Navigating Generalized Anxiety Disorder: A Case Study on the Impact of Familial Expectations and Coping Strategies

Arooba Haneef, Student,

The Bhopal School of Social Sciences

Abstract

Generalized Anxiety Disorder (GAD) is characterized by persistent and uncontrollable worrying, often occurring on most days for at least six months. Although the exact cause of GAD is not fully understood, it is hypothesized that fluctuations in neurotransmitters such as serotonin, dopamine, and norepinephrine contribute to the condition (American Psychiatric Association, 2013). This case study examines the experiences and coping mechanisms of Hamza, an 18-year-old male from an urban background, who exhibits mild to moderate anxiety exacerbated by familial pressures and health conditions. Despite his efforts to manage anxiety through self-help activities and lifestyle changes, Hamza continues to experience significant symptoms that disrupt his social, personal, and academic life. The Generalized Anxiety Disorder-7 (GAD-7) assessment tool was used to evaluate his anxiety levels, revealing moderate anxiety. This study highlights the limitations of self-help strategies in addressing GAD and emphasizes the need for systematic treatment approaches, including counseling and mindfulness practices. The findings underscore the importance of addressing familial dynamics and emotional support in managing anxiety disorders.

Keywords: anxiety, urban background, family pressure, coping mechanisms, GAD-7

ISBN: 978-93-91410-75-9. https://doi.org/10.51767/ic250418

Introduction

Generalized Anxiety Disorder (GAD) is a prevalent mental health condition characterized by excessive and uncontrollable worry about various aspects of life, often accompanied by physical symptoms such as restlessness, fatigue, and difficulty concentrating (American Psychiatric Association, 2013). GAD affects approximately 3.1% of the U.S. population annually, with higher prevalence rates among individuals assigned female at birth (Kessler et al., 2005). The disorder often begins in childhood or adolescence and can persist into adulthood, significantly impairing daily functioning and quality of life.

This case study focuses on Hamza, an 18-year-old university student diagnosed with GAD. Although academically successful and enjoying his life in a hostel, Hamza struggles with familial interactions, particularly with his father, who has high expectations and provides limited emotional support. This study explores the contributing factors to Hamza's anxiety, his coping mechanisms, and the implications for treatment and familial relationships.

Background Information

Hamza is the eldest son in an upper-middle-class family of four. His father, a doctor, holds high ambitions for Hamza, often creating a tense and demanding environment. This dynamic has led Hamza to feel inadequate and unsupported, exacerbating his anxiety. While Hamza excels academically and finds solace in the supportive environment of his university hostel, interactions with his family, particularly his father, trigger significant anxiety. His symptoms include headaches, loss of appetite, and mood disturbances following family interactions.

Assessment Tools

1. **Generalized Anxiety Disorder-7 (GAD-7)**:

   The GAD-7 is a self-report questionnaire used to screen for GAD and assess its severity. Scores range from 0 to 21, with higher scores indicating greater anxiety severity. Hamza scored 14, indicating moderate anxiety (Spitzer et al., 2006).

2. **Hamilton Anxiety Scale (HAM-A)**:

   The HAM-A is a clinician-rated scale that evaluates both psychological and somatic symptoms of anxiety. Hamza scored 17, indicating mild anxiety (Hamilton, 1959).

Symptoms of Anxiety

Hamza's anxiety manifests differently in two primary contexts:

1. **At University**:
   - Hamza demonstrates confidence and concentration in his studies.
   - He experiences minimal anxiety due to the social support provided by his peers in the hostel.
2. **With His Family**:
   - He feels continual pressure to meet his father's expectations, leading to feelings of inadequacy.
   - Physical symptoms such as headaches and loss of appetite emerge after family interactions.
   - He avoids family gatherings and communication with his father, though he maintains a positive relationship with his mother.

ISBN: 978-93-91410-75-9. https://doi.org/10.51767/ic250418

Analysis

Hamza's anxiety is influenced by several factors:

- **Parental Expectations**: His father's demanding nature and lack of emotional support contribute to feelings of inadequacy.
- **Lack of Emotional Support**: Hamza's family is unaware of his anxiety, leaving him to cope independently.
- **Social Contrast**: The supportive environment of the hostel contrasts sharply with the tension at home, exacerbating his anxiety during family interactions.

Coping Mechanisms

Hamza employs several strategies to manage his anxiety:

- **Academic Focus**: He channels his energy into studies, which boosts his self-esteem.
- **Social Support**: His friends at the hostel provide encouragement and understanding.
- **Avoidance**: He limits communication with his family to reduce stress.

While these strategies provide temporary relief, they fail to address the underlying causes of his anxiety.

Conclusion

This case study highlights the significant impact of familial dynamics on mental health, even for individuals who are otherwise successful and well-adjusted. Addressing Hamza's anxiety requires a multifaceted approach, including individual and family counseling, boundary-setting, and mindfulness practices. These interventions can empower Hamza to develop emotional resilience and foster healthier relationships with his family.

References

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Arlington, VA: American Psychiatric Publishing.

Hamilton, M. (1959). The assessment of anxiety states by rating. *British Journal of Medical Psychology*, 32(1), 50–55. https://doi.org/10.1111/j.2044-8341.1959.tb00467.x

Kessler, R. C., Chiu, W. T., Demler, O., & Walters, E. E. (2005). Prevalence, severity, and comorbidity of twelve-month DSM-IV disorders in the National Comorbidity Survey Replication (NCS-R). *Archives of General Psychiatry*, 62(6), 617–627. https://doi.org/10.1001/archpsyc.62.6.617

Spitzer, R. L., Kroenke, K., Williams, J. B., & Löwe, B. (2006). A brief measure for assessing generalized anxiety disorder: The GAD-7. *Archives of Internal Medicine*, 166(10), 1092–1097. https://doi.org/10.1001/archinte.166.10.1092