# Perceived Causes of Social Anxiety among In-school Adolescents in Zaria Metropolis: Implication for Counselling

### Salman Abdulwahab ADISA

Department of Educational Psychology & Counselling, Faculty of Education, Ahmadu Bello University (A.B.U.), Zaria, Nigeria saladisa@yahoo.com

### **Hameed Popoola AMINU**

Correspondent Address: Department of Educational Psychology & Counselling, Faculty of Education, Ahmadu Bello University (A.B.U.), Zaria, Nigeria hammedpopoola@gmail.com

### Lasiele Alabi YAHAYA

Department of Counsellor Education, Faculty of Education, University of Ilorin, Ilorin, Nigeria &

#### Oluwakemi Sadiat BELLO

Department of Counsellor Education, Faculty of Education, University of Ilorin, Ilorin, Nigeria

#### Abstract

Social anxiety is recognized as one of life-threatening psychological problems that human beings may experience in life and it can affect anybody. This study investigated perceived causes of social anxiety among in-school adolescents in Zaria metropolis, Kaduna State. Descriptive survey design was adopted for this study and proportional, stratified and simple random sampling techniques were adopted to draw a total number of 384 among in-school adolescents in Zaria metropolis, Kaduna State. A questionnaire titled "Causes of Social Anxiety Questionnaire (CSAQ)" was used to collect relevant data from the respondents. The instrument was subjected to face validity among experts in the field counselling. More so, test re-test method was used for its reliability and a coefficient of 0.68 was achieved. Hypotheses were tested using t-test statistics at 0.05 level of significance. Frequency count and percentage was used to present the demographic data. The findings of the study revealed that the major causes of social anxiety among inschool adolescents in Zaria metropolis, Kaduna State are poor social adjustment (that is; lack of requisite social skills or social competence), negative self-evaluation in social situation and high genetic social anxiety vulnerability index. The hypotheses tested revealed that both gender and home background have significant influence in the perceptions of the respondents on the causes of social anxiety, while religion has no significant influence. Based on the findings of this study some recommendations were made.

**Key Words:** Perception, Social anxiety, In-school Adolescents, Undergraduates.

### Introduction

The term social anxiety has evolved over the years with a myriad of definition from different authorities, scholars, researchers and academics with more emerging facts about the concept. Empirical studies have come up with a handful of information of what could have been the responsible factors for this debilitating experience among the people from time to time. Students' lives however are full of social interactions from their home fronts to their school environments and the larger society. In-school adolescents are undoubtedly prone to social anxiety experience from unavoidable interactions which they encounter on daily basis, with significant individuals such as their classmates, peers, teachers, non-academic staff among other significant people around them, with different social demands and expectations that could lead to both positive and negative social consequences in their lives.

Social anxiety is one of life-threatening problems that human beings may experience in their every day's activities. Social anxiety may therefore affect any category of people, such as children, adolescents as well as adults individuals and besides, its ravaging effects know no bound across culture, religion and political affinity. Moreover, a persistent social anxiety may lead to a painful and disabling social condition. Despite the affordable and effective modern psychotherapies, social anxiety seems still prevailing among students. The phenomenon of social anxiety remains a different experience this depends solely on the type and causes, but across the board it basically means a debilitating condition or discomfort that social interaction causes in the life an individual. Social anxiety therefore, has gained different definitions from scholars, authorities and researchers based on their personal orientations concerning the concept. For instance, Yahaya and Nyarko-Sampson (2016) defined the word social anxiety as a fear that is manifested from a social situation when the individual involves is going to be judged or evaluated by others. Sultana, Shirin and Islam (2017) defined social anxiety as an illogical, chronic and intense fear in social situation, or a discomfort and inhibition feeling of a person arises from the perception that one may be the centre of attention and evaluation of other in a given social context.

Colman (2003) in his authored Oxford Dictionary of Psychology, used the term social phobia which means the same thing with social anxiety, as a disorder that is

characterized by a phobia of scrutiny by others or of being the focus of attention in social situations involving strangers. Exposure to such social situations that generate anxiety could make individual behave in an embarrassing or humiliating way, or triggers a panic attack in him. Such panic reaction is recognized in the affected person in some excessive or irrational fear. It may become an avoidance behaviour or anxious behaviours among other things. Social anxiety may therefore, interfere significantly with everyday life activities, such as occupational or academic performance, or social relationships of the affected persons when it is left untreated.

