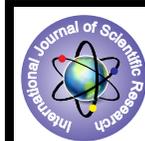


## Anxiety : A Comparative study of Thalassaemia and Normal Children's Parents



## Psychology

KEYWORDS :

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### ABSTRACT

*The aim of present investigation was to study the impact of thalassaemia disease in children on parental anxiety. Moreover, it was also planned to examine gender differences in parental anxiety. The sample comprised of 60 parents of thalassaemia children and 60 parents of normal children. The 2x2 factorial design was planned for the study. Personal data sheet and Derogates symptom checklist-90- Revised scale were administered to them. Two way analysis (F test) of variance yielded significant main and interaction effects of types of parents and sex on anxiety. The level of anxiety was higher among parents of thalassaemic children than the parents of normal children. Moreover females were found to suffer from anxiety more as compared to male. And significant interaction on types of parents and sex.*

### Introduction :

The tremendous progress of science and its knowledge to diagnosis diseases in the medical field and successful treatment of these diseases are to be considered a great achievement of the human society. On the other hand the increase of terrible diseases are challenge for human race. Thalassaemia Major is one of many current deadly disease. Thalassaemia Major is a blood related hereditary illness. If both the father and mother, are the thalassaemia Minor than their child would be thalassaemia major. Hemoglobin present in the blood ensures the supply of oxygen to each cell of our body. Thalassaemia adversely affects the production of hemoglobin in the blood. The Thalassaemia Major child needs to undergo blood transfusion 2 to 4 times every month. Besides the several other expensive treatments are necessitated. No treatment till date can save a Thalassaemic child. Around 12,000 children are born with Thalassaemia every year in India. The figures stands at around 1000 for Gujarat. The numbers of Thalassaemia major children are increasing day by day because of the ignorance and lack of awareness of the people for Thalassaemia major.

The anxiety of meeting the expenses for the treatment of a Thalassaemic child, the long and tiring treatment, the constant fear of death of the child and other social responsibilities often results in a very stressful life for the parents. They often have to undergo a lot of psychological pressures due to this. To add to this, modern life is such that no one can avoid anxiety. That is why the modern age is known as the "Age of Anxiety and Stress." Freud (1972) argues that is anxiety inspires internally to face the challenges of life, it is beneficial to the man. But if the uneasiness associated with anxiety is intense, the man cannot rejoice the routine of life. Moreover he says that the root of anxiety lies in disappointment and struggles. According to Morgan (1990), "Anxiety is a vague fear experienced without, our knowing just what is the matter." Horney (1939) believes that the anxiety is generated from the factors of the atmosphere. In the context of anxiety, Shaffer and Shoben (1956) opine that emotional reaction is created with struggle and its structure is anxiety. Anxiety normally originates from the doubts of future circumstances, grief or harmfulness of course, anxiety originates other causes too.

### Objectives of this study :

1. To study the Anxiety among the parents of the thalassaemic and normal children.
2. To study the Anxiety among male and female parents of the thalassaemic and normal children.

### Hypothesis of this study :

1. There is no difference between the Anxiety of the thalassaemic and normal children's parents.
2. There is no difference between the Anxiety of the male and female parents of thalassaemic and normal children.
3. There is no interaction effect on the Anxiety of the types of parents and sex of the Thalassaemic and Normal children.

### Methodology :

#### Sample of this study :

For the present study a list of thalassaemia major children was collected from various blood banks of Ahmedabad city and then 60 children were randomly selected. The present of these selected children (N = 60) were included in the sample. Similarly to select parents of normal children, several criteria, such as age, income etc. of thalassaemia major children's parents were considered and 60 parents of normal children were also included in the sample. So total 120 parents were included in the sample for the present study.

#### Tools of this study :

##### 1. Personal Data sheet :

A personal data sheet developed by the investigator was used to collect information about types of parents, and Sex.

##### 2. SCL-90-R :

Derogatis's (1994) "The symptom checklist -90-Revised scale (SCL-90R)" was used to collect information about anxiety among the thalassaemic and normal children's parents. SCL-90-R measures 9 factors of psychopathology. But for the present study only anxiety was taken as a factor of consideration. There are 10 items for the estimation of anxiety. it is a five point scale ranging from "not at all" to "Very much" and accordingly the score range from 0 to 4 for each statement. The minimum and maximum possible scores on the anxiety scale are 0 and 40 respectively. High score indicate high level of anxiety. The author reported alpha co-efficient for the nine symptoms dimensions ranging from 0.84 to 0.87, test-retest reliability ranging from 0.75 to 0.84 and discriminate validity ranging from 0.65 to 0.70.

