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INVESTIGATING GENDER DIFFERENCES IN SOCIAL ANXIETY DISORDER AMONG UNIVERSITY STUDENTS

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ABSTRACT ARTICLE INFO

Social anxiety disorder, or social phobia, is a prevalent anxiety disorder among university students, particularly females. Previous research indicates that social anxiety is prevalent in western countries but is uncommon in South-East Asian countries such as Malaysia. However, the situation problem identified in previous studies bears some resemblance to studies conducted in Malaysia. Social anxiety is always present in situations involving a large number of people. Individuals have varying degrees of experience with it. The most common situation in which people struggle with it is when they are speaking with strangers, giving a public speech or presentation, or making eye contact, to name a few. Women will frequently attempt to avoid being in those situations, but other studies have discovered that males face the same issue. Thus, the purpose of this study is to ascertain the level of social anxiety among university students and to make comparisons between male and female students. The instrument was

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adapted and modified from Caballo, Salazar, Irurtia, Arias, and Ciso's previous research. The data collection method is simple random sampling. This study was conducted quantitatively, utilising T-test analysis. The results indicated that no significant differences in level social anxiety disorder existed between genders among university students, with sig-t=.726 (a=0.05), indicating that social anxiety developed equally in both genders. However, the study concluded that consistent engagement and participation in class will significantly reduce anxiety levels among students regardless of their gender.

1.0 INTRODUCTION

Social Anxiety Disorder is a mental illness of severely lack of self- esteem, excessive of shyness, and over conscientiously thinking about what people's perception towards themselves when in social situation events such as talking in front of the audience, being awkward in the crowd, hard to making new friends and many more. People who have been diagnosed with social anxiety disorder are incompatible when it comes to facing the social situation. It is the fear that has overshadowed that particular person until they believe that they do not have the ability to control the situation. This scenario would affect the performance of a person itself in terms of pursuing academics and their dreams which could disrupt their quality of life. Social anxiety usually starts to occur during youth (NIMH, 2016). According to Jefferies, P., & Jefferies, M. (2020), studies also indicate younger individuals are disproportionately affected by social anxiety, with prevalence rates at around 10% by the end of adolescence, with 90% of cases occurring by age 23. Another study by Hakami, R. M.et al. (2018), many past studies have shown that social anxiety disorder is prevalent in university students which is quite worrying as they are going to prepare themselves for the industry and will take over to contribute more towards the society. Another past study has illustrated that social anxiety is more likely to occur among females compared to male due to the gender construct which is limited to the role of gender that has been contrived in the culture among the society. According to the DSM-5, prevalence of SAD is higher in women and this difference is more pronounced among adolescents (Alternus et al., 2013). Another study from Howell, Ashley N. et.al., (2015), said that beliefs about the self in relation to one's social environment are inevitably shaped by sociocultural practices and values, such as gender roles and the degree to which specific aspects of one's gender are being evaluated (e.g. physical attractiveness) which one the reason why female has the audacity to get social anxiety. Other than that, the study also has mentioned that there are social pressures for women to calibrate their expressions of traditional feminine and masculine traits, and to emphasize or deemphasize the importance of their physical appearance, across a number of social situations (Howell, Ashley N. et al., 2015). This present study aims to determine and compare the level of social anxiety among male & female university students. We expect that this study would be helpful to connect the gap in the local research of Social Anxiety Disorder and will be useful as reference for other future studies regarding this issue.

2.0 LITERATURE REVIEW

2.1 Social Anxiety Disorder

People suffering with social anxiety, also known as social phobia, have difficulties adapting to the social settings in which they find themselves, according to the American Psychological Association (APA). An excessive degree of shyness on a person's side when faced with social circumstances such as meeting new people or being evaluated by others characterises someone who is anxious about social settings such as meeting new people. High levels of anxiety make people more inclined to avoid feared circumstances or, if they can't flee or avoid them, to experience severe discomfort or suffering while