According to American Psychiatric Association (2013), social anxiety is a condition that is characterized by an intense fear of negative evaluation from others, a chronic concern and pervasive self-doubt about one's ability to accomplish in the context of social and performance situations. Social anxiety remains an excessive fear that individuals do expresses in a given social situation which brings about negative effects to their personal-social life. However, a socially anxious person tends to be hyper-critical about their mistakes in a given social condition. Such an individual shows more signs of apprehension, confusion and self-doubt during a particular social performance. Social anxiety can be experienced by an individual either in a real-life situation, or an imagined social condition. Topham and Russel (2012) argued further that the kind of apprehension that individuals do experience while meeting unknown faces for the first time, cannot be categorized as social anxiety, because such experience is common to many people and perhaps, such fear could represent an innate sensitivity to reality of harm that an unknown person can bring to us. Anxiety therefore becomes a problem when an individual under social situation still experiences an intense fear when it becomes glaring that the person around has no harm to cause.

The definite cause of social anxiety is still a mirage. Therefore, a number of reasons could be adduced for why people could express behaviours that could describe them as anxious persons at any given point in time. A child's social life, which begins with his immediate family, progresses outwardly through relationships with significant others such as peers, teachers and so on in and outside the school and in their neighbourhood. However, it is very important that the adolescents are being accepted by their peers even more than their parents (Megolsa, 2005). The hope for success lies on

how well such an individual enjoys the supports of all significant others around him/her for self-actualization and social development. Moreover, any compromise at any stage of life could spell doom for his/her personal growth which in turn, could jeopardize the growth of the society that he/she belongs to.

Social anxiety is quite common among the youths and adolescents with predisposing factors that are different from one person to person (Smith, 2014). Hence, there is no singular causal factor that anyone may pin-point as a sole cause of social anxiety in an individual. Researchers are increasingly becoming interested in explaining how social anxiety develops in individuals. Giving an account of the way abnormal behaviour such as anxiety, schizophrenia and depression emanate in humans has become a matter of considering many interrelated factors. These are otherwise referred to as models of psychopathology and they include moral model, biogenic model, psychoanalytic model, socio-cultural model and humanistic model (Akume, Igbo & Tor-Anyiin, 2008). Furthermore, a number of factors have been found instrumental to the development of problematic social anxiety in students and may include peer and parental rejection, parenting characteristics and personal factors. On the broader level, the causal factors can be categorized into environmental and biological or genetic factors from which other categories can be evolved. Social phobia sometimes runs in families, but no one knows exactly for why some people have it, while others are not. When chemicals in the brain are not at a certain level it can cause a person to have social anxiety/phobia. That is why medications often help with the symptoms because they help the brain chemicals stay at the correct levels.

Brook and Schmidt (2008) maintained that no single mechanism seems to account for the scenario of social anxiety development and experience in an individual and this has made it difficult to form a theoretical framework for the better understanding of this mental illness. However, taking into cognizance the complexity of risk factors that are believed to play a role, a school of thought links biological, psychological and environmental factors into a diathesis-stress paradigm which may represent the etiology of social anxiety (Brook & Schmidt, 2008). The above authors also contested that this model advances four distinctive areas of contribution to the development of social anxiety; these include genetic and temperament factors, cognitive aspect, parent-child

interactions and adverse environments, combined with societal and cultural influences that are bound around. All these put together, makes a developmental psychopathology perspective which lays emphasis on the relationship between the risk and vulnerability factors in connection with protective mechanisms available to a developing individual.

In another empirical work that was carried out on social anxiety, Nordgvist (2018) listed seven predisposing factors that may pull individuals into the menace of social anxiety. These include:

