RELATIONSHIP AMONG FEAR OF NEGATIVE EVALUATION, SOCIAL AVOIDANCE AND DISTRESS, ANXIETY AND LONELINESS IN YOUTH

Thesis submitted for partial fulfillment of the degree of

MASTERS OF ARTS
IN
PSYCHOLOGY

SUBMITTED BY:
Gouri (862102025)

UNDER THE SUPERVISION AND GUIDANCE OF

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Certificate

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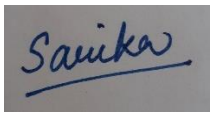

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CANDIDATE'S DECLARATION

I, hereby declare that the work which is being presented in the thesis entitled "Relationship among fear of negative evaluation, social avoidance and distress, anxiety and loneliness in youth " in partial fulfillment of the requirement for the award of the degree of Masters in psychology, Thapar Institute of Engineering and Technology, Patiala, is an original record of my own research work carried out under the guidance and supervision of Dr. Sarika Alreja, school of liberal arts and science, Thapar Institute of Engineering and Technology, Patiala, India. The content of my dissertation has not been submitted to any other university or institute for the award of any other degree.

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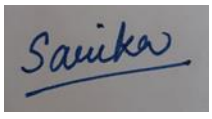

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ABSTRACT

The main objective of the study was to determine the relationship among fear of negative evaluation, social avoidance and distress, anxiety, and loneliness in youth. Analysis of a sample of 300 participants both males and females in the age range 18-25 years. For this purpose, the Scales used were the Brief Fear of Negative Evaluation, the Social Avoidance, and Distress Scale, The State-Trait Anxiety Inventory, and the UCLA LONELINESS SCALE. Data was analyzed using SPSS which means Descriptive statistics, Pearson's correlation and regression analysis were conducted. The results revealed social avoidance distress is positively correlated to loneliness ($r=.174$, $p<.01$), social avoidance distress is positively correlated to anxiety ($r=.323$, $p<.01$), brief fear of negative evaluation is positively correlated to loneliness ($r=.188$, $p<.01$). and brief fear of negative evaluation is positively correlated to anxiety ($r=.422$, $p<.01$). Hence, the values are significant enough, and all hypotheses i.e., social avoidance, and distress are positively correlated to social anxiety in youth, social avoidance, and distress are positively correlated to loneliness in youth, fear of negative evaluation is positively correlated to loneliness in youth and fear of negative evaluation is positively correlated to social anxiety in youth got accepted.

Keywords- Fear of negative evaluation, social avoidance, and distress, anxiety and loneliness

Content

CHAPTER-1
INTRODUCTION

Species-particular alerts transmitting a man's or woman's emotional kingdom are very distinguished in people and animals residing in herds, cohorts, or some other type of social community. Adolescence is a challenging time for people. Adolescents are at a high risk of developing mental health issues, such as a severe experience of loneliness, because of the pronounced changes in cognition, physiology, and sociopsychology (Hawthorne 2008). Throughout adolescence, fear of being judged negatively is a common and noticeable phenomenon linked to several unhelpful outcomes, such as loneliness (Jackson et al. 2002). Fear of negative evaluation is a result of one's past experiences and fundamental ideas about other people, and it affects one's capacity for functioning in daily life (Gill et al. 2018). In other words, a person's attempts to interact with others are hampered by a fear of being judged negatively, which could negatively impact acceptable social contact and worsen the feeling of loneliness. The reasons are confirmed by empirical research, which demonstrates that loneliness is highly correlated with the anxiety of poor evaluation in both adolescent and undergraduate populations (Jackson 2007).

In addition, according to the cognitive-behavioral model of social anxiety (Heimberg et al), one of the main causes of social anxiety is individualities' focus on how others will judge them. That is, individuals who perceive the social world as a potentially social-evaluative setting may more constantly perceive fear of being blamed by others and similar violent passions of fear would in turn lead to social anxiety runs. This suggests that fear of negative evaluation may be one of the antecedents of social anxiety (Cheng et al., 2010). Social anxiety and amenable pull-out are caused by worries about both positive and negative evaluations. 2005). In addition,

studies have shown that social anxiety is primarily caused by the fear of being judged negatively(Teale Sapach et al, 2007). As a result, it's reasonable to presume that social anxiety and fear of being judged negatively may contemporaneously intervene with the goods of tone compassion on adolescents' passions of loneliness. This would indicate that tone-compassion of laterally influences social anxiety and, eventually, loneliness through fear of being judged negatively. Fears of social relations (e.g., speaking to non-natives, attending social events) and/ or performance conditioning (e.g., delivering a speech, or taking tests) are emblems of social anxiety. One of the most common adolescent internal health diseases is clinical social anxiety, with the onset of social anxiety most common in early nonage (between the periods of 12 and 13). In addition, symptoms of social anxiety are explosively identified with those of co-occurring depression, generalized anxiety, substance abuse, and eating diseases and persist over time. thus, it's essential to identify threat factors for the onset and continuity of social anxiety in order to inform services for entailment and intervention that aim to lessen its impact. An abecedarian cognitive bias in social anxiety has long been honoured as fears of negative evaluation (FNE), also known as worries about being blamed, rejected, and embarrassed. Indeed, the DSM-5'scrucial individual criterion for social anxiety complaint is fear of negative evaluation, and empirical exploration supports the connection between social anxiety and fear of negative evaluation. For case, adolescents who have symptoms of social anxiety that are elevated or who suffer from social anxiety complaint parade dysfunctional social cognitions, similar to further evaluation-affiliated fears or negative interpretations of nebulous social situations. It has been discovered that adolescents with and without clinical or subthreshold situations of social anxiety can be distinguished grounded on their tone-reported conditions on Fear of Negative Evaluation Scales. These studies, taken as a whole, suggest that adolescent social anxiety is characterized by the characteristic cognitive point of fear of negative evaluation. Torture over their negative evaluations, and the anticipation that others would

estimate oneself negatively" was the first description of fear of negative evaluation(FNE) handed by Fear of negative evaluation is linked to social avoidance, apprehensiveness, and submission. On the Fear of negative evaluation scale, those with high scores worry about what other people might suppose of them. Subjects with a high Fear of negative evaluation also respond more snappily to situations. Part of the cause of social anxiety is the fear of being judged negatively by others. Social anxiety is defined as a purely emotional response to this kind of social situation, whereas Fear of negative evaluation is related to the fear of being estimated negatively when sharing in a social situation. Anxiety can be understood in two ways thanks to a long-standing distinction between" state" and "particularity" Anxiety as a harmonious personality particularity and as an impermanent emotional state that nearly everyone gets on a diurnal base. Some people who have a high position of particularity anxiety feel anxious in a variety of situations that do not typically make people feel anxious. The experience of unwelcome passions, when provoked by specific situations, demands, or an object or event, is known as state anxiety. State anxiety generally develops when a person mentally evaluates trouble in relation to stimulants or circumstances. A person no longer gets anxiety when the trouble of the object or situation is removed. As a result, state anxiety is a temporary response to perceived trouble. particularity anxiety, like state anxiety, is touched off by an external trouble, but its intensity, duration, and environment are different from those of state anxiety. A person's tendency to witness state anxiety in response to the expectation of hanging situations is appertained to as particularity anxiety. In certain circumstances, individualities with a high particularity anxiety position experience more severe situations of state anxiety than those with a low particularity anxiety position. In a paper named, social uneasiness, feeling of dread toward pessimistic assessment and the discovery of caliginous feeling in others. In general, the issues propose that largely friendly uneasy subjects have a predilection towards feting others' close to home articulations as pessimistic without an

bettered capacity to separate between colourful profound countries in others. As a result, a person who is extremely anxious constantly interprets the feelings of others negatively.," Social anxiety, and fear of negative evaluation," people with social anxiety had lower tone- regard, lower tone- underpinning frequency, and lower prospects of achieving pretensions. expectation to achieve pretensions, fear of negative evaluation, and public tone- knowledge reckoned for 33 of the friction in social anxiety, according to multiple retrogression analyses. This demonstrates once further the strong connection between Fear of negative evaluation and anxiety.

