

Effects of Shyness on the Adjustment of High School Children

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Abstract

The present study explores the effects of shyness on the adjustment of high school children. The findings of the study can be applied in educational settings. It can be support for teachers to understand the phenomenon among students which create adjustment problems. For this purpose, two scales were used i.e., Shyness Questionnaire (Yasmeen, 2005) for measuring Shyness level and Bell Adjustment Inventory (Bell, 1934) for measuring different types of adjustment. Shyness questionnaire was in Urdu whereas Bell Adjustment Inventory was in English and both had highly satisfactory reliability. There were 150 school children and the age range was 13-15years. There were 75 girls and 75 boys in the present study. The main hypothesis of the present study was that shyness has no differential effect on home and health adjustment but there was significance linear increase in social and emotional adjustment. Results also support this hypothesis that shyness has no effects on home and health adjustment but effects social and emotional adjustment of school children. Other hypothesis proved that girls are shy as compared to boys and nuclear family children are shy as compared to extended family system children.

Key Words: Shyness, adjustment, nuclear and extended families

Important issue that has not been fully resolved is the point at which shyness ceases to be an everyday problem common to many people and becomes a form of psychopathology. There is evidence that shyness is related to introversion and neuroticism more or less equally (Briggs, 1988). There is also evidence that both "everyday" shyness and its variants of greater clinical significance can be successfully treated with psychological and other forms of intervention (Cappe & Alden, 1986).

Shyness is a tendency to feel tense, worried or awkward during social interactions (Cheek & Watson, 1989) and shy people tend to feel embarrassed, uncertain, frightened and doubtful about their personal merits and capabilities (Crozier & Burnham, 1990). It is reasonable to believe that this can lead to more passive behavior in school. Research shows that shy pupils report having difficulties asking for help needed in class and that they avoid social activities (Jones & Carpenter, 1986).

Shyness involves anxiety and behavioral inhibition in social situations (Leary, 1986). It occurs most frequently in situations that are novel or suggest evaluation of the person or situations where the person is conspicuous or others are intrusive (Buss, 1986). Although all children may experience shyness sometimes, some children experience shyness to a debilitating degree. Shy children are perceived as less friendly and assertive than others, they are not usually viewed as negatively as they fear. Shy children remember negative feedback more than other non-shy children and they remember negative self-descriptions better than positive self-descriptions. They overestimate the likelihood of unpleasantness in social interaction and are exquisitely sensitive to potential negative reaction in others, dealing with perceived threat by rumination and worry. In fact cognitive distraction has been shown to interfere more than anxiety with social interaction (Yasmeen, 2005).

Shy children want to interact with unfamiliar others but don't because of their fear. A different problem exists when a child simply prefers to be alone. These loner children, who are rare, show little or no interest in observing others and little or no excitement when approached by others (Asendorpf, 1993).

Shy children have been found to be less competent at initiating play with peers. School-age children who rate themselves as shy tend to like themselves less and consider themselves less friendly and more passive than their non-shy peers (Zimbardo & Radl, 1981). Such factors negatively affect others' perceptions. According to him shy people are often judged by peers to be less friendly and likeable than non-shy people. For all these reasons, shy children may be neglected by peers, and have few chances to develop social skills. Children who continue to be excessively shy into adolescence and adulthood describe themselves as being lonelier, and having fewer close friends and relationships with members of the opposite sex, than their peers.

The process of adjustment involves a person's attempt to cope with master, and transcend such challenges (Kaplan, 1995). Harmony between the individual and the world. It is not just a supine bending to reality but a process of working to change both self and the environment to achieve and maintain harmony (Bernard, 1964). The psychological process of adapting to, coping with, and managing the problems, challenges and demands of everyday life (Simons, 1994).

One study by Xinyin, Kenneth, and Boshu (1995) on social and school adjustment of shy and aggressive children in China. 57 extremely shy/inhibited children, 59 extremely aggressive children, and 352 average children (aged 8 and 10 yrs) in 2nd and 4th grade in Shanghai were compared on sociometric nominations of peer acceptance and rejection;

teachers' assessments of school related competencies self-report measure of depression; and Chinese measures of normative school behavior, honor ship, leadership, and academic achievement. Aggressive were more likely to have difficulties in adjustment than were their average age-mates. Shy/inhibited were more accepted by peers than were their average age-mates. Compared with average and aggressive, shy/inhibited were most likely to be considered for honor ship and leadership positions and were regarded by teachers as the most competent in school. The three comparison groups did not differ on a measure of depression. Results support the traditional Chinese view of shyness as a positively valued characteristic.

One study by D'Souza and his colleagues in 2001 study effect of shyness on various areas of adjustment among high school students. They were assessed using shyness questionnaire Results revealed that shyness has no differential effect on home and health adjustment. However, there is a significant linear increase in the social, emotional and total maladjustment with the increase in level of shyness i.e., higher the shyness higher the maladjustment in social and emotional adjustment of the students.

