# Analysis of Anxiety Disorder and the Relationship with Family 

Bingyuan Chen ${ }^{1}$, Haotian Deng ${ }^{2}$, Yuhan Shi $^{3(\boxtimes)}$, and Yu Tian ${ }^{4}$<br>${ }^{1}$ Solebury School, New Hope, PA 18938, USA<br>2 The Summit Country Day School, Cincinnati 45150, USA<br>${ }^{3}$ Psychology, Arizona State University, Tempe, AZ 85282, USA<br>yshi111@asu. edu<br>${ }^{4}$ Laixi Jinan Road Middle School, Jinan 101001, Shandong, China


#### Abstract

The most widespread and harmful mental health issues are anxiety disorders. The COVID-19 pandemic, according to the World Health Organization, has led to a $25 \%$ rise in the prevalence of anxiety disorders worldwide in recent years. Due to the exceptional stress brought on by the pandemic's state of social isolation, there has been a significant rise in anxiety disorders. In addition, factors linked to depression and anxiety include loneliness, the fear of illness, suffering and death for oneself and loved ones, bereavement, and financial concerns [1]. Moreover, family factors are closely related to the occurrence and maintenance of anxiety. The family environment and the different ways parents discipline their children can lead to anxiety disorders. Parents, for example, show an overly cautious attitude toward the world, and their children may also be more prone to fear and anxiety than the average person. Because if people learn that the outside world is dangerous, they will naturally limit their exploration and risk-taking behavior. This article is a more comprehensive and in-depth understanding of anxiety disorders and how a family of origin affects anxiety. The methods used are reviewing the most pertinent and current/past literature. The results include defining anxiety disorder, DSM-5 Diagnostic Criteria, Etiology, and Treatment. This research paper could raise public awareness of anxiety disorders and how people can better cope with anxiety disorders in the future.


Keywords: Anxiety Disorders • Panic • Family

## 1 Introduction

Disordered reactions to events that cause worry are known as anxiety disorders. Extreme distress and interference with a person's ability to carry out daily activities can result from anxiety disorders. Fear hormones have evolved in humans to help us deal with danger. However, much fear might have negative effects. People who are extremely anxious may tense up their muscles, fidget, sweat, and even experience shock and shortness of breath. Therefore, it is regarded as disordered when experienced with such a strong intensity

[^0]© The Author(s) 2023
B. Majoul et al. (Eds.): ICLAHD 2022, ASSEHR 726, pp. 699-706, 2023.
https://doi.org/10.2991/978-2-494069-97-8_89
that it interferes with social functioning. The interplay of hereditary and environmental variables leads to anxiety disorders. Anxiety disorders can develop as a result of coping with life stressors like family, money concerns, or long-term physical sickness [1].

The public is now more inclined to believe that family may influence anxiety disorders. Some childhood experiences and family circumstances may make some people more prone to anxiety. Specific phobias are one of the most widely recognized mental disorders of anxiety disorders. Specific phobias are intense fears of specific objects or situations that affect $5 \%$ to $12 \%$ of the world's population, making it the largest category of anxiety disorders [2]. The causes of specific phobias are related to childhood and family living environments. For example, parents often leave their children alone at home and may develop separation anxiety and space phobia. A person often enters a state of panic when presented with the object of their fear and exhibits a variety of bodily symptoms, including nausea, a rapid heartbeat, dizziness, and sweaty palms. Phobias, according to evolutionary medicine researchers, are adaptive because they help people identify potential dangers and take appropriate precautions to be safe. Specific phobias can be treated in a variety of ways, including with medication, cognitive behavioral therapy, virtual reality therapy, and systematic desensitization. The link between family and anxiety illnesses must therefore receive social attention.

In the process of children's growth, the family environment and educational philosophy play a key role. The home environment of many people with anxiety disorders is accompanied by chronic stress and negative emotions. Parenting styles and handling of different intimacy are reflected in children. If they do not live their lives positively and positively, they are at risk of developing anxiety disorders later in life. Because a person's behavior and mental health are inseparable from the original family environment, whenever a person has psychological and spiritual problems, it is often closely related to the relationship with the original family as a child. After reading this article, the public can define anxiety disorder using biopsychosocial and cultural perspectives, learning about historical views of it and the progressive development of theoretical perspectives on their diagnosis and treatment. In addition to a more comprehensive understanding of anxiety disorders, this article will also show what impact the family of origin has on anxiety disorders and how families can better help treat anxiety disorders.