Apprehension about others' evaluations, distress over the negative evaluations, avoidance of evaluative situations, and the expectation that others would evaluate oneself negatively are all manifestations of the fear of negative evaluation. This is the fundamental cognitive aspect of social anxiety. Social anxiety has two aspects: affective (fear of social situations) and behavioral (aversion to social situations). These aspects of social anxiety are specifically linked to substance abuse issues. Negative biases in interpretations and judgments of social situations are considered the most prominent dysfunctional cognitive processes in social anxiety disorder because negative evaluation by others is the greatest fear of socially anxious patients. This is a key factor in the motivation of people with social anxiety to assume that others tend to be highly critical of them and, as a result, have a tendency to evaluate them negatively. People who suffer from social anxiety tend to think erroneous things such as: "Negative social events lead to a negative evaluation by others," "The negative evaluation of others is a true judgment of the individual's personal 45 characteristics," and "Negative events can have long-term effects." Psychological distress should be avoided at all costs. Most of the time, distress is a sign of some kind of discord between a person's various internal needs and external circumstances. Distress occurs when arousal is either too high or too low. Depression, anxiety, and stress are the three components that make up psychological distress. The most significant form of

emotional distress is depression, which is characterized by physical, mental, and emotional symptoms. Anxiety is a mood state characterized by noticeable negative affect and tension-related bodily symptoms. where a person is anxiously anticipating danger and misfortune in the future. Nervousness might include sentiments, ways of behaving, and physiological reactions. The subjective feeling of distress in response to perceived environmental issues is called stress. High-stress levels may cause poorer people to alter their diet, smoke more, sleep less, drink more alcohol, and smoke more. People who constantly view life events and experiences as exceeding their resources run the risk of developing chronic stress and adverse health effects. Everyone needs social connections to survive and thrive. But as people get older, they spend more time alone. Being alone can make older people more susceptible to loneliness and social avoidance, which can affect their health and well-being. It has been shown to increase the risk of health problems such as functional decline. Poor health is more likely to lead to social isolation and loneliness. Feeling socially isolated or alone can put your physical and mental health at risk. Adults who are lonely or socially isolated have poorer health, longer hospital stays, are more likely to be readmitted, and die prematurely than those with meaningful and supportive social connections. becomes higher. Perceived stress refers to the extent to which events in a person's life are is rated as stressful, unpredictable and uncontrollable the degree to which a person may feel stressed and the way that person reacts is influenced by a number of factors such as personal characteristics, life events, social support and assess stressors. Many factors are reliably associated with procrastination. These are prolonged procrastination, temptation and distraction, lack of focus on study skills training, limited information for proper follow-up, and more. And the fear of being judged negatively is a sign of social anxiety. When we are alone, we feel unsatisfied and very lonely. Everyone lives alone but tall Isolation rates are associated with depression, low self-esteem, psychological disturbances and even suicide. There may be different explanations for the isolation among

students. Some Going to university in another country may not be easy. Sometimes college students do not feel comfortable in the new environment. Loneliness is a silent killer, because its symptoms are not easily manifest and rarely treat the disease. This gradually but steadily brings everyone down. Several recent studies have linked loneliness and social isolation to several health problems. Problems like heart attack, alcoholism, anxiety, and depression. Loneliness is an abnormal condition arising when quality or quantity is appreciably lacking in social network. It is essential that mental health practitioners come realize loneliness. Among these reasons, isolation by researchers has become common in the past three decades. Loneliness is when depression is a typical wonder. A part of the test showed that depression was felt more youth and late adulthood as opposed to later developmental stages of life. Loneliness is a basic psychological and emotional feeling. Loneliness is often considered Natural experiences lead individuals to develop a better understanding of themselves, to imagination, and the opportunity to develop and discover the meaning of life.

1.1 FEAR OF NEGATIVE EVALUATION

The fear of negative evaluation, also known as social anxiety, is a common psychological phenomenon in which an individual feels anxious or apprehensive about being judged or evaluated negatively by others. This fear may manifest in a variety of social situations, such as public speaking, meeting new people, or participating in group activities. People with a fear of negative evaluation may experience physical symptoms such as sweating, shaking, or heart palpitations when faced with social situations. They may also engage in avoidance behaviors, such as avoiding social events or situations that might trigger their anxiety. The emotional response to danger or threat is called fear. It functions as a basic mechanism for being present when certain or dangerous stimuli are presented. This may be inappropriate. Fear can affect a person's life and weaken him internally. Everyone must experience some form of fear in their

lives. It can range from fear of the dark to fear of death. Maladaptive forms of fear are called phobias and may be associated with specific objects, people, places, situations, or more general forms. Her one type of fear is Fear of Negative Evaluation (FNE). That is, they experience fear or fear of being negatively evaluated by people while participating in or anticipating social situations (Weeks & Heimberg, 2005). Social context is a central aspect of FNE and as humans, we are social animals. Humans live in a network of social relationships, mainly parents, siblings, relatives, friends, neighbors, and colleagues. As long as these relationships remain healthy, individuals live happy lives, and the health of such social relationships depends on how they communicate with others. This communication, or self-expression, can be inappropriate for many reasons. One reason for this is the individual's fear of not being able to express themselves properly and being judged negatively by people. There are various factors that can contribute to the development of a fear of negative evaluation, including genetic predisposition, past negative experiences, and cultural or societal expectations. Treatment options may include cognitive-behavioral therapy, medication, and self-help techniques such as relaxation exercises and positive self-talk. It is important to seek professional help if the fear of negative evaluation is interfering with daily functioning and causing significant distress. Individuals with this fear may benefit from learning coping mechanisms like deep breathing, positive self-talk, and visualization techniques. Challenging negative thoughts and beliefs about oneself and social situations may also be helpful. Individuals can learn to manage their fear and live a more fulfilling life with treatment and support. Healthy communication in society is an important and important factor for a person's mental health. Researchers have found that it plays an important role in the development of social identity and determines the behavior of individuals within a society. Unhealthy communication patterns are thought to lead to unhealthy relationships, during transitional periods, these unhealthy relationships pave the way for negative evaluations and social anxiety. People are always looking for evaluations and

evaluations of their work from others. Unhealthy relationships can create negative feelings in an individual and lead to fear of rejection and fear of being judged negatively by others. The perception that an individual's level is low and the results of the evaluation may have an adverse effect on the individual", and the fear of receiving a negative evaluation from the social structure. Anxiety causes an individual to be excessively and constantly worried about being criticized by others in a disdainful and hostile way. This situation also causes individuals to develop self-conditioned beliefs. For example, people who fear negative evaluation may believe that social activities in which they participate are evaluated in ways they do not want, desire, or accept.

1.2 SOCIAL AVOIDANCE AND DISTRESS

Social avoidance is defined as the desire to escape or avoid being with, talking to, or interacting with others for any reason. What exactly is adolescent avoidance behavior? It is more complicated than trying to get out of something you do not want to do. Avoidant behavior in teenagers is usually closely associated with anxiety disorders. Specifically, teenage avoidance behavior (moreover referred to as avoidance coping) refers to behavior advocated thru way of means of a preference to keep away from sure mind and feelings. Avoidance behavior may include avoiding places or situations such as Schools and Social Events. It can also refer to avoiding certain thoughts that cause discomfort or panic. In extreme cases, such behavior is classified as an avoidant personality disorder. About 2.5% of the adult population in the United States suffers from an avoidant personality disorder, according to the National Institutes of Health. Avoidance coping mechanisms can take the form of doing something else to escape or distract from unwanted emotions. I cannot. Or count your calories obsessively to avoid worrying about your weight. Therefore, both eating disorders and OCD may involve avoidance behaviors. However, avoidance behavior is not an effective way to control your thoughts and

life. In fact, they end up creating more anxiety instead of lessening it. Avoidance is a way of patching a problem instead of tackling it head-on. Over time, it can create more problems than it solves. "It's like burying something under the rug, and the rug looks like Mt. Everest." A lot of things are clogged up, things are leaking, and I can't close the door. For example, adolescents turn to drugs to cope with bullying at school or the loss of a loved one. Instead of dealing with difficult emotions directly, he tries to avoid them. However, drinking and drug use can lead to more stress and anxiety in the long run, leaving the original stressor intact. Another example where using avoidance to cope can cause problems is when a teenager struggles with social anxiety and doesn't want to leave the house. Until they learn how, they may have trouble with seemingly simple activities such as dancing in high school or interacting with people in college. This behavior was originally designed to help them cope. However, it can prevent you from living your life to the fullest for years. Avoidance behaviors of most concern are self-harming behaviors such as amputation, and suicidal or parasuicidal behaviors. These maladaptive behaviors can be used to avoid distressing emotions when teenagers lack the ability to seek help or deal with their emotions in a healthier way. The embarrassment and sense of secrecy associated with these behaviors can lead to isolation. These behaviors can have very serious consequences. The problem with avoidance behavior is that it perpetuates anxiety symptoms. Safety behaviors are often valued to "get through" social anxiety, but the vicious circle continues because you are still responsible for your anxiety and awkwardness. Avoiding giving a speech all the time or giving a speech without making eye contact will never make the fear of giving a speech go away. These behaviors prevent you from gathering evidence that refutes your maladaptive beliefs about the social situation. You never get the chance to learn that things will eventually go away. You should expose yourself to speech-making without evading, running away from, or using safe behavior rather than evading or simply doing it in a "safe" way. Adolescents, especially teens who suffer from social anxiety, may use alcohol, marijuana,