- 1. Gender: Social anxiety is found to be common in female children than their male counterparts and this may be as a result of feminine related factors in a female child.
- 2. Nurture: Some people are found being socially anxious as result of the way they are being nurtured. Experts are of the opinion that there may be link between the disorder and over protective parenting.
- Genetics: If a person's parents or sibling has the condition his/her risk of developing it is higher compared to other people whose relations have not experience the same condition in the past.
- 4. Some life experiences: Children who have had experience of bullying, ridicule, humiliation and rejection, sexual abuse, family conflict and other related negative or scary experiences are said to be more prone to social anxiety compared to their counterparts who have not had such experiences.
- 5. Individual's personality: Children who are withdrawn, restrained, shy or timid when confronted with new situation are thought to be more susceptible to social anxiety.
- 6. A demanding ordeal: Some individuals may have experienced social anxiety for the first time when they have to make an important presentation. For instance, actors might experience stage fright while on stage to perform an action or play a particular role.
- 7. Weather and demographics: Mediterranean countries have found to have lower rate of social anxiety compared to Scandinavian countries. This may be due to warmer weather as well as higher population density that favoured the Mediterranean countries. Warmer weather may reduce avoidance syndrome and

increase interpersonal contact. Other findings suggest that the factors may be as a result of cultural influences.

Going by the most recent available records of the epidemiological data it is more evident that social anxiety like many other mental health conditions, are likely to arise from a complex interaction of biological, psychological and environmental influences of which researches are still ongoing whether one factor has influence than another for the development of social anxiety in an individual. The unsatisfactory reasons given by people in the past on why some people are being prone to behavioural problem like social anxiety, and in a quest to advance a more acceptable reason, could have led to series of models that have emerged on social anxiety such as psychoanalysis, humanism and behaviourism among others.

In the past, psychologists have used bio-psychosocial model to give detailed account on the causes of social anxiety among people. Bio-psychosocial model proposes that there are multiple and inter-related causes of pathological anxiety in an individual which are being categorized into three main groups, according to Jacofsky, Santos, Khemlani-Patel and Neziroglu (2013), as: (1) the biological causes (2) the psychological causes and (3) the environmental causes. The above authors stressed further that the biological aspect refers to the body's physiological, adaptive responses to fear, genetic traits, the brain functioning inherited in individual, more specifically what is being passed from the parents to their offspring, this connotes genetic vulnerability and it is expressed in some personality type. This personality type of an individual defines him/her in a certain way such as a person who is more or less reactive, more or less sensitive, and more or less excitable in the presence of stress.

The psychological aspect of social anxiety disorder is peculiar to beliefs and thoughts, the perceptions of an individual about him/herself, his personal experiences about the world around him, and environment. These cognitive patterns could affect how people perceive, assess and interpret events in their immediate environment. Lastly, the social component of the bio-psychosocial model refers to environmental factors that may trigger, shape and strengthen the biological and psychological vulnerability of an individual. The responsible factors under this component may be the family, the school, peer group members, and so on and so forth.

Social interaction is unarguably compulsory for human existence, and as such nobody is indeed complete in himself or herself without the influence of other people. School is such a place where this social interaction is very inevitable and where the tendency of being criticized or evaluated by others is somewhat inescapable as this is even regarded as impetus for future successes in a formal education system, this therefore makes every student to be at risk of or susceptible to social anxiety. The unhealthy nature of behaviour of many students in the face of social activity in Nigeria has become a great concern to some stakeholders in education sector and Kaduna State cannot be an exception. Many secondary school students in Kaduna State are indeed socially incompetent. In teaching and learning situation, students who exhibit social anxiety behaviour may experience low academic achievement and behaviour deficits in certain social functions, as result there need for getting into the root causes of the problem. From the review of related literature, it evident that there is paucity of empirical studies on the causes of social anxiety among secondary school students in Zaria metropolis, hence the need for the present study which investigated perceived causes of social anxiety among secondary school students in Zaria metropolis.

### **Purpose of the Study**

The purpose of this study is to:

- i. determine the perceived causes of social anxiety among in-school adolescents in Zaria metropolis, Kaduna State.
- determined the difference in the perceived causes of social anxiety among inschool adolescents in Zaria metropolis, Kaduna State, on the basis of gender, religion, home background.

### **Research Question**

The following research question was raised to guide the conduct of this study:

1. What are the perceived causes of social anxiety among in-school adolescents in Zaria metropolis, Kaduna State?

## **Research Hypotheses**

Ho<sub>1</sub>: There is no significant difference in the perceived causes of social anxiety among in-school adolescents in Zaria metropolis, Kaduna State, on the basis of gender.

Ho<sub>2</sub>: There is no significant difference in the perceived causes of social anxiety among in-school adolescents in Zaria metropolis, Kaduna State, on the basis of religion.

Ho<sub>3</sub>: There is no significant difference in the perceived causes of social anxiety among in-school adolescents in Zaria metropolis, Kaduna State, on the basis of home background.

