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Social Interaction Anxiety as Mediating Role of Mental Well-being and Quality of Life Among University Students

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Abstract

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Keywords: Social Interaction Anxiety, Mental Well-being, Quality of Life, University Students

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Contents

- [Introduction](#)
- [Indigenous Researches](#)
- [Rationale](#)
- [Theoretical Framework](#)
- [Objectives](#)
- [Hypothesis](#)
- [Methodology](#)
- [Quality of Life Scale](#)
- [Research Setting](#)
- [The Procedure of the Study](#)
- [Conclusion](#)
- [Discussion](#)
- [Limitations](#)
- [Future Research](#)
- [References](#)

Abstract

"How does our minds connect to dissatisfaction in relationship with others and the mindset that arises at a result hereof a connection?" is a question that needs an answer. The researchers aimed to survey university students. Examining the interplay between anxiety, mental wellness, and happiness, this research used an overall correlational methodology. Three hundred individuals, comprising both undergraduates and graduates, were selected from a variety of schools using a purposive sampling approach. The collected data was sorted and evaluated using SPSS (26). There was a negative link between interacting anxiety and both cognitive health and life happiness, according to the findings of the correlational analysis. On the other side, living a fulfilled life was positively correlated with psychological well-being. Anxiety about social interactions and overall pleasure are both influenced by an individual's mental health, according to model-wise regression with lines analysis.

Keywords: [Social Interaction Anxiety](#), [Mental Well-being](#), [Quality of Life](#), [University Students](#)

Introduction

The specific demography of students going through a critical life period with many stressful occurrences is pointed out by Asif et al. (2020).

Many people have the impression that educational institution is a period of tremendous intellectual and personal development when students establish and develop their academic and social identities.



However, attending university isn't without its share of challenges for the majority of students. These include adjusting to unfamiliar social settings, meeting rigorous academic standards, and maintaining good mental health (Khademian as well as other people in the year [2021](#); Tsitsas along with others, [2019](#)). Anxiety in social situations is common among college students and may have detrimental effects on their health, relationships, and academic success. A person with socially anxious disorders is defined by the DSM-5 as having an unreasonable fear of being poorly assessed in social circumstances. Because of this fear, they either feel very anxious or completely avoid these kinds of encounters. (American Psychiatric Association, [2013](#)).

Social interaction anxiety is commonly found among college students, who are required to participate in unfamiliar social and academic settings. Students face extreme social anxiety during their tertiary education, thus affecting their performance in college, interactions, and experience overall. In students, it has been associated with poor performance in terms of academics, reclusive tendencies, and increased levels of stress (Russell & Shaw, [2009](#)). These students find hard times during their group work, presentations, and also making friends; these qualities make their mental health even worse. Therefore, focusing on handling social anxiety is the key to students' overall welfare and academic performance (Gorinelli et al., [2022](#)). The transition to higher education requires increased expectations for interacting with others, meeting academic requirements, and adjusting to living situations, making many students face social anxiety (Boukhechba et al., [2018](#)).

This worry can have a significant impact on students' psychological well-being, and in turn, their overall quality of life. Good mental health includes positive emotional well-being, stability in emotions, and having a sense of purpose and satisfaction in life (Ryff, 1989). It refers to the general condition of mental well-being, including emotional and cognitive aspects, and is essential for dealing with difficulties, staying strong, and living a harmonious life according to Keyes ([2007](#)). Having good mental well-being enables students to effectively handle university life, cope with stress in a healthy way, cultivate positive relationships, and

maintain a satisfactory balance in both academic and personal aspects of life (Morales-Rodríguez et al., [2020](#)).