or other substances to avoid anxiety. The use of these substances can impair judgment and lead to impulsive behavior, especially in this situation. Drug use is especially dangerous for teens who are considering self-harm or suicide. Social distress or impairment has been associated with the symptoms and symptoms of depression and has previously been studied in humans using social acceptance and social rejection. Major life events such as loss of interpersonal relationships and social rejection are very strong risk factors for depression. This type of stressor, known as a target rejection event, is associated with a 22-fold increased risk of developing, suggesting that the endogenous opioid system may be associated with depressive responses to life events, including socially distressing target rejection.

1.3 LONELINESS

Loneliness is a distressing experience that occurs when a person's social relationships are perceived as undesirable, either quantitatively or qualitatively. The experience of loneliness is highly subjective. A person can be alone without feeling lonely and can feel lonely even with other people. Psychologists generally believe that loneliness is a stable trait. That is, the set points for feeling lonely are different for each person, and fluctuate around those set points depending on life circumstances. It is linked to sadness, a lack of social support, neuroticism, and introversion. Loneliness puts people at risk for physical disease and may contribute to a shorter life span, according to research. Although loneliness has long been an aspect of human existence, it has only recently been studied psychologically. It develops when children with insecure attachment patterns act in ways that cause their peers to reject them. These rejections impede their social skills development and enhance their suspicion of other individuals, causing continuous loneliness. Attachment theory served as the foundation for sociologist Robert S. Weiss' famous psychological theory of loneliness. Weiss identified six unmet social requirements that contribute to feelings of loneliness. Attachment, social integration,

nurturance, reassurance of worth, a sense of trusted partnership, and guidance in stressful times are examples of these needs. Cognitive treatment of loneliness is based on the fact that loneliness is characterized by marked differences in perception and attribution. Lonely people tend to be pessimistic. They are less likely to feel lonely about people, events, and situations in their lives and are more likely to have negative attitudes than those who blame themselves for their inability to form satisfying social relationships. The approach suggests that (a) unmet needs for attachment, social integration, care, and other social needs lead to perceived relationship contradictions experienced as loneliness, and (b) self-fulfilling prophecies. It suggests that loneliness is maintained by Skills leading to inappropriate relationships and negative self-attribution that leads to social isolation and relationship dissatisfaction. Loneliness is an emotion. I think it's important to distinguish upfront that I see loneliness as an inner feeling rather than an external state.In other words, loneliness is different from loneliness. Many people who are isolated experience loneliness. However, many people seek isolation and see it positively. When that happens, we often describe it as loneliness. Also note that isolation is not a requirement for loneliness. You can feel lonely even when you are surrounded by people. In fact, many people describe being at their worst when they are surrounded by people. Loneliness hurts. It may seem obvious that loneliness is a disgusting or uncomfortable feeling. However, many people feel comfortable being alone or separated from others. As mentioned earlier, many people seek solitude. For example, it helps in fostering recovery and creativity. Loneliness comes from perception. Loneliness, like all emotions, is not conclusively observable by an outside observer, as it results from the subjective perception of the individual. I think it is important to clarify the nature of loneliness, which is fundamentally subjective and unique to the individual. Although loneliness between individuals has much in common, no two people experience loneliness exactly the same. Loneliness is a lack of intimacy. This is where I differ most from other definitions of loneliness

I have seen. In my experience as a therapist, both personally and professionally, loneliness seems to be the most unique. This lack of intimacy is often viewed on a physical level or in terms of shared interests and values, but at its root is a fundamentally emotional one: It seems to be about not connecting enough with people (or yourself). on an emotional level. It is a temporary state in which an individual is cut off from their environment and tends to direct their energies inward while experiencing deficiencies in achieving proper social functioning. It can also be defined as the subjective experience of Humans being social animals by nature and cannot live alone. When asked to rate what brings them the most peace and happiness in life, most people choose intimacy, companionship, and social belonging over money, power, or even physical health. It shows how important social connections are in a person's life. At the same time, it is surprising that about 20% of Americans cite social isolation as the number one cause of unhappiness. Lonely people feel emotional pain. Losing your sense of connection and community can change the way you see the world. People with chronic loneliness may feel threatened or suspicious of others. Emotional pain can trigger the same stress response as physical pain. If this continues, it can lead to chronic inflammation (excessive or prolonged release of factors that can cause tissue damage) and weakened immunity (ability to fight disease). This can increase your risk of chronic diseases and make you more susceptible to certain infections. Social isolation and loneliness can also affect brain health. Loneliness and social isolation are associated with cognitive decline and increased risk of dementia, particularly Alzheimer's disease. In addition, a lack of social activity and spending most of the time alone can lead to impaired ability to carry out daily tasks such as driving, paying bills, taking medication, and cooking.

1.4 ANXIETY

Anxiety is most common and has elevated most rapidly amongst teens. Anxious temperament and subclinical tension in advance in lifestyles are related to an elevated chance the of next onset of hysteria problems, melancholy, substance use problems, and bodily fitness problems. Young maturity is the important thing length of vulnerability for the onset of those conditions. Therefore, growing tension on this prone institution could be anticipated to have a more effect on longer-time period intellectual fitness and purposeful effects than will increase in tension in older age groups. In addition, tension or strain has been proven to persuade mind development, which is not always finished till about age 25. Increased chronic tension amongst teens consequently should have a long-time period effect on academic, mental, and social development. Further, the explosion of social media, that is related to elevated tension and melancholy amongst younger people, can be a contributing component to the boom in tension over time. Hearing the fitness care expert say you have got an anxiety disease may be confusing. The desirable information is that the emotions and stress-associated behaviors you had been worried approximately are sincere symptoms of a treatable disease. By getting a remedy and conducting recovery, humans with an anxiety disease can manipulate their symptoms, experience better, and lead effective and significant lives. Recovery does now no longer always suggest a cure. It does suggest that humans are actively transferring towards wellness.

People with anxiety problems fear excessively. The emotions pass nicely past the everyday form of worry this is suitable to conditions and may assist human beings to attention and be alert. The worried emotions that are ordinary of an anxiety disease are felt almost each day, and can be overwhelming and tough to control. With an anxiety disease, you could feel restless,

your coronary heart pound, revel in muscle tension, fatigue, irritability, trouble concentrating, and/or sleep disturbances. These signs and symptoms can be extreme sufficient to intervene with everyday activities in school, at work, or in social conditions. There are three sorts of anxiety problems: generalized anxiety disorder (GAD), phobias, and panic problems. Some human beings have milder sorts of anxiety problems that do not final all the time and reply nicely to remedy. Others with greater extreme sorts of an anxiety disease can also additionally revel in signs and symptoms over their lifetime with the kind of anxiety converting through the years or inclusive of temper changes. However, treatments for an anxiety disease that contain medications, psychotherapy, and different factors of an individualized remedy program let you to be greater resilient, control your signs and symptoms, enhance regular functioning, and assist you to guide a full, significant life. An individualized remedy software can consist of effective own circle of relatives and peer support. Social anxiety occurs when individuals fear social situations in which they expect negative judgment from others or believe their presence will make others uncomfortable. From an evolutionary perspective, social anxiety disorder is moderately adaptive, leading us to pay more attention to how our behavior manifests and is reflected. To strengthen and avoid expulsion, you are guaranteed to harmonize with those around you. Disability (SAD; formerly 'social phobia'), however, if it is disproportionate to the threat posed by normal social situations (e.g., socializing with peers at school or work) and significantly reduces activity can be classified as ;)). A hallmark of social anxiety in the Western context is an extreme and persistent fear of shame and humiliation. A person with social anxiety clearly struggles in social situations. Compared to people without social anxiety, they made fewer facial expressions, looked away more often, and had more difficulty initiating and maintaining conversations. Recognize the difficulties that can make your activity intimidating. This can lead people to interact less or avoid interacting with others altogether. and reduce overall mood and well-being. For example, people with social anxiety disorder are

more likely to be bullied, more likely to drop out of school, and less qualified. They also tend to have fewer friends, marry less frequently, are more likely to divorce, and have fewer children. At work, they reported having more days off and lower job performance.

