

Psychological and Behavioral Consequences of Harsh Parenting, Emotional Abuse, Anxiety, and Impaired Cognitive Development in Children

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Abstract

Mental health is severely harmed by harsh parenting, which is defined by excessive punishment, criticism, and emotional neglect. Children who grow up in these settings frequently have anxiety, despair, low self-esteem, and trouble controlling their emotions. Chronic stress brought on by fear-based punishment might hinder cognitive growth and make people more susceptible to behavioral

issues. These people may eventually struggle in social situations and show signs of hostility or retreat. Harsh parenting has also been linked in studies to lower resilience and long-term psychiatric illnesses. Fostering children's healthy emotional development and general psychological well-being requires encouraging caring and supportive parenting practices.

Keywords: Harsh Parenting, Child Abuse, Emotional Abuse, Psychological Impact, Behavioral Problems, Authoritarian Parenting, Interpersonal Relationships, Anxiety, Cognitive Development.

Introduction

While externalized issue behaviors mostly entail conduct-related activities, such as violence, disciplinary infractions, etc., internalized problem behaviors pertain to negative emotions that people experience, such as despair and anxiety. Individual development, family satisfaction, and social stability are all strongly correlated with these activities. Research already conducted shows that internalizing and externalizing problem behaviors are very common among teenagers. According to a meta-analysis of Chinese students, the primary internalizing issues impacting secondary school students' mental health are anxiety (26.3%) and depression (28.0%). In a similar vein, current research indicates that externalizing problem behaviors are highly common in adolescents, with

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rates as high as 35.1%. Therefore, it is crucial to investigate the mechanisms and causes influencing harmful behaviors in adolescents (Bozzini et al., 2021).

The comparatively steady emotional environment and the ways in which parents behave when raising their children are referred to as parenting styles. In both the East and the West, severe discipline and emotional warmth are universally acknowledged as important parenting philosophies that impact personal growth. Adolescent problem behaviors and parenting approaches that emphasize strict discipline and emotional warmth are closely related (Pinquart et al., 2017). Previous research has demonstrated a negative relationship between issue behaviors and parental warmth; for instance, a decrease in children's externalizing problem behaviors a year later is significantly predicted by parental warmth. Parental physical punishment has been shown in longitudinal research to be a strong predictor of externalizing problem behaviors, including aggression and disciplinary infractions. Children who experience authoritarian, severe, and punitive parenting are more likely to act aggressively. Strict parental supervision is a good predictor of children internalizing negative behaviors, according to additional study.

Prior research has mostly focused on the one-dimensional aspects of parental emotional warmth or harsh discipline, ignoring the coexistence of both approaches and their combined influence on social adjustment. Strict discipline and emotional warmth frequently coexist in family upbringing, as seen by the typical instances (Wang et al., 2018). Thus, the first research objective of this study is to investigate how teenagers' social adjustment is affected by both rigorous punishment and affection when these two distinct parenting philosophies are taken into account at the same time. From a developmental standpoint, individual internal variables may operate as a mediator between parenting approaches and problem behaviors in adolescents (de Vries et al., 2016). According to social information processing theory, an individual's socialization process is determined by higher cognitive functions. A higher cognitive skill that grows throughout life is executive function, which is in charge of organizing and directing action (Miller et al., 2009). This theoretical paradigm states that deviant social behaviors including hostility, conflict, and violence result from deficiencies in deep cognitive skills that interfere with the information processing process. According to a 32-year

longitudinal study, people who had high inhibitory control between the ages of 3 and 11 were less likely to use drugs, smoke, or drop out of school as adolescents. Additionally, research indicates that parenting styles' impact on problematic behaviors is mediated by inhibitory control. Children's behavioral development is greatly impacted by harsh parental discipline because it affects their inhibitory control and emotional regulation (Zhang et al., 2024). Studies show that verbal abuse and physical punishment diminish children's ability to exercise self-control, which results in more disruptive behaviors. Inhibitory control is a key factor in how parenting styles affect problem behaviors.

