

**Research Article**

## **COMPARISON OF FAMILY EMOTIONAL ATMOSPHERE AND PARENTING METHODS OF MOTHERS OF CHILDREN WITH ANXIETY DISORDERS WITH MOTHERS OF NORMAL CHILDREN**

**Mahboobeh Banani<sup>1</sup> and \*Mahmood Borjali<sup>2</sup>**

<sup>1</sup>*Department of Psychology, Alborz Science and Research Branch, Islamic Azad University, Karaj, Iran*

<sup>2</sup>*Department of Psychology, Karaj Branch, Islamic Azad University, Karaj, Iran*

*\*Author for Correspondence*

### **ABSTRACT**

Nowadays, many efforts have been made to improve maternal-child interaction in mothers especially mothers of anxious children. The aim of the present study was to compare the emotional atmosphere of family and parenting practices of mothers of children with mothers of children with anxiety disorders are common. This research method is casual or causal-comparative. The study population included all normal children and their mothers and all anxiety children with their mothers in Tehran. The sample of this research had formed 80 children (40 normal children and 40 children with anxiety disorders) and 80 mothers (40 mothers of normal children and 40 mothers of children with anxiety disorders) that in sampling of children and mothers of normal children was used cluster sampling multistage sampling. for children and mothers of children with anxiety disorders purposive sampling. For collecting data, the emotional atmosphere Hill Bern questionnaire, Dayna Boumarind parenting methods questionnaire and Espence children's anxiety questionnaire with clinical interview was used. To analyze the data of this study, multivariate analysis of variance (MANOVA). The results showed that there are differences between children with anxiety disorder with normal children in the family emotional atmosphere in all components of the emotional atmosphere and normal children had better than anxiety children in all components of the emotional atmosphere. The results showed that there are differences between the two groups of mothers of children (anxiety and normal). according three parenting methods, mothers of anxiety children were used more autocratic methods and mothers of normal children were used more decisive and confident methods and also mothers of normal children were more permissiver than mothers of children with anxiety children. ( $0.01 \geq P$ ). The results of the previous research has shown that emotional family atmosphere tense and using both dominant and easy way of parenting by mothers leads to aggressive behavior, anxiety disorders, depression and antisocial tendencies or delinquency in children and adolescents.

**Keywords:** *Family Emotional Atmosphere, Parenting Methods, Mothers, Children, Anxiety Disorder*

### **INTRODUCTION**

Family is the first social life institution for child that plays an important role in the formation of habits and social ideas and personality of the child and the child's mental development. Family is the first and most important environment in which child is aware of the quality of human relationships and according to most psychologists first few years of life experiences that often happens in the family which determines underlying character and the subsequent behavior of people. Family Relationships because of its close interaction with each other and treat each member to another member creates an environment full of emotion, passion, affection, respect, hatred and fear. In this situation, family relationships, the key to a child's experience is in relation to others, shape his/ her identity and he/she gradually garnering a picture of the picture forms the basis of his future character (Shafiabadi *et al.*, 2012). The family is one of the most important factors contributing to the overall growth of the child. Family influence on children begins from birth and appear with power and specific learning and may persist throughout a person's life and specific values are attributed to the effects on the child's parent. The family is basically a focus aid, relief, recovery and healing. It is a focus that must enter relieve stress on family members and pave the way to growth and prosperity. If the family is healthy and constructive environment for its members and

### **Research Article**

meet their physical and mental needs to be watered from a natural source of love and will need less medical institutions outside the family. In family no factor does contain the unhealthy relationship between the size of a turbulent and destructive consequences. In this type of relationship, there is no love, affection and such an environment is conducive to the development of antisocial behavior and delinquency. In families that parents have kind behavior, usually children develop positive ethical behavior and respect for others and motivation. Family influence on various aspects of mental, psychological and social character of the child is numerous. Self-concept and self-worth "self" is shaping the attitudes of children severely affected family members especially to his/her parents. If parents truly love their child, trusted him/her, he/she also learns to love others and be of interest to others. Children in family learn basic beliefs about the world. Grows physically and mentally, learns the ways of speaking, learn the basic norms of behavior and finally shape attitudes, behavior and mental and become social (Heybati, 2002). Satiyer believes that there are feelings among family members is not known if these feelings into the shed, eating roots and family welfare and falls self-esteem of family. The underlying assumption is that holistic approaches to experience the excitement of his family who are not aware or if the emotions are suppressed, atmosphere of "emotional death" is ruling and vague connection to indirect and inefficient According to Satiyer, if adults have frustration, despair and emotional death, cannot be good leaders for the family, good parents and being balance is not impossible. Parents just need to practice skills and be aware of family relationships. Such parents are mature and responsible families and living example of the type of family responsibilities. Apostolic which leads into the channels of creativity and growth pressures in the domestic network and production Many studies have been done on how to deal with children, parents and educational methods, suggest that parenting practices have long effects on attitudes, expectations, and ultimately the character of the future. Parents who do not let children express or comment, prevent child inner emotions and thus the future of the children in those neurotic, anxious and depressed and will be distracted (Ahmadian, 2005). In fact, long been known that some of the trends in parenting is associated with the emergence of non-adaptive behavior of children (Webster and Herbut, 1994). Besides concerns about childhood, so that had previously been thought, is not transient or not safe. Anxious children are concerned because they cannot afford to work well with the other children, and it provides long-term impact on their self-esteem Many parents beliefs about the features that are more likely to have children and child practices methods that leads to that features. They are pushing their children towards the goals chosen by combining a variety of compliance and strict behave. Sometimes they are accepted and strict that such parents without anxiety and neuroticism inhibition involving a hostile discipline, self-limiting and power or inexperience in conformity with the wishes and needs of others, which is a combination of excessive leniency, they allow children to explore their surroundings and get interpersonal competence, and sometimes rejection and strict and methods of making them self-discipline, unquestioning compliance of regulations and directives based upon rigorous and disciplined against mistakes that the situation of conflict and neurosis in children leads to inappropriate behavior and sometimes easygoing and exclusion and sometimes leniency and dismissive and disciplined than any leniency and heterogeneous to allow anything to do with children and their saidthey expect their children so that they behave wisely and sometimes leniency and accept that the methods of dialogue friendly explanation, reasoning and mild sanctions (Hettrington *et al.*, 1994).

