

Examining the Social Effects of Agoraphobia on Individuals: Evidence from Pakistan

Sara Ali Khan

MS Scholar, Bahria University Islamabad Campus

Dr. Latafat Aziz

Assistant Professor, Humanities and Social Sciences, Bahria University Islamabad Campus

Dr. Asim Muneeb Khan

Assistant Professor, Humanities and Social Sciences, Bahria University Islamabad Campus

asim.soc1@gmail.com

Abstract

This research paper discusses the lived experiences of individuals affected by Agoraphobia. The study's main objective was to find out how affected individuals live their lives, the problems they face in their daily lives, and the coping strategies used by Agoraphobics. The research was conducted through a qualitative research design. The locale of the study consisted of four government hospitals (Mardan Medical Complex (MMC) Mardan, Hayatabad Medical Complex (HMC) Peshawar, Benazir Butto Hospital Rawalpindi, and Pakistan Institute of medical sciences (PIMS) Islamabad). Twenty-one respondents (who were Agoraphobic individuals) were included in the study through purposive and snowball sampling techniques. The data for the research come from in-depth qualitative interviews utilizing a semi-structured interview guide. The study results showed that Agoraphobic individuals face many problems in their daily lives, such as misunderstandings with the people in their closed circle, dependency issues, difficulties in managing their occupational lives, and can't quit their comfort zone. The study concludes that Agoraphobics face various problems in their daily lives and try to cope with them. The study suggests that social seminars regarding mental issues and their impact on individuals are important to arrange for common individuals. It is important to raise awareness by organizing these programs and workshops. This study advocates for a more effective and empathetic support system for those affected by this condition.

Keywords: Agoraphobia, Social lives, Mental Disorders, Hospitals, DSM-5

1. Introduction

This study examines the experience of Agoraphobic individuals in their daily lives and the complications they face because of this disorder. Pakistan is such a society where mental illnesses

are considered as a person is controlled by jinn or myth. Health facilities are not equally provided to all. A phobia is an intense but irrational fear of something specific, usually from an object, person, situation, or a bad experience. Agoraphobia is one of the kinds of phobia which is an anxiety disorder (Wittchen et al., 2010). According to the ancient Greeks, Agoraphobia is the fear of markets or public places, mainly vacant or too congested. Agora is a Greek word that means marketplace, and phobia means fear of something. The term was coined by a psychologist named Carl Friedrich Otto Westphal in 1871 after observing his three patients who were scared of marketplaces severely. He diagnosed agoraphobic patients for the first time in 1872 (Clum and Knowles, 1991).

Agoraphobia is a fear of being away from a place or object representing safety. It is a fear of leaving home and to spend a night away from home alone. The fear of an individual with Agoraphobia is irrational, but some patients give medical reasons why they cannot leave home alone or face public places (Goldstein & Chambless, 1978). According to the Diagnostic and Statistical Manual of mental disorders (DSM-5), Agoraphobia is entirely different from a social and straightforward phobia with various symptoms (Asmundson et al., 2014). The person affected by Agoraphobia cannot travel on public transport without the person the patient trusts unthinkingly. Women are more affected by Agoraphobia than males, and it is primarily married women (Plana-Ripoll et al., 2019).

According to Clum and Knowles (1991), 89% of females are affected by Agoraphobia out of 100%. Symptoms of Agoraphobia are specific and different from the symptoms of another kind of phobia. Symptoms include fear of leaving home, crowds or waiting, enclosed spaces such as movie theatres and elevators, open areas such as parking lots, malls, and using public transport such as bus, plane, or train (Rachman, 1984). Sweaty palms, increased heart rate, and quick berating are

some of the symptoms of Agoraphobia. Once it happens, then it continues throughout life (Segrott et al., 2004).

