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School and Family Impairment Associated with Childhood Anxiety Disorders: Examining Differences in Parent and Child Report

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Abstract: Impairment in functioning is a requirement for diagnosing psychopathology, identifying individuals in need of treatment, and documenting improvement with treatment. Further, identifying different types of functional impairment can quide educators and treatment providers. However, most assessment tools focus on symptom severity and few measures assess impairment associated with childhood anxiety disorders. The child- and parent-report versions of the Child Sheehan Disability Scale (CSDS) are measures that may provide useful information regarding impairment. The purpose of the present study is to examine whether children diagnosed with different anxiety disorders have greater impairment in school or home functioning based on self or parent report. The sample consisted of 844 children ages 5 to 19 years of age (mean 13.43, 61% female, 90.9% Caucasian), including 281 children diagnosed with obsessive compulsive disorder (OCD), 200 with generalized anxiety disorder (GAD), 176 with social phobia, 83 with separation anxiety, 61 with anxiety not otherwise specified (NOS), 30 with panic disorder, and 13 with panic with agoraphobia. To assess whether children and parents reported greater impairment in school or home functioning, a multivariate analysis of variance was conducted. (The assumptions of independence and homogeneity of variance were checked and met). A significant difference was found, Pillai's trace = .143, F (4, 28) = 4.19, p < .001, partial eta squared = .04. Post hoc comparisons using the Tukey HSD test indicated that children report significantly greater impairment in school with panic disorder (M=5.18, SD=3.28), social phobia (M=4.95, SD=3.20), and OCD (M=4.62, SD=3.32) compared to other diagnoses; whereas parents endorse significantly greater school impairment when their child has a social phobia (M=5.70, SD=3.39) diagnosis. Interestingly, both children and parents reported greater impairment in family functioning for an OCD (child report M=5.37, SD=3.20; parent report M=5.59, SD=3.38) diagnosis compared to other anxiety diagnoses. (Additional findings for the anxiety disorders associated with less impairment will also be presented). The results of the current study have important implications for educators and treatment providers who are working with anxious children. First, understanding that differences exist in how children and parents view impairment related to childhood anxiety can help those working with these families to be more sensitive during interactions. Second, evidence suggests that difficulties in one environment do not necessarily translate to another environment, thus caregivers may benefit from careful explanation of observations obtained by educators. Third, results support the use of the CSDS measure by treatment providers to identify impairment across environments in order to more effectively target interventions.

Keywords: anxiety, childhood, impairment, school functioning

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