Original Research Article

The Severity of Social Anxiety Disorder among Nursing Students at the University of Tabuk

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Abstract

Background: Social Anxiety Disorder (SAD) or known as social phobia is an excessive fear of interacting with people and a fear of being evaluated negatively by others. The person has extreme concerns about being exposed to possible scanning and social fears or performance situations in which embarrassment may occur.

Objective: This study aimed to measure the severity of social anxiety disorder and its associated factors among nursing students.

Methods: This is a descriptive, cross-sectional study. The participants were 138 nursing students of the University of Tabuk. Data were collected using a SPIN self-administered questionnaire.

Results: The findings revealed that the prevalence of SAD among the nursing students was very severe (2.2%), severe (6.5%), moderate (13.0%), mild (18.1%), and no social phobia at 60.2%. This showed no significant relationship between the severity of SAD across the demographic profile (P=>0.05).

Conclusion: About 40% of nursing students suffered from mild to severe social anxiety disorder which may affect their academic performance. Nursing leaders should conduct awareness programs and educational activities to lessen SAD among nursing students.

Keywords: Social Anxiety Disorder, SAD, Social phobia, Nursing Students, Saudi Arabia

Introduction

The prevalence of social phobia varies between different countries and cultures with a reported rate of 7-13% in western countries, 10% in India, and 11.7% in Saudi Arabia[1]. Social Anxiety Disorder (SAD) or known as social phobia is an excessive fear of interacting with people and a fear of being evaluated negatively by others. The person has extreme concerns about being exposed to possible scanning and social fears or performance situations in which embarrassment may occur. It is frequently comorbid with other anxiety disorders such as depression, disruptive disorders, and substance use[2]. Researchers believed that the etiology emerged from the combination of genetic and environmental influences and usually developed between early adolescence and the age of 25 with a higher prevalence of specific phobias in the general population, especially in children[7].

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The concept of social phobia has been used to describe a patient who is scared of being watched while talking in public, or speaking to another gender, and has symptoms of shame, isolation, and worst experiencing physical symptoms of anxiety[3,7]. If symptoms of SAD are heightened or continue to experience social anxiety, this will lead to significant work, educational, and interpersonal impairments in adulthood[2]. Social phobia patients do not suffer from skill impairment but they suffer from anxiety that prevents them from the proper use of skills in social interactions or performance impairment. With this, student nurses may affect their soft skills in interaction with their respective patients which may improve through strengthening the nursing students' communication skills to treat social phobia[4].

A study in Saudi Arabia was conducted to know the prevalence of SAD among 1447 medical students with a result of 92.2 % suffering from mild to very severe social phobia with 20.3% very severe cases for females while 19% for male[1]. Similar high prevalence results for female students (16.3%) suffered SAD in Taif University which is also associated with obesity, smoking, and parental death with a P=<.001)[21]. Another cross-sectional study was conducted in Abha, Saudi Arabia with a 59.5% prevalence rate of social phobia among medical students which also affects students' academic performance such as avoiding oral presentations, poor performance in clinical examinations, and an overall educational performance[9].

There is a high prevalence of social phobia among health sciences students (31.2%) in Ghondar, Ethiopia with and highly correlated to female, poor social support, first year students, and living in rural area[5]. Though there is a high prevalence of SAD (39%, 30% and 16%) corresponding to mild, moderate and severe respectively among adolescent students in Oduduwa College, Ile-Ife, Osun state, Nigeria, however, there is no significant association with the gender as opposed to the study in ethiophia[7]. A longitudinal study conducted among Finnish adolescent students showed a consistent relative association of social phobia among male with poor educational progress and problem in interpersonal relationship with their close friends, romantic relationship and poor support system with their significant others which has a opposite result as to female, however, there is a predictive depressive symptom for both gender[10]. The nursing students of the University of Jos in Nigeria suffered extreme social phobia for about 31.1% of the respondents. Moreover, the study concluded that self-esteem may influence and be associated with social phobia.

Social phobia may severely impact nursing students' academic performance both in the theoretical and clinical aspects, thus, may also affect the relationship with their respective patients as a care provider through providing important information such as giving feedback to patients' condition, explaining medical information, and managing patient condition. With the current studies about social phobia, it is apparent that there is a high prevalence of SAD to adolescent students, medical students, and nursing students however there are opposing results to the association of the socio-demographic profile and the occurrence of social phobia. It is also noted in the studies that SAD affects students' performance and interpersonal relationships. The interpersonal relationship is an essential component in improving nursing students' clinical competencies and strengthening nurse-patient relationships. Since there are few research studies about SAD that focus to nursing students in the Kingdom, prompted the researcher to conduct this study to evaluate the extent of severity of social phobia among nursing students in the University of Tabuk to serve as a springboard in creating educational program to reduce if not eliminated this psychological problem of the students.

