

THE PREVALENCE OF SOCIAL ANXIETY DISORDER (SAD) AMONG HIGHER EDUCATION STUDENTS IN MALAYSIA

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Abstract: The research is focusing on the Prevalence of Social Anxiety Disorder (SAD) Among Higher Education Students in Malaysia. Social Anxiety Disorder is characterized by an excessive fear of being negatively evaluated by others in social situations. The present study adopted a qualitative approach to explore the experiences of University students affected from the symptoms of Social Anxiety Disorder. The sample is consisted of three female university students. One of the female university student experienced Social Anxiety Disorder and was diagnosed. The data was obtained by semi-structured interviews and analyzed by using Interpretative Phenomenological Analysis (IPA). The results obtained demonstrate that Social Anxiety is a complex disorder affecting an individual emotions, cognitions and physiological. There are several factors that contributing to Social Anxiety Disorder such as bullying in school, rejection from peer and past experiences. Coping mechanism and strategies also emerged as themes.

Keywords: Social Anxiety Disorder, Prevalence, Coping Mechanism

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INTRODUCTION

Social Anxiety Disorder (SAD) is tend to develop in an individual whom facing difficulties in engaging themselves with social activities and avoids involvement in social interaction. SAD can be defined as fear in embarrassment and negative rating on the individual who participate in social interaction and

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public activities (Veale, 2003). An individual own negative believes and thoughts causing themselves to avoid communication with people around them. It also makes them less interest to involve in any group activities or family events where involving many peoples. The Social Anxiety Disorder also based on individual's intense concern on other people's thoughts and opinions (Veras et al, 2011). For example when an individual with low self-esteem starts concerning about other people's opinions and perspective about them, might develop anxiety which may lead to Social Anxiety Disorder. They also will develop negative thoughts that people around them will avoid them and they might also violate society expectations.

Social Anxiety Disorder is develop in different situations of participations when an individual face challenges to adapt themselves with members of society (Chan, 2010). Although, several situation are common to general population but an individual affected with Social Anxiety Disorder will feel more nervous and anxious to adapt and cope with the situations. For example, individual will be anxious to meet with new people or make friends. Apart from that, anxious also will provoke when other people observe them while doing things, afraid of going out alone especially to crowded places and to talk people in higher authority. Furthermore, Social Anxiety Disorder also highly affects individual performances and well-being. Individual will be having stress with their daily activities, face difficulties in communicating with people around them or their surroundings, lack of concentration on academic, poor performance at workplace and might easily influence to consume alcohol or drugs. According to (Heimberg, 1999), Social Anxiety Disorder is mostly affects young adults and can detached on a person after 15 years old. Treatments for this disorder is considered more effective on people with aged 15 to 20 years old.

In addition, Social Anxiety Disorder highly affects higher education students. University and college students on their first year of enrolment faces difficulties to communicate with their new study environments and classmates. (Kashdan & Roberts, 2007). For example, students whom having Social Anxiety Disorder will face challenges to involve in group activities or group assignments. They also afraid of asking questions with peers, classmates and lecturers especially feeling anxious to give their own opinion or contribute ideas in group projects and present task in front of others in class or lecture halls.

According to Diagnostic and Statistical Manual of mental health disorders (DSM-IV), Social Anxiety Disorder are related to Social Phobia. This

disorder is considered more excessive and disabling compare to shyness. An individual whom having symptoms of SAD for more than 6 months will be diagnosed with this disorder. Symptoms of Social Anxiety Disorder can be distinguish between few aspects such as Cognitive, Physiological and behavioral aspects encountered by individual in social situations. Individual starts to develop negative thoughts and believes about themselves when face social situations. For example, they will believe that people might rejects them if disagree with someone opinion during conversation (Clark, 2001). These negative thoughts and believes may stops an individual from sharing their own opinions or stand for themselves in challenging situations. People with SAD may develop low self-esteem which lead them to being more sensitive and emotional (Gilbert & Andrws, 1998). According to Biggs and colleagues (2012), young adults will faces difficulty to make new friends which leads them to have negative self- thoughts and feeling of unsatisfied with social life. People affected with Social Anxiety Disorder also will try to recall all the negative thoughts but forgot to see good side of their performances (Rapee & Heimberg, 1997).

