

**Assessment of Social Phobia among Secondary  
School Students**

**In Thi-Qar Governorate –Iraq**

تقييم الرهاب الاجتماعي لدى طلاب المدارس الثانوية في محافظة ذي قار – العراق

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### المستخلص

**الأهداف:** هدفت هذه الدراسة إلى تقييم الرهاب الاجتماعي لدى طلاب المرحلة الثانوية. **المنهجية:** تم إجراء دراسة وصفية رصدية مقطعية على طلاب المرحلة الثانوية في المدارس الثانوية في محافظة ذي قار في إقليم العراق، حيث طُلب من الطلاب ملء استبيان حول تقييم الرهاب الاجتماعي باستخدام مقياس الرهاب الاجتماعي (SPS).

**النتائج:** من إجمالي ٣٨٥ مشاركاً في هذه الدراسة، ٥٣٪ من الطلاب ذكور ويشير متوسط عمر الطلاب إلى ١٦ ± ٢ سنة، كما تم الإبلاغ عن ٨٠٪ من الطلاب كعائلة نووية. عدد أفراد الأسرة يشير إلى ٥-١٠ أفراد كما أفاد ٨٠,٣٪ من الطلاب و ٨٦,٢٪ من الطلاب يعترفون أنهم يعيشون في منزل مملوك ولكن ٥٦,٩٪ من الطلاب يقيمون في الريف، لوحظ أن ٧٧,٥٪ من الطلاب يعيشون في منزل مملوك. في الأسر ذات الوضع الاجتماعي والاقتصادي المعتدل. أعلى نسبة للمستوى التعليمي لأباء الطلاب هي ٢٧,٣٪ يقرؤون ويكتبون و ٣٩,٥٪ للأمهات يقرؤون ويكتبون أيضاً. كشفت الدراسة أن الطلاب مرتبطون بمستوى خفيف إلى متوسط من الرهاب الاجتماعي ( $M \pm SD = 32.47 \pm 7.852$ ) حيث شوه ٣٨,٧٪ يعانون من رهاب اجتماعي خفيف و ٣٢,٥٪ يعانون من رهاب اجتماعي معتدل. أظهرت النتائج عدم وجود فروق ذات دلالة إحصائية في أنماط تربية الآباء بالنسبة لجنس الطلاب ونوع الأسرة في حين توجد فروق ذات دلالة إحصائية في أنماط تربية الأمهات. الجواز فيما يتعلق بالأسرة النووية عند القيمة  $p = 0.020$  والحجية فيما يتعلق بالأسرة الممتدة عند القيمة  $p = 0.017$ .

**الاستنتاجات:** خلصت الدراسة إلى أن طلبة المرحلة الثانوية الذين يدرسون في مدارس محافظة ذي قار الثانوية في العراق يعانون من الرهاب الاجتماعي المعتدل مع أنماط التربية التسامحية كأسلوب سائد، فقط أساليب تربية الأمهات والوضع الاجتماعي والاقتصادي قد يؤثر إيجابياً على هؤلاء الطلاب. "الرهاب الاجتماعي".

**التوصيات:** توصي هذه الدراسة • يجب أن يقوم المعلم بتنفيذ بعض برامج الدعم النفسي للطلاب حيث يقومون بدمج استراتيجيات الاسترخاء في ممارسة التدريس الخاصة بك، مثل تشجيع الطلاب على المشاركة في فترة قصيرة من التنفس العميق والهادئ وتشجيع الطلاب المترددين على التعلم بشكل مستقل. التعبير عن أفكارهم كلما كان ذلك ممكناً، بدلاً من التحدث نيابة عنهم.

**الكلمات المفتاحية:** الرهاب الاجتماعي – الخوف الاجتماعي – طلبة المرحلة الثانوية – ذي قار – العراق

### Abstract

**Objectives:** This study aimed to assess the social phobia Among Secondary School Students.

## Assessment of Social Phobia among Secondary School Students In Thi-Qar Governorate–Iraq

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**Method:** An observational cross sectional descriptive study was carried out on students at secondary level in Thi-Qar Governorate secondary schools in Iraq Region, students were asked to fill a questionnaire about assessing the social phobia by using Social Phobia Scale (SPS).