The mental health of individuals plays a key role in how they handle stress, interact with others, and experience happiness in life. Among university students, good mental well-being acts as a buffer to academic, and social life pressures, and dynamics (Hernández-Torrano et al., [2020](#)). It also acts as a remedy for the consequences of stress and anxiety, maintaining individuals in a balanced mental state. Regarding university students, mental health has acted as a buffer for the influence of social stressors, like social anxiety, on general life results. On the other hand, socially interacting anxiety can actually impair the mental well-being of the students. This will further reduce their quality of life. Students with elevated levels of social anxiety typically experience poorer mental well-being as they often feel isolated and overwhelmed while trying to navigate social situations (Morrison & Heimberg, [2013](#)).

According to previous studies, mental health has a mediating role in many psychological procedures, such as the effect of tension on subjective assessments of enjoyment (Galderisi et al. 2015). Research indicates that resilient persons are less prone to let the harmful implications of concern undermine their good mental well-being (Seligman, [2011](#)). Improving children's mental health may mitigate the negative impact of interpersonal pressure on their quality of life as a whole, according to Gilman et al. (2016), which adds to the growing body of data suggesting that such interventions might alleviate other difficulties in people's lives. Physical and mental well-being, social connections, and environmental variables are all part of the quality of life, according to the World Gesundheit Assembly (1997).

If they want to enjoy themselves while in college, students must find a way to manage their academic, social, and personal lives. Pupils whose Social anxiety has prevented them from interacting with others reported worse quality of life, according to one research. Sociable anxiety may have a detrimental impact on students' mental health, relationships, and academic performance (Gandhi & him, [2018](#)). Anxiety over social interactions is inversely associated with quality of life, according to many research (Magee et al., 2014). For example,

there is evidence that people with social anxiety are less content with life in general and have more mental health issues. Students' anxiety levels rise in the absence of robust social support systems, making it more challenging for them to fully enjoy their time at university (Weston & Thomas, 2019).

Students who show signs of having a healthy mental state are better able to deal with stress and keep their quality of life high, say Mahmoud and colleagues (2012). The mental well-being of an individual is a key factor in determining their level of life satisfaction, regardless of whether they are experiencing stress or concern (Diener et al., 2003). In addition, in contrast to their non-phobic peers, college students who suffer from social anxiety disorders or phobias tend to have worse mental health and a lower quality of life in general, particularly when it comes to their emotional and social lives. (Alsamghan, 2021; Hajure & Abdu, 2020; Isa et al., 2021; Ratnani et al., 2017; Ye et al., 2021).

Indigenous Researches

The effects of social interaction anxiety on college student's mental health and happiness have recently been the subject of a wave of studies conducted in Pakistan. Anxiety in social situations may have a devastating effect on the mental well-being of a pupil, schoolwork, and general happiness. College students in Pakistan may not participate as much in extracurricular activities and academics as they would want because they are worried about not fitting in. College students' social anxiety might impede their personal and intellectual growth by making them feel inadequate and inferior (Wajid et al., 2024).

Another research found that students' levels of social anxiety and contentment were related to their mental health in Pakistan. According to Ali and Malik (2021), students' perceptions of their own happiness and contentment are negatively impacted by a greater amount of social anxiety, which is linked to lower mental health. Their proficiency in life may be improved by prioritizing mental health since it protects them from interpersonal strain and makes management easier. Students in Pakistan who reported greater levels of social anxiousness also reported worse levels of well-being and standards of life, according to another research that looked at their mental health.

A study conducted by the study by Khan e (2019) backs up this discovery. This highlights the significance of mental health resources in supporting students as they build emotional resilience.

Rahman and Arif (2022) found that students in Pakistan who received education in emotional regulation and cognitive behavior strategies had significantly reduced symptoms of Social nervousness and improved mental health. The degree of life has been improved as a result of these treatments, which have made them more capable academically and better social participants. This study lends credence to previous findings linking social anxiety, mental illness, and longevity; furthermore, it highlights the critical need to address the issues encountered by college students in Pakistan right once.

