INTERNATIONAL ORGANIZATION OF
IOAS
ACADEMIC STUDIES

Effectiveness of Transdiagnostic Treatment on Social Anxiety in Orphans Adolescent Girls

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Abstract

The purpose of this study was to determine the effectiveness of transdiagnostic treatment on social anxiety in orphans adolescences. This research was a quasi-experimental design with pretest-posttest design with control group. The statistical population consisted of all adolescences girls aged Between 12 to 18 living in the state Welfare Organization of Sari in 2016. Purposeful sampling was used to select the sample. Social phobia inventory (SPIN) was administered on adolescents living at the Center. According to the test results, 20 girl adolescence whose social anxiety was higher than average were selected and randomly divided into two groups, experimental and control (each group consisting of 10 subjects). The participants were assessed by social phobia inventory scale (SPIN). For data analysis, multivariate analysis of covariance (MANCOVA) was administered using SPSS21. The results showed that transdiagnostic treatment were effective on the reduction of social anxiety (P<0.001), fear (P<0.004), avoidance (P<0.007) and physiological discomfort (P<0.002) in the experimental group. It seems that transdiagnostic treatment is effective in social anxiety and it may be applied in prevention and treatment of social anxiety disorder.

Keywords:Transdiagnostic Treatment,SocialAnxiety,orphans adolescences.

Introduction

Social anxiety disorder (SAD) is the most common mental disorder in childhood/adolescence and is characterized by a fear of negative evaluation by others. Several common manifestations of social anxiety in adolescents (e.g., fear of reading aloud, taking tests, and asking teacher's questions). SAD is associated with poor social skills, reduced social interactions, low self-esteem, and low school performance [1]. It is estimated that between 5% and 13% of the population have this problem. It is considered as a chronic pathology, capable of incapacitating the individual and promoting the development of high rates of psychiatric comorbidities, such as depression, generalized anxiety disorder, and agoraphobia, being the most common anxiety disorder and the third most frequent psychiatric disorder [2].

Frequency of psychological and emotional disorders in orphanage children and adolescences due to the loss of parents educational-psychological being and lack of their effective support is at upper [3-4]. Orphaned and neglected have always had a negative psychological and educational effect on children and adolescence [5]. Studies on Iranian children showed that children are living in State Welfare Organization centers due to death of their parents (10%), difficult to treat diseases (5%), loss of one of parents or lack of qualification for taking care of children (5%), court decisions (10%), being jailed (15-20%) and foundling (50%). Orphans or unsupervised children of State Welfare Organization are living in foster care centers. Foster care is a part of welfare systems of children and a place like family is provided for taking care of children when parents are not able to take care of them. There are few important situations in human life recognized as turning points in the life. One of such situations is when sever physical and spiritual changes and fluctuations are occurred for the individual. This is a relatively long period and includes the second decade of life. This is called adolescence. Changes and fluctuations and sometimes conflicts of individual identity increase the importance of this period and require paying attention to such individuals in the society [6]. The results of several longitudinal and cross-sectional Studies have showed that family and cognitive and behavioral factors can prevent emotional disorders [7]. For this reason intervention with aim empowerment this adolescents in dealing with damage caused by social anxiety seems necessary.

Transdiagnostic treatment is a behavioral-cognitive intervention that focuses on emotions. Although it has roots in the traditional cognitive behavioral principles,

it is still unique and singular due to the particular emphasis it exerts on the manner of experimenting and a patient's response to his own emotions. Transdiagnostic treatment is specifically used for the treatment of emotional disorders, with its particular emphasis on anxiety. In addition to the cognitive components such as cognitive restructuring, transdiagnostic treatment also encompasses such methods as emotional awareness, prevention of emotional avoidance, and emotional coping [8]. Different studies have approved the effectiveness of Transdiagnostic treatment in the reduction of social anxiety, worry, depression, general anxiety, anxiety sensitivity symptoms, signs and symptoms of borderline personality disorder, panic and negative affect, and increases positive affect [9-10-11-12-13]. Due to the increasing number of orphans children and adolescences and their maladaptive behaviors and emotional disorders, it is necessary to pay special attention to this population, but emotional disorders of orphans adolescences has received less attention, therefore the purpose of this study was to determine the effectiveness of transdiagnostic treatment on social anxiety in orphans adolescences.

