

Evaluation of 'Managing Social Anxiety and Building Social Skills Program for Young Adults'

Shelby Ceh, Clinical Psychologist

Introduction

Social connectedness is an important factor in wellbeing for people of all ages. Recent technological advances and COVID-19 lockdowns have reduced the availability of face-to-face interactions for many young people. This has had a flow-on effect for social connectedness and competency within this population. Approximately three in five young people reported feeling isolated from others in the Headspace National Youth Mental Health Survey in 2022. Additionally, a meta-analysis conducted by Racine et al. (2021) found that the prevalence of anxiety symptoms in young people had doubled when compared with pre-pandemic estimates. The Managing Social Anxiety and Building Social Skills Program was designed to address this growing area of need.

Method

Participants were eight young people between the ages of 17 and 25. Participants were referred by their treating psychiatrists and were admitted as day patients to Belmont Private Hospital. The program was conducted one afternoon (three hour session) per week for eight weeks. The program utilized predominantly Cognitive Behaviour Therapy (CBT) based intervention, with an emphasis on group participation and in-session practice. Topics covered included: relaxation strategies, thought challenging, exposure, assertiveness skills non-verbal skills, conversation skills, building confidence, filtering, understanding relationship boundaries and choosing friendships.

Participants completed self-report questionnaires pre and post attendance. These measures included the DASS-21 as well as the Severity of Social Anxiety Scale. Qualitative evaluation measures were also completed post-program. Of the eight participants, two dropped out or did not attend the final session. Data for these participants was not able to be included in analyses.

Results

Data indicated significant decrease in DASS-21 Depression scores post-intervention ($p = 0.042$). A significant decrease was also found in post-intervention scores on the Severity of Social Anxiety Scale ($p = 0.049$). No significant differences were found for DASS-21 Anxiety or Stress scores. Qualitative measures

indicated that 100% of participants strongly agreed that the program was worth completing and increased their social skills and confidence. Furthermore, the facilitator observed increase socialization and connectedness within the group over the course of the program. In support of this, all participants either 'mostly agreed' or 'strongly agreed' that the group was a safe space to learn and practice skills.



Conclusion

Despite the small sample size provided by the Managing Social Anxiety and Building Social Skills for Young Adults program, results support that this format can be effective for reducing social anxiety and depression symptoms in young people. Qualitative reports from patients and referring psychiatrists indicate that this is a growing area of need. Thus, there is great potential benefit in the ongoing development and provision of such groups.

Acknowledgments

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References

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Contact Details

Shelby Ceh - shelby.ceh@aurorahealth.com.au
Belmont Therapy Programs - belmonttherapyprograms@aurorahealth.com.au