



Impact of Social Anxiety and Humor Styles on Mental Health

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ABSTRACT

The present study is a “cross-sectional survey research”; aimed toward monitoring the impact of Social Anxiety and Humor Styles on Mental Health. For the study, 500 subjects (205 males, 295 females) were approached. The sample was obtained through the use of random sampling. “The age range” of the applicants was as of 18 to 31 years. The Liebowitz Social Anxiety Scale by Michael Liebowitz was used to measure the Social Anxiety among the participants, the “four Humor Styles (Affiliative, Self-enhancing, Aggressive and Self-defeating)” be measured by means of Humor Style Questionnaire by Dr. Rod A. Martin, and the Mental Health Inventory (MHI-5) by Veit and Ware was used to measure the Mental Health of the research participants. Results of the study revealed that Social Anxiety and Humor Styles have a significant impact on Mental Health. The study further monitored how men and women differ in terms of Social Anxiety, Humor Styles and Mental Health. The findings suggested that no gender differences exist in Social Anxiety and Mental Health. As far as the four Humor Styles are concerned, no gender difference was found in “Aggressive and Self-enhancing Humor Styles”; while Affiliative and “Self-defeating Humor Styles” varied in terms of gender. The findings of the study suggested that make use of the “Adaptive Humor Styles Affiliative and Self-enhancing” lessens the Social Anxiety and causes amelioration in the Mental Health; while the use of “Mal-adaptive Humor Styles (Aggressive and Self-defeating)” exacerbates the Social Anxiety and causes deterioration in the Mental Health.

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1. Introduction

Individuals and societies require mental health as a basic element for their functioning; but people view it as a luxury in one way or another. Mental health has been identified as a distinct and primary concern for the developing as well as the developed countries. It is a state of complete well-being (mental, social and physical). There are three ideas central to this notion: mental health constitutes the overall health of a person, it is about the absence of psychopathology, and it is associated with biological health in an intimate manner (WHO, 2001). Mental health is the determinant of life satisfaction (Swami et al., 2007). The cross-cultural differences provide a hindrance for a mutually inclusive definition of mental health. However, just like age or wealth, we can comprehend by ignoring the differences across cultures (WHO, 2001). Muslims believe that any health problem is a test or punishment from Allah (Sabry & Vohra, 2013). Pakistan belongs to Muslim world and approximately 90% of its total population is Muslim. World’s largest youth cohort also belongs to Pakistan – comprised of 54.2 million individuals, approximately. The age of this cohort ranges from 15 to 29 years (UNICEF, 2013).

Social anxiety is a chronic condition which involves the fear of humiliation or embarrassment in public situations. It is highly prevalent throughout the world; and comes at the 3rd rank in the list of mental health issues (Chien, Sadiq, et al., 2021; Furmark, 2002).

The negative self-beliefs associated with social anxiety hinder social communication (Cunha, Pinto Gouveia, Alegre, & Salvador, 2004; Javed, Nawaz, & Qurat-UI-Ain, 2015). Social anxiety negatively affects the memory of a person; and their ability to concentrate properly (Nawaz & Hassan, 2016; Wells et al., 2006).

The contemporary Western literature views humor as a very pleasing and righteous trait. It is believed that people who have good humor cope better with stress, have good interaction with others, and have better health conditions (Chien, Kamran, et al., 2021; Lefcourt, 2001). The current psychological research sees humor as a diverse concept. It can refer to the characteristic of the joke, the mental processes of the people, or the response involved. Both the affective and the cognitive elements are involved here. Humor can be a state of being cheerful or amusing; or it can be a trait of being humorous (Martin, 2001). The Research Objectives are;

- Exploring the relationship between Social Anxiety, Humor Styles and Mental Health.
- Discovering the effect of Social Anxiety on Mental Health.
- Checking the effect of Humor Styles on Mental Health.
- Monitoring gender difference(s) in Social Anxiety, Humor Styles and Mental Health.