Harsh Parenting

Children who get physical correction from their parents such as slapping or hitting show more externalizing issues (like hostility) and disruptive behavior in the school, according to numerous studies. Additionally, they score worse academically than kids who are not physically disciplined. Children who exhibit troublesome classroom behavior typically score worse academically than their peers, even in studies that do not concentrate on physical punishment. Children who misbehave at school, for instance, may be taken out of the classroom and separated from other students, which may limit their opportunities to study. Academic difficulties follow poor behavior in this situation, which is referred to as the adaption erosion theory. According to a different theory known as the academic incompetence hypothesis, children who struggle academically may become disruptive, possibly out of frustration. There is a dearth of information in many research about the onset of issues, how children's behavior evolves over time, or even whether disciplinary actions at home are the cause of these difficulties. My colleagues and I carried out a study on childhood reading as a significant predictor of academic success in order to investigate these issues. The basis for learning is literacy, particularly when kids move from learning to read to reading to learn. Children may be especially susceptible to difficulties at home when they are adjusting to a new educational system, like beginning kindergarten. Numerous studies have shown us that children require assistance while they are under stress or undergoing transition. Children feel reassured, safe, and less anxious when their parents are attentive to their needs and create a loving, consistent, nurturing atmosphere. Additionally, they are more adept at controlling their emotions,

which means that when a child, like all children, feels hardship they are better able to move past their negative emotions. However, children who get harsh or inconsistent discipline may grow restless, adding to their already high level of stress. Some kids exhibit their distress when they are under a lot of stress. Furthermore, when parents physically abuse their kids, it may unintentionally convey to them that using violence to subdue others is a means of control. As a result, strict discipline at home may make it more difficult for kids to fit in at school and eventually acquire critical abilities like reading. Fostering a pleasant home environment should start as early as possible, according to our research. Children require a secure and accommodating environment during their early years because they are so reliant on assistance. For instance, crying is a sign that something is amiss in very young infants. In response, caregivers ought to pick them up and make an effort to ascertain their needs. Babies cannot be spoiled just because their caregivers attend to all of their needs. Children start to push limits as they become older. They occasionally act in ways that could endanger others or themselves (Wang et al., 2019).

Child Abuse

When a parent or other family member is in charge of a child, familial abuse or neglect takes place. This may occur in the child's house, in the family vehicle, at the store, in the parking lot before to the start of school, or in other local locations. A parent, guardian, or other person assigned to look after the child including siblings and babysitters commits the act of abuse or neglect. When a child is in the care of someone other than their family, institutional abuse or neglect can take place outside the home, in public or private places like schools, religious institutions, community organizations, or extracurricular activities. Some forms of punishment and instruction might be detrimental and promote hostility. Children and their families learn that aggressive reactions to behavior are appropriate when we employ aggressive approaches with them. We don't want to convey them that message. Anybody can be impacted by child abuse and neglect. A typical profile of a victim or abuser does not exist. On the other hand, some circumstances are linked to an increased risk of abuse or neglect. Knowing who is most vulnerable enables us to give stressed-out kids and families more support. Risk can appear on a number of levels, including the person, family, and community.

