

An Exploratory Study of Anxiety Among Youths

Livishka Joshi^{1*}

ABSTRACT

Anxiety disorders are among the most common mental health issues affecting children and adolescents, often leading to challenges in social, family, and academic environments. While occasional anxiety is normal for young people, recognizing when it becomes a disorder can be difficult. This article explores key features of anxiety in adolescents, provides insight into recognizing the condition, and examines recent changes to the DSM-5 diagnostic criteria. It also discusses how to differentiate anxiety from other conditions like ADHD and offers evidence-based assessment methods. The article reviews various anxiety disorders, including agoraphobia, specific phobias, separation anxiety disorder, social anxiety disorder, panic disorder, and generalized anxiety disorder. Despite being reclassified in the DSM-5, obsessive-compulsive disorder (OCD) is also discussed. Anxiety is the most prevalent psychological disorder among youth, often appearing earlier than other internalizing conditions. Adolescents with untreated anxiety face difficulties that may persist into adulthood, increasing the risk of depression and substance abuse. Studies suggest that 15-20% of young people are diagnosed with anxiety disorders, with long-term research showing up to 31.9% of adolescents aged 13-18 experiencing anxiety. However, many remain untreated due to the overlap of anxiety symptoms with other disorders, such as mood disorders and ADHD, making diagnosis challenging. A major randomized trial in 2008 was the first to compare different treatments for anxiety, including medication, cognitive-behavioral therapy (CBT), and a combination of both. Despite this, diagnostic tools for anxiety have lagged those for other conditions like depression. Recognizing pathological anxiety, which is persistent and impairs daily functioning, is crucial. Addressing anxiety early can prevent long-term consequences that can affect development and mental health into adulthood.

Keywords: *Anxiety disorders, ADHD, CBT*

The term "anxiety," commonly used to describe a range of behavioral, emotional, and cognitive responses to perceived threats, originates from the Latin word "anxietas," meaning to choke, throttle, trouble, or upset. Anxiety is a universal human emotion. When it is effectively managed, anxiety can help individuals respond to challenging or stressful situations in a predictable and adaptive manner.

However, excessive anxiety can lead to instability and dysfunction. Anxiety becomes pathological when it arises in the absence of a clear threat, when its intensity or duration is

¹Research scholar, Karnavati University

*Corresponding Author

An Exploratory Study of Anxiety Among Youths

disproportionate to the situation, when it causes significant distress, or when it interferes with a person's ability to function socially, occupationally, or psychologically.

Anxiety is an emotion characterized by an unpleasant state of internal turmoil, often accompanied by anticipations of fear over future events. It differs from fear, which is a direct response to an immediate threat. While fear is a reaction to a real or present danger, anxiety is more about the anticipation of a future threat. It is typically accompanied by nervous behavior such as pacing, physical symptoms, and rumination.

Anxiety tends to be generalized and unfocused, manifesting as an overreaction to a perceived threat, which might not be immediately real. This emotional response can also involve physical symptoms such as muscle tension, breathlessness, tightness in the stomach, nausea, and difficulties in concentration.

Anxiety shares a close relationship with fear, which is the body's reaction to a real or perceived imminent threat, known as the "fight or flight" response. On the other hand, anxiety focuses more on the anticipation of future dangers. People who experience anxiety may withdraw from situations that have triggered anxiety in the past. The feeling of anxiety can persist beyond what is developmentally appropriate in response to specific events, eventually leading to one of several anxiety disorders, such as generalized anxiety disorder or panic disorder.

The distinction between an anxiety disorder as a mental health condition and anxiety as a normal emotion lies in the persistence and impact of the anxiety. Individuals with an anxiety disorder experience anxiety almost every day for about six months or more.

This persistent anxiety can occur even during shorter periods in children. Anxiety disorders are among the most chronic mental health issues, often lasting for years. Besides generalized anxiety disorder, anxiety is also a significant feature of other mental health conditions, such as post-traumatic stress disorder (PTSD) and obsessive-compulsive disorder (OCD).

The peak age for the onset of anxiety symptoms and disorders, which can range from mild to severe, is during childhood and adolescence. From a research perspective, one of the major challenges lies in accurately assessing the prevalence and patterns of anxiety, as well as understanding its longitudinal course. Clinically, this information is vital for improving early detection, differential diagnosis, prevention, and treatment for young individuals experiencing anxiety.

Anxiety among youth has become a growing concern in modern society. As children and young adults navigate the complexities of contemporary life, they often encounter a wide array of stressors that can trigger or exacerbate anxiety symptoms. This issue has attracted significant attention from researchers, educators, parents, and mental health professionals alike, as its implications extend beyond individual well-being to impact social functioning, academic achievement, and long-term mental health outcomes.