Hypnotherapy and virtual reality are also techniques to extend phobia. With medication and psychotherapy, a person can escape the trap of Agoraphobia. The associative learning principle, also called classical conditioning, is a theory to overcome and extend the fear of certain things and convert an individual's feelings to a calm state. The person affected by Agoraphobia becomes dependent on others and has a dependent personality (Chambless, 1985). During the 1970s, more effective treatments were developed to treat Agoraphobia, including group or individual sessions. Cognitive, behavioural, and psychophysiological measures were also included. At that time, attention was also given to paper-pencil tests. That was a more practical approach at that time. A person with Agoraphobia cannot make a proper sexual relationship with their spouse and have adjustment issues in their married life. An affected individual does not welcome their spouse with joy, enthusiasm, and happiness, which creates hurdles in their married life (Vidler, 1991).

Due to all these problems, a person's emotional well-being and self-esteem also become low, creating problems. Agoraphobic people become dependent on their spouses and ultimately become helpless. (Fry et al., 1962), claimed that a person chooses a spouse based on similar attributes. It was highlighted from the study that most of the agoraphobic persons married to a person have a similar problem. (Everaerd et al., 1973), His research claims that 45% of agoraphobic people complain that they cannot adjust to their families. Hand (1947) reported that two third of individuals with Agoraphobia were not satisfied with their married life before treatment, but after treatment, they became satisfied (Arrindell et al., 1986).

1.1 Objectives of the Study

- To explore the changes in the social life of a person affected by Agoraphobia
- To identify the complications faced by Agoraphobic individuals

1.2 Research questions

- How does Agoraphobia affect the social lives of affected individuals, and what do affected individuals face daily difficulties?

2. Literature Review:

This paper's literature review originates from theoretical and empirical studies. Several studies have been conducted in the developed world on the experiences of Agoraphobic individuals and their complications while performing daily activities (Eaton and Keyl, 1990; Campton, 1998). These studies have unpacked an individual's experiences, challenges and coping mechanisms. A transitory review of the literature is presented here further down:

Agoraphobia affects the social life of a subject by affecting marital status, occupational life, and family life. Many other disorders are also caused by Agoraphobia, including panic disorder, anxiety, and other phobias. Agoraphobia affects the living style of an individual in the same way. According to the DSM 5, people avoid going to public places because of the fear of panic attacks (Magee, 1999). Theories about Agoraphobia show that traditional women's role increases the risk of Agoraphobia because of less exposure to the external world. 18% of agoraphobic individuals lose their jobs because of absence and low confidence level to face the people around them in job place (Dijkman et al., 1993).

Due to the fear and shame of panic attacks, the individuals become socially isolated and alone, which becomes the aetiology of depression. It causes psychosocial impairment in an individual's

daily life and disturbs their life (Ost et al., 1984). Some individuals affected by Agoraphobia have a limited number of fears, while others become so dependent even they cannot go out of home alone and become housebound. Some individuals avoid most situations from which they are scared, while others prevent one or two. According to Wittchen, in 2010, Agoraphobia occurred mainly in females compared to males. 2.9% is the lifetime prevalence for males and females, 8.3%.

Agoraphobia with a panic disorder is also common and found twice in females than males. It is shown from the research that the rate of Agoraphobia is higher in uneducated women who have lower socioeconomic status (Finnerty et al., 2010). Research shows that it is found from the comparative study of individuals affected by social phobia and Agoraphobia that it affects individuals differently who have different incomes, economic statuses, lifestyles, and education. Women with low education and poor financial situation become easily influenced by Agoraphobia and become housebound, which further affects that specific individual's personality, confidence level, and social life (Hofmann et al., 2014).

Most mental disorders and their onset depend on the quality of life. If the quality of life is good and every person's need is fulfilled, then the chances of occurrence of the disorder become low. Research shows that social phobia, panic disorder, and generalized anxiety are dependent variables affected by the quality of life, an independent variable. Quality of life is a series of happiness. Still, if there is a low quality of life, it will automatically give rise to different psychological conditions which further affect the social life of an affected individual. The theory of Abraham Maslow based on hierarchy states that if the basic needs of an individual do not meet, it causes severe issues in the life of individuals, which affect them in different ways (Benson and Dundis, 2003). Agoraphobia affects and influences an individual's subjective well-being, self-realization, neighborhood quality, global quality of life, and the relationship of affected individuals with

family, friends, spouses, and relatives. This disorder reduces the quality of life by making a dependent personality of individuals. It also affects the somatic health of an individual, which also negatively affects the social life (Dijkman et al., 1993).

