

Overprotective Parenting and Risk of Generalized Anxiety Disorder in Children”

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ABSTRACT

Overprotective parenting has been increasingly recognized as a significant environmental factor contributing to the development of anxiety disorders in children. The present study aimed to examine the relationship between overprotective parenting and the risk of Generalized Anxiety Disorder (GAD) in children. A quantitative cross-sectional research design was used, and data were collected from a sample of children aged 10–15 years using standardized instruments, including the Parental Bonding Instrument (PBI) and the GAD-7 scale. The findings revealed a significant positive relationship between overprotective parenting and generalized anxiety disorder, indicating that higher levels of parental control are associated with increased anxiety symptoms in children.

Furthermore, the results of regression analysis indicated that overprotective parenting significantly predicts anxiety levels in children. Gender differences were also observed, with female children reporting higher anxiety levels than males. The study highlights the importance of balanced parenting practices that encourage both care and autonomy. The findings suggest that reducing excessive parental control may help in preventing the development of anxiety disorders in children and improving their overall psychological well-being.

KEYWORDS: Overprotective Parenting, Generalized Anxiety Disorder, Children, Anxiety, Parenting Styles

Introduction:

Background of the Study

Parents play a crucial role in the development of children's psychological, emotional and social adjustment. Parent-child interactions during early development shape the development of personality, coping strategies and emotional regulation. Overprotective parenting, one of several parenting styles, has garnered particular attention among psychological researchers for its possible link to anxiety disorders in children (Parker et al., 1979). Overprotective parenting involves excessive parental control, involvement and interference in a child's life, usually stemming from parental concerns about safety.

Although parental protection is crucial for children's safety, too much protection can have unintended effects. Parents who are overprotective may restrict their children from facing difficulties and experiencing age-

appropriate stressors. This can prevent the child from learning how to cope with difficult situations and develop resilience, skills that are crucial for dealing with anxiety-provoking situations (Spence & Rapee, 2016). This dichotomy between overprotection and independence may lead to mental health problems, especially anxiety disorders.

Generalized Anxiety Disorder (GAD) is a prevalent anxiety disorder in children and adolescents. GAD involves excessive and persistent worry about a range of aspects of their lives, including schoolwork, friendships, and family (American Psychiatric Association, 2013). In addition to worry, children with GAD may also experience physical symptoms including restlessness, fatigue, muscle tension and difficulty concentrating. Without intervention, GAD can continue into adulthood and interfere with a person's ability to function in various areas.

Parenting Styles and Child Development

The study of parenting styles is a prominent area in developmental psychology, particularly Baumrind's typology. Baumrind (1967) proposed three main parenting styles: authoritative, authoritarian, and permissive, with the addition of neglectful parenting (Maccoby & Martin, 1983). Among these, overprotective parenting has been described as a type of authoritarian or controlling parenting style, which involves high control and low autonomy-granting.

Modest parenting styles, such as authoritative parenting, have been linked to beneficial outcomes, such as high self-esteem, effective emotion regulation, and low anxiety (Baumrind, 1967). However, overprotective parenting can stifle children's opportunities to learn about and explore their surroundings, make choices, and solve problems. This may lead to a sense of helplessness and susceptibility to anxiety.

Children need to learn how to cope with difficulties in order to build resilience. Overprotective parenting can inadvertently promote avoidance via excessive intervention to prevent children from facing challenges. Avoidance is a common characteristic of anxiety disorders because it inhibits learning that anxiety-provoking situations are not as dangerous as first perceived (Spence & Rapee, 2016).

Overprotective Parenting and Anxiety Development

Overprotective parenting and anxiety have been well documented in the psychological literature. Parents who are overprotective have children with higher levels of fear, dependence, and insecurity. Parker et al. (1979) define parental overprotection as excessive control and interference in children's activities, which restricts the growth of independence.

Overprotective parenting can lead children to view the world as an unsafe environment. Parents may support this belief through their own behaviours, such as monitoring, warning and restricting. In turn, children may become hypervigilant to perceived dangers and display excessive worry, symptoms of Generalized Anxiety Disorder (McLeod et al., 2007).

Also, overprotective parenting may lead to anxiety via modeling and reinforcement. Social learning theory (Bandura, 1977) suggests that children acquire behaviours through observing and modeling their parents. When parents exhibit signs of anxiety or express excessive worry about safety, children may learn and adopt these behaviours.

