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PREVALENCE OF PHOBIAS, TYPES, AND FACTORS ASSOCIATED WITH IT

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ABSTRACT

Background: Although specific phobia is highly prevalent, associated with impairment, and an important risk factor for the development of other mental disorders, cross-national epidemiological data are scarce. The aim of this undertaken research was to assess the different phobias that are prevalent among people and in addition to this the factors are linked with the different phobias.

Methods: A design that would be ideal for proceeding with the research work is descriptive design. This is because the cross-sectional method adhered to and this involves a detailed assessment of the research topic. Therefore the chosen design helped in the detailed description of the aspects of different phobias and factors linked with phobia. The population that considered for executing the research work is people residing in the UK who have issues of different phobias. The age range for considering the people was be 20 to 60 years. A wide range of populations helped in a better

understanding of the prevalence of phobia and the factors that are connected with it. The sampling method that was implemented for executing this research work was the stratified random technique of sampling.

Results: The current study showed that 359 participants feel that medicines hold the potential of treating phobias (46.6%). Most of participants considered that phobias can affect people of any age (n= 649, 84.3%). There were 81 participants believed that phobia is incurable (10.5%). Fear was the most frequent factor leading to phobia (n= 467, 60.6%). Leading a life with a phobia was very painful among 495 participants (64.3%). The most frequent symptom of phobias as reported by study participants was racing heart (n= 430, 55.8%).

Conclusion: The study investigated the prevalence of various phobias and the variables associated with them. The evaluation of the relevant literature aided in a more thorough study of the research subject and its execution. Half of the participants in the present research believe that drugs have the ability to cure phobias. The majority of respondents said that phobias may afflict individuals of any age. 10% of respondents felt that phobia is incurable. Fear was the most prevalent cause of phobias. Living with a phobia was very distressing for two-thirds of the subjects. Participants in the research identified racing heart as the most prevalent sign of phobias.

INTRODUCTION

In the past 15 years, many studies and international groups have shown how important it is for seniors to take care of their mental health [1,2,3,4,5,6]. A meta-analysis done in Western countries by Volkert, Schulz, and Harter et al. [7] shows that the data about how common mental disorders are in people over 65 are contradictory. This meta-analysis looks at studies about anxiety disorders, and the prevalence numbers from those studies range from 2.3% to 8.9% [8,9,10,11]. Specific phobias were the most common disorder (4.52 percent of people have them now, and 6.66 percent have had them in their whole lives). In the same way, a recent systematic review [12] of the number of people over 65 with anxiety disorders found that the results of 36 studies done over the last 20 years were very different. In the past year, the number of seniors who had an anxiety disorder ranged from 3.6% [3] to 17.2% [13]. This review [12] found that over the past year, women are more likely than men to have had an anxiety disorder [11,14,15,16,17,18].

Also, the vast majority of studies [19,20, and others] found a negative link between age and the number of people with an anxiety disorder. The results about age and gender are the same as the most recent study about how common anxiety disorders are among older people [15]. Importantly, this review found that only three of the 36 studies that were looked at [14,19,21] looked only at the number of people with anxiety disorders. The other studies looked at how common mental disorders are among older people. As a result, most of the studies in this review looked at how common anxiety disorders were in general. They did not look at how common each type of anxiety disorder was. Agophobia [22], panic disorder [23], and generalized anxiety disorder [24] were the ones that were studied less often. In this regard, we would like to point out that none of the studies that Cisneros and Ausn [12] looked at the age of onset or the length of anxiety episodes in people over 65, nor did they describe the symptoms of this disorder.

Twelve of the studies in the review [12] used the Composite International Diagnostic Interview (CIDI) of the World Health Organization [25], and four used a version of the Mini-International Neuropsychiatric Interview (MINI [26]). Another four studies used the computer-assisted Étude sur la Santé des Ainés Diagnostic Questionnaire (ESA-Q [27]).

