EFFECT OF MINDFULNESS BASED COGNITIVE THERAPY ON SOCIAL ANXIETY AND SELF-ESTEEM AMONG YOUNG ADULTS

Jagadesh Chander R*, Kirthika S** & Dr. S. Thenmozhi***

University of Madras, Chepauk, Chennai, Tamil Nadu, India – 600 005
*Ph.D. Research Scholar, Department of Counselling Psychology, University of Madras, Tamil Nadu
**MSc. Student, Department of Counselling Psychology, University of Madras, Tamil Nadu
***Professor, Department of Counselling Psychology, University of Madras, Tamil Nadu

ABSTRACT

Social anxiety is one of the most common psychological disorders experienced in our present time. Due to its prevalence, many studies have investigated social anxiety as one of the most crucial emotional disorders causing several psychological and behavioral problems. People with social anxiety experience fear and uneasiness in social performance and interactional situations, which have a significant negative impact on the various aspects of their life (Alansari, 2004; Muammariyah, 2009). Among many existing approaches, Mindfulness based Cognitive therapy is found to be a non-pharmacologic approach to the treatment of social anxiety and also to increase self-esteem; and its efficacy has been demonstrated in large number of investigations (Hofmann, 2017). The aim of this study is to find the effect of Mindfulness based cognitive therapy on social anxiety and self-esteem among young adults. Correlation research design for the first phase and quasi experimental design for the second phase was used. Using convenience sampling, about 133 young adults were selected for the phase 1 and 30 participants were selected for phase 2 of the study using purposive sampling design. The Social Interaction Anxiety Scale and Rosenberg self-esteem scale were used for data collection through Google forms. The obtained data was analyzed using Pearson’s product moment correlation and results indicated a negative correlation between social anxiety and Self-esteem. Pre-test and post-test scores were analyzed using paired t-test and it was found that Mindfulness based Cognitive therapy had a significant effect on social anxiety and self-esteem. This present study implies that mental health practitioners can use mindfulness based cognitive therapy as an intervention to reduce the level of social anxiety and increase self-esteem among young adults.

Keywords: Mindfulness based cognitive therapy, social anxiety, self-esteem and young adults.
INTRODUCTION

Young adulthood is a critical phase of life, is a period of major physical, physiological, psychological, and behavioral changes with changing patterns of social interactions and relationships. These changes are also accompanied by significant stress on young people and those around them, while influencing and affecting their relationships with their peers and adults. Most young people are presumed to be healthy but, as per WHO (2011), young people are prone to a number of health impacting conditions due to personal choices, environmental influences and lifestyle changes. At least 20 per cent of young people are likely to experience some form of mental illness - such as depression, anxiety, mood disturbances, substance abuse, suicidal behaviors, eating disorders and others.

Data available from community-based studies on common mental disorders in India depict a high prevalence among the young people but comparisons and extrapolations need to be cautiously made due to variations across studies. The prevalence of overall psychiatry morbidity (depression, conduct disorder, social anxiety, panic disorder) among adolescents has varied from 12 to 16.5 per cent.

Among young adults, anxiety is characterized by an unpleasant state of inner turmoil, often accompanied by nervous behavior such as packing back and forth, somatic complaints and rumination. It is the subjectively unpleasant feelings of dread over anticipated events, such as the feeling of imminent death. Individuals higher in social anxiety avert their gazes, show fewer facial expressions, and show difficulty with initiating and maintaining conversation. Trait social anxiety is the stable tendency to experience this nervousness and can be distinguished from state anxiety, which is the momentary response to a particular social stimulus. Nearly 90% of individuals report feeling a form of social anxiety (i.e., shyness) at some point in their lives. Half of the individuals with any social fears meet criteria for social anxiety disorder. The function of social anxiety is to increase arousal and attention to social interactions, inhibit unwanted social behavior and motivate preparation for social situations such as performance situations. Bernstein et al. (2007) found that anxiety was also related to a lack of social skills, learning and attention problems. Social anxiety ranks as the third most common mental health disorder after depression and alcohol abuse (Furmark, 2002). At least one in every ten persons has at some time in their life been affected by social phobia, a phenomenon experienced in almost every culture studied. By adulthood, a large proportion of people acknowledge having experienced at least transient social anxiety on occasion, predominantly regarding public speaking or performing in front of others (Cox et al., 2003; Kessler, Stein & Berglund, 1998). This would impact their self-esteem as well. According to self-esteem expert Morris Rosenberg, self-esteem is quite simply one's attitude toward oneself (1965). An important note is that self-esteem is not fixed. It is malleable and measurable, meaning we can test for and improve upon it.

