Relationship between Demographic Variables and Generalized Anxiety Disorder among Single Mothers in Pentecostal Churches in Kibera Informal Settlement, Nairobi County, Kenya

Loice Abwao[1], Pius Muasa[2], Ph.D., Catherine Mwarari[3], PhD.

[1,2,3]*Institute of Youth Studies, Tangaza University Nairobi, Kenya.*

A B S T R A C T

Generalized anxiety disorder (GAD) is a mental disorder that may be induced by people, events and different negative experiences among single mothers. This study examined the relationship between demographic variables and generalized anxiety disorder among single mothers in Pentecostal Churches in Kibera informal settlement in Nairobi County, Kenya. The study addressed three specific objectives which were; to establish the levels of generalized anxiety disorder among single mothers, to examine the relationship between demographic variables and generalized anxiety disorder among single mothers, and to assess the coping strategies for generalized anxiety disorder among single mothers in Pentecostal Churches in Kibera informal settlement in Nairobi County, Kenya. The Lazaru's (1993) stress theory and resiliency theory informed the study. The study employed the mixed method research. It utilized simple random sampling and purposive sampling techniques. The sample size of the study was 380 single mothers. Generalized Anxiety Disorder-7 (GAD-7) questionnaire was used to gather quantitative data. Interview guide was employed to collect qualitative data. Quantitative data was analysed using descriptive and inferential statistics. The Statistical Packages for the Social Sciences (SPSS) version 26 was used to conduct the analysis. After the collection of qualitative data, through an audio recording of participants' contents, transcription was done, and the systematic thematic analysis was carried out. Findings revealed that 39.9% (n = 161) of single mothers scored severe level of generalized anxiety disorder, 34.5% (n = 139) of the single mothers were at moderate generalized anxiety disorder, 24.9% (n = 100) scored mild generalized anxiety disorder, while (0.7%, n = 3) of the single mothers were at low level of generalized anxiety disorder. There was a significant relationship between demographic variables of age, level of education, employment status and generalized anxiety disorder ($p = 0.00 \leqslant 0.05$) among single mothers. Qualitative findings indicated that counselling, the practice of Christian spirituality, engaging in alcohol use and sharing with others were coping strategies for generalized anxiety disorder among single mothers in Pentecostal Churches in Kibera informal settlement in Nairobi County, Kenya. The study recommended that the single mothers who were at mild, moderate and severe level of generalized anxiety disorder may be helped in counselling so as to possibly identify the underlying issues that could be responsible for moderate and severe levels of generalized anxiety disorder.

Keywords: Generalized anxiety disorder, single mothers, Pentecostal Churches

1. BACKGROUND

Single mothers are faced with numerous challenges and generalized anxiety disorder may be experienced when life becomes so unbearable (Adwas et al., 2019). Aloka and Ndunge (2014) submit that anxiety mostly occurs among single mothers when they perceive, interpret or experience an event which is threatening to the self. Some situations that trigger anxiety may range from lack of basic needs to joblessness and a pandemic to a mere idea of uncertainty about the future. Thus, generalized anxiety disorder is a reality among the single mothers. The word "anxiety" is derived from the Latin word "anxietas", which means, uneasy or troubled mind (Munir & Takov, 2017). Anxiety is a mental health disorder that produces fear, worry, and a constant feeling of being overwhelmed by circumstances which makes an individual get troubled holistically. It is characterized by extreme, persistent, and unrealistic worry about everyday things (Munir & Takov, 2017). Generalized anxiety disorder (GAD) is a mental disorder that may be induced by people, events and different negative experiences among single mothers. Anxiety is human emotional reaction to danger, possibly for self-preservation. It becomes a disorder when it interferes with the holistic functioning of a person, and one is not able to function optimally. This psychological condition is often accompanied by ongoing anxiety, tense muscles, sweating, body ache, insomnia, and other physical manifestations of fear (Stein & Sareen, 2015). The Diagnostic and Statistical Manual of Mental Disorders (DSM-5) states that GAD is identified when a patient's symptoms persist for six months or longer and they are too severe for them to be managed. Additionally, it is specified that the symptoms must interfere with functioning and must not be caused by external sources like drugs, prescriptions, or different physical or mental health issues. If the person goes through a difficult and stressful life scenario that worsens one's psychological condition, this disorder can have very negative effects (American Psychiatric Association, 2013).