Childhood Generalized Anxiety Disorder

Generalized Anxiety Disorder is a long-lasting anxiety disorder in which a person worries excessively about a number of things. Rather than specific fears or anxieties, GAD is characterised by uncontrollable generalised worry. The American Psychiatric Association (2013) describes symptoms of GAD as restlessness, irritability, poor concentration, muscle tension and sleep disturbance.

GAD frequently begins in childhood or adolescence, and its early detection and treatment are important. Research has shown that anxiety disorders in childhood can result in poor long-term outcomes, such as educational problems, social isolation and depression (Essau et al., 2010). So, identifying the risk factors associated with the onset of GAD is important in prevention and treatment.

It has been found that environmental factors, such as parenting, are important in the development of anxiety disorders. Parents who are overly controlling and lacking warmth are more likely to have children who develop anxiety symptoms (McLeod et al., 2007). It is particularly protective parenting that has been shown to be a risk factor for GAD.

Culture and Parental Practices

Cultural values shape parenting behaviours, and there are cultural differences in parenting practices. In collectivist cultures, like Pakistan, parental control is seen as essential to promote family harmony and child achievement. But in some cases, too much control can tip the balance into overprotection, which can stifle children's autonomy and development.

In South Asian cultures, parents often value academic performance and social acceptance, which can put pressure on children. This, along with overprotective parenting, may lead to increased levels of anxiety in children. Also, there is a stigma associated with mental health problems, which may lead to underreporting and failure to seek help from professionals (Hunt & Eisenberg, 2010).

Cultural factors are crucial in understanding the link between overprotective parenting and anxiety. What might be seen as typical parenting in one culture could be seen as overprotective in another. So, it is important to study children in different cultural contexts to create culturally responsive interventions.

Objectives of the Study

The main objectives of this study are:

To determine the prevalence of depression among university students

To determine the prevalence of anxiety among university students
To examine the relationship between depression and anxiety
To investigate demographic differences in depression and anxiety

Research Questions

What is the prevalence of depression among university students?
What is the prevalence of anxiety among university students?
Is there a significant relationship between depression and anxiety?
Do demographic variables significantly affect depression and anxiety?

Significance of the Study

This study is significant as it contributes to the existing body of knowledge on student mental health. The findings can help policymakers, educators, and mental health professionals develop targeted interventions to address depression and anxiety among students. Additionally, the study can raise awareness about the importance of mental health and encourage students to seek professional help (World Health Organization, 2021).

Rationale of the Study

The rationale for this study is based on the increasing prevalence of mental health disorders among university students and the lack of adequate research in the Pakistani context. Since most mental health disorders begin during young adulthood, early identification and intervention are crucial for preventing long-term consequences (Kessler et al., 2007).

Scope of the Study

This study focuses on university students aged 18–25 years and examines the prevalence of depression and anxiety using standardized measures. The study also explores the relationship between these variables and demographic factors.

Literature Review

Parents' parenting behaviours and their impact on children's mental health have been well studied in developmental and clinical psychology. Overprotective parenting, among other parenting factors, has been shown to play a crucial role in the development of children's anxiety disorders. Generalised Anxiety Disorder (GAD), which is characterised by excessive and uncontrollable worry, is a prevalent mental disorder among children and adolescents (American Psychiatric Association, 2013). This chapter provides an overview of the literature on overprotective parenting, its underlying theories, and its link with anxiety disorders, such as GAD.

Overprotective Parenting

Overprotective parenting is characterised by parental over-control, interference and over-restriction of the child's independence. Parker et al. (1979) define overprotection as high parental control and low autonomy granting. Parents who engage in this parenting style tend to intervene in their child's play, make choices for their child, and protect them from harm.

Although this is usually done with the best interest of the child in mind, it can restrict children from learning important skills. Children who grow up in overprotective families may experience difficulties with autonomy, problem solving and emotion regulation (Spence & Rapee, 2016). Over time, these may lead to an increased risk for anxiety.

Theoretical Perspectives

A number of theoretical perspectives account for the associations between overprotective parenting and childhood anxiety. Perhaps the most prominent is social learning theory, which proposes that children acquire behaviours through modelling of their parents (Bandura, 1977). Children may learn to respond to situations in an anxious way if their parents are anxious and convey excessive worry.