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they are taking place in the dreaded scenario (Caballo et al.,2010). Individuals who suffer from social anxiety disorder, according to the British Psychological Society and the Royal College of Psychiatrists (2013), are fearful that they may say or do anything (whether willingly or involuntarily) that will be humiliating or embarrassing to them (such as blushing, sweating, shaking, looking anxious, or appearing boring, unintelligent, or incompetent). The worried sensation happens often in the lives of people who suffer from social anxiety disorder, therefore they avoid social settings as much as they can. According to the National Institute of Mental Health, social anxiety disorder (SAD) is characterised by "a significant and persistent dread of one or more social or performance settings involving exposure to new individuals or potential inspection by others" (Brook, C. A. et al., 2008). According to Hofmann, S. G. et al., (2011), social anxiety disorder (SAD) is characterised by the dread of being adversely judged by others as its distinguishing characteristic. Individuals who suffer from social anxiety do so because they want to portray themselves in a good light in public but are uncertain about their abilities to do so (Russell, G., & Topham, P.,2012).

A number of variables may play a role in the development of social anxiety disorder. According to research, one of the factors contributing to this is the upbringing of the family members. A new study has shown that the prevalence of social anxiety disorder is greater in relatives of individuals who have the problem than in relatives of people who do not have the illness (The British Psychological Society & The Royal College of Psychiatrists, 2013). Additional research discovered that students who have a family history of mental illness are more likely than those who do not to acquire social anxiety disorder than students who do not have this history. There is a statistically significant relationship between social phobia and a family history of mental illness (Reta, Y.et al., 2020). The cultural background of a person, on the other hand, according to one research, has a direct effect on the probability of acquiring social anxiety disorder. According to studies conducted in Western nations, the lifetime prevalence of SAD varies between 7 percent and 13 percent among individuals who have never experienced the condition (Brook, C. A., 2008). The 12-month prevalence rate of SAD from East Asian surveys, on the other hand, has been found to be considerably lower, ranging from 0.4 percent in Taiwan to 0.2–0.6 percent in Korea, 0.2 percent in China, and 0.8 percent in Japan (Hofmann, S. G. et al., (2011). Due to variations in social norms, with the majority of Western nations choosing an individualistic approach to their way of life, and the majority of Eastern countries more likely to take a collectivist approach to their way of life, this is the case.

A frequent issue in the field of mental health, social anxiety is a problem that occurs on a spectrum between discomfort and physical impairment (Russell, G., & Topham, P.,2012). Almost everyone suffers from some kind of anxiety condition, and social anxiety is no exception. Children and adolescents are more susceptible to developing social anxiety disorder than adults. According to Kessler (2007), those seeking therapy as adults had a median age of onset in their early to mid-teens, with the majority acquiring the illness before they reached their twenties. According to research, social anxiety disorder is one of the most prevalent anxiety disorders in the general population, ranking in the top three most common disorders in the general population (Azhar, F. L. 2017). Individuals suffering

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with social phobia, one of the most prevalent anxiety disorders among teenagers and young adults, may find it difficult to function at school if they do not get therapy. SAD students may have functional disability in certain aspects of their life, such as academic performance, job instability, absenteeism from work, and reduced productivity. As a result, they may become more dependent on their families, communities, and nation as a result of their condition (Reta, Y.et al., 2020). The inability to cope with social circumstances has resulted in social anxiety having a detrimental effect on academic achievement and workplace performance. An investigation of medical students who suffer from social anxiety discovered that they did badly in clinical exams and had depressed symptoms. Besides that, social phobia raises the probability of frequent substance abuse and employment difficulties in the future for those who suffer from it (Desalegn, et al.,2019). Regrettably, as the unemployment rate for new graduates continues to increase as a consequence of a lack of interpersonal and communication skills, the issue is getting more worrisome.