Generalized anxiety disorder may be experienced across genders, and prevalence is found in literature to be consistently higher amongst females as compared to the males (Breslau et al., 2019; Mclean et al., 2021). Stein and Sareen (2015) argue that the prevalence of generalized anxiety disorder is

roughly twice as high among the females as compared to the males. Further, among women, anxiety is recorded considerably greater among single mothers than mothers who have partners (Whisenhunt et al., 2019). A single mother may be seen as a woman who has a child or children but does not have a spouse or live with a male-husband to help with the child's growth. Single mothers particularly are inclined to experience higher rates of sadness, stress, fatigue and restlessness. According to Hastings et al. (2021), one of the main reasons for such psychological problems is the role and task overload. This has also been largely attributed to single mothers being generally associated with severe living circumstances that are notably suitable for creating and aggravating an anxious narrative, including feelings of great responsibility, loneliness, and care for a child as well as low financial status among other circumstances (Mclean et al., 2021).

Based on the global health estimate, the World Health Organization (WHO, 2017) established that 264 million of people were living with anxiety disorders. Depression (7.5%) was ranked as the single largest contributor to global disability, then followed by anxiety disorders (3.4%) and single mothers experience heightened GAD due to absence of the spouse who could have offered some supports in the family (Afifi et al., 2020; Colton et al., 2021). Triastuti and Herawati (2022) reported that the prevalence of generalized anxiety disorder has been found to vary with demographic characteristics, particularly age, level of education and employment status. With regard to age, anxiety is more prevalent among youths aged between 18 and 30 years at 66.7%, as compared to respondents aged above 30 years at 33.3% (Afifi et al., 2020; Sarkisian & Gerstel, 2018).

In the USA, Shear and Ross (2015) in their study on "anxiety disorders in women", reported that working women were twice as likely as men to have panic disorder (5.0%), agoraphobia (7.0%), PTSD (10.4%), GAD (6.6%), social anxiety disorder (15.5%) and OCD (3.1%) being more common in single mothers. It was further revealed that anxiety disorders were prevalence and disabling. In the lifetimes of women, 1 out of every 4 female Americans is diagnosed for at least one anxiety disorder. Chadoka et al. (2020) in the USA also held that the majority of single mothers experienced anxiety disorders, with 17.3% high, 21.2% moderate, and 10.3% being at low level of GAD. Similarly in Germany, Avison et al. (2019) reported that over 30% of single mothers exhibited moderate to severe symptoms of generalized anxiety and 37% of the mothers had general stress, which was twice as high as that of mothers with partners.

In South Africa, a research was conducted by Mkhwanazia and Gibbs (2021) on risk factors for generalized anxiety disorder among young women and men in informal settlements. The prevalence of anxiety was shown to be high among this population. The study indicated that among 484 women, 18.6 % reported moderate to severe symptoms of generalized anxiety disorder. In addition, the nationally representative South African Stress and Health, as reported by Herman et al. (2009), established that generalized anxiety disorder was the most common mental health issue reported, with a national frequency estimated at 8.1 %. The research additionally pointed that the majority (93%) of the participants had secondary education, and only 7 % had primary education.

In a cross-sectional study conducted in Tanzania, Mwita et al. (2021) looked into the prevalence and risk factors linked to symptoms of generalized anxiety disorders in expectant mothers who visited the Bugando Medical Center's antenatal clinic. Thus, 380 expectant mothers in all were enlisted and interviewed, utilizing the Generalized Anxiety Disorder – 7 (GAD-7) Scale. The study's outcome showed that the women's mean age was 30.35 (SD. 5.1), and 53.68% of them were in their third trimester. Also, 36.58% of the participants met the cutoff criterion of four for generalized anxiety disorder symptoms.