An anxiety disease may be controlled in lots of ways. This consists of using psychotherapy or an aggregate of prescribed medicine and therapy. You need to consider diverse remedy options with your circle of relatives and your fitness care provider. Collaborative selections need to be made primarily based totally on your personal priorities and goals. If you are of consenting age, you can want to offer written consent for parents or caregivers to take part in the remedy team. It is essential to speak on your fitness care carrier's approximately other styles of remedy, along with complementary medicine, as well as applications that can offer extra guidance associated with education, employment, housing, and vocation and career development. It is likewise essential to have precise self-care, such as a healthful diet, exercise, sleep, and abstinence from illicit drugs. Behavioral remedy, cognitive behavioral remedy, or different types of psychotherapy can be used on my own or in a mixture with medicines relying on the severity of signs and symptoms. These sorts of remedies construct your herbal resiliency and offer gear to assist apprehend behaviors that could cause worry and intense anxiety. Your own circle of relatives or friends also can be a crucial a part of your remedy or remedy group for an anxiety disorder. Talking with friends helps you to research from others who are in addition alongside in healing. Family members, caregivers, and friends who are a part of your remedy group assist you to apprehend early signs and symptoms of hysteria earlier than they turn out to be an extra problem. These companions can offer crucial support and encouragement that will help you live centered for your healing and lifestyles goals. While anxiety is a regular reaction to a few occasions and conditions in existence, it is now no longer wholesome to sense stress all the time. As a grownup, you may marvel what young adults should be concerned approximately. After all, they are now no longer withinside the role to fear approximately

placing meals at the table, paying the mortgage, or elevating youngsters in their very own. Anxiety is a slant of disturb and stretch, regularly summed up and unfocused as an ejection to a circumstance that is fair candidly watched as debilitating. Anxiety is solidly associated to fear, which could be a reaction to an honest to goodness or saw provoke hazard; pressure joins the desire of future risk. Anxiety-influenced individuals may drag back from conditions that have activated uneasiness within the past. Anxiety a nursing assurance that impacts clients in all settings and specialists all through the calling, is clarified through the strategy of idea investigation. Sentiments of segregation are more predominant among rationally sick individuals than within the common populace. Anxiety and Loneliness impact all zones of a person's success counting rest, counting calories, mental and physical prosperity, certainty, social communication, and educational execution. Anxiety may be accommodating in recognizing this clear Anxiety wonder. A few Actualities appears forlornness can be a sign of uneasiness.

CHAPTER-2

LITERATURE REVIEW

Fear of negative evaluation, which is the belief that others will judge and reject oneself, can lead to social avoidance and withdrawal. This social avoidance can prevent youth from engaging in social activities, leading to social isolation and loneliness (Liu & Alloy, 2010). In turn, loneliness can exacerbate anxiety and depressive symptoms, leading to a vicious cycle of social avoidance and distress (Lim & Kim, 2018).

Several studies have examined the relationship between fear of negative evaluation and loneliness among youth. For example, a study by Wong et al. (2017) found that fear of negative evaluation was significantly associated with loneliness among Chinese adolescents. Similarly, a study by Jin et al. (2018) found that fear of negative evaluation was positively related to loneliness among Korean middle school students.

Social avoidance and distress can also contribute to anxiety among youth. When youth avoid social situations due to fear of negative evaluation, they may miss out on opportunities to develop social skills and build social support networks, leading to feelings of isolation and anxiety (Alden & Bieling, 1998). In addition, social distress, which refers to feelings of discomfort or anxiety in social situations, can lead to heightened anxiety and avoidance behaviors (Weeks et al., 2005). Research has also shown that loneliness and anxiety are interconnected. Loneliness can lead to increased anxiety and depressive symptoms, while anxiety can further exacerbate feelings of loneliness (Qualter et al., 2015).

Several studies have investigated the impact of fear of negative evaluation, social avoidance, and distress on loneliness and anxiety among youth. Here are some key findings from the literature:

Fear of Negative Evaluation: Research suggests that fear of negative evaluation is associated with increased loneliness and anxiety among youth. A study by Liao and Wei (2011) found that fear of negative evaluation was positively correlated with loneliness among Taiwanese adolescents. Similarly, another study by Sowislo and Orth (2013) found that fear of negative evaluation was associated with increased anxiety symptoms among German adolescents.

Social Avoidance: Social avoidance, or the tendency to avoid social situations, has also been linked to increased loneliness and anxiety among youth. A study by Beidel and Turner (1998) found that social avoidance was a significant predictor of social anxiety and loneliness among children and adolescents. Similarly, a study by Oh et al. (2016) found that social avoidance was positively associated with loneliness among Korean adolescents.

Distress: Distress, which refers to the emotional and psychological discomfort associated with fear of negative evaluation and social avoidance, has also been found to contribute to loneliness and anxiety among youth. A study by Asher and Wheeler (1985) found that distressed children were more likely to report feelings of loneliness and social dissatisfaction than non-distressed children. Another study by Wong and colleagues (2014) found that distress was positively associated with anxiety symptoms among Chinese adolescents.

Taken together, these findings suggest that fear of negative evaluation, social avoidance, and distress can all contribute to loneliness and anxiety among youth. Interventions that target these factors may be helpful in reducing the negative impact of social anxiety on youth mental health. Cognitive-behavioral therapy, exposure therapy, and social skills training are examples of interventions that have been shown to be effective in reducing social anxiety and related symptoms among youth. Studies have consistently found a significant positive relationship between fear of negative evaluation and social anxiety among youth (Leary & Kowalski, 1995). Youth who report high levels of fear of negative evaluation tend to avoid social situations and experience distress in social interactions. Social avoidance and distress are closely related to

fear of negative evaluation and are often used as indicators of social anxiety among youth. Youth who avoid social situations or experience distress in social interactions are more likely to report feelings of loneliness and anxiety (Rodebaugh et al., 2004).

Several studies have found a significant positive relationship between fear of negative evaluation and loneliness among youth (Weeks et al., 2005). Youth who are afraid of being negatively evaluated by others may avoid social interactions or struggle to form meaningful relationships, which can contribute to feelings of loneliness. Fear of negative evaluation, social avoidance and distress, and loneliness have all been found to be significant predictors of anxiety among youth (Bittner et al., 2008). Youth who experience these symptoms may be at increased risk for developing anxiety disorders. Youth who experience FNE may avoid social situations, which can lead to a lack of social connections and feelings of isolation. This avoidance can be particularly harmful during adolescence when social interactions and peer relationships are critical for identity development and emotional regulation (La Greca & Harrison, 2005). FNE has been found to be a significant predictor of social avoidance in youth (La Greca & Harrison, 2005; Asher et al., 1984). FNE has also been linked to loneliness among youth. Youth who experience FNE may perceive themselves as socially inept, which can lead to a negative self-image and social isolation. A study by Qualter et al. (2010) found that FNE was significantly correlated with loneliness among a sample of adolescents. FNE is strongly associated with social anxiety, which can lead to general anxiety and stress. A study by Rapee and Heimberg (1997) found that FNE was a stronger predictor of social anxiety than other factors such as neuroticism, extraversion, and social support.

Research has identified several factors that may mediate the relationship between fear of negative evaluation and anxiety or loneliness among youth. For example, a study by Kocovski and colleagues (2013) found that social anxiety mediated the relationship between fear of

negative evaluation and loneliness among youth. Similarly, a study by Vargas and colleagues (2018) found that negative self-beliefs mediated the relationship between fear of negative evaluation and anxiety symptoms among college students.