Apart from that, according to Rapee and Heimberg (1997), anxious people will face challenges to focus on what other people are saying because they occupied with negative thoughts. They also will be more concerned about their actions, body gestures, facial expressions and internal thoughts which can be noticed physically as they will be either blushing or sweating excessively. Self-focused attention may increase in individual affected with Social Anxiety Disorder because they will be more aware about physiological arousal which called as 'Feedback Mechanism' (Vertue, 2003). Therefore, they tend to loss focuses on important information which lead to failure in the progress of future interactions (Hope, 1987).

Based on the research conducted by Pozo, Carvar, Weflens and Scheir (1991), stated that individual whom experience high level of anxiety might be shows less interest and distant themselves from interacting with people around them. In fact individual with Social Anxiety Disorder likelyto be more reserved, difficult to talk or view others as not friendly (Clark, 2001). They are also tend to predict that people around them are critical and will negatively evaluate themselves as their mental perception of their personality are generally negative. Previous research shows that, individual with large discrepancies between their true character and ideal self-have high tendency to anxiety together with self-doubt or confusion (Schlenker and Learty, 1985). Furthermore, avoidance is

one of the most common strategies will be practiced by individual with high level of anxiety as a safety or to escape from social situation (Vertue, 2003). For example when anxious individual more exposed to social situation, it will leads to panic anxiety. Thus, most of the times they tend to avoid themselves in workplaces, educational settings and especially relationship which associated with poor quality of life (Veale, 2003). This avoidance behaviors also can be commonly seen among university students where they will absent during lecture classes, does not contribute to group assignments, prefer to do project alone rather than as a group and avoids friends gatherings (Vertue, 2003). Contrary, anxious individual will avoids eye contacts, decrease their tone of voice if unable to escape from social situations (Gilbert & Andrews, 1998). Sung and colleagues (2012) stated that, there are several physiological symptoms noticeable at people with Social Anxiety Disorder such as excessively sweating, body shaking or blushing which caused by lowered or increased heart rate. There are also several symptoms on one`s behavioral and emotional due to this disorder where the individual be afraid to join with people around them (Karp and Dugas, 2003). Individual tend to be alone and most of the time withdraws themselves from interacting due to the unnecessary fears. Also, they prefer to avoid involvement with their society because fears of other people will misjudge them based on their situations and participation from activity which might develop wrong perception of oneself. SAD also causes individual to unable complete their daily practice, effort at education and other performances (Seligman, 1971).

Individual affected with SAD will have low self-esteem. They will perform tasks with low self-confidence. People may need to assist or supervise them in completing a task. Most of the time, they will be facing difficulties in making decision and they won't stick to any of their decision (McCarthy, C. 2014). Individual diagnosed with this disorder will have a negative self-talk. They will believe that the self is not capable to handle any of tasks given to them and refuse to take over responsibility. Apart from that, individual with SAD will have low social skills which causes them from avoid communicating with others. They prefer to isolate themselves as they feel it is safer to be alone due to insecure feelings to communicate or perform as a group.

The journal of Mayo foundation (2013) also stated that an individual with SAD have a low academic achievement. This is because they avoid interaction with people around them. It causes them to have lack of knowledge

when learn new things. Also, when they withdraw themselves from others, it will make hard for them to score better in their education.

Family environment is one of the highest factors associated with Social Anxiety Disorder. Children's starts to communicate and learn social interaction from their family surroundings Parenting styles and parent-child attachments play an important role in child developments (Vertue, 2003). For example children tend to develop Social Anxiety Disorder or social phobia when their parents are being too overprotective. The child will depends on their parents and unable to perform without their assistance. They also will become anxious when if parents are not beside them in every situations which referred as separation anxiety. Later separation anxiety will slowly lead to Social Anxiety. Additionally, Albert Bandura stated that children also might develop SAD from parents by modelling their behavior since it is a learned response from people around them. Other causes for SAD also including inherited traits. Individual can experience this disorder due to their gene or family runaway disorder (Dobson, C. (2012). The unpleasant experiences of an individual in their past also may leads to the SAD. Those children with bad experience in their childhood such as neglected by parent has high chances to be affected by SAD. Next, the brain chemistry is also known as cause for SAD. The chemical in our body which known as serotonin causes the social anxiety disorder. Lack of serotonin in the brain causes imbalance of our emotion and mood and make us too responsive to our surrounding. Other than that, early traumatic experiences also one of the cause for individual becomes anxious. For example, rejection of peers which forms distorted mental image of themselves which provokes in future when faces social situations.

