



THE IMPACT OF ANXIOUS AND NON-ANXIOUS PARENTS ON THE MENTAL HEALTH OF CHILDREN

Original scientific paper

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ABSTRACT

Anxiety disorders are characterized by excessive and persistent anxiety or fear and are associated with a range of behavioral disturbances. Most parents experience anxiety from time to time, parenting anxiety can affect the quality of their life or their child's life. The regulation of emotions and behavior is crucial to the healthy early development of children, where they interact with the environment to adjust emotions, cope with frustrations and stress. Parents who are depressed and out of tune with their child's needs and emotions leave the child unsupported, left to manage their own anger, sadness, and fear, and are left to their own immature repertoire of behaviors. To make a comparative analysis of the impact of anxiety on the mental health of children of anxious and non-anxious parents. A cross-sectional transfer analytic study was conducted. 300 students were analyzed, in the territory of Gostivar, as well as their parents. "Psychometric properties of the Screen for Child Anxiety Related Emotional Disorders" (SCARED) - child version was used to examine anxiety in children, and it measures it in 4 domains (panic, separation anxiety, generalized anxiety and school phobia). A statistically significant difference was confirmed in the distribution of students without anxiety, with possible anxiety disorder, and with anxiety disorder, between parents with and without anxiety ($p < 0.0001$). Anxious parents more often than parents who did not manifest anxiety have children with a possible anxiety disorder and with a convincing result for anxiety disorder consequently. Anxious parents significantly more often than parents without anxiety had children with panic disorder. Regardless of children's specific symptoms, anxiety can have a negative effect on their thoughts, emotions, and physical health. Anxiety runs in families, with recent analysis showing that children of anxious parents are twice as likely to have anxiety problems than children of non-anxious parents. The results of the research showed a significant impact of parents' anxiety on children's health.

Keywords: *anxiety, parents, children, puberty, influence*

INTRODUCTION

Anxiety disorders are characterized by excessive and persistent anxiety or fear and are associated

with a range of behavioral disturbances. Typically appearing in childhood, they are the most common psychiatric condition in pre-adolescence, and if left untreated, a long-term, chronic course

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can follow (Chapman et al., 2022). Anxiety symptoms vary widely and often go undiagnosed in children and adolescents. Anxiety disorders in children are characterized by irritability, nervousness, excessive worry, shyness, sleep problems, and/or physical symptoms, such as headaches or digestive problems (Schluger, 2023). Children are very much affected by what is happening in the world around them. They may feel drained and isolated from others, as well as fear or have feelings of shame. Children with anxiety may also have difficulty making friends or participating in other social activities (Schluger, 2023). Family is the first social environment in which the child begins his social life. Parents have the role of educators, motivate the child, and help him build the value system. They are the important people in life because parents can show different degrees of acceptance and non-acceptance (Kenny, 1994). Open communication between children and parents in the family and democratic behavior encourages self-confidence and offers rich material for research and realization of one's own ideas (Todorovic, 2005). The family is a system that is constantly changing and developing and goes through different stages of development that require the ability to adopt new tasks and ways of adaptation. Everyone reacts differently. Some parents may immediately create a new home routine, some may struggle balancing work and home responsibilities. Some children may feel deep sadness or anger, others may withdraw or act as if nothing is happening (Brown, 2004). Caring for a child is a big responsibility. Most parents experience anxiety occasionally, but for some people, parenting anxiety can affect their quality of life or their child's life (Rowden, 2022). The relationship between parental anxiety and anxiogenic parenting behaviors such as overprotection and fear/avoidance modeling is complex and strongly moderated by parents' ability to regulate their emotions. That is, a highly anxious parent who has strong emotion regulation skills may engage in low anxiety parenting, while a parent with more moderate levels of anxiety but poor emotion regulation may engage in significant anxiety parenting (Chapman et al., 2022). The regulation of emotions and behavior is crucial to the healthy early development of children, where they interact with the environment to adjust emotions, cope with frustrations and stress. Parents who are depressed and out of tune with their child's needs and emotions leave the child unsupported, left to manage their own

