GENDER DIFFERENCES IN SOCIAL ANXIETY AS PSYCHOLOGICAL PROBLEMS OF STUDENTS IN NIGERIAN TERTIARY INSTITUTIONS: IMPLICATION FOR COUNSELLING

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Abstract
Many Nigerian children, adolescents and adults have suffered from school anxiety and other psychological disorders through the breath of the educational system. This paper highlights types of social anxiety and the study was designed to investigate gender differences in social anxiety as psychological problems of students in tertiary institutions in South-Western Nigeria. The sample for the study was six hundred and six (606) students consisting of 374 females and two hundred and thirty two (232) males randomly selected from six (6) tertiary institutions in Ogun and Lagos states. The instrument for the study was a structured questionnaire Tertiary Institution Students' Social Anxiety Scale (TISSAS) designed by the researcherwas used for data collection.Three research questions and one hypothesis were formulated to guide the study, while t-test was used to analyze the difference in the males and the females social anxiety in all the problem areas at .05 level of significance. Results indicated a significance difference in the general male and female social anxiety problems. Mean scores of the female highest ranked social anxiety is 3.17 ($\bar{X} = 3.17$) while male respondents mean highest rank is 3.00 ($\bar{X} = 3.00$) this showed that female mean score was found greater than the male. There was also significant difference with regards to specific/very severe social anxiety problems of the two groups. Implications of the findings for social anxiety counselling/Cognitive Behavioural Therapy (CBT) were drawn and areas of further studies suggested.

INTRODUCTION

Anxiety is a natural response to stress but it becomes a major problem when it gets out of proportion and beyond one's control. Anxiety disorder is a psychological disorder that is characterized with extreme feelings of fear and apprehension. It comes with much worries, dizziness, trembling, inability to relax, heart racing and nervousness.An unprepared examination or speech, meeting a new date, sporting competition, preparing for job interview are all anxiety-provoking situations which encounter in the course of the living (Unachukwu, Ugokwe, Ossai and Ucheagwu, 2015).

Social anxiety/Phobia is nervousness in social situation, it is the fear of being the centre of attraction/attention, being evaluated negatively or showing physical signs of anxiety in social situations. This usually leads to avoidance of certain situation such as social gathering and job interviews, debate, teaching practice exercise, term paper, seminar and conference paper presentations etc.

Good mental health motivate/ignite boldness and this is the backbone of allround development of the human personality. The more a society is endowed with greater number of citizens with good mental health the better for its progress. The Nigerian National Policy on Education (2004 revised edition) states that all round development and fulfilment of the individual learner as one of the Nigerian National Education goals recognizes the importance of good mental health as a vehicle for achieving the stated educational purpose. Guidance and counselling services according to the National Policy on Education (2006) was introduced into the educational system to address the problem of personality, maladjustment among learners. Psychologists and Counsellors believe that social anxiety and personality maladjustment, are signs of poor mental health. They considered good mental health – free from social anxiety as an issue of major importance in achieving the general and academic development of learners at all educational levels. They considered academic achievement as being dependent on the quality of learners' mental health and Nworah (2018) posited that for an individual to effectively function in a human society, he/she should be able to relate and interact with members of the society. Theindividual is expected to behave in ways acceptable to the members of the society. School being an agent of socialization should endevour to eradicate social anxiety among students of tertiary institutions.

Hence, this study is anchored on identifying types of social anxiety based on the lebowitz social anxiety scale.

0 - 54	:	Mild social anxiety
55 - 54	:	Moderate Social Anxiety
66 – 80 :	Marked Social Anxiety
81 – 95 :	Severe Social Anxiety and
96+	:	Very Severe Social Anxiety

Then the Counselling Services needed (CBT) and reinforcement to maintain good mental health and the student will be alert mentally, physically, socially and motivated to learn.

Since anxiety is defined as the fear of being judged and evaluated negatively by other people, leading to feeling of inadequacy, inferiority, self consciousness, embarrassment,

humiliation and depression. If a person usually becomes (irrationally) anxious in social situations, but seems better when are alone, then "socialanxiety" may be the problem.