Measure

This research was a quasi-experimental design with pretest-posttest design with control group. The statistical population consisted of all adolescences girls aged between 12 to 18 living in the state Welfare Organization of Sari in 2016. Purposeful sampling was used to select the sample. Social phobia inventory (SPIN) was administered on adolescents living at the Center. According to the test results, 20 girl adolescence whose social anxiety was higher than average were selected and randomly divided into two groups, experimental and control (each group consisting of 10 subjects). The inclusion criteria of the study were as follows: 1- age range between 12 to 18 years old, 2- attending in hostelry centers at least for 1 year, 3- having the score higher than average of Social phobia inventory (SPIN). Experimental group receive 8 sessions of transdiagnostic treatment that each session last 90 minutes and they were from July to September 2016 and this program was based on Treatment in the Unified Protocol (UP) for transdiagnostic treatment of emotional disorders [8], but there was no interference in control group. After these training sessions, again Social phobia inventory (SPIN) accomplish for both groups. Finally, based on suitable statistical methods, data were analyzed. (It should be note that because of obeying the ethical values, according to accomplished coordination, this training sessions accomplish for control group). The main procedures followed in each section are described in Table 1.

Table 1- The outline of issues presented during the 8 sessions of transdiagnostic treatments

Session No	Central theme	Session details
Session 1	Motivation Enhancement	Intervention structure, process, and model were introduced in this session. Also intervention logic and purpose (in order to increase the rate of participation and maintain the individual's motivation for treatment engagement) were presented.
Session 2	Psycho-education	This session included psycho-education around the nature and function of emotions.
Session 3	Emotional awareness training	This session was held to increase non-judgmental, present-focused awareness of their emotional experiences and to learn observing emotional experiences (emotions and responses to emotions), especially using mindfulness techniques.
Session 4	Correction of cognitive appraisals	Reciprocal influence between thoughts and emotions, identification of automatic maladaptive appraisals, and common thinking traps and cognitive reappraisal and increasing flexibility were addressed in this session.
Session 5	Identifying patterns of emotion avoidance	Concept of emotion avoidance and types of emotion avoidance strategies and their effects on emotional experiences and also awareness about paradoxical effects of emotion avoidance were described.
Session 6	Examining Emotion-Driven Behaviors (EDBs)	Getting familiar and identifying Emotion-Driven Behaviors and understanding their effect on emotional experiences, identifying maladaptive EDBs, and creating inconsistent behaviors and emotional exposure were examined in this session.
Session 7 & 8	Interceptive and situation-based emotional exposures	These sessions focused on awareness and tolerance of physical sensations, exposure to both internal (including physical sensations) and external emotional triggers and helping individuals increase their tolerance of emotions and create new contextual learning. At the end, in order to relapse prevention, individuals were encouraged to use therapeutic technics to improve progression in reaching short-term and long-term goals.

The participants were assessed by social phobia inventory scale (SPIN). **Social phobia inventory (SPIN):** This scale was developed by Connor and et al [14] to assess social anxiety. It is a self-report scale consisting of 17 items which contains three subscales of fear (6 items), avoidance (7 items) and physiological discomfort (4 items). Connor and et al [14] reported its internal consistency with the alpha method, between 0.82 and 0.94. Furthermore, the test-retest reliability coefficients were 0.78 to 0.82. Hasanvand Amoozadeh [15] has reported the internal consistency with the alpha method; it was 0.82 for its first half, and 0.76 for its second half. Furthermore, the correlation between the two halves was 0.84. The alpha coefficients for each of the subscales are as follows: fear subscale, 0.74, avoidance subscale, 0.75, and physiological discomfort subscale, 0.75.

The obtained data from the questionnaire were analyzed by multivariate analysis of covariance (MANCOVA) through using SPSS (Version 21).

Results

Table 2- Mean and Standard Deviation of Social Anxiety

Variable	Group	Pre-test		Post-test	
		M	SD	M	SD
social anxiety (total number)	experimental	43.91	3.51	36.38	3.13
	control	44.52	3.69	43.87	3.45
fear	experimental	16.21	1.34	14.12	1.29
	control	16.64	1.28	16.10	1.12
avoidance	experimental	18.09	1.90	15.23	1.77
	control	18.40	1.75	18.18	1.94
physiological discomfort	experimental	9.61	1.05	7.03	1.20
	control	9.48	1.10	9.59	1.45

Table 2 indicates the means and standard deviations of the difference scores between the pre-test and post-test scores for the variables of this study in experimental and control.

Table 3- Levene's test of Equality of Error Variances

Variable	F	df1	df2	Sig.
social anxiety (total number)	.841	1	18	.153
fear	.112	1	18	.794
avoidance	.463	1	18	.501
physiological discomfort	.008	1	18	.922

Table 3 provides Levene's Test of Equality of error variance used in this study. It shows that the error variance of the differences between the pre-test and

post-test of the dependent variables is equal across the groups. Therefore, we can use MANCOVA.

Table 4- Multivariable covariance analysis results for the effects of transdiagnostic treatments on the social anxiety and it's subscales in the control and experimental.