anger, sadness, and fear, and are left to their own immature repertoire of behaviors. A sick mother cannot adequately respond to the child's needs and does not fulfill her expectations, just as if she is not present. Such neglect leads to the inability of children to recognize and manage their emotions and behavior (Macuka, 2010). Another problem is parents who do not show enough concern for their child who shows problems in his development. First of all, we mean the problem of communication with your child, some disorders of a different nature, or simply the lack of time that the parent devotes to his child. Namely, all research shows that the relationship between parents and children is important for successful socialization of children. Regulation of emotions and behavior is important for healthy development in the early period of children, who interact with the environment to form emotions and cope with frustrations and stress. Parents in a state of stress are not attuned to the child's needs and their emotions leave them without support. A sick mother cannot adequately respond to the child's needs. The child is not able to "recognize" his own emotions (Klain et al., 1999). Research results confirm that parental concern can be useful in detecting disorders in children. Most of the research confirms a significant connection between the type of concern and the later diagnosis, that is, the type of concern indicates the type of problem the child has. Parents are useful members of the healthcare team, because they have good insight into the child's previous experience, his capacity to overcome discomfort as well as fears that may arise during unpleasant procedures (Multicultural Mental Health Australia, 2007). Children's development involves a whole range of emotions from pleasant to unpleasant emotions. In other words, everyday parenting experiences can be a source of satisfaction and joy, and they can provide a sense of competence and self-confidence when challenges are met successfully (Carter, 2001). However, the experience can be frustrating, confusing, and therefore stressful for parents. When there is a discrepancy between the requirements and the fulfillment of obligations, stress appears.

PURPOSE OF THE WORK

To make a comparative analysis of the impact of anxiety on the mental health of children of anxious and non-anxious parents.

MATERIAL AND METHODS

In this cross-sectional study, 150 students from secondary schools in the territory of the municipality of Gostivar, as well as their parents, were analyzed. Two standardized questionnaires were used as research instruments. "Psychometric properties of the Screen for Child Anxiety Related Emotional Disorders" (SCARED) - child version was used to examine anxiety in children, and it measures anxiety in children in 4 domains (panic, separation anxiety, generalized anxiety and school phobia). The questionnaire is composed of 41 questions, which should be answered with one of the alternatives: Not true, somewhat true, or very true. The Depression, Anxiety and Stress Scale (DASS), consisting of 42 questions including three self-rating scales designed to measure negative emotional symptoms of depression, anxiety and stress, was used to determine anxiety in parents. The anxiety scale contains 14 questions, divided into subscales of 2-5 questions each with similar content, and it assesses autonomic alertness, skeletal muscle effects, situational anxiety, and subjective experience of the impact of anxiety.

STATISTICAL ANALYSIS

The data obtained from the trial were analyzed with the statistical program SPSS for Windows 23.0. All the data of interest for the preparation of the paper are shown tabularly and graphically. The description of the data is made with relative and absolute numbers. Chi-square test was used to compare the responses of children from anxious

and non-anxious parents. All those results where the $p\text{-value} < 0.05$ are considered significant.

RESULTS

This part of the research shows the results obtained by processing and analyzing the answers from the completed questionnaires of 600 respondents, of which 300 students (140 male and 160 female) and their parents (198 male and 102 female) in the territory of the municipality of Gostivar. A statistically significant difference was confirmed in the distribution of students without anxiety, with possible anxiety disorder, and with anxiety disorder, between parents with and without anxiety ($p < 0.0001$). Anxious parents more often than parents who did not manifest anxiety have children with a possible anxiety disorder and with a convincing result for anxiety disorder - 22.1% (19) vs 18.7% (40), and 50% (43) vs 24.8% (53), consequently. Parental anxiety was significantly associated with child panic disorder ($p < 0.0001$), generalized anxiety disorder ($p < 0.001$), separation anxiety ($p < 0.001$), and social anxiety disorder ($p < 0.0001$). , and was not significantly related to school avoidance ($p = 0.25$). Anxious parents significantly more often than parents without anxiety had children with panic disorder - 61.6% (53) vs 36% (77), with generalized anxiety disorder - 51.2% (44) vs 35.05% (75), with separation anxiety - 63.95% (55) vs 43.9% (94), and with social anxiety disorder - 41.9% (36) vs 16.35% (35) (Table 1).

