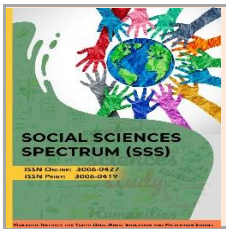

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Impact of Social Anxiety and Resilience on Subjective Happiness among Adolescents

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Abstract

This study aimed to explore the role of social anxiety and resilience in the prediction of subjective happiness among Pakistani youth, which is a significant knowledge gap in the non-Western population. The current study employed a correlational research design to collect data from 200 Pakistani youth using relevant Scales. Pearson product-moment correlation revealed strong negative associations between social anxiety and resilience ($r = -0.66$, $p < .01$) and social anxiety and happiness ($r = -0.55$, $p < .01$), and a strong positive relationship between resilience and happiness ($r = 0.68$, $p < .01$). Multiple regression analysis revealed that social anxiety was a significant negative predictor of happiness ($B = -0.18$, $p < .001$) and resilience was a significant positive predictor of happiness ($B = 0.55$, $p < .001$), accounting for 48% of the variance, $F(2, 197) = 91.52$, $p < .001$). The results of this study showed that social anxiety was a significant predictor of reduced happiness, but resilience was a significant predictor of happiness among Pakistani youth, which could be useful in promoting universal resilience programs rather than developing separate programs for males and females, especially in the developing country of Pakistan.

Keywords: Social Anxiety, Resilience, Subjective Happiness, Non-Western Population, Pakistan.

Introduction

Significant biological, psychological, and social changes occur throughout the critical growth stage of adolescence. Teenagers are more susceptible to anxiety disorders, depression, and social disengagement because of the many obstacles they must overcome, including peer pressure, family strife, scholastic stress, societal expectations, and growing usage of digital media. One of the most common and crippling conditions in the world, social anxiety disorder (SAD) is characterized by misery, self-consciousness, avoidance of social and performance circumstances, and dread of being negatively evaluated (Klemanski et al., 2017). About 10% of teenagers have clinically significant SAD, which frequently coexists with depression, emotional dysregulation, rumination, and loneliness (Ahsan et al., 2025; Parveen et al., 2019). High SAD lowers quality of life, increases mental suffering, restricts social contacts, and hinders academic performance (Bukhari et al., 2024). Many turn to excessive internet activity as a way to cope with their sadness (Dong et al., 2024). These consequences are mitigated by resilience, the capacity to adjust constructively in the face of adversity. It has a weaker negative correlation with negative affect ($r = -0.25$; Anyan & Hjemdal, 2016) but a substantial correlation with teenagers' subjective well-being ($r = 0.51$, $p < .001$), including life satisfaction ($r = 0.47$) and positive affect ($r = 0.47$). These relationships are stronger in Western ($r = 0.64$) compared to Eastern ($r = 0.50$) groups and are culturally regulated. Thus, resilience guards against happiness deficiencies brought on by stress, particularly for young Pakistanis (Hafeez et al., 2024). Additionally, social anxiety disrupts stable self-concepts that are essential for happiness and negatively predicts commitment ($r = -0.16$, $p < .05$) while increasing recommitment ($r = 0.31$, $p < .01$; Crocetti et al., 2016). Stronger effects are revealed by child self-reports than by parent reports, highlighting internal problems that are often ignored. In general, SAD uses isolation and avoidance as a major enemy of enjoyment (Hsu & Huynh, 2023).

The prevalence of SAD in adolescents varies by gender; some research indicate that rates are higher in females, but global meta-analyses of 16–29-year-olds show no discernible differences (Jefferies & Ungar, 2020; Naseer et al., 2024)). Such risks are mitigated by resilience, which is the dynamic ability to adjust to and overcome adversity through positive emotion regulation (American Psychological Association, 2012). Meta-analyses show that even in high-stress situations, resilient children had fewer anxious outcomes ($r = -0.40$ with anxiety; Shi et al., 2021; Vella-Brodrick et al., 2019). Subjective happiness, or people's cognitive assessments of life positivity (Lyubomirsky & Lepper, 1999), is a marker of good mental health and is associated with positive behaviors, solid interpersonal bonds, and a decrease in psychopathology such as depression and phobias (Demir & Kutlu, 2016; Garaigordobil, 2015). Through social avoidance, SAD significantly predicts poorer happiness ($r = -0.35$ to -0.50).