Method

Research Design & Setting:

This study employed a descriptive- cross sectional design conducted at the Department of Nursing, faculty of Applied Medical Sciences, University of Tabuk. The University is located in the Northern part of Saudi Arabia near the border of Jordan.

Population and Sample

The population of the study were the 230 nursing students in the A.Y 2019-2020. A Raosoft sample size calculator was utilized to compute the sample size of the study which is 145 with 5% margin of error and 95% level of confidence.

Data Collection

Data collection started after the ethical approval from the Department of Nursing from January 01, 2020 to March 31, 2020. Google form was used for the questionnaire together with the informed consent to ease the facilitation of data collection. The consent letter specifically states the purpose of the study, risks and benefits, the procedure of the study, anonymity, and confidentiality of the data taken from the respondents. Contact information was also provided to them just in case of clarifications and questions regarding the study. The retrieval of data was automatically received by the researcher once the respondents submitted after completion of the questionnaire.

Instrument:

The first part of the instrument is the demographic profile of the respondents. The second part is the Social Phobia Inventory (SPIN), structured and adopted with permission to Dr. Jonathan Davidson to utilize as a questionnaire of this study[6]. The Social phobia has a 17 items SPIN scale with cut-off point's ≥21. Its score ranges from 0 to 68, which was rated from 0 (not at all) to 4 (extremely). Scores of 20 and below are generally not indicative of social anxiety. Scores in the 21-30 range are indicative of mild social anxiety. Scores in the 31-40 range are indicative of moderate social anxiety. Scores in the 41-50 range are indicative of severe social anxiety. Scores of 51 and above are indicative of very severe social anxiety[6].

Data analysis:

The collected data was entered and analyzed using the Statistical Package for the Social Science (SPSS) version 23. Descriptive statistics were performed. Percentages will be given qualitative variables. The determinant factors will be determined using the Chi-square test. P-value will be considered significant if $P < 0.05$.

Ethical considerations:

Ethical Approval was obtained by the Research Ethics Committee of the Department of Nursing. The consent form includes the purpose of the study and the proponent's contact details to answer any clarification, doubts, and questions to maintain non-maleficence throughout the study process. The risk was mentioned, and no financial compensation will be given to the respondents to prevent bias and ensure justice. The respondents were guaranteed their rights to participate in the study voluntarily without coercion or deception. They were free to withdraw from participation at any time with no consequences. The data were stored, in a safe device, with a secure password to maintain confidentiality. The data were stored in a password-encrypted computer, and any other identifying participant information was in a locked file cabinet in the personal possession of the researcher. Information from this research was used for this project and possible secondary analysis within the period mentioned above.

Results

The research questionnaire reached 142 possible respondents and retrieved 138 valid questionnaires. There were 57.2% female and 42.8 male respondents who participated in the study. The GPA of the students were as follows; < 2 in 0.7%, 2 – 2.99 in 5.8%, 3 – 3.99 in 35.5% and 4 – 5 in 58%. Most of the respondents in the second year comprised 40.6%, followed by the fourth year (39.9%), and the 3rd year got the lowest respondents (19.6%).

Findings shown in table 1 revealed that 60.2% of the respondents has no social phobia and the 39.8% of the respondents suffered from mild to very severe social phobia, which corresponds to; very severe (2.2%), severe (6.5%), moderate (13.%), and mild (18.1%).

Table 1: Severity of social phobia among nursing students(N=138)

Severity of social phobia		
Parameters	**Frequency**	**Percentage**
No social phobia	83	60.2
Mild social phobia	25	18.1
Moderate social phobia	18	13.0
Severe social phobia	9	6.5
Very severe social phobia	3	2.2
Total	138	100.0

Table 2 showed the severity of SAD in relation to the demographic profile. The result yielded that the severity of SAD has no significant correlation across the demographic profile; gender (P=0.358), educational year level (P-value= 0.817), and GPA (P-value= 0.105).

Table 2: severity of Social phobia in relation to gender, Educational year level and GPA

	Social phobia					Total (N=138)	P value
	No Phobia (n=83)	Mild (n=25)	Moderate (n=18)	Severe (n=9)	Very severe (n=3)		
Gender							
Female	50	11	10	5	3	79	0.358
	63.3%	13.9%	12.7%	6.3%	3.8%	100.%	
Male	33	14	8	4	0	59	
Educational year level							
Second	34	12	6	3	1	56	0.817
	60.7%	21.4%	10.7%	5.4%	1.8%	100.%	
Third	18	5	2	2	0	27	
	66.7%	18.5%	7.4%	7.4%	.0%	100.%	
Forth	31	8	10	4	2	55	
	56.4%	14.5%	18.2%	7.3%	3.6%	100.%	
GPA							
less than 2	0	1	0	0	0	1	0.105
	.0%	100.0%	.0%	.0%	.0%	100.%	
2 -2.99	5	2	1	0	0	8	
	62.5%	25.0%	12.5%	.0%	.0%	100.%	
3 – 3.99	23	10	12	4	0	49	
	46.9%	20.4%	24.5%	8.2%	.0%	100.0%	
4 – 5	55	12	5	5	3	80	
	68.8%	15.0%	6.2%	6.2%	3.8%	100.0%	

Table 3 shows the Range, Minimum, Maximum, Mean and Std. Deviation Social phobia score in different educational year levels, GPA and Gender of the studied students. There was no significant difference in Mean social phobia score level in gender, study level and GPA (P> 0.05).

