?

Almost all children have times when their behavior veers out of control. They may speed about in constant motion, make noise nonstop, refuse to wait their turn, and crash into everything around them. At other times they may drift as if in a daydream, failing to pay attention or finish what they start. However, for some children, these kinds of behaviors are more than an occasional problem. Children with attention-deficit/hyperactivity disorder (ADHD) have behavior problems that are so frequent and severe that they interfere with their ability to live normal lives.

The following are some common questions parents have about ADHD.

Will my child outgrow ADHD?

ADHD continues into adulthood in most cases. However, by developing their strengths, structuring their environments, and using medication when needed, adults with ADHD can lead very productive lives.

Why do so many children have ADHD?

The number of children who are being treated for ADHD has risen. It is not clear whether more children have ADHD or more children are being diagnosed with ADHD. Also, more children with ADHD are being treated for a longer period. ADHD is now one of the most common and most studied conditions of childhood. Because of more awareness and better ways of diagnosing and treating this disorder, more children are being helped.

Source: *American Academy of Pediatrics.*

The National Resource Center on ADHD: A Program of CHADD is also excellent source of information: <http://www.help4adhd.org/index.cfm?varLang=en>

Health and Development

This too shall pass. Having a child with a disability takes a toll on parents' mental and physical health, yet new research suggests that, over time, parents learn to adapt to the challenges of caring for a disabled child. As these parents age, the study shows, their health more closely mirrors the health of parents with children who don't have disabilities. The study, conducted by researchers at the University of Chicago and University of Wisconsin-Madison, is the first to use a representative sample to systematically examine the effect of having children with developmental or mental health problems on parental well-being, comparing the sample to parents of children without disabilities.

Researchers analyzed data from the Study of Midlife in the United States to examine the effect of having disabled children on parental health; the extent to which the toll varies by parental age and gender; and the effect of disability-related factors on the well-being of parents of children with disabilities. **SOURCE:** *ScienceDaily.*

Background TV? A new study has found that leaving your TV set on disrupts young children while they are playing, even if the channel is tuned to adult shows. This means that simply having the TV on, even in the background, may be detrimental to children's development.

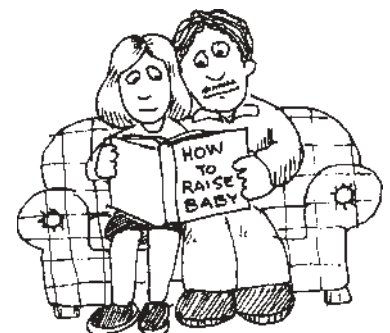
The study was conducted by researchers at the University of Massachusetts. The researchers looked at 50 children ages 1, 2, and 3. Each child came to a lab with a parent and was invited to play for an hour with a variety of age-appropriate toys. For half the time, a television was on in the room, showing an episode of the adult game show *Jeopardy!*, with commercials; during the other half hour, the TV was turned off.

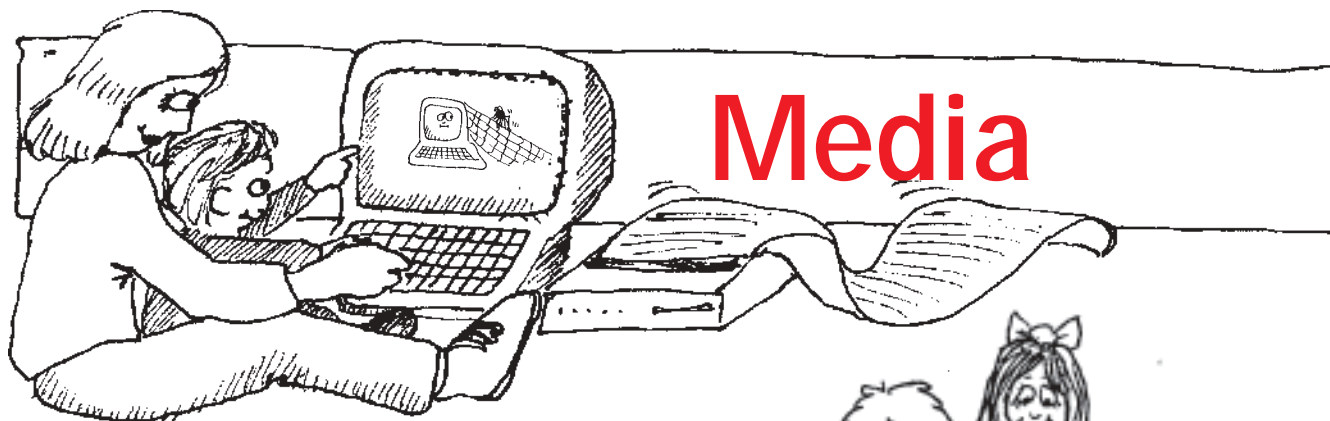
Researchers observed the children as they played to determine whether background TV—defined as adult-oriented television that is on and may be watched by older members of the family, but which very young children don't understand and to which they pay little attention—affected the children's behavior during play.

