

Prevalence of specific phobia in school student in mosul city- north of Iraq

Shatha Abdul-Rahman H. Al-Ghurairi*

*Department of Clinical Nursing Sciences, Mosul University, Mosul, Iraq

Abstract

Objectives: aim of this descriptive study is to determine specific phobia prevalence in student from 12 to more than 15 years in Mosul city, gender and age prevalence, to forecast the type of specific phobia, and lastly to identify its relation with some variables.

Method: it is cross-sectional study was carried out during October and November 2018. A sample of 412 student selected systematically, from Intermediate schools (males and females) to signify the special geographical zones of city. Specific phobia scale of ICD 10 Scales 1996 was used by direct meeting with each student.

Results: the study shows a prevalence rate of 13.5% from which 4.4% was situational phobia whilst natural was 1%. Among variables the significant difference was in age, gender, crowding index, education of father, and job of mother.

Conclusion: the study shows that more than one tenth of adolescents has specific phobia mostly situational type. A significant differences is found in gender, age, crowding index, education of father, and job of mother.

Keywords

Specific Phobia • Agoraphobia • Agoraphobia • Situational Phobia • Social Phobia

Introduction

Most common anxiety disorder is Phobia or it is characterize by fear-related symptoms from definite things. It may be: agoraphobia, specific phobia and social phobia. Specific phobia is an spontaneous and forceful fear of specific items, and situations "that present little or no real threat". Some of the objects, living beings, and situations that can be the resource of this phobia include: insects, animals, storms etc. Specific phobia becomes a trouble when the anxiety are impede the personnel every day habit and public life [1].

There are 5 special types of phobias: Animal (e.g. fear of dogs), Natural environment (e.g. fear of thunderstorms), Blood-injection injury (e.g. fear of needles), Situational (e.g. fear of the dark), Other (e.g. fear of illness). Research suggest that phobias has both environmental and genetic factors (nurture and nature). In UK phobias are about 12.5% of the population. Phobias establish in one out of each 10 americans and are about twice as possible to appear in women. But about 18% have unreasonable fears that impede their daily lives so a mixture of psychiatric therapy and medicine can be

fairly successful. Aim of this study are to determine prevalence of specific phobia in adolescents aged 12-15 years in intermediate schools, to determine age and gender specific prevalence, to determine differences between the scores of specific phobia with regard to some variables taken in consideration and to know the type of specific phobia in those age group [2].

Materials and Methods

A cross sectional study was carried in intermediate schools of Mosul city from 1st of October to 29 November 2018. In order to achieve the objectives of this study, the investigators use a questionnaire form first part information related to socio-demographic data of the samples, and information related to psychological problems of patient the instrument used in the study the investigators use the specific phobia scale of ICD 10 Scales in (1996)10. To test the validity of the scale and to assure that the items of the scale will measure the actual score of performance of ICD 10 Scales in our society, the tool was exposed to a panel consist of 10 experts in

*Address to correspondence: Shatha Abdul-Rahman H. Al-Ghurairi, Department of Clinical Nursing Sciences, Mosul University, Mosul, Iraq; E-mail: dr.shatha.hasso@uomosul.edu.iq

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psychiatry. According to their opinions, some items were excluded others were added the final draft of scale was obtained. About the reliability of the tool was done through test re-test on a sample of 25 adolescents in Mosul. Pearson's coefficient correlation revealed significant correlation at $p < 0.01$. The final draft of scale consists of 5 items, each item several question about specific phobia had three opinions, and then the type and summation of scores will diagnose specific phobia. After taking oral consent, the scale was adopted by direct interview with each teenager student. Selection of the students was done by using systematic sampling technique (1 in every 3). The schools were chosen by multistage cluster sampling design to correspond to the special geographical zones of Mosul city, are 8 male female schools (4 in the left and 4 in the right bank of the river Tigris). From each school students in 1st,2nd and 3ed intermediate schools were dealt with. Out of (412) questionnaire forms (393) were done (the response rate was (95.3%). Examining the distribution of variables did by using SPSS the data was examined by Chi-square (2) test for contingency table and Z-test to find the statistical relationship or differences between students with or without specific phobia. For significance, p-value as < 0.05 was considered [3].

Results

A phobia may range from mild anxiety to very severe panic. Most specific phobias develop during early adolescence and young adulthood and more common among women (Table 1).

Specific Phobia	Gender				Total	χ ²	*P-value	
	Male		Female				n	%
	n	%	n	%				
Present	1	0.2	55	13.3	56	13.5	23.168	0
Not present	118	28.7	238	57.8	356	86.5		

Table1. Prevalence of Specific Phobia Among Study Sample.

The investigator recommend that traumatic event often generate the development of specific phobias and its symptoms may be eased by lifestyle changes, such as: reducing stress, getting plenty of eating a good diet (Table 2).

Age	No Phobia		Phobia		Total	χ ²	*P-value	
	n	%	n	%			n	%
≤ 13	153	42.9	17	30.9	170	41.3	8.353	0.039
13.1 – 14	86	24.1	17	30.9	103	25		
14.1 – 15	85	23.8	10	18.2	95	23.1		
> 15	33	9.2	11	20	44	10.6		

Table 2. Age Specific Phobia Among Study Sample.

