



Administration, Scoring & Interpretation of the Generalized Anxiety Disorder-7 (GAD-7) Scale

In the *Public Health Nursing Care Plan for Supporting Perinatal Clients at Risk of Generalized Anxiety*, it is recommended to administer the GAD-7 Scale in clients presenting with signs of persistent anxiety. This Practice Guidance Resource has been developed to guide public health nurses in utilizing the GAD-7 Scale with a client in the postpartum period.

What is Generalized Anxiety Disorder (GAD)?¹

Anxiety is an emotion characterized by feelings of tension, worried thoughts, obsessive thoughts, and physical changes like increased blood pressure. **The essential feature of generalized anxiety disorder is excessive anxiety and worry about events or activities, where the intensity, duration, or frequency of the anxiety and worry is out of proportion to the actual likelihood or impact of the anticipated event.** With GAD, the individual finds it difficult to control the worry and to keep worrisome thoughts from interfering with attention to tasks at hand.

For additional information on how to recognize, assess, and respond to perinatal mental health concerns in practice, refer to the **Public Health Nursing Care Plans for Supporting Perinatal Mental Health Practice Guidance** document.

Signs and Symptoms of Generalized Anxiety Disorder¹

- Excessive and persistent worry, fear or nervousness that interferes with daily life functioning.
- The individual finds it difficult to control the worry.
- The anxiety, worry, or physical symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.
- The anxiety and worry are associated with at least 3 of the following symptoms:
 - Restlessness or feeling keyed up or on edge
 - Being easily fatigued
 - Difficulty concentrating or mind going blank
 - Irritability
 - Muscle tension
 - Sleep disturbance (difficulty falling or staying asleep, or restless, unsatisfying sleep).

Perinatal Anxiety²

Anxiety during pregnancy and baby's first year is referred to as perinatal anxiety. Unique features include recurring thoughts about the fetus or child, worry that something might be wrong with the pregnancy or child, concern about one's ability to be a competent parent, or difficulty enjoying the pregnancy or new baby.



Anxiety disorders can present along a spectrum of severity, from mild to severe, depending on the level of symptoms and the impact on the individual’s functioning and quality of life.

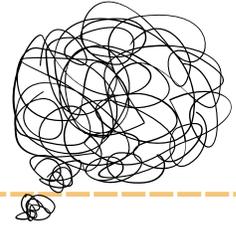
Assessment for Risk of Generalized Anxiety

If signs or symptoms of generalized anxiety are observed during the client interaction, begin to ask questions more specifically related to these symptoms.

Using Plain Language in Client Conversations

When discussing anxiety with a client, it’s important to use clear, supportive language and define any terms they may not be familiar with. Some individuals may not identify with the term "anxiety" but may relate more to words like:

- Feeling overwhelmed
- Worrying a lot
- Feeling uneasy
- Having racing thoughts
- Struggling to relax or turn off the mind



Using **gentle, open-ended questions** and avoiding clinical jargon can help the client feel more comfortable sharing their experiences and can strengthen the therapeutic alliance.

Examples of plain language, open-ended questions:

Rationale for why these types of questions can be helpful in strengthening the therapeutic alliance:



“Can you tell me about any worries or concerns that have been on your mind since having your baby?”

Encourages the parent to share their specific anxieties and helps assess if worries are excessive or intrusive.



“How have you been feeling emotionally since your baby arrived? Are there any thoughts or feelings that have been particularly difficult to manage?”

Allows the parent to express emotions without immediately labeling them as problematic.



“Many new parents experience moments of worry—what does worry look like for you these days? How is it affecting your daily life?”

Frames anxiety as common but invites the parent to reflect on its intensity and impact.



“Have you noticed any changes in your sleep, energy levels, or ability to relax since giving birth?”

Helps identify physical symptoms of anxiety, such as restlessness, fatigue, or sleep disturbances.



“What do you find most stressful or overwhelming about this stage of parenthood? How are you coping with those feelings?”

Encourages discussion about stressors, coping strategies, and potential areas where support may be needed.

Guided by clinical judgement, when a client is presenting with **signs of persistent anxiety** beyond situational stress that is normal during the transition to parenthood, consider using the **Generalized Anxiety Disorder-7 (GAD-7)** scale to assist in determining the client’s level of risk (low, moderate or severe) for anxiety.