Rationale

While college is a period of great transition, many students struggle mightily with issues like social anxiety, which may have devastating effects on their emotional well-being and general happiness. Anxiety about being judged in social situations is a common symptom of interactions with others anxiety, which many students experience (Russell & Patterson, 2009). According to Boukhechba et al. (2018), the constant pressure on university students to achieve socially and academically puts them at a higher risk of stress and mental health issues. Prioritizing one's mental health is essential for developing resilience and effectively managing stress. According to Morales-Rodriguez et al. (2020), mental health may have a mediating role between social anxiety and an improvement in quality of life. Few research has looked at how social interaction anxiety affects the mental well-being of college students. Because assisting students in overcoming social anxiety and improving the way they feel may have a favorable influence on their both personal and professional progress, it is vital to examine these interrelated elements for this research. Source: Goodman et al., 2017.

Cultural stigma, societal constraints, and an absence of mental health services have created an especially critical situation in Pakistan. According to research by Khan et al. (2019), students' levels of social anxiety have a detrimental effect on their

mental health and overall satisfaction in life. In Pakistani classrooms, the relationship between students' social anxiety, life happiness, and interpersonal competency is not well understood, and it is also not known how students' emotional wellness impacts this relationship. Cultural variables, such as unfulfilled familial expectations and a lack of emotional support, have largely been ignored in the recent surge of research on mental illness in Pakistan (Ali & Malik, 2021). This project aims to bridge these knowledge gaps by collecting culturally appropriate data on college students' mental health; its ultimate objective is to help college students overcome social anxiety and lead better lives. Academic mental illness services and therapies should benefit from research that addresses these gaps. (Rahman & Qureshi, 2022).

Theoretical Framework

According to the cognitive behavioral theory of social anxiety developed by Clark and Wells (1995), the research indicates that negative thoughts and maladaptive behaviors are the primary factors contributing to social interaction-related anxiety. People with social anxiety frequently experience heightened apprehension of criticism, causing them to view many social interactions as excessively menacing.

Such fear fosters avoidance behaviors and self-focused attention that seem to fuel anxiety and impede interpersonal relationships too (Clark & Wells, 1995). For undergraduate students, this distortion can be manifested in challenges such as reluctance to engage in any group discussion, public speaking, or making meaningful interpersonal relationships (Laldinpui et al., 2024). These actions not only increase social anxiety but also hinder students' ability to deal with the challenges of academic and social aspects of university life, thus decreasing mental health and overall satisfaction (Alden & Taylor, 2010).

Mental well-being plays a crucial role as a mediator between anxiety and quality of life during social interactions. It acts as a crucial tool for individuals dealing with stress, controlling their emotions, and forming healthy relationships. Students who excel in their mental well-being are more skilled at implementing successful positive coping mechanisms and restructuring pessimistic thoughts, leading to a decrease in the effects of

social anxiety (Morales-Rodriguez et al., 2020; Seligman, 2011). Having a strong mental well-being helps students manage stress and anxiety effectively, leading to a better quality of life (Hernández-Torrano et al., 2020).

On the contrary, students who possess a lower level of mental well-being are more susceptible to the detrimental consequences of social anxiety and often undergo higher rates of stress, feelings of isolation, and lower life satisfaction (Morrison & Heimberg, 2013; Salehinezhad, 2012). Moreover, research draws attention to the fact that poor mental well-being aggravates the detrimental effects of social anxiety, thereby causing inferior academic performance, growing tensions in relations, and less resistance to challenges (Magee et al., 2014; Weston & Thomas, 2019). These findings highlight the critical role of mental well-being as a buffer and provide a theoretical basis for interventions aimed at improving mental health outcomes for socially anxious students.

Research supports cognitive behavioral theory in explaining the mechanisms of social anxiety. Morrison and Heimberg (2013) emphasized that negative cognitive assessments of social interactions perpetuate social anxiety, especially among students, which affects their academic performance and social participation. McCall et al. (2018) demonstrated that interventions based on cognitive distortions, including cognitive restructuring, are beneficial for decreasing the levels of social anxiety in university subjects. Mediation for mental well-being is also widely reported.