Any diagnosis must of course take into account the culture in which those student are raised. The mental health in student is influenced through war and limitation of student rights. It is reported that in 217 children ages 3-11 years the average number of extreme fears ranged. The numerous general fears and anxieties of children decrease with age. Preschool children are usually fear from the dark

or animals. children of primary school age are more likely to be had a fear threat to their own safety. Older children are more anxious with their health and school (Table 3).

Study Pop.	Classes	No Phobia		Phobia		Total χ ²		*P-value	
		n	%	n	%	n	%	n	%
Crowding Index	Low	308	74.8	40	9.7	348	93.2	7.58	0.023
	Intermediate	38	9.2	13	3.2	51	12.4		
	High	11	2.7	2	0.5	13	3.2		
Education for Father	Illiterate	22	5.3	0	0	22	5.3	14.6	0.012
	No formal education	19	4.6	3	0.7	22	5.3		
	Primary	39	9.5	11	2.7	50	12.1		
	Intermediate	50	12.1	15	3.6	65	15.8		
	Secondary	52	12.6	8	1.9	60	14.6		
	University	175	42.5	18	4.4	193	46.8		
Education for Mother	Illiterate	50	12.1	8	1.9	58	14.1	4.02	0.547
	No formal education	32	7.8	2	0.5	34	8.3		
	Primary	62	15.1	11	2.7	73	17.7		
	Intermediate	56	13.5	9	2.2	65	15.8		
	Secondary	52	12.6	12	2.9	64	15.5		
	University	105	25.5	13	3.2	118	28.6		
Job for Father	Not Working	49	11.9	8	1.9	57	13.8	1.1	0.778
	Unskilled	37	9	7	1.7	44	10.6		
	Skilled	122	29.6	21	5.1	143	34.7		
	Employed	149	36.2	19	4.6	168	40.8		
Job for Mother	Not Working	272	66	49	11.9	321	77.9	4.61	0.032
	Employed	85	23.8	6	1.5	91	22.1		
Type of Sp. Phobia	Animal	1	0.2	10	18.2	11	2.7	1.49	0.659
	Natural	0	0	4	1	4	1		
	Blood	0	0	9	2.2	9	2.2		
	Situation	2	0.5	16	3.9	18	4.4		
	Others	1	0.2	13	3.2	14	3.4		

Table 3. Prevalence of specific phobia According to the Demographic Characteristic.

The majority of student who had specific phobias are female; though, the gender allocation of phobias vary a bit. American are twice as common in women. This is supported with Schneider Elmore⁵ in USA and Frisch Frisch⁹ in Canada, these results correlated with the present study (Table 4).

Type of Sp. Phobia	Frequency	Percentage (%)
Animal	11	2.7
Natural	4	1
Blood	9	2.2
Situation	18	4.4
Others	14	3.4

Table 4. Type Specific Prevalence of Specific Phobia Among Study Sample.

Discussion

Nothing is known about the morbidity of specific phobia in student in our country, In such circumstances intermediate schools provide a best numerical indicator. What is happen for decided in Iraq could not be implicit neither in higher income and western countries nor in other developing countries, for the reason that of shock of wars and disasters. Thus, the results of the current study may differ if it is compared with other findings taken in an extra period of time or an extra place. Hence, the figure of prevalence of specific phobia in student in Mosul City 13.5%. Review of the literature revealed a wide range of reports regarding the prevalence of anxiety disorder in children (2% to 43%). According to the National Institute of Mental Health, 5 to 12% of the residents have a form of phobia. Roughly 19 million in the US and 2.5 million in the UK have specific phobia¹⁶⁻¹⁹. Phobias are affecting more than 10% of the US population [4].

Adolescence fears may focus more on failure, or agoraphobia if the fears continue to older ages it will lead to functional impairment indicating a clinical assessment. And this is correlated with the

present study. Epidemiological studies suggest that symptoms re more prevalent among children from low socioeconomic environments and high crowding index. Townsend et, al study as interview of 2163 adult female twins, the result of study suggested specific phobias had lowest rate of heritability. These results supported with present study. In a recent national survey 60% of the people interviewed are feared from some situation or things.

The investigator recommend that traumatic event often generate the development of specific phobias and its symptoms may be eased by lifestyle changes, such as: reducing stress, getting plenty of eating a good diet[5].

Conclusion

Adolescents in intermediate schools depending on the ICD 10 scale of specific phobia (1996) instrument to put the definite diagnosis in a different scores value, the study shows that more than one tenth of adolescents has specific phobia mostly situational type. Among all variables used a significant differences is found in gender, age, crowding index, education of father, and job of mother.

References

1. Calleja, Rachel L, and Ronald M. Rapee. "Social threat sensitivity and its relationships with peer victimisation and internalising symptoms among adolescent girls." *Behav Res Ther*133(2020): 103710.
2. Kearney, Joseph K, Matthew Rizzo, and Joan Severson. "Virtual reality and neuroergonomics." *Neuro braint work* (2007): 253-274.
3. Canadian Psychiatric Association. "Clinical practice guidelines. Management of anxiety disorders." *Canadian journal of psychiatry. Can J Psychiatry* 51(2006): 9-91.
4. Ricciardi, Joseph N, James K Luiselli, and Marianne Camare. "Shaping approach responses as intervention for specific phobia in a child with autism." *J Appl Behav Anal* 39(2006): 445-448.
5. Muris, Peter, and Harald Merckelbach. "Defence style and behaviour therapy outcome in a specific phobia." *Psychol Med* 26(1996): 635-639.

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