#### Statistical Analysis :

To test the hypothesis formulated for the study, statistical techniques like two way ANOVA and Tukey test were used. The obtained results are presented below.

#### Results and Discussion :

##### Table : 1

**ANOVA for the main and interactional effects of type of parents and Sex on Anxiety**  
(N = 120)

Source of Variance	Sum of square	df	Mean Sum of Square	F	Level of Significant
Types of Parents (A)	18819.82	1	18819.82	757.64	**
Sex (B)	1504.12	1	1504.12	60.55	**
Types of Parents x Sex (Ax B)	412.14	1	412.14	16.59	**
SSW	2880.95	116	24.84		
SST	22617.03	119			
**P > 0.01					

**Table : 2**  
**Difference between mean scores of Anxiety with reference to Types of parents and Sex of thalassaemic and Normal children (N = 120)**

Independent Variables	Categories	n	Mean	Difference between the mean
Types of Parents(A)	Parents of Thalassaemic children A1	60	22.14	14.32
	Parents of Normal children A2	60	7.82	
Sex(B)	Male B1	60	12.46	5.04
	Female B2	60	17.50	

**Table : 3**  
**Mean Difference of group (A x B) on Anxiety(N = 120)**

	A <sub>2</sub> B <sub>1</sub>	A <sub>2</sub> B <sub>2</sub>	A <sub>1</sub> B <sub>1</sub>	A <sub>1</sub> B <sub>2</sub>
x	5.92	7.73	18.84	24.42
5.92	2.36 **	13.46 **	19.07 **	7.73
	11.65 **	17.25 **	18.84	6.15 **

The analysis of variance, as presented in Table-1, shows that the main effect on type of parents on Anxiety is significant ( F value = 757.64, P > 0.01). This means that type of parents significantly creates variance in Anxiety score of subjects. The mean Anxiety score ( M = 24.42) of parents of thalassaemia major children was found to be higher than the mean Anxiety score ( M = 7.82) of parents of normal children. Hence it can be said that parents of thalassaemia major child suffer Anxiety more than a normal child's parents.

Table -1 indicates that the main effect of sex on Anxiety is significant (F value = 60.55, P > 0.01). This means that sex significantly creates variance in Anxiety score of subjects. The mean Anxiety score ( M = 17.50) of females (mother) was found to be higher than the mean Anxiety score ( M = 12.46) of males (Fathers). Hence it's proved that the level of Anxiety found in female is comparatively more than male.

Results in table -3 clearly indicate that significant differences exist (P > 0.01) among all the groups in depression. Mothers of thalassaemic children exhibited highest (M = 31.85) depression

and fathers of normal children exhibited lowest. Amount of depression. one interesting observation was that mothers of both thalassaemic and normal children were found suffering more from depression than fathers in respective groups.

The results suggests that anxiety is found more in the present of the Thalassaemia children than the parents of normal children. The possible explanation for this result coned be that the serious illness of the Thalassaemic children proves to be a deadly below for their parents. The research of flannery (1999), Foa et al., (2001) about the persons reaction to shocking events, suggests that fear and anxiety are a common reaction in shocking incidents. Parents of Thalassaemic child pass a constantly tense life because of the child's long sickness. Woolfolk, Richardson (1979) and Lazarus (1993) are of the view that mental pressure produces anxiety more often than other emotion. The parents of Thalassaemic children have to pass through bitter situation than the parents of Normale children. It is possible that they become the victim of anxiety because of the treatment. The study of Zanardo, Feeato, Cereda (1998) also suggests that the anxiety level is seen more in the parents of with serious illness children than the parents of healthy children.

The results of this research also suggests that the females may feel anxiety more than the male. The possible explanation for such results could be that the females usually feel more uneasiness and pain even in the minor incidences of their routine life. In the study of Spielberger (1988), Kalippa (1982), Mook et al., (1990), Westerback et.al., (1996), and Wilks (1998) it is seen that trait anxiety is found more in the females as compared to male. Moreover, the females are more sensitive. They express their feelings easily (Ashmore-1990, Brody and Hall-1993). Male don't display their anxiety so easily as the females. As a results the females may look more anxious than the male. The proposed results is supported by Mukerjee et. al., (1995), Beatty and Carol (1996), Koons, Vasey et. al., (2000), pardhan and srivastva (2003) etc.

