

Worries, Wonders, Fears and Fantasies

By Kay Kosak Abrams, Ph.D.

Dear Dr. Kay:

Our 11-year-old daughter, Molly, has a vivid imagination. She worries about doom and gloom, like pets that might die and the end of the world. Her dad tells her that she needs to "come back to reality." We feel she is too sensitive and dramatic. She can really lose it and exhaust the family with her exaggerated fears. My nephews are science fiction fanatics, so love of fantasy runs in the family. Molly also reads suspense novels, talks about witches and watches scary movies that put ideas in her head that hang on for months. Our family has had a rough few years with some family illness, surgeries and stress. We don't know if her imaginings are normal and healthy. When should we be worried about our daughter's drama?



Dear Parent:

Psychologists draw the line between normal and abnormal by examining how a child is functioning in school and at home. We look at social and emotional functioning, along with development. As children face normal challenges, including fears and worries, they are practicing ways of coping. We look to see if their means of coping are adaptive.

Molly sounds very bright and sensitive. She may express her stress in an effort to work through it and also to secure attention. If the family has been burdened with an unusual load of loss, she may be anticipating more loss in order to prepare herself. Molly may be inclined to drama and to imagining the "worst case scenario" in order to cope with anticipated fears or failures. This gives her a sense of control over things that are out of

Photo illustration by Suzanne McDonnell

her control. Her fantasy world can also be a creative way to work through intense feelings about illness and death.

Some overly sensitive children are explosive and highly emotional. Family members get pulled in, trying to calm them. In the end, everyone feels helpless because there is nothing rational about fear. This can be exhausting.

Fascination with death or war, violent games or alien life is entertainment for many children

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and adults. This kind of fantasy can function as an escape from life's real stressors that are harder to manage than pushing a button that "kills the enemy." Turning the darker side of life into something fun or bizarre by enjoying a good murder mystery is effective coping. Having curiosity or faith in an afterworld can be a child's healthy search for meaning or comfort.

However, the child who is isolated from school and family, who may engage in violent games or movies too often or expresses morbid fantasies through drawings and strange clothing is likely to be sending out "red flags" for help. Furthermore, some children who have been through extraordinary experiences can feel quite depressed, numb or alien inside, and they may feel like they do not belong with the mainstream. Behaving in ways that are out of the ordinary can be their way of displaying or coping with such feelings.

When anxiety results in thoughts about topics that are far removed from reality, such as believing that a terrorist lives in the neighborhood, seeing aliens at the bus stop or thinking that a shark is going to come up through the bathtub drain, it may be time to consult a professional. Other conflicts or painful experiences may precede such thinking, or there may be an inheritable thought disorder. This is not to say that kids with terrific imaginations do not come up with some pretty far out things. Parents must

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rely on their intuition or consult a professional to distinguish between a creative child's fun fantasy and a troubled child's disturbing and unrealistic beliefs.

Children vary in their psychological and emotional resilience. That means that while we all witness hurts and tragedies in life, how we deal with such events differs. Positive outcomes are more likely for those who have strong defenses; creativity and imagination helped many artists express life's tragedies. However, children who are overly sensitive, anxious or angry have a harder time managing the hurts and wounds. Be careful not to expose children prematurely to news and media that are overwhelming for them.

Fears and worries in daily life are normal, as are curiosity about death, an after life and suicide. But if a child is ruminating or preoccupied with such topics, parents need to be alert to underlying and unresolved emotional conflict. When children experience a painful loss, are mistreated or bullied, feelings of hurt and anger may fester. Needs for control and opposition may increase. Talking about feelings and ways to be assertive is key. If a child is prone to depression, she may have a tendency to stay stuck in fear and sadness. She also needs extra support to pull out of the negative thinking and regain a healthy perspective.

How a child copes with the dark side of life tells us about her capacity to hold onto optimism and hope over doom and gloom. We teach children how to reason and problem solve every day. We model how to grieve and turn tragedy into purpose.

In the end, the world is full of good and bad. Our children know that, so they resort to fantasies of being the super hero. They dress up like vampires on Halloween. They dramatize the wonder of the woes and the worries. When they are overwhelmed, we will help throw them a safety net, because it is our job to help them build the resilience to cope and make their way.

Kay Kosak Abrams is a psychologist in private practice in Garrett Park, Md. "Parenting with Confidence" coffeehouse sessions take place on-site at area schools, as well as on the fourth Thursday of each month at Beth El Congregation in Bethesda, October through June. (The November program will be on the 17th; there is no program in December.) Visit www.kayabrams.com for more information.



Is your Child Sad, Having Trouble Sleeping, or Not Enjoying Things?

If so, he/she may suffer from major depression.

NIMH would like to talk to you about participation in an ongoing depression study for children and adolescents.

Symptoms of depression can also include:

- Hopeless thoughts Recent weight gain or loss More time spent alone
- Losing interest in favorite activities Being more tired than in the past

Participation includes:

- Medical evaluations Psychotherapy or treatment medication
- Brain imaging Outpatient visits over 8 weeks at the NIH Clinical Center

Participants must:

- Be 8-17 years old Be otherwise medically healthy
- Not be taking any psychiatric medications

Thorough evaluation & participation provided free of charge. Travel reimbursement available.

For more information call: 301-496-5645 (TTY: 1-866-411-1010) http://patientinfo.nimh.nih.gov or for other studies: www.clinicaltrials.gov



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