



CONTRIBUTION OF SOCIODEMOGRAPHIC FACTORS TO SOCIAL ANXIETY AMONG EARLY ADOLESCENTS

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Abstract

Social phobia, also known as social anxiety, is an unusual, excessive fear of being judged, humiliated, and performing in public. The study aimed to investigate the association between social anxiety among adolescents and the contributing sociodemographic variables such as age, gender, family size, hobby, peer relationships, trauma, and support system. The sample was collected from 54 respondents studying at a government school in Tiruchirappalli using a simple random sampling technique. The researcher used the Liebowitz Social Anxiety Scale for Children and Adolescents (LSAS-CA-SR) for data collection, and the tool is designed to assess fear and avoidance based on two dimensions: performance and social interaction of social anxiety. The findings were analyzed using SPSS and found a moderate level of fear in both the dimensions of performance and social interaction (51.9%); a moderate level of avoidance in both the dimensions of performance and social interaction (46.3%); and overall social anxiety (48.1%). With respect to the sociodemographic variables, gender is one of the more significant factors than the other sociodemographic variables in understanding social anxiety, and females have higher social anxiety than males. Further research is needed to determine the underlying cause of the gender difference and to analyze other sociodemographic factors.

Index Terms – Social anxiety, Adolescents, Gender, Fear, Avoidance, Trauma, Peer Victimizations

I. INTRODUCTION

Adolescence is a remarkable milestone in the human life cycle. According to the WHO, the adolescent age range falls between 10–19, and based on the statistical report of UNICEF, the total adolescent population is 253 million; it covers 20% of India's entire population, which is highly largest when comparing the other countries. During this stage, individuals develop in an all-round manner- physically, emotionally, mentally, and socially. This is the stage where the individual expands their learning, social circle, rational thinking, and expects autonomy in entirety. Throughout this stage, they acquire a foundation for well-being, and they are shaped both internally and externally through what they experience and observe. In the course of development, adolescence experiences tremendous ebb and flow in the evolution of psychological progress. As seen in the school context, adolescents with Social Anxiety Disorder (SAD) face difficulties initiating conversations, writing on the board, mingling with peers, and participating in events. Growing up with these symptoms in an untreatable way automatically exacerbates the situation in the future (Chavira et al., 2005).

Social anxiety refers to fear of socialization, being evaluated, and being humiliated by other people. Generally, people with SAD avoid social participation, are anxious about eating, speaking, performing, and writing in front of others, and usually deny the circumstances which imposes them to the public. About one in eight people with SAD develop substance abuse, and one in half develop major depression (APA, 2013 & DSM V). The onset of social anxiety begins in the early period of adolescence, before 18 (Knappe et al., 2015).

Family is the primary institution where the child acquires the foundation for learning and survival. Family is considered the major support, individual those with good family support come across every difficulty in a smooth way. Maglica et al. (2021) expounded the attribute of family rendered vital role in the psychological well-being of adolescents, and one of the noticeable factors is the father's educational level, financial status, and the mother's age, contributing to the mental health of the adolescents. Regarding parenting styles and social anxiety, Mathijs et al. (2024) revealed that excessive parental protection and frequent worries made adolescents unable to handle difficult situations and created complete reliance on parents, resulting in inappropriate emotional regulation in adolescents. Thus, overprotection partially became the reason for increased social anxiety in adolescents, which leads to difficulty in emotional management. A healthy and supportive family environment reflects low social anxiety and a good level of emotional intelligence; conversely, adolescents with social anxiety struggle with emotional intelligence. The study clearly showed that there is a link between family environment, emotional intelligence, and social anxiety (Padir, 2025).

Gender is constructed socially and culturally; society has imposed traits, expressions, and behaviors, categorized for males and females separately. Comparing male, female goes through lot of psychological disturbances because of societal expectations to fit into a box. Together with manifold sociodemographic details, gender shows more linkage with social anxiety in many studies. In the study on Northwest Ethiopia adolescents' social anxiety and its contributing factors, it was found to be higher in females than males (Nakie et al., 2022).

Peer victimization is an encounter with being embarrassed, harassed, illtreated by peers. It is common among children and adolescents. Adolescents who experience loneliness, both emotionally and socially, and social anxiety because of the inability to build rapport with peers become secluded and create the possibility of going through peer victimization in the future (Acquah et al., 2016). A longitudinal study has identified a connection between loneliness and social anxiety by treating both as one problem rather than perceiving them as two different problems. Treating these could potentially build good peer relationships (Chen et al., 2023).