Dependent variables	Source	df	Ms	F	Sig.
social anxiety (total number)	Pretest	1	112.34	1.15	0.23
	Group (posttest)	1	1010.88	13.86	0.001
fear	Pretest	1	99.31	1.21	0.19
	Group (posttest)	1	602.46	11.13	0.004
avoidance	Pretest	1	103.91	1.99	0.15
	Group (posttest)	1	523.08	10.27	0.007
physiological discomfort	Pretest	1	144.51	1.05	0.25
	Group (posttest)	1	751.88	11.62	0.002

The results of MANCOVA regarding the effect of the transdiagnosic treatments on the social anxiety (total number), fear, avoidance and physiological discomfort in post-test of both groups with respect to the pre-test of control group are presented in Table 4. According to results, the independent variable had a significant effect on the social anxiety (total number) (F=13.86, df=1 and 36, P<0.001). The power of the test was 0.99 and the eta square was 0.42. The independent variable had a significant effect on fear (F=11.13, df=1, P<0.004). The independent variable had a significant effect on avoidance (F=10.27, df=1, P<0.007). In addition, the independent variable had a significant effect on physiological discomfort (F=11.62, df=1, P<0.002).

Discussion

The purpose of this study was to determine the effectiveness of transdiagnostic treatment on social anxiety in orphans adolescences. The results of MANCOVA indicated that the mean scores of social anxiety (total number), fear, avoidance and physiological discomfort of the experimental group in the posttest were significantly lower than those of the control group. As a result, transdiagnosic treatment has effects on anxiety (total number), fear, avoidance and physiological discomfort of orphans adolescences. Different researchers [9-10-11-12-13] found out that transdiagnostic treatment reduction of social anxiety, worry, depression, general anxiety, anxiety sensitivity symptoms, signs and symptoms of borderline personality disorder, panic and negative affect, and increases positive affect, it can be said that the results of the present study are consistent with the results of previous studies.

The positive effectiveness of the transdiagnostic therapy lies in the fact that it is an anxiety-based approach. This therapy system is designed to teach the patients how to cope with their anxieties, to experience

them rather than suppressing them, and respond to them in a more adaptive manner [8]. The emphasis of the transdiagnostic approach on therapy methods such as emotional awareness (i.e. developing a more concrete knowledge of one's emotions through non-judgmental, conscious awareness of an emotional experience), experiential avoidance, and intrinsic emotional exposure (i.e. having the knowledge of and rectifying the emotion-based behavior, raising awareness toward the role of physical stimulus in an emotional experience, and their impact on thoughts and behaviors) can reduce the symptoms and signs of social anxiety disorder. Transdiagnostic treatment with reinforcement the tolerance of emotions, psychological flexibility, compliance power and commitment to the future by increasing the sense of acceptance towards the unwelcome events of life and improves the amount of adaptability and positive emotions. Therefore, this intervention could be used for reducing social anxiety, fear, avoidance and physiological discomfort the among orphans adolescences.

Generally, a transdiagnostic method has benefits in the treatment of symptoms of adjustment disorder (anxiety and social anxiety). The results of this study support the effectiveness of the transdiagnostic method in reducing the social anxiety and its symptoms; fear, avoidance and physiological discomfort. Transdiagnostic treatment simultaneously targets common vulnerability of emotional disorders and can be an alternative for people, who are particularly affected by several concurrent disorders. The findings of this study can be considered as a starting point for further research on the treatment of social anxiety. In terms of its practical results, the results of the present study are rewarding in its promise of the application of the new therapy methods such as transdiagnostic module in treatment of anxiety disorders, and expanding it to other clinical and subclinical populations. Regarding the effect of transdiagnostic therapy on the orphans adolescences social anxiety, these results are applicable to clinical practitioners, social workers, counselors and practitioners in foster care centers in the state Welfare Organization. It is also recommended to use transdiagnostic method more aiming at preventing formation of emotional disorders.

The present study, like other studies, faced some limitations. For instance, the sample size is limited, which reduces the generalization of the results to a large community of people with social anxiety disorder. In addition, participants was female and conclusion on the possible effect of gender on treatment response requires other research. It is recommended that researchers in future studies apply this therapy to various disorders and include further variables in projects with higher sample size as intermediary variables so that our knowledge of this area increase through maximized elimination of limitations.

Conclusions

Transdiagnostic therapy was confirmed in decreasing social anxiety and its symptoms (fear, avoidance and physiological discomfort) in orphans adolescent girls. It seems that transdiagnostic treatment is effective in social anxiety and it may be applied in prevention and treatment of social anxiety disorder.

Acknowledgments

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