To add to what has been said so far, it is important to mention the MentDis ICF65+ study, which is the most recent epidemiological study that looked at the mental health of people over 65 in

Europe [13,15,28]. This is the first study to use a tool made for older people: the Composite International Diagnostic Interview for older people (CIDI65+ [29]), a standardized and structured interview for diagnosing mental disorders based on the traits of older people. Andreas et al. [13] found that 17.2% of people in Europe had anxiety disorders over the course of a year. This means that anxiety disorders are the most common type of mental illness. The same study found that 9.2% of people had a specific phobia over the course of a year [13]. Becker et al. [30] found that specific phobia is a common mental disorder that affects 7.4% of people worldwide over the course of their lives. In the study by Wardenaar et al. [31], the cross-national lifetime and 12-month prevalence rates of specific phobia were 7.4% and 5.5%, respectively.

The rates were higher in females (9.8% and 7.7%) than in males (4.9% and 3.3%), and they were higher in high/higher-middle income countries than in low/lower-middle income countries. The average age of onset was not very old (8 years). The study by Sancassiani et al. [32], which only looked at 8 people over 65, found that 2.3% of people have had a specific phobia at some point in their lives. The number of females was more than twice as high as the number of males (p 0.0001). Different studies talk about these differences between men and women in how common specific phobias are [31,32,33,34,35,36,37], but in all of them, older people aren't well represented [31,32,33,34,35,36,37]. In all of the above studies, it has also been shown that the prevalence rate goes down with age.

Even though the above studies show that specific phobia is common among older people, there are no studies that describe the symptoms of specific phobia disorder in older people and how they vary by age and gender.

At the same time, when people look at how anxiety disorders affect the functioning and quality of life of older people, they don't find a lot of information about how anxiety disorders affect people in general. Also, the few published studies [15, 38, 39, 40, 41, 42, 43] found that anxiety disorders make it harder for people over 65 to work and live a good life. Based on our research, there isn't much information about specific phobia disorder in older people. People with specific phobia have a lower quality of life and level of functioning, according to the few studies that have looked into this [31,32,37,38,39,40]. In these studies, there were not many older people and almost no people over 75. So, we need information about how specific phobia disorder affects the level of functioning and quality of life of older people. We also need studies that show when specific phobia disorder starts in older people and how long each episode lasts.

Specific phobia is important from both an epidemiological and a clinical point of view [31] because it affects a lot of people, lasts a long time, causes problems, and has a high lifetime comorbidity rate with other disorders (up to 81%).

Phobia is a problem, not just a feeling. It is an emotional symptom that causes people to feel too much anxiety or panic. The person with a phobia loses their mental stability because they have a phobia [32]. It becomes very hard to deal with the situation, which sometimes gets so bad that it can even cause a nervous breakdown. There are different ways to treat each type of phobia, so it is important to first figure out what kinds of phobias are common and what makes them worse. The aim of this undertaken research was to assess the different phobias that are prevalent among people and in addition to this the factors are linked with the different phobias.

METHODS

Study design

A design that would be ideal for proceeding with the research work is descriptive design. This is because the cross-sectional method adhered to and this involves a detailed assessment of the

research topic [33]. Therefore the chosen design helped in the detailed description of the aspects of different phobias and factors linked with phobia.

Study approach

Out of the two approaches of deductive and inductive, the inductive approach was adopted and implemented. This is because it involves developing new theories and also assessing the perception of the people that helps in better understanding of the considered research work [33].

Study population

The population that considered for executing the research work is people residing in the UK who have issues of different phobias. The age range for considering the people was be 20 to 60 years. A wide range of populations helped in a better understanding of the prevalence of phobia and the factors that are connected with it [33].

Study sample

The sampling method that was implemented for executing this research work was the stratified random technique of sampling.

Study tool

To accomplish the needed result without facing any issue and better assessment of the research topic, a cross-sectional study was implemented where first-hand data was gathered [33]. For this reason, a survey was conducted to gather data for the research work.