The Research Hypotheses are;

- H1: Social Anxiety would have an impact on Mental Health.
- H2: Humor Styles would have an impact on Mental Health.
- H3: Gender differences would exist in Social Anxiety.
- H4: Females would have a higher level of Adaptive Humor Styles; and males would have a higher level of Mal-adaptive Humor Styles.
- H5: Females would have a higher level of Mental Health than males.

2. Research Methodology

The sample belonged to the Institute of Southern Punjab, Multan. The target population included the students enrolled in 2017 – fall session. These students were enrolled in various programs e.g., B.S., M.A/M.Sc., and M.Phil. The age range was 18 to 31 years.

Table 1

| Total number of students enrolled | Probability of sample | Sample |
|-----------------------------------|-----------------------|--------|
| 5000 | 10% | 500 |

Table 2: Gender wise Sampling, Gender division of enrolled students’ population:

| Gender | Percentage | Total population | Desired sample | Total sample | Total sample |
|--------|------------|------------------|----------------|--------------|--------------|
| Male | 41% | 2050 | 10% | 205 | |
| Female | 59% | 2950 | 10% | 295 | |

Liebowitz Scale of Social Anxiety; this scale is composed of 24 items and these items are divided into 2 subscales: “fear and avoidance of certain social situations”. 13 items concern with “performance anxiety”, as well as 11 pertains toward societal circumstances. Maximum attain of 144 points can be scored. Higher scores indicate higher social anxiety, and vice versa. Humor Style Questionnaire; this scale describes a variety of way within which absurdity can be experienced or articulated. These ways are: “affiliative humor” (the inclination toward making others giggle, take pleasure in smiling among others), “self-enhancing humor” (the propensity to applaud oneself upbeat in the company of funniness), “aggressive humor” (the predisposition toward the exercise of mockery, unpleasant comedy; neurotic appearance of funniness), “self-defeating humor” (the predisposition headed for self-pained joking, smiling alongside among others at what time being mockery otherwise drag downward for oneself

Mental Health Inventory (MHI - 5). It is a 5 item inventory developed by Veit and Ware in 1994. It is the short-hand version of the original Inventory. It is used to assess people’s overall emotional functioning by asking them to rate their subjective experiences of last 30 days on a 6 point likert scale with a continuum range as of 1 “(all of the time) to 6 (none of the time)”. Higher scores indicate a better mental health in general, and vice versa.

3. Results

The table 3 shows regression analysis for the “impact of Social Anxiety” on Mental Health. The R2 value is 0.042, which shows that Social Anxiety has 4.2% effect on Mental Health i.e., Social Anxiety predicts 4.2% Mental Health.

Table 3: “Regression analysis showing the impact of Social Anxiety on Mental Health”

| Model | B | Std. Error | Beta | t | p |
|-----------------------|-------|------------|--------|-------|------|
| Constant | 4.65 | 0.14 | | 34.26 | 0.00 |
| Social Anxiety | -0.47 | 0.10 | -0.205 | -4.67 | 0.00 |

Note: R2 = 0.042, Adjusted R2 = 0.040, F = 21.855, p < 0.05

Table 4: “Regression analysis showing the impact of Humor Styles on Mental Health”

| Model | B | Std. Error | Beta | t | p |
|-------------------------------------|-------|------------|-------|-------|------|
| Constant | 3.63 | 0.31 | | 11.70 | 0.00 |
| Affiliative Humor Style | 0.07 | 0.04 | 0.08 | 1.72 | 0.08 |
| “Self-enhancing Humor Style” | 0.10 | 0.03 | 0.13 | 3.02 | 0.00 |
| “Aggressive Humor Style” | -0.06 | 0.09 | -0.04 | -0.61 | 0.54 |
| “Self-defeating Humor Style” | 0.05 | 0.05 | 0.04 | 1.04 | 0.30 |

Note: R2 = 0.073, Adjusted R2 = 0.063, 7.733, p < 0.05

The above table shows regression analysis for the impact of Styles of Humor on Mental Health. The R2 value is 0.073, which shows that Styles of Humor have 7.3% combined impact on Mental Health.