According to Davidson (2001), it is concluded that the patient of Agoraphobia must have some specific symptoms, which may include the symptoms of bipolar disorder such as unrealistic thoughts and beliefs, aggression, fighting with others, isolation, etc. Sometimes, the chances of getting affected by Agoraphobia become twice as when there is a positive family history of psychological illness positive history of grandparents, parents, older siblings, aunts, and uncles. Agoraphobia is a disorder that affects an individual's ability to go to crowded places or leave their home (Davidson, 2001). Patients who have Agoraphobia cannot afford areas that have specific boundaries which open and close for a particular time—for example, elevators, metro buses, etc. There are a variety of objects in specific situations which stimulate agoraphobic anxiety. Agoraphobia is a mixture of many kinds of phobia affecting the individual, such as claustrophobia. Agoraphobia starts with an anxiety attack in a public place if an individual sees any disturbing event, like witnessing an accident. Most individuals with a high level of sensitivity cannot cope with anxiety and die from a heart attack, brain haemorrhage, and even outright insanity, which is also one of the causes of a heart attack. The sufferers include those who experience that kind of situation for the first time (Segrott et al., 2004).

3. Methodology:

The study was carried out in four government hospitals of Pakistan which is (Mardan Medical Complex (MMC) Mardan, Hayatabad Medical Complex (HMC) Peshawar, Benazir Butto Hospital Rawalpindi, and Pakistan Institute of medical sciences (PIMS) Islamabad). The population of the

study consisted of individuals affected by Agoraphobia. Twenty-one respondents (selected through purposive and snowball sampling techniques) were interviewed with the help of a semi-structured interview guide. In-depth interviews were taken with each individual. Collected data is primary and comes from personal communication with respondents in a naturalistic setting. The data was administered and analyzed through the thematic analysis technique. Research contains various ethical standards (Bryman & Bell, 2007). All the main ethical standards were followed throughout the research work. Informed consent was taken from all the respondents. The respondent's involvement was voluntary, and all the respondents were permitted to leave at any interview stage. The secrecy and concealment of the data were guaranteed. The unrecognizability of the respondents is maintained. The respondents were not affected in any form, and their self-esteem as an affected individual was taken care of.

4. Results and Discussion:

Any disorder, disease, illness, or sickness disturbs an individual's social life badly. Agoraphobia is a mental disorder that badly affects an individual's life and targets all aspects of an individual's life. Due to this disorder, a person might be unable to perform social activities, attend social gatherings, and go outdoor activities. They have a cluster of abnormal thoughts and behaviour (Choi et al., 2005). One of my respondents responded, *"Whenever I am in a closed room, I feel that the walls of the room are coming towards me and my side. And the walls are above my chest. Whenever I go outside from home thus, I feel that this thing will happen to me and there will be no one to help me out from this condition, and I will die. And after me, what will happen to my children? Who will take care of them? Such type of ideas comes to my mind every time."*

Another respondent shared a similar response regarding the enclosed space. (Public transport)

"Once, while travelling in a taxi, I encountered a problem where the door mirror was closed, and I couldn't open it. I hold the hand of the driver to help me out in this situation."

Agoraphobia, a mental disorder that affects an individual's social life, also has physical impacts and different symptoms on an individual (Carter et al., 1995). It has been proven from the feedback I got from my respondents. One of the individuals I surveyed replied., *"Yeah, I feel that my heart is getting outside my body, but when someone puts a hand on my heart, they feel it is normal. But sometimes I think it is a disease of the stomach or kidneys. But my colour becomes yellow, like the egg yolk in such conditions. I have been clenching my teeth lately, causing some discomfort."*

"Once upon a time, I was on the way home from someone's death, and I told the conductor of the flying coach that you could not set someone in the back seat from me, so he said that if I paid for all these seats so I will not put anyone. After some time flying coach stopped and pickup two persons more, and at that time, I became out of my mind, and I felt that my breath was stopping. I told the conductor to stop the vehicle; otherwise, I would jump. "