According to recent studies, anxiety disorders are among the most common mental health issues affecting young people worldwide. The World Health Organization (WHO) reports that between 10% and 20% of children and adolescents experience clinically significant anxiety symptoms during their development. Over the past few decades, longitudinal research has shown that the prevalence of anxiety disorders has been steadily increasing

An Exploratory Study of Anxiety Among Youths

among young people, with notable spikes observed in specific demographic groups and regions.

Definition and Scope of Anxiety

Anxiety is characterized by feelings of stress, fear, and worry. It is a common response to stress or perceived threats. However, when these feelings become overwhelming, persistent, or disproportionate to the situation, they can significantly impair an individual's ability to function in various areas of life. In youth, anxiety can manifest in different forms, including generalized anxiety disorder (GAD), social anxiety disorder, panic disorder, specific phobias, and separation anxiety disorder.

The scope of anxiety among youth encompasses a wide range of experiences and challenges, including academic pressure, social interactions, family expectations, peer pressure, societal norms, technological advancements, economic uncertainties, and existential concerns. Moreover, social, financial, and environmental factors can influence the prevalence and manifestation of anxiety disorders in young people.

Prevalence and Trends

Recent research indicates that anxiety disorders are among the most common mental health conditions affecting youth worldwide. According to the WHO, approximately 10% to 20% of children and adolescents exhibit clinically significant anxiety symptoms at some point in their development. Additionally, longitudinal studies suggest that the prevalence of anxiety disorders has been steadily increasing among young people in recent decades, with notable spikes seen in certain demographic groups and geographical areas.

Contributing Factors to Youth Anxiety

Several factors contribute to the development and worsening of anxiety among youth, reflecting the complex interplay of biological, psychological, social, and environmental influences. Biological factors may include genetic predispositions, neurobiological variations, and imbalances in neurotransmitter systems. Psychological factors can involve cognitive biases, maladaptive thought patterns, and coping strategies.

Social factors such as peer relationships, family dynamics, academic stressors, societal expectations, and cultural norms can also greatly affect an individual's vulnerability to anxiety. Furthermore, environmental stressors such as trauma, abuse, neglect, economic instability, urbanization, exposure to digital media, and global crises (e.g., pandemics, climate change) can contribute to increased levels of anxiety among youth.

Impact of Untreated Anxiety

The consequences of untreated anxiety in youth can be severe and far-reaching, affecting multiple aspects of their lives. Academic performance may suffer due to difficulties with concentration, memory impairment, perfectionism, procrastination, and test anxiety. Social relationships may be strained or disrupted by avoidance behaviors, social withdrawal, interpersonal conflicts, and low self-esteem.

In addition, untreated anxiety in youth often persists into adulthood, increasing the risk of developing other mental health disorders, such as depression, substance abuse, and personality disorders. Longitudinal studies have also linked prolonged anxiety in youth with negative outcomes in physical health, career success, relationships, and overall quality of life.

An Exploratory Study of Anxiety Among Youths

Significance of Addressing Youth Anxiety

The rise in anxiety among youth over the past decade has become a significant global concern. Anxiety affects multiple areas of young people's lives, including their education, social interactions, and general well-being. Addressing this issue is crucial because untreated anxiety in youth can lead to long-term psychological problems and functional impairments, as demonstrated by research from Beesdo et al. (2009).

Scope of Current Study

The present study focuses on the prevalence, risk factors, and coping strategies associated with anxiety among urban youth aged 13 to 25. It examines how socioeconomic status, family relationships, peer pressure, and academic demands contribute to the onset and management of anxiety disorders in this population. Additionally, the study evaluates the effectiveness of current interventions and offers recommendations for early detection and treatment strategies.

Problem Statement

Despite increased awareness of mental health issues, youth anxiety remains significantly under-treated. The challenges faced by young individuals with anxiety disorders are often exacerbated by societal pressures, stigma surrounding mental health care, and limited access to mental health services. Moreover, the dynamic nature of adolescence and early adulthood presents unique difficulties in diagnosing and effectively treating anxiety. A comprehensive investigation is necessary to understand the multifaceted nature of youth anxiety and to develop targeted interventions to reduce its impact.