Table 1. Anxiety disorder, panic disorder, generalized, separation, social and school anxiety in children (SCARED – children's version) depending on the frequency of anxiety in parents

SCARED – children's version	ANXIETY (parents)		p-value	
	points	there are n (%)		none n (%)
Anxiety disorder				
	0 – 25	24 (27.91)	121 (56.54)	X ² =22.97
children	26 – 30	19 (22.09)	40 (18.69)	p=0.00001 sig
	>30	43 (50)	53 (24.77)	
Panic disorder or significant somatic symptoms				
	0 – 6	33 (38.37)	137 (64.02)	X ² =16.43
children	≥ 7	53 (61.63)	77 (35.98)	p=0.00005 sig
Generalized anxiety disorder				
	0 – 8	42 (48.84)	139 (64.95)	X ² =6.66
children	≥ 9	44 (51.16)	75 (35.05)	p=0.0098 sig
Separation anxiety disorder				
	0 – 4	31 (36.05)	120 (56.07)	X ² =9.84
children	≥ 5	55 (63.95)	94 (43.93)	p=0.0017 sig
Social anxiety disorder				
	0 – 7	50 (58.14)	179 (83.64)	X ² =22.09
children	≥ 8	36 (41.86)	35 (16.35)	p=0.000003 sig
Significant avoidance of schools				
	0 – 2	57 (66.28)	156 (72.9)	X ² =1.31
children	≥ 3	29 (33.72)	58 (27.1)	p=0.25 ns

X²(Pearson Chi-square)

A statistically significant difference was confirmed between anxious and non-anxious parents, regarding the total average score for anxiety disorder (p=0.000001), and the subscales for panic disorder (p<0.0001), generalized anxiety disorder (p=0.0002), separation anxiety (p=0.031) and social anxiety (p=0.00008), while the difference regarding the mean score for the school anxiety subscale was not statistically significant (p=0.07). The mean total score for anxiety disorder, and the mean score for the subscales of panic disorder, generalized anxiety disorder, separation anxiety and social anxiety were significantly higher

in the group of parents with anxiety: 31.74 ± 12.9 vs 23.89 ± 11.7; 9.27 ± 5.5 vs 5.99 ± 4.7; 8.56 ± 3.9 vs 6.73 ± 3.7; 5.24 ± 2.7 vs 4.45 ± 2.9, and 6.48 ± 3.3 vs 4.96 ± 2.9, respectively. Table 2 shows the questions from the Child Anxiety Disorders Questionnaire – Children's Version, for which a statistically significant difference was obtained when comparing the responses of children of anxious and non-anxious parents. Significance in all questions was obtained as a result of their being rated as "very true" significantly more often by students whose parents were anxious, compared to surveyed children whose parents were not anxious.

Table 2. Distribution of responses from the anxiety disorders questionnaire – version for children, depending on the frequency of anxiety in parents

