

# The Effect of Adopting Systematic Desensitization Therapy on the Social Anxiety of Senior Secondary School Adolescents in Delta State

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**Abstract:** *The study determined the effect of systematic desensitization therapy on the social anxiety of senior secondary school adolescents in Delta State. Three research questions and hypotheses guided the study. The study adopted a 2 x 2 x 2 factorial quasi-experimental and control research design. Delta State's population consists of 29,409 senior secondary school II (SS 2) students. This study's sample consists of 100 SS2 students recruited from two Delta State secondary schools using multi-stage techniques. The instrument for this study was a validated questionnaire titled the Social Anxiety Scale (SAS) and the Self-Concept Scale (SCS). The reliability of the instrument was determined using Cronbach Alpha, and reliability coefficient values of 0.94 and 0.93 were obtained for the Social Anxiety Scale (SAS) and Self-Concept Scale, respectively. The researcher administered a pretest to the respondents in the systematic desensitization group and the control group, followed by an 8-week treatment package of systematic desensitization therapy for the students in the experimental group. At the end of the treatment, a post-test using the Social Anxiety Scale (SAS) was administered to students in the experimental and control groups. The study employed a descriptive statistical analysis to answer the research question, and an analysis of covariance (ANCOVA) was computed and used to test hypotheses at a significance level of 0.05. The results indicate that there was a significant difference between the pretest and post-test social anxiety mean scores of students treated with systematic desensitization therapy and those in the control group. There was a significant difference in social anxiety mean scores for male and female adolescents treated with systematic desensitization therapy. There was a significant difference in social anxiety mean scores for high- and low-self-concept adolescents treated with systematic desensitization therapy. It was therefore concluded that systematic desensitization therapy significantly impacts social anxiety mean scores among students, and the effect varies across gender and self-concept levels. The findings suggest that schools' authorities should consider incorporating systematic desensitization therapy into their mental health support services to help students manage anxiety and improve their overall well-being.*

**Keywords:** Systematic Desensitization Therapy, Social Anxiety, Adolescents

## Introduction

Humans, including adolescents, are inherently social creatures, a characteristic deeply rooted in our biology, psychology, and culture. This intrinsic sociability has played a crucial role in our evolution, survival, and development as a species. The social nature of humans has significant implications for health and well-being. Strong social ties are associated with better physical health, lower stress levels, and increased longevity. Social support networks can provide emotional support, practical assistance, and a sense of belonging, which are essential for coping with life's challenges. Conversely, social isolation can have severe negative impacts on both physical and mental health. Over the years, problems relating to social interaction have been attributed to different conditions, such as depression, anxiety, and social anxiety disorder. However, this study focuses on social anxiety disorder (SAD). Social anxiety disorder (SAD) is one of the most prevalent mental health disorders in adolescence and tends to be a chronic, stable condition that severely disrupts long-term functioning. (Schultz et al., 2017).

Social anxiety is a common mental health disorder that affects individuals of all ages. In senior secondary schools, adolescents often encounter various social situations that can trigger their social anxiety. Blanco et al. (2018) emphasize that the impact of social anxiety on adolescents' overall well-being and academic performance can be significant. SAD is characterized by excessive fear and avoidance of social situations, leading to significant distress and impairment in daily functioning. may result to social anxiety. As a result, it is critical to devise effective intervention techniques that could alleviate this mental health condition that is capable of creating barriers to initiating and maintaining social connections, as well as impairing an adolescent's ability to interact with others. On this point, the systematic desensitization technique is introduced for the treatment of social anxiety disorder (SAD). The premise for the introduction of systematic desensitization techniques is based on the fact that systematic desensitization techniques tend to address the core anxieties associated with SAD. This method may not only alleviate symptoms but also empower individuals to reclaim their social lives with greater confidence and resilience.