In addition to other behavioral treatments, mindfulness can be very effective to help with social anxiety and to improve self-esteem. Mindfulness has been shown to be beneficial to treat depression and other mental illness while also helping to prevent relapses. Mindfulness practices allowed people to be more intentionally aware of the present moment, which gave them space to pause before reacting automatically to others. Instead of becoming distressed about rejection or criticism, they stepped back to understand their own automatic reactions to
become more attuned to other’s needs and emotions. Awareness gave them more choices in how to respond, instead of becoming swept up in escalating negative emotion. Participants also reported that they become more assertive in saying no to others in order to lessen their load of responsibility. Allowing them to become more balanced in acknowledging their own as well as other’s needs. The authors speculate that bringing mindful awareness to uncomfortable experiences helped people to approach situations that they would previously avoid, which fostered self-confidence and assertiveness.

In this research, mindfulness based cognitive therapy (MBCT) approach was used. The MBCT was developed as a manualized group skills training program that would address vulnerability between episodes of recurrent major depression (Segal, Williams & Teasdale, 2002; Williams, Teasdale, Segal, & Kabat-Zinn, 2007). It was derived from a model of cognitive vulnerability to depressive relapse (Segal, Williams, Teasdale, & Gemar, 1996; Teasdale, 1988; Teasdale, Segal, & Williams, 1995), according to the model, individuals who have previously experienced episodes of major depression differ from those who have not in the patterns of negative thinking that become activated in mildly depressed moods. There are numerous techniques available in MBCT that includes mindfulness meditation, body scan, the SOBER technique, gentle stretches and breathing exercise in yoga, mindful walking/eating and urge surfing. These techniques were incorporated in the intervention module, developed focusing on the social anxiety and self-esteem among young adults.

NEED FOR THE STUDY

In recent years, there has been a significant increase in social anxiety among young adults. Several studies indicate that social anxiety impacts mental health in a number of ways. The increasing anxiety puts a large number of young adults at an increased risk for feeling anxious, depressed, and lonely. For those with increase social anxiety it was found that there were low levels of self-esteem (Odeh murad, 2020). Mindfulness based cognitive therapy was found to be the most effective therapy for social anxiety and self-esteem. As it changes the negative thoughts that contribute to anxiety, helps to learn new coping strategies and gradually decrease the fear one experiences in social situation and increase the self-esteem. There were only very minimal studies focusing on this topic (Bahareh Jokar, Arezoo Zaremohammadi and Ali Ghanbari, 2021), so this study aims to find out the effectiveness of mindfulness based cognitive therapy on social anxiety and self-esteem among young adults.

REVIEW OF LITERATURE

Results from various studies, investigating the relationship between social anxiety and self-esteem among the young adults stated that there was statistically significant negative correlation between the level of social anxiety and self-esteem among the young adults (Sevim Mustafaa et al. 2021; Sara Ansari et.al 2020; Nandani and Mundada 2020; Odeh Murad 2020; Sajitha 2019; Abu 2014; Hassan and Ali 2014; Shamma 2015).