What is the Generalized Anxiety Disorder-7 (GAD-7) Scale?

The GAD-7 is a valid and efficient tool designed to screen for generalized anxiety disorder and assess severity of anxiety symptoms.³ It is **not** a diagnostic tool. It is brief, easy to administer and suitable for use in the perinatal period. The tool is available in about 80 languages, and translated versions can be accessed through a [public database](#) to provide health care workers unrestricted access to the tool.⁴

Features of the GAD-7

- 7 questions
- Questions assess **generalized anxiety symptoms** by asking about the frequency of feelings such as nervousness, worry, restlessness, irritability, and physical tension experienced over **THE PAST TWO WEEKS**
- Responses are provided on a 4-point Likert scale:

Not at all	Several days	More than half the days	Nearly every day
0	1	2	3



Introducing the GAD-7 to the Client

Use a trauma- and violence-informed approach to introduce and then administer the GAD-7 with a client. Below are key principles of this approach and how to apply them:

Key Principle	Why It Matters	How to Apply It in Practice
Create a safe and supportive environment	Clients are more likely to engage honestly when they feel physically and emotionally safe.	Choose a private, quiet space , use open body language , and speak in a calm, unhurried tone .
Normalize and validate the experience	Reduces stigma and fear by framing emotions as a normal part of the postpartum period.	Use non-pathologizing language (e.g., <i>"Many new parents experience ups and downs, and it's completely understandable."</i>).
Explain the purpose clearly	If the tool feels like a test, clients may minimize their responses out of fear of judgement.	Introduce it as a way to explore their experience , not a diagnosis (e.g., <i>"This tool helps guide our conversation so we can see what support, if any, might be helpful for you."</i>).

Key Principle	Why It Matters	How to Apply It in Practice
Give the client choice and control	Trauma survivors and those with medical mistrust may feel anxious if they feel forced into an assessment.	Always ask permission before using the tool (e.g., "Would you be open to going through this together?"), and let them choose how they'd like to participate .
Use plain language and avoid jargon	Many clients don't resonate with terms like "anxiety" but may relate to "feeling on edge" or "having racing thoughts."	Explain clinical terms in everyday language (e.g., "Some people describe anxiety as feeling restless, overwhelmed, or unable to turn off their thoughts.>").
Frame it as a collaborative conversation	Builds trust and partnership , making the client more likely to engage meaningfully.	Reinforce that the client is the expert on their experience (e.g., "This tool helps me understand what you've been feeling so we can explore what might be most helpful for you.>").
Acknowledge strengths and offer reassurance	Clients may feel guilty or inadequate about their emotions, leading to shame-based resistance .	Reassure them that seeking support is not a failure (e.g., "You're doing so much right now, and it's okay to ask for help.>").
Discuss next steps together	A rigid or prescriptive approach can make clients feel powerless.	After completing the tool, ask how they feel about their responses , and explore next steps together . (e.g., "Is there anything from these questions that stood out to you?").

Options for Administering the GAD-7

The GAD-7 can be administered in different ways. It is essential to provide the client with a choice.

Consider how clients might be given a choice in how they complete the GAD-7 to promote comfort and autonomy. Use clinical judgement to determine client literacy level, comfort etc.

- **Self-completion:** the client is handed the GAD-7 and completes the screening tool on paper or electronically. This offers them privacy in responding to the questions. **If the client is unable to answer all questions independently, offer assistance to aid in its completion.** Ensure a non-judgemental tone and space when reviewing responses with the client.
- **Side-by-side administration (collaborative approach):** sit beside the client and read each question aloud while the client marks their own response. This approach reinforces that the client is in control of their responses provided.
- **Verbal administration:** ask each question verbally and record response as client responds.



"Would you prefer that I ask these questions aloud, or would you rather fill them out yourself?"