Systematic desensitization therapy is a therapy that teaches relaxation skills to lessen anxiety reactions in a safe setting while exposing patients to anxiety-provoking circumstances gradually. It is used to treat the condition known as social anxiety. Reducing anxiety symptoms and assisting the person in creating coping skills are the two main objectives of systematic desensitization (Clark & Wells, 2019). Creating a hierarchy of dread and avoidance is often the initial stage in the exposure process (Hofmann and Otto, 2020). Rebuilding the list of terrifying possibilities with the help of a therapist, the client assigns ratings to each

scenario according to how much fear it evokes. Furthermore, specific assessments of avoidance and terror are typically collected. The finished hierarchy serves as a guide for practicing exposure. Clients were told to stay in the dreaded circumstances during exposure in the hopes that a long enough exposure would result in new habits and learnings and lessen anxiety in the setting. Exposure starts with low-ranked scenarios (e.g., mildly anxiety-inducing situations) and gradually rises to more anxiety-inducing situations to maintain manageable situations (Hofmann and Otto 2020).

### Statement of Problem

Social anxiety is of major concern to the society. It is of concern to most individuals, families, schools, counselors, counselors' educators, and society. Social anxiety is defined as an intense fear of social situations and interactions, leading to avoidance, withdrawal, and distress. In secondary schools, adolescents face various social situations, such as making new friends, giving presentations, and participating in groups in school and non-school settings, which can trigger anxiety and limit their ability to fully engage in social and academic activities.

The problem of social anxiety among adolescents in secondary schools is concerning as it can lead to a range of negative outcomes. Socially anxious adolescents often struggle with low self-esteem, loneliness, and feelings of isolation. This can adversely affect their mental health, leading to the development of other mental disorders, such as depression and substance abuse. Furthermore, social anxiety can hinder adolescents' academic progress. It may prevent them from actively participating in class discussions, seeking help from teachers, or forming study groups with their peers, thereby hindering their learning experience and academic achievement.

The impact of social anxiety on adolescents is not limited to their well-being but also extends to their interpersonal relationships and future development. Adolescents with social anxiety may struggle to establish and maintain relationships, resulting in limited social support networks and potential difficulties in future adult relationships and careers. Despite its prevalence and the significant consequences, it poses, social anxiety among adolescents in secondary schools often goes unnoticed or is overlooked. The prevalence of SAD among adolescents in Delta State necessitates effective interventions. Previous research has shown promising results for Systematic Desensitization therapy in reducing symptoms of social anxiety among adults, but less is known about its efficacy specifically among adolescents. Thus the problem of this study is what is the effect of adopting systematic desensitization techniques on the social anxiety of senior secondary school adolescents in Delta State.

### Research Questions

The following research questions guide the study:

1. What is the difference between the pretest and post-test social anxiety mean scores of students treated with the Systematic Desensitization therapy and those in the control group?
2. What is the difference in the social anxiety mean scores of male and female students treated with the Systematic Desensitization therapy?
3. What is the difference in the social anxiety mean scores of high and low self-concept students treated with Systematic Desensitization therapy?

### Hypotheses

The following null hypotheses were tested in this study.

1. There is no significant difference between the pretest and post-test social anxiety mean scores of students treated with the Systematic Desensitization therapy and those in the control group
2. There is no significant difference in the interaction effect among sexes in the Systematic Desensitization group using their mean scores.
3. There is no significant difference in the social anxiety mean scores of high and low self-concept adolescents treated with Systematic Desensitization therapy.

### Research Method

The study adopted a 2 x 2 x 2 factorial quasi-experimental and control research design. The 2 x 2 x 2 factorial research design indicates that there are two groups. One experimental group and one control group with gender (male and female) and self-concept (high and low) at two levels each.