Paulhus, Duncan, and Yik, (2002) study Patterns of shyness in East-Asian and European-heritage students. Reviews of the self-report literature suggest that shyness is more prevalent among East Asians than among those of European heritage. The generalizability of that claim was evaluated with four studies comparing students of Asian heritage (AH) and European heritage (EH). Study 1 (N $\frac{1}{4}$ 897) confirmed a substantially higher rate of self-reported shyness among AH students (68%) than among EH students (44%). In Study 2 (N $\frac{1}{4}$ 309), the ethnic difference in self-reported shyness was substantially higher for classroom than for social situations. In Study 3 (N $\frac{1}{4}$ 213), the ethnic difference was strong for cross-ethnicity socializing but nil for same-ethnicity socializing. In Study 4 (N $\frac{1}{4}$ 250), a behavioral index-classroom participation was recorded and coded. The observed ethnic difference in participation rate showed a medium effect size comparable to the self-report difference. There was no ethnic difference, however, in the mean complexity and challengingness of the classroom participations or in final course grades. It was conclude that the ethnic difference is maximal for classroom participation because the latter situation combines several key contributing factors to Asian shyness.

One study reports relationship between shyness and various areas of adjustment of college students. They were assessed using Shyness Questionnaire and Adjustment Inventory for College Students. Results revealed that shyness has got no differential effect on educational adjustment of the students. There is a significant linear increase in the home, health, social, emotional and total maladjustment as the level of shyness increased. Higher the shyness more was the maladjustment in home, health, social and emotional adjustments in the college students. In addition, treatment aspects of shyness are discussed (D'Souza, Ramaswamy, & Babu, 2008).

Hypothesis

Shyness will have no differential effect on home and health adjustment but there will be effect in the social & emotional adjustment.

Method

Sample

The Purposive Sampling Technique was used. The sample included 150 Federal Government school children (75 girls and 75 boys). The age range was 13-15 years. Mean age range was 13.89. All the subjects were selected from Islamabad. The sample was taken from 8th and 9th classes. There were 81.33% nuclear families in sample and 18.66% extended families. Other

demographics for sample were Father's occupation, Mother's occupation and Monthly Income.

Instruments

Shyness Questionnaire.

The shyness questionnaire was developed by (Crozier (1995), University College of Cardiff. It consists of 26 items and requires the subjects to indicate his/her responses by ticking Yes, No, or Don't know. The values given to the responses are 2, 0 and 1 respectively. The items of the questionnaire are based on situations and interactions like performing in front of the class, being made fun of, being told of, etc. the alpha coefficient of the original scale was 0.82. The original shyness scale was translated and adapted by the Yasmeen (2005). The translated and adapted shyness questionnaire consists of 28 items. The scale was divided into two forms. Form1 is for male population and Form 2 is for female population. All the items are same in both forms. Item no 9, 10, 15, 16, and 23 are scored in reversed order. The cutoff score is 28. The Alpha Coefficient of scale is .72.

Bell's Adjustment Inventory.

Originally developed by Bell (1934) this inventory evaluates the subject's home, health, social, and emotional adjustment. The original inventory was adapted by Sharma (1965). There are 80 items in this inventory to be marked on Yes and No. For each response a score is given. More the score more would be the poor adjustment in that particular area. There are 21 items in home adjustment, 20 in social adjustment, 21 in emotional adjustment and 18 in health adjustment. The scale reliability coefficient is .82.

Design

The purpose of the present research was to study effects of shyness on the adjustment of high school children. Shyness is very broad term, which has been studied with many different constructs and with many different correlates (Passer, 1983).

The present research will help to see whether the phenomenon of shyness affects on adjustment of school children in our country or not. It is extremely important to see that in Pakistan as well, whether shyness leads to adjustment or not.

The try out for Bell Adjustment inventory was conducted before the main study.

Observation > Try out > Main study.

Procedure

The try out for Bell's Adjustment inventory was conducted before the main study (Bell 1934). Sample of children was taken from the schools of Islamabad. The participants were approached after taking the permission from authorities of the school in which they were studying. The participants were explained the purpose of study and were assured that their information were kept confidential and would only be used for research purpose. Then the participants were provided Shyness Questionnaire to fill in the required information (Crozier (1995). Subsequently, they were given Bell Adjustment Inventory. Required demographic information was obtained on the demographic sheet. Verbal instructions were also provided along with written directions to fill in the questionnaires. At the end participants and authorities of schools were heartily thanked for their support and cooperation.

Results

The data of the present study were analyzed to explore the effect of shyness on the adjustment of high school children. The data was collected from high school children.