A variety of psychological disorders and their behavioral patterns more or less different from time to time and from one culture to another show, so that human history has shown, many men, women and children infected.

Until the twentieth century, mental illness, children were viewed more as miniature adults. But from the early twentieth century began systematic studies on various aspects of children's mental disorders are considered independent, was in most cases, children may be part of the differences in the normal behavior of the normal population. For example, a toddler is normal moodiness may indicate the moodiness of a child six years of age, followed by a unique stimulation may be evidence of a social disorder. Overall judgment on whether the child is a variable transformation or does a serious problem to the child's age, frequency, intensity, and especially the number of characters depend dysfunction .

## Research Article

According to Ross as a mental disorder in which the behavior shown by the child deal with a social norm and that is incompatible. This means that the behavior occurs with such frequency or intensity the adults in children's lives in those circumstances in excessive amounts, more or less recognize.

Anxiety disorders are the most common emotional disorders - children are psychological. Anxiety is a state of encouragement, everyone is anxious, the phobic pervasive, unpleasant symptoms are often vague or automatic (autonomic), such as headache, sweating, palpitation, dyspnea and chest discomfort in the stomach with it is (Kaplan, 2003). Childhood anxiety disorder is not a passing phenomenon for children up to the age of adolescence and adulthood if left untreated continues and creates many problems in the future child. However, excessive leniency or restriction by parents, especially his mother, who plays the most important role of the putative father, incomplete growth of cultured Misconduct and anxiety in children and leads them.

### Family Emotional Atmosphere

#### Definitions of Family Emotional Atmosphere

The family's emotional and psychological space of mental and emotional relationships exchanges between its members. The totality of these relations has a particular form of behavior that is actually the dominant determinant of family members. The pattern of human relationships that establish family called familial atmosphere. Family atmosphere may be competitive or cooperative, friendly or hostile, authoritarian or, regular or combined with chaos. Family environment, children will present a model of human relations (ShafiAbadi *et al.*, 2012).

Family atmosphere in the spirit of public affection in the family, family atmosphere determination requires an emphasis on interpersonal relationships; family, personal guidance emphasizes the organization and structure of the family and the family (ShafiAbadi *et al.*, 2012).

Shariatmadari (1995) defines this emotional atmosphere: the emotional atmosphere of the family relationship and attitude of a family together. Comment family together, emotion and passion to each other and how their involvement or non-involvement work together and cooperate or compete with each other, how they are linked (Shariatmadari, 1995).

#### Determinants of Family Emotional Atmosphere

- 1) **Mother:** The first family member that is directly related to the child's mother (ShafiAbadi, 2012). When a child feels that he will understand loneliness and hurt mental will be blind.
- 2) **father:** in childhood as strong as the need to support father need not be (ShafiAbadi, 2012).
- 3) **Affects:** Species abundance of emotion emotional beings that can recognize emotions.
- 4) **Kindness:** compassion and empathy is one of the most important needs and the lack of it can cause inefficiencies and other emotional disorders.
- 5) **Caress:** Every child should feel safe to have at least one person to love and be loved by somebody (ShafiAbadi, 2012).
- 6) **Confrimention:** self-esteem, physical security, a sense of intimacy and attachment, sense of responsibility, need motivation, happiness and the need to emphasize the need to acknowledge and finally spiritual need of the characteristics of a healthy family.
- 7) **Common experiences:** Children with parents when problems arise, they can be examples of past experiences for their child and encourage him, he will for problem solution. The problem to be solved in the future is dependent parents.
- 8) **giving presents:** an attempt to motivate the child to give praise and reward exterior. This method as a method of social control and a strong emphasis on punishment can be effects (ShafiAbadi, 2012).
- 9) **Encouragement:** The traditional way to convince a child to obey, the reward and punishment as effective in the past has no effect. Encourage our children to know their rights and encouraged if the value is not trying to encourage unresponsive (ShafiAbadi, 2012).
- 10) **Relying:** assure the kind of skills to help children to develop self-esteem and show them the way they are desirable and does not belong are accepted competent (ShafiAbadi, 2012).
- 11) **Security:** When parents talk to their children listen well and his parents to find a good listener with a sense of security, and all of their problems will, and peers; otherwise, the friend brings.

## **Research Article**

### **Parenting Practices Methods**

Each family also certain forms of personal and social education of their children are used. This method is called parenting method influenced by various factors, including cultural factors, social, political, economic, and so on which the normal growth and personality and mental children. Parents who do not let children express or comment, emotions and inner feelings of the child and thus prevent future people, anxious and depressed and will be distracted (Ahmadian, 2005).

Often parental discipline in terms of interaction between the two after their behavior has changed. After the first emotional relationship with the child is concerned about the behavior of responsive and receptive begins to neglect and dismissive behavior that has been central to the needs and desires of parents, ends. The second dimension of parental control over children's cover and the limiting behavior and demand leniency is to a variable in which the behavior of the child, to have a few limitations.