In Kenya, Korff et al. (2009) in their study carried out in Nyanza Province, showed the occurrence of common mental disorders, for example, anxiety, panic disorder, generalized anxiety disorder (GAD) were at 10.8%, with higher degrees of mental disorders among persons who were older and persons with poor physical health. Also, a research was carried out by Gust (2017) which explored factors associated with psychological distress among young women in Kisumu, Kenya. Majority (90.9%) of the women screened was of Luo ethnicity, married or cohabiting (67.9%), had primary school education or less (68.2%), and were employed (63.4%). Nearly half (47.3%) of the women screened were 18–24 years of age. With regards to the findings from the research, it was shown that among 461 women who were the participants of the research, most (58.4%) of them were categorized as having moderate Generalized anxiety Disorder, 20.8% of the women were considered as having low GAD and 20.8% of them were regarded as having high GAD. Moderate GAD was significantly more likely among women who reported a history of forced sex and were concerned about recent food insecurity. The issues of forced sex and feeling of insecurity were contributory factors to women generalized anxiety disorder in Kisumu County.

2. STATEMENT OF THE PROBLEM

Demographic disparities have been linked with the single mothers experienced generalized anxiety disorder as compared to mothers who are married (Afifi et al., 2020; Sarkisian & Gerstel, 2018). Level of education, age and employment status, have also been particularly found to be key stressors among single mothers (Colton et al., 2021). These demographic variables have also been found to be strongly connected (p = 0.00) with incidences of anxiety in Cuban populations (Broche-Pérez et al., 2020; Hastings et al., 2021; Triastuti & Herawati, 2022; Van et al., 2020). Copeland and Harbaugh (2020) identified single mothers as group of people that were vulnerable to stressful parenting experience. When becoming parents, single mothers confront various difficulties, including a lack of support, time constraints, and financial strain (Flaquer, 2018). In these conditions, the chances that women become pregnant unintentionally leading to single motherhood are very high (Mngoma et al., 2020). At the same time, these social and economic challenges including poverty and disease present a range of stressors likely to trigger generalized anxiety disorder among the resident single-mothers (Afifi et al., 2020). In Nigeria, Wegbom (2022) reported that stress accounted for 34.6%, psychological misery of women. Also, 23.7% and 18.5% of the women exhibited anxiety and depression, respectively.

Forceful pregnancy has been seen as one of the contributory factors to single motherhood in Kibera. Some of the women are forcefully impregnated several times, while some are also raped, and the women are left all alone to take care of themselves and their children. It is likely that this harsh experience

paves way for generalized anxiety disorder among the single mothers. Also, there are some jobless single mothers who at times struggle to provide for themselves and their children. Some are sexually exploited due to their vulnerable conditions, and they may hardly refuse being exploited since they need some basic needs so as to survive (KNBS, 2023). Kenya has seen a rise in the number of babies registered by single mothers; according to an economic survey conducted by the Kenya National Bureau of Statistics, the percentage of single mother births recorded in Kibera surged from 13.5% in 2021 to 13.9% in 2022 (KNBS, 2023).

The relationship between demographic variables and generalized anxiety disorder among single mothers in Kibera informal settlement remains unexplored. This presents a knowledge gap on the link between demographic variables and generalized anxiety disorder among single mothers in a slum setting. Informed by this setting, the current study examined the relationship between demographic variables and generalized anxiety disorder among single mothers in Kibera informal settlement, Nairobi County, Kenya.

Objective of the study

1. To establish the levels of generalized anxiety disorder among single mothers in Pentecostal Churches in Kibera informal settlement in Nairobi, Kenya.

3. METHODOLOGY

This study employed the mixed method of research. Based on the quantitative research design, the epistemological framework of this study was focused on the positivist approach. The positivist epistemological framework offers the advantage of having universal principles and observable facts that could be recorded (Afen & Egunjobi, 2023). The study utilized correlational research design, and it employed simple random sampling and purposive sampling techniques respectively. The sample size of the study was 380 single mothers. The Statistical Packages for the Social Sciences (SPSS) version 26 was used to conduct the quantitative data analysis. The Yamane (1967) formula was used to get the desired sample size of the study. Generalized Anxiety Disorder-7 (GAD-7) questionnaire was used to gather quantitative data. Interview guide was employed to collect qualitative data. The reliability coefficient Cronbach's alpha for the overall GAD-7 scales is 0.895, suggesting strong reliability. The study employed descriptive statistical analysis (frequency and percentages) and inferential statistical analysis Pearson product moment correlation analysis and the Chi-Square test). Ethical principles were strictly adhered to.