Young children, children with disabilities, and children with behavioral issues are the three groups of children that are most vulnerable to abuse and neglect. This implies that youngsters who struggle with relating to others, communicating, managing their emotions, or following directions may be at risk. The adults in their immediate vicinity could get easily irritated or be unable to assist them. It is crucial to keep in mind that this does not imply that the child is to blame for the abuse or neglect. It is never the child's fault. It also does not imply that only kids in these groups experience abuse or neglect. Instead, we need to keep in mind to give families whose kids display these traits more assistance. Families that have specific traits are more vulnerable to abuse or neglect. Adults who have a history of maltreatment as children or who have little understanding of child development are more likely to abuse or neglect children. But it's crucial to keep in mind that not all adults who were abused as children go on to abuse their own kids. Adults who struggle with mental health conditions, substance addiction, or strict discipline may also be vulnerable. Families that are socially isolated are more likely to experience abuse. A family may be socially isolated for a variety of reasons, such as a recent move or military deployment that keeps them apart from friends and family, long or erratic work schedules that limit their social chances, or a lack of social skills. Families that have endured other types of domestic violence, such as spousal or partner violence are also more likely to face child abuse and neglect. Negative interactions, poor parent-child connections, and deployment are also more likely to occur. Community violence, extreme poverty, unstable housing and mobility, high unemployment rates, and a lack of social ties are examples of community-based risk factors. These elements may make families more stressed. High levels of stress or restricted access to essential resources increase the likelihood of abuse and neglect. It is a fictitious version of actual events that happened on a military facility in the United States. Names, precise dates, places, and terms unique to a particular service have been altered or eliminated. We used the details of an actual criminal investigation and trial to develop the exercises in this and the next lectures (Irazuzta et al., 1997).

Emotional Abuse

The majority of victims of emotional abuse think they are just coping with typical relationship issues. When they discover that the challenges they have encountered are

the result of emotional abuse by their trusted partner, they frequently experience shock, denial, and shame. They question why they put up with the abuse for so long and how they could have been unaware. I have three objectives for this book. First, to assist individuals in distinguishing between emotional abuse and the effort required in a relationship; second, to validate the experience of the abused partner and reduce or eliminate the shame and judgment they frequently experience by elucidating the reasons why emotional abuse is so hard to identify; and third, to assist individuals in learning how to regain their strength and empowerment that they have been severely deprived of due to abuse. I examine the definition of emotional abuse and how it appears in the lives of those who have experienced it by combining the writings of well-known specialists in the subject with the testimonies of victims. I compare a list of abusive behaviors with how healthy couples treat one another, drawing on the work of marriage therapist John Gottman. Lastly, I discuss why emotional abuse cannot be accurately detected by the Cycle of Violence. It illustrates how the very actions that support a positive relationship can be harmful to the victim of abuse. It also explains how the abuse process involves the abuser's erratic transitions from loving to destructive behavior, which can result in disastrous relationships. There are thought-provoking questions throughout the text. Those who are still being abused emotionally might find this book challenging to read. It may cause strong reactions in people who have ended an abusive relationship. It could be helpful to read the book along with counseling or support groups. As a result, this study looks into emotional abuse as well as how it relates to the victim's age and gender. Certain physical behaviors can be classified as emotional abuse because they are forms of physical assault. Throwing things, kicking a wall, threatening the victim with a finger or fist, driving carelessly while the victim is in the car, or threatening to damage valuables are a few examples. Property damage is a type of emotional abuse known as "symbolic violence" that has detrimental effects on one's mental, social, and financial well-being. When a victim's pets are harmed, it can be emotionally abusive and cause pain for both people and animals. There is a wealth of information that shows the particular negative consequences of emotional abuse. Compared to women who are physically abused, women who are emotionally abused may feel more isolated and despondent. The purpose of this study is to clarify the

connections between age, gender, and emotional maltreatment. We examine the research on how age and gender affect emotional abuse in the next two subsections. The relationship between these two basic concepts and emotional abuse, however, has not received much attention in the literature. Thus, in this study, we look into how age and gender interact to cause emotional abuse. Relationship violence has historically been viewed by feminists as a socially acceptable manifestation of patriarchal oppression of women. Johnson asserts that there are two primary types of violence. Conflict-related violent outbursts, such as temporary or frequent intimate partner violence, occur in some relationships. Either partner may "lose control" and behave violently in this fashion, but this rarely progresses to more dangerous or perhaps fatal behavior (Trickett et al., 2009).