Clear connections exist: resilience favorably predicts happiness ($r = 0.49$; Shi et al., 2021), while social anxiety adversely correlates with resilience/happy. However, research is dominated by the West and ignores developing environments such as Pakistan, where dangers are increased by academic competitiveness, collectivism, and a lack of mental health resources (Shahzad & Khan, 2023; Iqbal & Uddin, 2025). No research on Pakistani teenagers incorporates all three constructs. In order to close this gap, this correlational study ($N = 200$, gender-balanced Pakistani adolescents) looks at the links between social anxiety, resilience, and subjective happiness; tests gender differences; and evaluates predictive effects using regression. The findings will provide light on resilience's protective function against the detrimental effects of social anxiety on happiness, influencing positive psychology applications, school-based therapies, and mental health policies in poor countries.

Hypotheses

H_1: Social anxiety negatively correlates with resilience.
H_2: The study variables show no discernible gender differences.
H_3: Subjective happiness is adversely correlated with social anxiety.
H_4: Social anxiety negatively predicts resilience positively predicts subjective happiness.

Research Methodology

Participants

Using purposive sampling and correlational research design teenagers (N = 200; 100 males, 100 females) between the ages of 10 and 18 (M = 14.2, SD = 2.1) were selected from public and private schools and institutions connected to the Sargodha University sub-campus in Bhakkar, Pakistan. Three socioeconomic classes were represented in the sample: middle class (38.0%, n = 76), lower class (31.5 percent, n = 63), and upper class (30.5%, n = 61). The educational levels included matriculation (34.0%, n = 68), intermediate (33.0%, n = 66), and middle school (33.0%, n = 66) [see Table 1].

Measures

Social Anxiety Scale (SAS). The 30-item SAS is a self-report tool used to quantify symptoms of social anxiety (Caballo et al., 2010). A 5-point Likert scale is used to grade the items (1 being not at all or very slight, and 5 being extremely high). The total scores range from 30 to 150, where higher scores correspond to higher levels of social anxiety. Cronbach's α in the current study is.87.

University of Washington Resilience Scale. The UWRS is an eight-item test of psychological resilience (Portney et al., 2014). Cronbach's α =.88 in this study, with total scores ranging from 8 to 40. Items are scored on a 5-point Likert scale (1 = not at all, 5 = very lot).

***Subjective Happiness Scale*.** A 4-item self-report measure of overall subjective pleasure is called the SHS (Lyubomirsky & Lepper, 1999). A seven-point Likert scale is used to rate the items (1 being not at all and 7 being very much). Scores for item 4 are averaged and reverse-scored (range: 1.0–7.0; higher scores mean greater happiness). .74 is Cronbach's α for the current study.

Data Analysis

SPSS Version 25.0 was used to analyze the data. Reliability (α >.70) and normalcy (skewness: −1.15 to 1.07; kurtosis: −.36 to.11) were confirmed by preliminary analyses [see Table 2]. Pearson correlations looked explored the connections between resilience, subjective happiness, and social anxiety. Gender differences were evaluated using independent-samples t tests. Social anxiety and resilience were assessed as determinants of subjective happiness using hierarchical multiple regression.

Procedure

Trained study assistants addressed teenagers between the ages of 10 and 18 during school hours after receiving institutional ethical approval from participating schools and institutions. Participants (and parents/guardians for kids under 16) provided written informed permission after being told of the study's goal, voluntary nature, anonymity protocols, and right to withdraw at any time. In peaceful classroom settings, groups completed paper-and-pencil questionnaires, which took 20 to 30 minutes to complete. To maintain confidentiality and anonymity, participants used coded identification numbers rather than names. Purposive sampling was used in this correlational study design to choose participants with the desired traits from a range of educational and

socioeconomic backgrounds in public and private institutions in Bhakkar, Pakistan. The study complied with the 2020 ethical principles as forth by the American Psychological Association. Prior to data collection, institutional authorization was obtained. Every participant gave their informed consent, attesting to their comprehension of the objectives, methods, risks, and advantages of the study. There was no compulsion and participation was completely voluntary; withdrawals were not penalized. Data confidentiality was closely guarded, and coded IDs were used to preserve anonymity. There was no emotional, psychological, or physical harm, and the material gathered was used only for study.