The combination of these two important dimensions' acceptance to rejection "crackdown against leniency" decisive and credible models, authoritarian and egalitarianism, Permissive and form (FarziGolfazani *et al.*, 2007). Ziglmen Has been divided maternal-child interaction in to 4 part: has been divided into 4 part:

- 1) Authoritarian parents 2) empowered parents 3) Permissive parents 4) unconcerned parents.
- 2) also rather different patterns of parenting methods has to offer. According to Parents have a parenting method: a) authoritarian b) decisive and credible, C): egalitarianism and Permissive

### **Concept of Anxiety and Mental Illness**

It is also one of the most common anxiety disorders, affective disorders - Children are psychological anxiety disorders DSM-V is the fifth largest diagnostic category in DSM-IV class with the same name. But the difference is that there are many disorders, anxiety disorders are described in DSM-VI under the new guidelines of the classes of anxiety disorders, obsessions and OCD and related disorders, and problems associated with PTSD and the stressing separately classified. The main changes in the DSM-V has been removed floor disorder (PTSD and OCD - practical) and placing them in a separate diagnostic category, and the addition of separation anxiety disorder in DSM-IV as other disorders of infancy, childhood and adolescence is a disorder in the DSM-V is discrete. Anxiety disorders in DSM-V include: generalized anxiety disorder (constant stress), disorder panic disorder with agoraphobia (fear of sudden attacks), Phobia without History of Panic (irrational fears of specific objects and situations) disorders, obsessive - practical (persistent, unwanted thoughts or obsessions, which may conflict, or to perform certain actions associated). Lubrication theory, anxiety disorders resulting from unresolved conflicts and unconscious are considered. Learning theories learned in the response of the fear and the feeling of inability to control life events focus.

Studies on the prevalence of the disorder have shown that about 12% to 8% of children and 10% - 5% of adolescents with an anxiety disorder diagnostic criteria that are somewhat normal life and performance of the routine they have According to psychodynamic approaches suffer from the anxiety caused by the conflict for understanding anxiety disorders, explanations based learning processes are based on classical conditioning and operant conditioning agent. Classical Conditioning Operant conditioning of anxiety explains the different behavior in relation to anxiety sets.

in a study concluded that children of anxious mothers are anxious and stressed the importance of environmental factors and the effect of stressful events, especially events beyond the control of anxiety in children found.

Anxiety is an emotional and physiological responses to thorough internal alarmed that simply goes away. Anxiety disorders are mostly young people who started it usually is in the middle of the third decade of life. Specific physical symptoms associated with anxiety Personality conflicts between various processes usually because a mental torment that Freud called it anxiety. Anxiety can be conscious or unconscious, and there is always a sign that the conflict is created. When conflict causes a person to feel helpless and unable to cope, anxiety is created. Intense anxiety to go to their expected outcomes depend.

### **Internal Investigation**

Rahmani and Moheb (2011), in their study on the emotional atmosphere of the family and the methods of the two groups of normal and disturbed children had done pursuant to the results of that there is a link



### **Research Article**

investigation emotional atmosphere of the family and children's methods showed that the two groups of normal and disturbed children in all of the tests conducted on the emotional atmosphere, the eight subscales (love, comfort, effectiveness of shared experiences, encouraging confidence, security and give it away) is different from normal children Compared with children with generalized anxiety of love, comfort, confirm, shared experience give encouragement and confidence and feel more secure, and the total score obtained by the three methods of family emotional atmosphere of parenting is a positive significant correlation (quoted by ShafiAbadi, 2012).

The researchers at the University of medical sciences (2012) in a study to examine the role of methods in predicting anxiety and symptoms of obsessive thoughts - The action began and concluded that parents of adolescents with authoritative parenting practices, have children with anxiety and obsessive thoughts thought - action is low and parents who are authoritarian and permissive parenting methods have children with anxious thoughts and obsessions - are practical (Iranian Students' News Agency).

### **External Investigations**

to the conclusion that the foundations of psychological development - social, emotional feeling of safety and satisfaction of children with understanding, harmony and love in the family and they will lead to strengthening confidence in said conclusion that one of the names in the upbringing of their child's mental health. If the mental health of the family, the parents of children with a balanced character, consistent, social, Baatmad esteem, sense of responsibility and will.

In the research that has been done abroad methods adopted by parents are obvious behavioral disorders. Reinforcement conducted by Loviat 1943 (quoted by Shamlu, 1993) has shown that the use of both dominant and Permissive parenting practices by mothers may lead to aggressive behavior, anxiety, depression and antisocial tendencies or delinquency in children and adolescents.

Kaskel (2001) in another study concluded between parenting methods and children's anxiety there were related. Parents anxious manner interfering with their children and children in conflict with anxiety in children normal practice and negative interact interactions siblings brotherhood higher levels conflict and intimacy than normal children showed less than his troubled brother or sister

Laura and Niditch (2011) in a study on the relationship between prenatal maternal anxiety child anxiety in childhood and adolescence has done on children between 7 and 13, there were concluded between maternal anxiety and anxiety in childhood and adolescence and women who are experiencing high anxiety during pregnancy predictor of high anxiety in childhood and adolescence, child and maternal anxiety during pregnancy are significant and positive relationship with the child's anxiety in childhood and adolescence.

The findings by Alistonand Vatrez & Melani (2012) on children 7 to 13 years suggests that between parenting method and parental controls are anxious children and parents there is a nervous, anxious children They train.

Hern *et al.*, (2013) said in research on children 8 to 14 years to achieve this result, the level of efficiency and methods anxious children below the parents that the children fear communities. The results showed that parental controls significant levels of dysfunctional attitudes and beliefs, methods and beliefs of parents with children coping skills, and there Efficacy parents dysfunctional parents.