Psychological Impact

Abortion's psychological repercussions have generated a lot of debate. It has been proposed that women who have an abortion prior to having their first child may process their emotions appropriately at the time, but they may view the abortion differently and feel guilty again after having a kid (Riley, 1995). It is challenging to study the psychological impacts of abortion since it is impossible to know how women would have felt if they had not had the procedure and had carried the pregnancy to term. Abortions carried out because of a lack of social support can differ greatly from those carried out for medical reasons, such as a prenatal diagnosis or screening tests. Pregnant women who undergo testing, such as amniocentesis for Down syndrome or the alpha-fetoprotein (AFP) test for neurological abnormalities, may have to make the decision to end their pregnancy quite late in life. Prenatal screening test acceptance may be influenced by attitudes on abortion. According to Green and Statham, women who have an abortion because of a fetal defect go through a distressing experience. The decision to have a child with a disability may cause both parents to feel guilty and lose confidence. Genetic testing during pregnancy has complicated ramifications, and there are numerous difficulties that need to be addressed due to the rapid development of genetic test options. The possibility of psychological injury is one of the primary issues with screening examinations. Those who test positive for the illness being checked for frequently experience this psychological harm. When someone who feels well is labeled

as ill, they may take on the role of the sick, which can negatively impact their general wellbeing and result in marital discord, job discontent, and absenteeism. These worries continued, impacting mood (26%) and day-to-day functioning (17%), even after further testing ruled out cancer. Compared to women with normal results, those who had false-positive results reported higher levels of anxiety and discomfort as well as more thoughts about breast cancer. Screening examinations can cause psychological harm to even young children. Similarly, children who are examined and identified as overweight are at risk of stigmatization, according to a review conducted by the United States Preventive Services Task Force (USPSTF). This shows up as self-managed diets that have detrimental effects, including eating disorders, poorer health behaviors, a worse self-image, and negative effects resulting from parental worries. Family members may also have psychological repercussions. Children who were randomly assigned not to be evaluated did not do better than those who were screened for developmental delays using the Denver Developmental Screening Test (DDST). The sole distinction between children who were screened using the DDST and those who weren't was that the parents of the screened children reported feeling more anxious. Future reproductive decisions may be impacted by psychological anguish in the event of hereditary disorders. Up to 28% of parents who were found to be carriers of the cystic fibrosis gene reported having lingering worry due to a lack of knowledge about the risk associated with carrier status (Brooks et al., 2020).

Behavioral Problems

As they mature, children pick up a variety of skills. Some, like potty training, are mostly dependent on how developed their brain and nerve system are. Others, like acceptable behavior at home and at school, are the outcome of a complex interaction between a child's temperament, health, connections with parents, caregivers, and teachers, and their physical, intellectual (cognitive), and emotional development (see also Child Development). As kids look for ways to deal with stress, other behaviors like thumb-sucking emerge. The parenting style also influences the development of additional habits. It is common for young children to use pacifiers or suck their thumbs (or any other finger) until they are 1 or 2 years old, while some do so until they are of school age. While occasional thumb sucking or using a pacifier during stressful situations is