Table 1: Diagrammatic Representation of the 2 x 2 x 2 design

TREATMENT GROUPS	PRE-TEST	TREATMENT	POST-TEST
E	T1	X1	T2
NTC	T1	XC	T2

**KEYS:**

- E1 = Experimental group 1 (SD)
- NTC= Non-specific treatment control group
- T1 = Pre-test Group
- T2 = post-test group
- X1 = Treatment for experimental group 1
- XC = Non-specific treatment Group

**Methodology**

**Population of the Study**

The subjects that were used for this study consisted precisely of senior secondary school students (SS 2) in Delta State. The population numbering 29, 409 cut across different socio-economic classes and religious backgrounds. These are adolescents aged 14-18 years.

**Sample and Sampling Techniques**

The sample of this consist of 100 SS2 students drawn from two secondary schools in Delta State. Multi-stage and simple Random sampling techniques were used to select the sampled schools for the study. First, the researcher wrote out the senatorial districts in Delta State, put them in a box, and picked one of the senatorial districts. Furthermore, the researcher wrote down the names of all local governments in Delta Central. Hence, three (3) Local Governments were picked Finally, all the schools in the various local Governments were written differently on paper and they were put in a box and one school each was picked from each local government. making a total of three (3) secondary schools from the entire public secondary schools across Delta state. From each selected school, SS 2A classes in their intact form were assigned to the treatment group and the control group. As a result, one hundred (100) students were used for the study. fifty (50) students were in experimental group 1 using systematic desensitization in Orhughworun High School and fifty (50) students were in the control group using sex Education in Ugborikoko Secondary School Effurun

**Research instruments**

The instrument for this study was a questionnaire titled Social Anxiety Scale (SAS) and Self-concept Scale (SCS). The instrument Social Anxiety Scale (SAS) was adapted from Bartholomay & Houlihan (2016) and the Self-concept scale (SCS) was adapted from Bolejs, et al (2022).

- Section A: Socio-demographic scale
- Section B: Social Anxiety Scale (SAS)
- Section C: Self-concept scale (SCS)

The Social Anxiety Scale (SAS) consists of 32 items and the Self-concept scale (SCS) consists of 34.

The respondents were asked to indicate their opinion on a points scale with close-ended items as Strongly Agree (4), Agree (3), Disagree (2), and Strongly Disagree (1) points.

**Validity of Research Instrument**

The instruments' validity was established by three (3) experts in the Guidance and Counseling Department, including the research supervisors. These experts assessed the instruments for appropriateness and suitability for the study, and their suggestions were influenced. The content and construct validation of the instrument were done using factor analysis. Using the varimax with the Kaiser normalization method, a total cumulative variance of 58.8% with a rotated factor loading matrix that ranged between 51 and 84 was obtained for the entire set of items in the Social Anxiety Scale, suggesting that the instrument has evidence of adequate content and construct validity. For the self-concept scale, the total cumulative variance is 79.0% of the total items, with the rotated component matrix ranging between 53 and 94.

**Reliability of the Research Instrument**

A pilot test of the instrument was carried out on 50 students in a different secondary school, a school outside the selected schools for the study. The result of the test was used to compute the reliability of the instrument. The Cronbach Alpha was applied for the computation of the reliability coefficient of the subscales of the instrument and a general reliability coefficient of 0.97 was obtained for the entire scales. Whereas reliability coefficient values were obtained for the Social Anxiety Scale (SAS) is 0.94 and the Self-concept Scale at 0.93. The reliability was carried out to establish the internal consistency of the instrument.

**Procedure for Treatment**

This study was carried out in three phases:

**Phase one:** The researcher visited two of the sampled schools: Orhughorun High School, and Ugborikoko Secondary School in Effurun to obtain permission from the school principal. The researcher explained that she would be conducting an 8-week experimental study with the SS2A students and would require 40 minutes each week for a training session. She presented the approval letter from her department and was permitted to conduct the study.

**Phase two:** Treatment

Before the treatment, the students in both the experimental and control groups were given a pretest using the Social Anxiety Scale (SAS) and the Self-concept Scale. Thereafter students in the experimental group were treated using a systematic desensitization therapy treatment package for 8 weeks.

