Intervention for Social Anxiety among University Students with a Solution-Focused Group Counseling Program

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Abstract

The aim of the research is to investigate the effect of a solution-focused group counseling program on reducing social anxiety of university students. The study group consists of 30 (16 female, 14 male) students who volunteered among 224 students who continue their education at Afyon Kocatepe University in the 2019-2020 academic year. The research had a 2x3 mixed pattern with experiment and control groups and pretest, posttest and follow-up measures. The Liebowitz Social Anxiety Scale (LSAS) was used as data collection tool. University students in the experimental group attended a 6-session solution-focused group counseling program about reducing social anxiety, while the control group did not participate in any study. After completing experimental processes, both groups underwent posttest and then follow-up measures at the end of 3 months. Data were analyzed with the two-way analysis of variance technique for mixed patterns. Results revealed that the solution-focused group counseling program was effective in reducing the social anxiety of university students and the efficacy continued during follow-up at the end of three months.

Keywords: Solution-Focused Group Counseling, Social Anxiety, Program, University, Student

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INTRODUCTION

In order for the social beings of humans to maintain an adjusted, balanced and regular life during their whole lives, it is undoubtedly very important not to break social bonds with other people and to maintain relationships. In the youth period, abandoning their original social groups and beginning university life is a habitual life cycle. However, during this period, young people may encounter significant difficulties in terms of adjustment (Deci & Ryan, 2004). Facing many personal and academic difficulties during this process, young people may experience emotional distress during their experiences and this may make the adjustment process even more difficult (Bolsoni-Silva & Loureiro, 2014; Mustafá, Hamdan-Mansour, Hijazeen, Abed, Abdallah, El-Haija & Omari, 2014; Wintre & Yaffe, 2000). In addition to these difficulties encountered during university life, young people with less interaction may feel inadequate and remain distant from their social environment (Ateş & Gençdoğan, 2017; Elemo, 2019). This worrying situation for young people is qualified as social anxiety and is defined as “individuals avoiding one or more social situations due to experiencing pronounced forms of fear or anxiety in relation to exposure to possible investigation or negative assessment by others” (American Psychiatric Association, 2013). In other words, it is defined as the tendency of individuals to fear or avoid situations that they think are examined or evaluated by others (Rapee, 1995).

There is a need for increased studies investigating treatment and therapy approaches related to social anxiety problems among young people. In the relevant literature, there are studies investigating efficacy based on psychological counselling approaches to overcome this problem and meta-analyses reviewing these studies. Studies aimed at reducing social anxiety in the literature are generally in the form of group counseling. It has been observed that these studies are based on cognitive-behavioral approach (Aydın, Sütçü Tekinsav & Sorias, 2010; Abeditehrani, Dijk, Toghchi & Arntz, 2020; Fogarty, Hevey & McCarthy, 2019; Mercan, 2007; Tillfors, Andersson, Ekselius, Furmark, Lewenhaupt, Karlsson & Carlbring, 2011), behavioral counseling approach (Beidel, Turner & Morris, 2000) and reality theory (Palancı, 2014). A meta-analysis completed in 2013 revealed that cognitive behavioral psychological counseling, exposure and social skills, supported self-help, unsupported self-help and psychodynamic psychological counseling were effective to cope with social anxiety; however, individual cognitive behavioral psychological counseling was more effective (Mayo-Wilson, Dias, Mavranezouli, Kew, Clark, Ades & Pilling, 2014). Another meta-analysis study stated that exposure, cognitive restructuring techniques and social skills education and a combination of these techniques were effective; however, studies based on cognitive behavioral approaches had higher effect magnitude. This result indicates that the cognitive behavioral approach was effective on social anxiety (Gil, Carrillo & Meca, 2001). In line with this knowledge, it appears that studies about coping with social anxiety problems have focused on cognitive approaches. In terms of coping with social anxiety problems, it appears there are studies based on solution-focused approaches, especially in the international literature (Baijesh, 2015; Elemo, 2019; Esmail, Alireza, Khadije, Esmail & Shima, 2019; George, 2008; Mahdiyar, Dadfarnia, Hadianfard & Rahimi, 2019). However, in the Turkish literature, it can be said that research based on a solution-focused psychological counseling approach to reducing social anxiety is quite inadequate. It is notable as an approach with efficacy in a short duration for this common problem among young people. In this context, the effectiveness of the solution-focused counseling approach as an alternative to other counseling approaches in dealing with social anxiety can also be tested.