Variable children	Anxiety (parents)			p-value
	points	there are n (%)	none n (%)	
When I'm scared, I breathe hard.	Not true	24 (27.91)	90 (42.06)	X ² =8.88 p=0.012 sig
	Somewhat true	34 (39.53)	85 (39.72)	
	Very true	28 (32.56)	39 (18.22)	
People tell me I look nervous.	Not true	32 (37.21)	126 (58.88)	X ² =11.91 p=0.0026 sig
	Somewhat true	35 (40.70)	61 (28.50)	
	Very true	19 (22.09)	27 (12.62)	
I'm nervous around people I don't know.	Not true	40 (46.51)	142 (66.36)	X ² =11.05 p=0.0039 sig
	Somewhat true	36 (41.86)	61 (28.50)	
	Very true	10 (11.63)	11 (5.14)	
When I'm scared, I go crazy.	Not true	57 (66.28)	176 (82.24)	X ² =9.11 p=0.01 sig
	Somewhat true	23 (26.74)	29 (13.55)	
	Very true	6 (6.98)	9 (4.21)	
When I'm scared, I think things aren't real.	Not true	42 (48.84)	134 (62.62)	X ² =7.08 p=0.029 sig
	Somewhat true	35 (40.70)	54 (25.23)	
	Very true	9 (10.47)	26 (12.15)	
I notice I'm trembling.	Not true	19 (22.09)	108 (50.47)	X ² =21.12 p=0.00003 sig
	Somewhat true	34 (39.53)	61 (28.50)	
	Very true	33 (38.37)	45 (21.03)	
I dream something bad is happening to me.	Not true	27 (31.40)	103 (48.13)	X ² =15.96 p=0.0003 sig
	Somewhat true	34 (39.53)	87 (40.65)	
	Very true	25 (29.07)	24 (11.21)	
When I'm scared, I sweat a lot.	Not true	45 (52.33)	150 (70.09)	X ² =13.36 p=0.0013 sig
	Somewhat true	26 (30.23)	52 (24.30)	
	Very true	15 (17.44)	12 (5.61)	
I get upset easily.	Not true	25 (29.07)	90 (42.06)	X ² =9.93 p=0.0069 sig
	Somewhat true	33 (38.37)	88 (41.12)	
	Very true	28 (32.56)	36 (16.82)	
I'm afraid for no reason.	Not true	60 (69.77)	176 (82.24)	X ² =12.39 p=0.002 sig
	Somewhat true	14 (16.28)	31 (14.49)	
	Very true	12 (13.95)	7 (3.27)	
I find it hard to talk to people I don't know well.	Not true	23 (26.74)	89 (41.59)	X ² =8.61 p=0.013 sig
	Somewhat true	42 (48.84)	97 (45.33)	
	Very true	21 (24.42)	28 (13.08)	
When I'm scared I feel like I'm suffocating.	Not true	51 (59.30)	156 (72.90)	X ² =6.16 p=0.046 sig
	Somewhat true	25 (29.07)	46 (21.50)	
	Very true	10 (11.63)	12 (5.61)	
People tell me I worry too much.	Not true	43 (50.0)	137 (64.02)	X ² =11.32 p=0.0035 sig
	Somewhat true	24 (27.91)	59 (27.57)	
	Very true	19 (22.09)	18 (8.41)	

Table 2 (continuation). Distribution of responses from the anxiety disorders questionnaire – version for children, depending on the frequency of anxiety in parents

I'm worried about having a panic attack.	Not true	39 (45.35)	137 (64.02)	X ² =10.48 p=0.0053 sig
	Somewhat true	30 (34.88)	57 (26.64)	
	Very true	17 (19.77)	20 (9.35)	
I worry about what will happen in the future.	Not true	19 (22.09)	70 (32.71)	X ² =6.39 p=0.041 sig
	Somewhat true	36 (41.86)	95 (44.39)	
	Very true	31 (36.05)	49 (22.90)	
I'm afraid to go to school.	Not true	70 (81.40)	195 (91.55)	X ² =6.35 p=0.042 sig
	Somewhat true	10 (11.63)	12 (5.63)	
	Very true	6 (6.98)	6 (2.82)	
I worry about things that actually happened to me.	Not true	30 (34.88)	99 (46.26)	X ² =12.69 p=0.0018 sig
	Somewhat true	36 (41.86)	97 (45.33)	
	Very true	20 (23.26)	18 (8.41)	
When I'm scared I feel dizzy.	Not true	49 (56.98)	166 (77.57)	X ² =15.73 p=0.00038 sig
	Somewhat true	21 (24.42)	35 (16.36)	
	Very true	16 (18.60)	11 (6.07)	
I get upset when I am with children or other adults who watch me do something.	Not true	36 (41.86)	129 (60.28)	X ² =9.73 p=0.008 sig
	Somewhat true	34 (39.53)	65 (30.37)	
	Very true	16 (18.60)	17 (9.35)	
I am shy.	Not true	26 (30.23)	72 (33.64)	X ² =6.97 p=0.031 sig
	Somewhat true	31 (36.05)	100 (46.73)	
	Very true	29 (33.72)	42 (19.63)	