Background TV was found to disrupt the toy play of the children at every age, even when they paid little attention to it. When the television was on, the children played for significantly shorter periods of time and the time they spent focused on their play was shorter, compared to when the TV was off.

Stuttering and bilingualism. Children who are bilingual before the age of 5 are significantly more likely to stutter and to find it harder to lose their impediment, than children who speak only one language before this age, suggests new research. The researchers base their findings on 317 children, who were referred for stuttering between 8 and 10 years of age.

The authors suggest that children whose native language is not English may benefit from deferring the time when they learn it. "[Waiting] reduces the chance of starting to stutter and aids the chances of recovery later in childhood." **SOURCE:** *Archives of Disease in Childhood.*





Electronic and Expensive

Are these toys the best ones to give young children?

Holiday gift giving is right around the corner, and well-meaning parents are considering toys to give to their child that are “developmentally appropriate” or “educational.”

On the surface, we have no problem with that. It’s a good idea to find toys that are suitable to your child’s developmental level, and toy manufacturers’ age-level recommendations are helpful. But beyond that, don’t be fooled by “sophisticated” toys that are often expensive and electronic. Toys that buzz, blink, and move, with big price-tags, may seem “high-tech” and desirable, but that doesn’t mean they are the best choice or more “educational” than simpler, less expensive toys. The best “developmentally appropriate” toys are ones that allow a child to be creative, imaginative and constructive. Be skeptical of educational or developmental claims made by advertisers, especially product claims of intellectual enhancement. Instead, look

for toys that are related to your child’s interests. Toy use can be subjective and each child has different needs and interests. A box of hats and Mardi Gras beads may pique one child’s interest, while another child will become excited with a box of play tools and a big cardboard box. These toys may not be as dazzling as compared to a battery-operated book that “reads” to your child, but chances are good that your young child will find more ways to play with the first set of toys, for longer periods of time, than battery-operated toys, like this book, that are restricted and require no imagination.

Keep in mind that no matter what the toy, one fact remains: your child wants more than anything else in the world to spend focused time with you. A Little Tikes’ truck may be fun by itself, but if a child has Mom on the floor revving her engines, loading cargo, and pushing the truck under bridges made from chairs, that truck suddenly becomes a wondrous thing. Not only

Media



will your child play with the truck for a longer period of time, she’s likely to return to it in the future and imitate on her own the kind of play that you shared together. Your undivided attention during free play with your child costs nothing, and is one of the best gifts you can give.

Good Toys for 3- to 5-year-olds

- * Things for solving problems—puzzles, blocks that snap together, collections and other smaller objects to sort by length, width, height, shape, color, smell, quantity, and other features—collections of plastic bottle caps, plastic bowls and lids, keys, shells, counting bears, small colored blocks
 - * Things for pretending and building— blocks for building complex structures, transportation toys, construction sets, child-sized furniture (“apartment” sets, play food), dress-up clothes, dolls with accessories, puppets and simple puppet theaters, and sand and water play toys
 - * Things to create with—crayons and markers, large and small paintbrushes and fingerpaint, large and small paper for drawing and painting, colored construction paper, preschooler-sized scissors, chalkboard and large and small chalk, playdough and tools, paste, paper and cloth scraps for collages.
 - * Picture books.
 - * CD and DVD players with a variety of music.
 - * Large and small balls for kicking and throwing/catching, ride-on equipment including tricycles, tunnels, taller climbers with soft material underneath, wagons and wheelbarrows, plastic bats and balls, plastic bowling pins, targets and bean bags.
 - * If a child has access to a computer: programs that are interactive (the child can do something) and that children can understand (the software uses graphics and spoken instruction, not just print), children can control the software’s pace and path, and children have opportunities to explore a variety of concepts on several levels
-Adapted from the National Association for the Education of Young Children

Ask Nancy



Nancy T. Cupolo is a regular contributor to *Preschool Connections*. A popular educational consultant and training specialist, Nancy draws on 27 years of teaching experience in special education, elementary education, and early childhood education, as well as many years as a college-level professor and administrator. Nancy is owner of her own consulting business, *Children First*. E-mail your questions to Nancy at ncupolo@nycap.rr.com

Guiding Children Through Stress

All children experience some degree of stress on a day-to-day basis, depending upon what is happening in their lives. How your child reacts to stress depends upon both your child and the source of stress. Many children have survived serious stressors without permanent emotional or psychological damage, while other children cannot easily adjust to less traumatic experiences. The personality of the child, as well as parent support, play a major role in the child's ability to handle stressful situations.