Evidences on gender difference indicates that self-esteem was high in women than men while level of social anxiety was found to be higher among men as compared to women (Mahmooda, Sadia and Saba 2017; Fatima et al. 2017; Nasreen et al. 2012). These results were contradicted by the findings of Mudasser et al. 2017; Seema and Venkatesh 2017; Alati 2015 who found that social anxiety of female students was high as compared to male students. However, the self-esteem of female students was the same as compared with male students. The study
results were found similar to the results of Shamma (2015), conducted a study about social anxiety in relation to self-esteem among the pupils of the first ring of basic education in Homs, Syria. It recommended training socially anxious pupils on social and emotional skills to adjust their reactions in various social interactions and engaging them in school and social activities to help constitute appositive self-image and increase self-acceptance. Further studies are recommended on a large scale to explore certain other issues to the given variables.

The effect of mindfulness based cognitive therapy (MBCT) on social anxiety being examined in various researches indicated that (Mohsen et al. 2020), Shima, Hamid and Simasadat Noorbakhs (2019), Alessandra et al. (2019), Ezatolah, Simin and Parvaneh (2016), Sheykholeslami, Dortaj, and Eskandar (2016), Baijesh and Ramesh 2015) MBCT was effective in reducing social anxiety among students. Students of experimental group in comparison with control group, in posttest had a significantly less social anxiety. Therefore it was conclude that mindfulness-based cognitive therapy has a significant effect on decrease the social anxiety of students. Implication of this study indicates that MBCT is effective on the decrease of social anxiety. Further MBCT was found producing significant difference in the self-esteem of the participants positively. The secondary outcomes and implications of these studies include that MBCT helps college students learn how to manage adverse emotional states, especially, depression. It also helps improving their quality of life. Bahareh Jokar, Arezoo Zaremohammadi and Ali Ghanbari (2021) found MBCT being effective in improving the self-esteem among the children with Learning disability. Chloe, Daniel and Sandra (2015) had conducted a study in Mindfulness and Self-esteem in a Systematic Review. The main aim of this review was to synthesize and critically appraise studies investigating (i) the association between mindfulness and self-esteem, and (ii) the impact of mindfulness-based interventions (MBIs) on self-esteem. A further aim was to identify priorities for future research. A systematic review was conducted using electronic databases, resulting in 32 studies meeting the inclusion criteria. Fifteen studies explored the association between dispositional mindfulness and self-esteem, and 17 studies investigated change in self-esteem following a MBI. Cross-sectional studies found significant positive correlations between dispositional mindfulness and self-esteem, whilst the majority of MBI studies resulted in significant increases in self-esteem. Studies were quality-assessed which highlighted that these findings should be interpreted with caution due to methodological weaknesses. More robust research is needed to corroborate these findings and to investigate the impact of mindfulness as an intervention for low self-esteem.

**METHOD**

**AIM OF THE STUDY:**

To find the effect of mindfulness based cognitive therapy intervention on social anxiety and self-esteem among young adults.

**OBJECTIVES OF THE STUDY:**

1. To find the level social anxiety and self-esteem among young adults.
2. To understand the relationship between social anxiety and self-esteem among youngadults.
3. To develop an intervention module for mindfulness based cognitive therapy on social anxiety and self-esteem among young adults.
4. To examine the effect of mindfulness based cognitive therapy intervention for young adults.

RESEARCH QUESTIONS:

1. Whether there is any relationship between social anxiety and self-esteem among young adults?
2. Whether mindfulness based cognitive therapy would have an effect on the social anxiety and self-esteem among young adults?

HYPOTHESES:

Hypothesis 1 \( H_1 \): There will be a significant relationship between social anxiety and self-esteem.

Hypothesis 2 \( H_1 \): Mindfulness based cognitive therapy will have a significant effect on social anxiety and self-esteem.

RESEARCH DESIGN

This study will be conducted in two phases.

Phase 1: the study used a correlational research design. It is used to find the relationship between social anxiety and self-esteem among young adults. Survey research was conducted to ascertain the relationship between social anxiety and self-esteem. The participants were given the questionnaire to establish that low self-esteem leads to social anxiety.

