



What does the USPSTF recommend?



Children and adolescents aged 8 to 18 years:

Screen for anxiety.



Children 7 years or younger:

The evidence is insufficient to assess the balance of benefits and harms of screening for anxiety.



To whom does this recommendation apply?

This recommendation applies to children and adolescents 18 years or younger who do not have a diagnosed anxiety disorder and who are not showing recognized signs or symptoms of anxiety.



What's new?

This is a new USPSTF recommendation.



How to implement this recommendation?

- There are multiple treatment options available, including medications, counseling, a combination of these approaches, and collaborative care, which is a team approach where the primary care clinician works with a behavioral health care manager and psychiatrist to ensure patients receive the best care.
- Clinicians should be aware of the risk factors, signs, and symptoms of anxiety, listen to any patient concerns, and make sure that persons who need help get it. Youth diagnosed with anxiety and their healthcare professional should decide together with the parents or guardians what treatment is right for them.



What additional information should clinicians know about this recommendation?

- Although all youth aged 8 to 18 years are at risk for anxiety and should be screened, there are factors that increase the risk. Risk factors for anxiety disorders include genetic, personality, and environmental factors, such as attachment difficulties, conflict between parents, parental overprotection, early parental separation, and child mistreatment. Certain groups are also at increased risk, including LGBTQ youth, transgender youth, and older adolescents aged 12 to 17 years.
- In the absence of evidence, healthcare professionals should use their judgement based on individual patient circumstances when determining whether to screen for anxiety in youth 7 years or younger.



Why is this recommendation and topic important?

Anxiety disorder is a common mental health condition in the US. According to the 2018–2019 National Survey of Children’s Health, 7.8% of children and adolescents aged 3 to 17 years had a current anxiety disorder. Anxiety disorders in childhood and adolescence are associated with an increased likelihood of a future anxiety disorder or depression.



What are other relevant USPSTF recommendations?

- Screening for depression and suicide risk in children and adolescents
- Primary care–based interventions for illicit drug use in children, adolescents, and young adults
- Information on additional mental health recommendations in children and adolescents from the [USPSTF](#) are available



What are additional tools and resources?

- The Community Preventive Services Task Force recommends:
 - [Targeted school-based cognitive behavioral therapy](#) programs to reduce depression and anxiety symptoms
 - [Individual cognitive behavioral therapy](#) for symptomatic youth who have been exposed to traumatic events
 - [Group cognitive behavioral therapy](#) for symptomatic youth who have been exposed to traumatic events
- The [Centers for Disease Control and Prevention](#) has information on anxiety in childhood



Where to read the full recommendation statement?

Visit the [USPSTF](#) website or the [JAMA](#) website to read the full recommendation statement. This includes more details on the rationale of the recommendation, including benefits and harms; supporting evidence; and recommendations of others.