Literature Review

Although anxiety is accepted as part of the learning process, there is little thought given to the impact of social anxiety. Yet social anxiety in learning situations such as seminars and presentations can inhibit students' participation and impair the quality of student life. The article considers the evidence, the reason for its relative invisibility and the options for supporting students with social anxiety that could be more widely used.

How many readers of the psychologist have never felt anxious about meeting new people or being interviewed for a job? Who has not worried about comments on their appearance, performance or personality? Such concerns are common and reflect our innate sensitivity to other people (Purdon et al, 2001). But these anxieties become problematic when individuals seriously doubt their ability to please friends, impress colleagues or panel of judges. As a result, they may develop a marked and persistent fear of social or performance situations (which) tend to be avoided or endured with extreme distress (Veale, 2003, p. 258).

This is Social Anxiety

The self-presentation model (of social anxiety) proposes that social anxiety arises in real or imagined social situations where people are motivated to make a desired impression on others but doubt that they will do so (Schlenker & Leary, 1985, P. 176).

While this conflict is probably familiar to us all there is a tendency to high standards among people with marked social anxiety (Anotony et al, 1998). They are over-critical of their current social performance and anxious about negative evaluation on future occasions. In the cognitive model of social anxiety, Clark & Wells, 1995 noted that when an individual enters a social situation certain beliefs and assumption are activated that are quite absolute in quality. "If I don't give the right answer I will fail", people can't see anything to like about me', etc. these beliefs originated in earlier life experience that have oriented the person to perceive certain situations as a threat to self – esteem.

The resulting anxiety inhibits participation in social situation and reinforces beliefs about personal inadequacy. Social performance situations commonly encountered by students in higher institution include: lectures, seminars, group projects, group presentation and employment interviews. They are expected to speak before a large group of unfamiliar people – 300 and above, in seminars, to discuss their subject with knowledgeable authority (usually the tutor).

The assessment of student presentation contributes to the degree of grading, and there is an expectation from employers that graduates will possess good interpersonal skills. This paper proposes that while transient anxieties arise in most students in response to the social performance challenges of learning in tertiary institutions, there is a significant minority for whom these lead to persistent, distressing anxiety and reduced engagement with learning.

Prevalence and Impact

A review of epidemiological studies in western hemisphere populations has Furmark (2002) pointed out that estimated lifetime prevalence of social anxiety range between 7 and 13 percent depending on the diagnostic threshold used. Within Universities, Russel and Shaw (2009) in the UK and Tillfors and Furmark (2007) in Sweeden have documented clinically significant levels of social anxiety in 10 and 16 percent of students respectively. Social anxiety often coexists with other mental health issues (Merikangas & Angst, 1995). It is evident in 20% of cases of adult depression (Chayan & Schentzberg, 2010) and is associated with alcohol and cannabis dependence (Buckner et al, 2008). Meta-analyses indicate that, for people suffering from persistent social anxiety, the quality of life and psychosocial functioning is significantly impaired (Olatunji et al, 2007).

If untreated, only one third of individuals attain remission from social anxiety within 10 years (Keller, 2006). The researcher further noted that identification and early intervention will be beneficial to individuals, families and the public purse.

Other researchers used survey methods with a population of over 1500 students at two universities, self selecting participants reported frequent anxiety inlearning situations that involved interacting with students and staff (Russel, 2008a; Topham, 2009). They described intense anxiety and embarrassment, physical symptoms (e.g sweating, blushing), self-consciousness, fear of critism, cognitive and behavioural impairment (forgetting, stuttering) and a tendency to dwell on past performance, students habitually avoided public situations such as lectures, seminars and project group/assignment by being absent or through non-participation symptom of social anxiety.

Social Anxiety and Learning

Socially anxious students miss out on learning opportunities by avoiding interaction, physically or psychologically. Attention to a caderoic information may be distracted by an excessive focus on their anxieties (Clark & Wells, 1995), while the ability to monitor and modify communication with colleagues and tutors may be distorted by fear of negative evaluation (Rapee & Heimberg, 1997).