Phase 2: In the second phase of the study, researcher was using a quasi-experimental pre-posttest with no control group research design to find the effect of the therapy on the participants. Participants who had moderate scores were included in this phase. This phase included the development of the intervention module as per the needs of the participants and existing literature to examine its effectiveness on the dependent variables. Post-test was conducted after the implementation of intervention to the participant group

SAMPLE DESIGN:

Phase 1: In phase 1, convenience sampling design was used. Participants were selected to meet a certain practical criterion, such as easy accessibility, geographical proximity, availability at a given time, or the willingness to participate were included to investigate the relationship between the variables. Out of the 150 participants who filled out the form, the researcher was able to extract data only from 133 participants due to missing data in the rest of them.

INCLUSION CRITERIA:

*In the first phase of the study,*

- The participants who have aged between 18 – 25 years took part in this study.
- The participants who pursuing undergraduate, postgraduate, working and others were included.

EXCLUSION CRITERIA:

- Participants under Medications.
- The participants with physical impairments, such as vision or hearing impairment.
- History of psychiatric illness, such as depression or other affective disorders.
Phase 2: In phase 2, Purposive sampling design was used. Selected participants were included for the purpose of the study to find the effect of mindfulness based cognitive therapy on social anxiety and self-esteem.

In the second phase of the study,

- The participants who are interpreted to have moderate social anxiety were selected for intervention.

SAMPLE DESCRIPTION

In the first phase of the study, about 133 young adults within the age limit of 18-25 years who were residing in Chennai participated in the study. They were 28.6% male participants and 71.4% female participants. In the second phase of the study, about 30 participants who were interpreted to have moderate social anxiety were selected for intervention.

TOOLS

Socio-demographic data

In the first section, socio-demographic details such as initials, age, gender, place, educational qualification and occupation were obtained from the participants.

Social Interaction Anxiety Scale (1998)

Social anxiety was measured by the Social Interaction Anxiety Scale that has been widely used in prior research (Mattick & Clark, 1998). Respondents were asked to identify their agreement with six statements on a five-point Likert type scale, ranging from 1=Strongly Disagree to 5=Strongly Agree. Sample items include, "I tense up if I meet an acquaintance on the street," and I have difficulty making eye contact with others." Individual scores can be calculated by summing up responses to all 20 questions. Possible scores range from 0 to 80. Higher scores are associated with higher social anxiety. A score of 36 or higher suggests a possible diagnosis for social anxiety or a higher level of anxiety. Prior studies utilizing this questionnaire have shown its validity (Jiang & Ngien, 2020) with a Cronbach's alpha of .82.

Rosenberg’s Self-Esteem Scale (1965)

Rosenberg, 1965 is a 10-items scale that measures global self-worth by measuring both positive and negative feeling about the self. The scale is believed to be unidimensional. All items are answered using a 4-point Likert scales ranging from strongly disagree to strongly agree. The scale ranges from 0 – 30. Scores between 15 and 25 are within normal range; scores below 15 suggest low self-esteem. The Cronbach coefficient has been shown to be high (M = 0.81).

STATISTICAL ANALYSIS

In the analysis of the data, it would be first examined for any missing data. Then the research data would be analyzed using the SPSS program version 24. Descriptive and inferential statistics were used for analysis. Pearson Moment Product Correlation was used to measure the strength of a linear relationship that exists between two variables. Paired t-test was applied to find out the difference between pre-test and post-test scores of the participants to determine the effect of Mindfulness based cognitive therapy on social anxiety and self-esteem.
ETHICAL CONSIDERATIONS:
The participation in the study was voluntary. The researcher presented the need for the study and a brief explanation about the study. Consent of the participants was obtained before they start filling out the Google form. Participants could choose to discontinue therapy at any point of time. The anonymity and confidentiality was ensured and maintained, while informed that therapy sessions would be discussed with the research guide for supervision. All respondents were thanked in advance for participating in the therapy sessions.