Social avoidance and distress are two related constructs that have been linked to loneliness and anxiety among youth. Social avoidance refers to the tendency to avoid social situations or interactions due to fear of negative evaluation or other anxiety-provoking factors. Distress refers to the negative emotional experiences that can result from social avoidance and fear of negative evaluation. Social avoidance and distress have both been found to be significantly associated with loneliness among youth. A study by Davis and colleagues (2015) found that social avoidance was a significant predictor of loneliness in youth, even after controlling for other factors such as anxiety and depression. Similarly, a study by Hofmann and colleagues (2009) found that distress mediated the relationship between social anxiety and loneliness in youth. Social avoidance and distress have also been linked to anxiety among youth. A study by Davis and colleagues (2015) found that social avoidance was a significant predictor of social anxiety in youth, even after controlling for other factors such as depression and negative affectivity. Similarly, a study by La Greca and Harrison (2005) found that social anxiety mediated the relationship between social avoidance and anxiety symptoms among children and adolescents. Research has also identified gender differences in the relationship between social avoidance, distress, and mental health outcomes among youth. For example, a study by Bögels and colleagues (2010) found that social avoidance was a stronger predictor of loneliness and anxiety in girls than in boys. Overall, the research suggests that social avoidance and distress can have significant negative impacts on the mental health of youth, particularly in relation to loneliness and anxiety. Early identification and intervention for these issues may be important for promoting positive mental health outcomes among youth.

There is no clear consensus in the literature regarding the relationship between fear of negative evaluation and anxiety. Some studies have reported a positive correlation between these constructs, indicating that higher levels of fear of negative evaluation are associated with higher levels of anxiety. However, other studies have reported a negative correlation or no significant correlation between fear of negative evaluation and anxiety. For example, a study by Carleton and colleagues (2009) found a positive correlation between fear of negative evaluation and symptoms of social anxiety disorder in a clinical sample. However, a study by Osman and colleagues (2010) found a negative correlation between fear of negative evaluation and anxiety symptoms in a non-clinical sample of undergraduate students. Similarly, a study by Kashdan and colleagues (2012) found no significant correlation between fear of negative evaluation and symptoms of generalized anxiety disorder in a community sample. The mixed findings in the literature suggest that the relationship between fear of negative evaluation and anxiety may be complex and may depend on several factors, such as the specific population being studied, the measures used to assess fear of negative evaluation and anxiety, and the presence of other psychological factors that may influence these constructs. Further research is needed to clarify the nature of the relationship between fear of negative evaluation and anxiety.

Research has consistently shown a positive correlation between fear of negative evaluation and loneliness. That is, higher levels of fear of negative evaluation are associated with higher levels of loneliness. For example, a study by Lim and colleagues (2015) found that fear of negative evaluation was a significant predictor of loneliness among Korean youth. Similarly, a study by La Greca and Harrison (2005) found that fear of negative evaluation was significantly associated with loneliness among children and adolescents. Another study by Alden and Bieling (1998) found that fear of negative evaluation was positively correlated with self-reported loneliness in a sample of socially anxious adults. The relationship between fear of negative evaluation and loneliness may be due to the fact that fear of negative evaluation can

lead individuals to avoid social situations or interactions, which in turn can lead to feelings of loneliness. Additionally, fear of negative evaluation may lead individuals to engage in negative self-talk or beliefs, which can also contribute to feelings of loneliness. Overall, the research suggests that fear of negative evaluation is a significant risk factor for loneliness, particularly among individuals who are socially anxious or have difficulty with social interactions. Early identification and intervention for fear of negative evaluation may Research has consistently shown a positive correlation between social avoidance and distress on anxiety, indicating that higher levels of social avoidance and distress are associated with higher levels of anxiety. A study by Rapee and colleagues (2010) found that social avoidance and distress were significant predictors of symptoms of social anxiety disorder in adolescents. Similarly, a study by Kashdan and colleagues (2008) found that social avoidance and distress were positively correlated with symptoms of generalized anxiety disorder in a community sample. Another study by Turner and colleagues (2013) found that social avoidance and distress were significant predictors of anxiety symptoms in a sample of adults with social anxiety disorder. The relationship between social avoidance and distress on anxiety may be due to the fact that social avoidance and distress can lead individuals to avoid social situations or interactions, which can in turn lead to increased anxiety. Additionally, social avoidance and distress can lead to negative self-talk or beliefs, which can contribute to feelings of anxiety. Overall, the research suggests that social avoidance and distress are significant risk factors for anxiety, particularly among individuals who are socially anxious or have difficulty with social interactions. Early identification and intervention for social avoidance and distress may be important for promoting positive social functioning and reducing anxiety.be important for promoting positive social functioning and reducing loneliness.

Research has consistently shown a positive correlation between social avoidance and distress on loneliness, indicating that higher levels of social avoidance and distress are associated with

higher levels of loneliness. A study by Madsen and colleagues (2016) found that social avoidance and distress were significant predictors of loneliness among adolescents. Similarly, a study by La Greca and Harrison (2005) found that social avoidance and distress were significantly associated with loneliness among children and adolescents. Another study by Vanhalst and colleagues (2012) found that social avoidance and distress were positively correlated with loneliness among young adults. The relationship between social avoidance and distress on loneliness may be due to the fact that social avoidance and distress can lead individuals to avoid social situations or interactions, which can in turn lead to feelings of loneliness. Additionally, social avoidance and distress can lead to negative self-talk or beliefs, which can contribute to feelings of loneliness. The research suggests that social avoidance and distress are significant risk factors for loneliness, particularly among individuals who have difficulty with social interactions. Early identification and intervention for social avoidance and distress may be important for promoting positive social functioning and reducing loneliness.

A study by Xinyi Liu, Ying Yang, Hang Wu, Xiangjing Kong & Lijuan Cui(2020) indicates the Lack of desired interpersonal relationships is the unpleasant experience of loneliness. Plentiful proof has explained the adverse results of depression, like nervousness, and even self-destructive ways of behaving. However, the internal buffering factors that contribute to loneliness, particularly in adolescents, are poorly understood. The purpose of the current study was to investigate the mediatory roles played by social anxiety and fear of negative evaluation in the relationship between self-compassion and adolescents' feelings of loneliness. A set of questionnaires about loneliness, self-compassion, social anxiety, and fear of negative evaluation were completed by 871 Chinese adolescents. Self-compassion was found to be negatively associated with loneliness, and social anxiety acted as a mediator in the relationship, according to our tests of the proposed serial mediation model. In addition, we discovered that

social anxiety and the fear of a negative evaluation frequently mediated the negative association. Particularly, adolescents with self-compassion reported less fear of negative evaluation, which decreased symptoms of social anxiety. Thus, the diminished social nervousness was connected to decreased sensations of depression. The relationship between self-compassion and loneliness is mediated by fear of negative evaluation and social anxiety, according to the current study. The hypothetical and useful ramifications, as well as the According to the cognitive behavioral model of social anxiety (Heimberg et al.), one of the primary causes of social anxiety is individuals' attention to the evaluation from others. 2010; Wells and Clark, 1995). That is, individuals who view the social world as a possibly friendly evaluative circumstances may all the more much of the time see the feeling of dread toward pessimistic assessment from other people who they collaborate with (Heimberg et al. 2010), and such significant sensations of dread would thus bring about friendly uneasiness conditions, which recommended that feeling of dread toward pessimistic assessment might be one of the forerunners of social tension (Cheng et al. 2015; Weeks et al. 2008a, 2008b). According to recent empirical research (Weeks et al.), social anxiety and submissive withdrawal are caused by worries about both positive and negative evaluations. 2005). In addition, studies have shown that social anxiety is primarily caused by the fear of being judged negatively (Teale Sapach et al., 20)

CHAPTER-3

RESEARCH GAP

3.1 Research gap:

While there is a considerable amount of research on anxiety and loneliness in youth, there are still some gaps in the literature regarding the specific effects of fear of negative evaluation, social avoidance, and distress on these outcomes. Limited studies have examined the relationship among fear of negative evaluation, social avoidance, and distress, anxiety, and loneliness specifically in youth. Most studies have focused on the general population, which makes it difficult to draw conclusions about the unique experiences of youth. There is a lack of consensus regarding the conceptualization and measurement of fear of negative evaluation, social avoidance, and distress in youth. Different studies may use different instruments or define these constructs differently, which can limit the comparability of findings across studies. Most studies examining anxiety and loneliness among youth have focused on individual factors, such as personality traits or coping styles, while overlooking the influence of social and environmental factors, such as peer relationships or family dynamics. Therefore, it is essential to investigate how these social factors interact with fear of negative evaluation, social avoidance, and distress to impact anxiety and loneliness. There is a need to explore the potential moderating or mediating effects of other variables on the relationship between fear of negative evaluation, social avoidance, and distress, anxiety and loneliness in youth. For instance, the role of gender, cultural background, or socioeconomic status in this relationship is still not well understood and needs further investigation. Lastly, most studies in this area have relied on self-report measures, which may be subject to biases or social desirability effects. Therefore, it may be helpful to use multiple methods, such as observational or physiological measures, to

supplement self-report data and provide a more comprehensive understanding of the relationship between these variables.