## Methodology

Descriptive survey design was adopted for the conduct of this study. A survey is considered suitable for the research as it sampled the opinion of respondents on the causes of social anxiety based on personal experiences. The population of this study comprises all the public secondary school students in Zaria Metropolis, Kaduna State, Nigeria which was estimated at about nine thousand, five hundred and forty-six 9,546, while the target population which comprises all the SS2 secondary school students in Zaria metropolis, Kaduna State, Nigeria was estimated at one thousand, nine hundred and ninety-one (1,991) (Zaria Zonal Education Office, 2021). Based on the population size, the sample size for this study comprises three hundred and eight-four students (384) (Research Advisor, 2006). The respondents were proportionally selected based on the contribution of each selected schools to the target population of the study. Finally, the respondents were randomly selected from the five selected schools that participated in the study.

A questionnaire tagged "Causes of Social Anxiety Questionnaires (CSAQ)" was used to collect relevant data for this study. The questionnaire consists of 2 distinctive sections, that is; sections A and B. Section A focused on the demographic data of the respondents; while section B consisted of twenty (20) relevant items on the causes of social anxiety. The researchers used Four Point Likert-Type Rating Scale format to score each item on the instrument for each categorization and data analysis. The rating was in the following order: Strongly Agreed (SA) = 4, Agreed (A) =3, Disagreed (D) =2, Strongly Disagreed (SD) =1. To establish the validity of this instrument, drafted copies

were submitted to four seasoned Lecturers in the fields of Counselling and Psychology for vetting and consequently, necessary corrections were made. The test re-test reliability index of 0.68 was obtained on the questionnaire. The data collected were analysed using percentage, mean scores and independent t-test statistics; all hypotheses were tested at 0.05 level of significance.

### Results

The data obtained were analysed using frequency counts and percentage, mean and rank order for descriptive data while independent t-test statistics was used to test the three null hypotheses formulated in the study.

Table 1: Distribution of Respondents Based on their Gender, Religion and Home Background.

C/NT	Dackground.		D 4 (0/)
S/N	Variables	Frequency	Percentages (%)
1.	Gender		
	Male	241	63.0
	Female	143	37.0
	Total	384	100.0
2.	Religion		
	Christianity	138	36.0
	Islam	246	64.0
	Total	384	100.0
3.	<b>Home Background</b>		
	Intact	208	54.0
	Divorced	176	46.0
	Total	384	100.0

Table 1 presents the distribution of respondents based on their gender, religious affiliation and home background. The total number of 384 respondents comprises both male and female students participated in this study. 241 (63.0%) of the respondents were male, while 143 (37.0%) were female respondents. Concerning the religion of the participants, only Christianity and Islam were practiced by the participants of the study upon analysis of the data collected for the study. From the data analysis, 138 (36.0%) participants were from Christianity religious background while 246 (64.0%) participants were Muslim. On the respondents' home background, 208 (54.0%) were from intact home while 176 (64.0%) students were from broken homes.

**Research Question 1:** What are the perceived causes of social anxiety among in-school adolescents in Zaria metropolis, Kaduna State?

Table 2: Mean and Rank Order of Respondents' Perception on Causes of Social Anxiety

S/N	Items	Mean	Rank
5	Poor social adjustment (i.e., lack of requisite social skills or	3.64	1 <sup>st</sup>
	social competence)		
7	Negative self-evaluation in a social situation (i.e., under	3.62	$2^{\text{nd}}$
	estimation of self-ability)		
4	High genetic social anxiety vulnerability index (i.e., family	3.58	$3^{\rm rd}$
	history)		
2	Aggression/Temperament behaviour	3.55	$4^{th}$
14	Poor self-preparation (e.g., inability to speak simple English)	3.34	5 <sup>th</sup>
1	Bullying experience	3.32	$6^{th}$
3	Peer rejection	3.28	$7^{\mathrm{th}}$
6	Early childhood experience e.g., sexual/physical abuse	3.26	$8^{th}$
16	Poor self-esteem/self confidence	3.20	$8^{th}$
10	Over protective parenting	3.18	$10^{\rm th}$
20	Lack of role model/counselling-based assistances	3.10	$11^{\rm th}$
12	Negative environmental influence (e.g.,) harsh weather	3.08	$12^{th}$
19	Over demanding task	3.04	$13^{\rm th}$
9	Parental rejection	2.96	$14^{ m th}$
15	Excessive exposure to gender-based violence	2.88	$15^{\rm th}$
11	Stressful life experience (e.g., lack of support)	2.84	16 <sup>th</sup>
18	Extreme poverty/indigence	2.80	$17^{\rm th}$
13	Physical disability/impairment	2.78	$18^{th}$
8	Introverted personality (shyness)	2.64	19 <sup>th</sup>
17	High social expectation	2.55	$20^{th}$