Current Research Approach

This study uses a mixed-methods approach, combining quantitative surveys and qualitative interviews, to gain an in-depth understanding of anxiety among adolescents. The Generalized Anxiety Disorder 7-item (GAD-7) scale (Spitzer et al., 2006) is used as a standardized tool to assess the frequency and severity of anxiety symptoms. Semi-structured interviews will allow participants to share their personal experiences, triggers for anxiety, and coping mechanisms, providing valuable qualitative insights. Through this approach, the study aims to contribute to a deeper understanding of youth anxiety and inform future interventions.

LITERATURE REVIEW

The Impact of Anxiety on Youth and Strategies for Prevention and Treatment

Anxiety disorders are a significant mental health concern affecting millions of young people worldwide. These disorders can have a profound impact on a child's daily life, social relationships, academic performance, and overall well-being. It is essential to understand the causes, symptoms, and risk factors associated with anxiety disorders in youth to develop effective prevention and treatment strategies.

Causes of Anxiety in Youth

Anxiety disorders in young people can be caused by a combination of biological, environmental, cognitive, and psychosocial factors. Biological factors, such as genetic predisposition and neurological disorders, can increase a child's susceptibility to anxiety disorders. Environmental stressors, such as adverse childhood experiences, family conflict, and academic pressure, can also contribute to the development of anxiety disorders. Cognitive factors, such as maladaptive thought patterns and cognitive biases, can maintain

An Exploratory Study of Anxiety Among Youths

anxiety symptoms. Psychosocial factors, such as peer relationships, social rejection, and cultural influences, can also play a role in the development of anxiety disorders.

Symptoms and Signs of Anxiety

Anxiety disorders can manifest differently in children and adolescents, depending on their age and developmental stage. Common symptoms of anxiety include excessive worry, fear, and apprehension, as well as physical symptoms such as rapid heartbeat, sweating, and trembling. Signs of anxiety can also include avoidance behaviors, hypervigilance, and reliance on reassurance.

Types of Anxiety Disorders

There are several types of anxiety disorders that can affect young people, including generalized anxiety disorder, panic disorder, social anxiety disorder, specific phobias, separation anxiety disorder, selective mutism, obsessive-compulsive disorder, and post-traumatic stress disorder. Each of these disorders has distinct symptoms and characteristics and requires a comprehensive treatment approach.

Impact of Anxiety on Youth's Daily Life

Anxiety disorders can significantly impact a child's daily life, social relationships, academic performance, and overall well-being. Anxiety can interfere with a child's ability to concentrate, learn, and participate in activities they enjoy. It can also lead to social withdrawal, peer rejection, and feelings of loneliness and isolation. Anxiety disorders can also affect family dynamics and relationships, leading to increased stress and conflict.

Treatments and Management of Anxiety

Effective treatments for anxiety disorders in young people include cognitive-behavioral therapy (CBT), medication, mindfulness-based interventions, and lifestyle modifications. CBT is a well-established treatment approach that helps children and adolescents identify and modify maladaptive thoughts, behaviors, and physical reactions associated with anxiety. Medication, such as selective serotonin reuptake inhibitors (SSRIs), can also be effective in reducing anxiety symptoms. Mindfulness-based interventions, such as mindfulness meditation and yoga, can help young people regulate their emotions and reduce anxiety symptoms. Lifestyle modifications, such as regular exercise, healthy eating, and adequate sleep, can also help reduce anxiety symptoms.

Prevention Strategies for Anxiety

Prevention strategies for anxiety disorders in young people include promoting healthy habits, reducing academic pressure, and providing mental health education and awareness. Schools and educational institutions can play a critical role in promoting mental health and well-being by creating a supportive environment, providing access to counselling and support services, and promoting healthy habits. Parents and caregivers can also play a critical role in preventing anxiety disorders by recognizing symptoms, providing support, and seeking professional help when needed.

Roles of Schools and Educational Institutes in Addressing Youths' Anxiety

Schools and educational institutions can play a critical role in addressing anxiety disorders in young people by creating a supportive environment, providing access to counselling and support services, and promoting healthy habits. Schools can also provide mental health education and awareness, reduce academic pressure, and involve parents and caregivers in the prevention and treatment of anxiety disorders.

An Exploratory Study of Anxiety Among Youths

In conclusion, anxiety disorders are a significant mental health concern affecting millions of young people worldwide. Understanding the causes, symptoms, and risk factors associated with anxiety disorders is essential for developing effective prevention and treatment strategies.

By promoting healthy habits, reducing academic pressure, and providing mental health education and awareness, we can help prevent anxiety disorders in young people. By providing access to counselling and support services and involving parents and caregivers in the prevention and treatment of anxiety disorders, we can help young people manage their anxiety symptoms and improve their overall well-being.