**Results:** : From total 385 participants in this study with 53% of students are males and the average age for students refers to  $16 \pm 2$  years old, also 80% of students are reported as nuclear family. The number of family member refers to 5-10 as reported by 80.3% of students and 86.2% of students admit that they are living in an owned house but 56.9% of students' resident in rural, it was noted that 77.5% of students live in families with moderate socioeconomic status. The highest percentage for level of education of students' fathers is 27.3% who read and write and 39.5% for mothers who are read and write also. Study revealed that students are associated with mild to moderate level of social phobia ( $M \pm SD = 32.47 \pm 7.852$ ) in which 38.7% seen with mild social phobia and 32.5% seen with moderate social phobia. The results showed that there is no significant difference in fathers' parenting styles with regard to students' gender and family type while there is significant difference in mothers' parenting styles; permissiveness with regard to nuclear family at  $p\text{-value} = .020$  and authoritative with regard with regard to extended family at  $p\text{-value} = .017$ .

**Conclusions:** The study concluded that the secondary students who are educating in Thi-Qar Governorate secondary schools in Iraq are suffering from moderate social phobia with permissiveness parenting styles as a predominant style, only mothers parenting styles and the socioeconomic status may affect positively to these students' social phobia.

**Recommendations:** This study recommend Some psychological support programs must be carried out by teacher to students as they Integrate relaxation strategies into your teaching practice, such as promoting students to participate in a short period of deep, serene breathing and to encourage hesitant students to autonomously articulate their thoughts whenever feasible, rather than speaking on their behalf.

**Key-wards:** Social phobia – Social fear –Secondary students - Thi-Qar - Iraq

## Assessment of Social Phobia among Secondary School Students In Thi-Qar Governorate–Iraq

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### Introduction

Social phobia is a debilitating social phenomenon characterized by persistent fear of social situations due to anticipation of negative judgment by others (1,2). The prevalence of Social phobia is estimated to be around 12% (Lipson et al., 2022). Social phobia must be differentiated from shyness because the latter does not cause serious mental disability or interfere with the majority of life events. Social phobia has a profound impact on the quality of life of the affected individual. Educational achievement can be undermined, with a heightened risk of leaving school early and resulting in poor academic performance and qualifications (4,5). A survey reported that people with generalized Social phobia had 10% lower wages compared to the general population (Horenstein & Heimberg, 2020). On average, individuals with Social phobia have fewer friends and have more difficulty getting along with friends (1,12).

Students and teenagers commonly feel social phobia as their main psychological concern. It not only affects their daily communication but also has an impact on their mental health. Social phobia is a common human phenomenon characterized by a profound fear of being evaluated by others in social situations (8,9). Untreated social phobia has the potential to develop into social phobia disorder. Social phobia is prevalent during the early to middle stages of adolescence (Mak *et al.*, 2020). Few research conducted in Iraq have revealed that adolescents have become a vulnerable demographic group for social phobia (1,12). The incidence of social phobia disorder among teenagers aged 13 to 24 has reached 8% (1,12). Aside from hereditary characteristics, students' social phobia can be influenced by several other factors, including information processing, parental upbringing and modelling, and family functioning (1,2).

### Methods

#### Design

A quantitative cross-sectional study was conducted to evaluate the parenting styles and their effects on social phobia in students. One noticeable advantage of this study is its capacity to make simultaneous comparisons of several parameters among the participating students

#### Study Instrument

TWO tools were used for data collection in this study:

- 1) A demographic data questionnaire created for this study by researchers obtained information about the elderly sociodemographic characteristics.

## Assessment of Social Phobia among Secondary School Students In Thi-Qar Governorate–Iraq

2) The Social Phobia Scale (SPS), derived from Mat tick and Clarke's (1998) work, consists of 17 items

**Data Collection** The researcher interviewed the participants (students), explained the instructions, answered their questions, persuaded them to join, and thanked them for their help. Individual bases were utilized for the interview procedures, and each interview lasted 15–20 minutes after the steps that must be included in the study design were taken.

### Statistical Analysis

All of the subsequent analyses were conducted in IBM SPSS 20.0. In order to classify the variables, we employed whole numbers and percentages (No. and %), while the mean and standard deviation were used to define the continuous variables (mean and SD). The correlational analysis was conducted to determine the link between the different factors. Two-tailed p.05 was used as the threshold for statistical significance.

