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## Exploring The Association Between Social Anxiety And Mental Well-Being Among College Students.

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**Abstract:** The social anxiety is the prevalent issue which impacts the well-being of the college students. The present study aimed at exploring the relationship between social anxiety and mental well-being among college students. The objective of the study was to identify whether social anxiety impacts the mental well-being of students pursuing higher education. A quantitative research design was employed using standardized psychological tools. The Social Interaction Anxiety Scale (SIAS) and the Warwick-Edinburgh Mental Well-Being Scale (WEMWBS) were used to assess social anxiety and mental well-being, respectively. A sample of 130 college students who was selected through a convenient sampling method. The data was statistically analysed using Pearson's correlation method and t-test. The findings of the study revealed a significant negative correlation between social anxiety and mental well-being among college students. This indicates that higher levels of social anxiety are associated with lower levels of mental well-being. The implications include curriculum making for well-being and early assessment of social anxiety of the student.

**Keywords:** Social Anxiety, Mental Well-Being, Anxiety, Psychological Health

### I. INTRODUCTION

#### Social Anxiety:

The social anxiety, which was also known as social phobia, is a strong and enduring fear of being judged or assessed in social settings. When someone anticipate or experience circumstances where they might be the center of attention, people with social anxiety feel extremely uncomfortable out of fear of being judged negatively or humiliated (American Psychiatric Association, 2013). In contrast to ordinary anxiousness, social anxiety was a persistent worry that can make it difficult for a person to interact with others in social situations. This disorder can influence the person's personal, academic, and professional facets of life and which was frequently goes beyond simple shyness (Kashdan et al., 2013).

The Physical symptoms of the social anxiety when they are in stressful situation includes sweating, shaking, a fast heartbeat, and dry mouth. These reactions can exacerbate the anxiety of receiving unfavorable criticism and make social interactions extremely uncomfortable (Heimberg et al., 2014). As a result, people rapidly avoid social situations or limit their connections and interactions, which can result in social isolation and sadness (Spence, 2003).

A mistaken perspective of social settings might result from social anxiety, which is not just about engaging in social situations but also about anticipating bad evaluations from others (Clark & Wells, 1995).

People who are impacted may worry about how others perceive them based on their words, conduct, or appearance; they constantly dread rejection or embarrassment. People with chronic anxiety will have a lower quality of life since they will miss out on chances for social engagement, personal development, and connection (Beck et al., 2005).

Genetic, environmental, and cognitive factors can all contribute to social anxiety. Previous unpleasant social experiences, like friend bullying or humiliation, can also contribute to the start of social anxiety disorder, making some people more likely to develop it (Hofmann et al., 2012). Social anxiety frequently results in cognitive distortions that feed the cycle of dread and avoidance, such as catastrophizing social situations or assuming the worst (Kashdan et al., 2013).

According to cognitive behavioral therapy, or CBT, these cognitive distortions cause maladaptive actions like social situation avoidance, which heighten anxiety. Those who engage in avoidance activities, such as skipping parties or public speaking, deprive themselves of opportunities to learn that their anxieties were unjustified (Beck et al., 2005). People find it more difficult to interact with others in social circumstances on a daily basis as a result of this cycle of negative thinking and avoidance. According to the biology explanation of social anxiety, the illness is influenced by both neurological and hereditary variables. There may be a hereditary component to social anxiety, as some studies have found that it tends to run in families (Stein et al., 2002). Studies have also found that imbalances in neurotransmitters, such as serotonin, may be involved in the regulation of anxiety and fear responses (Bandelow et al., 2007).

For social anxiety disorder (SAD), cognitive behavioral therapy (CBT) is one of the most researched and effective therapies. The goal of cognitive behavioral therapy (CBT) is to recognize and address the negative ideas and cognitive distortions that contribute to anxiety. Individuals who suffer from social anxiety frequently think negatively and automatically, such as anticipating rejection or embarrassment in social settings (Beck et al., 2005). Through evidence-based techniques, CBT encourages people to identify and confront these illogical thoughts in an effort to reframe them.

## **Mental Well-Being**

A state of mental well-being that allows people to manage life's stressors, reach their full potential, learn and work effectively, and give back to their community is known as mental health. It is a crucial aspect of health and wellbeing that supports both our individual and group capacities for decision-making, interpersonal interaction, and societal influence. Mental well-being is a fundamental human right. Furthermore, it is essential to socioeconomic, communal, and individual growth. There is more to mental wellness than just the lack of mental illnesses. It falls on a complicated spectrum that is experienced differently by each individual, with differing levels of distress and difficulties as well as possibly highly disparate social and clinical results.