### **The Main Purpose of this Research**

Comparsion of family emotional atmosphere and parenting methods of mothers of children with anxiety disorders with mothers of normal children.

### **Secondary Purpose of the Study**

1) Comparison family emotional atmosphere of children with anxiety disorders (generalized anxiety disorder, separation anxiety, social phobia, obsession - practicality, fear of physical harm, fear of open spaces) with normal children in all dimensions of family emotional atmosphere (love, comfort, shared experiences, gift giving, encouraging, verification, reliability, security).

2) Comparsion parenting methods of mothers of children with anxiety disorders (generalized anxiety disorder, separation anxiety, social phobia, obsession - practical, fear of physical harm, fear of open spaces) with mothers of normal children in terms of firm and reassuring method.

### **Research Article**

3) Comparison parenting methods of mothers of children with anxiety disorders (generalized anxiety disorder, separation anxiety, social phobia, obsession - practical, fear of physical harm, fear of open spaces) with mothers of normal children in terms of authoritarian method.

4) Comparison parenting methods of mothers of children with anxiety disorders (generalized anxiety disorder, separation anxiety, social phobia, obsession - practical, fear of physical harm, fear of open spaces) with mothers of normal children in terms of Permissive method.

### **Research Hypotheses**

#### **Main Hypothesis of this Study**

1) Among children with anxiety disorder and normal children in family emotional atmosphere, there is significant difference.

2) Among parenting Methods of mothers of children with anxiety disorders with mothers of normal children there is difference .

#### **Secondary Hypothesis of this Study**

1) Among children with anxiety disorders (generalized anxiety disorder, separation anxiety, social phobia, obsession - practical, fear of physical harm, fear of open spaces) with normal children in all aspects of the emotional atmosphere (love, comfort, impact on common experiences, gift giving encouragement, approval, confidence, security) there is difference.

2) Among mothers of children with anxiety disorders (generalized anxiety disorder, separation anxiety, social phobia, obsession - practical, fear of physical harm, fear of open spaces) with mothers of normal children in terms of firm and reassuring parenting method there is difference.

3) Among mothers of children with anxiety disorders (generalized anxiety disorder, separation anxiety, social phobia, obsession - practical, fear of physical harm, fear of open spaces) with mothers of normal children in terms of authoritarian parenting method there is difference.

4. Among mothers of children with anxiety disorders (generalized anxiety disorder, separation anxiety, social phobia, obsession - practical, fear of physical harm, fear of open spaces) with mothers of normal children in terms of Permissive parenting methods there is difference.

#### **Variables of Research**

1)Independent variable: anxiety disorder

2)Dependent variable: family emotional atmosphere and methods

3)Control variables: age, sex and grade

## **MATERIALS AND METHODS**

### **Methodology and Data Collection**

In order to study the scientific method - the comparison is applied. Collecting data is in the field of research. The study collected data from questionnaires emotional Hill Burn (1964), parenting methods questionnaire dayana boumrand (1972) and anxiety child scale Espence (1998) is applied. After sampling and random selection way that regular students in the final stage of sampling, director of elementary school students grade 2 up 6 choiced.

Arrangement invited by meeting the individual with any of the mothers, to mothers and children conducting the interview, Registration clinical practice guidelines, and to provide an overview of the mothers were asked to complete a questionnaire about the parenting methods questionnaire Dayna Boumrand, act. Also, at the end of the session with a clinical interview with the child, and give instructions to complete the test emotional atmosphere questionnaire Hill burn was acting on behalf of your child.

The completed questionnaire emotional atmosphereof and anxiety scale Espence in anxiety children and parenting method of mothers questionnaires Hill burn completed by them mentioned above through the adoption of children and mothers during the implementation of the 4 months of treatment in specialized clinics for medical treatment of Tehran, had been referred by a psychiatrist and a psychologist at the Center for PTSD diagnosis were included. Anxious children also diagnosed by a psychiatrist addition to completing Espence anxiety scale for accurate diagnosis of their actions.

## **Research Article**

### **Study Sample**

The population of this study consisted of children and mothers of normal children 8 to 12 years old primary school in 20 districts of Tehran, and children and mothers of children with anxiety disorders (generalized anxiety, separation anxiety, fear of physical harm, social phobia, panic and fear of open spaces, obsession - practical) 8 to 12-year-old boy referred to specialized medical clinics and private in Tehran by a psychiatrist and a psychologist at the medical center had been diagnosed with anxiety disorders, have formed.

### **Sampling and Sample Size**

Since the sample included in this study, the two groups of normal children and anxiety children, and mothers of normal children and mothers of children with anxiety disorders (generalized anxiety, separation anxiety, fear of physical harm, social phobia, panic and fear of open spaces, Obsession intellectual - practical) 8 to 12-year-old boy constituted, in order to choose the typical study of multistage cluster sampling and sample selection of children with anxiety disorders, purposive sampling method was used. In order to select the children and mothers of normal children, using multistage cluster sampling, refer to the education of Tehran, the first of the 20 districts of Tehran, 3 districts in the north, center and south of Tehran were selected and then from each desired, area 3, and then randomly selected from each area, a boys' elementary school, and the second to sixth grade elementary school, a class of 40 children per class 8 to 12 years randomly selected and participated in the study. But the selection of children and mothers of children with anxiety (generalized anxiety, fear of physical harm, separation anxiety, social phobia, panic and fear of open spaces and obsession - practical) through the adoption of children within four months of practical research, specialized medical clinics and private consultations in Tehran by mothers referred by psychiatrists and psychologists had been diagnosed with anxiety disorders, such as 80 students 8 to 12 years (average 40 students, 40 students have an anxiety disorder) and the fact that 40 of the 80 mothers, mothers of normal children and 40 of them were mothers of children with anxiety disorders, for example, participated in the research.