## 2 DSM-5 Diagnostic Criteria

To help more people who are suffering from an anxiety disorder, it is essential to know how to judge anxiety disorder. Most anxiety disorder patients show excessive anxiety and worry about some events or activities, and this symptom appears several times during half of the year in the DSM-5-TR (tm) Classification [3]. Based on these criteria, patients will show some symptoms. For the physical part, nausea, muscle tension, shakiness, and some other symptoms, depending on different patients, the symptoms will be different or even more severe. The moving part is also inescapable, feeling keyed up, quickly tired or angry, sleep disturbance, and other symptoms depending on the situation. However, not only anxiety disorder patients will have these symptoms, and someone who shows these symptoms may not get an anxiety disorder. As long as someone shows these symptoms, they need help from others.

## 3 Etiology

There are lots of factors that can cause anxiety disorders. After analyzing many causes of anxiety disorder, patients usually have negative and unforgettable experiences in childhood, puberty, or adulthood that are common causes of anxiety problems [4]. For instance, the definition of panic disorder is to experience both panic attacks and intense anxiety and avoidance for at least one month. However, challenging experience is quite a comprehensive concept, and it is the general conclusion of all causes of anxiety disorders. The factors that cause anxiety disorder vary based on each patient's situation. However, it is easy to find similarities in different anxiety disorders. In childhood, popular causes of an anxiety disorder include frequently moving surroundings, parents' conflict, the death of a close person, becoming seriously ill or getting injured in an accident, schoolrelated issues like exams or bullying, and being abused or neglected [5]. In adolescence, trauma, the death of a loved one, school issues, and experiencing bullying become the most popular causes [6]. Besides all possible causes in childhood and adolescence, drugs and alcohol are potential and non-negligible factors. Besides all the possible reasons, personalities, stress, and other disorders or injuries can also easily cause anxiety disorder.

## 4 The Reason of the Family Environment Causes Anxiety Disorders

The family environment plays an essential role in personality development, and many people with anxiety disorders have a family environment accompanied by chronic stress and negative emotions. Parenting styles and handling of different intimate relationships are reflected in children at risk of developing anxiety disorders later in life if they do not receive a positive and active life.

First, attachment is integral to a child's earliest intimate relationships with their parents and development. Children become attached to their parents as they explore and trust the world. However, when this intimacy is disrupted by separation, children become more dependent, apprehensive, and insecure. Youngsters who claimed to have an avoidant or ambivalent affiliation expressed more anxiety than children revealed as securely bonded [7]. These children become avoidant and more anxious later in life, constantly worrying about being separated from their dependents. When parent-child interactions are compromised, children do not grow up feeling safe and stable.

Second, parental anxiety and other psychological stressors can contribute to a child's anxiety. For example, when parents experience stress in the workplace, family conflicts and the death of a close family member can affect parent-family interactions. When family members are constantly stressed or overwhelmed, their emotions are easily perceived by the children. Moreover, when their negative emotions come out, children do not know how to deal with them because they have never experienced them before. Therefore, they only feel intimidated and defenseless. This will also lead to them being more unable to handle negative emotions such as anxiety. They will only be more apprehensive and intimidated when they reencounter similar situations. Adult observations and observational studies of adolescents demonstrate that these disorders perpetuate and, if treatable, boost the likelihood of adult anxiety, depression, drug addiction, and suicide attempts [8].

## 5 The Impact of Family on Anxiety Disorders

A person's behavior and mental health are inextricably linked to the family environment of origin; no matter when a person develops psycho-psychiatric problems, there is often a solid link to the relationship with the family of origin as a child so that the following will look at three aspects of the family of origin as an anxiety disorder in early childhood.

### 5.1 Intimate Relationship

The development of anxiety is very closely linked to the establishment of attachment relationships. As a kid, attachment relationship directly affects people's emotions, social sexual behaviors, personality characteristics, and basic attitudes towards human communication. The stages of psychosocial development theory proposed by the developmental psychologist Erik Homburger Erikson suggests that the main task in early childhood is to establish essential trust and that infants from zero to one year of age often develop trusting relationships with their parents or those to whom they are attached during this period [9]. So the attachments that a person builds as a child in their family of origin can significantly impact whether they get anxiety later on.

In the experiment of "strange situation" designed by developmental psychologist Mary Ainsworth, the attachment relationship between mother and child can be observed and divided into four types of attachment relationships according to this experiment: secure attachment, avoidant attachment, and ambivalent attachment. According to an analysis of the experiments, children with secure attachments are more confident and less likely to suffer from anxiety. However, people with insecure attachment relationships will have more insecurity about the parent-child relationship and may display ambivalent behavior and repressed emotions. Families with unsafe attachment relationships often have irritability, neglect, and scolding. According to the above description, the relationship between anxiety and the family environment is reflected in the intimate relationship with parents.