School is the second place where the person spends most of their time after the family. It shapes children in all aspects. Whereas, the personal experience of being cared for, valued, and support offered by peers and teachers replicates the perceived support by the adolescents. Kapoor et al., (2021) found that adolescents from disturbed school environments who perceived rejection by peers reported high social anxiety. The children who receive firm peer support exhibit the same level of mental health as children receiving support from both family and peers (Butler et al., 2022). Maheswari and Martin (2022) revealed that sub-dimensions of self-concept showed that less than half of the respondents perceived low levels of anxiety (42%), behaviour (48%), and moderate levels in happiness (42%) and intellectual status(42%), and self-awareness plays a vital role in improving anxiety levels as well as the personality of adolescent school students.

Education is a vital part of development in all aspects. Leigh et al. (2021) found that there is an indirect effect of social anxiety on educational achievement through reduced concentration. Social anxiety overshadows educational goals and school life. A study among Norwegian adolescents found that adolescents with higher social anxiety showed discontent in school life, learning challenges, irregularity in school attendance, and social exclusion (Jystad et al., 2021). The exploration of the impact of social anxiety among adolescents in Macedonia identified that social anxiety negatively affects academic achievement; as social anxiety increases among the adolescents, their academic performance decreases, with avoidant and anxious behavior (Saliu & Sadiki, 2025). Rajeswari and Maheswari (2026) indicated that 32 percent reported suffering from Anxiety due to mobile usage. Problems are triggered by mobile usage and have become an important concern for parents, and it harms the physical health and psychological health, academic performance, and personality of adolescent school students. Many studies have been done investigation on the social anxiety among adolescents in urban, private institutions, and clinical populations. Only finite studies has done in government schools. This present study aimed to describe the social anxiety among early adolescents and its interrelationship with various sociodemographic variables in government school students in Tiruchirappalli.

II. RESEARCH METHODOLOGY

The study aims to understand the levels of social anxiety among early adolescents. This study is aligned with objectives such as studying the socio-demographic details, assessing the levels of social anxiety, finding the association between the selected socio-demographic variables and social anxiety, and providing suitable suggestions to overcome anxiety among early adolescents.

A descriptive design was used for the study, and a pilot study was conducted at Bharathi Matriculation School, Tiruchirappalli, to assess the feasibility of the study. The study was conducted among eighth-grade students at

Murthusha Government Higher Secondary School, Tiruchirappalli. The universe of the present study consists of all the 8th-grade students (N=80) at Murthusha Government Higher Secondary School. A pre-test was conducted with 5 students, and no changes were made to the interview schedule. The study included male and female school students, while students who were absent, unwilling to participate, outside the intended age range, or writing examinations were excluded. The researcher adopted a simple random sampling method to select the sample, and the sample size consisted of 54 students. The interview schedule method was used for data collection.

2.1 Measures

The Liebowitz Social Anxiety Scale for Children and Adolescents, self-report version (LSAS-CA-SR) by Dr. Michael R. Liebowitz. It is a standardized tool that consists of 24 items with two dimensions; 12 items are social interaction situations, and the other 12 are performance situations. This scale is used to measure the level of students' social anxiety based on fear and avoidance that might affect the students' skills. The analysis included frequencies, percentages, chi-square tests, independent-samples t-tests, and Karl Pearson's correlation.

III. RESULTS AND DISCUSSION

Table 1: Socio-Demographic Characteristics of the Respondents

Variables	Number of Respondents (n=54)	Percentage
Age		
12-13 years	7	13.0
14-15 years	43	79.6
Above 15 years	4	7.4
Gender		
Male	31	57.4
Female	23	42.6
Religion		
Hindu	34	63.0
Muslim	4	7.4
Christian	16	29.6
Mother's Occupation		
Self-business	5	9.3
Private	6	11.1
Government	1	1.9
Daily wages	42	77.8
Father's Occupation		
Agriculture	1	1.9
Self-business	17	31.5
Private employment	20	37.0
Government	6	11.1
Daily wager	10	18.5

The socio-demographic analysis revealed that the majority of the respondents fall within the 14-15 age group (79.6%). Within this cohort, males constitute the predominant gender (57.4%) and the remaining are females, correspondingly, Pilkioniene's (2021) study has revealed that females had more social anxiety than males. For females, residing with both parents reduced the level of social anxiety; it was also stated as a protective factor. Females with severe social anxiety experience stomach and abdominal pain. In terms of background, a significant majority of the participants identify as Hindu (63%). Furthermore, looking at parental demographics, majority of maternal occupation is categorized as daily wagers (77.8%), while private employment was the main occupation among fathers (37%).