RESEARCH METHODOLOGY

Aim:

Investigate and compare the prevalence, cause and manifestations of anxiety among the youth population.

Objectives:

1. Determine common anxiety symptoms and manifestations and investigate possible variations according to demographic characteristics like age, gender and qualification.
2. Assess the prevalence of anxiety among youth.
3. Identify causes and triggers of anxiety.

Hypothesis:

H₁: There is significant anxiety among youth.

Research Design:

Using numerical data and statistical analysis techniques, the study is a quantitative research approach that seeks to provide a thorough understanding of the anxiety that young people face. The present study is an **Exploratory Study**.

Population of study:

The population of the study is 115 youth adults between the age group of 18-22 in Gandhinagar.

Sampling Procedure:

Purposive random sampling is used in quantitative research.

The methodical approach or strategy used to locate, pick, organize and evaluate the data related to a specific subject is known as Methodology. Numbers, range and quantity make up quantitative data. A survey is conducted by sending an online questionnaire. Conversely, Qualitative data comprises high-quality data from sources like focus groups, interviews and so on.

HARS is the questionnaire used for this research. An established tool for determining an individual's anxiety level is the "Hamilton Anxiety Rating Scale" (HARS). It has been extensively utilized in clinical and research contexts since Max Hamilton created it in 1959. The four items on the HARS address both psychological and physical expressions of anxiety as well as other symptoms.

An Exploratory Study of Anxiety Among Youths

Anxious mood, Tension, Fear, insomnia and somatic(physical) symptoms are among the factors that these items evaluate. All the items in the questionnaire have a rating system ranging from 0 to 4, where 0 represents no symptoms at all and 4 denotes severe symptoms. Greater severity of anxiety symptoms is indicated by higher scores, which are determined by adding the rating for each of the 14 items. Assisting in the diagnosis of anxiety disorder, monitoring the course of treatment, and assessing the efficacy of interventions.

Data Collection Procedure:

To gather data, the researcher first used a Google form questionnaire (random sampling). Youth adults (18-22 years old) were asked to complete the goggle form. The data was then correctly retrieved by saving and converting the Google form of the report into an Excel sheet.

Inclusive Criteria:

- Individuals aged between the range of 18-22 years.
- Individuals who can read and write English.

Exclusive Criteria:

- Outside the age group.

RESULTS & ANALYSIS

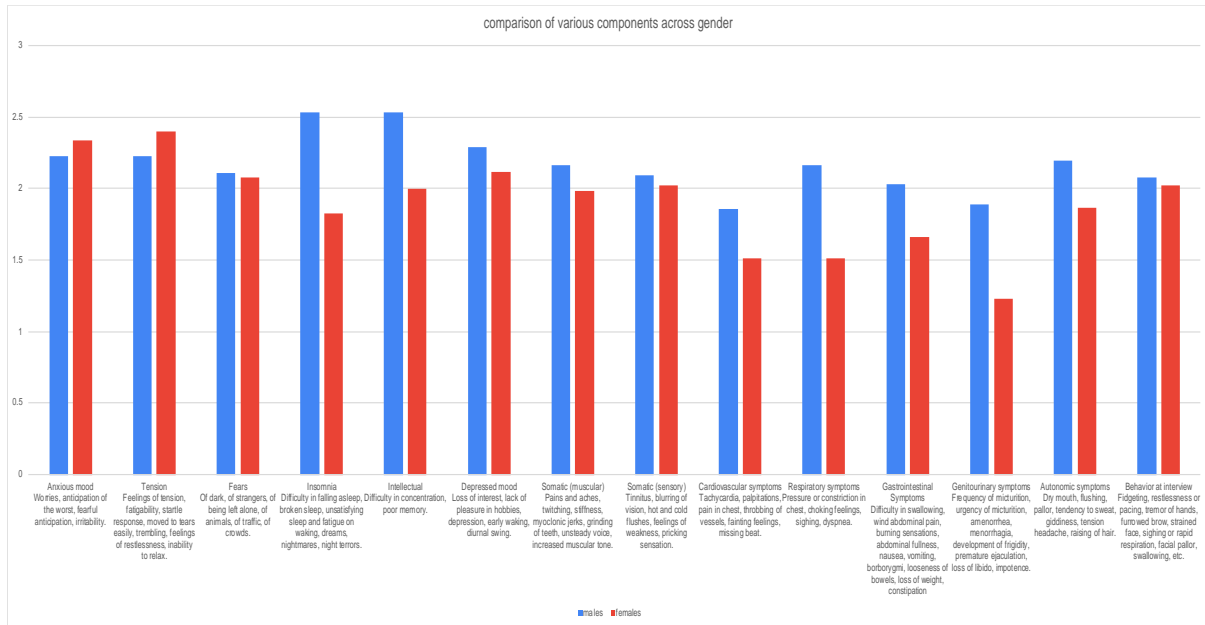
The current study is drawn by using random sampling. The sample includes 115 participants of Gandhinagar from the age group of 18-22.