Solution-focused counseling approach developed by Steve de Shazer and his team is accepted among counseling approaches in the whole world developed in the last fifty years in America. It is based on rules like “if it isn’t broken, don’t fix it”,”apply functional solution paths” and “don’t insist on trying dysfunctional solution paths, try different solutions”. People focus on solution paths instead of problems and assist in producing targets and solutions as experts in their own lives. Solution-focused counseling is a collaborative process that takes place between 4 and 6 sessions and puts the client at the center. The techniques and basic components of this approach are miracle question, exceptions, scaling questions, praise, homework, emphasizing strong aspects, searching for solutions...
and determining targets (De Shazer, 1985; De Shazer & Berg, 1997; De Jong & Berg, 1998; Doğan, 1999; Kim & Franklin, 2009; Simon & Berg, 1997; Sklare, 1997). In the context of these techniques based on the solution-focused approach, it is significant how the solution-focused approach provides a new dimension as an alternative to other problem-focused approaches for university students coping with social anxiety. It is thought that there is a need for solution-oriented studies and programs that can be used functionally in the field of psychological counseling to intervene in the social anxiety of university students. Additionally, the need for university students to integrate their daily life activities with society in more regular, adjusted and balanced fashion makes this topic important. For these reasons, in this study, it is tried to find answers to the questions about to what extent the program based on the solution-focused group counseling approach will contribute to reducing the social anxiety of university students. Within this target framework, the answer to the following hypothesis was researched:

Hypothesis: When university students in the solution-focused group counseling group and control group are compared, there will be a significant reduction in posttest social anxiety scale points compared to pretest points and this reduction will continue during follow-up measures performed 3 months after the sessions end.

MATERIALS AND METHODS

Research Pattern

This research is a quasi-experimental study using 2 x 3 split-plot factorial (mixed) pattern. The first factor in this pattern is the independent process groups of the experiment and control groups, while the second factor represents the dependent variable of repeated measures at different times of the pretest, posttest and follow-up measurements (Büyüköztürk, 2011). Due to field studies, it is difficult to provide real experimental design conditions, especially to assign randomly to groups. Therefore, quasi-experimental design offers greater flexibility for many applied researches. Quasi-experimental designs involve the manipulation of one or more independent variables as in real experimental designs. Random assignment of study participants is not included. It is as useful as possible in applied research due to both creativity in the use of patterns and appropriate use of statistical processes and controls (Heppener, Wampold, & Kivlighan, 2008). Therefore, quasi-experimental design was preferred in the framework of this research.

Study Group

The study group was selected from volunteer university students who received low scores by completing the "Liebowitz Social Anxiety Scale-Turkish Form (LSAS)" scale tool at Afyon Kocatepe University. The research was completed with a total of 30 university students with 15 in the experiment group and 15 in the control group. The study groups consist of 8 female, 7 male and 15 students.

Data Collection Tools

With the aim of gathering data in the research, “Liebowitz Sosyal Anxiety Scale” was used.

**Liebowitz Social Anxiety Scale-Turkish Form (LSAS):** Liebowitz Social Anxiety Scale (LSAS) was developed by Heimberg, Horner, Juster, Safren, Brown, Schneier and Liebowitz (1999). This scale, adapted to Turkish by Soykan, Devrimci, Özgüven and Gençöz (2003), was prepared to determine the levels of fear and/or avoidance of individuals in performance situations with social interaction. The scale comprises 24 items with Likert-type responses from 1-4. Inter-assessor reliability of the scale was 0.96, test-repeat test reliability was 0.97 and internal consistency (Cronbach alpha coefficient) was 0.98 (Soykan, Devrimci, Özgüven & Gençöz, 2003).
Procedure

Ethics committee permission was obtained from Afyon Kocatepe University Social and Humanities Scientific Research and Publication Ethics Committee (Date of Decision: 06.02.2020; Meeting: 01; Number of Documents: E.6467). Then the LSAS was applied to 224 volunteer university students attending University with the aim of determining participants. Then, the 224 university students were ranked from lowest to highest for LSAS points. Thirty university studies with high social anxiety points who agreed to participate in the study voluntarily as a result of preliminary interviews provided written consent and were randomly placed in experiment and control groups with the lottery method.

Before beginning sessions, the experiment and control groups had LSAS pretest applied. The independent group t test was performed to determine whether the experiment and control groups were equivalent and there was no significance for the difference between the pretest mean points for social anxiety (t = 1.05, p>.05) in the groups. In line with this, it may be stated that the experiment and control groups had equivalent social anxiety levels before the implementation. The independent group t test results for pretest social anxiety points of university students in the experiment and control groups are given in Table 1.