Table: 2 Family and Socioeconomic Characteristics of the Respondents

Variables	Number of Respondents (n=54)	Percentage (%)
Domicile		
Rural	7	13.0

Urban	47	87.0
Type of Family		
Nuclear	37	68.5
Extended	12	22.2
Single-parent family	5	9.3
Family Size		
1 -3	4	7.4
4-6	44	81.5
7-9	2	3.7
Above 10	4	7.4
Head of the Family		
Father	43	79.6
Mother	3	5.6
Others	8	14.8
Monthly Family Income		
5000 -10,000	16	29.6
10,000 – 20,000	28	51.9
20,000 – 30,000	10	18.5

Based on the provided socioeconomic details] great majority of the respondents reside in Urban areas (87%) and live in nuclear families (68.5%), similarly Gruning et al.(2024) found the impact of family composition and socioeconomic status on the mental well-being of children with a sample size of 2828 children (ages 3- 17), and the results showed that children from non-traditional families, i.e., step-parenting or single-parenting families, exhibit higher behavioral and emotional issues, such as hyperactivity, inattention, poor peer relationships, and so on, than children from traditional families. Structurally, most families consist of 4-6 members (81.5%), with the father serving as the head of the family (79.6%). Economically, the largest proportion of these households falls into the monthly income of 10,000 – 20,000 (51.9%).

Table: 3 Leisure Activities, Social Relationships, and Parental Interaction of the Respondents

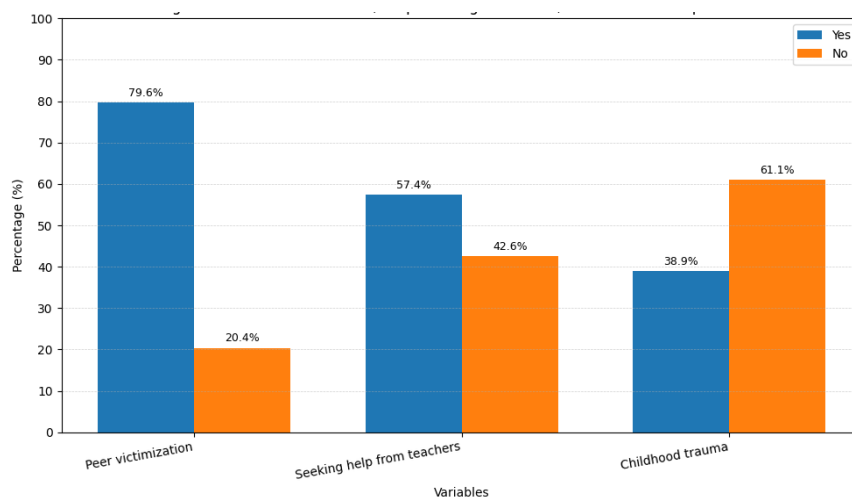
Variables	Number of Respondents (n=54)	Percentage (%)
Hobbies*		
Dance	6	11.1
Sports	24	44.4
Reading	2	3.7
Drawing	9	16.7
Using mobile	7	13.0
Others	6	11.1
Leisure Activities*		
Watching TV	28	51.9
Games	6	11.1
Playing games	25	46.3
Scrolling mobile	35	64.8
Painting	20	37.0
Sleeping	22	40.7
Having Close Friends		
Yes	48	88.9
No	6	11.1
Source of support		
Family	24	44.4
Friends	27	50.0
Teachers	3	5.6
Time spent with family		

1-2 hours	13	24.1
2-3 hours	9	16.7
3-4 hours	8	14.8
Above 4 hours	24	44.4

(*Multiple Response Questions – Hobbies & Leisure Activities)

From the above table, the most frequent hobby reported was sports (44.4%). In terms of leisure activities, scrolling on mobile stands out as a common choice (64.8%), watching TV (51.9%), playing games (46.3%), sleeping (40.7%), painting (37%), and games (11.1%). A great majority of the respondents (88.9%) reported having close friends. When it comes to their primary support, family (50%) is the most dominant option. Finally, regarding the time spent with family, the highest percentage of respondents (44.4%) spend more than 4 hours. The study by Martin and Maheswari (2025) found that support from family and discussing issues with family members had a considerable positive impact on self-esteem, anxiety, and assertiveness.

Figure 1: Distribution of Respondents by Peer Victimization, Help-Seeking Behaviour, and Traumatic Experiences



It is found from the figure that the majority of the respondents (79.6%) have never experienced peer victimization, in contrast to this, the study by Adeyemo et al., (2025), found peer victimization causes a higher level of social anxiety, specifically among females, vulnerable to it, and (20.4%) have experienced peer victimization. When it comes to seeking aid, more than half of the respondents (57.4%) are comfortable seeking assistance from the teachers, and less than half of the respondents (42.6%) are not comfortable seeking assistance from the teachers. A majority of the respondents (61.1%) have never experienced a traumatic event, and 38.9 per cent of them have experienced a traumatic event such as corporal punishment at school, physical abuse or verbal abuse, inability to cope, or a sense of fear and helplessness.

