



Back to School Anxiety Guide

Anxiety is not in itself an illness; it is an emotion that we will all feel. Anxiety is brought on when we come up against a situation and don't know what the result will be. For example, getting exam results, meeting someone for the first time, starting a new sport or hobby. We don't know for sure how these situations will go, so we can begin to think different outcomes and it can make us feel nervous or even worried.

Where anxiety begins to become an issue and something that we need help with is when it starts impacting our lives, when we stop socialising, exercising or adapting our lives to avoid these unpleasant feelings.

It's normal for children and teens to feel anxious about school starting up again after the long summer break. Whether it is transition from Year 6 to Year 7 – starting a fresh at secondary school; changing from one school to another; new environment, new faces, new subjects; moving from one key stage to another and so on. The transition can be stressful and disruptive for the entire family.

Anxiety in children and teens can present in different ways. In the days leading up to school starting there may have been temper tantrums, complaints of headaches, crying, feeling unwell, stomach pains, being withdrawn, pleading or bargaining not to go back to school and irritability/anger. These are all signs of anxiety and to some degree normal and completely justified.

Anxious children and teens worry about many different school-related issues, such as teachers, friends, fitting in, and/or being away from their parent/carers.



Let's Understand Anxiety and What Could Cause it...

Some common worries include:

- What will my teacher(s) be like?
- Will any of my friends, be in my class?
- Are my clothes/uniform OK?
- Will I look stupid?
- Will I be able to make new friends?
- Taking part in classroom activities.
- Who can I ask for help/asking for help in class?
- Taking part in school performances
- What if I miss the bus?
- What if the lessons are too hard for me?
- I can't remember anything I learned last year! What if something bad happens while I am at school?
- For some students like Y11's they are aware this is a vital year – all they have been doing for the past few years has led up to the final year/exams



Social anxiety can be a challenge to recognise in an educational setting because it can be masked by presenting as behavioural issue – refusing to go to school, acting out in class to avoid having to present or read in front of the class etc.

So, when does this become a concern?

- Refusing to go to school
- Showing continuous signs of distress, sadness, worry, anger, anxiety
- Increase in behavioural issues like detentions
- School feedback – teachers may report they are concerned about them, academic progress may not be made etc.
- Isolation - staying in their room, staying out late, a general avoidance of school related activities, events etc...

What we can help with:

- Children and teens can be less likely to acknowledge that their fears are irrational, especially when they are away from the situation. We need to provide opportunities to talk about worries and anxiety provoking situations, explore them asking for descriptive words around the feelings
- Develop coping strategies that are tailored to the individual's need: parent/carer or child – keeping the child or teen's needs at the heart of any intervention; using simple plain language, other communication aids like pictures, symbols etc; taking into account their developmental levels, emotional maturity and cognitive capacity like learning disabilities
- Help and support in implementing/ practicing coping strategies and social skill training like how to ask for help, problem solving
- Help and support interactions with healthcare professionals and staff by preparation children, teens parents/carers attending appointments/assessments – for example making a list of questions they may wish to ask; socially anxious children and teens may be reluctant to speak to unfamiliar person
- Raise awareness of social anxiety – it is a recognised condition and can be effectively treated; it's not a personality flaw or failing; support those feeling vulnerable to the stigma and embarrassment that can be attached to it

At Arthur Ellis, we are working with educational settings to increase awareness and empowering staff and students with the tools to recognise and manage anxiety – children and teens spend a lot of their waking time at school and are the first places where early warning signs can be picked up.



How can we support our children if we think they are anxious?

Skipping school will only increase your child's fears because they never get a chance to find out if their worries are valid. Additionally, when children and teens stay home because of anxiety, they can miss a variety of valuable opportunities;

- To develop and practice social skills;
- Important chances for success;
- Being acknowledged and praised for talents;
- Fostering close friendships with classmates and learning.
- To discover who they are and build their identity



Some Helpful Tips:

