

Prevalence and correlates of childhood fears in Al-Ain, United Arab Emirates

N.A. Mohammed¹, V. Eaper² and A. Bener²

معدل انتشار مخاوف الأطفال وعلاقتها في مدينة العين في دولة الإمارات العربية المتحدة

نسرين علي محمد، وفلساما إيبين، وعبد الباري بينر

ملخص: تم استقصاء انتشار المخاوف لدى 340 من المراهقين في مدينة العين في دولة الإمارات العربية المتحدة. وقد ذكر 50% من هؤلاء عن شعور بالخوف الشديد من 6 أشياء من أصل 60 شيئاً مخيفاً تحرّرت الدراسة عنها؛ وهذه الأشياء كانت: موت أحد أفراد العائلة (66.5%)، طلاق الوالدين (56.3%)، الشيطان (63.8%)، ارتكاب معصية (61.5%)، التعرّض للاختطاف (53.2%)، التعرّض للتبني (49.9%). وقد أظهر مستوى المخاوف ترابطاً إيجابياً يُعتدّ به إحصائياً مع الجنس الأنثوي، ومع فقدان أحد الأبوين بسبب الموت أو بسبب الطلاق، والعيش مع أحدهما أو مع الأقارب، والعيش في عائلات منخفضة الدخل، وبيئة منزلية غير مواتية. وقد أبلغ ما يقرب من نصف الأطفال أن المخاوف قد سببت لهم حزناً عميقاً وتداخلت في أنشطتهم اليومية.

ABSTRACT The prevalence of fear was explored in 340 adolescents in Al-Ain, United Arab Emirates. More than 50% reported feeling extremely frightened of 6 out of 60 fear items surveyed. These items were: someone dying in the family (66.5%), parents getting divorced (65.3%), the devil (63.8%), breaking a religious law (61.5%), being kidnapped (53.2%) and being adopted (49.9%). The level of fear showed a significant positive correlation with female gender, parental death/divorce, living with a single parent/relatives, living in low income families and an adverse home environment. Nearly half of the children reported that the fear caused considerable distress and interfered with daily activities.

Prévalence et corrélats des peurs juvéniles à Al-Ain (Emirats arabes unis)

RESUME La prévalence de la peur a fait l'objet d'études chez 340 adolescents à Al-Ain (Emirats arabes unis). Plus de 50 % d'entre eux signalaient ressentir une peur extrême pour 6 des 60 éléments liés à la peur faisant l'objet de ces études. Parmi ces éléments, on trouvait : le décès d'un membre de la famille (66,5 %), le divorce des parents (65,3 %), le diable (63,8 %), la transgression d'une règle religieuse (61,5 %), le fait d'être kidnappé (53,2%), d'être adopté (49,9 %). Le niveau de peur montrait une corrélation significativement positive avec le sexe féminin, le décès/divorce parental, le fait de vivre avec un seul parent/des proches, de vivre dans des familles à faibles revenus et dans un environnement familial défavorable. Près de la moitié des enfants signalaient que la peur causait une importante détresse et perturbait les activités quotidiennes.

¹Department of Psychiatry, Al-Ain Hospital, Al-Ain, United Arab Emirates.

²Faculty of Medicine, UAE University, Al-Ain, United Arab Emirates.

Introduction

There has been extensive research on fears in children over the past decade, including several cross-cultural studies [1-3]. Anxiety symptoms have been found to be prevalent in normal schoolchildren, with the rates for fears, worries and nightmares estimated at 75.8%, 67.4% and 80.5% respectively [4]. On the other hand, the prevalence of childhood phobias have been found to be 2.3%, 14.5% and 22.2% respectively for clinical, sub-syndromal and sub-threshold phobias [5]. Age and gender effects have also been observed, with higher levels among older children and girls [6,7]. Gender differences have also been noted with regard to the type of fear, with girls expressing worries about family members, while boys tend to worry about their own performance [8].

Comparisons of American, Australian, Chinese and Nigerian children have shown that Nigerian children expressed higher levels of fear than the other three groups [9]. Studies in the United States of America have also observed that African-Americans report more worries than white or Hispanic children [6]. However, such global cross-cultural similarities and differences do not necessarily reflect the unique ethnic, socio-demographic, geographic and other influences within each of these countries. It has been suggested that cultures that favour inhibition, compliance and obedience serve to increase internalizing behaviours, such as fear, anxiety and depression [10]. Thus, the higher rates observed in Nigerian children could at least in part be explained by the high value Nigerian culture places on obedience and respect in its childrearing practices [11].

Thus, it seems that the prevalence and patterns of fear among children may be influenced by cultural factors. Furthermore,

attitudes, beliefs and value systems may be culturally mediated and this in turn may play a role not only in the kinds of problems that children exhibit, but also in the perceptions of these problems by significant adults. These observations further highlight the need to study childhood fears with a focus on ethnicity and culture. The present study was therefore carried out to ascertain the nature and prevalence of fears in a sample of secondary and tertiary schoolchildren in the United Arab Emirates (UAE).