3.1 Social Anxiety

The findings indicated that the distribution of the respondents' overall social anxiety is moderate in terms of fear both in performance and in social interaction (51.9%), avoidance in terms of both performance and social interaction (46.3%), and overall social anxiety score (48.1%). A study demonstrated that various life experiences lead adolescents to experience psychological disorders; among them, social anxiety is the most prevalent and third most common disorder in this world (Binachi et al., 2020).

3.2 Association and Correlation Findings

Findings on various tests indicated that a statistically significant association was found between gender and overall social anxiety ($p = .002$). This result is broadly consistent with Pickering et al. (2020), whose systematic review identified gender-related patterns in adolescent social anxiety and highlighted peer relationships as relevant risk and protective factors. Having close friends, age, type of family, and hobbies did not show statistically significant associations with overall social anxiety ($p > .05$). A study on adolescent peer functioning by Chiu et al. (2021) found

that friendship quality, peer rejection, and peer victimization were prospectively associated with social anxiety, suggesting that the quality of social experiences may matter beyond the activity itself.

From the study, it is understood that, there is no relationship between family size and the overall social anxiety score, including its fear and avoidance. The results indicated that family size was not significantly correlated with overall fear ($r = .003$, $p = .985$), overall avoidance ($r = .016$, $p = .910$), or overall social anxiety ($r = .010$, $p = .942$). In contrast, Lei et al. (2023) found significant associations between social anxiety and insecure attachment ($r = .271$), parent-related family conflict ($r = .226$), and negative parenting styles ($r = .186$), and noted that cultural context influenced the strength of these associations.

In contrast, the study shows statistically significant positive correlations between fear and avoidance ($r = .580$, $p < .001$), fear and the overall social anxiety score ($r = .897$, $p < .001$), and avoidance and the overall social anxiety score ($r = .880$, $p < .001$). These findings showed that higher fear scores tend to accompany higher avoidance scores. The strong correlations with the overall score may partly reflect the fact that fear and avoidance contribute to the overall social anxiety measure. A similar finding by Howard et al. (2025) showed that fear and avoidance were positively correlated between each dimension of social anxiety. In a longitudinal study by Zimmer-Gembeck et al., (2021) on the aftermath of perceived rejection or criticism on social anxiety among Australian adolescents. Among all the factors, being rejected and its effects were more strongly associated with a higher level of social anxiety. At some point, it breaks self-esteem and confidence and it was more prevalent among females.

IV. SUGGESTIONS

- Individual counseling and school-based counseling have to be given to support the student in strengthening psychological well-being, developing coping strategies, and holistic development. If such kind of counseling is accessible for the students struggling with social anxiety or any other disturbance can cope effectively with the problems and have stable mental health .
- Skill training programmes for teachers can make them to identify issues among students, because these kinds of anxieties are misunderstood as behavioral issues and learning disorders by teachers. So such training program aids teachers to discern and handle the student in an appropriate manner.
- Parent counselling, it will help parents better understand social anxiety and aid them in building good rapport with the children/adolescents. The family is the first institution where the child learns the foundation to survive in the external world. In that way, parental counseling educates parents to bring up their children in a far better way, wherever the parent lacks awareness.
- Social skills training is one of the best ways to make the adolescent socialize, beginning with small group activities. It provides experiences such as initiating conversation, public etiquette, and overcoming public fear and hesitation, which lead towards ameliorate the socialization.
- Other than these, gender sensitive sensitization programs and peer strengthening programs are also helpful in reducing anxiety among the adolescents.

V. CONCLUSION

The study has identified that social anxiety is ubiquitous among early adolescents through the statistical analysis, the level of social anxiety was found to be moderate and a small proportion of the respondents show a high level of social anxiety in the school where the data were collected. It is still important to diagnose in the early period and to provide appropriate intervention. Because even this moderate level of social anxiety might develop gradually and hinder future development in studies, career, achievement, and personal life. Due to the examination, the school authorities permitted the acquisition of data from 8th-grade students, and so the findings cannot be generalized to all other adolescent age groups. The findings emphasize early diagnosis and school-based counseling and skills-based programs to further strengthen adolescents with social anxiety may enhance class participation, active learning, and build smooth peer relationships.

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