4. FINDINGS

Demographic Characteristics

This section presents the demographic characteristics of the participants of this study. This includes; age, level of education and employment status. The findings are tabulated in Table 1.

Table 1

Demographic Characteristics

Age	Frequency	Percent
15-19 years	0	0%
20-34 years	328	81.4%
35-44 years	66	16.4%
45-64 years	6	1.5%
65 years and older	3	.7%
Total	403	100.0%
Levels of Education		
No formal education	8	2.0%
Primary level	37	9.2%
Secondary level	321	79.7%
Tertiary	37	9.2%
Total	403	100.0%
Employment Status		

Permanent and pensionable	34	8.4%
Casual	155	38.5%
Self-employed	174	43.2%
Unemployed	40	9.9%
Total	403	100.0%

Findings in Table 1 indicated that majority (81.4%, n = 328) of the participants were between the ages 20-34 years, this was followed by the ages 35-44 years, being at 16.4% (n =66). Regarding level of education, it was found that 79.7% (n= 321) of the women had attained secondary school, while 2.0% (n = 8) of the women had no formal education. Statistics further pointed that most (43.2%, n =174) of the participants were self-employed, while 9.9 % (n = 40) of the participants were unemployed.

Levels of Generalized Anxiety Disorder among Single Mothers in Pentecostal Churches in Kibera Informal Settlement in Nairobi, Kenya

The first objective of this study was to establish the levels of generalized anxiety disorder among single mothers in Pentecostal Churches in Kibera informal settlement in Nairobi, Kenya. Descriptive statistical analysis was conducted, and data were computed and scored so as to measure the levels of GAD. Based on the GAD scale, 7 statements were used to measure the levels of generalized anxiety disorder (GAD). The Generalized Anxiety Disorder (GAD-7) is on a scale ranging from 0-3, where; 0 = Not at all, 1 = Several days, 2 = More than half the days, and 3 = Nearly every day. The total score can range from 0 to 21. Anxiety levels range from 0 to 4 (low), 5 to 9 (mild), 10 to 14 (moderate), while 15 to 21 (severe). The results are illustrated in Table 2.

Table 2

Levels of Generalized Anxiety Disorder among Single Mothers

Levels	Frequency	Percentage
Low	3	0.7%
Mild	100	24.9%
Moderate	139	34.5%
Severe	161	39.9%
Total	403	100%

Findings as shown in Table 2 revealed that 39.9% (n = 161) of single mothers scored severe level of generalized anxiety disorder, while some of the single mothers were at low level of generalized anxiety disorder (0.7%, n = 3).

5. DISCUSSION

Levels of Generalized Anxiety Disorder among Single Mothers in Pentecostal Churches in Kibera Informal Settlement in Nairobi County, Kenya

Findings revealed that 39.9% (n = 161) of single mothers scored severe level of generalized anxiety disorder, followed by 34.5% (n = 139) of the single mothers were at moderate level of generalized anxiety disorder, while 24.9% (n = 100) of the single mothers had mild generalized anxiety disorder. This finding is indicative that the single mothers in Pentecostal Churches are faced with the issue of anxiety, ranging from mild to severe generalized anxiety disorder. The presence of mild, moderate and severe anxiety among the single mothers strongly reveal the struggles they experience as mothers. Severe anxiety could be characterized by extreme, persistent, and unrealistic worry about everyday things which may interfere with one's day to day activities and the holistic functioning of a person (Munir & Takov, 2017). Severe anxiety may be experience when life becomes so difficult. Different factors may be responsible for severe anxiety, which are; joblessness, chronic sickness, lack of social support and lack of basic needs (Kearney & Levine, 2021). Adwas et al. (2019) amplify this by asserting that numerous single mothers struggle financially, with housing stability, childcare, sickness and job security, which can be stressful, leading to possible generalized anxiety disorder. This experience can lead to several negative outcomes. Affirming this stance, Rousou et al. (2019) submit that humans with generalized anxiety disorder are more likely to intentionally hurt themselves, including attempt suicide. Some people require medical attention and psychotherapy because they are unable to handle the ongoing psychological stress (Cairney et al., 2021).