X² (Chi-square test)

In the group of children of anxious parents, a significantly higher average score was registered than in the group of children of non-anxious parents for the following questions from the Anxiety Disorders Questionnaire – version for children: When I'm scared, I breathe hard (1.05 ± 0.8 vs 0.76 ± 0.7, p=0.003); I don't like being with people I don't know well (1.28 ± 0.7 vs 1.08 ± 0.8, p=0.047); I am a nervous type (0.99 ± 0.8 vs 0.78 ± 0.7, p=0.03); People tell me I look nervous (0.85 ± 0.8 vs 0.54 ± 0.7, p=0.0008); I feel nervous with people I don't know well (0.65 ± 0.7 vs 0.39 ± 0.6, p=0.0009); When I'm scared, I feel like I'm going crazy (0.41 ± 0.6 vs 0.22 ± 0.5, p=0.007); When I'm scared, my heart beats faster (1.50 ± 0.7 vs 1.16 ± 0.8, p=0.004); I notice that I tremble (1.16 ± 0.8 vs 0.71 ± 0.8, p=0.000008); I dream that something bad is happening to me (0.98 ± 0.8 vs 0.63 ± 0.7, p=0.0002);

When I'm afraid, I sweat a lot (0.65 ± 0.8 vs 0.35 ± 0.6, p=0.0003); I get upset easily (1.03 ± 0.8 vs 0.75 ± 0.7, p=0.0027); I am afraid for no reason (0.44 ± 0.7 vs 0.21 ± 0.5, p=0.0014); It's hard for me to talk to people I don't know well (0.98 ± 0.7 vs 0.71 ± 0.7, p=0.003); When I'm scared, I feel like I'm suffocating (0.52 ± 0.7 vs 0.33 ± 0.6, p=0.013); People tell me that I care a lot (0.72 ± 0.8 vs 0.44 ± 0.6, p=0.002); I worry about having a panic attack (0.74 ± 0.8 vs 0.45 ± 0.7, p=0.001); I am ashamed when I am with people I do not know well (0.98 ± 0.7 vs 0.79 ± 0.7, p=0.043); I worry about what will happen in the future (1.14 ± 0.7 vs 0.90 ± 0.7, p=0.013); I worry about the way I do things (0.94 ± 0.7 vs 0.75 ± 0.7, p=0.013); I am afraid to go to school (0.26 ± 0.6 vs 0.11 ± 0.4, p=0.014); I worry about things that actually happened to me (0.88 ± 0.8 vs 0.62 ± 0.6, p=0.0025);

When I'm scared, I feel dizzy (0.62 ± 0.8 vs 0.28 ± 0.6 , $p=0.00006$); I get upset when I am with children or other adults who see me doing something (0.77 ± 0.7 vs 0.49 ± 0.7 , $p=0.002$).

Table 3. Average score of responses from the anxiety disorder questionnaire – version for children, depending on frequency of anxiety in parents