The research instruments are the study of the emotional atmosphere of Hill Burn (1964), parenting methods Dayan Boumrind questionnaire and anxiety inventory for Children Espence (1998) is applied.

**Emotional atmosphere questionnaire Hill Bernin** 1964 in exchange for the love child - parent was created. The questionnaire of 16 questions that subscales 8 subsection (love, cuddle, confirm, shared experiences, gift, grace, confidence and sense of security) to 16 questions in the questionnaire, parents and 8 of 8 items. Question is dedicated to the mother of a five-item questionnaire questions (very low, low, medium, high and very high), and subject to his mark as one of their own feelings. From 1 to 5 point Likert scoring is done so that the option is too low, a score of 1, 2 low, moderate, 3, 4, and too much awarded 5. Scores indicate a higher than average scores below the average Joe affection between family members and show poor emotional atmosphere in the family. A total of 40 points and 40 mothers were devoted to his father. The total score of 80 subjects in the full score to parent their parents Hill Burn emotional atmosphere of validity and reliability is high. Jamshidi (2000) through Cornbrash Alpha coefficient and family emotional atmosphere retest 0.87 and 0.83, respectively, which are calculated (according to the Nahidi, 2011) also Mousavi Shushtari (1998) to determine content validity, the questionnaire Five experts, then they were collected comments and questions to the experts agreed on was contained (quoting Nahidi, 2011). Two of the questions in the questionnaire are "loving father treats me", "I am free of my personal feelings and experience of our dialogue."

**Parenting Methods questionnaire:** the questionnaire in the year (1972) was designed by Dayna Bomarind, the questionnaire includes 30 of the 10 such permissive practices, 10 and 10 of the arbitrary practices of the firm and reassuring manner related to the 5 Responses strongly agree, agree, disagree pretty disagree completely disagree and choose the answer that is consistent with the current situation is better. The questionnaire included 10 questions Permissive method questions 1, 6, 10, 13, 14, 17, 19, 24, 28, 29, 10 questions authoritarian practices also include: 2, 3, 7, 9, 12, 16, 18, 21, 25, 26 and finally 10 questions robust and reliable methods are: 4, 5, 8, 11, 15, 20, 22, 23, 27, 30. nmrhgzary Dayna questionnaire. Bomarind on a Likert scale from zero to 4 scoring is done by adding the scores of the

### **Research Article**

questions in any way, three separate score is achieved. This means that the option of totally disagree (zero) (a), almost disagree (2), Agree (3) and strongly agree (4) Dayna Bomarind in several studies examined the reliability and validity have been obtained. If the bag in 1991 using the retest reliability of 0.81 between groups of mothers in order to method Permissive method authoritarian and 0.86 to 0.78 for a robust and reliable method reported. He also uses the diagnostic validity, showed that the authoritarian mother inversely with Permissive (0.38) - robust and reliable method (0.48) is.

Moreover Esfandiari's (1995) reliability test on a sample of 12 members of maternal and retest interval of one week in order to Permissive mode (0.69 +), authoritarian manner (0.77 0+) and a robust and credible manner (0.73 +) reported.

Test content validity was confirmed by 10 experts in psychology.

Overall, the results of internal and external studies, the reliability and validity of the questionnaire approved methods.

**Anxiety scale for children Espense:** This questionnaire is designed to measure and assess children were classified according to DSM-IV diagnostic and statistical designed and built.

The basic form scale is in Australia in 1997.

In 1997 and 1998 two large national study, confirmatory factor analysis and confirmatory factor of 6 between the ages of 8 to 12 years and 7 to 19 years has been proven (Espense, 2003).

The scale for use in community samples, and to evaluate the range of DSM-IV anxiety disorders among children has been prepared on the basis of studies and researches have been good psychometric properties (Stras, 1990; quoting Mousavi 2006).

The scale consists of 44 items 3 options from zero (never) to 3 (always) and a question with a yes or no answer.

Of the 44 items, 38 items reflecting positive symptoms and 6 questions and answers are designed to reduce the negative bias.

This scale has six subscales of fear, fear of open spaces, separation anxiety disorder, fear of physical harm, obsessive - compulsive disorder and generalized anxiety disorder is.

The scale of general anxiety symptoms with questions 1, 3, 4, 20, 22, 24, fear of physical harm to questions 2, 18, 23, 25, 33, separation anxiety for questions 5, 8, 12, 15, 16 44, social phobia to questions 6, 7, 9, 10, 29, 35, fear, fear of open places to questions 13, 21, 28, 32, 34, 36, 37, 39, obsession - with practical questions 14, 19, 27, 40, 41, 42 evaluated.

Anxiety Inventory Espense 4 point Likert scoring method is that the rate of occurrence of each item scored from zero to 3.

A cut-off score for the diagnosis of anxiety disorder and 65 subjects and each subject to a minimum of 65 questions received a high score; the diagnosis of anxiety disorder will take place.

It should be noted that the 6 questions that have positive and negative responses have been designed to minimize, who did not score.

Espense anxiety questionnaire used in many domestic and foreign research and has good psychometric properties (Stras, 1990; quoted Mousavi, 2006).

Also the scale by Mousavi (2008 on 450 boys and girls of normal and verified its validity and reliability was 0.89 (Mousavi, 2008; Espense, 2006, quoted Rezaei *et al.*, 2012).

### **Statistical Methods and Data Analysis**

For statistical data analysis using SPSS software, in addition to providing statistical techniques of descriptive statistics and multivariate analysis of variance was used Manova.