Comparison based on gender

Based on the responses the differences in male and female for each question were as follows:

	MALE	FEMALE
Anxious Mood	2.22	2.33
Tension Feeling	2.22	2.39
Fear	2.11	2.07
Insomnia	2.53	1.83
Intellectual	2.53	2
Depressed Mood	2.29	2.11
Somatic(muscular) Pain	2.16	1.98
Somatic (sensory) Pain	2.09	2.01
Cardiovascular Symptoms	1.85	1.50
Respiratory Symptoms	2.16	1.50
Gastrointestinal Symptoms	2.03	1.66
Genitourinary Symptoms	1.88	1.22
Autonomic Symptoms	2.19	1.86
Behaviour at Interview	2.08	2.01

An Exploratory Study of Anxiety Among Youths

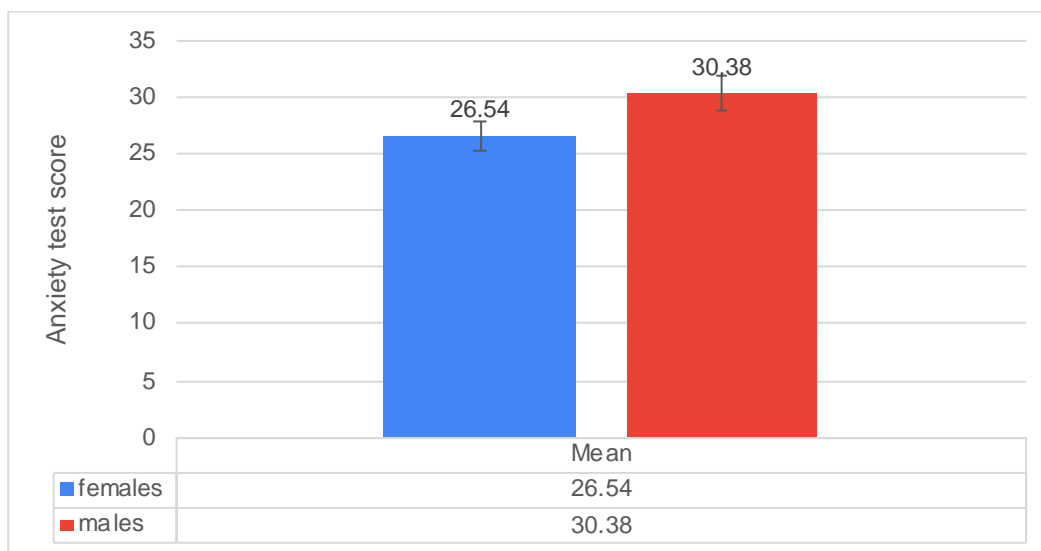


According to the survey results, we can now clearly differentiate anxiety data between males and females. Insomnia, intellectual, respiratory, gastrointestinal, genitourinary, and autonomic symptoms show a major difference where males experience them more frequently than females.

Test Results for Comparison of Anxiety Levels between Males and Females.

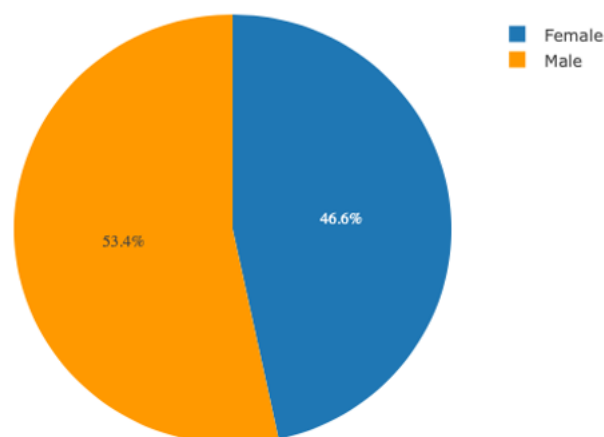
T Test: Two-Sample Assuming Equal Variances

	females	males
Mean	26.54	30.38
Observations	53	62
df	113	
P(T<=t) two-tail	0.09	n.s.
t Critical two-tail	1.98	



An Exploratory Study of Anxiety Among Youths

Anxiety Level



According to a survey, Amount The anxiety level present in females is 46.6% and in males, it is 53.4%. Anxiety is found to be more prevalent in males as compared to females.