2.2 Gender Differences

According to McKenna (2017), in general terms, "sex" refers to the biological differences between males and females, such as the genitalia and genetic differences. "Gender" is more difficult to define, but it can refer to the role of a male or female in society, known as a gender role, or an individual's concept of themselves, or gender identity. In terms of sexuality, both sexes have differences in aspects of anatomically and physiologically. As one of the examples is the amount and types of hormones in male and females are different. Genetic factors define the sex of an individual. Women have 46 chromosomes including two Xs and men have 46 including an X and a Y. The Y chromosome is dominant and carries the signal for the embryo to begin growing testes. Both men and women have testosterone, estrogen, and progesterone. However, women have higher levels of estrogen and progesterone, and men have higher levels of testosterone. While the term of gender is referring to social construct in community. The World Health Organization defines gender as it refers to the socially constructed characteristics of women and men, such as norms, roles, and relationships of and between groups of women and men. It varies from society to society and can be changed. As in this modern era, the role of gender has transformed and become loose. Nowadays, the decision making, and financial provision does not necessarily have to be men and preparing the food in the kitchen also does not necessarily have to be women. This transition is happening due to the opportunity of women to get the same level of education as men has made the women be able to stand in front and become flexible to do men's roles too.

In this study, the term of gender was used to examine whether there are any variations in the SAD, since prior studies revealed substantial disparities between male and female due to the differences of social construct in the community. Based on previous study, prevalence of SAD is higher in women and this difference is more pronounced among adolescents (Altemus et al., 2013). Another study by Asher, M. et al. (2017), findings indicate that women are more likely to have SAD compared to men.

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This study is a review of gender differences in SAD by referring to past studies that had been done by other researchers. Based on another study has discussed about the issue of sex differences in social anxiety. It resulted in small significant differences in the social anxiety between men and women due to the cultural impact for gender roles in the community (Vicente E. Caballo et al., 2014). However, Mustafa Bagloghu et al. (2018) conducted a research in Turkey and discovered that there are no significant variations between gender in SAD because current gender roles have grown more comparable in recent years. There is also a study by McLean et al. (2011) has proven SAD was the only anxiety disorder that did not evidence significant gender differences in current or lifetime rates. But it has been debated that method of the research using Bonferroni correction. This study has covered how gender affects age of onset, chronicity, comorbidity, and burden of illness. Therefore, they have conducted the research by using Collaborative Psychiatric Epidemiology Studies (CPES), which is an integration of three national surveys of mental health in residents of the United States: the National Comorbidity Survey Replication, the National Study of American Life, and the National Latino and Asian American Study of Mental Health. They have conducted the survey by controlling for racial group, age, education and socioeconomic status to show the lifetime rates. Logistic regressions revealed that even when controlling for demographic variables, women were significantly more likely to meet diagnostic criteria for all the anxiety disorders surveyed with the exception of SAD, for which rates were similar to men (McLean et al., 2011). This has shown that SAD were not affected across the racial groups.

2.3 Gender and Social Anxiety Disorder among Students

Most prior research has shown that there are statistically significant differences between males and females when it comes to social anxiety among university students, in general. Men and women with SAD may have different patterns of impairment at work, and in their social life (Asher, M., et al., 2017) As a result of the gendered role construct, women are more likely than males to suffer from Social Anxiety Disorder (SAD). The fact that there are no statistically significant differences between males and females when it comes to social anxiety disorder is still a subject of controversy. The role of women has emerged as the most significant element in the difference between the genders. According to M. Bagloghu (2018), educational opportunities for women and their increasing role in the society have led women to become more active and thus closed the gap in social anxiety levels between men and women. As for the present study that majority of the sample came from the educational teaching programmes background, a two-way exchange of information between the students and their lecturers is required as part of the educational process. Because students must present their views in front of the class, this has become standard procedure. One research from Turkey, which gathered data from college student respondents and linked it to problem internet use, found results that were incongruent with the findings of the majority of other studies, including this one(M. Bagloglu et al., 2018). Males scored higher than females on a test for social anxiety disorder, according to the findings of the research. As a result, according to M. Bagloglu et al. (2018), women have become more engaged in the community, and the

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difference in social anxiety between men and women has been narrowed as a result of increased educational possibilities for women and their growing position within society.