Data collection

Data was collected through the conduction of the survey where there was fourteen multiple-choice questions which helped in gathering data with more accuracy regarding the prevalence of phobias and factors linked with it.

Data analysis

Quantitative analysis was executed for assessing the first-hand data that was gathered in the research work [33]. This is because the data was gathered through the conduction of a survey and therefore quantitative analysis would be ideal.

Ethical Consideration

The aspect of ethical consideration was maintained by maintaining the privacy of both data sources and the people working in the comprising both researchers and participants of the survey.

RESULTS

After distribution of the survey, 770 participants were involved in the current study. Study participants were asked about their attitude toward phobias. The answers are illustrated in table 1. It is noticed from the table that 359 participants feel that medicines hold the potential of treating phobias (46.6%). Most of participants considered that phobias can affect people of any age (n= 649, 84.3%). There were 81 participants believed that phobia is incurable (10.5%). Participants' responses to other survey questions are presented in table 1.

Table 1: Participants responses to the survey questions

Item	Yes	No	Neutral
1) Do you feel that medicines hold the potential of treating phobias?	359 46.6%	204 26.5%	207 26.9%
2) Do you consider that phobias can affect people of any age group?	649 84.3%	66 8.6%	55 7.1%
3) Is phobia completely curable?	517 67.1%	81 10.5%	172 22.3%
6) Do the consumption of medicines helps in relieving the anxiety issue that leads to phobia?	466 60.5%	123 16%	181 23.5%
8) Do you consider that keeping the mind free from worries and stress helps in reducing phobias?	500 64.9%	98 12.7%	172 22.3%
9) Do you consider that meditation can help in treating phobias?	474 61.6%	99 12.9%	197 25.6%
10) Do you feel that it is easy to reduce the rate of phobia in today's generation?	386 50.1%	188 24.4%	196 25.5%
11) Do you think that medications are the only way to reduce phobias?	81 10.5%	582 75.6%	107 13.9%
12) Do you think that the approach of cognitive behavioural therapy would be beneficial for treating phobias?	591 76.8%	39 5.1%	140 18.2%
13) Do you consider that people suffering from phobia should be vocal about their issues and discuss their problems?	412 53.5%	170 22.1%	188 24.4%
14) Do you feel that there are other ways to fight the issue of phobias?	590 76.6%	34 4.4%	146 19%

Participants were asked about the factors that lead to phobias, fear was the most frequent factor (n= 467, 60.6%). Other factors are presented in figure 1.