Table 5: “Mean, Standard Deviation, t value and p value of Social Anxiety in males and females”

| Group | N | M | SD | t | p | |
|-----------------------|--------|-----|------|------|------|------|
| Social Anxiety | Male | 205 | 1.28 | 0.34 | 0.24 | 0.40 |
| | Female | 295 | 1.27 | 0.37 | | |

Note: “p < 0.05”

Table 6: “Mean, Standard Deviation, t value and p value of Humor Styles in males and females”

| Group | N | M | SD | t | p | |
|-----------------------------------|--------|-----|------|------|-------|----------|
| Affiliative Humor Style | Male | 205 | 4.59 | 0.98 | 1.78 | 0.03** |
| | Female | 295 | 4.43 | 1.00 | | |
| Self-enhancing Humor Style | Male | 205 | 4.09 | 1.10 | -0.18 | 0.12 |
| | Female | 295 | 4.21 | 1.14 | | |
| Aggressive Humor Style | Male | 205 | 1.23 | 0.58 | 0.49 | 0.30 |
| | Female | 295 | 1.20 | 0.53 | | |
| Self-defeating Humor Style | Male | 205 | 3.82 | 0.78 | 2.99 | 0.001*** |
| | Female | 295 | 2.60 | 0.79 | | |

Note: “p < 0.05, p = 0.001”

Above chart illustrate so as to no gender disparity exists in Social Anxiety because mean values for male and female groups are 1.28 and 1.27 respectively; and p value is 0.40 (not significant because it is greater than 0.05).

3.1 The over chart illustrate following consequences

A significant gender exists in Affiliative Humor Style, because mean values for male and female groups are 4.59 and 4.43 respectively; and p value is 0.03 (significant because it is

less than 0.05). No gender difference exists in Self-enhancing Humor Style because mean values for male and female groups are 4.09 and 4.21 respectively; and p value is 0.12 (not significant because it is greater than 0.05). There isn't any gender difference in Aggressive Humor Style because mean values for male and female groups are 1.23 and 1.20 respectively; and p value is 0.30 (not significant because it is greater than 0.05). There exists a significant gender difference in Self-defeating Humor Style, because mean values for male and female groups are 3.82 and 2.60 respectively; and p value is 0.001 (significant because it is equal to 0.001).

Table 7: "Mean, Standard Deviation, t value and p value of Mental Health in males and females"

| | Group | N | M | SD | t | p |
|----------------------|--------|-----|------|------|------|------|
| Mental Health | Male | 205 | 4.09 | 0.89 | 0.99 | 0.16 |
| | Female | 295 | 4.01 | 0.88 | | |

Note: "p < 0.05".

Above chart demonstrates so as to no gender differentiation exists in Mental Health because mean values for male and female groups are 4.09 and 4.01 respectively; and p value is 0.16 (not significant because it is greater than 0.05).

4. Discussion of the Hypotheses

Health is the most valuable asset of one's life. It is very crucial for living a satisfied life. A person, without health, is lifeless. For a person to be called healthy, it is necessary that their physical health, emotional health and psychological health are all in a good condition. Of all these three domains, mental health is the most important. We can infer from this statement that a person's mental health status determines their overall health and life satisfaction. Thus, mental health is the infrastructural element in the construction of a healthy living.

There are various factors that deteriorate or ameliorate the mental health of a person. The society in which people live, especially the immediate environment, plays a great role in their mental health. This environment, sometimes, provides various kinds of unwanted stressors; that prove to be very hazardous to people's mental health. These stressors, then, link with the anxieties people feel in their daily life while interacting with people. It is to be noted here that different people use different kinds of strategies to kill their anxiety; or, at least, lessen it. One of the strategies people use to overcome the burden of daily life stresses is the use of humor. By humor, we mean the tendency to see the lighter side of the things; despite the darker ones. Humor can also be conceptualized as being funny or telling jokes to other people. It can be beneficent or malevolent (depending upon the nature of the person, or the nature of the situation). The use of beneficial humor creates good bonding between people and is good for the society, as a whole; while the malevolent humor is a curse to the society as it damages the mental health of people. Replacing the bad humor by the good one is what people need to do; in order to foster their mental health and make the society a better place to live in.