Treatment programs such as counselling, therapies and coping strategies is effective to treat individual with Social Anxiety Disorder. These interventions can help individuals on self-reliance and gives some abilities to mingle around with other in our society. Psychotherapy is also another effective method used to treat SAD. It helps to identify negative perception of one self and how to overcome with effectively. (Veale, D. 2003). Therapist and Counselors will do assessment towards patient and assist them to explore themselves and their weakness. It is a learning process and brings the patient towards a positive change. This disorder can be treated by medications. Medically approved drugs such as Paroxetine, Sertraline, Fluvoxamine and Fluoxetine prescribed by a medical doctor can be consumed to reduce the social anxiety disorder. At the beginning patient will consume lower dose and doctor might increase level of

dosage if patience shows positive behaviors. This is to ensure the risk of getting side effects of consuming those medicinal drugs.

METHOD

Respondents The purpose of this study is to develop a deep understanding of what it is like to experience Social Anxiety. Therefore, qualitative method used to conduct this research which allows researcher to understand about one phenomenon into deeper level in order to explore on why a particular issue occur in the society. Interpretative Phenomenological Analysis (IPA) approach was used in the study which helped to gain detailed information about participant experiences as well meanings the participant gives to these experiences. The phenomenon of interest in this study was the three female students. One of the student participant was diagnosed by Social Anxiety Disorder. This was not to my knowledge prior to the interviews. The main concerns on Social Anxiety Disorder in this research are prevalence of SAD among higher education students and how it is impacting on students learning and well-being.

Instruments To conduct the research, it is important for the researcher to select more than one instrument for the validity of the data to answer the research problem to be studied (Birmingham, P., & Wilkinson, D. 2003). The research instruments are such as interviews, focus group discussions, observational methods and document analysis. Therefore, this research conducted by semi-structured, one to one interview. Data will be collected not only by participant's words, however by observing participant's behaviors, vocal, feelings and their facial expressions. All these process will be used throughout the research to analyze the data. In this study, seven semi-structured interview questions was prepared to answer three research questions. For each of the main research questions, sub questions also were included in order for participant to have better understanding and also to probe them more to get deep and accurate answers.

Validity and Reliability of Instruments According to Bashir, M., Afzal, M. T., & Azeem, M. (2008), instrument validity can be defines as reliability and validity of the study also depending on the selecting a survey instrument in order to get credible result. In this research content validity of the research questions was done through peer checking and pilot study. Interview questions was given

to the teachers to check on the content validity of interview questions. Also teachers was asked to read the research questions and give feedback on how interview questions can be constructed for clear participant understanding. Apart from that, pilot studies was used to test whether the interview questions is appropriate or complicate for understand to uncover any problems which may affect interview process. A pilot study was conducted with one of the random university student and I have found student has difficulty in understanding at some points in the interview. Finally, I revised the questions again and amended interview questions was given for review and approval by teacher proficient in English language.

Procedures In order to select the participants a recruitment e-mail with consent of my supervisor was sent out to a large sample of university students. I have used social networking groups for university students as an intermediary to recruit the participants from various universities and fields.

I have opted to interview higher education students because Social Anxiety Disorder tend to develop in adolescence stages and many of the students begin experience in late adolescence. This was supported by (Veale, 2003) that Social Anxiety Disorder is common phenomenon among early adolescence aged between 15 to 25 years old. In order to participate in protocol interview, participants were required to be over 18 years old and above and either male or females. The final sample consisted of three university students and all of them were females aged between 20 to 25. The participants claimed to have experienced some symptoms of Social Anxiety Disorder.

Before conduct this research, permission was requested from the participant to give their convenient time and place where interview can be conducted without distractions. Therefore interview took place at three different places according to participant familiar environment for them. I also have informed participants about the purpose of the study being conducted and explained about the confidentially. Since one of my participants were diagnosed with Social Anxiety Disorder it is important for me to explain to her on confidentially that video taken will be only shared between me and my supervisor. The interview for the three participants lasted between 15 to 30 minutes. During the end of the interview session I have also asked for participant future goals as for my additional information.

Data analysis According to (Smith & Osbon, 2003), data analysis is one of the important part in research where researcher can conclude on the outcome of the interview conducted in many perspective from the answers from participants. After done with the interviews, transcription of the interview was written in table form. The transcribed were analyzed using thematic and coding approach.