Pahlevan Sharif and colleagues (2018) found that one's mental health may act as a mediator between stress and its actual effects. The connection between corporate support and nurses' performance is strengthened when nurses' mental health increases their job happiness and general mental health. The link between social anxiety and happiness seems to be moderated by psychological health, according to this research. According to Bagheri et al. (2022), who have shown a correlation between self-efficacy and mental health-related excellence in life, fostering emotional resilience in pupils may substantially enhance their life opportunities.

Quality of life is negatively impacted by social anxiety, according to a study. Alsamghan (2021)

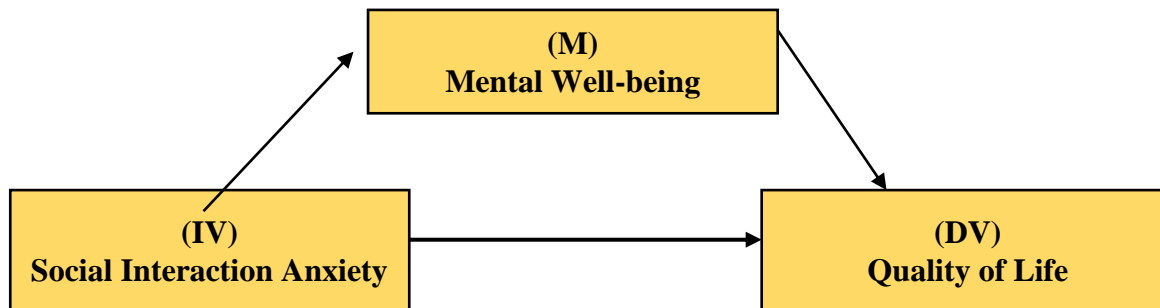
argues that students' emotional and social competence, as well as their level of life, are negatively impacted by social anxiety. Archbell and

Coplan (2022) verified that social anxiety lessens life enjoyment and makes it difficult to achieve in social and academic contexts.

Conceptual Model

Figure 1

Conceptual Model of the Study



Objectives

1. The goal of this research is to find out how happy, healthy, and anxious college students are while interacting with others.
2. Looking at college students' mental health through a prism of their worry about social interactions and overall quality of life is the goal of this research.
3. Our goal in comparing college students was to identify how demographics impacted the study's variables.

Hypothesis

1. H1: Anxieties about interacting with others, psychological health, and overall happiness are all factors that college students should consider.
2. H2: Mental health will have a mediating role in the connection between social anxiety and life satisfaction.
3. H3: Variables in the research will vary among college students due to demographic considerations.

Methodology

Research Design

The research employs a cross-sectional correlational design so that relations between

anxiety of social interaction, mental well-being, and quality of life regarding university students could be explored. This kind of design could provide the overview of captured variables as well as the exploration of their interactions and potential mediating effects. Moreover, it enables the assessment of differences in the above variables across demographic factors and gives insights into which background characteristics drive the structures studied (Creswell, 2014).

Sample of the Study

The sample consists of university students, aged between 18-25, who are selected using simple random sampling techniques to ensure differences in representation by various demographic characteristics. The sample size of about 200 participants was considered sufficient for the correlation and mediation analyses and to determine differences among groups of populations. The participants were recruited from different universities in Faisalabad with a healthy representation of different socio-economic statuses and educational backgrounds.

Inclusion Criteria

Participants of the study include university students aged 18–25 years, in current enrollment for

undergraduate or postgraduate programs, and able to read and understand English. The criteria ensure that all participants can provide a reliable response to the scales used in the study.

Exclusion Criteria

To reduce the potential for confounding factors, this research did not include students who were known to have a mental health illness or physical disability that may have affected their answers on the scales. Aside from that, we didn't include pupils who weren't ready to offer their permission.

Measures of the Study:

Informed Consent Form

All participants got the chance to offer their informed permission before being enrolled in the study, and it was legally documented. Every single person who took part in the research was kept in the dark. All responses would be kept private, and participants might withdraw from the research at any time without any repercussions. The papers requesting signed consent were stored in a safe place.