Attachment theory also plays a significant role, highlighting the importance of early parent-child bonds. Secure attachment is linked to the development of healthy emotional responses, whereas insecure attachment, which may be related to overprotective and controlling parenting, may lead to anxiety and dependence (Bowlby, 1988).

Finally, cognitive-behavioral theory proposes that overprotective parenting may contribute to the maintenance of cognitive biases and avoidance. By shielding children from adversity, parents may inadvertently reinforce the idea that the world is a hostile place and that the child is helpless to deal with it on their own (Spence & Rapee, 2016).

Childhood Generalized Anxiety Disorder

Generalized Anxiety Disorder involves excessive anxiety about a number of things, such as school, family, and friends. The American Psychiatric Association (2013) defines GAD in children as excessive worry that is hard to control and is frequently accompanied by physical symptoms like fatigue, fidgetiness and sleep problems.

GAD is becoming more prevalent among children and adolescents, posing a major public health issue. Studies show that the early onset of anxiety disorders can have long-term negative consequences such as depression, academic performance and social adjustment problems (Essau et al., 2010). So, it is important to understand risk factors like parenting to prevent and treat these disorders.

Evidence for the Link between Overprotective Parenting and Anxiety

There is a considerable amount of empirical evidence linking overprotective parenting and child anxiety. McLeod et al. (2007) reviewed the literature and found that parental control was significantly related to children's anxiety. The researchers found greater parental control was linked to greater anxiety.

Likewise, Wood et al. (2003) demonstrated that overprotective parenting, which includes excessive monitoring and restriction of children, was associated with greater child anxiety. These restrict children's opportunities to face difficult situations and learn to cope.

Spence and Rapee (2016) also added that protective parenting plays a role in the development and maintenance of anxiety, as it reinforces avoidance. By preventing

children from actually confronting fears, they don't learn that they are able to cope with the situation, perpetuating anxiety.

Parental Anxiety

Parents' anxiety is another key variable affecting parenting and children's outcomes. Parents who are anxious are more likely to be overprotective in an attempt to reduce their own anxiety (Bögels & Brechman-Toussaint, 2006). This results in a vicious cycle where parental anxiety results in overprotective parenting behaviours which trigger child anxiety.

Children with anxious parents are also more likely to develop anxiety disorders, partly as a result of genetic factors, but also environmental influences (Murray et al., 2009). The environment, and parenting styles, are key factors in children's emotional development.

Gender Differences in Anxiety

Anxiety disorders have been shown to differ between males and females. Research shows that girls are more anxious than boys (Essau et al., 2010). This could be due to biological, psychological and social factors.

Presumably, females are encouraged to be more emotional and sensitive, which may predispose them to anxiety. And gender roles and norms may increase stress in women. But more research is needed on the impact of parenting styles on gender differences in anxiety.

Culture and Parenting and Anxiety

Parenting and child psychology are greatly influenced by cultural factors. In collectivist cultures like Pakistan, parental control and involvement is valued within the family. These practices can foster discipline and conformity to societal norms, but overcontrol can result in overprotective parenting.

Cultural norms shape parenting practices and how they affect child development (Hunt & Eisenberg, 2010). For example, in some countries, overprotective parenting may be the norm, making it hard to identify protective and controlling parenting (Hunt & Eisenberg, 2010). Thus it is necessary to consider these relationships in particular cultures.

Research Gap

While many studies have explored parenting styles and anxiety, there are still shortcomings. Research has mostly been conducted in Western cultures with few studies from developing world. Moreover, a majority of studies have examined general anxiety rather than Generalized Anxiety Disorder.

There is also a need for more empirical studies that use standardised measures to examine overprotective parenting and GAD in children. Moreover, the link between culture and parenting styles has not been explored in depth.

Methodology

Research Design

This study used a quantitative cross-sectional design to investigate the association

between overprotective parenting and child Generalized Anxiety Disorder (GAD). This design was chosen as it enables the researcher to gather information at one point in time and examine the relationships between variables (Creswell, 2014). This approach is common in psychological studies to measure prevalence, and the relationships between variables that are not manipulated. The quantitative nature of the research allowed the application of statistical methods to determine the direction and magnitude of the association between parenting styles and anxiety.