But although it is distressing and causes disengagement from learning, there is limited objective evidence about the impact of social anxiety on academic performance in higher education. Studies have reported significant effects of social anxiety on failure to complete school (Van Ameringen et al 2003), failureto graduate and reduced income (Wittchen, 1999).

Yet two studies of the impact on academic performance and retention in first-year college students produced conflicting results (Strahen, 1998, 2003). In the first study, socially anxious students were more likely to withdraw from college, but in the second study social anxiety was not a predictor either of persistence at College or of academic achievement. Strahan (2019) further suggested that students manage despite this anxieties, but that institutions will vary in the anxiety provoking demands they place on students and thus in the potential for anxieties to impact on academic performance.

When participating in a seminar or presentation, socially anxious students judge their competence poorly (Austin, 2004), in Contrast & Conger, 1998); the threat of negative social evaluation persists regardless of academic achievement. In an undergraduate

programmes, academic materials become progressively more challenging, and anxieties rise where assessment include performance or presentation. Students are encouraged to make use of peer and tutor support, class interaction increases amongst those who are socially anxious.There is a growing conflict between their need to engage with the programme and with colleagues, and their fears of exposure and embarrassment. This approach-avoidance conflict has been reported by several researcher (e.g Todd et al, 2008) and is an important dynamic to appreciate in working with socially anxious students.

Some factors that make social anxiety a hidden disability
Given its prevalence and impact, why one wonders has social anxiety has not received more attention like other psychological disorders by universities and colleges?
The following are some of the factors:
- It is not easy to identify and it may be attributed to shyness, introvert hence being viewed as a personality trait rather than a problem.
  It is not obviously distressing – Andersen (2006) describe how MA students appeared confident and socially adapt in routine daily encounters, with their substantial anxieties in learning situations concealed until they were asked to present their work to peers and tutors.
  There may be an implicit belief in the academic community that anxiety is intrinsicto the process of learning, whereby over coping academic challenges builds confidence, and fears of social evaluation recede. Concern has been expressed that over focusing on anxiety and other emotions risks turning education into a therapeutic activity that diminishes rather than enhances the learner's sense of self (Ecclestone et al, 2005). Social anxiety may be unduly identified with pathology rather than maturation, and development for example Stewart and Mandrusiak (2007) found no significant difference in levels of self-reported social anxiety between student counselling clients and other students. Despite universities allocating and advertising considerable resources for student support, these depend on students feeling able to access them students with mental health issues are reluctant to seek professional help from university sources due to a fear of stigmatization (according to a university of Leicester student survey in 2000), while feelings of shame are particularly. Common in people with social anxiety (Gabberd, 1992). Thus there may be conflict for the student between wanting help and fearing to expose their perceived inadequacies. The sense of shame extends to contact with therapists and other potential helpers (including academic staff) such that sufferers require skilled and sensitive handling and when they do come forward (Eckleberry Hunt & Dohrenwend, 2005).

Finally, the government approach to higher education has been described as largely utilitarian; (O'Leary, 2007, p. 483), with its institutions being expected to contribute to national prosperity. O'Leary suggests that this has contributed to education culture where the ability to present oneself and one's work for critical evaluation is regarded as necessary for academic and occupational success. In this climate, the perception of the socially anxious student; ashamed to ask for help, is that the university and its staff are –albeit unintentionally – unsympathetic to their concerns.

Problem Statement

Socially anxious students miss out on learning opportunities by avoiding interaction, physically or psychologically. Attention to academic information may be distracted by an excessive focus on their anxieties (Clark & Wells, 1995), while the ability to monitor and modify communication with colleagues and tutors/lecturers may be distorted by fear of negative evaluation (Rapee & Geimberg, 1997). But although it is distressing and causes disengagement from learning, there is limited objective evidence about the impact of social anxiety on academic performance in higher education. Gender difference permeates the social, psychological and emotional environments within which Nigerian tertiary schools students were brought up.