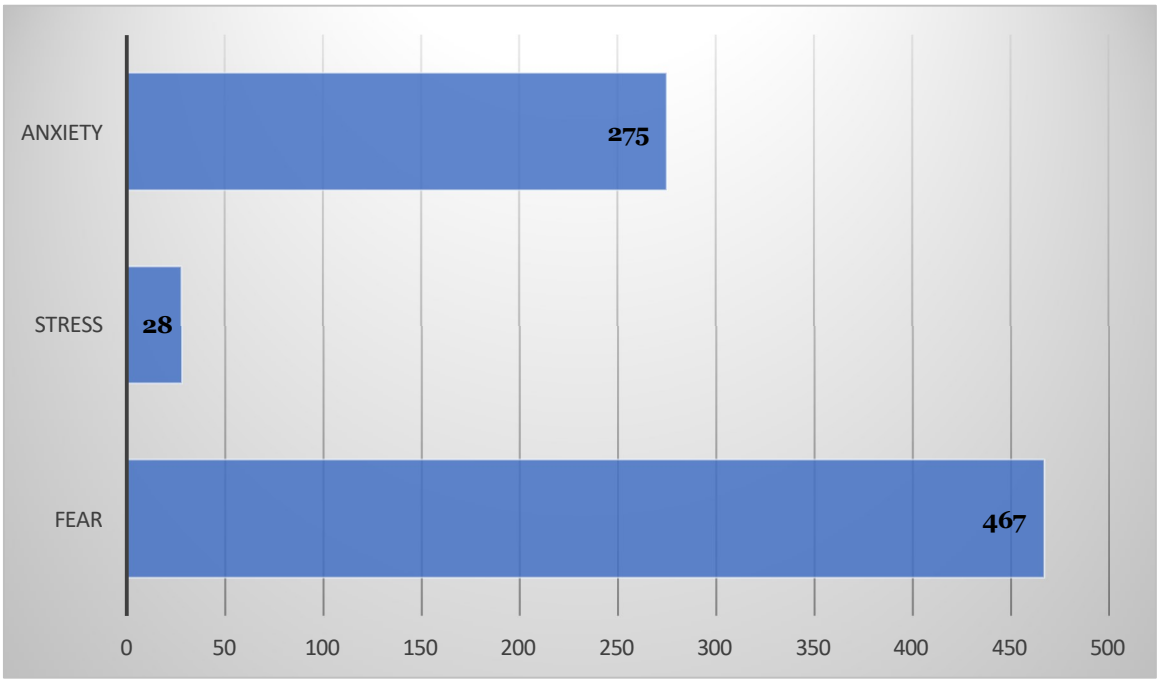


Figure 1: Factors that lead to phobias

Leading a life with a phobia was very painful among 495 participants (64.3%). The degree of pain is showed in figure 2.

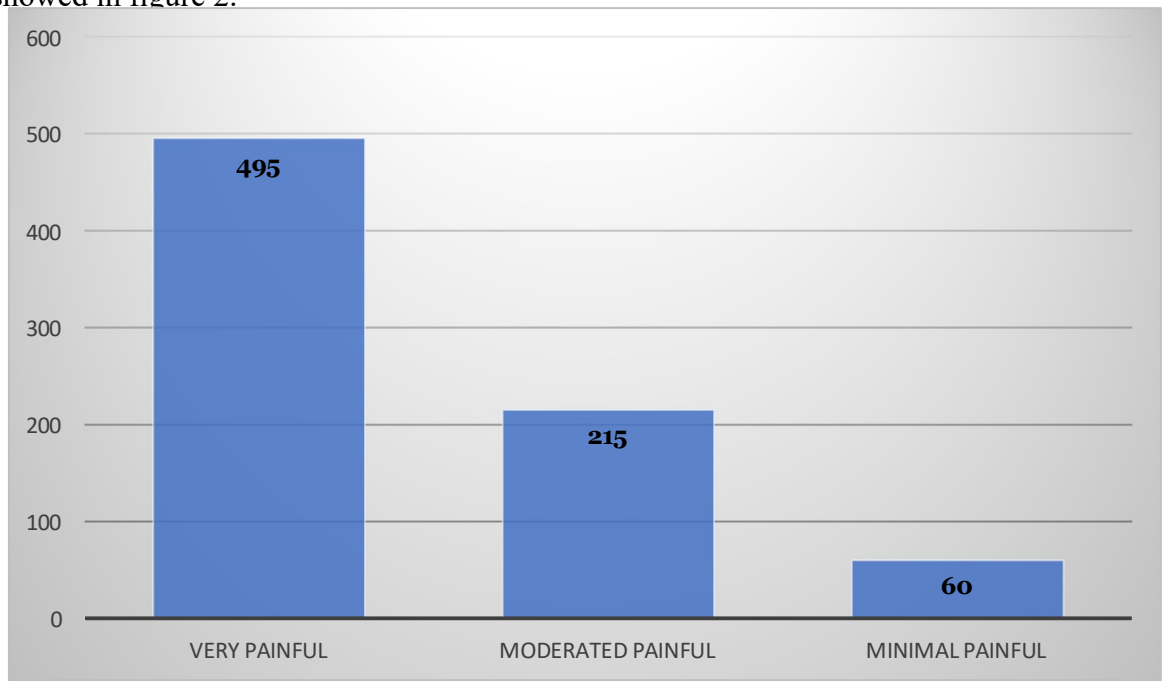


Figure 2: Degree of pain to lead a life with phobia

The most frequent symptom of phobias as reported by study participants was racing heart (n= 430, 55.8%). Other common symptoms are presented in figure 3.