Table 1
Alpha reliability for Shyness Questionnaire and Bell Adjustment Inventory (N = 150)

Sub scale	No. of cases	No. of items	Alpha coefficient
Shyness Questionnaire	150	28	.72
Bell Adjustment Inventory	150	80	.82
Home	150	21	.57
Health	150	18	.63
Social	150	20	.20
Emotional	150	21	.61

This table shows the alpha reliability of shyness questionnaire. The Alpha coefficient reliability is .72. It indicates that shyness questionnaire is reliable tool for research. This table also shows Alpha Coefficients of Bell Adjustment inventory and their subscales. The subscale home adjustment alpha reliability is .57. The subscale health adjustment alpha reliability is .63. The subscale social adjustment alpha reliability is .20. The subscale emotional adjustment alpha reliability is .61. The overall alpha reliability of Bell Adjustment Inventory is .82 which shows it is reliable for research.

Table 2

Mean Adjustment Score of Students in Various Areas with Shyness with Different Levels of Shyness and their Significance Levels

Scales	Low level shyness (1-27)		Medium level shyness (27.9-28)		High level shyness (28-56)		F	p
	M	SD	M	SD	M	SD		
Home	29.67	3.090	27.50	2.121	29.37	2.974	.617	.54
Health	24.04	3.343	22.50	2.121	23.88	3.214	.242	.78
Social	35.56	1.463	35.50	.707	37.60	1.977	26.134	.00
Emotional	35.81	2.185	35.00	.000	37.70	2.005	15.721	.00

df = 2,147.

This table shows significance level of different types of adjustment on different levels of shyness. p value of social and emotional adjustment is .00 which shows shyness has differential effect on social and emotional adjustment.

Discussion

The present study aimed to explore the effects of shyness on the adjustment of high school children. For this purpose two instruments: Shyness Questionnaire and Bell Adjustment Inventory were used. The shyness questionnaire consisted of two forms. Form 1 for boys and form 2 for girls.

The Table 1 shows the alpha reliability of Shyness Questionnaire. The Alpha coefficient reliability is .72. It indicates that Shyness Questionnaire is reliable tool for research. This table also shows alpha reliability of Bell Adjustment inventory. The overall alpha reliability of Bell Adjustment Inventory is .82 which shows it is reliable for research. Main objectives of study were to find out the influence of shyness on various areas of adjustment among high school children.

Table 4 shows significance level of different types of adjustment on different levels of shyness which shows that shyness not effects on family and health adjustment but effects social and emotional adjustment. Findings of study also supported Shyness has no differential effect on home and health adjustment. There is a significant linear increase in the social, emotional adjustment. The findings of study are in agreement with studies conducted in which social withdrawal is increasingly associated with negative peer and teacher perceptions and peer relation difficulties, resulting in unfavorable perception of self-worth and feelings of loneliness thus increasing the level of emotional maladjustment among children (Hymel, Rubin, Rowden, & LeMare, 1990).

Recent study by D'Souza, Urs & James (2000) revealed that students with more shyness are prone to neurotic tendency and it will have negative effects such as having low academic performance, which in turn further complicates the personality of the student. Although there is some evidence that shyness manifests itself in withdrawn behavior (Asendorpf, 1986; Asendorpf, 1991), such behavior does not necessarily reflect shyness. Research shows that shy pupils report having difficulties asking for help needed in class and that they avoid social activities (Jones & Carpenter, 1986).

According to Bennet and Gillingham (1991) the middle childhood is also a time when self-awareness and self-consciousness increases, as does the significance of peer support. Moreover, it has been argued that as shyness and social withdrawal increase in importance in children's perceptions during this period, they may also increase as indicators and predictors of mal adjustment (Younger, Gentile, & Burgess, 1993). Furthermore the preadolescent years are viewed as time of 'rapid changes in the physical characteristics, cognitive development and social demands that have an impact on shyness and on the relationship between shyness and self-esteem (Crozier, 1995). Lack of social skills and also all prevailing influence of adults and other children along with changes in psycho-physiological structure may induce the growing child to withdraw into itself, thus leading to increased total maladjustment, along with linear increase in child's self-esteem. So also, the middle childhood years may be a time when both the salience and negative evaluations of shy behavior by children's peer increase, in parallel with children's awareness of their behavior and of the way others construct them. It, therefore, seems likely that the negative consequences of shy behavior will be augmented during this period.

Implications

The present research findings have many implications in different field of life.

- 1) These findings can be applied in educational settings and can be supportive and helpful for teachers and psychologists to understand the phenomenon among student which create adjustment problems.
- 2) In social context it can bring detailed understanding about its nature as well as its consequences. The findings of study can insight in people that to some extent shyness is advantageous but mostly damaging for the individuals as it develop many psycho social problems.

Limitations

- 1) The study was conducted only in local area of Islamabad. Other cities of Pakistan were not included in the study.
- 2) Due to time limitation sample was collected only from 4 schools.

Suggestions

- 1) The sample size should be large enough and should be representative of the whole population to draw the results that can be generalized over the entire population.
- 2) Private schools can also be included for the same purpose.
- 3) Data should be taken from different cities.

Conclusion

Present study was conducted to explore the effects of shyness on the adjustment of high school children. Results show that shyness has no differential effect on home and health adjustment whereas it effects on social and emotional adjustment of high school children.

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