Table 1. Independent Group T test Results related to LSAS pretest points

<table>
<thead>
<tr>
<th>Groups</th>
<th>N</th>
<th>Mean</th>
<th>Ss</th>
<th>t</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experimental</td>
<td>15</td>
<td>109.33</td>
<td>15.74</td>
<td>1.05</td>
<td>.301</td>
</tr>
<tr>
<td>Control</td>
<td>15</td>
<td>104.20</td>
<td>10.39</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Ss: Standard deviation, t: t test

Later the experimental group underwent 6 sessions of a solution-focused group counseling program lasting 120 minutes each week. There was no implementation for the control group. After completing sessions, participants in both groups were presented with the LSAS posttest. Three months after the posttest administration, later the same experiment and control groups had the follow-up test applied.

Solution-Focused Group Counseling Program

The general aim of this program was to allow university students to reduce social anxiety with a solution-focused perspective and live in a more-adjusted way. During development of the program, the domestic and international literature was investigated (Ateş & Gençdoğan, 2017; Baijesh, 2015; De Shazer, 1985; Doğan, 1999; Elemo, 2019; Mahdiyar, Dadfarnia, Hadianfard & Rahimi, 2019; Baygül, 2015; Sarı & Günaydın, 2015). This program focuses on small changes and exceptions and includes solution-focused techniques for clients to discover their strong aspects, and assist in searching for solutions and determining targets; to use scaling questions and coping techniques; to ask the miracle question and ensure a positive view of the future; to do homework; to compliment clients; and to encourage clients; in addition to activities like directed dream studies, finding positive stories, discussion and role-play. After the preparation and development stage of the solution-focused group counseling program, pilot applications were completed with a 10-person group to create the program framework. During the pilot study, inadequacies related to the program were identified and revisions were made and the program was made appropriate for the study group. During implementation, care was taken to complete group sessions on the determined date and durations.

The content summary of the solution-focused group counseling program developed in the context of this research is given in Table 2.
Solution-Focused Group Counseling Program

Table 2. Content Of Solution-Focused Counseling Program

<table>
<thead>
<tr>
<th>Session</th>
<th>Number of participants</th>
<th>Duration</th>
<th>Aim</th>
<th>Solution-focused techniques</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st session</td>
<td>15</td>
<td>120 minutes</td>
<td>Opening, group formation, ensuring solution-focused approach and awareness of coping sources</td>
<td>Variation Technique Before Session, Power Sources, Encouragement, Exceptions</td>
</tr>
<tr>
<td>2nd session</td>
<td>15</td>
<td>120 minutes</td>
<td>Ensuring clear determination of achievable aims</td>
<td>Miracle Question Technique</td>
</tr>
<tr>
<td>3rd session</td>
<td>15</td>
<td>120 minutes</td>
<td>Ensuring awareness of power sources and times without problems</td>
<td>Exceptions/Rare Situations Technique, Coping Questions Technique, Imagination Questions Technique</td>
</tr>
<tr>
<td>4th session</td>
<td>15</td>
<td>120 minutes</td>
<td>Ensuring awareness of methods used when coping with problems and times when successfully used</td>
<td>Exceptions/Rare Situations Technique, Coping Questions Technique</td>
</tr>
<tr>
<td>5th session</td>
<td>15</td>
<td>120 minutes</td>
<td>Ensuring an idea about what life will be like when problems are solved in the future</td>
<td>Scaling Questions Technique, Future-Focused Questions Technique, Crystal Ball Technique, Exceptions/Rare Situations Technique, Coping Questions Technique</td>
</tr>
<tr>
<td>6th session</td>
<td>15</td>
<td>120 minutes</td>
<td>Ensuring an assessment of the group process and ending this process</td>
<td>Exception, encouragement</td>
</tr>
</tbody>
</table>

Analysis of Data

Firstly, the distribution graph of data and the Shapiro-Wilks normality test were used to determine whether there were parametric values in the experiment and control groups in the research. Both groups were identified to show normal distribution. Analysis of data in line with this used the two-factor variance analysis technique for mixed patterns. Analysis of data was completed in a computer environment with the SPSS program and analyses assessed significance level at .05 (Büyüköztürk, 2011).

FINDINGS

Before testing the trial in the research, firstly the mean and standard deviations were calculated for points obtained on the LSAS by the experiment and control groups of university students before the implementation, after the implementation and 3 months after the implementation ended. The values are presented in Table 3.

