

A Review on Childhood Anxiety

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Abstract

The patient will experience stress before undergoing any form of surgery. The fact that the heart is such an essential This article contains detailed data and review evaluations of the concept of anxiety disorder in children. It is one of the currently facing issues by parents, teachers, and surrounding caretakers, which needs meticulous care and management. It feels like a simple psychological feeling but can lead to complex, unpredictable complications. The causes and risk factors may be varied depends on individuality and background situation. The incidence rate shows tremendous increment, and the related issues show very hike. This complicated situation makes the parents in a big dilemma for managing their children and social reactions. The urbanization, industrialization, and job conditions of parents indirectly influenced for making this feelings as a disorder. Majority of humans, especially children, possess various behavioral patterns during their development to adulthood. Although it is a universal truth and normal for all, when it becomes harmful to themselves and others, it can be considered behavioral disorder. It is a common and normal feeling of psychology and its projection appropriate to the situation shows psychological well-being. Hence, its overness and extremity needed proper identification and management. In psychological theories, it is clearly stated about various reactions of children and even adults. When children fail to pass these steps, which results in various emotional tragedies like anxiety disorder. This article deals with the conditions, including its etiological factors, symptoms, various types of anxiety disorders, and its management, including various review studies regarding this concept.

Keywords: anxiety disorder, childhood anxiety, emotional management

Introduction

Anxiety refers to the brain's response to danger, stimuli that an organism will actively attempt to avoid. It is a feeling of apprehension or dread, a feeling that something is going to happen, but the child cannot pinpoint what exactly and might be expressed as a feeling of uneasiness, restlessness, or a sense of forbidding.[1] It is normal for children as well as adults, to feel anxiety or worry in certain situations. The depth of anxiety depends on its causes and seriousness. When this feeling of emotion adversely affects a normal life of an individual can consider as anxiety disorder. The anxiety may be expressed as fear or worry and also can make children to be irritable and angry. This disorder will interfere in day-to-day life in many ways. It can cause trouble for sleeping, also causes fatigue, headache, stomach upset, nutritional problems, etc. Children need professional help to tackle and manage, when it becomes a disorder. The symptoms of anxiety disorder in children will vary depending on their age. According to psychoanalytical thinking, anxiety cannot occur before the age of 6 years. Evans and Action (1972) found an approximately even distribution between male and female children and adolescents.[1] Anxiety often occurs together with other mental health disorders, especially depression. Normal children

experience fear, worry, and shyness. Infants fear loud noises, being startled, and strangers. Toddlers are afraid of the dark and separation from caretaker. Preschoolers fear imaginary creatures and body mutilation. School-age children worry about injury and natural events. These kinds of fears produce a certain level of anxiety, and it is tolerated by most of the children. Hence, anxiety can be considered to be a normal reaction to a perceived threat. Anxiety disorders also can occur as a result of disrupted modulation of the central nervous system. Disruption of the gamma-butyric acid system may also play a role in the occurrence of this disorder.[2]

Possible causes of childhood anxiety Include

- Stressful life events
- Frequently changing school or house (some children feel adaptation stress)
- Negative parenting
- Poor or negative parent relationship

- Death of a closed person or pet
- Break in an affective relation
- Being abused or neglected
- Serious illness or injury
- School-related issues
- Negative student–teacher relationship
- Bullying[3] etc.

Symptoms of childhood anxiety Includes

- Feeling difficulty to concentrate
- Disturbed sleep pattern and bad dreams
- Cannot have food properly
- Easily get irritation and angry
- Looks worry with negative thoughts
- Gastrointestinal disturbances or frequently using a toilet
- Crying and being clingy
- Complaints of illness
- Feel hopeless [4]

different Types of childhood anxiety disorders Include

Generalized anxiety disorder

If a child worries excessively for any reason can be a general anxiety disorder. They seek constant recognition, approval, and support from others. They desire an outsource assurance for any of their activities or decision. These type of children seems to be very hard and strive for perfection in their activities. From 3 to 12% of children experience generalized anxiety disorder and 8–9 years of age is a common time for its emergence.[5]

Panic anxiety disorder

Panic anxiety attacks can occur spontaneously without any reason and the following another attacks can occur within 1 month. It shows repeated episodes with intense fear and discomfort. If it is not diagnosed and treated, can leads to complication and it will be devastating. The risk of panic disorder ranges from 0.4% in adolescent boys to 0.7% in adolescent girls.[5]

Separation anxiety disorder

Most of the children might have an experience of separation anxiety. From toddlerhood onward it can be a negative feel when parents leaves the room or go out. Normal children can be easily distract from this ill-feeling, but some children will be stuck in this feel and exhibit aggressive and extreme outbursts of anger, tension, insecurity, and worry.[6] Furthermore, the effects may lead to school phobia or school refusal, sleeping disturbances, cannot sleep without parent(s), becoming more demanding, etc.