INTERVENTION MODULE
The mindfulness based cognitive therapy intervention module used in the study was developed in line with the theoretical tradition of Mindfulness therapy. Each session’s didactic and experiential components were structured around mindfulness and cognitive therapy topic. The intervention module was framed as per the needs of the population and baseline data obtained from the participants. The intervention was held for the participants’ offline for 12 sessions, each session being for about an hour and thirty minutes. Visual aids were also used to support the presentation for the intervention module.

RATIONALE FOR THE INTERVENTION
Research has shown that MBCT is an effective therapy for social anxiety and to improve self-esteem. Mindfulness is a process that leads to a mental state of nonjudgmental awareness of the present experience. This includes one's sensations, thoughts, bodily states, consciousness, and environment. It encourages openness, curiosity, and acceptance. Mindfulness practices demonstrate therapeutic effects on emotional well-being. For this reason, the effect of mindfulness-based cognitive therapy was adopted in treating social anxiety. The following intervention module was proposed by the researcher for this given study.

**Table 4.1 Intervention Module**

<table>
<thead>
<tr>
<th>SESSION</th>
<th>ACTIVITY</th>
<th>TIME</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Rapport building &amp; Introducing basic concepts of MBCT - Breathing exercise</td>
<td>1 hour 30 minutes</td>
</tr>
<tr>
<td>2</td>
<td>MBCT - Body scan</td>
<td>1 hour 30 minutes</td>
</tr>
<tr>
<td>3</td>
<td>MBCT – Mindful listening</td>
<td>1 hours 30 minutes</td>
</tr>
<tr>
<td>4</td>
<td>MBCT – Self-enquiry meditation</td>
<td>1 hour 30 minutes</td>
</tr>
<tr>
<td>5</td>
<td>MBCT – Street technique</td>
<td>1 hour 30 minutes</td>
</tr>
<tr>
<td>6</td>
<td>MBCT – 3-minute breathing technique</td>
<td>1 hour 30 minutes</td>
</tr>
<tr>
<td>7</td>
<td>MBCT – five sense exercise</td>
<td>1 hour 30 minutes</td>
</tr>
<tr>
<td>8</td>
<td>MBCT – Raisin exercise</td>
<td>1 hour 30 minutes</td>
</tr>
<tr>
<td>9</td>
<td>MBCT – mental imagery and loving kindness</td>
<td>1 hour 30 minutes</td>
</tr>
<tr>
<td>10</td>
<td>Mindful seeing</td>
<td>1 hour 30 minutes</td>
</tr>
<tr>
<td>11</td>
<td>Diaphragmatic Breathing</td>
<td>1 hour 30 minutes</td>
</tr>
<tr>
<td>12</td>
<td>Discussing &amp; Feedback of the program – Termination</td>
<td>1 hour</td>
</tr>
</tbody>
</table>
RESULTS

On analyzing the data, the following results were obtained.

Table 5.1 - Demographic data of the participants

<table>
<thead>
<tr>
<th>Gender</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>38</td>
<td>28.6%</td>
</tr>
<tr>
<td>Female</td>
<td>95</td>
<td>71.4%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Education</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergraduate</td>
<td>61</td>
<td>45.9%</td>
</tr>
<tr>
<td>Postgraduate</td>
<td>63</td>
<td>47.4%</td>
</tr>
<tr>
<td>Others</td>
<td>09</td>
<td>6.8%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Age</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-20</td>
<td>39</td>
<td>29.3%</td>
</tr>
<tr>
<td>21-22</td>
<td>71</td>
<td>53.4%</td>
</tr>
<tr>
<td>23-25</td>
<td>23</td>
<td>17.3%</td>
</tr>
</tbody>
</table>

Demographic data table shows that majority of the participants were females (71.4%). About 45.9% of the participants were undergraduates, 47.4% were postgraduates and 6.8% were with other educational qualification. More than half of the participants were between the age group of 21-22, 29.3% participants fall under the age group of 18-20 and 17.3% under the age group of 23-25.