The findings of this present study are similar with the findings of Chadoka et al. (2020) in the USA. Their study revealed that the majority of single mothers experienced anxiety disorders, with 17.3% high, 21.2% moderate, and 10.3% being at low level of GAD. The findings of this current study also confirmed the findings of Avison et al. (2019) in Germany. They established that roughly 30% of single mothers showed moderate and high generalized anxiety disorder, and 37% general stress, twice as high compared to mother who had partners. This study also confirm the findings of Mkhwanazia and Gibbs (2021) in South Africa. The prevalence of anxiety was shown to be high among this population. The study indicated that among 484 women, 18.6 % reported moderate to severe symptoms of generalized anxiety disorder. Additionally, the nationally representative South African Stress and Health

(2021), as reported by Herman et al. (2009) established that generalized anxiety disorder was the most common mental health issue among the women, with a national frequency estimated to be at 8.1 %. Mwita et al. (2021) in Tanzania also found that 36.58% of the single mothers were symptomatic for generalized anxiety disorder. The findings of this current study corroborated the findings of Gust (2017) in Kisumu, Kenya. Reports revealed that among 461 women, most (58.4%) of the women were categorized as having moderate generalized anxiety disorder, 20.8% of the women were considered as having low generalized anxiety disorder, and 20.8% of them were regarded as severe generalized anxiety disorder. The outcome of this current study is a matter of serious concern. It is possible that the single mothers are struggling not just to take care of themselves but their children as well. Being the only one who takes care of the family can be demanding as one makes enormous effort to carter for the family.

6. CONCLUSION

This study concluded that single mothers experienced generalized anxiety disorder. The study established that there was significant relationship between demographic variables and generalized anxiety disorder among single mothers in Pentecostal Churches in Kibera informal settlement in Nairobi County, Kenya. Generalized anxiety disorder has been identified as one of the mental health challenges that confronts the single mothers. This study therefore achieved it specific objective.

7. RECOMMENDATION

The study made the following recommendations that the single mothers in the Pentecostal Churches may make effort to share their struggles and also seek psychological support. The single mothers who were at moderate and severe level of generalized anxiety disorder be helped in counselling so as to possibly identify underlying issues that could be responsible for moderate and severe levels of generalized anxiety disorder. Pentecostal Church leaders could intensify their effort in reaching out to single mothers and listening to them. This may facilitate more effective strategy in handling generalized anxiety disorders. The single mothers of different ages, those with lower educational level and employment status at the Pentecostal Churches may be helped with psychological support and skills that could enhance positive ways of looking at their experience as they advance in age. Counselling psychology practitioners may be called upon to render effective counselling services to the single mothers. They could organize seminars on psychological topics for the single mothers in order to broaden their understanding about mental health issues and effective coping strategies. They could be informed of the relationship between demographic variables and generalized anxiety disorder among single mothers.

REFERENCES

Afifi, T. O., Cox, B. J., & Enns, M. W. (2020). Mental health profiles among married, nevermarried, and separated/divorced mothers in a nationally representative sample. *Social Psychiatry and Psychiatric Epidemiology*, 41(2), 122–129.

Afen, I.E., & Egunjob, J.P (2023). Relationship between Depression and Spirituality among the Youths of St. John the Evangelist Parish in Karen Nairobi, Kenya. *International Journal of Research Publication and Reviews*, 4(11), pp. 3232-3238

Avison, W. R., Ali, J., Walters, D. (2019). Family structure, stress, and psychological distress: A demonstration of the impact differential exposure. *Journal of Health and Social Behavior*, 48(3), 301–317

Adwas, A. A., Jbireal, J. M., & Azab, A. E. (2019). Anxiety: Insights into signs, symptoms, etiology, pathophysiology, and treatment. East African Scholars *Journal of Medical Sciences,* 2(10), 580–591. https://doi.org/10.36349/EASMS.2019.v02i10.00