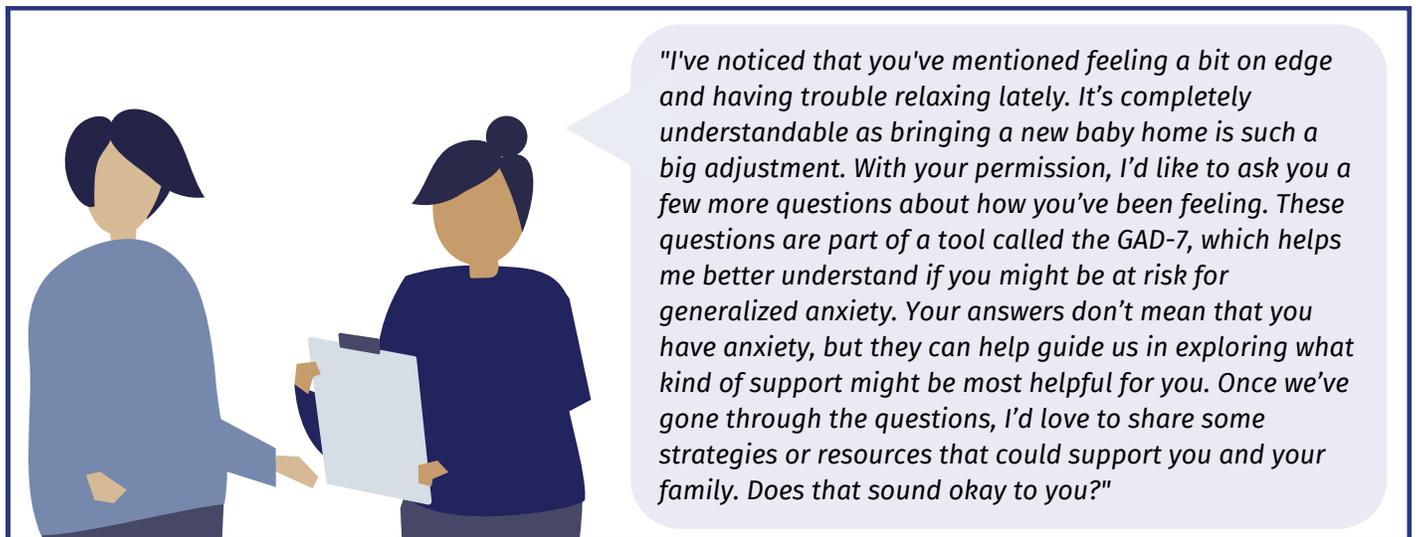
If administered verbally, sit side-by-side with the client and read each question and the subsequent responses exactly as written to maintain tool validity and reliability. For verbal administration, the tool could be introduced as follows:

"The Generalized Anxiety Disorder tool, or GAD-7, is a tool I use with many of my clients during visits. It consists of a short series of questions asking how often over the last two weeks you have experienced different symptoms, with response options ranging from 0 (not at all) to 3 (nearly every day). I'll read them exactly as written."



How the GAD-7 Can Be Introduced to a Client

Normalize and validate the screening process:



Explain the purpose of the GAD-7:

"You've shared that it's been hard to stop worrying, and I've noticed you seem a bit restless. Many new parents feel this way, and it's completely understandable. With your permission, I'd like to ask you a few short questions using a tool called the GAD-7, which helps assess whether anxiety might be playing a role in how you're feeling. These questions won't give a diagnosis, but they will help us understand whether further support could be helpful. Once we go through them, I can share some ideas, resources, or strategies that might be useful for you. How do you feel about that?"



Emphasize choice and control:

"I can either ask the questions aloud to you or you can read them on your own, please let me know what you prefer. You can then choose the response that feels most accurate for you. If anything is unclear, just let me know, and we can go through it together at your pace. If there are questions you prefer to not answer, that is okay as well, there are no right or wrong answers. Does that sound okay to you?"



Provide anticipatory guidance and describe how responses will be used:

"Once we have completed the questions, I will add up the score. We will then go over the responses together and I will explain what your scores mean. We can talk about how you've been feeling. If your responses suggested you might be experiencing symptoms of postpartum anxiety, we can discuss next steps, including different types of support available to you. The goal is to make sure you feel heard, supported, and not alone in this."



Provide reassurance and next steps:

“Regardless of your score, we can talk about what you need and what might help you feel supported. Some people appreciate connecting with other parents and talking to other health care professionals. There may also be strategies that we can discuss together on future home visits. I’m here to listen and support you in whatever way you need.”