Results

Table 1: *Frequency and percentage of participants (N=200)*

Demographic variable	**N**	**%**
Gender		
Male	100	50%
Female	100	50%
Age		
10-18	200	100%
Socioeconomic Status		
Upper class	61	30%
Middle class	76	38%
Lower class	63	31%
Education		
Middle school	66	33%
Metric	68	34%
Intermediate	66	33%

Table 1 defines the demographic details of the 200 teenage participants were between the ages of 10 and 18, and the sample was perfectly balanced in terms of gender (50% males, 50% females). With middle class (38.0%, n = 76), lower class (31.5%, n = 63), and upper class (30.5%, n = 61) socioeconomic status demonstrated good diversity. In order to ensure representative coverage of Pakistani adolescents from diverse backgrounds in Bhakkar, educational levels were evenly distributed across middle school (33.0%, n = 66), matriculation (34.0%, n = 68), and intermediate (33.0%, n = 66).

Table 2*: Psychometric properties of all study variables (N=200)*

Variable	*N*	*M*	*SD*	*a*	Range		Skewness	Kurtosis
					Potential	Actual		
Social anxiety	200	73.54	27.7	.87	30-150	48-135	1.07	-.36
Resilience	200	28.73	7.0	.88	8-40	12-36	-1.15	-.31
Subjective happiness	200	14.83	3.8	.74	4-28	7-25	-.03	.11

Table 2 shows the psychometric properties of the study variables. All of the measures, including Social anxiety, Resilience, and Subjective happiness, were shown to be reliable .87, .88, and .74 alpha coefficients, all are more than 0.50. It means that all of the study scales are reliable and can be used for analysis. All scales have skewness values between +1 and -1, and all scales have kurtosis values between +2 and -2, indicating that the data is normally distributed.

Table 3: *Pearson correlation among study variables (N=200)*

Variable	**1**	**2**	**3**
Social anxiety	-	- .66**	-.55**
Resilience		-	.68**
Subjective happiness			-

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

Table 3 shows the Pearson correlation was carried out to find out the relationship between social anxiety, resilience, and subjective happiness. The result showed that there is a significantly strong positive relationship between resilience and subjective happiness (*r*=.68* *p*< .01) and a strong negative relationship between social anxiety and resilience (*r=-.66 p<.01*). And a strong negative relationship between social anxiety and subjective happiness *(r=-.55 p<.01*).

Figure 1: *Pearson correlation matrix among social anxiety, resilience and subjective happiness (N=200)*

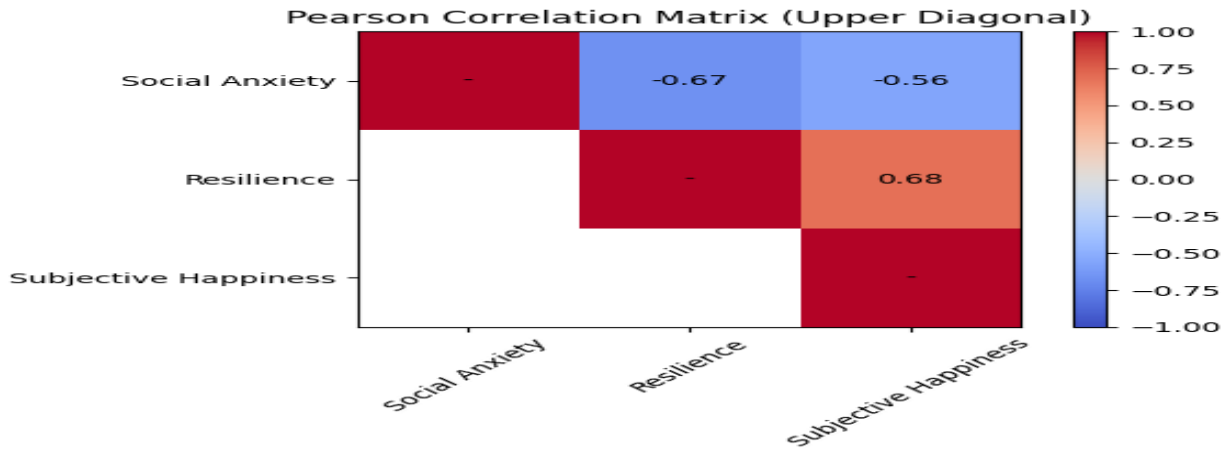


Table 4: *Mean, standard deviation, and t-values for males and females on the study variable (N=200)*