Agoraphobic individuals also become faint and feel shaky during panic attacks. They have trouble breathing, their heart rate increases, and Their body begins to experience intense sweating. Explaining this, one of my respondents said, *"Yes, I feel faint, and my body starts shaking. I also have trouble breathing, and my heart rate increases because of my severe fear of different situations. And a very weird sound and a severe headache start in my head during such a situation". After a panic attack for up to 24 hours, I feel severe pain in my feet and hands.*

Agoraphobic individuals are afraid of crowded areas (Onuh, 2019). Data shows that they mostly avoid overcrowded areas. If they face such a place, then they feel severe fear. One of my

respondents explained this by saying, *"First of all, I do not visit crowded areas, and I avoid such places, but if I face such conditions unwantedly, then I try to escape from such situations, and I try to go outside of the crowd to safe place."* Traffic jam is a fearful stimulus for Agoraphobic individuals. The response of one of my respondents about traffic jams is, *"It's a big problem for me to face traffic jams. On 14 August, I became the victim of a severe panic attack because of traffic jams and extreme noise"*. An agoraphobic individual tries to escape travelling alone and far away from home. They prefer such places with which they are familiar. They try to avoid visiting such sites, which is new for them. One respondent answered, *"I can travel alone easily to the places I have been before. I can travel to my home village, Peshawar, but if I'm going alone to a place I have never been before, I have slight panic attacks, and just thinking it activates my hyperventilation"*.

"Before my illness, there were also problems, such as my husband's death at a young age. After that, the head surgery of my son happened soon, and when he became young then, he became addicted and died at 22 age so there were a lot of problems at that time. I was also busy solving my problems, and the same is now. I am the only breadwinner of my family because of this. I am very stressed. Because of all these situations, my illness has become more severe".

One of my respondents explained his activities to me: *"Before my illness, I engaged in a wide range of activities such as socializing with friends, exploring new places, and participating in outdoor hobbies. After the onset of my illness, I have had to make adjustments and prioritize activities that align with my comfort level and manage my Agoraphobia"*. It proves that Agoraphobia badly affects and completely changes an individual's activities. It badly affects an individual's social life and makes them dependent on others for outdoor activities. Many of my respondents were from the business side or a job with outdoor activities. Individuals with this

disorder experience disruptions in their entire lifestyle, which can also impact their income. Due to Agoraphobia, their financial status may decrease. (Mavissakalian and Hamann, 1987). Questions related to suicidal ideation and thoughts were also asked. Most individuals respond that they do not have such ideas and that it is forbidden and sinful in our religion Islam and we are afraid of Allah.

5. Summary and Conclusion:

This study attempted to analyze the experiences of Agoraphobic individuals and the complications they faced. Based on the feedback from my survey participants and previous data, it is concluded that Agoraphobia affects an individual's life badly in all aspects. Individuals become dependent on all their activities. An agoraphobic individual feels fear of facing the external world. It affects the occupational life of an individual in such a way that they cannot go far away from their comfort zone for official activities like meetings etc. They cannot face crowds because of the severe fear of being stuck and have the same feelings in closed places like elevators.

Moreover, these stimuli, in combination, disturb an individual's whole life. The study results revealed that most people in Pakistani society do not understand and are not aware of mental health issues, so they do not consider mental illnesses. It makes the survival of affected individuals harder. Results of the data show us that affected individuals face many hurdles in their social lives, such as they cannot spending a night out from home, Their occupational lives being impacted, and clashes between the family and the affected individual occurring when the affected individual refuses to go with family for dinner, to celebrate vacations and weekends outside of the home, they do not leave their comfort zone, and it becomes their weakness.

Furthermore, the occupational lives of affected individuals are also disturbed because they cannot work when there is a huge client flow in the office, they cannot attend business meetings outside of the city, their activities become limited to their comfort zone, and they become dependent on others for their decisions and many more things. Individuals become bound to their comfort zone, and because of this boundedness, Agoraphobic individuals often experience a loss of social connections, leading to a smaller and more limited circle of friends. It becomes hard for individuals to attend family functions, so they skip them, which causes many problems for them.

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