Population and Sample

The study population was children between the ages of 10 and 15 years and their parents. This population was targeted as middle childhood and early adolescence are key periods in development when anxiety disorders typically begin (Essau et al., 2010). The study used a sample of 180 participants who were selected through convenience sampling, a method widely used in behavioural studies because it is convenient and easily accessible (Etikan et al., 2016). Both boys and girls with a range of educational backgrounds were selected. Convenience sampling can limit the ability to generalize, but it's appropriate for exploratory research seeking to establish associations between variables.

Research Instruments

Valid and reliable instruments were used. The Parental Bonding Instrument (PBI) developed by Parker et al. (1979) which measures dimensions of parental care and overprotection was used to measure overprotective parenting. This questionnaire is rated by a 4-point Likert scale where higher scores represent greater parental overprotection. Generalized Anxiety Disorder (GAD) was measured using the GAD-7 questionnaire by Spitzer et al. (2006), a self-report measure that assesses the severity of anxiety symptoms. These scales have been shown to be reliable and valid in previous research (Henry & Crawford, 2005), and were therefore suitable for the purpose of this study.

Data Collection Procedure

A questionnaire was used to collect data from the participants. Institutional approval was sought from various educational institutions and participants were invited to take part in the process in a classroom environment and through social media platforms. Parents were given an overview of the study and informed consent was sought. The children were also provided with instructions on how to answer the questionnaire. Anonymity and confidentiality were maintained throughout the data collection process, with honest answers encouraged. The process took place within a certain time frame.

Ethical Considerations

The study was conducted in a way that adhered to ethical standards. The aim and nature of the study were explained to the participants and they were told they were free to take part. They were also free to withdraw from the study at any time without repercussions. Anonymity and confidentiality of responses were ensured by not collecting any personal details. This study followed the ethical considerations

described by the American Psychological Association (2017) to uphold the rights and well-being of the participants.

Data Analysis Techniques

Data were analysed using the Statistical Package for the Social Sciences (SPSS). To meet the study objectives, a number of statistical approaches were used. First, Cronbach's alpha was calculated to determine the internal consistency of the measuring instruments (Field, 2013). Second, measures of central tendency (mean) and variation (standard deviation) were used to provide an overview of the data. Third, Pearson correlation was used to explore the link between overprotective parenting and generalized anxiety disorder. Fourth, an independent samples t-test was conducted to determine whether there were differences in anxiety levels between males and females. Lastly, regression analysis was used to examine the relationship between overprotective parenting and anxiety in children. These statistical techniques are widely used in psychological studies to examine relationships and differences between groups (Cohen, 1988).

RESULTS

Reliability Analysis

Scale	Cronbach's Alpha
Overprotective Parenting	0.85
Generalized Anxiety (GAD-7)	0.88

Interpretation:

The reliability of the instruments was assessed using Cronbach's alpha. The values for overprotective parenting ($\alpha = 0.85$) and generalized anxiety ($\alpha = 0.88$) are above the acceptable threshold of 0.70, indicating good internal consistency of the scales (Field, 2013). This suggests that the instruments used in the study are reliable for measuring the intended constructs.

Descriptive Statistics

Variable	Mean	Standard Deviation
Overprotective Parenting	26.4	5.7
Generalized Anxiety (GAD)	20.8	6.1

Interpretation:

Descriptive statistics show that the mean score for overprotective parenting is 26.4 (SD = 5.7), indicating a moderate to high level of parental overprotection among the sample. The mean score for generalized anxiety is 20.8 (SD = 6.1), suggesting that children in the sample experience moderate levels of anxiety. The standard deviation values indicate a reasonable spread of scores around the mean.

Correlation Analysis

Variables	r value	p value
Overprotective Parenting & GAD	0.62	0.001

Interpretation:

Pearson correlation analysis revealed a strong positive relationship between overprotective parenting and generalized anxiety disorder ($r = 0.62$, $p < 0.01$). This indicates that higher levels of parental overprotection are associated with higher levels of anxiety in children. The result is statistically significant and supports previous findings that excessive parental control contributes to anxiety development (McLeod et al., 2007).