The mother has a vital role in intimate relationships. The child derives a sense of security directly from the mother, a characteristic linked to oxytocin. Oxytocin is produced during breastfeeding and when the child is emotionally present. As the production of oxytocin increases, the mother becomes more patient and responsive to her child. More breastfed children will be more patient and affectionate and get along better with others in school, at work, and afterward. At the same time, anxiety is produced, and stress becomes less frequent.

In addition, if a family seems to be falling apart and when a person is experiencing problems in life and work, he or she wants to discuss these difficulties with his or her family and process solutions, often feeling lonely and conflicted, which can also lead to anxiety.

### 5.2 Education Mode

The family is the environment that children first come into contact with after birth. People's attitudes toward studying and working for a long time later will be closely related to the education model received from an early age. The expressions and actions
shown to others in social interactions often come from the educational influence of the family environment. Family parenting style refers to the methods and forms usually adopted by parents in their activities of raising and educating children and is a unique overview of the relative stability of various parenting behaviors of parents. Moreover, all of a child's early behavior imitates that of other family members, so the influence of the home environment is crucial to children. Research has shown a significant correlation between long-term parental misbehavior and a low-income family atmosphere on the probability of children developing mental illness problems.

Research by relevant scholars on family upbringing methods shows that the proportion of high social scores of children who adopt democratic formation is much higher than in tolerance groups and dictatorship, thus concluding that a good mother-child relationship is conducive to children's educational development. Studies have found that children's anxiety symptoms are predictive of parental denial, sarcastic suppression, overprotection, and punitive scolding. Some studies have found a strong relationship between overprotective parenting and child anxiety, with children in low intimacy, more intrusive, or correctional home environments experiencing more anxiety problems with more downward adjustment. In addition, another study shows that if parents' behaviors toward children are mainly regulated, rejected, and inhibited, it will lead to an increased probability of anxiety disorder in children. Both think that research has shown that overprotective parenting behavior has many adverse effects. Overprotective authoritarian parenting models can prevent children from successfully coping with difficulties and challenges within their range of abilities, prolong dependence on parents and seriously affect children's social life skills. Social life skills refer to children's interpersonal relationships and independent behavior in managing everyday life when participating in activities with others. A range of inappropriate educational practices, such as overperformance and authoritarian parenting, can limit the development of children's abilities and lead to low social life skills [10]. Children with soft social skills lose their sense of superiority when they enter kindergarten or school, do not adapt well to group life, are prone to emotions such as low self-esteem, have difficulty solving difficulties in new environments, and are more likely to suffer from anxiety. At the same time, it also shows that parents' upbringing has an essential impact on individuals' psychological development, personality formation, and psychological Defense ability.

### 5.3 Level of Education

Research by education experts has found that parents with a high level of education are much more relaxed in raising their children and show the following common characteristics: They love sports and have good physical fitness. They have a positive sense of self as role models for their children's lives. What is more, they are good at adapting and accepting new knowledge. Reading more books, doing more exercise, and having better self-regulation are good ways to relieve anxiety. Therefore, people who have grown up in this environment will take a more appropriate way to relax in the face of pressure, thus reducing the probability of anxiety disorder.

Families with a high level of education will be more sensitive in detecting a range of mental or psychological disorders such as anxiety and depression in their children. Parents who are more educated know more and are more likely to spot a rain of children.

When a child shows signs of separation anxiety, parents will be able to spot them in time and will give the proper guidance. They often tell their children the principles, lead them correctly and seek medical treatment in time so that children are not in a state of contradictions and struggles. When they conflict with their children's opinions, they often seek principles to reflect on themselves rather than shirk their responsibilities. This positively impacts the child's mental state and makes the child's anxiety disease smaller.

## 6 Treatments

Generally, medical treatment and mental treatment are the two most basic treatments. For instance, Cognitive-Behavioral Therapy is regarded as one of the most effective treatments for generalized anxiety disorder, mental treatment, medical treatment, Psychotropic Medications like Selective serotonin reuptake inhibitors (SSRIs), and Serotonin-norepinephrine reuptake inhibitors (SNRIs) are pretty effective as well. Generalized anxiety disorder is the most prevalent anxiety disorder. In other words, most other anxiety disorders can be considered as they all come from a generalized anxiety disorder, so their treatments will be similar to that of generalized anxiety disorder. However, in most situations, the cured patients can get the anxiety disorder again. Based on the causes, changing patients' current status is vital, and so is the care from others.