	Anxiety (parents)		t	p-value
	there is mean \pm SD	None mean \pm SD		
1. When I'm scared, I breathe hard.	1.05 ± 0.8	0.76 ± 0.7	$t=2.9$	$p=0.003$ sig
2. My head hurts when I'm at school.	0.98 ± 0.8	0.79 ± 0.7	$t=1.9$	$p=0.06$ ns
3. I don't like being with people I don't know well.	1.28 ± 0.7	1.08 ± 0.8	$t=1.9$	$p=0.047$ sig
4. I am afraid when I sleep away from home.	0.45 ± 0.7	0.33 ± 0.6	$t=1.5$	$p=0.14$ ns
5. I take care of the people I love.	1.14 ± 0.8	1.02 ± 0.9	$t=1.1$	$p=0.29$ ns
6. When I'm scared, I feel like I'm crazy.	0.38 ± 0.6	0.26 ± 0.5	$t=1.6$	$p=0.099$ ns
7. I'm a nervous guy.	0.99 ± 0.8	0.78 ± 0.7	$t=2.1$	$p=0.03$ sig
8. I follow my mother or father wherever they go.	0.35 ± 0.6	0.35 ± 0.6	$t=0.04$	$p=0.97$ ns
9. People tell me I look nervous.	0.85 ± 0.8	0.54 ± 0.7	$t=3.4$	$p=0.0008$ sig
10. I feel nervous around people I don't know well.	0.65 ± 0.7	0.39 ± 0.6	$t=3.4$	$p=0.0009$ sig
11. My stomach hurts when I go to school.	0.44 ± 0.6	0.36 ± 0.6	$t=1.05$	$p=0.3$ ns
12. When I'm scared, I feel like I'm going crazy.	0.41 ± 0.6	0.22 ± 0.5	$t=2.7$	$p=0.007$ sig
13. I get upset if I have to sleep alone.	0.28 ± 0.5	0.30 ± 0.6	$t=0.3$	$p=0.74$ ns
14. I try to be as good as the long children.	0.64 ± 0.7	0.61 ± 0.7	$t=0.3$	$p=0.72$ ns
15. When I'm scared, I feel like things aren't real.	0.62 ± 0.7	0.49 ± 0.7	$t=1.4$	$p=0.17$ ns
16. I dream about something bad happening to my parents.	0.44 ± 0.6	0.29 ± 0.6	$t=1.94$	$p=0.053$ ns
17. I worry when I have to go to school.	0.52 ± 0.7	0.48 ± 0.7	$t=0.4$	$p=0.7$ ns
18. When I'm scared, my heart beats fast.	1.50 ± 0.7	1.16 ± 0.8	$t=3.5$	$p=0.0004$ sig
19. I notice that I am trembling.	1.16 ± 0.8	0.71 ± 0.8	$t=4.5$	$p=0.000008$ sig
20. I dream that something bad is happening to me.	0.98 ± 0.8	0.63 ± 0.7	$t=3.8$	$p=0.0002$ sig
21. I worry about things going well for me.	1.07 ± 0.8	0.86 ± 0.8	$t=1.9$	$p=0.053$ ns
22. When I'm afraid, I sweat a lot.	0.65 ± 0.8	0.35 ± 0.6	$t=3.6$	$p=0.0003$ sig
23. I get upset easily.	1.03 ± 0.8	0.75 ± 0.7	$t=3.02$	$p=0.0027$ sig
24. I am afraid for no reason.	0.44 ± 0.7	0.21 ± 0.5	$t=3.2$	$p=0.0014$ sig
25. I am afraid of being alone at home.	0.28 ± 0.5	0.31 ± 0.6	$t=0.4$	$p=0.65$ ns
26. I find it difficult to talk to people I don't know well.	0.98 ± 0.7	0.71 ± 0.7	$t=2.9$	$p=0.003$ sig
27. When I'm scared I feel like I'm suffocating.	0.52 ± 0.7	0.33 ± 0.6	$t=2.49$	$p=0.013$ sig
28. People tell me that I worry too much.	0.72 ± 0.8	0.44 ± 0.6	$t=3.12$	$p=0.002$ sig
29. I don't want to be away from my family.	1.21 ± 0.7	1.08 ± 0.8	$t=1.27$	$p=0.21$ ns
30. I worry about having a panic attack.	0.74 ± 0.8	0.45 ± 0.7	$t=3.3$	$p=0.001$ sig

Table 3(continuation). Average score of responses from the anxiety disorder questionnaire – version for children, depending on frequency of anxiety in parents