typical, sucking after the age of five can induce malocclusion, change the curvature of the palate, and result in ridicule from other kids. Children who consistently use a pacifier or suck their thumb may occasionally require a mental health professional's evaluation. Every child ultimately stops using a pacifier or sucking their thumb. Only if their child's dentist advises it or if they think the habit is socially undesirable should parents step in. Children should be gently encouraged by their parents to comprehend the necessity to stop. Gentle verbal reminders are a wonderful place to start after the youngster demonstrates a readiness to quit. Other precautions include applying a non-toxic, bitter chemical to the thumbnail or using a plastic thumb guard. None of these actions, nevertheless, ought to be taken against the child's wishes. In healthy infants and toddlers, head banging and rhythmic rocking are typical. Parents may be alarmed by these acts, but youngsters don't seem upset and even seem to find solace in them. Between the ages of 18 months and 2 years, children often stop rocking, spinning, and pounding their heads, but occasionally they carry on with these repetitive behaviors until older kids and teenagers. In addition to other neurological issues, children with autism spectrum disorder may bang their heads or make other repetitive motions. These kids do, however, display other signs that clearly indicate their diagnosis. Moving the crib away from the wall, taking off the wheels or putting carpet protectors beneath, and padding the crib bars might all lessen this likelihood (as well as the noise) even though children rarely hurt themselves with these actions. In addition to discussing a baby's temperament, a doctor or nurse can provide parents with useful coping mechanisms and facts about child development. In this way, parents can try to reestablish a healthy relationship, set more reasonable expectations, and embrace their feelings of conflict and shame as natural. The baby may have issues in the future if the relationship isn't fixed. The impression of behavioral issues is influenced by unrealistic expectations. For instance, parents may wrongly believe there is a behavioral issue if they expect a two-year-old to pick up their toys on their own. Other typical behaviors of a two-year-old, such as disobeying rules or directions from an adult, may be misinterpreted by parents. A self-reinforcing cycle, also known as a circular behavior pattern, is a cycle in which a parent or caregiver's negative (angry) reaction to a child's negative (inappropriate) behavior causes the child to engage in more negative behavior, which in turn causes the

parent or caregiver to continue responding negatively. A child's bad behavior is frequently reinforced by the attention they receive from their parents or other caregivers. Instead of crying in self-perpetuating cycles, the youngster reacts to stress and emotional anguish with resistance, insolence, anger, and stubbornness. In response, parents or other caregivers use physical punishment, screaming, and reprimands. These cycles can also happen when parents become too protective and indulgent in response to a child who is manipulative, scared, or dependent (Gregory et al., 2002).

Authoritarian Parenting

Compliance, conformity, parental control, deference to authority, and upholding order are all priorities for an authoritarian parent. These parents demand maturity from their kids and exercise a lot of control over them, but they also give them little attention and communicate poorly. Children are supposed to be completely obedient, and parents who are authoritarians will prohibit their children from challenging them. The authoritarian parent prefers to employ stronger punishments than other authoritarian parents when their children break the set rigid regulations. An authoritarian parent frequently suppresses their child's independence in favor of trying to shape them into adopting the attitudes and behaviors the parent finds acceptable.

By denying the child the experience they need to make choices and accept accountability for their own actions, this approach may impede their development. Authoritarian parenting restricts verbal communication and reciprocal interaction between parents and children, in contrast to authoritative parenting, which promotes open communication. The reasoning behind their strict parenting guidelines is not discussed by authoritarian parents. Rather, the authoritarian parent upholds the idea that their word is final. In non-Western cultures, low-income parents, and parents from racial and ethnic minorities in the US, authoritarian parenting is common.

This has led to the claim that parenting should be assessed in light of certain cultural norms and notions and prompted concerns about whether authoritarian parenting is always maladaptive in some situations. For instance, Chinese mothers are sometimes referred to as "tiger mothers," who use severe discipline to promote success and growth, even though Chinese parenting is frequently characterized as authoritarian, punitive, and reflective of Confucian, child-centered, and nurturing concerns, with an

emphasis on discipline and early childhood education. However, this idea is not supported by thorough empirical evidence. One of the four profiles that emerged from person-centered assessments of parenting aspects among Asian American parents might be described as "authoritarian parenting. The most prevalent profile for both dads and mothers was consistent with authoritarian parenting, according to recent person-centered analyses of five parenting variables evaluated in a sample of young Arab refugees residing in Jordan. For young Americans of European heritage, the benefits of authoritarian parenting are greater than those of authoritarian parenting. Additionally, children with authoritarian parents are more likely to be hostile, shy, and aggressive toward their classmates. These kids typically do well academically and have low rates of aberrant behavior, which is one benefit of authoritarian parenting. Children from authoritarian households, whose parents perceive their children's increasing desire for autonomy and independence as disobedience and disrespect, frequently have a harder time transitioning to maturity. These kids may actively try to assert more autonomy and individuality by rebelling against their parents' regulations since they have harsh and uncaring parents. This rebellion is an attempt to vent displeasure with the inflexibility, control, and ignorance of authoritarian parents rather than a sign of true emotional autonomy (Hubbs-Tait et al., 2008).

