A STUDY ON THE PREVALANCE OF ANXIETY DISORDERS AMONG HIGHER SECONDARY STUDENTS

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Abstract

Anxiety disorders are the most common and frequently occurring mental disorders especially in school children. They include a group of conditions that share extreme anxiety as the principle disturbance of emotions or mood. In the present study the investigator made an attempt to find out the prevalence of anxiety disorders among higher secondary students in Trivandrum district (Kerala, India). The sample selected for the study consisted of 100 higher secondary students from different schools of Trivandrum district. The tools used were Screen for child Anxiety related disorders (SCARED) and personal data sheet. The statistical techniques used were percentage analysis and t-test. The results of the study revealed that 56.8% of the population experience one or the other type of anxiety disorder and that the females were found to have high score on generalized anxiety, separation anxiety and total anxiety. The presence of anxiety disorders among the adolescents calls the attention of the parents, teachers and educationalists to take actions for the improvement of mental health of school children.

Key words: Anxiety, Anxiety disorders, prevalence, adolescents, higher secondary students

INTRODUTION

Anxiety is a normal reaction to stress. It helps one deal with a tense situation in the office, study harder for an exam, and keep focused on an important speech. In general, it helps one cope. But when anxiety becomes an excessive, irrational dread of everyday situations, it has become a disabling disorder. The term anxiety is usually defined as a diffuse, vague, very unpleasant feeling of fear or apprehension [Sarason & Sarason, 2007¹]

An anxiety disorder is a serious mental illness. For people with anxiety disorders, worry and fear are constant and overwhelming, and can be crippling. People suffering from an anxiety disorder are subject to intense, prolonged feelings of fright and distress for no obvious reason. The condition turns their life into a continuous journey of unease and fear and can interfere with their relationships with family, friends and colleagues.

But all too often, they are mistaken for mental weakness or instability, and the resulting social stigma can discourage people with anxiety disorders from seeking help. Understanding the facts about anxiety disorders is an important step. Realizing that they are medical disorders which can be treated will help to remove the stigma, and encourage people with anxiety disorders to explore the treatments available.

Classification of Anxiety Disorders

Anxiety disorders are blanket terms covering several different forms of abnormal and pathological fear and anxiety which only came under the area of psychiatry at the very end of the 19th century Current psychiatric diagnostic criteria recognize a wide variety of anxiety disorders. In the present study five anxiety disorders are selected. They are:

1. Generalized anxiety disorder

Generalized anxiety disorder (GAD) is a common chronic disorder characterized by longlasting anxiety that is not focused on any one object or situation. Those suffering from generalized anxiety experience non-specific persistent fear and worry and become overly concerned with everyday matters.

2. Panic disorder

In panic disorder, a person suffers from brief attacks of intense terror and apprehension, often marked by trembling, shaking, confusion, dizziness, nausea, difficulty in breathing etc. These panic attacks, defined by the American Psychiatric Association as fear or discomfort that abruptly arises and peaks in less than ten minutes, can last for several hours and can be triggered by stress or fear, although the specific cause is not always apparent.

3. Social anxiety disorder

Social anxiety disorder (SAD; also known as social phobia) refers to an intense fear and avoidance of negative public scrutiny, public embarrassment, humiliation, or social interaction. This fear can be specific to particular social situations (such as public speaking) or, more typically, is experienced in most (or all) social interactions. Social anxiety often manifests specific physical symptoms, including blushing, sweating, and difficulty speaking.

4. Separation anxiety

Separation anxiety disorder is the feeling of excessive and inappropriate levels of anxiety over being separated from a person or place. Separation anxiety itself is a normal part of development in babies or children, and it is only when this feeling is excessive or inappropriate that it can be considered a disorder.

5. School avoidance anxiety

School refusal is most common in kids who are five to six years old, when they are just starting school and in their first year of kindergarten. It is also common in school-age children who are about 10 to 11 years old, toward the end of the last years of elementary school. In addition to having temper tantrums and crying when it is time to go to school, symptoms that children may have when they don't want to go to school may include vague complaints such as stomachache, headache, nausea ,dizziness ,chest pain ,joint pain etc. School refusal is often the initial presentation of social phobia, particularly in adolescents.

Significance of the investigation

Children as well as adults experience feelings of anxiousness, worry and fear when facing different situations, especially those involving a new experience. However, if anxiety is no longer temporary and begins to interfere with the child's normal functioning or do harm to their learning, the problem may be more than just an ordinary anxiousness and fear common to the age.

When children suffer from a severe anxiety disorder their thinking, decision-making ability, perceptions of the environment, learning and concentration get affected. They not only experience fear, nervousness, and shyness but also start avoiding places and activities. Anxiety also raises blood pressure and heart rate and can cause nausea, vomiting, stomach pain, ulcers, diarrhea, tingling, weakness, and shortness of breath. Some other symptoms are frequent self-doubt and self-criticism, irritability, sleep problems, and in extreme cases, thoughts of not wanting to be alive.

If these children are left untreated, they face different risks such as poor results at school, avoidance of important social activities, and substance abuse. Children who suffer from an anxiety disorder are likely to suffer other disorders such as depression, eating disorders, and attention deficit disorders, both hyperactive and inattentive.

Higher secondary students belong to the adolescent age group. These time period is one of the most vulnerable periods in their life. Along with the changing physical and mental status as grownups they have to face various other problems. As this is a turning point in their life parents and teachers pressurize them to achieve more without considering the child's abilities and interests. In a society like Kerala, where unnecessary importance is given to entrance examinations and

professional courses, it is natural that the children will feel stress and anxiety. These may cause many psychological problems to our future generation.