## 7 Suggestions

While the family impacts a child's personality and anxiety, it can be improved with therapy and psychological support. Not only that, but people often worry more about their children because of their stress, but that needs to change. They need to stop worrying and fearing excessively. To avoid some patients giving up treatment after a period of treatment because the effect is not apparent, this will make the results achieved earlier fall short of the requirements. If the symptoms improve a little, they are unwilling to insist on treatment, making the condition worse. Establishing a treatment alliance with family members, relatives, friends, and other medical staff is essential to encourage and support patients and take good care of their lives. Colleagues and the public should strengthen the publicity of mental health knowledge, let more people understand the inside of anxiety disorders, and eliminate discrimination. When the patient has a panic attack, the people around him should help the patient in time, soothe the patient's emotions, and not make fun of the patient and increase the patient's psychological pressure.

## 8 Conclusion

Although uncomfortable, anxiety is not entirely detrimental. Similar to how the body experiences pain, it serves as a form of defense. Fear can cause someone to flee a harmful situation quickly, which is advantageous for survival. Fear and anxiety in mind are normal defense mechanisms. People should focus on developing healthy behavior patterns in children from an early age because many fears are linked to the psychological growth of youth. Being terrified of anxiety is unnecessary because it is a common human
experience. It exhibits excessive irrationality, audacity, and lack of fear. It may not always be an indication of a sound personality. Therefore, it is advantageous to support and encourage kids to accept various tests, overcome unwarranted fear, and develop a character of endurance, tenacity, and bravery to confront reality in order to prevent anxiety. This may be done on the basis of empathy and understanding.

## References

1. COVID-19 pandemic drives $25 \%$ increase in global prevalence of anxiety and depression, WHO, 2022. Retrieved from: https://www.who.int/zh/news/item/02-03-2022-covid-19-pandemic-triggers-25-increase-in-prevalence-of-anxiety-and-depression-worldwide [2022-7-30]
2. E. S. Becker, M. Rinck, V. Turke, P. Kause, Epidemiology of specific phobia subtypes: Findings from the Dresden Mental Health Study 22(2), 2007, pp. 69-74. DOI: https://doi.org/10. 1016/j.eurpsy.2006.09.006 [2022-7-30]
3. McLean Hospital, One of the hospitals which has the best mental treatment (SMF), Understanding Anxiety in Kids and Teens, 2022, pp. 47-48. Retrieved from: https://www.mclean hospital.org/essential/anxiety-kids-teens [2022-7-30]
4. Mind, Research organization on mental disorder (SMF), Anxiety and Panic Attacks, 2022, pp. 110-112. Retrieved from: https://www.mind.org.uk/information-support/types-of-men tal-health-problems/anxiety-and-panic-attacks/causes/ [2022-7-30]
5. M. G. Craske, Make surveys on mental disorder (SMF), Treating Clients With Generalized Anxiety Disorder, 2013, pp. 265-268, https://www.apa.org/search?query=causes\ of\ a nxiety\%20disorder [2022-7-30]
6. NHS. The organization analyze adults mental disorder (SMF). Anxiety disorders in children, 2020, pp. 169-170. Retrieved from: https://www.nhs.uk/mental-health/children-and-young-adults/advice-for-parents/anxiety-disorders-in-children/ [2022-7-30]
7. What causes anxiety, $\operatorname{Mind}(02), 2021$. Retrieved from: https://www.mind.org.uk/information-support/types-of-mental-health-problems/anxiety-and-panic-attacks/causes/ [2022-7-30]
8. Anxiety disorders in children, NHS, 2020. Retrieved from: https://www.nhs.uk/mental-hea lth/children-and-young-adults/advice-for-parents/anxiety-disorders-in-children/ [2022-7-30]
9. J. Kagan, R. B. Kearsley, P. R. Zelazo, Infancy: Its place in human development, Harvard University Press, 1973, pp. 34-37. https://www.science.org/doi/pdf/10.1126/science.202.4373. 1177
10. M. Smith, Parental mental health: disruptions to parenting and outcomes for children. Child and Family Social Work, 2004, pp. 3-11. DOI: https://doi.org/10.1111/j.1365-2206.2004.003 12. x

Open Access This chapter is licensed under the terms of the Creative Commons AttributionNonCommercial 4.0 International License (http://creativecommons.org/licenses/by-nc/4.0/), which permits any noncommercial use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons license and indicate if changes were made.

The images or other third party material in this chapter are included in the chapter's Creative Commons license, unless indicated otherwise in a credit line to the material. If material is not included in the chapter's Creative Commons license and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder.


[^0]:    B. Chen, H. Deng, Y. Shi and Y. Tian-Contributed equally.