Levels of Stress:

The stress children feel can be evaluated at three levels:

Normative stress accompanies the normal growing experiences of childhood. Examples of this type of stressor are separating from parents when a child starts school, loss of friends, loss of a special toy, or a change in school location.

Critical stress involves more intense family pressures. These stressors are events that do not occur in every child's life, but are common. Being hospitalized, observing parents fighting on a regular basis, divorce and other changes in the family structure, such as the deployment of a parent overseas, are examples.

Catastrophic stress occurs when a child faces sudden and unexpected events such as serious illnesses of the child or a family member, natural disasters or war.

How Children Respond to Stress:

Children respond differently and may express or exhibit varying emotions and reactions:

Fear. Children may wonder or say, "Will this happen to me?"

Loss of control, which may lead children to attempt to regain control with such statements as, "I won't go to school."

Anger, which may be exhibited by hitting their peers.

Loss of stability. Children may ask for continued reassurance when routines are disrupted.

Confusion, which can lead to such questions as, "How can this really be happening?"

Isolation. A child may want to withdraw from activities.

How Parents Can Help:

Parents can help children feel reassured, rather than overwhelmed and fearful, by helping children develop effective coping skills:

Model a calm and take-charge attitude during stressful situations. Children will mirror the response of adults. If a parent reacts with alarm, a child can become more frightened. Adults can give children a sense of hope and security by modeling calm behavior.

Validate your child's feelings. A child who feels afraid *is* afraid. His or her reactions should be taken seriously. Words and actions can provide a great deal of reassurance. Parents can also encourage their child to draw and illustrate how he or she feels.

Provide information. Inform them about what is happening in the world in a factual manner. Discuss how these events do or do not affect their lives directly. And maintain normal routines.

Make a plan. Creating a family plan of action for emergencies, and clarifying how the family will stay in contact during a crisis will help a child feel a sense of personal safety. Additionally, parents can teach children how to recognize danger signals and how to call for help, showing them how to memorize family information.

Monitor TV viewing. The news is full of calamity and disasters. Pay attention and limit what your child is exposed to on TV.

(Anxiety from page 1)
between exerting their independence and maintaining their attachment to the parent. The preschool years are often full of fears. Unable to clearly distinguish between reality and fantasy, preschoolers may fear the dark and monsters. They may fear things that they don't understand, like bugs, thunder- storms and being hurt.

As kids grow, one fear may disappear or replace another. A child who cowers at the sound of a vacuum at age 2 may happily push the vacuum for his Mom at age 5. But now he also believes monsters are looming in his closet. Some fears may be object specific. A child, for example, may want to cuddle up to a penguin at the zoo but wants nothing to do with the neighbor's dog.

Helping your child

Parents can help kids develop the skills and confidence to overcome most fears. The Nemours

Foundation offers these recommendations:

- * Recognize that the fear is real. As trivial as a fear may seem, it feels real to your child and it's causing him or her to feel anxious and afraid. Being able to talk about fears helps — words often take some of the power out of the negative feeling. Talking about it makes it become less powerful.

- * Never belittle the fear as a way of forcing your child to overcome it. Saying, "Don't be ridiculous! There are no monsters in your closet!" may get your child to go to bed, but it won't make the fear go away.

- * Don't cater to fears, though. If your child doesn't like dogs, don't cross the street deliberately to avoid one. This will just reinforce that dogs should be feared and avoided. Provide support and gentle care as you approach the feared object or situation with your child.

- * Teach kids how to rate

fear. A child who can visualize the intensity of the fear on a scale of 1 to 10, with 10 being the strongest, may be able to "see" the fear as less intense than first imagined. Younger kids can think about how "full of fear" they are, with being full "up to my knees" as not so scared, "up to my stomach" as more frightened, and "up to my head" as truly petrified.

- * Teach coping strategies. Try this easy-to-implement technique: Using you as "home base," the child can venture out toward the feared object, and then return to you for safety before venturing out again. Repeat this again and again until your child feels less fearful.

When to seek help

Normal developmental fears and worries are not reason for concern. But anxiety, even in young children, can become a problem if it persists over time, with marked distress or

avoidance, and occurs to such an extent that it interferes with learning, playing, socializing, or family function. Anxiety disorders, once thought to only exist in older children, teens, and adults, are now being diagnosed in young children. Generalized anxiety disorder, social phobias, panic disorder, separation anxiety disorder, post traumatic stress disorder, and obsessive compulsive disorder (OCD) are different anxiety disorders can strike people of all ages. Parents should look for patterns. If an isolated incident is resolved, don't make it more significant than it is. But if a pattern emerges that's persistent or pervasive, consider discussing the issue with your pediatrician. If appropriate, your physician can put you in touch with a qualified mental health professional, who can help correctly diagnose the problem and provide effective treatment to help your child overcome his or her fears.

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