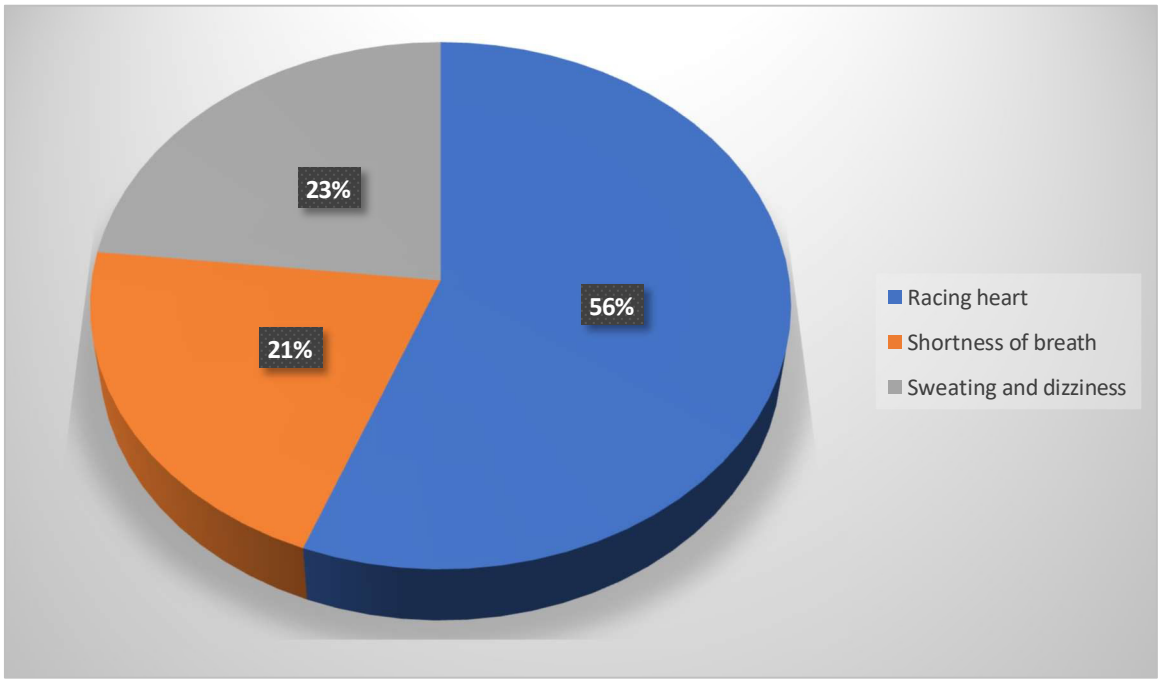


Figure 3: Frequent symptoms of phobia

DISCUSSION

The current study showed that 359 participants feel that medicines hold the potential of treating phobias (46.6%). Most of participants considered that phobias can affect people of any age (n= 649, 84.3%). There were 81 participants believed that phobia is incurable (10.5%). Fear was the most frequent factor leading to phobia (n= 467, 60.6%). Leading a life with a phobia was very painful among 495 participants (64.3%). The most frequent symptom of phobias as reported by study participants was racing heart (n= 430, 55.8%).

The average prevalence of phobias is 4.5% [7]. This difference could be caused by the fact that different diagnostic tools and sampling systems for different ages are used. Andreas et al. [13], however, found a prevalence of 9.2% over a 12-month period. In that case, the instruments and methods were the same, but the sample of this study was part of the MentDis ICF65+ study. This means that the difference should be explained by the fact that the prevalence of mental illness is different in different cities.