Three primary components are identified by the Keyes' Model of Mental Well-Being: social, psychological, and emotional well-being (Keyes, 2002). Happiness, joy, satisfaction, and other positive emotions are examples of emotional well-being. Strong emotional well-being also results in the ability to control unpleasant emotions, such as tension and grief, so that they don't become incapacitating. Maintaining a sense of purpose and autonomy in life, being able to grow individually, and accepting oneself are all components of psychological well-being. Developing solid, sustaining relationships and feeling a part of a community are essential components of social well-being. People that are socially well are able to feel connected to others and depend on them for support.

The mental health influences not only a people's emotions and feelings but also their physical health. Strong state of mental health has been linked to a lower risk of developing chronic illnesses including diabetes and heart disease, and improved ability to manage physical health concerns (Ryff et al., 2006). People who can effectively manage stress are better able to make decisions effectively, being more resilient, and have better emotional control. Healthy relationships, consistent exercise, and long-term health-promoting lifestyle are more prevalent among mentally healthy people.

The broaden-and-build theory of positive emotions was introduced by Fredrickson (2001) in her research paper "The Role of Positive Emotions in Positive Psychology." She investigated how happiness, contentment, etc., affect emotional health using a sample of 400 people. By expanding people's thought-action repertoires and increasing the development of personal resources like social connections and resilience and also this study discovered that pleasant emotions are essential for emotional well-being. This, in turn, enhances

long-term emotional health (Fredrickson, 2001). Thus, long-term emotional well-being is improved (Fredrickson, 2001). Uchino et al. (2001) investigated the role of social support in enhancing emotional well-being in their study "Social Support and Physical Health: Understanding the Health Consequences of Relationships." The sample consists of 600 adults who completed surveys assessing social support and emotional health. The study found that individuals with higher levels of social support reported better emotional health, less anxiety, and fewer symptoms of depression. The findings stressed the social relationship playing a important role in fostering emotional well-being (Uchino et al., 2001).

In the study "The Science of Well-Being: Theories and Research on the Role of Emotional Well-Being," by Ryff and Singer (2008) which focused on the idea of psychological well-being. They measured psychological well-being using surveys and interviews with a sample of 1,000 adults, emphasizing aspects like autonomy, pleasant relationships with others, and life purpose.

## II. RESEARCH METHODOLOGY

### Aim:

To examine the relationship between social anxiety and mental well-being among college students.

### Objectives:

- To assess the relationship between social anxiety and mental well-being in college students.
- To analyse the gender difference in social anxiety and emotional wellbeing.

### Hypotheses:

- H<sub>0</sub>: There will be no significant relationship between social anxiety and mental well-being among college students.
- H<sub>1</sub>: There will be a significant relationship social anxiety and mental well-being among college students.
- H<sub>2</sub>: There will be a significant gender differences in Social Anxiety and Emotional Well-being.

### Research Design:

This study employs a quantitative research design using a correlational method to assess the relationship between social anxiety and mental well-being.

### Population and Sampling:

The sample for this study was college students. In this study 130 students participated aged between 18 to 25 years. The students data was collected using convenience sampling.

### Inclusion Criteria:

- Undergraduate students.
- Aged between 18 and 25 years.

### Exclusion Criteria:

- Students with serious psychiatric conditions.
- Students who are pursuing degree in distance mode.

### Data Collection Tools:

#### Liebowitz Social Anxiety Scale (LSAS)

The Liebowitz Social Anxiety Scale (LSAS) is a 24-item questionnaire which assess fear and avoidance in social situations. It is a 4-point scale (0 = None to 3 = Severe), with higher scores indicating more severe social anxiety. The LSAS has excellent internal consistency, with a Cronbach's alpha of 0.93 for the total scale. It demonstrates strong construct validity.

## Warwick-Edinburgh Mental Well-Being Scale (WEMWBS)

The WEMWBS is a 14-item scale measuring positive mental well-being, including emotional and psychological well-being. It is a 5-point scale (1 = None of the time to 5 = All of the time). The scale exhibits high internal consistency (Cronbach's  $\alpha = 0.89$ ) and good test-retest reliability ( $r = 0.83$ ). It has strong construct validity.

### Demographic Questionnaire:

A brief demographic form will collect essential information such as age, gender, and year of study to control for potential confounding factors.

### Procedure of the Study:

Using both online (Google Forms) and offline (in-person) approaches, convenience sampling from different colleges and academic streams was used to conduct this study. A brief description of the study's goals, methods, confidentiality, and participants' freedom to discontinue participation was given to each one. All participants gave their informed consent. The Liebowitz Social Anxiety Scale (LSAS) was used to gauge social anxiety, the Warwick-Edinburgh Mental Well-Being Scale (WEMWBS) was used to gauge mental health, and a demographic survey was used to collect baseline data. The survey took roughly 15 to 20 minutes to complete in total. Following collection, SPSS was used to score and statistically evaluate the responses. Descriptive statistics were calculated to understand the distribution of scores, while Pearson's correlation and independent samples t-tests were used. The discussion and conclusions are drawn.