3.2 AIM/OBJECTIVE OF THE STUDY

To determine the relationship among fear of negative evaluation, social avoidance, and distress, anxiety, and loneliness in youth

3.3 HYPOTHESES

N1: Social avoidance and distress are positively correlated to social anxiety in youth

N2: Social avoidance and distress are positively correlated to loneliness in youth

N3: Fear of negative evaluation is positively correlated to loneliness in youth

N4: Fear of negative evaluation is positively correlated to social anxiety in youth

N5: Fear of negative evaluation, social avoidance, and distress are positively correlated to social anxiety and loneliness in youth

CHAPTER-4

METHODOLOGY

4.1 Sample:

A total of 300 participants were used in this study. all were young adults between 18 and 30 years from different parts of Punjab and Haryana who met the inclusion criteria for participation. everyone had a good command of the English language and had a smartphone. convenience sampling was used in this study. these participants were accessed by exchanging Google forms via various application modes. It has been made sure that each participant in the study must be between 18 and 30 years of age. The study was interested in analyzing the relationship among fear of negative evaluation, social avoidance, and distress, anxiety, and loneliness in youth

4.2 Design: A correlational within-group design was used in this study. The Independent variables are Fear of negative evaluation, social avoidance, and distress, while the Dependent variable is loneliness, anxiety.

4.3 Tools used:

Brief Fear of Negative Evaluation

The Brief Negative Evaluation Scale (BFNE) is a measure of a person's tolerance of being judged disparaging or hostile by others. This scale, which measures fear of negative evaluation by others, is a typical criterion for diagnosing social phobias and other disorders and has been used in the study of human social behaviour in general. Related. Because the questions are derived almost directly from the 30-item Fear of Negative Evaluation (FNE) scale, his 12-item BFNE scale has the practical advantage of simplicity, making it a widely used tool in social

anxiety research. It is The BFNE scale was strongly correlated with the 30-point FNE scale (r = 0.96). Internal consistency (α = 0.96) and test-retest reliability (ICC = 0.75) were high.

Social Avoidance and Distress Scale

The SADS was constructed concurrently with the FNE (Watson & Friend, 1969) and was developed to encompass the authors' theoretical view of two of the three aspects that comprise social anxiety: the experience of distress and the deliberate avoidance of social situations. Physiological signs of anxiety or impaired performance were excluded from the scale. The SADS consists of 28 true-false items. Although the authors described two subscales (social avoidance and social distress), these are rarely used in practice. Typical statements include "I try to avoid talking to people unless I know them very well" and "I often make excuses to avoid social engagement" (Watson and Friends, 1969). Watson and Friend (1969) report data demonstrating the reliability and attendant efficacy of SADS test-retest. The SADS instrument was rated as highly reliable with an internal consistency of 0.94 and a test reliability of 0.68.

State-trait Anxiety Inventory:

The State-Trait Anxiety Inventory (STAI) is used to measure trait and state anxiety (Spielberger, Gorsuch, Lushene, Vagg, & Jacobs, 1983). Form Y contains 40 items, 20 assessing trait anxiety (Y1) and 20 assessing state anxiety (Y2). The elements involved in state anxiety are: "I am tense; I am worried" and "I feel calm; I feel secure." While items included in Trait anxiety are: "I worry too much over something that really doesn't matter" and "I am content; I am a steady person." To rate the items a 4-point Likert scale was used (e.g., from "Almost Never" to "Almost Always". A higher score indicates greater anxiety. Some items were scored inversely. The test-retest coefficients for this measure ranged from 0.31 to 0.89. The validity of the configuration is good.

UCLA LONELINESS SCALE

A 20-item scale by Russell, D, Peplau, L. A.., & Cutrona, C. E. (1980) was designed to measure one's subjective feelings of loneliness as well as feelings of social isolation. Participants rate each item as either O ("I often feel this way"), S ("I sometimes feel this way"), R ("I rarely feel this way"), or N ("I never feel this way"). This measure has been revised twice since it was first published. Once to create the reverse-score item and once to simplify the wording. This measure was highly reliable both in terms of internal consistency (factor a ranged from 0.89 to 0.94) and test-retest reliability over one year (r = 0.73). The validity of the configuration is good.

4.4 Procedure:

For the purpose of thesis, a Google form was made and circulated with the help of various social media platforms. The participants were asked about their name, age, gender, email address and were presented with an informed consent, stating their willingness to participate in the study. The participants were asked to be honest and their confidentiality was ensured. 4 scales Brief Fear of Negative Evaluation, Social Avoidance, and Distress Scale, The State-Trait Anxiety Inventory, and UCLA LONELINESS SCALE were distributed among 300 participants both males and females through Google Forms In the beginning of each scale, specific instructions were given to the participants detailing how to answer various statements for each scale. These participants were selected through convenience sampling. The participants were selected from all over Punjab and Haryana. Informed consent was obtained, and any doubts asked were also addressed. The results were computed using the Statistical Package for the Social Sciences (SPSS).

4.5 Statistical Analyses: Statistical Package for Social Science (SPSS) version 22.1 was used to analyze the data. Descriptive statistics viz, mean, and standard deviation, correlation, and regression were applied.

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CHAPTER-5

RESULTS

The study assessed the relationship among fear of negative evaluation, social avoidance, and distress, anxiety, and loneliness in youth with the help of Pearson's product correlation and linear regression analysis. For calculating the results for the current study descriptive statistics as well as inferential statistics were computed on SPSS 22.0

Table 1 shows the descriptive statistics of total participants on fear of negative evaluation, social avoidance, and distress, anxiety, and loneliness. Descriptive statistics were used to compute the data of 300 young adults. The mean and standard deviation of all 300 participants on the social avoidance and distress Scale came out to be 13.34 (4.65) respectively, which displays a low level of avoidance and distress with a slightly low level of deviation score. The mean and standard deviation of participants on loneliness came out to be 48.86(8.86), which shows average levels of loneliness with a low deviation score. The mean and standard deviation of participants on the state-trait anxiety scale came out to be 97.17(13.25), which indicates high levels of anxiety with a low deviation score. The mean and standard deviation of participants on Fear of negative evaluation came out to be 34.34(5.97), which indicates a moderate level of fear of negative evaluation with a low deviation score.

TABLE-1 Descriptive Statistics

	Mean	Std. Deviation	N
Social avoidance distress	13.34	4.65	300
Loneliness	48.86	8.86	300
State-trait anxiety test	97.17	13.25	300
Brief fear of negative evaluation	34.34	5.97	300

Table 2 shows the correlation between all four variable and their significance. Pearson product correlation was used to measure the correlation. The first hypothesis was that" there is a positive correlation between Social avoidance distress and loneliness." To verify this hypothesis, Pearson correlation was computed, and the analysis revealed a positive correlation between social avoidance distress and loneliness ($r=.174$, $p<.01$). The second hypothesis was that" there is a positive correlation between Social avoidance distress and state-trait anxiety." To verify this hypothesis, Pearson correlation was computed, and the analysis revealed a positive correlation between social avoidance distress and anxiety ($r=.323$, $p<.01$). The third hypothesis was that" there is a positive correlation between brief fear of negative evaluation and loneliness." To verify this hypothesis, Pearson correlation was computed, and the analysis revealed a positive correlation between brief fear of negative evaluation and loneliness ($r=.188$, $p<.01$). The fourth hypothesis was that" there is a positive correlation between brief fear of negative evaluation and state-trait anxiety." To verify this hypothesis, Pearson correlation was computed, and the analysis revealed a positive correlation between brief fear of negative evaluation and anxiety ($r=.422$, $p<.01$).

TABLE-2 Correlation

	Social avoidance distress	loneliness	State trait anxiety test	brief fear
Social avoidance and distress	1			
Loneliness	.174**	1		
State-trait anxiety test	.323**	.424**	1	
Brief fear of negative evaluation	.358**	.188**	.422**	1

**. Correlation is significant at the 0.01 level (2-tailed).

Regression

Table-3 shows the linear regression of the regression coefficient for loneliness. Fear of negative evaluation and social avoidance and distress came out to be the predictor variable for loneliness. The Adjusted, R Square is 0.042. It implies that the Fear of negative evaluation and social avoidance and distress explains the variance in loneliness by 4.2%. As it is clear from the table, one unit increase in the social avoidance and distress of a youth will increase loneliness by 0.232 units and one unit increase in the fear of negative evaluation of a youth will increase loneliness by 0.215 units. However, anxiety was the excluded variable between the two. Therefore, regression analysis found that is. Fear of negative evaluation and social avoidance and distress a predictor of loneliness.