3.0 METHODOLOGY

3.1 Materials

Research design can be referred to as the outline, plan, or strategy the researchers are going to use to seek the answer of the research questions (Johnson, B., & Christensen, L. B., 2020). This study is using a quantitative method. There is a lot of past research (Hennesy & Patterson, 2019; Johnson & Christensen, 2020; Punch, 2014) has shown that quantitative methods can provide statistical evidence in support of hypotheses. This study was a cross-sectional comparative study using a new data collection, collected via questionnaire. This study was conducted among students in public universities. The simple random sampling was chosen as a sampling technique because it ensures that all units in the population have an equal probability of being selected. Due to the Movement Control Order (MCO), a web-based questionnaire which is Google Form was utilised. A total of 108 students responded to this online survey.

3.2 Methods

The questionnaire was adapted from the Social Anxiety Questionnaire for adults (SAQ-30) (Caballo, V. E., Salazar, I. C., Irurtia, M. J., and Arias, B. 2012). This instrument is the outcome of several years of research in 18 Latin American nations by the research team. This survey comprised 30 questions concerning Social Anxiety Disorder and five questions regarding demographic information. The SAQ identifies five aspects of social situations that are associated with Social Anxiety Disorder. The five dimensions include public speaking or speaking authoritatively to others, interactions with persons of the opposite sex, assertive expressions of displeasure or disinterest, criticism and embarrassment, and encounters with strangers. Each item is rated on a 5-point Likert scale, ranging from 1 (not at all) to 5 (very high). As for the actual data collection, this study uses the same questionnaire from SAQ-30. However, the demographic questions were added. The demographic comprises age, gender, ethnicity, education level and faculty. The online survey was distributed among public university students. As for the data collection, the online questionnaire was distributed through WhatsApp group and student's email. A representative for each public university was sent an email invitation that included a personalised active link to the Google Form. The link will subsequently be forwarded to the students' official university email addresses. A total of 108 respondents were collected successfully. The analysis was based on the 108 questionnaires. The questionnaire was subjected to a reliability test in order to determine the instrument's internal consistency. The SAQ-30 indicated a good value of Cronbach's Alpha as shown in Table 1. After the validity and reliability tests are completed, the data collecting procedure starts. This is to guarantee that the findings of this research are solid and accurate.

Table 1 Reliability Coefficient of Research Instrument

¥7 1. 1.	NIl CT4	Cronbach	Alpha	
Variable	Number of Items	Pre-test $(n=30)$	Actual (<i>n</i> =108)	
Social Anxiety Disorder	30	.910	.940	

4.0 FINDINGS AND DISCUSSION

4.1 Findings

4.1.1 Level of Social Anxiety Disorder

Statistical Package for Social Sciences (SPSS) version 25 was used to analyse the data for this research. Based on the existing literature, hypotheses were developed. The t-test was used to determine if there was a difference in the means of social anxiety disorder across genders, and the frequency test was used to determine the prevalence of social anxiety disorder among university students.

Table 2 Frequency Distribution of Social Anxiety Disorder Level (n=108)

Variable	Freq	Percent	Mean	SD
Level of Social Anxiety Disorder			2.093	.591
Low (1 ± 2.33)	14	13.0		
Moderate (2.34 ± 3.66)	69	63.9		
High (3.67 ± 5)	24	22.2		

The prevalence of social anxiety disorder among the university students is shown in Table 2. The findings revealed that 63.9 percent of students had a moderate level of social anxiety disorder, which is a significant proportion of the total. There are 22.2 percent of students who have a high degree of social anxiety disorder, while the remaining 13 percent have a low level of social anxiety disorder. Based on the findings in Table 2, it can be stated that university students suffer from a moderate degree of social anxiety disorder.

4.1.2 Gender Differences

The frequency distribution of gender for this research is shown in the following table (Table 3). There are 35 male respondents, accounting for 32.4% of the total of 108 students that took part in the survey. The number of female respondents, on the other hand, is 73, accounting for 67.6% of the overall number

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of respondents. According to the result, females made up the vast majority of those who answered the survey's questions.