Interpersonal Relationships

The creation, transmission, and interpretation of symbols by the parties involved make up interpersonal communication. This definition centers on the interlocutors, that is, the individuals who make decisions about creation, transmission, and interpretation based on their personal and distinct knowledge of the other. Interlocutors can exchange resources through interpersonal communication in order to coordinate their behaviors and produce the relational rewards required for sustaining and expanding the relationship. Hinde defines a relationship as a series of basically dyadic exchanges with particular cognitive and affective effects that evolve over time. Over time, interlocutors develop affective and cognitive relational factors such as objectives, expectancies values, sentiments, and comprehensions. Numerous important cognitive/affective relational factors have been found by researchers to be highly predictive of aspects including commitment, intimacy, and satisfaction. According to a review by Burgoon and Hale,

dominance-submission (i.e., control), intimacy (i.e., affection, attraction, interest, and inclusion), trust, depth, emotional arousal, composure, similarity, formality, and social task orientation are the fundamental relational parameters that direct the study of interpersonal relationships. Some conclusions are dubious because most research either concentrate on only one of these two components or fail to distinguish between them. Certain investigations alter the emotional or cognitive elements or contrast their existence with a situation where they are not present. While correlational designs that look at the relationship between the relative presence of a relational component and health outcomes will also be mentioned when appropriate, this review will, whenever possible, include experimental studies in which participants are randomly assigned to conditions that vary some aspect of the relationship. The first part of the paper will analyze social healing methods in humans and other eusocial creatures from an anthropological and evolutionary standpoint. The data regarding the significance of relationship elements in placebo response will next be reviewed, with a focus on the most persuasive research. Lastly, it will offer theoretical justifications for relational aspects of placebo response. I will examine contemporary theories regarding the mechanisms of interpersonal relationships before discussing a relational viewpoint of the self. According to this viewpoint, interpersonal interactions are dynamic processes of discourse between people that mutually produce one another.

Dialogue must be viewed as a dynamic activity that produces both stability and innovation if relationships are to grow into living systems. Discrete-state models have served as the foundation for conventional ideas of interpersonal communication. According to these models, communication is broken down into distinct messages that are sent over channels to recipients, who then digest the data and send back messages. Although this perspective on communication is helpful for some kinds of study, it does not provide a basic need for any evolving system: it cannot produce novelty. There are no theoretical ways to change the laws that govern discrete-state systems. A continuous-process model is the foundation of an alternative communication model that meets the need to explain both stability and novelty. According to this viewpoint, communicative action is dynamic and creative, just like all action, and it may constantly adjust to changing conditions. Instead of being a sequence of discrete messages, communication

is a continual co-regulation of joint action. One continues to act even when they are in receptive or listening mode, and their activities have an impact on the other person's continued actions. A three-step approach has been proposed for communicative discussion. A takes action, and B reacts. However, A changes concurrently with B's formulation of the answer, causing A's modifications to impact B's reaction at the very instant they take place(Zlotnick et al.,2000).