Demographic Form

Demographic research offers a detailed picture of the people involved. The gender and age are the pieces of demographic data. In order to better understand the study's findings and any potential demographic-based differences in interacting anxiety, mental health, & life satisfaction, it is helpful to analyze the demographic statistics provided.

Social Interaction Anxiety Scale (SIAS)

In 1998, psychologists Mattick et Clarke developed the Social Interface Dysfunction Scale (SIAS), a widely used tool for assessing social anxiety. One hundred and ten elements make up the Likert scale, with zero representing very insignificant and four representing extremely important. An outstanding alpha value of 0.94 in the medical needs and moderate categories is achieved by the worries scale, which assesses social anxiety (Mattick & Clarke, 1998).

Mental Health Inventory

The MHI-18 is a shortened version of a 36-item

scale that Veit and Ware (1983) created to assess mental health and anxiety in all individuals. Included in it are a range of approaches to managing anxiety, depression, and behavioral issues, as well as effect evaluation tools. People are considered to be in good mental health when they have strong social networks and no major emotional problems. Psychological stress is characterized by feelings of hopelessness, discomfort, and powerlessness over one's own thoughts and behavior. Each participant is required to record the number of times throughout this past month that they experienced each of these emotions. The possible choices are listed on an amount from 1 (always) to 6 (never). A higher total score indicates greater mental health, whereas each subscale has a potential range of 0–100. In a number of studies, the correlations between the two lengths of the instrument varied from 1.96 to 0.99. The MHI-18 was more accurate than the GHQ in identifying mental and anxiety disorders. According to the study's findings, the MHI-18 outperforms both the SSI and the GHQ in identifying depression-related symptoms.

Quality of Life Scale

A self-report measure that evaluates the quality of existence across several domains, the Quality Upon a Life Scale consists of sixteen items. Physical health, mental health, interpersonal relationships, and environmental variables are the primary foci of the 16-question survey (Burckhardt & Anderson, 2003). To conduct an in-depth examination of the personal and social factors impacting quality of life, researchers may ask respondents to rate their degree of comprehension or satisfaction with each issue using a Likert scale. The satisfaction and delight of a person may be better captured by the QOLS-16, which takes into account subjective as well as objective factors. A higher score indicates a greater standard of life, and the values range from 16 to 112.

Research Setting

A number of contextual factors unique to Faisalabad City, Pakistan, are at play in this investigation. The participants in this three-month study were undergraduates from a range of socioeconomic statuses and academic specialties

attending several institutions in Faisalabad. From eighteen to a period of 25 years old, the participants were grouped.

Academic settings, peer relationships, and institutional norms are a few of the environmental elements that impact acquaintances and mental health. Researchers in this study surveyed participants using a battery for emotional measures to gauge their general well-being, level of anxiety around social interactions, and perceptions of their mental health. Considering the mediating influence of mental health (helpful health) affects anxiety about socializing and quality of life, these scales were used to evaluate the analyzed characteristics in order to achieve a comprehensive evaluation.

The Procedure of the Study

The procedure included several critical phases of the study. To begin with, in order to follow all ethical guidelines, we sought permission from the Board of Institutional Review (IRB). This ensured that the rights of the participants would be protected. After receiving the necessary ethical approvals, a random selection of 300 students from a variety of academic institutions was made using a purposive sampling technique. Compilation of data: Structured questionnaires were used to gather data from the participants. The following instruments are used: One way to measure how anxious people are in social situations is with the Social Interaction Fear Scale (SIAS). One way to measure mental health is via the Mental Health Inventory. The purpose of a quality of life assessment is to quantify several dimensions of that quality. The selected instruments were very important, valid, and reliable in achieving the study objectives.

The research's aims, procedures, and confidentiality regulations were explained in detail to the participants. Before filling out the survey, they were asked to get informed consent. In order to ensure that the replies were reflective of their real experiences, explicit instructions were also provided. Anxieties about social interaction, emotional wellness, and general quality of life were assessed using Likert scales in the questionnaires. In order to get useful insights into the mental health and social issues faced by college students, the data was analyzed and condensed to

understand the mental health impacts and the relationship between anxiety and the quality of social interactions.