**Phase three:** Evaluation of the treatment

At the end of the treatment Post-Test using the Social Anxiety Scale (SAS) and the Self-concept Scale was administered to students in the experimental and control group.

**Method of Data Analysis**

The study employed a descriptive statistical analysis to answer the research question. While analysis of covariance (ANCOVA) was computed and used to test hypotheses at a significance level of 0.05. for the self-concept scale, respondents who scored below 60, have a low self-concept, while respondents who scored 60 and above, has a high self-concept.

**Results and Discussion**

**Research Question 1:**

What is the difference between the pretest and post-test social anxiety mean scores of students treated with the Systematic Desensitization Technique and those in the control group?

**Table 1: Mean and Standard Deviation showing the results of Pre-test and post-test Scores of Students taught with systematic desensitization and those in the control group.**

	N	Pretest		Post Test		Mean Gain	Decision
		$\bar{X}$	SD	$X^-$	SD		
Treatment group							
Systematic Desensitization group	50	98.90	7.04	74.72	8.48	-24.2	There is a difference
Control Group	50	102.22	8.37	101.22	11.62	-1.0	Slight difference
Total	100						

Table 1 shows the changes in mean scores of students in the systematic desensitization group is 98.9000 as against 74.7200 with a difference of -24.18 and students in the control group 102.2200 as against 101.2200 with a difference of -1.00 which indicates that, on average, both groups experienced a decrease in social anxiety from the pretest to the posttest. However, the decrease was much more pronounced in the Systematic Desensitization Group. This suggests that the Systematic Desensitization Technique has a more significant impact on reducing social anxiety than the control group. The result indicates that Systematic Desensitization Technique appears to have a substantial impact on reducing social anxiety when compared to the control group, as evidenced by the significant difference in mean scores between the pretest and posttest conditions.

**Research Question 2**

What is the difference in the reduction of social anxiety mean scores of male and female students treated with the Systematic Desensitization Technique?

**Table 2: Mean and Standard Deviation Showing the Results of Pre-Test and Post-Test Scores of Male and Female Students Taught with Systematic Desensitization Technique.**

Variable	N	Pretest		Post Test		Mean difference	Decision
		$\bar{X}$	SD	$X^-$	SD		
Male	20	104.45	10.43	77.85	11.96	-26.6	There is a difference
Female	30	95.20	3.39	72.63	11.10	-22.6	There is a difference
Total	50						

Table 2 revealed the changes in mean scores of male and female students in the Systematic Desensitization group. Male students had a mean of 104.45 as against 77.85 with a difference of -26.6, female students had a mean of 95.20 as against 72.63 with a difference of -22.6. Both male and female students experienced significant reductions in their social anxiety scores after treatment. However, the mean reduction for male students is approximately -26.6 points, which is slightly higher than the mean reduction for

female students, which is approximately -22.6 points. This suggests that, on average, male students experienced a greater reduction in social anxiety scores compared to female students after undergoing the Systematic Desensitization Technique.

Research Question 3: What is the difference in the pretest-posttest social anxiety mean scores of high and low self-concept students treated with the Systematic Desensitization Technique?

**Table 3: Mean and Standard Deviation showing the results of Pre-test and post-test Scores of high and low self-concept Students taught in systematic desensitization group**

Variable	N	Pretest		Post Test		Mean difference	Decision
		$\bar{X}$	SD	$\bar{X}$	SD		
Students With High Self-concept	26	102.42	9.99	77.92	11.80	24.5	There is a difference
Students With low Self-concept	24	95.08	3.36	71.25	10.60	23..8	There is a difference
Total	50						

Table 3 shows the changes in mean scores of high and low-concept students in the Systematic Desensitization group. High is 102.42 as against 77.92 with a difference of 24.5 and low self-concept is 95.08 as against 71.25 with a difference of 23.8. Both high self-concept and low self-concept students experienced reductions in their social anxiety scores after treatment with Systematic Desensitization Technique. The mean reduction for high self-concept students is approximately 24.5 points, and for low self-concept students, it is approximately 23.8 points. This suggests that, on average, high self-concept students experienced a slightly higher reduction in social anxiety scores compared to low self-concept students. However, the difference in mean reductions between the two groups is relatively small.

