

Common Mental Health Disorders Among Children

Mental health disorders in children — or developmental disorders that are addressed by mental health professionals — may include the following:

Depression and other mood disorders. Depression is persistent feelings of sadness and loss of interest that disrupt a child's ability to function in school and interact with others. Bipolar disorder results in extreme mood swings between depression and extreme emotional or behavioral highs that may be unguarded, risky or unsafe. Children/youth may present as being “angry all the time” or resort to isolation. Please be mindful that there is a tremendous amount of guilt attached to these behaviors. As frustrating as it may be, move into the idea of offering your child support softly and with compassion.

Anxiety disorders. Anxiety disorders in children are persistent fears, worries or anxiety that disrupt their ability to participate in play, school or typical age-appropriate social situations. Diagnoses include social anxiety, generalized anxiety and obsessive-compulsive disorders.

Attention-deficit/hyperactivity disorder (ADHD). Compared with most children of the same age, children with ADHD have difficulty with attention, impulsive behaviors, hyperactivity or some combination of these problems.

Eating disorders. Eating disorders are defined as a preoccupation with an ideal body type, disordered thinking about weight and weight loss, and unsafe eating and dieting habits. Eating disorders — such as anorexia nervosa, bulimia nervosa and binge-eating disorder — can result in emotional and social dysfunction and life-threatening physical complications.

Post-traumatic stress disorder (PTSD) and Acute Stress Disorder (ASD). PTSD is prolonged emotional distress, anxiety, distressing memories, nightmares and disruptive behaviors in response to violence, abuse, injury or other traumatic events. Remember trauma is subjective, meaning what you as an adult might feel should not be an issue could be considered a traumatic experience for a child (i.e. moving multiple times, not being able to have closure to an event, family secrets).

ASD can present similar to PTSD, however, it resolves within a month. PTSD lasts a lot longer.

For **young children** there are warning signs which you may be able to identify. Below is a list of some of the most common signs, however, this is not an exhaustive list.



- ✓ Your child is hitting or bullying other children.
- ✓ Your child is avoiding friends and family.
- ✓ Your child is lacking energy or motivation....sometimes this is labelled this as “laziness”. Please be mindful if you see this behavior as it could be an important sign to investigate.
- ✓ Your child is having more difficulty at school...sometimes labelled as “hard-head, or not a good listener”. Please be mindful that sometimes your child could want to listen & focus, but simply cannot concentrate.
- ✓ Your child is attempting to injure himself...sometimes parents label this as “seeking attention”. Please note that even if they are desiring this attention, it is still an opportunity to find out reasons your child feels that his/her needs are not being met.
- ✓ Your child is experiencing intense emotions such as angry outbursts, mood swings or extreme fear. sometimes labelled as “bad”.
- ✓ Your child is having difficulty sleeping, or is having a lot of nightmares....sometimes labelled as “dramatic”
- ✓ Your child has a lot of physical complaints.
- ✓ Your child is neglecting his or her appearance.
- ✓ Your child is obsessed with his or her weight, shape, or appearance....sometimes label “vain”
- ✓ Your child is eating significantly more or less than usual....sometimes labelled as “greedy” or “just a growth spurt”. Please see this change as an opportunity to get to know and understand your child more.

Please remember we are just an email or phone call away. If unsure of what to do and need additional support please reach out.

Sincerely,

WMRCC team