Table 3: Range, Minimum, Maximum, Mean and Std. Deviation Social phobia score in different educational year levels, GPA and Gender of the studied students

	Range	Minimum	Maximum	Mean	Std. Deviation	P value
Educational year level						
Forth	54	1	55	21.65	13.768	0.241
Second	51	0	51	18.80	11.993	
Third	49	1	50	18.22	13.051	
GPA						
less than 2	0	27	27	27.00	–	0.163
2 - 2.99	36	1	37	17.00	12.118	
3 – 3.99	43	0	43	21.94	12.719	
4 – 5	54	1	55	18.72	13.151	
Gender						
F	53	2	55	20.39	13.083	0.108
M	46	0	46	19.07	12.783	
Total score						
Total score	55	0	55	19.83	12.925	

Discussion

This study revealed the prevalence of social phobia of the nursing student at the University of Tabuk. The respondents were 138 nursing students of different gender and different educational years. Most of the respondents were females (57.2 %) and males (48.8%) nursing students of the Department of Nursing, Faculty of Applied Medical Sciences, University of Tabuk. The domination of females in nursing is supported with numerous studies in Saudi Arabia[1] and Jordan[3]. Most of the respondents GPA falls under 4 – 5 (58%) and most of the respondents were second year (40.6%).

The findings revealed that the prevalence of severity of social phobia was very severe in 2.2% of the total students, severe at 6.5%, moderate at 13. %, mild at 18.1% and no social phobia at 60.%. A similar study conducted among medical students in Saudi Arabia in which SPIN was used with the following results, prevalence of SAD was 29% and 24.3% had mild and moderate social phobia respectively, severe and very severe social phobia represented 19.1% and 19.8% respectively, and 7.9% didn't suffer social phobia[1] which is in contrast with the current results of the study. There was a higher prevalence of SAD among the medical students in King Khaled University where very severe was (19.8%), severe (19.1%), moderate (24.3%), and mild (29%)[9]. The variations of results could be the nature of the course, educational level, GPA, and the setting of the study.

In the current study social phobia degree had no effect and no significant correlation with the GPA (P-value= 0.105) with similar result in Finland where there was no significant association between SAD and lowering of GPA during the last year (10), GPA didn't affect by the different severity of social phobia grades with a P-value=0.3(1), and there is no significant correlation between the academic performance in Kerman University of Medical Sciences, Iran[18]. However, an opposite result in another study in Saudi Arabia where the medical students who suffered SAD showed lower academic achievements[9].

This current study revealed a negative correlation between gender and social phobia (P-value= 0.358), with an opposite finding that yielded that male had higher social phobia scores than females[5,9]. A study in a western country found that social phobia was more common among females[12]. Females were 2.3 times more likely at risk of increasing social phobia compared to male students due to cultural and biological factors that may present in gender differences in social and anxiety disorders[5] as females are not equally participated in all activities because of cultural influence when compared to males[13,14].

This study showed no significant correlation between educational year levels and social phobia (P-value= 0.817). In contrast, the 1st and 2nd-year students were highly at risk of social phobia in other studies where students were forced to live far away from their parents to attend their classes in the University[15,16]. Students studying in the 1st year were 5.5 times had social phobia compared to 5th-year students[5]. There was a significant difference between different social phobia levels (P-value=0.004) among medical students, where more students in year 3-4 and 5-6 suffered different social phobia levels than those in year 1-2 and year 7[1].

Stress and environmental factors play a role in interpersonal stressors and thus can contribute to the development of social anxiety and differences in background, appearance, language, social and emotional development, all can affect whether or not a student fit in the university[17]. Social phobia usually affects some other factors. In India, medical students coming from low socioeconomic class were at high risk of social phobia during their education[19], and school-age adolescents from urban residence had insufficient income families were more at risk of social phobia[20].

Conclusion

About 40% of nursing students suffered from mild to severe social anxiety disorder which may affect their academic performance. Moreover, there are no significant correlations between severity of SAD and across the demographic profile of the respondents.

Nursing leaders should conduct awareness programs and educational activities to lessen SAD among nursing students.

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