Statistical Analysis

In this study, key steps in statistical analysis included elucidating the connection between social interaction anxiety, mental well-being, and quality of life in university students. Summary statistics have been computed to summarize the central tendencies, dispersion, and distributions of variables, offering a brief overview of the data including means, standard deviations, and frequencies. The Pearson correlation coefficient was utilized for correlation analysis to assess the relationships between anxiety, mental well-being, and quality of life in social interaction in terms of strength and direction. Additionally, research hypotheses have been tested through the use of inferential statistical tests.

Average results of significant differences in anxiety, well-being, and quality of life were identified by comparing demographic groups like gender and academic year through independent t-tests. Regression analysis was used to explore the mental well-being mediator role and find it a plausible mechanism that connected the anxiety of social interaction with quality of life. These analyses aimed at identifying meaningful patterns and relationships that would provide a robust evidence base for enhancing understanding of the mental health challenges university students face.

Ethical Considerations

Additionally, the study's methodology was consistent with the standards upheld by the American Psychological Association's code of ethics. The standards were kept at the greatest ethical level prior to the research date, as approved by the Institutional Panel of Ethics. By putting an emphasis on higher-standard research ethics, this pre-study effort increased the study's credibility. By meticulously adhering to these ethical standards and securing the necessary clearances, a comprehensive and methodical investigation of the elements influencing university the social interactions of pupils' anxiety, psychological well-being and general quality of life may be realized.

Results

Tables 1

Demographic variables of participants (n = 300).

Variables	Frequency (f)	Percentage (%)
Age		
18-21	133	44.3
22-25	167	55.7
Gender		
Male	94	31.3
Female	206	68.7

Table 1 details the participant demographics (n = 300) from the university. The bulk of the participants, 55.7% (n = 167), are in the 22–25 age bracket, while 44.3% (n = 133) are around the ages of 18 and 21. Gender distribution: a smaller percentage of males (31.3%) and a bigger proportion of females (68.7%, n = 206) are involved. There is a wide range of ages and genders represented in the sample of college students. The female gender is more prevalent. Between 22 and 25 years.

Table 2

Summary of the correlation matrix of social interaction anxiety, mental well being and Quality of Life among university students (N=200)

Variables	1	2	3
Social Interaction Anxiety	-		
Mental Well-being	-.146*	-	
Quality of Life	-.501**	.413**	-

*Correlation is significant at the 0.05 level (2-tailed).

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

The association matrix for 300 students' emotional well-being, life happiness, academic performance, and social anxiety is shown in Table 2. Higher levels of connection anxiety are associated with worse psychological well-being (r = -0.146, p < 0.05), indicating that this demographic has poorer mental health overall. A statistically substantial negative connection between the two measures (r = -0.501,

showing p < 0.01) suggests that those with higher levels of connecting anxiety probably had a much worse quality of life. Another probable explanation is that a person's subjective well-being is strongly correlated with their physical health (r=0.413, p>0.01). The results showed a robust relationship between being happy and being pleased with life in general.

Table 3

A summary of model wise linear regression results for mediating the relationship Between social interaction anxiety and mental well-being (Table no. 3).

Variable		Quality of Life					R ²	ΔR ²
		B	95% CI	S.E B	β			
Model 1						.25	.24***	
Constant		85.29***	(81.28, 89.31)	2.04				
Social interaction anxiety		-.67***	(-.80, -.54)	.06	-.50***			
F (1-298)	99.84							
Model 2						.37	.36***	
Constant		43.47***	(31.82, 55.11)	5.91				

Variable		Quality of Life					
		B	95% CI	S.E B	β	R ²	ΔR^2
Social interaction anxiety		-.60***	(-.73, -.48)	.06	-.45***		
Mental well-being		.65***	(.48, .82)	.08	.34***		
F (2-297)	86.83						