The table 2 shows the mean and rank order of items on the perceived causes of social anxiety among in-school adolescents in Zaria metropolis, Kaduna State. There are twenty items altogether on the (CSAQ) questionnaire. Item 5 with a mean score of 3.64 which stated that "poor social adjustment" was ranked first. Item 7 with a mean score of 3.62 and with the statement "negative self-evaluation" was ranked second on the rank table, while item 4 with a mean score of 3.58 which was structured as "high genetic vulnerability index" was ranked third respectively. On the other hand, items 13 with a mean score 2.78 with item which stated that "physical disability/impairment" was ranked eighteenth, while item 8 with a mean score 2.64, with a statement "introverted personality

(shyness)" was ranked nineteenth and lastly, item 17 with a mean score of 2.55 with an item that reads thus; "high social expectation" was ranked twentieth respectively on the rank order table. From the above table analysis, it is clear that all the twenty items were positively responded to by the respondents. The top three most highly responded to items are the items; 5,7 and 4. On the other hand, items 13, 8 and 17 make the least responded to items, and they were ranked 18<sup>th</sup>, 19<sup>th</sup> and 20<sup>th</sup> respectively.

### **Hypotheses Testing**

**Hypothesis One:** There is no significant difference in the perceived causes of social anxiety among in-school adolescents in Zaria metropolis, Kaduna State, on the basis of gender.

Table 3: Summary of t-test results showing difference in the perception of social anxiety among the in-school adolescents on the basis of gender

Gender	N	Mean	SD	df	Cal.	Crit. t	p-value
Male	241	10287.50	18.20				
				386	2.15	1.96	0.001
Female	143	6484.40	12.40				

Table 3 shows that the calculated t- value of 2.15 is greater than the critical t-value of 1.96 at the degree of freedom of 386, with a corresponding p-value of 0.001 which is less than the significance value of 0.05. This result indicated that there is significant difference in the perception of social anxiety among the in-school adolescents in Zaria metropolis, Kaduna State, on the basis of gender. Hence, the null hypothesis which stated that there is no significant difference in the perception of social anxiety among the in-school adolescents in Zaria metropolis, Kaduna State, on the basis of gender is rejected. This implies that gender has influence on the perception of social anxiety among in-school adolescents as the perceptions of male and female respondents were significantly differ on the subject matter.

**Hypothesis Two:** There is no significant difference in the perceived causes of social anxiety among in-school adolescents in Zaria metropolis, Kaduna State, on the basis of religious affiliation.

Table 4: Summary of t-test results showing difference in the perception of social anxiety among the in-school adolescents on the basis of religious affiliation

Religion	N	Mean	SD	df	Cal.	Crit. t	p-value
Christianity	138	7566.26	8.45				
				386	1.24	1.96	0.241
Islam	246	12484.48	10.52				

Table 4 shows that the calculated t- value of 1.24 is less than the critical t-value of 1.96 at the degree of freedom of 386, with a corresponding p-value of 0.241 which is greater than the significance value of 0.05. This result indicated that there is no significant difference in the perception of social anxiety among the in-school adolescents in Zaria metropolis, Kaduna State, on the basis of religious affiliation. Hence, the null hypothesis which stated that there is no significant difference in the perception of social anxiety among the in-school adolescents in Zaria metropolis, Kaduna State, on the basis of region is retained. This implies that religion does not have significant influence on the perception of social anxiety among in-school adolescents as the perceptions of the respondents from Christianity and Islam were not significantly statistically differ on the subject matter.

**Hypothesis Three:** There is no significant difference in the perceived causes of social anxiety among in-school adolescents in Zaria metropolis, Kaduna State, on the basis home background.

Table 5: Summary of t-test results showing difference in the perception of social anxiety among the in-school adolescents on the basis of home background.