Attention to youth's mental health will more effectively improve their life standard. This also positively impacts their academic and personal life achievements. The present investigation makes an earnest attempt to find out the prevalence of anxiety disorders among higher secondary students. Thus the present investigation helps to make the society aware of the mental health of children and take necessary steps for the proper development of the same.

Objectives

To study the prevalence of anxiety disorders among the Higher Secondary school students of the Trivandrum District, Kerala

To study the prevalence of anxiety disorder of Higher Secondary students on the basis of gender

Hypotheses

Anxiety disorders are very common among Higher Secondary students

There exists significant difference between males and females on the anxiety score and the five types of anxiety disorders

Methodology

Sample

The sample for the present investigation is selected by using stratified sampling technique. The Sample consisted of a total of 100 higher secondary students (50 males and 50 females) selected from various schools of Trivandrum district in Kerala.

Tools

The tools used for the present study are

- a) Screen for Child Anxiety Related Disorders (Birhamer, Khetarpal, Cully, Brent and McKenzie, 1995)²
- b) Personal data sheet

Statistical techniques

The statistical techniques used for the present study are

- a) Percentage analysis
- b) t-test

Results and discussion

The data was analyzed and the results are presented below

a) Percentage analysis

The percentage analysis was done to study the percentage of anxiety disorders in students. The results are presented in table 1

Table 1
Data and Results of the Percentage Analysis to find out the existence of anxiety in the total population.

Variables	Percentage
Anxiety disorder	56.8 %
Panic Disorder	15%
GeneralizedAnxietyDisorder	13%
Separation Anxiety	4%
Social Anxiety	15.6%
SchoolAvoidance Anxiety	9.2%

Percentage analysis reveals that out of the total 100 samples selected 56.8 % of students experience one or other type of anxiety disorder. 15% were found to have panic disorder, 13 % generalized anxiety disorder, 4% experienced separation anxiety, 15.6 % social anxiety, and 9.2% school avoidance anxiety. Some of the students were found to have a combination of one or two anxiety disorders.

t-test

The t-test was used to compare the anxiety scores of maleand female students and the results were given in table 2

 $\label{eq:table 2} \begin{tabular}{ll} Table 2 \\ Data and Results of the $t-$tests for the anxiety variables: Comparison of male students \\ (N=50) and female students (N=50) \\ \end{tabular}$

Maniah 1-	Male		Female		t-	Significance
Variable	M	SD	M	SD	value	level
Panic Disorder	5.90	3.06	6.75	2.60	1.503	NS
Generalized Anxiety Disorder	7.81	3.33	9.44	3.11	2.52	0.05
Separation Anxiety	4.10	2.26	6.13	2.33	4.41	0.01
Social anxiety	5.65	3.22	6.29	2.42	1.13	NS
School avoidance anxiety	1.35	1.32	1.40	1.25	.192	NS
Total anxiety	24.81	9.56	30.02	6.69	3.17	.01

The result reveals that there exists significant difference between males and females on the variables Generalized anxiety, separation anxiety, and anxiety (total). The mean value for generalized anxiety for males and females are 7.81 and 9.44 and for separation anxiety are 4.1 and 6.13 respectively. This indicates that female students experience more generalized anxiety and separation anxiety than males. This may be because in our culture girls are given more protection and restrictions in the families. Even today in many families the girls are not given enough freedom to become independent and self sufficient. They are taken care of all the family members and are not given any responsibility. This may be the reason for the greater generalized anxiety and separation anxiety among females. The result also reveals that there exists significant difference between males and females on total anxiety. The mean value obtained by males and females are 24.6 and 30.02 respectively. This result indicates that female students experience more anxiety than male students. The result of the present study is in line with the study by Susan et.al,³ which states that girls had higher rate of Anxiety disorders than boys.

Conclusion

The knowledge and awareness attained through the study, in terms of the different variables and results are helpful in understanding the problems faced by our students. Parents, educationalists, teachers, and the government should act in such a way as to reduce the problems faced by our children so as to enhance their mental health. Anxiety disorders can be very disruptive to a child's

life as they feel intense emotions of fear and worry which are not always brought on just by the typical stresses of life. Anxiety disorders cannot be controlled just by will power alone and can affect their sleeping patterns as well as having the symptoms of nausea and headaches.

Some anxiety disorders seem to be related to exposure to stressful events, losses, or traumas. Some conditions appear more commonly in very close knit families, as is the case with separation Anxiety. Some anxiety seems to be at least partially learned from parents who may suffer from anxiety disorders and sometimes they are models of ineffective styles for coping.

Anxiety disorders in adolescents and children are treatable and most effective when the disorder is detected early. Parents of children who show persistent signs or symptoms of anxiety, should consult with their Childs' doctor or pediatrician for a proper diagnosis. The assessment of anxiety is sometimes more difficult with children, who are less verbal and articulate about their internal states. So we have to watch their behavior and physical expressions and listen for signs of anxiety in their stories or other verbal communications.

There are several effective methods for treating all these anxiety disorders in young people. First, a lot of anxiety is learned or the result of mislabeling and over-reacting, so treatment should be initially focused to assist kids to reassess their experiences to encourage a more positive self-interpretation. The second step is to teach relaxation skills, so that young people can learn how to modify their own mental states by breathing and muscle relaxation strategies. A third strategy employs social problem solving: learning how to identify and diffuse anxious situations.

Parents should re-examine their own attitudes and ways of coping with fears and anxieties in their lives. They should let children know that they also experience moments of fear and that they are successful getting through them because they believe in themselves and that fear and anxiety are transient states. Words of reassurance and sharing stories of successful coping show young people that we believe in their emerging ability to face the uncertainties of life. Parents should also take care not to pressurize their children to achieve beyond their capabilities. Government and educationalists should try to re organize the educational system so that the children can maximize their potentials in a stress free manner.

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