Like Bodekale (1994) in Raliya and Mustapha noted gender issue in Nigeria and the world-over revolves around relationship between male and female. It relates to differentiation which sets two distinct but equal roles for males and females and also the suborfination and discrimination against feminine as a gender. In many social issues be observed, masculine gender is favoured.

With gender being a determinant of social, and psychological environments students in tertiary institutions are nurtured, it is expected that their social anxiety problems would be sex differentiated. These being the case, social anxiety couselling using Cognitive Behavioural Therapy (CBT), reinforcement and other psychological intervention should be gender sensitive. This is possible only with the availability of a research based data establishing the differences. It is on this basis that this study set out to achieve the following objective:

1. To investigate whether there is gender difference in the social anxiety problems of tertiary institutions' students.

Research Questions

1. What are the five (5) most serious social anxiety problems of the female students in higher institutions.
2. What are the five (5) most serious mental health problems of female students in higher institutions.

Hypothesis

H_{01}: There is no significant difference between the social anxiety problem mean scores of female and male students in higher institution.

Methodology

This study employed descriptive survey method. A sample of six hundred and six (606) respondent were randomly selected from six (6) tertiary institutions in Ogun and Lagos States. This number consist of three hundred and seventy four (374) male and two hundred and thirty two (232) female respondents from two (2) universities, two Collages of Education and two (2) polytechnics who willingly returned the scale duly responded to.

The instrument used was Tertiary Institutions Student Social Anxiety Scale (TISSAS) constructed by the researchers. The instrument consist of two (2) section (A and B). Section A requires the respondents' relevant personal data (bio-data) while Section B elicit

responses on social anxiety related problems rated on 5 points likert scale inline with the Lebowitz Social Anxiety Scale from mild = 1, to moderate = 2, marked = 3, severe = 4, very severe = 5.

The higher the rating, the more severe the respondent social anxiety problem.

The face validity of the instrument was established by three (3) experts in test and measurement (9 professor and two (2) chief lecturers). A prat from department of Federal University of Agriculture, Abeokuta (FUNAAB) and Two (2) Chief Lecturer from the Department of Psychology, Guidance and Counselling (that measured in measurement & evaluation) school of education, Federal College of Education, Osiele, Abeokuta, Ogun State.

As regards the validity, test-retest method was used in establishing reliability for the instrument. The reliability coefficient was 0.75. This was considered high enough for the study.

Result

Research question two: What are the five (5) most serious social anxiety problems of female students in higher institution.

Table 1: Female five (5) social anxiety problem with highest means

Social anxiety problem	Mean (x)	Position
Worried a lot how to carry on with daily tasks both at school and home	3.17	1st
Worried about securing employment after graduation due to inadequate information and man-know man issues in job opportunities	3.10	2nd
When in social situation, worried about people noticing I am experiencing anxiety symptoms such as blushing trembling sweating, stumbling over my words or staring	3.06	3rd
Imagine that other are judging me as anxious, weak, crazy, stupid, boring, intimidating, dirty or unlikeable when in a group setting	3.04	4th
Feel anxious or panicky presenting a seminar	2.99	5th

Table 1 presents five social anxiety problems of female respondent with highest mean scores in descending order. It could be seen that worrying a lot on how to carry on with daily task both at school and home, feeling anxious, or panicking deering seminar presentation, worry about people noticing that one is experiencing anxiety symptoms such as blushing, trembling, sivcating tumbling over words or staring in social situations, avoiding social situations because of anxiety.

Finally imagining that others are judging one being anxious, weak, crazy, stupid, boring, intimidating, dirty, or unlikeable when in a group setting in descending order are the five (5) most serious social anxiety problems of the female students in higher institution.