Table 5.2 - Percentage of Social anxiety and self-esteem among young adults

<table>
<thead>
<tr>
<th>Variables</th>
<th>Low</th>
<th>Moderate</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Anxiety</td>
<td>23.57%</td>
<td>52.14%</td>
<td>24.28%</td>
</tr>
<tr>
<td>Self-esteem</td>
<td>17.85%</td>
<td>40.71%</td>
<td>41.42%</td>
</tr>
</tbody>
</table>

From this table, it can be observed that among the participants, the findings on social anxiety reveals that, 33 participants had low social anxiety (23.57%), 73 had moderate social anxiety (52.14%) and 34 had high levels of social anxiety (24.28%). With respect to self-esteem, 25 of the young adults were found with low self-esteem (23.57%), 57 had moderate self-esteem (52.14%) and 58 participants had high level of self-esteem (24.28%).

Table 5.3 - Mean and standard deviation and r value for social anxiety and self-esteem

<table>
<thead>
<tr>
<th>Variables</th>
<th>Mean</th>
<th>SD</th>
<th>r Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Anxiety</td>
<td>57.44</td>
<td>3.299</td>
<td>-0.48**</td>
</tr>
<tr>
<td>Self-esteem</td>
<td>20.47</td>
<td>2.803</td>
<td></td>
</tr>
</tbody>
</table>

**0.05 level of significance

From the table it can be observed that, the mean value for social anxiety (57.44) and self-esteem (20.47) were moderate. Due to the nature of the distribution of the data, parametric test was used. Pearson product moment correlation was used to find the correlation between the variables. From the table it can be observed that, there was a significant negative correlation between the variables, social anxiety and self-esteem (r = - 0.48). Hence hypothesis 1 stating that there would be a significant relationship between social anxiety and self-esteem in young adults was accepted.
PHASE 2:

The participants were selected based on their scores from phase 1 of the study, thirty participants with maximum scores in the moderate category of social anxiety and self-esteem were chosen as the participants for the Mindfulness based cognitive therapy intervention program.

Table 5.4 - Results of paired t test (N=30)

<table>
<thead>
<tr>
<th>Variables</th>
<th>Test</th>
<th>Mean</th>
<th>SD</th>
<th>t</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Anxiety</td>
<td>Pre-test</td>
<td>57.67</td>
<td>3.661</td>
<td>6.837**</td>
</tr>
<tr>
<td></td>
<td>Post-test</td>
<td>56.37</td>
<td>3.608</td>
<td></td>
</tr>
<tr>
<td>Self-esteem</td>
<td>Pre-test</td>
<td>20.47</td>
<td>1.497</td>
<td>5.570**</td>
</tr>
<tr>
<td></td>
<td>Post-test</td>
<td>21.63</td>
<td>1.389</td>
<td></td>
</tr>
</tbody>
</table>

**0.05 level of significance.

From this table it can be indicated that, the mean scores of the participants in social anxiety has reduced from pre-test to post-test, the mean score has reduced from 57.67 to 56.37 and the standard deviation is 3.661, 3.608 respectively. The mean scores of the participants in self-esteem had also improved from pre-test to post-test. The mean score has increased from to 20.47 to 21.63 and the standard deviation is 1.497, 1.389 and the t test is 6.837 for social anxiety and 5.570 for self-esteem respectively. Hence the hypothesis 2 stating that Mindfulness cognitive therapy would have a significant effect social anxiety and self-esteem is accepted.