Table 3. Mean and Standard Deviation of LSAS Pretest, Posttest and Follow-up Test Points for Experiment and Control Groups

<table>
<thead>
<tr>
<th>Groups</th>
<th>n</th>
<th>Pretest Mean</th>
<th>Standard deviation</th>
<th>Posttest Mean</th>
<th>Standard deviation</th>
<th>Follow-up test Mean</th>
<th>Standard deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experimental Group</td>
<td>15</td>
<td>109.33</td>
<td>15.74</td>
<td>62.53</td>
<td>6.09</td>
<td>61.80</td>
<td>5.64</td>
</tr>
<tr>
<td>Control Group</td>
<td>15</td>
<td>104.20</td>
<td>10.39</td>
<td>104.93</td>
<td>10.91</td>
<td>101.66</td>
<td>12.95</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>106.76</td>
<td>13.36</td>
<td>83.73</td>
<td>23.24</td>
<td>81.73</td>
<td>22.52</td>
</tr>
</tbody>
</table>
As observed in Table 3, participants in the experimental group were observed to have lower mean points on the LSAS posttest ( =62.53) and 3-month follow-up test ( =61.80) compared to the pretest ( =109.33).

In terms of testing the trial in the research, the two-factor variance analysis technique for split-plot patterns was used to analyze whether the difference between mean points on the pretest, posttest and follow-up tests were significant or not. The obtained findings are presented in Table 4. The analysis results on Table 4 did not abide by the Mauchly'sphericity assumption (p<0.05), so analysis results obtained with the Greenhouse-Geisser correction are presented.

Table 4. Variance Analysis Results for Mean LSAS Pretest, Posttest and Follow-up Test Points for Experiment and Control Groups

<table>
<thead>
<tr>
<th>Source of variance</th>
<th>Total squares</th>
<th>Degree of freedom</th>
<th>Mean squares</th>
<th>F</th>
<th>p</th>
<th>η²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group</td>
<td>14873.87</td>
<td>29</td>
<td>14873.87</td>
<td>61.29</td>
<td>.000</td>
<td>.686</td>
</tr>
<tr>
<td>Error</td>
<td>6794.57</td>
<td></td>
<td>242.66</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Within groups</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Measurement (Pre-Post- follow-up)</td>
<td>11612.02</td>
<td>1.507</td>
<td>7707.94</td>
<td>102.45</td>
<td>.000</td>
<td>.785</td>
</tr>
<tr>
<td>Group * Measurement</td>
<td>10727.08</td>
<td>1.507</td>
<td>7120.53</td>
<td>94.64</td>
<td>.000</td>
<td>.772</td>
</tr>
<tr>
<td>Error</td>
<td>3173.55</td>
<td>42.182</td>
<td>75.23</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

η²: partial eta square, p < .05

As seen in Table 4, the results of variance analysis of the points obtained on the LSAS determined the group effect caused significant difference (F(1,28)= 61.29, p<.05). Stated differently, without differentiating between pretest, posttest and follow-up measures in experimental and control groups, there was a significant level of difference identified in the mean points on the LSAS. Without differentiating the groups, the basic effect of measurement on the difference between mean points obtained from the pretest, posttest and follow-up test completed at different times appears to be significant (F(1.507,42.182)= 102.45, p<.05). Additionally, when investigating whether the variation between mean pretest, posttest and follow-up test LSAS points were different or not in the experiment and control groups, the group*measure common effect was identified to be significant (F(1.507,42.182)= 94.64, p<.05). The significant common effect shows the implemented program was effective in reducing the social anxiety of participants in the experiment group. Additionally, the effect of intervention and time was investigated with Wilks’ lambda value and the analysis results are given in Table 5.

Table 5. Liebowitz Social Anxiety Scale (LSAS) repeated measurements Anova results according to Wilks Lamda Statistics

<table>
<thead>
<tr>
<th>Effect</th>
<th>Wilks’ λ</th>
<th>F</th>
<th>Degree of freedom</th>
<th>P</th>
<th>η²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measurement</td>
<td>.176</td>
<td>63.26</td>
<td>2</td>
<td>.000</td>
<td>.82</td>
</tr>
<tr>
<td>Measurement * Groups</td>
<td>.178</td>
<td>62.51</td>
<td>2</td>
<td>.000</td>
<td>.82</td>
</tr>
</tbody>
</table>

Note: Wilks’ λ: Wilks Lamda Statistics, F: F-test, η²: partial eta square

As seen in Table 5, when the analysis results are investigated, the LSAS for time had Wilks’ λ=.176, F(2,27) = 63.26; p<.001 and appeared to show significant variation. Similarly, the measure*group interaction effect appeared to be similar (Wilks’ λ=.178, F(2,27) = 62.51; p<.01). In line with the results, mean values of measures differed between themselves as well as differing between groups. With the aim of determining the source of the difference, the Bonferroni corrected multiple comparison test was performed. The obtained results are presented in Table 6.
As seen in Table 6, when the analysis results are investigated, the difference in pretest and posttest LSAS points and the difference between the pretest and follow-up test points for the solution-focused group counseling program were higher compared to the control group. Differentiation was not observed between the posttest and follow-up measures in both groups. Results are presented in Figure 1.

