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SOCIAL ANXIETY SUBTYPES AMONG ARAB STUDENT TEACHERS: DEMOGRAPHIC, SOCIAL-EMOTIONAL AND EDUCATIONAL CHARACTERISTICS

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Abstract

The current study examines the demographic, social-emotional and educational differences between 543 Arab minority student teachers with and without specific and generalized social anxiety. For this purpose, the participants responded to the research tools which measure these aspects and they were divided into three categories (no social anxiety, specific social anxiety, and generalized social anxiety). The findings indicated that the average age of the student teachers with generalized social anxiety was higher than the average age of those with specific social anxiety, while no differences were found between the two categories in certain demographic variables. The study found that average social anxiety, social fear and social avoidance levels were higher among student teachers with generalized social anxiety than among those with specific social anxiety. In addition, there is a statistically significant correlation between levels of social anxiety and levels of depression and motivation for learning, while there are no statistically significant correlations between levels of social anxiety and levels of self-esteem and perceived social and family support.

Keywords: Social anxiety, student teachers, learning motivation, elf-esteem, Arab society.

Introduction

Social anxiety and its subtypes

The Diagnostic and Statistical Manual of Mental Disorders (“DSM-5”) published by the American Psychiatric Association, 2013, defines social anxiety as “an excessive fear of criticism, social rejection and ridicule in social situations. These fears are so frequent and powerful that they cause

psychological functioning (Beesdo-Baum et al., 2012).

The relative prevalence of the two subtypes of social anxiety – specific and generalized –varies from study to study because of differences in the nationality of the population, methodological aspects, the techniques used to categorize the two types and differing assessment methods. For example, a study by Rabe-Jablonska et al., 2004, found that 7% of adolescents had generalized social anxiety and 17% had specific social anxiety. In contrast, the researchers (Zubeidat et al., 2007), reported rates of 3.95% of generalized social anxiety and 4.47% of specific social anxiety among adolescents.

Most of the studies conducted on adult populations indicate that individuals with social anxiety are characterized by low socioeconomic status and unstable employment. High percentages are single, women and students (Davidson et al., 1993; Jimenez et al., 1999; Magee et al., 1996; Kupper, & Denollet, 2012; Patel et al, 2002). Furthermore, despite the fact that the percentages of women are higher than those of men in almost all types of anxiety and phobia disorders, the difference in the prevalence of social anxiety among men and women is unclear, since some distress and obvious functional impairment." The DSM-5 refers to two subtypes of social anxiety: a. Specific Social Anxiety: excessive fear of one, two or three social situations requiring performance and social interaction with others; b. Generalized Social Anxiety: excessive fear of most social situations requiring performance and social interaction with others. Social anxiety has also been defined as the "fear of negative evaluation by others in a variety of social situations" (Bjornsson et al., 2011; Obeid et al., 2013), which require performance and social interaction with others.

Social anxiety often occurs in conjunction with other anxiety disorders, in particular, generalized anxiety. Social anxiety is differentiated from other disorders by excessive fear, avoidance of a large number of social interactions and its negative impact on the daily lives of sufferers caused by their social phobias (Dryman, & Heimberg, 2015; Yap et al., 2016). Social anxiety can affect 2% of the general population (Turner, & Beidel, 1989) and is the second most common anxiety disorder after agoraphobia (Beesdo-Baum et al., 2012). The disorder is usually accompanied by comorbidity, disability and impaired

et al., 1996) or between the ages of 15 and 20 (Koyuncu et al., 2015).

Relationships between social anxiety subtypes and social-emotional and educational aspects

The studies which examined the relationship between social anxiety and other disorders used adult populations and found that most of the problems which overlapped with social anxiety are other anxieties (Faravelli *et al*., 2000; Magee *et al*., 1996) depression (Faravelli *et al*., 2000; Pini *et al*., 1997; Wilson, & Rapee, 2005) drug use (Galbraith *et al*., 2013) social deprivation and antisocial behaviour (Lim et al, 2016; Pacek *et al*., 2013) and feelings of inferiority and low self-esteem (Baños, & Guillén, 2000; Leary, & Kowalski, 1995). Other studies have shown that anxiety disorders manifest themselves together with depression, oppositional-defiant disorder, ADHD and drug and alcohol use (Essau et al., 2000; Lewinsohn et al., 1997).