**Testing of Hypotheses**

Hypotheses 1: There is no significant difference in the effectiveness of the Systematic Desensitization Technique in reducing students' social anxiety when compared with those in the control group using their mean scores.

**Table 4: ANCOVA Summary on the effectiveness of the Systematic Desensitization Technique in reducing students' social anxiety and control group.**

Source	Type III Sum of Squares	df	Mean Square	F	Sig.	Decision
Corrected Model	20896.170 <sup>a</sup>	2	10448.085	148.760	.000	Hypothesis rejected
Intercept	84.008	1	84.008	1.196	.277	
Pretest	3339.920	1	3339.920	47.554	.000	
Treatment Group	13746.967	1	13746.967	195.730	.000	
Error	6812.740	97	70.234			
Total	801581.000	100				
Corrected Total	27708.910	99				

a. R Squared = .754 (Adjusted R Squared = .749)

Table 4 displays the analysis of the difference in the effectiveness of the Systematic Desensitization Technique in reducing students' social anxiety when compared to those in the control group, as measured by their mean scores. The statistical analysis yielded the following results:  $F(1, 97) = 195.730$ , with a p-value less than 0.001. When assessing Hypothesis 1 at an alpha level of 0.05, it is evident that the calculated p-value falls below the predetermined level of significance, which is 0.05. Based on these findings, it can be concluded that the outcome of the post-test was indeed statistically significant, given that the p-value is less than 0.05, indicating a substantial difference in effectiveness. As a result, the null hypothesis, which suggests that there is no significant difference in the effectiveness of the Systematic Desensitization Technique in reducing students' social anxiety when compared to those in the control group using their mean scores, was rejected. Instead, the alternative hypothesis is accepted, indicating that there is indeed a significant difference in the effectiveness of the Systematic Desensitization Technique in reducing students' social anxiety when compared to those in the control group using their mean scores. This conclusion is underpinned by the p-value being less than 0.05, denoting a statistically significant effect

Hypotheses 2: There is no significant difference in the effectiveness of sex in the Systematic Desensitization Technique group using their mean scores.

Table 5: ANCOVA Summary on the effectiveness of students in the Systematic Desensitization Technique group using their mean scores.

Source	Type III Sum of Squares	Df	Mean Square	F	Sig.	Decision
Corrected Model	1149.604 <sup>a</sup>	2	574.802	4.935	.011	Hypothesis rejected
Intercept	67.977	1	67.977	.584	.449	
Sex *Systematic Desensitization Technique	823.040	1	823.040	7.066	.011	
Pretest	.323	1	.323	.003	.958	
Error	5474.476	47	116.478			
Total	285778.000	50				
Corrected Total	6624.080	49				

a. R Squared = .174 (Adjusted R Squared = .138)

Table 5 displayed the analysis of the difference in the effectiveness of the Systematic Desensitization Technique when applied to students' sex, as it pertains to reducing students' social anxiety, as measured by their mean scores. The statistical assessment yielded the following results:  $F(1, 47) = 7.066$ , with a corresponding p-value of 0.011. When evaluating Hypothesis 4 at an alpha level of 0.05, it becomes evident that the calculated p-value is less than the predetermined level of significance, which is 0.05. Consequently, based on these results, it can be concluded that the outcome of the post-test was indeed statistically significant, given that the p-value falls below the 0.05 level of significance. Therefore, the null hypothesis, which posits that there is no significant difference in the effectiveness of the Systematic Desensitization Technique when administered to male and female students in reducing social anxiety, as reflected in their mean scores, is rejected. Instead, the alternative hypothesis is upheld, suggesting that there is indeed a significant difference in the effectiveness of the Systematic Desensitization Technique when applied to male and female students in reducing social anxiety, as indicated by their mean scores. This conclusion is supported by the p-value, which is less than the 0.05 level of significance, indicating that the data suggests a significant difference, with the technique's effectiveness varying between male and female students.