Home	N	Mean	SD	df	Cal.	Crit. t	p-value
Background					t		
Intact Home	208	9248.15	7.25				_
				386	2.08	1.96	0.001
Broken Home	176	7254.28	5.86				

Table 5 shows that the calculated t- value of 2.08 is greater than the critical t-value of 1.96 at the degree of freedom of 386, with a corresponding p-value of 0.001 which is less than the significance value of 0.05. This result indicated that there is significant difference in the perception of social anxiety among the in-school adolescents in Zaria metropolis, Kaduna State, on the basis of home background. Hence, the null

hypothesis which stated that there is no significant difference in the perception of social anxiety among the in-school adolescents in Zaria metropolis, Kaduna State, on the basis of home background is rejected. This implies that home background of the respondents has a significant influence on their perception of causes of social anxiety.

### **Discussion of findings**

The findings of the study revealed that poor social adjustment (that is; lack of requisite social skills or social competence), negative self-evaluation in social situation and high genetic vulnerability index remain the major causes of social anxiety among the in-school adolescents in Zaria metropolis, Kaduna State. These findings are in tandem with the findings of Inam, Mahjabeen and Abiodullah (2017); Cederlund (2013); and Sigurvinsdottir, Soring, Kristinsdottir, Halfdanarson, Johannsdottir, Vilhjalmsson and Valdimarsdottir (2017) which reported some related but discrete findings in their previous studies such as lack of social competence, poor self-esteem among others.

Finding of hypothesis one revealed that there was significant difference in the perceived causes of social anxiety among the in-school adolescents in Zaria metropolis, Kaduna State on the basis of gender. This finding was in support of the findings of Dell'Osso, Abelli, Pini, Carlini, Mengali, Tognetti, Rivetti and Massimetti (2015) and Asher, Asnanni and Aderka (2017) whose different studies have unveiled gender as a significant factor for responses to anxiety in the past. The consistence in the study's findings with the previous studies could be due largely in part to the fact that the participants were all adolescents across the culture.

The finding of the hypothesis two showed that there was no significant difference in the perceived causes of social anxiety among in-school adolescents in Zaria metropolis, Kaduna State on the basis of the respondents' religious affiliation. This finding is also in agreement with the findings of Karami, Hemmatipour, Azadbakht and Jahangirimehr (2018) whose study in the previous time, found no significant relationship between religious beliefs and anxiety levels with the variables of their study. Religion, irrespective of the type, makes people substantially exhibit good social relationship, but arbitrary religiosity could lead to anxiety compared to those are moderate practitioners. Christianity and Islamic religions however do not prevent a child from healthy social

development; in both religions, children are nurtured (although in line with their religion practices and ethos) to become a socially adjusted person in the society.

Hypothesis three result of the present study indicated that there was significant difference in the perception of social anxiety among the in-school adolescents in Zaria metropolis, Kaduna State, on the basis of home background. The home background in which individual child had grown-up and nurtured, undoubtedly remains a significant factor that could affect personal-social development a child. However, this finding showed a significant difference between the perceptions of the participants that came from intact home background and their counterparts who hailed from a broken home background. This study's finding is consistent with the findings of Bracik, Krysta and Zaczek (2012) who reported in their study that family (home background) and school environment factors have an influence on the development of social anxiety disorder.

#### Conclusion

Based on the outcomes of the present study, the researchers conclude that poor social adjustment (that is; lack of requisite social skills or social competence), negative self-evaluation in social situation and high genetic vulnerability index are the major causes of social anxiety among in-school adolescents. It is also concluded that both gender and home background have significant influence in the perceptions of the respondents on the causes of social anxiety, while religion has no significant influence on the same subject matter.

### **Implications for Counselling Practices**

The present study has been able to expose the root causes of social anxiety which posed some challenges to counselling practices:

- 1. Counsellors should come up with intervention strategies that will help students overcome their social anxiety in collaboration with the appropriate authorities.
- 2. School counsellors should be willing to sensitize the public about the causes of social anxiety to create awareness among people about it.
- The school counsellors should come up with programme of activities that will help preventing social anxiety among secondary school's students on regularly basis.