Note: *** $p < .01$; Unstandardized Coefficients = B; Standardized Coefficients = β ; p = level of significance; CI= Confidence Interval

An individual's psychological wellness mediates the association between social anxiety and life satisfaction, as seen in Table three on the aggregate model-wise log-linear regression study. Model 1 discovered the following when it examined the inverse relationship between Social anxiety and happiness: A p -value of less than 0.01 and a 95% confidence range of [-0.80, -0.54] indicate that B is -0.67. The results showed an error margin of 0.06. Their passion for life might be drained if they let their worries about other people's opinions affect them. The model fits the data well; it explains 25% of the variance in QoL ($R^2 = 0.25\%$ and 0.24). The fact is $f(1, 301) = 99.84$ и $p < 0.01$ indicates a significant outcome.

By using the emotional state as a factor of prediction in Model 2, we were able to achieve

improved predictive and 37% greater reported variance ($R^2 = 0\%$; R^2 , which is = 0.36). On both roles, the 95% confidence interval is [-0.73, -0.48], R_i above 0.06 (= -0.45, $p < 0.01$), indicating a substantial negative association between social contact concern and life level. Furthermore, mental health impacts this attribute significantly, and it is a strong indicator of a greater standard of life the results of (B = 0.65, the precision of 95 percent [0.48, bare.82], SE = 0, (= equal.34, $p < 0.01$). A continuous and statistically significant match exists for Model 2: Finally, the findings show that mental health impacts the association between social anxiety and overall happiness (p a value less than 1). The link's meaning ranking of 86.33 proves its veracity.

Table 4

Independent Sample t-test for Comparison between Gender of Sample across all Variables (n = 300)

Variables	Male (N=94)		Female (N=206)		t	p	Cohen-d
	M	SD	M	SD			
Social Interaction Anxiety	25.85	10.72	28.45	12.63	-1.72	.22	-.21
Mental Well-being	63.02	8.12	60.33	8.82	2.50	.75	-.31
Quality of Life	69.49	14.91	65.31	16.81	2.06	.13	.25

Note: N = Numbers; M = Mean; SD = Standard Deviation; t = t Value; p = Significance Level.

Table 4 shows that when comparing students in college, there is a significant gender gap in anxiety, psychological health, and overall satisfaction. Despite the expectedly small impact size ($d = -.21$), there was no statistically significant difference in social anxiety between men and women (to earn(298) = -1.72, $p = .22$). Compared to the males' normal of 25.85, the women's standard deviation was 12.63. Reported differences in mental health between men and women were small ($d = -.31$), but

not statistically significant. The effect size was low ($d = .25$), and the results were inconsistent (it(298) - 2.06, $p = .13$). Lastly, the gender discrepancy in quality of life ratings was of statistical importance (average = 65.31, Pd - 16.81) & significantly larger (M = 69.49, Pd = 14.91). Research has shown no substantial difference in the prevalence of anxiety between the sexes with regard to social circumstances, quality of life, or mental health.

Table 5

Independent Sample t-test for Comparison between Age of Sample across all Variables (n = 300)

Variables	18-21 years (N=133)		22-25 years (N=167)		t	p	Cohen-d
	M	SD	M	SD			
Social Interaction Anxiety	27.45	11.69	27.78	12.46	-.23	.70	-.02
Mental Well-being	61.87	7.55	60.62	9.48	1.23	.03	-.14
Quality of Life	65.92	16.39	67.17	16.31	-.66	.88	-.07

Note: N = Numbers; M = Mean; SD = Standard Deviation; t = t Value; p = Significance Level.