FINDING & DISCUSSION

Finding of Study

- Out of 115 participants, 54 were female participants and 61 were male participants.
- Insomnia, intellectual, respiratory, gastrointestinal, genitourinary, and autonomic symptoms show a major difference where males experience them more frequently than females.
- Amount The anxiety level present in females is 46.6% and in males, it is 53.4%.
- Anxiety is found to be more prevalent in males as compared to females.

DISCUSSION

Anxiety may be an unavoidable mental well-being concern influencing youthful individuals around the world. This comprehensive content digs into the complex elements of anxiety disorder among youth, shedding light on different aspects, from predominance and contributing variables to treatment approaches and preventive measures' it starts by characterizing Anxiety and its scope, emphasising its sign as a complex exchange of behavioural, full of feeling, and cognitive reactions to seen dangers. Whereas sensible Anxiety can help in versatile adapting, over-the-top or obsessive Anxiety can extremely disable an individual's working over different domains. Alarmingly, cites that anxiety disorder ranks among the foremost predominant mental wellbeing issues affecting youthful individuals universally.

The World Health Organization gauges that between 10 and 20 per cent of children and teenagers show clinically severe Anxiety side effects, with longitudinal inquiries about demonstrating an upward slant within the recurrence of these disarranges in later decades' dives into the multifaceted components contributing to Anxiety among youth, counting organic impacts such as hereditary inclinations and neurobiological varieties, mental components like cognitive inclinations and maladaptive thought designs, and socio-environmental stressors like peer connections, family elements, scholastic weight, and societal desires.

An Exploratory Study of Anxiety Among Youths

Moreover, the effect of unfavourable childhood encounters, injury, and worldwide emergencies like pandemics and climate alteration is highlighted. It gives a comprehensive outline of various anxiety disorders, counting generalized Anxiety disorder (GAD), panic disorder, Social Anxiety disorder (Social Phobia), particular fears, specific Anxiety disorder, particular mutism, and obsessive-compulsive disorder (OCD). It traces the special characteristics, indications, and basic instruments of each disorder, advertising a nuanced understanding of the different signs of Anxiety in young people. Furthermore, it investigates the significant effect of Anxiety disorders on different perspectives of a youthful person's life, counting scholarly execution, social work, family flow, and general well-being. It highlights the hindering impacts on cognitive and enthusiastic working, physical well-being, and the increased risk of comorbidities such as sadness and substance abuse.

Intending to treatment and administration procedures, the content presents evidence-based approaches like cognitive-behavioural treatment (CBT), medicine (especially particular serotonin reuptake inhibitors, or SSRIs), and mindfulness-based meditations. It moreover emphasizes the importance of the way of life alterations, such as standard workouts, satisfactory rest, and sound adapting techniques, in moderating Anxiety symptoms. It recognizes the requirement for avoidance techniques and early mediation, highlighting the significant part of schools and instructive teaching intending to youth Anxiety. It advocates for making strong situations, advancing mental well-being instruction and mindfulness, giving get to advising and back administrations, diminishing scholarly weight, and cultivating parent inclusion and early referral systems.

Additionally, the content presents a systematic survey and meta-analysis centred on the predominance of Anxiety disorders among youths in India. It looks at components affecting Anxiety disorders, territorial differing qualities, sex contrasts, the effect on the quality of life, and boundaries to treatment, underscoring the requirement for comprehensive mental well-being approaches and socially fitting interventions.

Finally, it traces a quantitative investigation technique, utilizing the Hamilton Anxiety Rating Scale (HARS) to explore the predominance, indications, and signs of Anxiety among youth in Gandhinagar, India. This consideration contributes to the understanding of anxiety disorder within the Indian youth populace and educates focused on interventions. In conclusion, it offers a comprehensive and multidimensional investigation of anxiety disorders among youth, highlighting their predominance, contributing variables, impacts, and different treatment and anticipation techniques. It underscores the pressing requirement for concerted endeavours to address this squeezing mental well-being concern and advance the well-being of youthful individuals around the world.

CONCLUSION

The exploratory study on anxiety among youth through a comparative analytic lens has shed light on the multifaceted nature of anxiety and its prevalence among this demographic. Following a thorough examination and comparison of the data, several significant findings were made. Initially, young people experiencing anxiety exhibit it in varying ways based on their social context, cultural background, and availability of support systems. Secondly, the research emphasizes the various coping mechanisms that adolescents employ to deal with anxiety, including self-medication, avoidance tactics, and seeking professional assistance. To lessen the detrimental effects of anxiety on young people's mental health and general well-being, the study also highlights the significance of early diagnosis and intervention strategies.