Aloka, P., & Ndunge, N. F. (2014). The relationship between anxiety levels and academic achievement among students in selected secondary schools. Lang'ata District, Kenya

American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders, Fifth edition. American Psychiatric Association Publishing

Cairney, J., Boyle, M., Offord, D. R., Racine, Y. (2021). Stress, social support and depression in single and married mothers. *Social Psychiatry & Psychiatric Epidemiology,* 38(8), 442–449

Colton, T., Janzen, B., & Laverty, W. (2021). Family structure, social capital, and mental health disparities among Canadian mothers. *Public Health*, 129(6), 639–647

Chadoka-Mutanda, N. & Mbanefo, C. M. (2020). *Correlates of Single Motherhood in sub-Saharan Africa Region*. Unpublished Masters, University of Witwatersrand

Gust, D.A., Gvetadze, R. Furtado,M.,Makanga, M.,akelo,V.,Ondenge, K.,& Nyagol, B.,lemal, E.(2017). *Factors associated with psychological distress among young women in Kisumu, Kenya. Kisumu: Kenya Medical research Institute*. https://doi.org/10.1037/fam0000188

Hastings, O. P., & Schneider, D. (2021). Family structure and inequalities in parents' financial investments in children. *Journal of Marriage and Family*, 83(3), 717-736

Herman, A. A., Stein, D. J., Seedat, S., Heeringa, S. G., Moomal, H., & Williams, D. R. (2009). The South African Stress and Health (SASH) study: 12-month and lifetime prevalence of common mental disorders. *South African medical journal*, 99(5).

Korff M.S., Scott., K.M., & Gureje O. (2009). *Global Perspectives on Mental- Physical Co-Morbidity in the WHO World Mental Health Surveys*. Cambridge, UK: Cambridge University Press; 2009.

McLean, C. P., Asnaani, A., Litz, B. T. & Hofmann, S. G. (2021). Gender differences in anxiety disorders: prevalence, course of illness, comorbidity and burden of illness. *J Psychiatr Res*, 45(8):1027-35

Munir, S., & Takov, V. (2017). *Generalized anxiety disorder*. Stat Pearls Publishing

Mkhwanazi, S., & Gibbs, A. (2021). *Risk factors for generalized anxiety disorder among young women and men in informal settlements in South Africa: a cross-sectional study*. SSM-Mental Health, 1, 100010.

Mwita, M., Shemdoe, E., Mwampashe, E., Gunda, D., & Mmbaga, B. (2021). Generalized anxiety symptoms among women attending antenatal clinic in Mwanza Tanzania; a cross-sectional study. *Journal of Affective Disorders Reports*, 4, 100124.

Rousou, E., Kouta, C., Middleton, N. & Karanikola,M. (2019). Mental health among single mothers in Cyprus: a cross-sectional descriptive correlational study. *BMC Women's Health*, 19(1):67

Shear, M. K., Cloitre, M., Pine, D., & Ross, J. (2015). *Anxiety disorders in women: Setting a research agenda. Anxiety and disorders association of America*.

Sarkisian, N., & Gerstel, N. (2018). Till marriage do us part: Adult children's relationships with their parents. *Journal of Marriage and Family*, 70(2), 360–376.

Stein, M. B., & Sareen, J. (2020). Generalized anxiety disorder. *New England Journal of Medicine*, 373(21), 2059-2068.

Triastuti, N.J. & Herawati, E. (2022). Demographic characteristics and anxiety in the educational setting during the COVID-19 pandemic in Indonesia: A cross-sectional study. *Health Sci Rep*, 18(5): 87-92

Whisenhunt, J. L., Chang, C. Y., Parrish, M. S., & Carter, J. R. (2019). Addressing single parents' needs in professional counseling: A qualitative examination of single parenthood. *The Family Journal*, 27(2), 188-198.

World Health Organization (2010). *Mental Health and Development: Targeting People with Mental Health Conditions as a Vulnerable Group. Mental Health and Poverty Project*. Geneva. ISBN 978 92 4 156394 9