

Anxiety and Risk Taking Behaviour

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Anxiety as an emotional response plays vital role in almost all the psychiatric disorders with its manifestation noted behaviourally and physiologically. In another words we can say anxiety is an emotional state characterized by an unpleasant nature of inner turmoil, normally accompanied by nervous behavior and uneasiness. Apart from this the patients who experience anxiety report feelings of despair, doom, fear of the unknown events and fear of death. Different expressions for the term anxiety have been described by philosophers, existentialists, psycho-analysts, behaviourists and physiologists. This has led to the understanding of anxiety condition in terms of dread, fear, stress tension, arousal, activation, excitation, conditioned response and drive, It has also been linked with personality types ad cortical dominance and thus its effects have been studied in task oriented as well as in stress situations. Studies have also been reported linking anxiety with hereditary factors. Psycho-analyst view anxiety as a signal, an alarm, and indicative of some deep- rooted pathology. Freud considered anxiety at root of all neurotic and psychotic manifestation but the problem of anxiety remained a riddle for him. The riddle was why anxiety and defenses against it should persist after circumstances have changed and the individual knows that the original source of anxiety cannot re-occur. Psycho-analysts also consider anxiety as a reaction of the age which reacts in anxious manner in face of id, Impulses threatening to break its boundaries. The neo Freudians thought that anxiety is the by-product of early childhood experiences arising due to interpersonal disturbances between the child and the parents.

Basics reasons of Anxiety Disorders

- ❖ Stressful life events
- ❖ Childhood adversity like; parental neglect, worry, abuse..
- ❖ Learning mechanism
- ❖ Cognition
- ❖ Biology
- ❖ Attachment Style

Hoch (1970) says that there is contradiction inherent in anxiety as it is both indicative of an adaptive as well as destructive process. Behaviorists consider anxiety as kind of maladaptive response manifested behaviorally and physiologically which affects individuals' performance in different situations. At times this anxiety response attains the characteristics of a reinforcing happens when the person in the face of a threatening situation comes up with anxiety response, a kind of coping pattern, which prepares him to withdraw from the situation. This withdrawal relieves him of the tensions produced by the threatening situation. Thus the individual gets conditioned to provide anxiety response as a result of stimulus or response generalization.

The word 'Anxiety' is derived from the Indo-Germanic root arch, In Greek and Latin this means to press tight, to strangle to be weighed down with grief's, and a lead, a burden and trouble. There are other words in Latin like 'augustus'. 'Ango', 'angor' 'anxious', 'anxieties' and 'angina', which contain the 'Angh' root. Lewis (1971) in his article "The Ambiguous word Anxiety" has discussed at length the usage of equivalent terms for anxiety in European languages. The description of the term anxiety which follow here has been taken from Lewis article and references quoted in this context were originally quoted in his article. The state of anxiety has been described in different ways by Indian philosophers of ancient times. Neelkantha define anxiety as state of bewilderment which is caused by fear, similarly Medhusudan and Venkatanathe describe anxiety as condition which is in the nature of bewilderment (vyaulted); and which is evoked by a situation that threatens ones' life and security. Keshva Kashmir and Sadanand also regard anxiety as mental perplexity. Shridhar Swami and Diavajna pundit Surya define anxiety as mental agitation (Cittaksobha) due to fear and the like emotions. Raghvendra defines it as a kind of trembling of the mind (Manaihkampa). Vallabha defines it as brooding Cintas which is caused by encountering a hostile agent. Shamlaramamda regards anxiety as an emotion which is evoked in a person when he is confronted with an evil which is a cause of death. A typical account of physiological and psychological concomitant of Anxiety' is described in Bhagwad Geeta. This is in that context when Lord Krishna brings around chariot in the battle field to watch Kaurva's army. Seeing his own people eager to fight, Arjuna says, Anxiety has been defined in various ways by theorists and researchers the professional field. Mostly such definitions are based pm clinical impressions and observations introspective reports by the patients or subjects and physiological or behavioral changes noted during the experimental situation. Some other definitions have only conceptual basis. To illustration this point it would be of interest to note distinction made by Martia and Sroufe (1970) and response oriented definitions of anxiety. From stimulus orientation point of view anxiety is defined in terms of the circumstances (external stations or internal thoughts) that elicit anxiety. On the other hand a response orientation point of view defines anxiety in terms of the responses that compose the anxiety reactions. These responses, by learning, become associated with almost by the kind of stimulus, In the former category can be placed those definitions which have been given by psycho-analysts of existential philosopher who talk of anxiety emanating from some source like unconscious or the non-being, in the latter category comes behaviorist explanations of the phenomenon of anxiety as a conditioned or learned response. The definitions given here are in no way exhaustive, however, attempt has been made to incorporate definition given from different points of view.

It was assumed that respondent of high on anxiety will tend to be low risk takers in contrast to subject scoring low

anxiety. To viewly this assumption t-test was used. The finding were summaries below in table:

| Variables | Group | N | M | SD | SE | t | df | P |
|-----------------------|--------------|-----|-------|------|-----|------|----|-----|
| Risk taking Behaviour | High Anxiety | 100 | 47.15 | 7.76 | .77 | | | |
| | Low Anxiety | 100 | 42.55 | 5.91 | .59 | 4.79 | 98 | .01 |

t-test showing the significance of difference between the respondent of high on anxiety and low on anxiety in respect of risk taking behavior. In the might of the result displayed in the above table the respondents of low anxiety group showed superiority over those of high on anxiety group in respect of risk taking behaviour.

In the predicted that the group of high on anxiety will be associated with low risk taking and the group low on anxiety will associated with high risk taking. The finding how were supported to uphold this exception. The high and low anxiety is differ significantly in terms of risk taking behaviour.

Reference

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2. Paul H. Hoch, (1972), *Differential Diagnosis in Clinical Psychiatry*, New York, Science House.
3. Robert Handy, (1987), *Anxiety and Panic Attacks: Their cause and Cure*, Random House USA Inc.
4. Sheryl Paul (2019), *The Wisdom of Anxiety; How worry and Intrusive thoughts Are gifts to help You*, Sound true publication, Colorado, US.