### Results

**Table (١): Assessment of Social Phobia among Students (N=385)**

List	Social Phobia	M	SD	Assessment
1	I am afraid of those in power	1.77	.867	Mild
2	I get annoyed by blushing in front of people	1.97	.824	Mild
3	Parties and social events scare me	1.47	.722	Mild
4	I avoid talking to people I don't know	2.18	.857	Moderate
5	Being criticized scares me a lot	1.86	.799	Mild
6	Fear of embarrassment makes me avoid doing things or speaking with people	1.99	.829	Mild
7	Sweating in front of people makes me uncomfortable	1.85	.825	Mild
8	I avoid going to parties	1.97	.867	Mild
9	I avoid activities where I am the center of attention	1.84	.789	Mild

**Assessment of Social Phobia among Secondary School Students  
In Thi-Qar Governorate–Iraq**

10	Talking to strangers scares me	1.82	.834	Mild
11	I avoid having to give speeches	2.11	.846	Moderate
12	I will do anything to avoid being criticized	1.98	.857	Mild
13	Heart palpitations bother me when I'm among people	1.94	.889	Mild
14	I'm afraid of doing things that people might see	1.92	.808	Mild
15	Feeling embarrassed or looking stupid is the worst my fears	2.04	.820	Moderate
16	I avoid talking to anyone in authority	1.79	.842	Mild
17	Trembling in front of others is annoying to me	1.95	.865	Mild

M: Mean, SD: Standard Deviation

Normal= 1 – 1.5, Mild= 1.6 – 2, Moderate= 2.1 – 2.5, Severe= 2.6 – 3

The table indicates that students are experiencing mild level of social phobia as seen with mean scores among all item except items (I avoid talking to people I don't know), (I avoid having to give speeches), and (Feeling embarrassed or looking stupid is the worst my fears) that show moderate social phobia.

**Table (٢): Overall Assessment of Social Phobia among Students (N=385)**

Social phobia	F	%	M	SD	Ass.
Normal	74	19.2	32.47	7.852	Mild
Mild	149	38.7			
Moderate	125	32.5			
Severe	37	9.6			
Total	385	100			

**M: Mean for total score, SD: Standard Deviation for total score, Ass: Assessment**

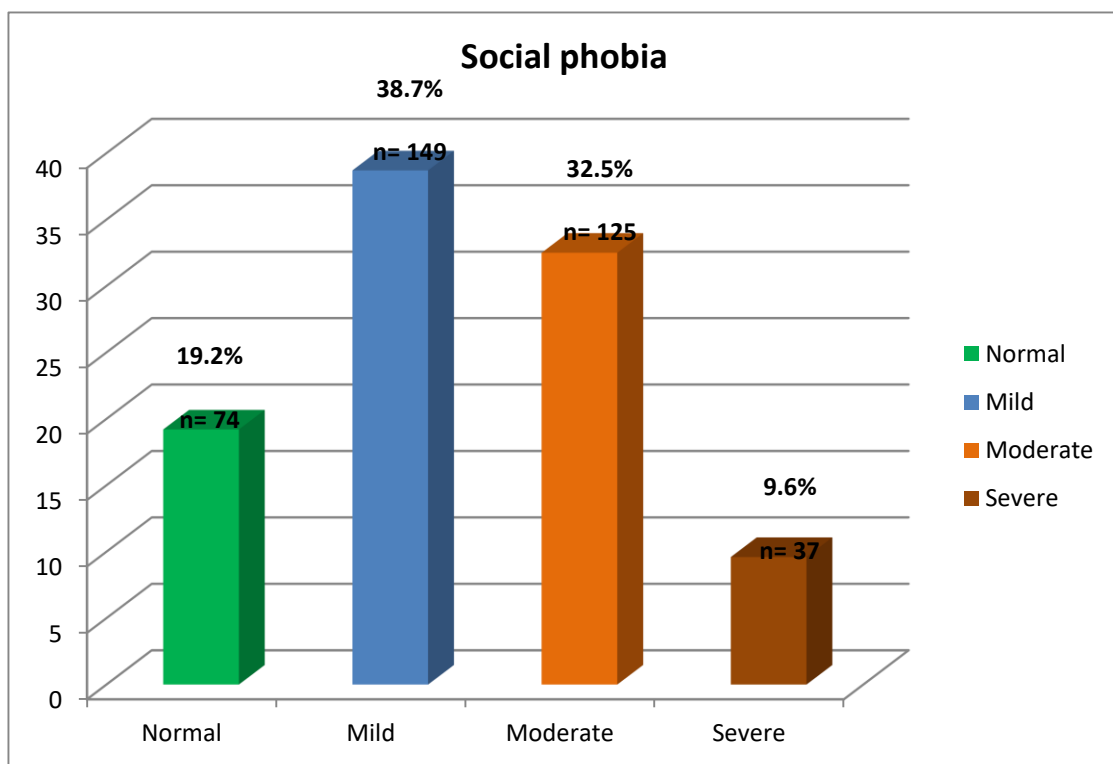
## Assessment of Social Phobia among Secondary School Students In Thi-Qar Governorate–Iraq

f: Frequency, %: Percentage

Normal= 17 – 25.5, Mild= 25.6 – 34, Moderate= 34.1 – 42.5, Severe= 42.6 – 51

This table reveals that students are associated with mild to moderate level of social phobia ( $M \pm SD = 32.47 \pm 7.852$ ) in which 38.7% seen with mild social phobia and 32.5% seen with moderate social phobia

**Figure (3-2): Levels of Social Phobia among Students (N=385)**



This figure reveals that 38.7% of students are associated with mild level of social phobia.