## Research Article

### Descriptive Findings

**Table 1: Mean  $\pm$  components in children with anxiety disorder and normal children**

Joe component	emotional Group	Average	Standard deviation
Love	normal children	9.17	1.39
	children with anxiety disorder	7.40	1.85
Caress	normal children	8.90	1.46
	children with anxiety disorder	6.92	1.85
Impact on shared experience	normal children	8.17	1.97
	children with anxiety disorder	6.22	2.000
Gift	normal children	8.47	1.67
	children with anxiety disorder	6.50	1.64
Abet	normal children	9.05	1.51
	children with anxiety disorder	6.65	1.91
Confirm	normal children	7.82	2.20
	children with anxiety disorder	5.15	2.21
Trust	normal children	8.72	1.43
	children with anxiety disorder	5.50	2.30
Security	normal children	9.27	1.17
	children with anxiety disorder	7.47	1.81

**Table 2: Mean and standard deviation of parenting methods on children with anxiety disorder and normal children**

Parenting method	Group	Average	Standard deviation
Decisive method	Mothers of normal children	31.02	4.16
	Mothers of children with anxiety disorder	21.47	4.84
Authoritarian method	Mothers of normal children	14.77	4.34
	Mothers of children with anxiety disorder	25.47	5.23
Permissive method	Mothers of normal children	16.02	6.74
	Mothers of children with anxiety disorder	13.45	3.58

Other results

**Table 3: The one-sample Kolmogorov-Smirnov test for normality assumption community**

Test	Love	Caress	The influence of experience	Gift	Abet	Confirm	Trust	Security
Total	80	80	80	80	80	80	80	80
Average parameters	8.28	7.91	6.48	0.27	7.48	7.85	7.11	8.37
Standard deviation	1.85	1.93	2.57	2.20	1.92	2.09	2.50	1.76
parameters	0.20	0.19	0.13	0.15	0.15	0.22	0.13	0.22
The final	0.17	0.14	0.10	0.13	0.15	0.15	0.12	0.17
Positive	12.20	0.19	0.13	0.15	0.14	- 12.22	- 12.13	- 12.22
Negative	0.20	0.19	0.13	0.15	0.15	0.22	0.13	0.22
Kolmogorov-Smirnov test.	0.12	0.32	0.06	0.34	0.50	0.70	0.12	0.21
Significant level.								

### Research Article

As can be seen in Table 3 Statistics of Kolmogorov-Smirnov to love, comfort, experience, influence, gifts, encouragement, approval, confidence and security in the ( $P \leq 0.05$ ) is not significant, the distributions of the sample to the population distribution is normal.

**The first main hypothesis:** the children with anxiety disorder and normal children in the family emotional atmosphere there is a significant difference.

**Table 4: T-test between normal children and children with anxiety disorders and emotional atmosphere in the family**

Variable		During the test.		T-test	Df	sig	MD
		F	sig	t			
Emotional atmosphere	Equality of variance	5.2	0.02	7.35	78	0.000	17.95
	Inequality of variance			7.35	71.07	0.000	17.95

As can be seen in Table 4 the main hypothesis number one "among children with anxiety disorder and normal children in the family emotional atmosphere there is a significant difference," with the variance of the assumption of same during the test level ( $P \leq 0.01$ ) was approved. This means that the child has an anxiety disorder and normal children in the family emotional atmosphere there is a significant difference, the rejection of the null hypothesis acceptable.

**First Sub:** Among children with anxiety disorders (generalized anxiety disorder, separation anxiety, social phobia, obsessive - practical, fear of physical harm, fear of open places) with normal children in all aspects of the emotional atmosphere (love, comfort, impact The shared experience, give, encouragement, approval, confidence, security) there is difference.

**Table 5: Test the variances of the components during the emotional atmosphere between normal children and children with anxiety disorder**

Variable	F	Degrees of freedom 1	degrees freedom 2	of Significance level
Love	4.20	1	78	0.44
Caress	1.80	1	78	0.18
Impact on shared experience	0.03	1	78	0.96
Gift	0.04	1	78	0.95
Abet	0.01	1	78	0.89
Confirm	2.98	1	78	0.08
Trust	11.31	1	78	0.78
Security	13.98	1	78	0.12

**Table 6: Table of credit information index Variance components of emotional atmosphere**

Effect	Value	F	Degrees of freedom	Error degrees freedom	of Significance level
effect	0.48	8.20	8	71	0.00
Wilks Lambda	0.52	8.20	8	71	0.00
Hotelling effect	0.92	8.20	8	71	0.00
Largest root	0.92	8.20	8	71	0.00

As can be seen in Table 5, the statistic (F) for the components of love, comfort, experience, influence, gifts, encouragement, approval, trust and security are not significant ( $P \leq 0.05$ ) and this shows signals that

### Research Article

the error variance of these variables among the participants (children with anxiety disorder and normal children) is different and equal variances.

As can be seen in Table 6 Wilks Lambda value is equal to 0.52 at ( $p < 0.01$ ) is meaningful. This means that the two groups of children with common childhood anxiety disorder in terms of components, there is a significant difference in the emotional atmosphere.

**Table 7: Results of multivariate analysis on various components of the emotional atmosphere**

The dependent variable source		SS	df	MS	F	Sig	Size effect
Group	Love	63.01	1	32.01	23.47	0.000	0.23
	Caress	78.01	1	34.01	27.86	0.000	0.26
	Common Affectability	134.11	1	67.04	29.30	0.000	0.27
	GiftTo give	76.05	1	45.03	19.21	0.000	0.19
	Standing ovationThe	78.01	1	46.01	28.17	0.000	0.26
	Acknowledge	115.20	1	56.10	38.56	0.000	0.33
	Trust	208.01	1	104.01	56.34	0.000	0.41
	Security	64.80	1	32.40	27.77	0.000	0.26

As can be seen in Table 7 with secondary hypothesis number one "among children with anxiety disorders (generalized anxiety disorder, separation anxiety, social phobia, OCD, fear of physical harm, fear of open places) with children normal in all aspects of the emotional atmosphere (love, comfort, impact on shared experiences, gift giving, encourage, acknowledge, trust, security), there are different "levels ( $P \leq 0.01$ ) was approved. Then reject the null hypothesis is accepted posteriorly. Means that the child has an anxiety disorder and normal children there are significant differences in the affective component of the atmosphere.