An Exploratory Study of Anxiety Among Youths

Limitation

- Limited research on the exploratory study of anxiety among the youths.
- Due to the lack of time the survey conducted is limited to Gandhinagar and the number of participants is also less so, it does not guarantee generalization.
- This study is only limited to anxiety among youth from the age group of 18-22.
- The information was collected electronically.

Further Recommendation

Based on the results of this initial study, it is recommended that future research should focus on gaining a deeper understanding of the root causes and triggers of anxiety among young people from different demographics. It is important to conduct longitudinal studies to track the progression of anxiety disorders from adolescence to adulthood, which can help in creating targeted prevention and intervention programs. Addressing the stigma surrounding mental health issues among young people and promoting open dialogue within schools, families, and communities is also crucial. Providing accessible and culturally appropriate mental health services is necessary to ensure that all young people have equal access to support and resources. Moreover, implementing mindfulness-based practices and strategies for building resilience in educational curricula can give young people effective coping mechanisms to manage stress and anxiety in their lives.

Ultimately, by prioritizing research, education, and resource allocation in the field of youth mental health, we can foster a generation of emotionally healthy and resilient individuals.

Future Research Suggestions

1. **Longitudinal Studies:** Conduct longitudinal studies to track the trajectory of anxiety symptoms among youth over time, focusing on understanding how various factors interact and influence the development and persistence of anxiety disorders from adolescence into adulthood.
2. **Cultural Factors:** Explore the influence of cultural norms, beliefs, and practices on anxiety manifestation among youth from diverse cultural backgrounds. This could involve comparative studies across different cultural groups to identify cultural-specific risk factors and protective factors.
3. **Intervention Effectiveness:** Evaluate the effectiveness of existing interventions and preventive measures targeting youth anxiety, considering both individual and systemic approaches. This could involve randomized controlled trials to assess the efficacy of psychotherapeutic interventions, mindfulness-based programs, and community-level interventions in reducing anxiety symptoms among youth.
4. **Technology and Mental Health:** Investigate the role of technology, including social media, digital platforms, and smartphone applications, in exacerbating or alleviating anxiety among youth. Research could focus on developing evidence-based digital interventions and exploring innovative ways to harness technology for mental health promotion and anxiety management among youth.
5. **Resilience and Coping Strategies:** Explore resilience factors and coping strategies that buffer against the development of anxiety disorders among youth. This could involve qualitative research methods to understand the lived experiences of resilient individuals and identify protective factors that promote mental well-being in the face of adversity.