- Nourish the mind and body: your child getting enough sleep, eating regular meals and healthy snacks and has daily exercise will ensure they are in a better place to learn and develop. Most schools have breakfast club if having breakfast at home is challenging. Several reasons for this: time, not everyone fancy eating soon as they wake up, affordability etc. A decent breakfast puts your child in a good frame of mind ready for learning.
- Active listening: Listen to your child's concerns and worries. Their anxieties may be insignificant to you but from your child's perspective they are 'big'. There may be good opportunities to simply listen to your child when you are in the car, standing in line at the store, at bath-time (younger children) or during dinner. For some children and teens this "casual" method of talking feels less intense and makes it easier for them to express themselves. For others, a private time with undivided attention feels better. Ask open questions like how was school? what's worrying you, tell me what happened? What would you like to happen? Create an opportunity for your child to share their fears and talk about what's on their mind.
- Be helpful: if you know what is bothering your children, collaboratively, help and support them to find and develop coping strategies. Anxious teens are often poor problem solvers and doubt their ability to cope. Addressing your child's fear head on, by creating an active plan with concrete solutions, will significantly reduce their worries. For example, "If (the worst) happens, what could you do?" or "Let's think of some ways you could handle that situation." This gives you the opportunity to coach your child on how to cope with (and interpret) both real and imagined scary situations.
- Focus on the positive: redirect attention towards the positives. Having an increased understanding of your child's concerns, helping them with a coping plan enables you and your child focus on 'what is working'. Positives tend to get overlooked and can help get a better perspective on issues.
- Modelling: children especially young ones pick up on cues from parent/carers quickly. Therefore, it is important to be mindful how parent/carers react and deal with their own worries and that of their children. For parent/carers of younger children or children starting at a new school, it can be anxiety-provoking for parent/carers to hand over care and responsibility of their child to teachers. So, the more confidence and calm parent/carers can model, the more your child will believe they can handle this new hurdle. Be supportive.



How to Get Better

According to National Institute for Health and Care Excellence (NICE) Guidelines. Social Anxiety Disorder (previously known as 'social phobia'), is persistent fear of or anxiety about 1 or more social situations that involve interaction, observation and performance that is out of proportion to the actual threat posed by the social situation.

Most anxiety disorders have a relatively early age of onset with symptoms and syndromes likely to have started in childhood or adolescence.

Anxiety disorders in children and young people commonly run a chronic course and are associated with increased risk of other serious mental health problems, including depression and substance misuse. Therefore, early identification and treatment of anxiety disorders in children and young people is important. Poor recognition, inadequate assessment and limited awareness or availability of treatments may limit access to effective interventions.

The role of families, carers and support networks is vital in helping the individual with anxiety issues – and should, where possible, be involved in the assessment, treatment and care.



NICE Recommends

For social anxiety the average age of onset is 13 years old. Despite the extent of distress and impairment, only half of those with the disorder ever seek treatment and those who generally only seek treatment after 15-20 years of symptoms! Also because of the early age onset – recognition in school setting can be challenging

Social anxiety is the most common anxiety condition. There is a significant degree of comorbidity between social anxiety disorder and other mental health problems like depression, substance-use disorder, generalised anxiety disorder, panic disorder and PTSD. Social anxiety is the most persistent anxiety disorder.

A significant number of adolescents with social anxiety recover before reaching adulthood however if the disorder continues into adulthood, the chance of recovery in the absence of treatment is low in comparison to other common mental health problems.



Interventions for children and young people with social anxiety:

- CBT focused on social anxiety – either 1:1 or in groups
- 1:1 support – usually between 8 – 12 sessions lasting 45 minutes’ to include psychoeducation, exposure to feared or avoided social situations and training in social skills and opportunities to rehearse skills in social situations
- Group work – 8 -12 sessions of 90 minutes with a group of children or young people of similar age which would be based around psychoeducation, exposure to feared or avoided social situations, training in social skills and opportunities to rehearse skills in social situations.
- Psychoeducational and skills training for parents, particularly those with young children to promote and reinforce their child’s exposure to feared or avoided social situations and the development of skills.

Young people aged 15 years and older who have the cognitive and emotional capacity may consider psychological interventions developed for adults.

Intervention needs to be mindful of the child’s or teen’s emotional, educational and social needs because maintenance and treatment can impact on home, school and wider social environments – effective interventions involve parents/carers, teachers, other significant adults, peers as these create a support network aiding treatment goal.

What NICE does NOT recommend

- Pharmacological interventions to treat social anxiety in children and young people is not routinely recommended
- Mindfulness-based intervention or supportive therapy to treat social anxiety disorder

Arthur Ellis: Mental Health Support operate a 1:1 Mentoring Service to provide support to children (from 8 years old), young people and adults. We work with individuals to help them develop strategies for their exact needs to help you recover and move forward from any mental health related issues.

To find out more, visit

<https://www.arthurellismhs.com/mentoring/>