**The second hypothesis:** among parenting methods of mothers of children with anxiety disorders in mothers of normal children there is difference..

**Table 8: t-test between mothers and mothers of children with anxiety disorder and normal children in children growing method**

Variable		During the test.		T-test			
		F	sig	T	df	sig	MD
Methods	Equality of variance	of 3.70	0.05	0.78	78	0.05	1.42
	Inequality of variance			0.78	66.58	0.05	1.42

As can be seen in Table 8, the main hypothesis is two " among parenting methods of mothers of children with anxiety disorders in mothers of normal children there is difference."

With the assumption of equality of variances in during the test, at ( $P \leq 0.05$ ) was approved. This means that among mothers of children with anxiety disorder and mothers normal children with parenting practices are significant, then the null hypothesis is rejected and the posterior acceptable.

2) Among mothers of children with anxiety disorders (generalized anxiety disorder, separation anxiety, social phobia, obsession - practical, fear of physical harm, fear of open places) and mothers of normal children in terms of firm and reassuring parenting method there is difference..

3) Among mothers of children with anxiety disorders (generalized anxiety disorder, separation anxiety, social phobia, obsession - practical, fear of physical harm, fear of open places) and mothers of normal children in terms of authoritarian parenting method there is difference..

### Research Article

4) Among mothers of children with anxiety disorders (generalized anxiety disorder, separation anxiety, social phobia, obsession - practical, fear of physical harm, fear of open places) and mothers of normal children in terms of permissive parenting method there is difference.

**Table 9: Leven test for equal variances between the parenting methods of mothers mothers of normal children and mothers children with anxiety disorder**

Variable	F	Degrees of freedom 1	degrees freedom 2	of Significance level
Decisive method	0.35	1	78	0.55
Authoritarian method	0.01	1	78	0.91
Permissive method	8.48	1	78	0.30

As can be seen in Table 9, the statistic (F) to strong light, authoritarian and permissive stuck not significant ( $p \leq 0.05$ ), and this indicates that the error variance in these variables between the participating members (Group mothers and mothers of normal children and children with anxiety disorder) is different and equal variances.

**Table 10: Table of credit information index Variance methods**

Effect	Value	F	Degrees of freedom Error	degrees freedom	of Significance level
effect	0.66	50.07	3	76	0.00
Wilks Lambda	0.33	50.07	3	76	0.00
Hoteling effect	1.97	50.07	3	76	0.000
Largest root	1.97	50.07	3	76	0.000

As can be seen in Table 10 Wilks Lambda value of 0.33, which is equal to the level ( $P \leq 0.01$ ), is meaningful. This means that between the methods of mothers of children with anxiety disorders with mothers of normal children there is difference.

**Table 11: Results of multivariate analysis on a variety of methods**

The dependent variable source	SS	df	MS	F	Sig	Size effect
Group						
Decisive method	1824.05	1	612.03	89.54	0.00	0.53
Authoritarian method	2289.80	1	1145.40	98.84	0.00	0.53
	132.61	1	61.30	4.55	0.00	0.53
Permissive method						

As can be seen in Table 11 with the sub hypothesis number two, three and four, "the mothers of children with anxiety disorders (generalized anxiety disorder, separation anxiety, social phobia, obsession - practicality, fear of physical harm, fear of Agoraphobia) and mothers of normal children in terms of parenting method decisive, authoritative, and permissive there "level ( $P \leq 0.01$ ) was approved. Then reject the null hypothesis is accepted posteriorly. This means that among mothers of children with anxiety disorders are common in the field of child and maternal parenting method significant differences between matheres of children with anxiety disorders are more common in using authoritarian parenting method , and mothers of normal children common in using more parenting method decisive and make use of Hypothesis 3 was found in mothers of normal children than mothers of children with anxiety disorders there are differences between the two groups in terms of parenting method, and mothers of normal children were premissiver.