DISCUSSION

The present study exploring the effect of mindfulness based cognitive therapy intervention on the social anxiety self-esteem of young adults was conducted among 30 participants and the intervention was provided for 12 sessions. Young adulthood, being a unique period, during when the key developmental tasks that allow the young adults to participate in self-exploration and identity formation (Highley.E., 2019) happens. Majority of the population were influenced by factors such as social anxiety and self-esteem at the period. The following discussion aimed at elaborating the tables and results obtained. The demographic details of the participants shows that 133 participants took part in the study, most of them were students who are pursuing their under-graduation (45.9%), post-graduation (47.4%) in college/University. Majority of the participants were experiencing social anxiety at moderate level, indicating the prevalence of social anxiety among young adults in Chennai. Almost 24% of the total population was falling in the range of experiencing low and high social anxiety. Therefore it turns significant to address the issue of social anxiety that majority of the population were experiencing. And the findings on self-esteem revealed that, only 17.85% of the participants were having low self-esteem. The rest of the young adults were found with moderate to high level of self-esteem. Despite experiencing moderate to high level of social anxiety, young adults were found with better self-esteem. Further investigation of the results indicated that self-esteem and social anxiety were negatively correlated. It depicts that people with higher self-esteem had less social anxiety and vice versa. These results were supported by the earlier literature outcomes (Seema G B & Venkatesh Kumar G, 2017). The results of the second phase of the research (intervention phase), proposed that mindfulness based cognitive therapy intervention significantly decreased social anxiety among the young adults.
and improved their self-esteem. These research outcomes were found colliding with the findings of the previous studies (Mohsen Mohammadpour, et. al, 2020; Yabandeh, M.R., et al 2018; Tulbure, B.T., et al 2015 & El Alaoui, S., et al 2015).

FINDINGS

- There exists a significant negative correlation between social anxiety and self-esteem among young adults.
- Mindfulness based Cognitive therapy has a significant effect on reducing social anxiety and improving self-esteem of the young adults.

CONCLUSION

The present study concludes that young adults with high level of self-esteem experience only minimum of social anxiety and vice versa. Further people with poor self-esteem and experiencing high level of social anxiety, can be benefitted using mindfulness based cognitive therapeutic approach. The developed model was found effective in grooming the self of the young adults, reducing their level of anxiety towards facing the public or in addressing the gathering. The intervention implants skills and confidence in the young adults, which would make a difference in their lives.

LIMITATIONS

The following limitations were identified throughout the research process:

- The results of the present study have limited generalizability because of the small sample size.
- The present study had been limited to Chennai city only.
- Inability to carry out the study on larger population due to time constraints.
- Although a change was noted, the sustenance of the effect of the therapy is questionable and the therapy needs to be continued for a longer period for a more significant effect.

IMPLICATIONS

The results of the present study implicate the role of decreasing social anxiety and increasing the self-esteem among young adults. This could help young adults, mental health practitioners and even parents to help their children, friends and others. The module development was tailor made for the population, which makes it much effective and help for policy makers in colleges and other institutions. The results of the study also suggest that mindfulness based cognitive therapy plays an important role in reducing social anxiety and improving self-esteem. The findings warrant more extensive work in the area, with large samples.

RECOMMENDATION FOR FUTURE RESEARCHERS

Based on the limitations mentioned above and the experience of the researcher, the following recommendations are stated for future research:

- A larger sample would be beneficial and could lead to more definite results.
- The intervention for self-esteem and aggression could be used in schools, community centers,
- The activities suggested in this program could be modified to meet the needs of the clients in different settings.
- In addition, the activities of this intervention group could be modified to be used with children, youth and adults with social anxiety and self-esteem issues.
It is recommended to administer the proposed intervention with adolescents in the future, in order to examine the effectiveness of the proposed techniques in increasing self-esteem and reducing social anxiety. Moreover, a follow-up period is recommended for this short-term intervention program.

Whether or not the positive changes in self-esteem, anger regulation have remained through a period in all time.

REFERENCES


Rosenberg BG. Rosenberg self-esteem scale (RSE). 1965;61