The present research was conducted to check the impact of Social Anxiety and Humor Styles on Mental Health. It aimed to check whether the Humor Styles people use in their daily life interactions strengthen or worsen the relationship of their social fears with their mental health. Humor Styles were categorized in four categories: Affiliative, Self-enhancing, Aggressive and Self-defeating. The gender differences in Social Anxiety, Humors Styles, and Mental Health were also measured.

Results finds out that the first hypothesis has been accepted. The table explains that Social Anxiety has only a little amount of effect on Mental Health. This can be possible due to the reason that in general, people who avoid social gatherings or social interactions usually find some other means to please themselves; and compensate the apprehensions related to social fears by some other positive medium(s) like art or book reading or any other thing that boosts up their self-esteem (and, consequently, their Mental Health).

This study finds out that the second hypothesis has been accepted. This table finds out the combined effect of Humor Styles on Mental Health. The results of the table show that

Humor Styles have a combined effect on Mental Health. we can conclude that the Humor Styles people use lessen their Social Anxiety; and, consequently, boost up their Mental Health. More precisely, we can say that the association between the fear that arises as a result of social interaction and mental health is moderated by the use of Humor. Research by Folkman and Lazarus (1980) supports this conclusion to some extent; and says that the coping strategies people use mediate the relationship between the exposure to stressful situations and the tendency to develop psychopathology.

This study also finds out the gender difference in Social Anxiety. The results suggest that there isn't any gender difference in Social Anxiety; hence the hypothesis has been rejected. It means that males and females have equal chances to be the victim of Social Anxiety. The reason for this absence of gender difference in Social Anxiety is that people who have fear of social situations are usually ignored; and are not treated by mental health professionals. Moreover, the lack of proper knowledge about this kind of anxiety may be another reason for no gender difference in this domain.

Another finding is about the gender difference in the Styles of Humor. The results show no gender difference in Aggressive and Self-enhancing Humor; but a significant gender difference in Affiliative and Self-defeating Humor. The reason of this gender difference in the latter two styles might be the dispositional factors in males and females. Females are more affectionate and submissive in their intimate relationships; thus they endorse to the Affiliative and Self-defeating Humor. As far as the matter of no gender difference in the Aggressive and Self-enhancing Styles is concerned, the reason of the absence of this difference can be the factor that in today's society, male and female are equally prone to the psychological hazards of the environment. Perhaps a lack of knowledge in this domain can be another reason of this absence.

The results of the table conclude that there aren't any gender differences in Mental Health; thus the hypothesis has been rejected. The absence of any gender difference in this domain is perhaps due to the reason that the number of reported cases related to Mental Health issues in the developing countries (like Pakistan) is so small. Research by Miranda and Patel (2005) suggests that the third-world countries lack in the area of gender differences regarding Mental Health.

5. Conclusion

It is concluded from the research findings that Social Anxiety and Humor Styles have an effect on Mental Health. The findings of the study further suggest that using of Adaptive Humor (Affiliative and Self-enhancing) may cause the Social anxiety to vanish off (or at least lessen); and, hence, the Mental Health to be boosted up. While the use of Mal-adaptive Humor (Aggressive and Self-defeating) may cause an increase in the Social Anxiety (because, usually, the one who uses bad humor is disliked by people); as a result, the Mental Health declines.

The research findings further explored the gender differences in Social Anxiety, Styles of Humor and Mental Health. No gender difference was observed in Social Anxiety and Mental Health; but it was found that men and women tend to endorse different Humor Styles; based on the nature of the situations.

6. Recommendations

The study recommends that the link between the stresses and anxieties of daily life interactions and the mental health of the people should be taken seriously. It is to be noted here that the use of coping strategies people opt to lessen the burden of social interactions and the associated hazards should be carefully scrutinized. The use of good coping strategies affects the mental health positively; while the use of bad coping strategies affects the mental health in a negative way. Moreover, people should carefully observe which types of social interactions or social situations trigger their anxieties. Not only is it important for the well-being of the people, but also of the society.

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