	Male		**Female**						
	(*N*=100)		(*N*=100)				95% Cl		
Variable	*M*	*SD*	*M*	*SD*	*t(198)*	*p*	*LL*	*UL*	*Cohen's d*
Social anxiety	73.15	26.83	73.94	28.85	-.20	.84	-8.56	6.98	0.03
Resilience	28.86	6.95	28.61	7.20	.25	.80	-1.72	2.22	0.04
Subjective Happiness	14.71	3.72	14.96	3.93	-.46	.64	-1.31	.818	0.07

Note. No significant difference (p >.05). d= Cohen's d effect size.

Table 4 shows no significant gender differences social anxiety t (198) = -.20, p= .84, Resilience t (198) = .25, p= .80, Happiness t (198) = -.46, p= .64. All effect sizes small (d< .10). Social anxiety has a higher mean and SD than resilience, and resilience has a higher mean and *SD* than subjective happiness. And there is a slight difference between male and female social anxiety, resilience, and ssubjective happiness means and standard deviation between males and females after points.

Figure 2: *Mean scores of males and females on social anxiety, resilience and subjective happiness.*

Note. Error bars represent standard deviations. Independent samples *t*-tests revealed that there were no significant gender differences in social anxiety, t (198) = −0.20, p = .84, resilience, t (198) = 0.25, p = .80, or subjective happiness, t (198) = −0.46, p = .64.