### Discussion

This study suggested that students have a low to moderate level of social phobia, which contradicts the conclusions of (13,14) research. Their research entailed a comprehensive examination of a carefully selected group of 523 undergraduate students, with the objective of ascertaining the frequency of social anxiety disorder, identifying the characteristics linked to it, and assessing its influence on quality of life. All participants successfully



## Assessment of Social Phobia among Secondary School Students In Thi-Qar Governorate–Iraq

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completed both the Social Phobia Inventory and the Leibowitz Social Anxiety Scale. The findings indicated that among the 523 participants, 26% were identified as having social anxiety disorder. Approximately 69.4% and 17.4% of the students exhibited mild and moderate signs of social anxiety disorder, respectively. The results of the WHOQOL BREF-TR survey indicated that students with social phobia experienced a significantly diminished quality of life compared to those without social phobia. The scenarios that elicited the greatest apprehension were encountering disapproval from others or participating in social gatherings. The act of engaging with unfamiliar individuals was the situation that was most frequently avoided. An investigation using logistic regression revealed a strong association between symptoms of social phobia and certain characteristics, such as being female, currently using tobacco, and having a family history of psychiatric disease (15,16).

Most students typically fear conversing with strange folks and shy away from giving speeches. This is consistent with the results of (15,17–19) research, which investigated students' concerns about not enjoying discussions, feeling unhappy with themselves, and having inadequate conversational skills. We analyze the intensity of these anxieties and determine their correlation with verbal communication patterns, finding that most students experience anxiety when talking to unfamiliar people, which suggests a type of social phobia (15,20–22). Refers to "primary school graduation", and 50% of the study sample are free works. This finding disagrees with some results from Rather et al. (2015), who found that 53.5% of patients had a high school education. Approximately 46.5 percent of patients are semiskilled occupation patients. According to the findings, a fatherless individual is at a significantly higher risk of relapsing after receiving therapy than a parent. Research shows that parents should be actively involved in their children's treatment, which may even include receiving treatment themselves (McPherson, Boyne and Waseem, 2017). In reality, according to surveys conducted by rehabilitation centers, parents frequently initiate treatment for their minor or adult offspring. Drug addiction is so debilitating that not even the most determined person can overcome it without assistance. Thus, parents of patients with SUD must take the initiative to seek health care for their children. Yet being a parent entails more than ensuring that their child with substance use disorder attends treatment.

## Assessment of Social Phobia among Secondary School Students In Thi-Qar Governorate–Iraq

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Concerning their clinical data characteristics, the study results show that the majority of the study sample's patients began using substances at an average age of (20±5) years. This result agrees with Jaff and Kumar (2016), who found that the mean age for initiation of substance use was 20.9 (SD ±7.7) years.

While Tshitangano and Tosin (2016) discovered that (67%) of male learners began using substances between the ages of 13 and 15.

According to the current study, most of the study sampled the number of patient admissions and reported one admission. It may indicate impaired cognitive function, poor academic performance, and school dropout, particularly if substance abuse begins in adolescence (27,30).

The finding of the study reveals that a higher percentage of patients with years of substance use duration reported using substances for less than six years (62.9%). This result is consistent with (Mohammed, 2018; Adnan and Rashak, 2020;), who found that most participants had years of drug abuse (61.1%).

### Conclusion

This study findings revealed that the level of social phobia among secondary students are moderate to low with a degree of parenting styles related to their mothers and fathers called permissiveness parenting style. Parents of students with social phobia utilize distinct parenting practices that result in the emergence of social anxiety symptoms in their students. These parenting techniques have also been linked to negative consequences in students, including heightened phobia and social anxiety, as well as emotional difficulties. Inadequate research has been undertaken on the specific parenting traits displayed by parents of students who experience social phobia. Prior research has predominantly concentrated on examining the attributes of mothers, with limited investigation into men displaying signs of social anxiety.

### Recommendations

This study recommend Some psychological support programs must be carried out by teacher to students as they Integrate relaxation strategies into your teaching practice, such as promoting students to participate in a short period of deep, serene breathing and to encourage hesitant students to autonomously articulate their thoughts whenever feasible, rather than speaking on their behalf

## Assessment of Social Phobia among Secondary School Students In Thi-Qar Governorate–Iraq

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