Hypotheses 3: There is no significant difference in the social anxiety mean scores of high and low self-concept adolescents treated with the Systematic Desensitization therapy

Table 6: ANCOVA Summary on the effectiveness of high and low self-concept students treated with Systematic Desensitization Technique in reducing students' social anxiety using their mean scores.

Source	Type III Sum of Squares	df	Mean Square	F	Sig.	Decision
Corrected Model	1187.029 <sup>a</sup>	2	593.514	5.131	.010	Hypothesis rejected
Intercept	60.634	1	60.634	.524	.473	
Self-concept * systematic desensitization	1150.517	1	1150.517	9.946	.003	
Pretest	37.748	1	37.748	.326	.571	
Error	5437.051	47	115.682			
Total	285778.000	50				
Corrected Total	6624.080	49				

a.  $R^2 = .179$  (Adjusted  $R^2 = .144$ )

The table displayed above presents the analysis for hypothesis 3, which explores whether there exists a statistically significant difference in the effectiveness of the Systematic Desensitization Technique when administered to high and low-concept students, as reflected in their mean scores measuring the reduction of social anxiety. The statistical assessment produced the following findings:  $F(1, 47) = 9.946$ , with a p-value of 0.003. When scrutinizing Hypothesis 3 at a significance level (alpha) of 0.05, it becomes evident that the p-value is less than the predetermined level of significance, which is 0.05. Based on these results, it can be concluded that the outcome of the post-test was indeed statistically significant, given that the p-value falls below the 0.05 level of significance. Consequently, the null hypothesis, which posits that there is no significant difference in the effectiveness of the Systematic Desensitization Technique when applied to high and low-concept students in reducing social anxiety, as indicated by their mean scores, is rejected. Instead, the alternative hypothesis is upheld, indicating that there is indeed a significant difference in the effectiveness of the Systematic Desensitization Technique when administered to high and low-concept students in reducing social anxiety as per their mean scores. This conclusion is supported by the p-value, which is less than the 0.05 level of significance, signifying that high-concept students respond differently to the treatment compared to low-concept students in terms of reducing social anxiety.

## Discussion of Findings

### **Difference in the effectiveness of the Systematic Desensitization Technique in reducing students' social anxiety when compared with those in the control group using their mean scores.**

Research question one and its corresponding hypotheses revealed a substantial difference in the efficiency of the systematic desensitization technique in lowering social anxiety among students compared to a control group. Students who underwent systematic desensitization had lower post-test mean scores than their pre-test mean scores, indicating a reduction in social anxiety. This is due to the gradual and controlled exposure to anxiety-provoking circumstances, which helps individuals gain tolerance and adjust to events that would ordinarily evoke fear. The technique's success is attributed to its personalized approach, which targets individual triggers and concerns.

Systematic desensitization is based on learning and behavioral change principles. Through repeated exposures and relaxation techniques, individuals learn to identify anxiety-provoking events with relaxation rather than terror, leading to a positive shift in behavior and emotional reaction. This strategy coincides with recent studies, such as those of Obi et al. (2019), Nwobodo et al. (2022), and Ogugua (2016) which indicate that exposure treatment frequently exposes individuals to feared or anxiety-inducing stimuli in a controlled and gradual manner. Systematic desensitization breaks down anxiety-provoking experiences into a hierarchy of growing anxiety levels, progressing from mildly anxiety-inducing circumstances to severely anxiety-provoking ones. During each exposure, individuals are guided to induce relaxation or peace, typically adopting techniques like deep breathing, progressive muscle relaxation, or guided imagery. This combination of exposure and relaxation helps individuals build new associations with these situations, replacing fear responses with a sense of safety and comfort. Over time, individuals undergoing systematic desensitization learn to properly handle social anxiety, resulting in decreased conditioned fear responses and greater confidence.