Table 3 Frequency Distribution of The Respondents Gender(n=108)

Variables	Freq	Percent	
Gender			
Male	35	32.4	
Female	73	67.6	

4.1.3 Social Anxiety Disorder Between Males and Females

According to several studies, there are statistically significant differences in the prevalence of social anxiety disorder between men and women (McLean et al., 2011). As a result, the purpose of this research is to determine the prevalence of social anxiety disorder among university students in higher learning institutions. An Independent Sample T-test was used to compare the prevalence of social anxiety disorder among gender. The Independent Sample T-test is a statistical test that is frequently used to compare the mean of one sample on a measure with the mean of another sample on the same measure (Jankowski, K.R., et al., 2017).

Table 4 Results of Independent T-test (n=108)

Gender	n	Mean	SD	t	$\operatorname{sig-}t(p)$
				431	.726
Male	35	3.223	.680		
Female	73	3.286	.732		

Table 4 summarizes the findings of the Independent Sample T-test. As shown by the t (106) =-.431, p=.726, there was no statistically significant difference in scores between the male (M=3.22, SD=0.67) and female (M=3.28, SD=0.73) conditions. This result shows that there are no statistically significant variations in the prevalence of social anxiety disorder between men and females. Sig-t is also greater than 0.05, indicating that the null hypothesis was failed to reject in this study.

4.2 DISCUSSION

According to a Malaysian study on the levels of anxiety, depression, and quality of life experienced by medical students, 33 percent of students had anxiety symptoms, with 14 percent reporting severe anxiety symptoms. There are extremely small differences in the rate of anxiety across students, and these differences are seen across two different cohorts of students that were randomly chosen. Senior medical students are less nervous than first-year medical students, according to research. This was

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explained by the final-year students' maturity and experience in dealing with presentations and examinations, as well as the abilities they had gained in coping with their curriculum during their first year (Gan & Hue, 2019). According to the findings of this study, the level of anxiety among university students is moderate. Even in non-threatening social settings, such as giving a presentation in front of an audience or in class, students who suffer from social anxiety disorder may have anxiety symptoms. This is due to the fact that the majority of university students from this research are drawn from education faculties and schools, and the majority of students here are pursuing careers as teachers. They are getting more used to speaking in front of an audience. Furthermore, many students are interviewed for jobs as instructors before they enroll to the institution at which they would be working. This means that they must give a presentation or teach in front of the class. Students' levels of social anxiety are thus negligible as a consequence of these factors.

According to the present finding, there is no substantial difference in social anxiety disorder between men and women. According to M. Bagloglu et al., (2018), this is due to the fact that women's growing roles in society have led to them being more active, which has resulted in a narrowing of the disparity between male and female levels of social anxiety disorder. Females are now more educated and less prone to have social anxiety as a result of the improved educational system. Males are equally susceptible to developing social anxiety disorder. There are many variables that may play a role in the development of this disorder. Future developments, such as the rise of technological devices and the addiction to mobile games among male adolescents, may have an impact on this problem (Wang, Sheng & Wang, 2019). There is no statistically significant difference between males and females who suffer from social anxiety disorder.

5.0 CONCLUSION

Recognizing and reconciling the findings of this research are essential steps. It fills in the gaps left by previous studies. After doing a data analysis, the findings revealed that social anxiety exists among university students, with the majority of the findings indicating that the degree is moderate. It is believed that students who have previously completed the first year have had a lot of presenting experience and have thus learned how to deal with the issue. Despite the fact that the majority of the results are moderate. However, the frequency of occurrences in the group of people with a high degree of social anxiety is still a significant quantity that should be emphasized. In this case, it demonstrates that university students are suffering from social anxiety disorder. As a result, in order to discover a solution, it is necessary to disassemble the issue. The findings only demonstrate that university students are experiencing social anxiety, but that the degree of social anxiety has stayed constant and that there is no difference between male and female students. Based on the findings of the t-test, the null hypothesis is found to be insufficiently supported to be rejected. The number of male respondents, on the other hand, is lower when compared to the number of female respondents. Men, who had the least number of responses, have a mean that is likewise high. For the purpose of conclusion, this study is noticing the gap between previous research and itself by revealing surprising findings that are distinct

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from others. However, the social anxiety issue that university students are dealing with must be addressed as soon as possible.

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