Methods

The target population of this study was the 25 000 children enrolled in the secondary and tertiary classes in the 106 government schools in Al-Ain, United Arab Emirates (UAE). Using a multistage stratified sampling technique, the schools were selected first (2 boys' schools and 2 girls' schools), then the classes, and finally the students were included in the study by means of a simple random numbering system. A total of 400 students attending the secondary and tertiary school classes (aged 12-17 years) were thus chosen for the study. The only exclusion criteria were chronic physical illness or attendance at a special educational class for learning disabilities. The 60-item modified version of the Louisville fear survey for children was used [12]. This is a self-reporting questionnaire covering the full range of fear behaviours for children aged 4-18 years, with three principal factors; physical injury, natural or unnatural dangers and psychic stress. Each fear is rated on a three-point scale: (1) no fear, (2) normal or reasonable fear, and (3) excessive or unrealistic fear. Administrative approval was obtained from our institution, and the project was approved by the De-

Table 1 Association between fear level and sociodemographic characteristics

Sociodemographic characteristic	No.	Median level of fear (mean rank)	P-value*
<i>Sex</i>			0.0001
Male	149	107.85	
Female	191	216.31	
<i>Nationality</i>			0.855
United Arab Emirates	210	158.05	
Arab	122	146.70	
Other	8	127.85	
<i>Parental marital status</i>			0.014
Married	306	164.65	
Divorced/widowed	34	207.78	
<i>Family structure</i>			0.017
Living with both parents	303	164.05	
Living with single parent/relatives	37	204.47	
<i>Home environment and family relationships</i>			0.016
Very good	165	173.37	
Satisfactory	151	156.58	
Poor	24	215.52	
<i>Academic performance</i>			0.999
Very good/excellent	84	148.26	
Average	123	148.70	
Below average/poor	89	148.44	

*Mann-Whitney U-test.

partment of Education and the head teachers of the participating schools.

Data were analysed using SPSS. The Student *t*-test was used to evaluate the significance of differences between mean values of two continuous variables and the Mann-Whitney test was used for non-parametric distribution. The Kruskal-Wallis one-way analysis of variance (ANOVA) was used for comparison of several group means.

Results

From the 400 children selected, 340 completed questionnaires were returned, repre-

senting a response rate of 85%. There were 191 girls (56.2%) and 149 (43.8%) boys. The sociodemographic characteristics are given in Table 1. Of the 340 children, 62% were UAE nationals and the rest were from other Arab countries. We found 10% of the children had experienced parental death or separation and 11% were living with a single parent or relatives. Furthermore, 64% of the children came from low-income families living in government housing and 7% reported an adverse home environment (relationship difficulties with a family member).

Of the 60 fear items included in the survey, more than half of the students reported "excessive or unrealistic" fear on 6 of the

items. These items were: someone dying in the family (66.5%), parents getting divorced (65.3%), the devil (63.8%), breaking a religious law (61.5%), being kidnapped (53.2%) and being adopted (49.9%).

Girls reported higher levels of fear than boys ($P < 0.0001$). The fear level showed a significant positive correlation with parental death/divorce, living with a single parent or relatives, living in low-income government housing, and an adverse home environment (Table 1). Furthermore, 146 (42.9%) children reported that their fears caused them considerable distress most of the time, 60 (17.6%) reported that they sometimes felt distressed and the remaining 134 (39.4%) reported no distress. Similarly, 146 (42.9%) said that their fears interfered significantly with their daily activities, 86 (25.3%) reported that the fears somewhat interfered, and the remaining 108 (31.8%) said that there was no interference.

Discussion

The six most frequently cited fears by the children fell mostly in the category of physical injury, with an additional element of personal loss, such as someone dying in the family, parents getting divorced, being kidnapped or being adopted. This is in contrast to some Western studies that have found a higher prevalence of fear items relating to physical injury based on societal or man-made dangers, e.g. nuclear war [13]. Furthermore, the top six fears in a cross-cultural study of American, Australian, Nigerian and Chinese children included: being unable to breathe, being hit by car, bombing attacks, earthquakes, fire and falling from a height [9]. These items relate

to physical injury (mostly man-made) and natural/unnatural dangers.