### Statistical Analysis:

- **Descriptive Statistics:** Descriptive statistics (mean, standard deviation, frequency distribution) will be computed for both social anxiety and mental well-being scores to describe the sample.
- **Pearson's Correlation:** Pearson's correlation coefficient will be used to assess the strength and direction of the relationship between social anxiety (measured by LSAS) and mental well-being (measured by WEMWBS).
- **Independent Samples T-test:** An independent samples T-test will be conducted to examine gender differences in both social anxiety and mental well-being.

## III. RESULTS AND DISCUSSION

**Table 1: Age Distribution of Participants (N = 130)**

Age Group (Years)	Frequency (n)	Percentage (%)
18-20	45	34.6%
21-23	60	46.2%
24-25	25	19.2%

Table 1 resulted the age distribution of the participants. 34.6% of participants fall within 18-20 age range early undergraduate students, 46.2% are fall under 21-23 age group higher education and 19.2% fall under the category of 24-25 age group final year post graduate students.

**Table 2: Pearson's Correlation Between Social Anxiety and Mental Well-Being**

Variable	Social Anxiety (LSAS)	Mental Well-Being (WEMWBS)
Social Anxiety (LSAS)	1.00	-0.560**
Mental Well-Being (WEMWBS)	-0.560**	1.00

\*\*Correlation is significant at the 0.01 level

Table 2 provide The Pearson correlation coefficient between social anxiety and mental well-being was  $r = -0.560$ , which was statistically significant ( $p < .001$ ) This show that higher level of social anxiety were significantly correlated with lower levels of mental well-being



**Table 3: Independent Samples t-Test for Gender Differences in Social Anxiety and Mental Well-Being**

Variable	t-value	df	p-value	Mean Difference (M <sub>1</sub> - M <sub>2</sub> )	95% Confidence Interval
<b>Social Anxiety (LSAS)</b>	1.28	128	0.20	3.82	(-2.31, 9.95)
<b>Mental Well-Being (WEMWBS)</b>	2.52*	128	0.01	-4.15	(-7.32, -1.14)

\* Indicates the significance at the 0.05 level.

Table 3 provide there is no gender difference in social anxiety  $t=1.28$ , but there is a significant gender difference in mental well-being  $t=2.52$ , where female show lower level of mental wellbeing compare with male.  $p=0.01$ .

## DISCUSSION:

Table 1 discusses that large group of participants 46.2% are fall under 21-23 age group higher education show where academic and social pressure at peak. 34.6% of participants fall within 18-20 age range and 19.2% fall under the category of 24-25 age group allow to get insights into how social anxiety may develop through their academic year. Table 2 indicate there is nearly equal distribution of male 50% and female 47.7% samples with small proportion of other 2.3% prefer not to disclose their gender. Gender plays an significant role in social anxiety and mental wellbeing.

Table 2 highlights the Pearson's correlation between social anxiety and mental well-being. It resulted negative correlation between two variables, show higher levels of social anxiety and lower levels of mental wellbeing. This correlation is moderately in strength, while there is a relationship between social anxiety and mental well-being, but other factors like coping mechanism, social support, academic stressors play an role

Table 3 present a t-test comparison gender difference in mental well-being. The mean score for female is 29.56, is significantly low when compare to the mean score male (33.71). The t-value of 2.52 and the p-value of 0.01 indicate that the difference is statistically significant. This result suggests that female shows lower level of mental well-being compared to males. There are many factors that contributes to the lower score like societal pressure, gender norms, physical appearance, social roles and academic performance.

## IV. CONCLUSION:

This study shows the relationship between social anxiety and mental well-being among college students. By using the qualitative approach the study found significant negative correlation between social anxiety and mental well-being. Gender differences were note with female shows higher level of social anxiety. The finding denotes the importance of addressing social anxiety among college students. And intervention such as counselling, peer support. This finding are aligned with existing literature that female in the context of social anxiety, lead to experience higher level of emotional distress. The study suggested need for mental health supports in college campus. It will be useful for the students to get professional supports to cope up from the social anxiety and other emotional consequences. It is really hard to recognize the negative impact of mental well-being but this support the students for those who are affected. Early intervention will help to enhance the students emotional well-being and academic success.

## IMPLICATIONS:

1. In universities or colleges, the faculties can introduce mindfulness and other relaxing practices to improve their learning.
2. This will help the management to enhance the mental well-being through many programmes.
3. Screening students with social anxiety may help them to get rid of the social anxiety earlier.

## LIMITATIONS:

- The study was limited to college students, which will not represent other age groups or populations outside academic area.
- The study did not explore the underlying factors, such as cultural or social influences.
- The study was limited to minimum number of participants, for large population the results may vary.

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