

Study: Some common childhood behaviors may lead to anxiety disorders in later life

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New research from the University of Otago has helped identify which specific child behaviors may raise the likelihood of anxiety disorders developing in adulthood and conversely, which ones might give parents,



whānau and childhood experts less cause for concern.

The study, published in the international medical journal *Psychological Medicine* used data from the University of Otago's world-renowned Christchurch Health and Development study (CHDS), a longitudinal study of a birth cohort of 1,265 children born in Ōtautahi Christchurch over a four-month period during 1977.

Undertaken by University of Otago Christchurch Ph.D. student Nathan Monk, the research tracked 15 common anxious behaviors among the CDHS cohort group from ages seven to nine, comparing results as they were interviewed and evaluated over time. The group studied are now aged in their mid-forties.

"Previous international research has already established a link between childhood <u>anxiety</u> behaviors and later anxiety disorders but not with this level of detail" says Mr Monk. "This study is novel in that it allows us to see which specific childhood behaviors are most influential."

Mr Monk and his co-authors have found that several observed childhood behaviors—including a tendency to cry easily and often, a tendency to do things alone as well as regularly appearing sad and miserable—all carried a heightened risk for adolescent and adult anxiety. Conversely, other behaviors such as shyness with other children, being submissive or fearful of authority and afraid of people in general carry no heightened risk of the child developing anxiety when they grow up.

"Basically, what we have found is that childhood anxious behaviors related to social isolation and sadness appear to carry risk for developing an anxiety disorder in later life" says Mr Monk. "In contrast, behaviors related to situational fears and anxiety around adults do not appear to carry the same risk."



CHDS data has previously identified surprisingly high rates of anxiety disorder among the cohort group studied, highlighting the importance of identifying early risk factors—especially among girls. Nearly half (49 percent) of females in the study met the diagnostic criteria for anxiety disorder during adolescence (14–21 years), that figure dropping only slightly to 48 percent during adulthood (21–40 years). Males were also found to meet the criteria for anxiety disorders at high rates, with just over a quarter (27 percent) diagnosed during adolescence, rising to 31 percent in adulthood.

"This research reinforces the importance of actively developing <u>social</u> <u>skills</u> and skills in managing emotions, especially in the first 1,000 days of a child's life where parents and whānau play a key role" says Canterbury District Health Board Child and Adolescent Psychiatrist and University of Otago, Christchurch lecturer Dr. Kat Donovan.

"All tamariki experience anxiety at a certain stage but it only causes concern when it disrupts their development and reduces educational and emotional learning opportunities. These findings support the current early interventional treatment approaches we are currently using such as cognitive behavioral therapy or CBT, developing the child's emotional awareness and encouraging exercises which expose them to their fears and worries."

Dr. Donovan stresses the findings suggest some childhood behaviors are absolutely normal and carry no cause for concern. However, she has some advice for parents and whānau who may find a child's anxiety behaviors especially concerning.

"It's tough for parents and whānau to see their child in distress but it's important they help them tolerate their feelings and not avoid them, by encouraging them to be in situations which are challenging and providing them with opportunities to be exposed to those situations. However, if



they don't feel they have the skills to cope with certain behaviors they should seek out parenting courses or professional support."

Nathan Monk stresses caution in interpreting his findings as they're among the first of their kind, requiring replication among other groups before too much can be read into them.

"Mental disorders are incredibly complex and arise from processes that we don't yet understand well. Every individual is unique, and just because some of these childhood behaviors tend to predict later anxiety problems, this certainly won't be true for every child.

"Our results are one set of findings that point toward some specific early risk behaviors which may be more useful to focus preventative interventions on. If other researchers are able to replicate them in other groups of people then we might start to see more of a push for that. We have some wonderful new statistical modeling methods available that allow us to conduct such research, so I'm sure we'll continue to learn more in this interesting and important area."

More information: Nathan J. Monk et al, Childhood anxious/withdrawn behaviour and later anxiety disorder: a network outcome analysis of a population cohort, *Psychological Medicine* (2021). DOI: 10.1017/S0033291721002889

Provided by University of Otago

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