31. I worry that nothing bad happens to my parents.	1.26 ± 0.8	1.15 ± 0.8	t=0.9 p=0.32 ns
32. I'm embarrassed when I'm with people I don't know well.	0.98 ± 0.7	0.79 ± 0.7	t=2.03 p=0.043 sig
33. I worry about what will happen in the future.	1.14 ± 0.7	0.90 ± 0.7	t=2.5 p=0.013 sig
34. When I'm scared, I vomit.	0.33 ± 0.7	0.22 ± 0.6	t=1.41 p=0.16 ns
35. I care about the way I do things.	0.94 ± 0.7	0.75 ± 0.7	t=2.19 p=0.029 sig
36. I am afraid to go to school.	0.26 ± 0.6	0.11 ± 0.4	t=2.46 p=0.014 sig
37. I worry about things that actually happened to me.	0.88 ± 0.8	0.62 ± 0.6	t=3.05 p=0.0025 sig
38. When I'm scared, I feel dizzy.	0.62 ± 0.8	0.28 ± 0.6	t=4.1 p=0.00006 sig
39. I get upset when I am with children or other adults who watch me do something.	0.77 ± 0.7	0.49 ± 0.7	t=3.15 p=0.002 sig
40. I get nervous when I have to go to a birthday party or a dance or places where I don't know others.	0.79 ± 0.7	0.63 ± 0.7	t=1.81 p=0.07 ns
41. I am shy.	1.03 ± 0.8	0.86 ± 0.7	t=1.84 p=0.07 ns

t (Student t-test for independent samples)

The results of the research showed a significant impact of parents' anxiety on children's health.

DISCUSSION

All parents want the best for their children. They want them to be healthy, happy and resilient when faced with life's challenges. This is often easier said than done with the daily demands and responsibilities of parenting. Anxiety is a common issue among children, adolescents and teenagers, often experienced at different stages of development. Parents play the role of educators, motivate the child and help him build a value system. Open communication between children and parents in the family and democratic behavior encourages self-confidence and offers rich material for research and realization of own ideas. Anxiety disorders can first be diagnosed in children between the ages of four and eight, while a recent survey found that about 32% of adolescents in the United States have an anxiety disorder, a number that has increased significantly over the years. The study also found that one in four to five adolescents had a severe disability related to their anxiety disorder (Centers for Disease Control and Prevention, 2020). According to the current knowledge from the available literature in the field of relations between the risky behavior of young people, there are strong links about the influence of parents' anxiety on children during their puberty. There are several

factors that contribute to the development of anxiety. Regardless of children's specific symptoms, anxiety can have a negative effect on their thoughts, emotions, and physical health. This, in turn, can affect their ability to function both academically and socially. Helping them deal with the problem starts with recognizing the causes of their anxiety symptoms. Anxiety runs in families, with recent analysis showing that children of anxious parents are twice as likely to have anxiety problems than children of non-anxious parents. Several papers show that parental anxiety disorders increase the risk of similar anxiety problems in children. Overprotection is a risk of anxiety disorders. In a Washington, D.C. study of anxiety treatment, the study teaches parents to reduce overprotection and respond to a child's anxiety symptoms in a supportive way that conveys acceptance of the child's real problem along with confidence in the child's ability to cope anxiety (Elsevier, 2020). The influence of parents' attitudes on children, positive and negative, certainly leaves a mark on the further effective and social life of the child, adolescent and young person, forming the contours of the future mature person. Psychological, biological and social dysfunction is the greatest burden for a person. The foundation for good mental health is mainly formed in the first years of life, and improving the mental health of children and young people is an investment in the future.

CONCLUSION

Anxious parents more often than parents who do not manifest anxiety have children with a possible anxiety disorder and with a convincing result for an anxiety disorder (22.1%). When comparing the responses of children from anxious parents and parents without anxiety, a statistically significant difference was obtained ($p < 0.0001$). Significance in all questions was obtained as a result of their significantly more frequent assessment as “very true” by students whose parents were anxious compared to the surveyed children whose parents were not anxious.

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