It was found that women were more than twice as likely as men to have a specific phobia disorder. The number of people with this disorder also went down for both men and women as they got older. These results back up what Cisneros and Ausn [12] found when they looked at the different risks of having an anxiety disorder and found that women have a higher risk [11,14,15,17,18,27]. Also, there were differences in the risk of having an anxiety disorder based on age, with the highest risk being among younger people (65–75 years) [19,20]. When studying specific anxiety disorders in people over 65, these results show how important it is to think about gender and age [15]. In the same way, these differences are important for figuring out what problems people in this population have and tailoring the treatments they get.

In terms of how common the different types of specific phobia are (animals, natural environments, blood/injections/injuries, and situational factors), the current literature suggest that people over the age of 65 are most afraid of stimuli related to the natural environment, followed by animals, blood/injections/injuries, and specific situations. According to some studies, women are up to seven times more likely than men to have a specific fear of animals and twice as likely as men to

have a specific fear of the natural environment. Even though these results aren't set in stone, they could be explained by cultural factors and traditional gender roles for women, which make society more open-minded and give women more freedom to talk about their fears and emotions. Women talk about how they feel more than men do, and when they have an anxiety problem, they are more likely to go to a mental health service [34]. 50% more women than men use mental health services [34].

In the past year, the number of people with all kinds of specific phobias decreased with age (significant values were found in the case of phobias of the natural environment). Along with age and gender, the number of important people in a person's life should be thought of as a protective factor against phobias in this age group, according to the study [35].

The average age when a specific phobia started was 38.78 (SD = 21.61) years, and the average age when it went away was 57.5. So, the average length of the phobia was about 20 years (SD = 20), and there were no big differences between men and women in how long the phobia lasted [35]. When looking at the trends of this disorder, the negative correlation between age of onset and length of disorder ($r = 0.69$) is the first thing that stands out. This could mean that when this disorder starts in younger people, it lasts longer. A closer look at the data showed that there were two groups: one group had a single episode of specific phobia that started early in life, and the other group had their first episode of specific phobia when they were older and still have it today. These numbers suggest that people with specific phobia disorder might have to deal with this problem for the rest of their lives if better, more effective ways to find and treat them aren't found [35].

The results of study [35] showed that being in a crowd or line of people made people with specific phobia disorder feel the most anxious. Being in a public place made them feel the least anxious (e.g., a store, market, theater, or parking lot). When it came to the fear of "traveling alone or taking a long trip," men and women were very different. Women were four times more likely to be worried than men. Again, these facts can be explained by differences between men and women. When women go alone, they are more likely to be physically attacked than men, so they are more afraid. Also, women's traditional gender roles make them more passive and give them less personal freedom, which could help explain the differences in this case. But there were no big differences based on age in any of the troublesome situations that were looked at [35].

The results of a study [35] showed that living things like insects, snakes, birds, or other animals, heights, enclosed spaces like caves, tunnels, or elevators, and going to the dentist or hospital caused the most anxiety in the whole group. Women are more likely to be afraid of things that move, like insects, snakes, birds, or other animals. They are also more likely to be afraid of thunderstorms, thunder, or lightning; calm water, like a swimming pool or lake; and closed spaces, like caves, tunnels, or elevators. As people got older, they were less likely to have these fears. People often think that as people get older, they become more afraid. These results show that this is not true [36].

Based on the results of this study, the most common symptoms of specific phobia were a faster or stronger heartbeat, shortness of breath, and a sweating. There were no big differences between men and women or between age groups [35].

CONCLUSION

The research examined the prevalence of different phobias and the factors that are connected with them. The assessment of the literature helped in better analysis of the research topic and for executing the research. The current study showed that half participants feel that medicines hold

the potential of treating phobias. Most of participants considered that phobias can affect people of any age. There were 10% participants believed that phobia is incurable. Fear was the most frequent factor leading to phobia. Leading a life with a phobia was very painful among two thirds of participants. The most frequent symptom of phobias as reported by study participants was racing heart.

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