TABLE -3 Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.	Adjusted R Square
		B	Std. Error	Beta			
1	(Constant)	38.384	2.962		12.961	.000	
	Social avoidance distress	.232	.115	.122	2.011	.045	.027
	Brief fear of negative evaluation	.215	.090	.145	2.386	.018	.032

a. Predictors: (Constant), brief fear, social avoidance distress
b. Dependent Variable: loneliness

Table-4 shows the linear regression of the regression coefficient for state-trait anxiety. Fear of negative evaluation and social avoidance and distress came out to be the predictor variable for state-trait anxiety. The Adjusted, R Square is 0.207. It implies that the Fear of negative evaluation and social avoidance and distress explains the variance in anxiety by 20.7%. As it is clear from the table, one unit increase in the social avoidance and distress of a youth will increase loneliness by 0.559 units and one unit increase in the fear of negative evaluation of a youth will increase anxiety by 0.781units However, loneliness was the excluded variable between the two. Therefore, regression analysis found that Fear of negative evaluation and social avoidance and distress a better predictor of anxiety.

TABLE-4 Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.	Adjusted R Square
		B	Std. Error	Beta			
1	(Constant)	62.873	4.028		15.608	.000	
	Social avoidance distress	.559	.157	.197	3.564	.000	.101
	Brief fear of negative evaluation	.781	.122	.352	6.381	.000	.176

a. Predictors: (Constant), brief fear, social avoidance distress
b. Dependent Variable: state-trait anxiety test

CHAPTER-6

DISCUSSION

The main aim of the current study was to assess the relationship among fear of negative evaluation, social avoidance, and distress, anxiety, and loneliness in youth. It was hypothesized that there is a positive correlation between, social avoidance, and distress in social anxiety in youth. The second hypothesis is there is a positive correlation between social avoidance and distress on loneliness in youth. The third hypothesis is there is a positive correlation between fear of negative evaluation and loneliness in youth and the last hypothesis is there is a positive correlation between fear of negative evaluation and social anxiety in youth. From the computed results, it was found that all the hypotheses were accepted.

The first hypothesis, i.e., social avoidance and distress are positively correlated to anxiety. The analysis revealed a positive correlation between social avoidance distress and loneliness ($r=.174$, $p<.01$) There are several studies, a study by Alfano and colleagues (2016) found that social avoidance was associated with greater distress in social anxiety among adolescents. Another study by Knape and colleagues (2009) found that social avoidance was a predictor of distress in children with social anxiety disorder. The research suggests that there is a positive correlation between social avoidance and distress in social anxiety in youth. A study by La Greca et al. (2018) investigates the unique contributions of social anxiety and social avoidance to social developmental processes during early adolescence. It explores how these factors relate to social competence, peer relationships, and emotional well-being among youth. Addressing social avoidance and helping youth develop coping strategies to manage their social anxiety

may be beneficial in reducing distress and improving their quality of life. The Moderating Role of Social Avoidance" by Quaglia (2018) this study examines the impact of social avoidance on the relationship between social anxiety and the quality of everyday social interactions among youth. It investigates how social avoidance influences the experiences and outcomes of social interactions in individuals with social anxiety.

The second hypothesis i.e., social avoidance and distress are positively correlated with loneliness in youth supported by several past researches. The analysis revealed a positive correlation between social avoidance distress and anxiety ($r=.323$, $p<.01$). A study conducted by Qualter and colleagues (2010) found that social anxiety and avoidance were both significantly associated with loneliness in adolescents. Another study by Heinrich and Gullone (2006) found that social anxiety was a predictor of loneliness in a sample of children and adolescents. Moreover, social avoidance and distress can contribute to a cycle of loneliness and social anxiety. A study by Erath and Flanagan (2009) this study examines the relationship between social anxiety, social skills, and loneliness among adolescents. It found that higher levels of social anxiety and lower social skills were associated with increased loneliness in this population. A study by Weeks et al. (2005) examines the relationship between social anxiety, loneliness, and social skills deficits in early adulthood. It indicates that social anxiety and social skills deficits are linked to higher levels of loneliness, emphasizing the importance of social skills in reducing feelings of loneliness. Individuals who avoid social situations may miss out on opportunities to develop social skills, which can lead to further social isolation and loneliness, perpetuating the cycle of anxiety and avoidance. The evidence suggests that social avoidance and distress are associated with loneliness among youth. Interventions that target social anxiety and promote social skills may be helpful in reducing feelings of loneliness and improving overall social functioning.

Considering the third hypothesis i.e., brief fear of negative evaluation is positively correlated to anxiety. The analysis revealed a positive correlation between brief fear of negative evaluation and loneliness ($r=.188$, $p<.01$) A study by Carleton and colleagues (2009) found that BFNE was significantly associated with symptoms of generalized anxiety disorder (GAD) in a sample of undergraduate students. Another study by Weeks and colleagues (2008) found that BFNE was positively correlated with social anxiety in a sample of individuals with social anxiety disorder. Moreover, BFNE has been shown to be a predictor of anxiety. A study by Ledley and colleagues (2005) found that BFNE predicted the severity of social anxiety symptoms in a sample of individuals with social anxiety disorder. the evidence suggests that BFNE is positively correlated with anxiety and maybe a predictor of anxiety in certain populations.

The last hypothesis i.e., brief fear of negative evaluation is positively correlated to loneliness. The analysis revealed a positive correlation between brief fear of negative evaluation and anxiety ($r=.422$, $p<.01$). There is evidence to suggest that there is a positive correlation between brief fear of negative evaluation (BFNE) and loneliness. A study by Weeks and colleagues (2008) found that BFNE was significantly associated with loneliness in a sample of individuals with social anxiety disorder. Another study by Voncken and colleagues (2016) found that BFNE was positively correlated with loneliness in a sample of adults with anxiety and depression. BFNE has been shown to be a predictor of loneliness. A study by Wei and colleagues (2015) found that BFNE was a significant predictor of loneliness in a sample of Chinese college students. The evidence suggests that BFNE is positively correlated with loneliness and may be a predictor of loneliness in certain populations.

Fear of negative evaluation and social avoidance and distress are considered better predictors of anxiety, including social anxiety, compared to other factors. Fear of Negative Evaluation Predicts the Frequency, Duration, and Distress Associated with Social Anxiety in Adolescents"

by Carleton et al. (2010). The study found that fear of negative evaluation significantly predicted the frequency, duration, and distress associated with social anxiety symptoms in adolescents. Social avoidance and distress, as mentioned earlier, are also closely related to social anxiety. "The Role of Social Avoidance and Distress in the Relationship Between Social Anxiety Disorder and Depression" by Lampe et al. (2008). The study found that social avoidance and distress were significant predictors of both social anxiety disorder and depression, suggesting their role in understanding and predicting anxiety-related symptoms. Investigating the Direct and Indirect Effects of Interpersonal Problems and Negative Affect" by Weeks et al. (2007). The study demonstrated that social avoidance and distress were strong predictors of social anxiety, even after controlling for other variables such as interpersonal problems and negative affect.

There have been several studies that support the positive correlation between Brief fear of negative evaluation, social avoidance, and distress on loneliness and anxiety in youth. In a study by Alfano and colleagues (2009), researchers examined the relationship between social anxiety symptoms and avoidance behaviors in a sample of 216 adolescents. The results showed that avoidance of social situations was a key predictor of social anxiety symptoms.

A study by Qualter and colleagues (2010) examined the relationship between social anxiety, avoidance, and loneliness in a sample of 1,791 adolescents. The findings showed that social anxiety and avoidance were both significantly associated with loneliness and distress.

In a study by Weeks and colleagues (2008), researchers examined the relationship between fear of negative evaluation, social avoidance, and social anxiety symptoms in a sample of 88 individuals with social anxiety disorder. The results showed that both BFNE and social avoidance were significantly associated with social anxiety symptoms. A study by Voncken and colleagues (2016) examined the relationship between brief fear of negative evaluation and

loneliness in a sample of 107 adults with anxiety and depression. The findings showed that brief fear of negative evaluation was positively correlated with loneliness. Overall, these studies provide support for the positive correlation between, that brief fear of negative evaluation social avoidance, and distress on loneliness and anxiety in youth. The findings highlight the importance of addressing these issues in order to improve the mental health and well-being of young people.