Scoring and Interpreting the GAD-7

The GAD-7 is scored by summing the scores of all 7 items. The total score range is from 0 to 21.

After administering the GAD-7, tabulate the score and share the score and an interpretation of the score with the client.

Score	Interpretation	Say...
0 - 4	Low Risk	<i>“You may be at low risk or have minimal anxiety.”</i>
5 - 9	Moderate Risk	<i>“You may have some potential anxiety.”</i>
10 or higher	Severe Risk	<i>“You may possibly be experiencing anxiety. It is important to link you with supports.”</i>

****Note:** There is variation across organizations in how scores are categorized. The cut-off scores presented here for the GAD-7 have been adapted and grouped together to support application of the nursing process.

After scoring the GAD-7, refer to the **Public Health Nursing Care Plan for Supporting Perinatal Clients at Risk of Generalized Anxiety** for guidance on next steps to take in providing care to your client.

NOTE

It is important to use clinical judgement when interpreting the score of the GAD-7. For instance, there may be situations where the “score” from an assessment tool reflects “low risk” – yet the client and their partner urgently express significant concern about the mother’s safety and mental well-being. In this situation, the public health nurse would use all the assessment information available to them and perhaps interpret that the client is actually at higher risk than what was indicated following completion of the assessment tool alone. The nurse would then choose to respond with interventions appropriate for a higher level of risk.

Communicating Scores to the Client

Remember, it's important to normalize, validate and provide reassurance.

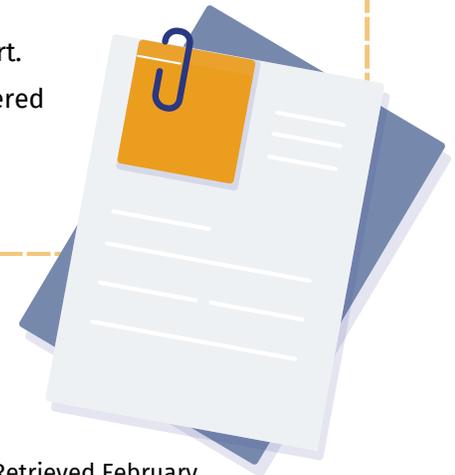


"It looks like your responses suggest you may be experiencing anxiety right now. First, I just want to reassure you that you are not alone—many parents feel this way, and there is support available. What you're feeling is valid, and it's okay to need some extra help during this time. I'd like to explore what kind of support might feel most helpful for you. There are different options we can look at together. Does that sound okay to you?"

An Important Note About Mental Health Screening Tools

Screening tools, like the GAD-7:

- Support nursing assessment and intervention by providing structured insight into a client's symptoms.
- Are to be used alongside other tools (e.g., care plans, educational resources, clinical observations).
- Help to identify and monitor symptoms of anxiety over time.
- Aid in client education by increasing awareness of symptoms and available support.
- Provide an opportunity to strengthen the therapeutic relationship when administered in a supportive, trauma-informed manner.
- **Are to be used in a manner that complements, but does not replace, clinical judgement.**



References:

¹ American Psychiatric Association. (2022). *American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders* (5th ed., text rev.). <https://doi.org/10.1176/appi.books.9780890425787>

² Canadian Psychological Association. (2021). "Psychology Works" Fact Sheet: Perinatal Anxiety. Retrieved February 23, 2025, from <https://cpa.ca/psychology-works-fact-sheet-perinatal-anxiety/>

³ Spitzer, R. L., Kroenke, K., Williams, J. B., & Löwe, B. (2006). A brief measure for assessing generalized anxiety disorder. *Archives of Internal Medicine*, 166(10), 1092. <https://doi.org/10.1001/archinte.166.10.1092>

⁴ Pfizer. (2010). *PHQ Screeners*. Patient Health Questionnaire Screeners. Retrieved February 23, 2025, from <https://www.phqscreeners.com/>

⁵ PAR Staff (2020). *Administration and scoring of the Generalized Anxiety Disorder-7 (GAD-7) [technical supplement]*. PAR. https://www.parinc.com/Portals/0/Webuploads/samplerpts/CheckKIT_Series_GAD7_Tech_Supp_Paper_v4_092920.pdf

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