Research question II: What are the five (5) most serious social anxiety problems of male students in higher institutions

Table 2: Male five (5) health problem with the highest means

Social anxiety problem	Mean (x)	Position
When in social situation, worried about people noticing that I am experiencing anxiety symptoms such as blushing, trembling, sweating, stumbling over my words or staring	3.00	2nd
Feeling anxious or panicking presenting a seminar	2.97	1st
Imagining that others are judging me as weak, crazy, stupid, boring, intimidating, dirty or unlikeable when in a group setting	2.96	3rd
Job or anxiety	2.93	4th
Worried a lot how to carry on with daily tasks both at school and home	2.86	5th

From table 11 above it could be observed that the first and second most serious social anxiety problems of the males relate the education exercise issues. First is the feeling anxious or panicking presenting a seminar while the second relate to social situation, worried about people noticing that I experience anxiety symptoms such as blushing, trembling, sweating, stumbling over words or starting. These are followed by imagining that others are judging me as weak, crazy, stupid, boring, intimidating, dirty or unlikeable when in a group setting and avoiding social situation because of fear or anxiety. Fifth which is the least problem in the male category is the worrying a lot how to carry on with daily tasks at school and home.

Hypothesis Testing

HO1: There is no significant difference between the social anxiety problem mean scores of female and male students in higher institution

Table III:

Variable	Sex	N	Mean	SD	SEM	T	df	P
Social anxiety	Female	374	3.88	0.63	0.06	5.62	301	0.00
Problems	Male	232	2.48	0.49	0.04			

T – 5.62 significance at $p<0.05$

Calculated t value of 5.62 for hypothesis 1 is significant at $p<0.05$. This is an indication that a significant difference exists between the social anxiety problem mean scores of female and male students in tertiary institutions. Hypothesis 1 which states that there is no significant difference between the social anxiety problems mean scores of the female and male students in higher institutions is therefore rejected.

Discussion

The result of the analysis of hypothesis 1 reveals a significant difference between social anxiety problems of female and male students in tertiary institutions. This findings is not unexpected for the fact that social anxiety by nuture which according to Afolabi and Alaku (2008) consist of social structures, psych-social and emotional environment to which an individual was brought up. Observably, gender differentiation is evident in the way females and male are brought up as children, students, parents, workers etc in Nigeria globally.

Considering the mean scores of the female and the males, it is glaring that the mean of the female is higher than that of the male (female 3.88, male 2.48) which implies that the female experience greater social anxiety problems that the males.

This is inline with Adrian (2019) which posited that social anxiety disorder (SAD) is more common in women. It tends to appear in the early teen years and mainly in those who are shy. For some people, it may not start until they are young adults.

Other factors that may make the risk of SAD higher:
- A parent, brother, or sister with SAD over protection or harsh parenting may also play a role.
- Mental health conditions – most people with SAD are also likely to have:
    o Generalized anxiety disorder, panic disorder, bipolar disorder, depression
- Medical conditions such as asthma, obesity, or heart diseases
- Worry caused by problems with stutter, hearing seeing, or burn or injury scars.
- Problems with alcohol or substance use
- Childhood issues such as physical or sexual abuse, early separation from parents, or problems in school.

This finding also agreed with Unachukwel et al (2013) that instituted that general anxiety disorder people with generalized anxiety disorder worry, a lot over trival issues and they pass most of their nights awake. It is characterized with uncontrollable and constant anxiety of definable cause, which last for a long time. The disorder is more prevalence in women, especially those above the age of 24. Such women worry a lot about how to carry on with their daily tasks, both at home and in the offices. As those worries pile up, the victims experience constant irritability, lack of concentration, restlessness, fatigue and they even loose confidence in their abilities to manage such worries. Thus, they become functionally distorted and unable to carry on with their normal lives. Since the females experience subordination and discrimination in most aspect of their psycho-social environment as stated by Bodekale (1994) in Raliya and Mustapha (2010), it is expressed that they experience more intense social anxiety problems than their male counterparts. Thus, this finding is compatible/obliged to expectation.

Further differences that could be observed in the social anxiety problems of students in higher institutions is in the specific areas that constitute a greater worry to them and indicated in table I and II above.