Video was listened more than twice before do the transcript in order to put correct information. After coding, rechecking on the three transcripts were done to ensure all coding was accurately coded. Finally, the outcome of the data analysis were more briefly explained in the findings with example of participants answers. Through the process of Interpretative Phenomenological Analysis (IPA), as purported by Jonathan Smith (1996), five themes such as Development of Social Anxiety, Symptoms of Social Anxiety, and Factors contributing to the Social Anxiety, Impacts of Social Anxiety and Coping strategies were elicited from the data obtained in the interviews and explained in details in the findings of the study.

FINDINGS AND DISCUSSIONS

1; What is the prevalence of SAD among University students in Malaysia?

Development of Social Anxiety Disorder Based on the response from the participants it is evident that they started to experience anxiety among themselves during the childhood. Even though participants mentioned that they only realized having this disorder during their university times, they have still encountered the shyness and avoidance to meeting with their relatives and unknown people from the childhood itself. It was supported by Chan 2012. According to Chan, shyness is one of the one of the inhibited temperamental style children will have during their childhood. The early adolescence is more affected by Social Anxiety Disorder compared to that late adolescence.

One of the most common characteristics found with three participants were they being more self-conscious and self-critical. This was supported from literature by Scenker & Laery in 1985, which individuals with Social anxiety will suffer from low self-esteem because they always perceive themselves in negative ways. All three participants are aware their anxiety is not reasonable, however they failed to control it in certain situations. For example, Akila mentioned that she will experience symptoms such as heart palpitations and sweating when she was unable to control her anxiety in social situations. According to Veale (2003), these are typical symptoms of Social Anxiety and called as autonomic sensations.

Based on the interview it was noted that participants experience Social Anxiety Disorder in many situations. Clark (2001) stated that, Social Anxiety experienced in only particular situations is knows as non-generalized Social Anxiety Disorder, however generalized social phobia is consists of experiencing

anxiety in various situations. Participants reported that they experienced anxiety at many situations such as during presentation, group assignments, and outdoor activities with unknown people and parties. Therefore, therapist must identify of which situations provoke Social Anxiety in individuals in order to provide suitable therapy and also to eliminate problems about negative self-thoughts. The prevalence rate of Social Anxiety Disorder is higher in childhood and early adolescence compared to late adolescence and adulthood (Kashdan & Herbert, 2001). This condition is due the lower social support and less care from caregiver during the stage of exploring the world. (Pamela's) symptoms of Social Anxiety are associated with Major Depression Disorder according to the American Psychiatric Association (2013).

2; How SAD is impacting on students learning and well being?

Impacts of Social Anxiety Disorder Participants claimed that they become very alone and their friend circles are less because they avoid meeting them most of the times.

(Rehana) "Its affected the way that I am like, I feel like my friend circle are very less, I feel like I am very alone, because I don't mingle with anyone and that time I feel alone the anxiety comes more."

Three participants that I have interviewed still may able to perform well in their academics in terms of their exam scores. According to (Khira) she is very excellent students and her pointer was between 3 to 4 pointers. She also mentioned that,

"Most of my friends know that I am very callable in that but the thing is when the part that when comes to let's say to present that is the time I will have fear and when comes to group assignment or presentations i will always absent to the class"

Overall Social Anxiety Disorder seems does not affects the students academic level rather than their active participation in the classroom.

3; What are the factors that contributing to SAD among higher education students in Malaysia?

Environmental factors Presentation in the classroom is seems to be most common situation contributing to the anxiety levels among the participants.

Three of the participants described that they felt most anxious during presentation and one of the participants stated she will absent to the class when it comes to presentation day. Other than that they are afraid when relatives or unknown people visits to their house. They tend to hide themselves to avoid talking with their relatives. Some of their responses during interview is as below;

(Finaz) *“Depends or normally on the situations like classes, lectures Ok whenever I have a doubt means I don’t understand anything ‘uuhh’ whenever I want to questions or do any suggestion want to give any suggestions I feel nervous so I will just keep quiet and be there just that”*

Coping Strategies According to Alexendria, Angelico and Loureiro (2013), the social skills are very needy for an individual to adapt themselves towards their social environment. Those skills are important to deal with the interpersonal situations. The impairment of social skills leads them to the social anxiety disorder (SAD) which is a serious mental health problem where the individual affected by SAD will restrict their social interaction and act. On the average the Social Anxiety seems to reduce and improved after they realized that they are having this disorder and seek for help on how to cope with SAD.

“I am able to engage in group discussions and trying not to avoid people after went for the counselling session” (Khira).

