



When to Bring Your Child to a Therapist

By Michelle Miller, PsyD

Parents often ask, “is this normal?,” in response to their children’s behaviors. Being a parent does not come with a manual that guides you on how to raise your child, let alone when your child needs more help than you can offer for their mental health. By the time parents reach out to me for therapy for their children, most often they have spent weeks, months, or sometimes even years contemplating whether or not to bring their child in for treatment. If you have been contemplating bringing in your child for psychological treatment and have tried different ways to resolve their difficulties with no success, it may be time to bring your child to a therapist. Here are six areas to consider in helping you make that decision:

1. **Noticing a change in daily habits.** A significant change in daily habits, such as sleeping, eating, and social activities can be a reason to reach out to a mental health clinician. With sleeping pattern concerns, this includes sleeping significantly more than usual, such as taking naps for hours during the day, even after sleeping through the night. Your child may alternatively have started to complain of struggling to fall asleep each night or that they keep waking up and can’t fall back to sleep.

Significantly reducing their involvement in social activities and school work is another possible symptom of a psychological problem. Parents should also consider reaching out to a therapist if they notice that their child is more withdrawn from their family and peers as this is a common symptom of depression, as well as other mental health problems. It is also concerning if your child starts performing poorly in school unrelated to having more challenging work, receives increasing complaints from school staff or sports coaches, or stops engaging in activities that they had previously enjoyed.

Any major change in eating habits unrelated to a growth spurt is another cause for concern. Parents may need to consider seeking professional help if their child becomes very picky with food, eating less during meals, and also cutting out different food groups. This is most concerning when they are also complaining about their weight or shape of their body. Alternatively, eating disorder symptoms may manifest as a child eating significantly more while distressed and/or sneaking foods. Symptoms of purging, such as a child frequently using the bathroom immediately after eating or exercising excessively for hours at a time with a focus on changing their body size, may warrant seeking mental health support.

2. **Inappropriate change in development.** Another reason to seek help from a mental health professional is if you notice that your child has started to engage in behaviors that would be inappropriate for their age. For example, if a child who has been potty trained for years, starts to request to wear diapers again or begins wetting or soiling themselves. Some children become very fearful when they have to separate from their parents to the extent that they will not sleep alone and/or go into another room or building without their parents. These children are typically plagued with the fear that harm will come to them and/or their parents and avoid separation to cope with their anxiety.
3. **Use of drugs or alcohol.** It's not unusual for teens to be curious about more risky behaviors, such as using alcohol and drugs. However, if you find that they are using drugs and/or alcohol frequently or showing physical signs of drugs or alcohol use (e.g. blood shot eyes, slurring their words, changes in weight, tremors, or unusual smells on their breath or clothing), missing school or other activities more often, getting in trouble more often (e.g. fighting with others, getting suspended from school, etc.), or any other signs that they might have developed a problem with substance use, then reaching out to a mental health professional is strongly recommended.
4. **Experiencing a traumatic event or showing an abnormal response to normal life stressors.** Having your child meet with a mental health professional can also be helpful when they experience an event that could be traumatic. This includes witnessing violence between family members, experiencing abuse, developing a life-threatening medical condition, or having a parent or sibling experience a life-threatening medical condition or pass away. A related reason to bring a child to see a therapist is if they react to normal life events as if they are traumatic events. For example, if a child cries every day for a month about getting a disappointing grade in school, then psychotherapy could be useful in teaching them to better cope with daily stressors.
5. **Sudden and lasting change in mood.** Any major change in mood, such as increased irritability, anxiety, or sadness that is frequent, intense, and has lasted for at least two weeks, could also be a mental health concern. For example, if your child worries most of the day and this has occurred for multiple months, then it is likely that therapy would be of benefit to them.
6. **Risk of harming themselves or others.** If your child has been talking about death or suicide frequently, engages in self-injurious behaviors (for example cutting themselves or punching a wall), or shows excessive physical aggression to others then bringing your child to a therapist is a critical and a more time-sensitive intervention. If you have concerns that your child could seriously harm themselves or others in the near future then

you should seek immediate attention from a local crisis center or emergency room. Whenever there is a safety issue, it is most important to reach out for help.

Michelle Miller, PsyD, is a licensed psychologist in New York and New Jersey. She specializes in the application of Cognitive Behavioral Therapy (CBT) to Tourette's Disorder, autism spectrum disorders, body focused repetitive behaviors (such as obsessive compulsive disorder, skin picking, and trichotillomania), and eating disorders. Dr. Miller has been extensively trained in the application of evidenced-based treatments to a wide range of other psychological problems including, but not limited to, depression, trauma, specific phobias, oppositional and aggressive behavior, and self-injurious behavior. She has expertise in neuropsychological testing, including evaluations for autism spectrum disorders, learning disabilities, ADHD, and gifted children.

Dr. Miller supervises psychology graduate students at Rutgers University in CBT and psychological testing. She has also worked with children, adolescents, and adults in a range of settings, including inpatient programs, the psychiatric emergency department, a residential treatment facility, and different outpatient programs throughout New York and New Jersey.