Social anxiety disorder

It is characterized as a phobia or extreme fear of facing society, large crowd situations, or a public place activity. This disorder can adversely affect school performance and maintaining peer and social relationships. It will hamper the psychosocial development of children. These can make the children more introverted. They show irritation, excessive perspiration, fear, speech disturbances, etc.[6]

Selective mutism

Children who are not interested in maintaining rapport with others or friends will alter their social development. These children may fail to make friends and relationships. They cannot communicate and feel difficulty sharing their feeling. They lack expressions and movement. They will withdraw from surrounding activities and feel disturbed in groups.

Some phobias

Phobia is an intense fear of a specific object or situation. It is normal in most of the humans, but extreme manifestation shows the symptoms of the disorder. The child may stay away from the objects or situations, dreads it or endures it with so much fear and which interferes with normal activities. Examples include fear of animals, insects, blood, height, flying, open spaces, etc.[7]

Obsessive–compulsive disorder (OCD)

It is characterized by unwanted intrusive thoughts and feelings compelled to perform the routines and rituals repeatedly. Children with OCD may go undiagnosed till the age of 10 years.[6]

Post-traumatic stress disorder (PTSD)

Children with PTSD may have intense fear or anxiety about many factors, such as people, object, situation, scenario, etc. It may occur in some children after witnessed or experiencing a traumatic event. These children cannot face or tolerate such condition, and they exhibit violent and different anxiety behavior. Estimates of the incidence are hard to obtain. It is assumed that about 40% of youth have an episode of trauma that could lead to PTSD and that 6% have symptoms of the disorder.[5]

Management of anxiety disorder In children

Early identification and treatment can cure this disorder easily. Constant monitoring and care is needed for children to understand the depth and causes. Also must rule out the underlying causes and precipitating factors. Family members, school teachers, and caretakers can give psychological support to reduce its severity. Therapeutic management includes

Cognitive-behavioral therapy is effective, especially in older children. This therapy, combined with medication, can be recommended for more effectiveness. It acts as a way of altering the way or pattern of thinking and thus changing the emotions.[8]

Acceptance and commitment therapy is another type of therapy which uses mindfulness as a way to cope with unwanted thoughts and feelings. Counseling is also recommended.

Selective serotonin reuptake inhibitors are the drugs of choice currently used. Other types of medications, such as tricyclic antidepressants and benzodiazepines, are less commonly used to treat children.[9]

Research studies related to childhood anxiety revealed many facts. Bhatia and Goyal mentioned in their studies that high prevalence of anxiety disorders among school-going children belonging to the middle and upper classes.[10] Beesdo et al. reported in their studies that identification of characteristics that could serve as solid predictors for onset, course, and outcome would require a prospective design that assesses a wide range of vulnerability and risk factors. The type of information is important for improved early recognition and differential diagnosis as well as prevention and treatment in this age span.[11]

Conclusion

The incidence rate anxiety disorders among children are increasing due to various reasons. Industrialization, societal changes, familial disturbances, decreased affection, lack of guidance, care, support, psychological ill-health, etc, may lead to the possibility of recurrence. Although it is a true existing feeling in humans, but when it hampers their normal life can be suspected as a disorder. Identification and treatment make complete cureness. Hence, child assessment and care should be an important fact in all families.

Conflict of Interest

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References

1. Yadav M. A Textbook of Child Health Nursing. 2nd ed. Jalandhar: PV Books Publication; 2011. p. 757-9.
2. Kyle T. Essentials of Pediatric Nursing. 2nd ed. New Delhi: LWW Publications; 2008. p. 1061-2.
3. National Health Service. Available from: <https://www.nhs.uk/mental-health/children-and-young-adults/advice-for-parents/anxiety-disorder> [Last accessed on 2023 Jun 13].
4. Available from: <https://childmind.org/guide/anxiety-in-children-quick-guide> [Last accessed on 2023 Jun 13].
5. Ball JW, Bindler RC. Pediatric Nursing: Caring for Children. 4th ed. London: Pearson Education Publications; 2008. p. 1126-229.
6. Available from: <https://www.nimh.nih.gov/health/topics/anxiety-disorders> [Last accessed on 2023 Jun 13].
7. Anxiety Disorders in Children. Available from: <https://www.webmed.com> [Last accessed on 2023 Jun 13].
8. Panic Disorder in Children and Adolescent. Available from: https://www.aacap.org/aacap/families_and_youth/facts_for_families/fff-guide/panic-disorder [Last accessed on 2023 Jun 12].
9. Available from: <https://www.cdc.gov/childrensmentalhealth/depression.html> [Last accessed on 2023 Jun 14].
10. Bhatia MS, Goyal A. Anxiety disorders in children and adolescents: Need for early detection. J Postgrad Med 2018;64:75-6.
11. Beesdo K, Knappe S, Pine DS. Anxiety and Anxiety disorders in children and adolescents: Developmental issues and Implications for DSM-V. Psychiatr Clin North Am 2009;32:483-524

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