## **Research Article**

### **Discussion and Conclusion**

In this chapter we will pay to discussion and conclusions about the obtained results. For this purpose, each of the proposed research hypotheses. The results are presented in the case. We also provide evidence for the hypothesis of the possible reasons for approval or rejection of the hypothesis is examined. According to current research, the main hypothesis of the study is that "there is a significant difference between children with anxiety disorder and normal children in the family emotional atmosphere" was approved. This means that normal children than in children with anxiety disorders are more appropriate emotional atmosphere in the family and are more satisfied than their parents. The results of this hypothesis is consistent with other studies (Rahmani and Moheb, 2011) suggests that there are significant differences between children with anxiety disorder and normal children in the family emotional atmosphere. The explanation for this finding could be that anxious children experienced more pressure from their parents and a sense of competence have fewer, alcohol consumption increased in parents and household contacts of children decreases. The findings of the present study, the main hypothesis of the study is that "the methods of mothers of children with anxiety disorders in mothers of normal children there" was confirmed, the results of other studies, such as the aforementioned hypothesis (Esfabdiyari, 1995; Layl Abadi, 1996; Sifing *et al.*, 2009; Mohammad *et al.*, 2010) is consistent and suggests that the parenting methods of mothers of children with anxiety disorders in mothers of normal children. According to current research, secondary hypothesis II, III and IV of the "decisive parenting method, authoritarian and permissive mothers of normal children of mothers of children with anxiety disorders, there" was approved, which means that mothers normal children than mothers of children with anxiety disorders are more assertive method and mothers of children with anxiety disorders than mothers of normal children use more than despot. The mothers of normal children than mothers of children with anxiety disorders are more permissive parenting method addition of absolute path to the mothers of children with anxiety disorders authoritative method. Authoritative parents can be said in explanation for autonomous behavior and the value of discipline. Because the control logic and the cause of freedom Account children obey the laws and principles of correct behavior, and building them into their behavior and actions responsible for, and as a result of children's behavioral problems reduces. Methods parental authority and significant negative predictor of fear behavior problem is the problem of social behavior and aggression. Authoritative parents give the child cannot be angry with wanton against their child, the child's bad behavior in response to dissatisfaction and discomfort show, the manufacturing of child support. Anxious parents who have children, often authoritarian or permissive parenting practices are involved, in addition to the authoritarian parenting method landscape and significant positive predictor of fear behavior problems, social problems and aggressive behavior. So the children of the landscape and aggressive practices tend to have more behavioral problems (Azadi, 2003). Unlike mothers of anxious, mothers of children with authoritarian and democratic are irritable, flexible, bullying, violence and respect the needs of children without observing. According to them, obedience is a virtue. Children of mothers who are authoritarian, and not to rely less on their own or do not have the self-belief. More apt to be quiet, respectful, shyness and social terms are positive and being helpless. This has led to inappropriate behavior, conflict and neurosis often found in such cases, leads (hypothetical Golfazani *et al.*, 2003). Very authoritarian parents control their children, but their response is low (Kaplan, Translated by Firuzbakht, 2005). Parents are egalitarian, easy and time-consuming and unrestrained as they are unable to meet the needs of children and adolescents. Some parents allow children to do whatever he wants. May be because they do not have children to work or do not matter to him. The family's troubled family relationships and inhumane. Permissive parents are involved in their children's expectations. They do not punish their children, easy to communicate with them and wish to have the child's behavior. Their children regulate their own behavior. They do not focus too much on rules. Permissive parents do not control their children and have no expectations of him, but relatively warm and kind (Kaplan, Translated by Firuzbakht, 2005).

### **Limitations of the Study**

1) of obligations-specific limitations of the study sample to generalize the findings to other cities of Tehran, which is limited

## Research Article

2) The questionnaire used for data collection Children 8 to 12 years in case of probability of bias in the selection of the correct response to questions from the children's lack of understanding of the limitations of this study.

### Practical Suggestions

- The parents, especially mothers and children to cope with anxiety and appropriate communication, education and welfare agencies by providing necessary training, because they seemed anxious mothers in this area is very little information.

### Research Proposals

According to the theoretical range, study can provide suggestions and orientations of research and practice the following:

- The generalization of the results, the research done by other groups in other cities.
- A combination of interventions to reduce child and maternal stress is anxiety.

## REFERENCES

- Ahmadian F (2005).** The relationship between parenting methods with efficacy and excelled in school, master's thesis, University of Tabriz 76-50.
- America Psychiatric Association (2013).** The fifth Diagnostic and Statistical Manual of Mental Disorders.
- Baumrind D (1966).** Effects of authoritative parental control on child behavior. *Child Development*, USA **37** 887-907.
- Baumrind D (1971).** Current patterns of parental authority. *Developmental Psychology Monographs*, USA **4** 1-103.
- Bernstein GA, Layne AE and Egan EA (2005).** Maternal phobic anxiety and child anxiety. *Journal of Anxiety Disorder*.
- Farzi Golfazani M, Mohammad Esmaeil E, Raufian Moghadam F and Asgari Moghadam H (2003).** Compared to mothers rearing children with depressive disorders, anxiety and obsessive-compulsive mothers of normal children, research in the area of exceptional children 9 and 10; the third, 3 and 4, Payyvmstan 245-264.
- Harrington R (1993).** *Depressive Disorder in Childhood and Adolescence* (New York: John Wiley & Sons).
- Heybati Kh (2002).** Study of parenting methods and their relationship with coping skills students from junior high schools in Zarghan, master's thesis, University of Shiraz, Shiraz 145-130.
- Kaplan P (2005).** *Developmental Psychology*, third edition, translated by Mwhrdad Firuzbakht (published by the Institute for Cultural Services Rassa).
- Kaplan S (2003).** *Summary of Psychiatry*, translated by Rafi, Sajjanian.
- Lamborn SD et al., (1997).** Patterns of competence and adjust among adolescents from authoritative, authoritarian, indulgent or neglectful families. *Child Development* **62** 104-1065.
- Rey JM and Plopp JM (1990).** Quality of perceived parenting in oppositional & conduct disorder adolescents. *Journal of American Academy of Child & Adolescents Psychiatry* **29** 382-385.
- Ross A (1997).** *Psychopathology*, fourth edition, Tehran.
- Schultz A (2005).** *Psychology of Personality*, translated by Seyyed Mohammadi, Yahya.
- Shafiabadi A, Tabrizi M and Rashidinejad H (2012).** The effectiveness of parent training with Family therapy approach, contention on the family emotional atmosphere. *Knowledge and Research in Applied Psychology*, thirteenth year (3).
- Shariatmadari A (2005).** *Educational Psychology* (Tehran: Amir Kabir).
- Shoarinejad SH (1997).** Parenting methods articles.
- Webster S and Herbert M (1994).** *Troubled Familiar Problem Children* (New York: Wiley & Sons Inc).