By using the t-test in independent covariates, we compared the two distinct groups on measures of mental wellness, fear, general state of life, and relationships. Of the total, 167 were between the ages of 22 and 25, and 133 were between the ages of 18 and 21. With respect to the social interaction anxiety measure, there was not a significant difference between the two age groups (M = 27.45, SD = 11.69 vs. the M's = 27.78, the SD = 12.46, $t(298) = -0.23, p = .70, \eta = -.02$). Additionally, there was a significant disparity in self-report measures for mental health between the 18–21 and 22–25 generations (M = 61.87, SD = 7.55) and 60.62, SD = 9.48, respectively; $t(298) = 0.23$, which $p = .03$; slight negative effect size, $d = -.14$). The quality of life had a little negative impact ($d = -.07$), but there was no notable difference between the younger and older participants (M = 65.92, SD = 16.39 or M = 67.17, SD = 16.31, $t(298) = -0.66, p = .88$, however). Concerning social contact, anxiety as well as the excellence of life little changed. When comparing mental health across age groups, younger people did better, but there were small but statistically significant differences.

Conclusion

The study's findings on college students' psychological well-being, contentment, and social anxiety indicate many significant factors. Both general well-being and mental health were negatively correlated with social anxiety ($r = -0.50$, a value of 0.01). This adds to the growing body of data that suggests social anxiety may have detrimental effects on one's mental and physical well-being. But general mental health is positively associated with quality of life ($r=0.41, p=0.01$), thus mental health may serve as a buffer. Anxiety, social ties, and overall quality of life are all impacted by an individual's mental health, according to a regression study. Quality of life is favorably associated with mental health in mediation models

(B = 0.65, $p = 0.01$), while in models 1, 2, and 3, there is a negative correlation between social contact anxiety and QoL (B = -0.67, $p = 0.01$). There were no discernible gender disparities in terms of mental health issues, social anxiety, or quality of life when we compared men and women. When it came to measures of happiness and psychological well-being, males did a little better than women. In terms of social connection anxiety and living conditions, there was no significant age difference; however, there was a larger discrepancy in how those in the 22–24 and 18–21 age groups perceived mental illness. The results provide light on the protective function of mental health in relation to the intricate relationship between psychological well-being, life satisfaction, and social anxiety. College students suffering from social anxiety may find relief from its debilitating consequences by engaging in mental health activities.

Discussion

Here, researchers surveyed Pakistani university students on three measures of their quality of life: "social participation anxiety," "feeling grade of life," and "high-quality" of life. When compared to other good outcomes, such as contentment with life, emotional well-being, and overall wellness, social anxiety has a statistically negative link. Results from research by Wajid and others, (2024) show that those with social anxiety are less likely to be happy and healthier overall. This research contributes to the current body of knowledge by providing hard data on how students' anxiety affects their participation in extracurricular activities. Regression analysis backs up the earlier findings that social anxiety lowers quality of life. The relationship is moderated by mental health. This finding offers support for earlier studies on anxiety management conducted by Ali et Malik (2021) and Zia + Qureshi (2022) since it lessens the effect of worry on students' lives. After these

substantial correlations were accounted for, the research nonetheless failed to uncover any gender or age-related variations in anxiety, mental diseases, or pleasant social interaction. Male and female students of equal age are equally affected by these factors, as seen by these data. In order to help youth who suffer from social anxiety manage their symptoms and live satisfying lives, our results emphasize the crucial requirement of mental health treatments such as emotional regulation methods and mental health therapy.

Limitations

There are a few caveats to the research. One limitation of cross-sectional studies is that they do not allow researchers to establish a cause-and-effect relationship between social anxiety, psychological health, and overall quality of life. The future of these linkages might be better understood

with a long-term study design. Results may not be reliable if they are based on self-reporting measures because of response biases such as social need or faulty self-evaluation. In addition, as the research only included Pakistani college students, extrapolating the findings to groups with diverse cultural or scholastic backgrounds is problematic.

Future Research

In order to better understand how anxiety impacts students' mental health and overall happiness, future research might investigate potential moderators or buffers, such as coping mechanisms and social support. These findings point to the need for future studies to use longitudinal designs, include variables to better understand the impact of social interaction anxiety on mental health and quality of life, and use samples that are more diverse and balanced.

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