### Conclusions :

1. The Parents of Thalassaemic children's Anxiety is higher then the Parents of Normal children's.
2. The Female Parents of Thalassaemic and Normal children's Anxiety is higher then the Male Parents of Thalassaemic and Normal children's.
3. Significant mean interaction effect of the Anxiety in the types of Parents and sex in the Parents of Thalassaemic and Normal children's.

## REFERENCE

- Ashmore, R. D. (1990), Sex, gender and the individual, In L. A. Pervin (Ed.)Handbook of Personality, (pp.486-526), Guilford press, New York. | Beatty, C. A. (1996), The stress of managerial and professional womwn : is the price too high ? Journals of organizational behavior, 17 (3), pp. 233-251. | Brody, L. R., and Hall, J. A. (1993), Gender and emotion. In Lewis M. & Haviland J. M. (Eds.) Handbook of emotion (pp. 447-460), Guilford press, New York. | Derogatis, L. R., (1994), Symptom checklist 90-R: Administration, Scoring and procedure manual (3rd Ed.) Minneapolis, MN National Computer systems. | Flannery, R. B., (1999), Psychological trauma and post traumatic stress disorder : A review, International Journal of mental health, 1 (2), pp. 135. | Foa, E. B., Hembree, E. A., Riggs, D. et al., (2001), Common reactions to trauma, Retrieved 21 November, 2001, from U. S. Department of veterans affairs national center for PTSD. | Freud, S. (1971), Reprinted in collected papers Vol. 4 London : Hogarth press and the institute of Psychoanalysis, pp.152- 172. | Horney, K. (1939), new ways in psychoanalysis, w.w. Norton and Co. New York, P. 78. | Kaliappan, K. V. (1982), Trait anxiety reduction by behavior therapy : A case study, Journal of madras University, 3, pp.1-3. | Koons, Barbara, Vasey, Michael et. al., (2000), Considering sex differences in anxiety and its life span, Applied & Personality Psychology, 9 (3), pp. 191-209. | Lazarus, R. S. (1993), Why we should think of stress as a subset of emotion. In L. Goldberger and S. Breznitz (Eds.) Handbook of stress, Theoretical and clinical aspects (2nd ed.), free press New York. | Mook, J., Vender, P., Henk, M. and Klein, W. C. (1990), Anxiety, Anger and depression : Relationship at the trait level, Anxiety research, 3 (1), pp. 17-31. | Morgan, C. T., (1990), A basic Introduction to Psychology 2nd Edition, Tata- Mcgrow hill publishing W. Ltd. New Delhi, p. 237. | Mukerjee, M., Chatterji, S., Chakraborty, S. N., Hassan, M. K. (1996), Effect of Sex, Urbanisation and caste on anxiety, Journal of psychological researches, 10, pp.55-58. | Pradhan, G. P., Srivastava, S. K. (2003), Peptic ulcer and anxiety, Indian Journal of Psychological Issues, 11, pp.111-114. | Shaffer, L. F., Shoben, E. J. (1956), The Psychology of Adjustment- A dynamic and experimental approach to personality and mental hygiene, Houghton Mifflinn Company, Boston, pp. 273-287. | Spielberger, C. D., (1988), Assessment of state and trait anxiety : Conceptual and methodological issues, The southern psychologist, 2, pp. 6-16. | Westerback, M. E., Primavera, L. H. and Spielberger, C. D. (1996), Changes in anxiety and anger for college students performing a rock classification task, Stress and emotion, Vol.-16, pp.181-190. | Wilk, F. (1998), Intelligent emotion : How to succeed through transforming your feeling, William Heinemann : London. | Woolfolk, R. L., Richardson, F. C. (1979), Stress, Sanity and survival, Sovereign monarch, New York. | Zanardo, V., Freato, F. and Cereda, C. (1998), Level of anxiety in parents of high-risk premature twins. Acta geneticae medicae et. Gemellologiae, Twin research, 47 (1), pp. 13-18. |