Anxiety

People that suffer from this disease either try to escape the issue or deal with it with a lot of anxiety. For at least six months, this worry or anxiety hinders day-to-day functioning. Excessive dread or anxiety over being apart from loved ones is a symptom of separation anxiety disorder. Although they might last into age, physical signs of discomfort typically appear in childhood. While they do communicate in some social contexts, like school, children with selective mutism do not speak in others. They frequently avoid speaking in front of others, including close friends or grandparents, yet they do converse with their closest relatives at home. Speech impairment can also have serious repercussions in the classroom, including social isolation and academic challenges. Additionally, many kids with selective mutism have high levels of social anxiety, excessive shyness, and fear of social embarrassment. Nonetheless, their linguistic abilities are typically normal. Sadly, a lot of people who suffer from anxiety problems choose not to get treatment. They are unaware that they have a disease for which there are efficient remedies. The majority of anxiety disorders react effectively to two forms of treatment: medication and psychotherapy or talk therapy, despite the fact that every anxiety illness is different. These therapies may be used singly or in combination. A form of talk therapy called cognitive behavioral therapy (CBT) can teach a person new ways to think, behave, and react in order to reduce anxiety. Although it can significantly reduce symptoms, medication cannot treat anxiety disorders. Antidepressants and anxiety meds, which are typically administered for brief periods of time, are the most widely utilized drugs. Anxiety's physical effects can occasionally be managed by beta-blockers, which are used to treat cardiac issues. People can employ a number of techniques to control the symptoms of anxiety disorders and improve the efficacy of treatment. Meditation

and stress-reduction strategies can be beneficial. Online or in-person support groups provide a forum for exchanging experiences and coping mechanisms.

It can also be helpful to learn more about the particular traits of a disorder and to assist friends and family in understanding it. While everyone experiences anxiety from time to time, people who suffer from anxiety disorders frequently feel excessive and severe fear and worry. Physical strain and other behavioral and cognitive signs typically accompany these emotions. They can last for a long period if untreated, are hard to manage, and cause a great deal of distress. Anxiety disorders can impact a person's social, familial, academic, or professional life and interfere with day-to-day activities. Anxiety disorders are thought to affect 4.4% of people worldwide(Vink et al.,2008).

Cognitive Development

The emergence of the ability for conscious cognition, comprehension, and mature articulation of that comprehension is referred to as cognitive development. Cognitive development is the process by which a person's perceptions, thoughts, and comprehension of the world are shaped by the interaction of learning and hereditary variables. Four essential elements are frequently used to characterize the evolution of cognitive information: reasoning, intelligence, language, and memory. These features start to emerge around the age of 18 months, when infants engage with their surroundings by playing with toys, watching TV, listening to their parents, and reacting to different stimuli that grab their attention all of which support cognitive development. An important contributor to the development of this field was Jean Piaget, who developed his "theory of cognitive development." Many of Piaget's theoretical assertions are no longer widely accepted. The subject of "nature versus nurture," or whether an individual's cognitive development is largely influenced by their natural qualities ("nature") or by their personal experiences ("nurture"), has been one of the main debates in cognitive development. However, the majority of specialists today acknowledge that this is a false dichotomy because the biological and behavioral sciences provide compelling evidence that genetic activity interacts with environmental experiences and events from the earliest stages of development. Naturalists believe that genetic mechanisms are powerful, but evidence from a variety of fields, including as comparative psychology, molecular biology, and neuroscience, suggests that ecology

plays a role in the development of cognition. The maturational hypothesis of development was developed by Arnold Gesell. According to Gesell, children attain developmental milestones in a predictable order when they are ready, and development is caused by inherited biological traits like genetics. Based on his theory, he created the Gesell Developmental Scale (GDS), a developmental scale that is still in use today and gives parents, educators, medical experts, and other pertinent professions a general idea of where an infant or kid falls on the developmental spectrum. Neo-Freudian Erik Erikson studied how children form their identities and personalities. Despite being a contemporary of Freud, his method places more emphasis on the social events that take place throughout life rather than only during childhood and that help shape personality and identity. All youngsters must go through eight methodical stages according to his theoretical framework (Casey et al., 2005).

Conclusion

Emotional anguish, behavioral issues, and long-term psychological challenges are all consequences of tough parenting. In order to promote resilience, healthy growth, and general well-being and assist children in becoming emotionally stable and self-assured adults, parents must adopt a supportive and caring parenting style.

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