As seen on Figure 1, the pretests generally had points in relative proximity, while there was a sharp fall on the posttest for the solution-focused group counseling group. Finally, the solution-focused group counseling program can be said to be effective to reduce social anxiety of university students compared to the control group.

**DISCUSSION**

In this study to reduce the social anxiety of university students, the solution-focused group counseling program was more effective on the Liebowitz Social Anxiety Scale (LSAS) compared to a control group. This efficacy was concluded to continue during follow-up measures completed three months after the sessions ended. This result may be interpreted as showing the solution-focused group counseling program developed in this study was effective to reduce the social anxiety of university students.

This study was conducted to examine the effect of solution-focused group counseling on the social anxiety of university students. At the end of the sessions, the students evaluated this counseling process very positively. They also stated that they reduced their anxiety and fear in social situations compared to the past. The result obtained from this study is consistent with the results on social anxiety disorders based on other psychological counseling approaches other than solution-focused
group counseling (Beidel, Turner & Morris, 2000; Stangier, Heidenreich, Peitz, Lauterbach & Clark, 2003; Nedim-Bal & Öner, 2014; Palancı, 2004; Mörtberg, Karlsson, Fyring & Sundin, 2006; Zaboski, Joyce-Beaulieu, Kranzler, McNamara, Gayle & MacInnes, 2019). In this context, it can be stated that the participation of the clients in the counseling process has a positive effect on social anxiety.

As a result of literature review related to social anxiety issues in Turkey, of studies examining the effectiveness of group counseling based on solution-oriented approaches to solutions it was found to be inadequate. This study result supports the result of the study conducted by Ateş and Gençdoğan (2017). It is emphasized by De Shazer (1985) and De Shazer and Berg (1997) that solution-oriented counseling is a powerful therapeutic approach that emphasizes the resources people have and how these resources can be applied to a positive change process. In this context, with solution-oriented counseling, individuals will be able to create ways to achieve positive adaptation by using their resources when they encounter negative conditions. In addition, the result obtained from this study supports the results of psychological counseling with a solution-oriented group conducted abroad to reduce social anxiety (Baijesh, 2015; Elemo, 2019; Esmail, Alireza, Khadije, Esmail & Shima, 2019; George, 2008; Mahdiiyar, Dadfarnia, Hadianfard & Rahimi, 2019). In this context, the sessions being based on the solution-focused counseling approach, focusing more on solutions to the participants’ problems, and emphasizing their strong and positive aspects more than their weak points are thought to be effective on the results obtained in this research. In addition to these, it is seen that there are studies in the literature that have determined that psychological counseling with a solution-focused group is effective in dealing with various problems in life (Ateş, 2015; Ateş, 2016; Baratian, Salimi, Moghim, Shakarami, & Davarniya, 2016; Javid, Ahmadi, Mirzai & Atghaie, 2019; Mohseni Takalu, Hosseini & Khankhe, 2017; Roeden, Maaskant & Curfs, 2013; Rose & Ishak, 2019; Sağar, 2020; Sari & Günaydön, 2016). Accordingly, the solution-focused group counseling program may have assisted university students in undergoing significant experiences and variations in terms of reducing social anxiety and discovering coping strategies. By developing resilience to social anxiety, it may have enabled them to organize their daily lives and to explore their power sources in more depth. Their own reorganization and taking action may have contributed to assessments of themselves with a positive perspective and reduced social anxiety.

In conclusion, in this study to reduce the social anxiety of university students, the solution-focused counseling program was revealed to be more effective compared to a control group. However, limiting aspects of the research are that it was completed only with university students, is not longitudinal and only compared with a control group. Additionally, just as group dynamics may have been effective on the program, they may be considered a limiting aspect. Programs to reduce social anxiety based on other psychological counseling approaches may be developed and compared with this solution-focused group counseling program to reduce social anxiety.

REFERENCES