Therapy is also one of the major reason for improvement of severe Social Anxiety Disorder. Suitable therapy and group counselling is one of most effective method to help participants with severe Social Anxiety Disorder. These techniques has helped (Rehana) to overcome her anxiety and she felt more confident when comparing to earlier. Apart from that great support from her lecturer is the main course for her to seek help for treatment Other than that maturity and exposure to the different situations also lead to the improvements in reducing the anxiety level and practicing breathing exercise is one of the techniques used by the participants to make their self -control over the anxiety situations. Great support from the family members, lecturers and also friends are helps participants to cope with the anxiety. One of the participant family members do advise on how to overcome this fear and friends are sometimes bring her out if they noticed she is being anxious.

*“Ya I am overcoming because it was in a diploma by gradually I am doing my
Degree so I feel like I am getting matured and trying to overcome it”
(Rehana).*

Cognitive Behaviour Therapy (CBT), Group counselling and Person- Centered Approach is one of the most effective techniques that can be used to reduce the anxiety level and depression among students. Cognitive Behavior Therapy (CBT) to help the students because the basis of psychological distress is largely a function of disturbances in cognitive process (Corey, 2009).

Cognitive Behavior Therapy is focus on changing the cognition in order to create a desired change in the individual behavior and her faulty cognition can be change through. CBT view thoughts as behaviors and suggests that what individuals say to themselves influences what they do.

Other than that, The Person-Centered approach (PCT) used in the counseling session also may help individuals to express themselves because it is more to simple and friendly sharing. When the individual share about their problems that they faced with assignment, presentations which makes them feel very depressed, angry, it will help them to lower their anxiety level. It is very common and also most popular problems which facing by the university students nowadays. Usually for the cases like this, the student will look for someone whom can trust to share their feelings to feel much better and relief. It is clear that the Person Centered approach rests on a basic trust in human beings tendency to realize their full potential. The counselor able to experience and communicate their realness, support, caring and non-judgmental understanding, significant changes in the individual are most likely to occur and also the students with anxiety will be able to cope up with their usual problems that happening during their student life cycle much better.

CONCLUSION AND RECOMMENDATION

This research was conducted to create awareness to the students about the occurrence of this Social Anxiety Disorder among the students community. The majority students does not understand and aware about this disorder and some of them not even know what Social Anxiety Disorder is about. This research is providing a clear definition of Social Anxiety Disorder, causes, effects, and also about the suitable treatments of SAD.

Besides that, the research will help the management of institutions to have clear understanding about Social Anxiety Disorder and how it is impacting the students learning and well- being. Also this research will help management to plan on support needed for the students affected with SAD and provide additional training and program for teachers on how to handle and motivate this

students. If the numbers of students who with SAD is high, the respective management especially Department of Psychology and students counsellor can arrange for intervention programs which will be effective for those students. By doing this, the academic performance of students will not be affected and can avoid the cases of suicide due to depression or problems of substance abuse. Finally, this research will be helpful in providing information about the disorder and the ways of keeping away themselves from SAD. The research provided some reviews on this SAD to show how frequently this disorder spreading in our surrounding which might useful in spreading the awareness those who are not educated or for those who in younger age. It is may effective in to cure the SAD in the earliest stage of diagnosis.

There are parts that we can improve in future research in order to acquire a more finding about Social Anxiety Disorder. Researcher should target group with a larger sample size to increase the validity of the data to represent the population. The future researchers also should consider gender and age as variable to provide better understandings about the patterns of Social Anxiety Disorder in our society. All three respondents interviewed were females which was not a requirement. It would be more interesting if future researcher select both male and female participants to explore more about their experience about the Social Anxiety Disorder. Furthermore, future research can be conducted in mixed methods by quantitative and qualitative approach to extract more detailed information about Social Anxiety Disorder from different perspective of participants. Future studies can be conducted comparing between age, gender and socio-economic status as a variables. It also would be more interesting to conduct future research including family members of affected participants with Social Anxiety Disorder.

As a conclusion, Social Anxiety Disorder should consider as severe mental health problem in our society and the intervention programs ought rapidly carried out to ensure that the rate of prevalence of SAD is under control. The previous research suggested that the blend of medication and cognitive-behavioral therapy is effective to reduce severity of SAD in an individual (Cuncic, 2012). As a researcher I have gained more knowledge and learned about people experiencing Social Anxiety Disorder from different point of view from participants. Social Anxiety Disorder is a very complex disorder which may cause many consequences on an individual daily lifestyle. Special thanks goes to my participants for dedicating their time and being courageous to share their experience with me.

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