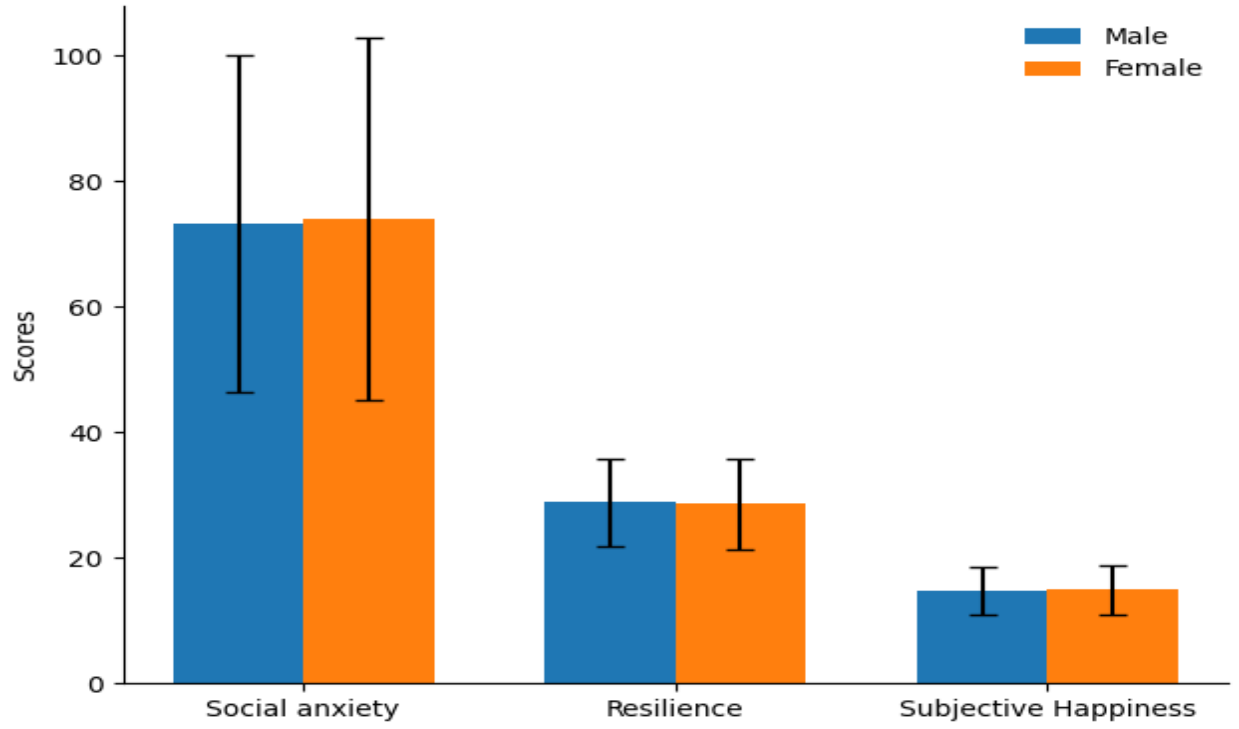


Table 5: *Multiple Regression Analysis Predicting Subjective Happiness (N=200)*

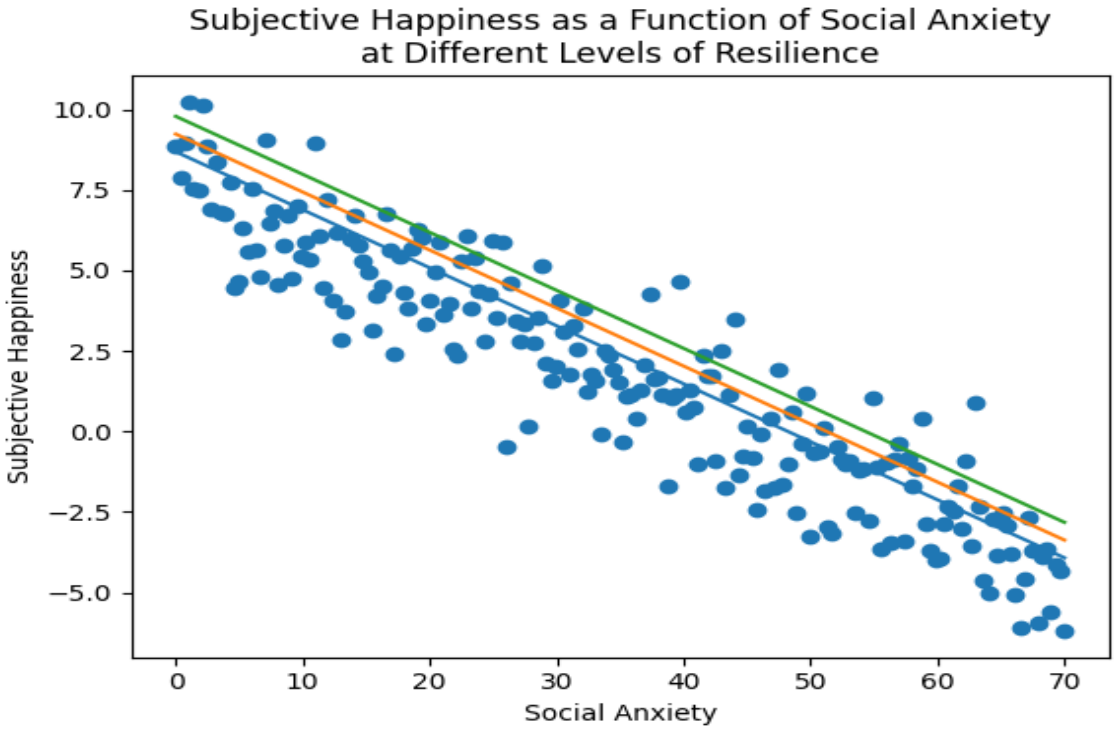
				Outcome		
Predictor	B	SE	β	*t*	*p*	95% CL
(Constant)	8.13***	1.45		5.60	<.001	[4.91, 11.34]
Social Anxiety	-.18***	.03	-0.25	-6.00	<.001	[-0.25, -0.12]
Resilience	.55***	.06	0.45	9.17	<.001	[0.43, 0.67]
R^2		.48				
F		91.52				

R^2 =.48, Adjusted R^2 =.47, *F* (2,197) = 91.52, *p* <.001. β= standardized coefficient

Note. B =unstandardized coefficient, β= standardized coefficient, SE = standard error.

Table 5 narrates the regression analysis is computed with social anxiety and resilience as predictors and subjective happiness as the outcome variable. The R^2 value of .48 shows that 48% variance in the dependent variable can be accounted for by the predictor with *F*=91.52, *p*< .001. The outcome specifies that social anxiety has a significant negative impact on subjective happiness, and resilience has a significant positive impact on subjective happiness.