CHAPTER-7

LIMITATION, IMPLICATION & FUTURE RESEARCH

7.1 Limitations:

1. Since the study is questionnaire-based, chances of response bias could not have been avoided.
2. As convenience sampling was used, randomization of the sample could not be attained.
3. The sample is based only on young adults from urban areas. It should be extended to higher age groups, and a more inclusive sample could be attained.
4. Research was less controlled as some people filled the forms in groups, some alone and some in their rooms due to lack of time.

7.2 Implications:

Although this study has some limitations, it may provide essential insight into the need to explore this topic more. While vigorous research has been done on brief fear of negative evaluation and social avoidance and distress on loneliness and anxiety in youth separately, combined studies on the two are still lacking. Further research could lead to practitioners helping clients increase their awareness of the relationship among brief fear of negative evaluation and social avoidance and distress, loneliness and anxiety in youth might have on us. Also, various counseling and psycho-educational programs can be organized to raise awareness regarding the same and other problems that might be caused or correlated to it. Also, gender's correlation with them can be further assessed and utilized to understand human nature.

7.3 Future research:

We can conduct similar studies on the issue with different age groups, extended with cross-cultures, different social statuses, financial backgrounds, etc. Such studies in this field can provide a deeper understanding of the variables and the relationship between brief fear of negative evaluation social avoidance and distress on loneliness and anxiety and gender. Results found positive correlation should be equally valued if we are to have a balanced and complete perspective on this issue, and significant results should be replicated to increase confidence in these findings. Still, plenty of further empirical work is required in this area.

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APPENDICES

APPENDIX-1

Brief Fear of Negative Evaluation Scale

Leary (1983)

Read each of the following statements carefully and indicate

how characteristic it is of you according to the following

scale:

1 = Not at all characteristic of me

2 = Slightly characteristic of me

3 = Moderately characteristic of me

4 = Very characteristic of me

5 = Extremely characteristic of me

_____ 1. I worry about what other people will think of me even when I know it doesn't make any difference.

_____ 2. I am unconcerned even if I know people are forming an unfavorable impression of me.

_____ 3. I am frequently afraid of other people noticing my shortcomings.

_____ 4. I rarely worry about what kind of impression I am making on someone.

_____ 5. I am afraid others will not approve of me.

_____ 6. I am afraid that people will find fault with me.

_____ 7. Other people's opinions of me do not bother me.

_____ 8. When I am talking to someone, I worry about what they may be thinking about me.

_____ 9. I am usually worried about what kind of impression I make.

_____ 10. If I know someone is judging me, it has little effect on me.

_____ 11. Sometimes I think I am too concerned with what other people think of me.

_____ 12. I often worry that I will say or do the wrong things.

APPENDIX-2

Social Avoidance and Distress Scale (SADS)

Instructions:

This questionnaire consists of a number of statements. We want you to decide for each one if it is TRUE or FALSE, as applied to you. If the statement is TRUE or MOSTLY TRUE as applied to you, tap the true button. If the statements is FALSE or MOSTLY FALSE as applied to you, tap the false button. Remember to give your own opinion of yourself.

		True	False
1	I feel relaxed even in unfamiliar social situations	0	1
2	I try to avoid situations, which force me to be very sociable	1	0
3	It is easy for me to relax when I am with strangers	0	1
4	I have no particular desire to avoid people	0	1
5	I often find social occasions upsetting	1	0
6	I usually feel calm and comfortable at social occasions	0	1
7	I am usually at ease when talking to someone of the opposite sex	0	1
8	I try to avoid talking to people unless I know them well	1	0
9	If the chance comes to meet new people, I often take it	0	1
10	I often feel nervous or tense in casual get-togethers in which both sexes are present	1	0
11	I am usually nervous with people unless I know them well	1	0
12	I usually feel relaxed when I am with a group of people	0	1
13	I often want to get away from people	1	0
14	I usually feel uncomfortable when I am in a group of people I don't	1	0
15	I usually feel relaxed when I meet someone for the first time	0	1
16	Being introduced to people makes me tense and nervous	1	0

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		True	False
17	Even though a room is full of strangers, I may enter it anyway	**0**	**1**
18	I would avoid walking up and joining a large group of people	**1**	**0**
19	When my superiors want to talk with me, I talk willingly	**0**	**1**
20	I often feel on edge when I am with a group of people	**1**	**0**
21	I tend to withdraw from people	**1**	**0**
22	I don't mind talking to people at parties or social gatherings	**0**	**1**
23	I am seldom at ease in a large group of people	**1**	**0**
24	I often think of excuses in order to avoid social engagements	**1**	**0**
25	I sometimes take the responsibility for introducing people to each other	**0**	**1**
26	I try to avoid formal social occasions	**1**	**0**
27	I usually go to whatever social engagements I have	**0**	**1**
28	I find it easy to relax with other people	**0**	**1**

APPENDIX-3

State-Trait Anxiety Inventory

A number of statements which people have used to describe themselves are given below. Read each statement and select the appropriate circle to the right of the statement to indicate how you feel *RIGHT NOW*, that is, *At This Moment*. There are no right or wrong answers. Do not spend too much time on any one statement but give the answer which seems to describe your present feelings best.

Not at all Somewhat Moderately so Very much so

1. I feel calm
2. I feel secure
3. I feel tense
4. I feel strained
5. I feel at ease
6. I feel upset
7. I am presently worrying over possible misfortunes
8. I feel satisfied
9. I feel frightened
10. I feel comfortable
11. I feel self-confident
12. I feel nervous
13. I feel jittery
14. I feel indecisive
15. I am relaxed
16. I feel content

17. I am worried
18. I feel confused
19. I feel steady
20. I feel pleasant

A number of statements which people have used to describe themselves are given below. Read each statement and select the appropriate circle to the right of the statement to indicate how you *GENERALLY* feel.

Almost Never Sometimes Often Almost Always

1. I feel pleasant
2. I feel nervous and restless
3. I feel satisfied with myself
4. I wish I could be as happy as others seem to be
5. I feel like a failure
6. I feel rested
7. I am "calm, cool, and collected"
8. I feel that difficulties are piling up so that i cannot overcome them
9. I worry too much over something that really doesn't matter
10. I am happy
11. I have disturbing thoughts
12. I lack self-confidence
13. I feel secure
14. I make decisions easily
15. I feel inadequate
16. I am content

17. Some unimportant thought runs through my mind and bothers me

18. I take disappointments so keenly that I can't put them out of my mind

19. I am a steady person

20. I get in a state of tension or turmoil as I think over my recent concerns and interests

APPENDIX-4

UCLA LONELINESS SCALE VERSION 3

Scale:
INSTRUCTIONS: Indicate how often each of the statements below is descriptive of you.

Statement	Never	Rarely	Sometimes	Often
*1. How often do you feel that you are "in tune" with the people around you?	1	2	3	4
2. How often do you feel that you lack companionship?	1	2	3	4
3. How often do you feel that there is no one you can turn to?	1	2	3	4
4 How often do you feel alone?	1	2	3	4
*5. How often do you feel part of a group of friends?	1	2	3	4
*6. How often do you feel that you have a lot in common with the people around you?	1	2	3	4
7. How often do you feel that you are no longer close to anyone?	1	2	3	4
8. How often do you feel that your interests and ideas are not shared by those around you?	1	2	3	4
*9. How often do you feel outgoing and friendly?	1	2	3	4
*10. How often do you feel close to people?	1	2	3	4
11. How often do you feel left out?	1	2	3	4
12. How often do you feel that your relationships with others are not meaningful?	1	2	3	4
13. How often do you feel that no one really knows you we11?	1	2	3	4
14. How often do you feel isolated from others?	1	2	3	4
*15. How often do you fee1 you can find companionship when you want it?	1	2	3	4
*16. How often do you feel that there are people who really understand you?	1	2	3	4
17, How often do you feel shy?	1	2	3	4
18. How often do you feel that people are around you but not with you?	1	2	3	4
*19. How often do you feel that there are people you can talk to?	1	2	3	4
*20. How often do you feel that there are people you can turn to?	1	2	3	4

Scoring:
The items with an asterisk are reverse scored. Keep scoring on a continuous basis.

This scale is provided only for Researchers.