REFERENCES

- Anxiety disorders - Symptoms and causes - Mayo Clinic. (2018, May 4). Mayo Clinic. <https://www.mayoclinic.org/diseases-conditions/anxiety/symptoms-causes/syc-20350961>
- Anxiety Disorders. (n.d.). National Institute of Mental Health (NIMH). <https://www.nimh.nih.gov/health/topics/anxiety-disorders>
- APA PsycNet. (n.d.). <https://psycnet.apa.org/record/2008-13193-000>
- APA PsycNet. (n.d.). <https://psycnet.apa.org/record/2013-14907-000>
- Beesdo, K., Knappe, S., & Pine, D. S. (2009). Anxiety and anxiety disorders in children and adolescents: developmental issues and implications for DSM-V. *The Psychiatric clinics of North America*, 32(3), 483–524. <https://doi.org/10.1016/j.psc.2009.06.002>
- Essau, C. A., Conradt, J., & Petermann, F. (2000, May 1). Frequency, Comorbidity, and Psychosocial Impairment of Anxiety Disorders in German Adolescents. *Journal of Anxiety Disorders*. [https://doi.org/10.1016/s0887-6185\(99\)00039-0](https://doi.org/10.1016/s0887-6185(99)00039-0)
- Hofmann, S. G., Asnaani, A., Vonk, I. J., Sawyer, A. T., & Fang, A. (2012). The Efficacy of Cognitive Behavioral Therapy: A Review of Meta-analyses. *Cognitive therapy and research*, 36(5), 427–440. <https://doi.org/10.1007/s10608-012-9476-1>
- Lubman, D. I., Allen, N. B., Rogers, N., Cementon, E., & Bonomo, Y. (2007, November 1). The impact of co-occurring mood and anxiety disorders among substance-abusing youth. *Journal of Affective Disorders (Print)*. <https://doi.org/10.1016/j.jad.2007.01.011>
- McLaughlin, K. A., Greif Green, J., Gruber, M. J., Sampson, N. A., Zaslavsky, A. M., & Kessler, R. C. (2012). Childhood adversities and first onset of psychiatric disorders in a national sample of US adolescents. *Archives of general psychiatry*, 69(11), 1151–1160. <https://doi.org/10.1001/archgenpsychiatry.2011.2277>
- Mental health of adolescents. (2021, November 17). <https://www.who.int/news-room/fact-sheets/detail/adolescent-mental-health>
- Merikangas, K. R., He, J., Burstein, M., Swanson, S. A., Avenevoli, S., Cui, L., Benjet, C., Georgiades, K., & Swendsen, J. (2010, October 1). Lifetime Prevalence of Mental Disorders in U.S. Adolescents: Results from the National Comorbidity Survey Replication–Adolescent Supplement (NCS-A). *Journal of the American Academy of Child and Adolescent Psychiatry*. <https://doi.org/10.1016/j.jaac.2010.05.017>
- Pal, D., Sahu, D. P., Maji, S., & Taywade, M. (2022). Prevalence of Anxiety Disorder in Adolescents in India: A Systematic Review and Meta-Analysis. *Cureus*, 14(8), e28084. <https://doi.org/10.7759/cureus.28084>
- Sareen, J., Cox, B. J., Afifi, T. O., de Graaf, R., Asmundson, G. J., ten Have, M., & Stein, M. B. (2005). Anxiety disorders and risk for suicidal ideation and suicide attempts: a population-based longitudinal study of adults. *Archives of general psychiatry*, 62(11), 1249–1257. <https://doi.org/10.1001/archpsyc.62.11.1249>
- Semple, R. J., Lee, J., Rosa, D., & Miller, L. F. (2010). A randomized trial of mindfulness-based cognitive therapy for children: Promoting mindful attention to enhance social-emotional resiliency in children. *Journal of Child and Family Studies*, 19(2), 218–229. <https://doi.org/10.1007/s10826-009-9301-y>
- Spitzer, R. L., Kroenke, K., Williams, J. B., & Löwe, B. (2006). A brief measure for assessing generalized anxiety disorder: the GAD-7. *Archives of internal medicine*, 166(10), 1092–1097. <https://doi.org/10.1001/archinte.166.10.1092>
- Stewart, S. H., Zvolensky, M. J., & Eifert, G. H. (2002). The relations of anxiety sensitivity, experiential avoidance, and alexithymic coping to young adults' motivations for drinking. *Behavior modification*, 26(2), 274–296. <https://doi.org/10.1177/0145445502026002007>

An Exploratory Study of Anxiety Among Youths

- Trivedi, J. K., & Gupta, P. K. (2010). An overview of Indian research in anxiety disorders. *Indian journal of psychiatry*, 52(Suppl 1), S210–S218. <https://doi.org/10.4103/0019-5545.69234>
- Walkup, J. T., Albano, A. M., Piacentini, J., Birmaher, B., Compton, S. N., Sherrill, J. T., Ginsburg, G. S., Rynn, M. A., McCracken, J., Waslick, B., Iyengar, S., March, J. S., & Kendall, P. C. (2008). Cognitive behavioural therapy, sertraline, or a combination in childhood anxiety. *The New England journal of medicine*, 359(26), 2753–2766. <https://doi.org/10.1056/NEJMoa0804633>
- Warner, E. N., & Strawn, J. R. (2023, July 1). Risk Factors for Pediatric Anxiety Disorders. *Child and Adolescent Psychiatric Clinics of North America*. <https://doi.org/10.1016/j.chc.2022.10.001>
- Weisz, J. R., Jensen-Doss, A., & Hawley, K. M. (2006). Evidence-based youth psychotherapies versus usual clinical care: a meta-analysis of direct comparisons. *The American psychologist*, 61(7), 671–689. <https://doi.org/10.1037/0003-066X.61.7.671>
- What are anxiety disorders? (n.d.). https://www.psychiatry.org/patients-families/anxiety-disorders/what-are-anxiety-disorders#section_1

Acknowledgement

The author(s) appreciates all those who participated in the study and helped to facilitate the research process.

Conflict of Interest

The author(s) declared no conflict of interest.

How to cite this article: Joshi, L. (2024). An Exploratory Study of Anxiety Among Youths. *International Journal of Indian Psychology*, 12(4), 1132-1144. DIP:18.01.105.20241204, DOI:10.25215/1204.105