Girls reported more fears than boys, which is in keeping with the findings of other studies [14,15]. Our observation of the high prevalence of fears about the devil and breaking a religious law are in keeping with the sociocultural characteristics of the population. However, the high rates of fear of parental divorce or being adopted are surprising. This may be at least partly due to the rapid social change that has occurred in the UAE over the past 3 decades with the economic boom that resulted from the oil industry [16]. Although economic growth has produced a dramatic improvement in the standard of living, it has also caused increasing stress on family life with a consequent increase in divorce rates in the country. Furthermore, we found that parental death or divorce, and living with only one or neither parent increased the fear level among children. This observation might have been thought unlikely in the Arab culture, given the popular belief that an extended family network acts as a mitigating factor in the psychological health of children. However, it may again reflect the recent changes in the family and societal make-up of the UAE resulting in a preference for a nuclear family arrangement, especially among the younger generation. Generational differences in social change have been reported, with younger parents having educational and social experiences that are closer to those of their teenage children [17]. The effects of these family and societal factors seem to have a particularly negative impact on those children coming from low-income families, as shown by the association with low-income government housing and an adverse home environment with poor interpersonal relationships.

Given that we used a self-reporting questionnaire, it is unclear how far these

observations reflect the children's subjective experience. However, they provide a direct measure of the child's own perceptions of his or her own mental state and environment. Whatever the cause, the results point to increased feelings of insecurity among children. Further research to gain a better understanding of these issues is required.

Our findings confirm that high fear levels exist among children in the UAE, and highlight the salience of both developmental and cultural factors in the development and nature of children's fears. Excessive childhood fears, although less refractory than those of adults, can be persistent. Research has shown that characteristic phobic symptomatology and co-morbidity may facilitate the identification of individuals at risk of persistent symptomatology [5]. Ear-

ly detection and appropriate intervention is therefore indicated for these vulnerable children. School mental health screening programmes can be used effectively for this purpose. While nearly half of the children reported that their fear was causing them distress and interfering with daily functioning, none had previously been recognized or received any professional help. This has implications for the planning and provision of child health services in the country. The culture-specific fears and risk factors identified in this study could be used to sensitize school doctors and other health professionals to the possibility of such problems among children during routine screening. This could be achieved by the training of teachers and other health professionals involved in the care of children.

References

1. Ollendick TH, King NJ, Frary RB. Fears in children and adolescents: reliability and generalizability across gender, age and nationality. *Behaviour research and therapy*, 1989, 27(1):19-26.
2. Gullone E, King NJ. The fears of youth in the 1990s: contemporary normative data. *Journal of genetic psychology*, 1993, 154(2):137-53.
3. Bernstein GA., Borchardt CM, Perwien AR. Anxiety disorders in children and adolescents: a review of the past 10 years. *Journal of the American Academy of Child and Adolescent Psychiatry*, 1996, 35(9):1110-9.
4. Muris P et al. Fears, worries and scary dreams in 4- to 12-year-old children: their content, developmental pattern, and origins. *Journal of clinical child psychology*, 2000, 29(1):43-52.
5. Milne JM et al. Frequency of phobic disorder in a community sample of young adolescents. *Journal of the American Academy of Child and Adolescent Psychiatry*, 1995, 34(9):1202-11.
6. Silverman WK, La Greca AM, Wasserstein S. What do children worry about? Worries and their relation to anxiety. *Child development*, 1995, 66(3):671-86.
7. Dong Q et al. The stability and prediction of fears in Chinese children and adolescents: a one-year follow-up. *Journal of child psychology and psychiatry*, 1995, 36(5):819-31.
8. Stevenson-Hinde J, Shouldice A. 4.5 to 7 years: fearful behaviour, fears and worries. *Journal of child psychology and psychiatry*, 1995, 36(6):1027-38.

9. Ollendick TH et al. Fears in American, Australian, Chinese and Nigerian children and adolescents: a cross-cultural study. *Journal of child psychology and psychiatry*, 1996, 37(2):213–20.
10. Ollendick TH, Yule W. Depression in British and American children and its relation to anxiety and fear. *Journal of consulting and clinical psychology*, 1990, 58:126–9.
11. Munroe RL, Munroe RH. Co-operation and competition among East African and American Children. *Journal of social psychology*, 1997, 101:145–6.
12. Miller LC, Barrett CL, Hampe E. Factor structure of childhood fears. *Journal of consulting and clinical psychology*, 1972, 39(2):264–8.
13. King NJ et al. Fears of children and adolescents: a cross-sectional Australian study using the Revised-Fear Survey Schedule for children. *Journal of child psychology and psychiatry*, 1989, 30:775–84.
14. Ollendick TH, King NJ. Fears and their level of interference in adolescents. *Behaviour research and therapy*, 1994, 32(6):635–8.
15. Bouldin P, Pratt C. Utilizing parent report to investigate young children's fears: a modification of the Fear Survey Schedule for Children—II: a research note. *Journal of child psychology and psychiatry*, 1998, 39(2):271–7.
16. Ghubash R, Hamdi E, Bebbington P. The Dubai Community Psychiatric Survey: acculturation and the prevalence of psychiatric disorder. *Psychological medicine*, 1994, 24(1):121–31.
17. Swadi H, Stewart T. Family functioning in Arab families. *Arab journal of psychiatry*, 1999, 10(1):39–49.