### **Difference in the interaction effect of male and female students treated with Systematic Desensitization Technique in reducing students' social anxiety using their mean scores.**

Research question two and hypotheses two revealed that there is a significant difference in the interaction effect of male and female students treated with the Systematic Desensitization Technique in reducing students' social anxiety using their mean scores. The Systematic Desensitization Technique, a psychological intervention, has been demonstrated to be beneficial in lowering social anxiety among senior secondary school students, independent of gender. This is due to its universal applicability and capacity to address common mechanisms and traits across sexes. The technique's versatility allows it to be altered to address the individual requirements and triggers of each participant, leading to its efficacy across varied groups.

The processes through which systematic desensitization reduces social anxiety, such as exposure and relaxation, may be helpful regardless of gender. If the fundamental processes resonate with both male and female students, it validates the technique's universal usefulness. The intervention may have successfully overcome any gender-specific barriers, such as gender preconceptions or biases that might affect outcomes differently for males and females.

The finding aligns with Burani, and Nelson (2020) who indicate that social anxiety may manifest differently in males and females. Females often report higher levels of social anxiety and may be more prone to experiencing intense social fear and avoidance behaviors. This finding also aligns with Farhane-Medina (2022) who found that females might show more significant reductions in anxiety because their initial levels were higher, allowing for a more noticeable change.,

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**Difference in the interaction effect of high and low self-concept students treated with the Systematic Desensitization Technique in reducing students' social anxiety using their mean scores.**

The third research question and hypothesis of the study unveils a significant difference in the effectiveness of the Systematic Desensitization Technique in alleviating social anxiety among students with varying levels of self-concept, as demonstrated by mean scores. This could be due to the flexible nature of the approach, which can be modified to meet specific difficulties connected to self-concept. Tailoring the intervention to different degrees of self-concept may boost participants' motivation and involvement. Students are more likely to invest in the intervention when they perceive it as specifically addressing their particular difficulties connected to their self-concept.

Systematic desensitization frequently incorporates a holistic strategy that targets both cognitive and behavioral aspects of anxiety. By emphasizing the holistic character of self-concept, the intervention can successfully target numerous dimensions, contributing to a more thorough reduction in social anxiety. A psychologically secure setting can be developed to help pupils tackle anxiety-inducing events related to self-concept. Success in overcoming social anxiety connected to self-concept with systematic desensitization can establish a positive feedback loop, favorably reinforcing self-concept and contributing to the overall success of the intervention.

Research by Harter (2022), Koivu (2016), and Odeh (2019) supports the premise that a poor self-concept during adolescence is connected with maladaptive behavioral and emotional difficulties, including social anxiety. Building confidence in adolescents is vital for maintaining a suitable learning environment. Negative self-concept can cause people to cling to negative experiences, memories, thoughts, and words, influencing their perception of the world around them.

### **Conclusion**

The study found a significant difference in the effectiveness of the Systematic Desensitization therapy in reducing students' social anxiety compared to the control group. Students with social anxiety can gradually overcome their fears when they confront them in a safe environment while practicing relaxation techniques. It was therefore concluded that systematic desensitization therapy significantly impacts social anxiety mean scores among students and the effect varies across gender and self-concept levels

### **Recommendations**

Based on the findings, the following recommendations were made.

1. School authorities should consider incorporating systematic desensitization therapy into their mental health support services to help students manage anxiety and improve their overall well-being.
2. School counsellors and therapists should develop gender-sensitive approaches that consider the unique experiences and challenges faced by male and female students.
3. School counsellors and psychologists should endeavor to customize therapeutic interventions based on students' self-concept levels to enhance students' self-esteem alongside their anxiety level
4. Schools and mental health professionals should implement continuous monitoring and evaluation of the therapy's effectiveness to ensure optimal outcomes for all students.

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