From the tables it could be observed that:
i. While worried of how to carry on with daily tasks both at school and home constitute the greatest worry to the female, it is the last for the male. This could be attributed to the fact that female are known as home keeper / backbone of family and marriage whether single or married while male are not that makes it least in .

ii. Career or employment problem ranked 2nd for the females but 3rd for males. Possible explanation for this finding is the changing role of females. Economic hardships has turned some females into breadwinners, family disintegration, martial crisis, and the campaign for gender equality seem to

                  have made employment a crucial issue to females, and fear of employment a serious problem.

iii.   Surprisingly social problem anxious as panicky presenting a seminar (education exercise) featured as the 1st and 2nd for the male which signified shyness, which does not constitute the greatest worry to the female because of their divided attention in daily task and job opportunity hence it ranked 3rd and 4th as social anxiety female problem.

iv.   For the women/female, the third highest social anxiety problems is social situation, worried about people noticing that I am experiencing anxiety symptoms such as blushing, trembling, sweating, stumbling over my words or staring, which could be attributed to their subordinated position in the society. It could also be connected to the self concept problem that led to imagine the others are judging me as anxious, weak, crazy, stupid, boring, intimidating, dirty or unlikeable when in a group selting which constitute the fouth (4th) ranked problem for the female.

v.   Finally female 5^{th}highest social anxiety problem is feeling anxious or panicky presenting a seminar which is male 1st highest social anxiety problem. This is attributed to female divided attention.

Implication of Social Anxiety for Counselling
This study discovers a significant difference between the female and male in higher institutions with the females' mean score being higher than that of the males. Meaning, that the females' social anxiety problems are more serious than that of the males and thus social anxiety problems intensity could be reviewed as being gender differentiated. The implication of this finding is that social. Anxiety counseling intervention in institutions of higher learning should, generally speaking, reflect the students' gender. The female requires more urgent and intense counselling service since their social anxiety problems are more serious / severe .

Comprehensive Cognitive –Behavioural therapy (CBT) must be established in higher institution to be use in treating marked. Severe, and very were social anxiety which that of milkd and moderate will be under the control of psychologist and counsellors and instil in them not believing every thing they hear or read.

Overcoming social anxiety the client should be advice to change his/her thought and belief, have positive thoughts to dwell on.

Counselling will lay more emphasis on the social anxiety client to enjoy positive, motivating music from some who has had social anxiety disorder and overcome a lot.

Also focus on laughter as a strategy against social anxiety.

Another aspect of gender difference in the social anxiety problems of students in higher institutions is the area of seriousness of specific problems. The female's and men's five (5) most serious problems in descending ordervary greatly. Consequently social anxiety counselling services should be individualized with relative intensity of each of the problems of both sex in mind.

Observing the mean scores of the social anxiety problems of both the male and the females, it is obvious that they are on the higher end of the continuum with both means being above 2.00. This result suggests the urgent need for cognitive behavioural therapy/social anxiety

counselling intervention for both males and females in higher institutions of learning particularly in sepecif areas of social anxiety problems under study.

Conclusion

Social anxiety being the third largest mental health care problem in the world today are issues that cause worries to individuals and as such inhibit people's emotional well being students with persisitent' troubling social anxiety fail uncomfortably between pedagogic and psychological perspectives.

i.   Genetical, some social anxiety problems may occur more often in families where there is a history of anxiety (nature)

ii.   Biologically, gender as centre of the study and age are believed to affect the rates and prevalence of social anxiety, illness especially when combine with other environmental factors.

iii.   Environmentally, stresses due to finances, relationships, family background and access to health care and social supports are also believed to effect social anxiety (nuture).

Such problems are numerous and inexhaustible in a single research study. A dew of these problems are studied among students in higher institutions with regards to gender difference. Same or other problem call for further studies in primary and secondary institution of learning. This will help to provide more valid and current data for counsellors and psychologists in their effort towards ensuring socially free anxious students, mentally balance that will facilitate effective learning among undergraduate and post graduate students in institutions of higher learning in Nigeria.

Recommendations

Parents and guardians should combine with psychologist, counsellors to reduce social anxiety disorder (SAD) among the students of higher learning through counselling services.

However, the researcher posited that creation of reading group freshers & first year students should be one of the point for discussion during student orientation and mandatary term paper/seminar presentation in all the semester as requirement for final award if certificate those will eradicate social anxiety problems among student.

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