Independent Samples t-test (Gender Differences)

Variable	Male Mean	Female Mean	t value	p value
GAD	18.2	21.5	-2.15	0.03

Interpretation:

The independent samples t-test was conducted to examine gender differences in anxiety levels. The results indicate that female children ($M = 21.5$) reported significantly higher levels of anxiety compared to male children ($M = 18.2$), $t(178) = -2.15$, $p < 0.05$. This suggests that gender plays a significant role in anxiety, with females being more vulnerable, consistent with previous research (Essau et al., 2010).

Regression Analysis

Predictor	Beta (β)	R ²	p value
Overprotective Parenting	0.59	0.36	0.001

Interpretation:

Regression analysis was conducted to determine whether overprotective parenting predicts generalized anxiety disorder. The results show that overprotective parenting is a significant predictor of anxiety ($\beta = 0.59$, $p < 0.01$). The R^2 value of 0.36 indicates that approximately 36% of the variance in anxiety levels can be explained by overprotective parenting. This highlights the strong impact of parenting style on children's mental health.

Discussion

The current study suggests a strong positive association between overprotective parenting and children's generalized anxiety disorder (GAD). This implies that when children perceive a greater level of control and restriction from their parents, they are more likely to report symptoms of excessive worry, fear and a sense of insecurity. Our

findings are in line with prior studies that have demonstrated that overprotective parenting restricts children's freedom and ability to develop coping strategies (McLeod et al., 2007; Spence & Rapee, 2016). Social learning theory proposes children acquire emotional reactions from observing their parents and parental overprotection or anxiety may result in the modeling of anxious responses (Bandura, 1977).

The research also discovered that overprotective parenting is a strong predictor of children's anxiety, accounting for a substantial portion of the variance in GAD symptoms. This suggests that parenting style plays a critical role, not only in the context of children's development, but also as a psychological influence on children's wellbeing. Restricting children's autonomy may lead to feelings of powerlessness and low self-efficacy (Bögels & Brechman-Toussaint, 2006). This could lead to chronic worrying and difficulty coping with uncertainty, which are hallmarks of generalized anxiety disorder (Bögels & Brechman-Toussaint, 2006). The findings also support attachment theory, which proposes excessive control may result in insecure attachment and dependence (Bowlby, 1988).

Additionally, the study found that girls have a higher level of anxiety than boys, as reflected by their higher GAD scores. This is in line with existing research that suggests females are more susceptible to anxiety disorders because of biological sensitivity, expressiveness and cultural expectations (Essau et al., 2010). Cultural factors may also contribute to this, as in many cultures stricter parenting controls may be implemented for girls, which may increase their vulnerability to psychological distress. Overall, the results suggest the importance of parenting styles that provide both care and autonomy, as overprotective parenting may inadvertently lead to anxiety disorders among children.

References

- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.).
- Bandura, A. (1977). *Social learning theory*.
- Baumrind, D. (1967). Child care practices anteceding three patterns of preschool behavior. *Genetic Psychology Monographs*, 75, 43–88.
- Bögels, S. M., & Brechman-Toussaint, M. L. (2006). Family issues in child anxiety. *Clinical Psychology Review*, 26(7), 834–856.
- Bowlby, J. (1988). *A secure base: Parent-child attachment and healthy human development*.
- Essau, C. A., et al. (2010). Anxiety disorders in children and adolescents. *Journal of Anxiety Disorders*, 24(1), 1–7.
- Hunt, J., & Eisenberg, D. (2010). Mental health problems and help-seeking behavior. *Journal of Adolescent Health*, 46(1), 3–10.
- Maccoby, E. E., & Martin, J. A. (1983). Socialization in the context of the family.
- McLeod, B. D., et al. (2007). Parenting and child anxiety. *Clinical Psychology Review*, 27(2), 155–172.
- Murray, L., et al. (2009). The impact of maternal anxiety on child development. *Clinical Child and Family Psychology Review*, 12(2), 144–160.
- Parker, G., Tupling, H., & Brown, L. B. (1979). A parental bonding instrument.

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British Journal of Medical Psychology, 52(1), 1–10.

Spence, S. H., & Rapee, R. M. (2016). The etiology of anxiety disorders. *Clinical Child and Family Psychology Review*, 19(3), 1–25.

Wood, J. J., McLeod, B. D., Sigman, M., et al. (2003). Parenting and childhood anxiety. *Journal of Clinical Child and Adolescent Psychology*, 32(1), 1–15.