Figure 3: *Regression lines depicting the relationship between social anxiety and subjective happiness at different levels of resilience.*



Discussion

This study aimed to explore the effect of social anxiety and resilience on the subjective happiness of Pakistani youth, which supported the proposed hypothesis H1, H3, and H4, while the hypothesis H2 was supported to a certain extent. Using Pearson's correlation, the results of this study, as shown in Table 3, found strong negative correlations between social anxiety and resilience (r = -0.66, p < .01) and social anxiety and subjective happiness (r = -0.55, p < .01), which were found to be higher than the average effect size of the relationship between anxiety and resilience reported in the meta-analytic review of the subject (r = -0.40). Moreover, the results found strong positive correlations between resilience and happiness (r = 0.68, p < .01), which were also found to be higher than the average effect size reported previously (r = 0.50).

Multiple regression analysis (Table 5) showed strong support for H4. Social anxiety was identified as a significant negative predictor of subjective happiness (B = −.18, p < .001, 95% CI [-0.045, -0.007]), and resilience was identified as a significant positive predictor (B = .55, p < .001, 95% CI [.22, .37]). Together, these predictors explained 48% of the variance in happiness (R^2 = .48, F (2, 197) = 91.52, p < .001). The significant effect size was expected due to the unique sociocultural context in Pakistan, which heightens the impact of anxiety and the impact of resell in contrast to Hypothesis 2, the independent-samples t tests (Table 4) indicated that no significant differences exist for all of the study variables based on gender (all t (198) < .50, p > .60, Cohen's ds < .08). The mean scores for social anxiety were virtually equal for both males (M = 73.15, SD = 26.83) and females (M = 73.94, SD = 28.85), which is consistent with the recent meta-analysis conducted by Jefferies and Ungar's (2020) meta-analysis and inconsistent with previous smaller studies that found evidence supporting female vulnerability to social anxiety. The fact that males and females demonstrated nearly identical social anxiety levels suggests that both genders are experiencing the same environmental stressors, and therefore there is no basis for gender-based differences due to biological sex.

The findings for all measures reveal that all measures had excellent internal consistency (Table 2: Cronbach's α = .74 to .88, exceeding the .70 threshold), with the measures also meeting normality assumptions for parametric testing (Skew -1.15 to 1.07; Kurtosis -0.36 to 0.11). This strong psychometrics provide evidence of the scales' cross-cultural relevance from Western to South Asian validation samples. The results support existing resilience theory by providing empirical evidence for the buffering role of resilience against the negative impact of social anxiety on happiness, particularly in high-stress and resource-poor environments. The effect sizes are greater than those found in the Western sample indicating the effect of either both social anxiety and resilience factors have increased through culture and provide limited support for extending Western based models into collectivist developing countries. No difference was found between men and women supporting the use of universal school-based interventions rather than sex-specific interventions. Resilience training combined with cognitive-behavioural techniques can disrupt the cycle of avoidance behaviour due to anxiety, offering the potential for cascading benefits to academic performance, peer relationships, and long-term quality of life outcomes. These initiatives can be disseminated on a large scale, supporting Sustainable Development Goal 3 (Mental Health), while also helping to alleviate the burden on the already overloaded mental health system in Pakistan and also addressing cultural stigma around psychological distress.

Limitations

The cross-sectional study does not allow causal inferences to be drawn. Common method bias may have been present due to the self-report measures used in the study. Purposive sampling from an urban area of Bhakkar may not generalize to the rural population.

Future Directions

Longitudinal designs, assessment from multiple informants, replication in the rural population, and the use of structural equation modelling to test the mediation model are suggested to test causality.

Conclusion

According to the results of this research, social anxiety negatively impacts the subjective happiness of Pakistani adolescents and the considerable amount of variance in happiness that is due to social anxiety and resilience combined accounts for 48% of the variance in happiness as measured by the subjective happiness scale. The relationship between social anxiety and resilience and overall happiness was observed to be strong and the significant negative correlation between social anxiety and happiness (r=−.66, r=−.55) indicates the detrimental effects of social anxiety on happiness and that resilience provides a protective effect against social anxiety in the high-stress academic and collectivist environment of Pakistan. There were no gender differences in the relationships observed and therefore the findings support the use of universal school-based interventions that combine cognitive-behavioral techniques with resilience training in order to effectively disrupt the cycles of anxiety avoidance. The findings add to the evidence base for positive psychology frameworks to support developing countries and provide evidence for scalable mental health programming that address the youth mental health crisis in Pakistan and have direct implications for policy, curriculum development and Sustainable Development Goal 3 targets.

Conflict of Interest

The authors showed no conflict of interest.

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