#### Recommendations

Based on the findings of this study, it was recommended among other things that:

- 1. Students should be encouraged to seek for counselling assistance in time on their social anxiety.
- 2. Counsellors should closely monitor their students from broken home background to discover those who are socially anxious among them and offer appropriate assistance to them.
- 3. More awareness should be created among students on various causes of social anxiety such as poor social adjustment (that is; lack of requisite social skills or social competence), negative self-evaluation in social and performance situation and high genetic vulnerability index.
- **4.** The female students should be encouraged or assisted to cope effectively under any social situation like their male counterparts.

### References

- Akume, G. T., Igbo, I. T. & Tor-Anyiins, A. (2008). *Element of guidance and counselling and psychopathology*. Makurdi: Lord Shark Communication Ltd.
- American Psychiatric Association (2013). Diagnostic and statistics manual of mental disorder. 5th ed. USA: Arlington, VA.
- Asher, M., Asnanni, A. & Aderka, I.M. (2017). Gender differences on social anxiety disorder: A review. *Clinical Psychol. Rev.*, 56, 1-12. DIO: 10.1016/j.cpr.2017.05.004
- Bracik, J., Krysta, K. & Zaczek, A. (2012). Impact of family and school environment on the development of sicial anxiety disorder: A questionnaire study. *Psychiatria Danubina*, 24 (1): 125-127.
- Brook, A.B. & Schmidt, L.A. (2008). Social anxiety disorder: A review of environmental risk factors. *Neuropsychiatric Disease and Treatment 4* (1): 123-143. Retrieved from: https://www.ncbi.nlm.nih.gov.pmc/articles/PMC/2512922/.
- Cederlund, R. (2013). Social Anxiety Disorder in Children and Adolescents: Assessment, Maintaining Factors, and Treatment. Stockholm: Stockholm University Press.
- Colman, A.M. (2003). Oxford Dictionary of Psychology. (Revised Edition). New York: Oxford University Press.
- Dell'Osso, L., Abelli, M., Pini, S., Carpita, B., Carlini, M., Mengali, F., Tognetti, R., Rivetti, F. and Massimetti, G. (2015). The influence of gender on social anxiety

- spectrum symptoms in a sample of university students. *Riv Psichiatr.*, 50 (6): 295-301.
- Inam, A., Mahjabeen, A. & Abiodullah, M. (2017). Causes of Social Anxiety among Elementary Grade Children. *Bulletin of Education and Research*, *39* (2): 31-42.
- Jacofsky, M., Santos, M., Khemklani-Patel, S., & Neziroglu, F. (2013). Normal and abnormal anxiety: what's the difference?. Retrieved on 20<sup>th</sup> of July 2020 from:Mentalhelp.net. http://www.mentalhelp.net/poc/view
- Karami, F., Hemmatipour, A., Azadbakht, S. & Jahangirimehr, A. (2018). Relationship between religious attitude and anxiety in nursing and midwifery students. *Journal of Nursing and Midwifery Sciences*, 5 (3): 103-108.
- Melgosa, J. (2005). *New Lifestyle: To Adolescents and Parents*. Mardrid: Safernando de Henarces.
- Nordqvist, C. (2018). "What's to know about social anxiety disorder"? Medical News Today. Retrieved from; http://www.medicalnewstoday.com/articles/176891.php.
- Sigurvinsdottir, R., Soring, K., Kristinsdottir, K., Halfdanarson, S.G., Johannsdottir, R.K., Vilhjalmsson, H.H. & Valdimarsdottir, H.B. (2017). Social Anxiety, Fear of Negative Evaluation, and Distress in a Virtual Reality Environment. *Behaviour Change*, 38 (2): 1-10. DIO: 10.1017/bec.2021.4
- Smith, M. A. (2014). Social anxiety disorder and social phobia: Help guide organizations. Retrieved from: <a href="http://www.moodjuice.scotonhs.uk">http://www.moodjuice.scotonhs.uk</a>.
- Sultana, S., Shrin, A. & Islam, S. (2017). Social anxiety and academic achievement of children. Rajshahi University Journal of Life, Earth and Agricultural Sciences, 44 (45): 27-32. ISSN: 2309-0960.
- Topham, P. & Ressell, G. (2012). Social anxiety in higher education. *The Psychologist*, 25 (4), 280-282. ISSN 0952-8229. Available on: http://eprints.uwe.uk/16657.
- Yahaya, L. A. & Nyarko-Sampson, E. (2016). *Social anxiety scale manual*. Ilorin: Unilorin Press.