The scientific literature contains some research into the differences between specific social anxiety and generalized social anxiety in respect of their prevalence and relationship with demographic variables, their links to behavioural disorders and other mental studies have found that among females it is sometimes only slightly higher than among males (Myers et al., 1984). In contrast, others report equal incidences of social anxiety between the two genders (Amies et al., 1983). Specifically, it was found that social anxiety leads to poor school performance, a higher incidence of unemployment (Wittchen et al., 1999) and difficulties in family relationships (Peleg, 2005).

Marital status is considered to be significant in social anxiety disorders, since it was found that 38% of women suffering from social anxiety were unmarried (Amies et al., 1983). In this regard, most studies report a higher percentage of singles among individuals with social anxiety than among those without social anxiety (Davidson et al., 1993; Kupper, & Denollet, 2012). Moreover, the results of epidemiological studies all indicate that individuals with social anxiety have low socioeconomic and social status (Davidson et al., 1993; Kupper, & Denollet, 2012; Wittchen et al., 1999). Social anxiety often starts before other anxiety disorders and it can appear at the end of childhood or at the onset of adolescence, and only rarely after the age of 25 (La Greca et al., 2015; Weiller

depression, generalized anxiety and specific phobias.

Other concepts such as motivation for learning and self-esteem are also linked to social anxiety (Olivares *et al*., 2004). Motivation for learning is an important component in the learning process. In recent decades there has been increased recognition of the key role played by motivation processes in the academic success of students (Hyunjin, & YoonJun, 2014; Jianzhong, 2014). The term "self-esteem" has been defined as "an organized system of traits which individuals believe they possess and which govern their behaviour" (Fitts, 1965). Taylor et al., 2002 regard self-esteem as both a factor in and a result of social-cultural factors, whereas other researchers (Carlson et al., 2000) add that self-esteem is also perceived as the individual's evaluation of his membership of an ethnic group as well as a measure of social acceptance and emotional experiences.

Social anxiety also is associated with impaired development of social skills, a significant decline in social interactions, low self-esteem and poor educational performance. Social anxiety has a significant impact on the daily functioning of sufferers. For example, Bjornsson *et al*. (2011) note disorders and the differences between them in performance and interaction situations. Most of these studies were conducted on adults (Faravelli *et al*., 2000; Nagata, Suzuki, & Teo, 2015; Olivares et al., 2004). In any event the separation between specific social anxiety and generalized social anxiety is unclear, among both adult and adolescent populations (Heimberg et al., 1993; Hofmann *et al*., 1999).

Various studies have reported on differences between specific social anxiety and generalized social anxiety with comorbidity. These differences indicate that generalized social anxiety is associated with a higher degree of comorbidity than specific social anxiety and with other anxiety disorders (for example, agoraphobia, panic disorder), mood disorders (for example, depression) alcoholism and drug use and personality disorders (for example, schizophrenia) (Faravelli *et al*., 2000; Mannuzza *et al*., 1995). These individuals exhibit low levels of self-esteem and high levels of depression, neurotic problems, anxiety, history of childhood shyness and deficient social skills (Hofmann & Roth, 1996; Lim *et al*., 2016). The researchers Chavira et al., 2004, reported high comorbidity between generalized social anxiety and

and marginalization, the Palestinian Arab minority in Israel has managed to narrow the gaps between themselves and the Jews in all spheres: political, economic, social, cultural and especially in education. One of the reasons a significant gap continues to exists between Arab and Jewish citizens, in the educational field, is due, in-part, to the teaching methods and learning skills in Arab society schools relative to schools in Jewish sectors. In Arab society, the teaching method does not encourage critical and independent thinking patterns. In addition, the study suggests that, in Arab society, schools have the expectation that the Arab student should receive assistance from teachers in coping with learning difficulties (Agbaria, Mustafa, & Jabreen, 2015; Gharrah, 2016). These characteristics become a double obstacle in higher education - once in the study itself, when the nature of the learning in the schools does not prepare the Arab student for the skills required in the higher studies, and once again with the expectations of the students and the lecturers (Arar, 2016).

Rationale of the current research

In conclusion, social anxiety is an excessive fear of situations requiring that social anxiety leads to a significant increase in suicidal intentions among sufferers.

Arab Israeli population

The Arab population in Israel is, at the same time, a numerical minority and a sociological minority. They are a sociological minority because this is a population sector that is not represented in the political elite. At the same time, they are not represented in the military elite nor in the country's economic elite. Therefore, they are deprived of the national dominant group. The Arab population was left with no infrastructure for the creation and nourishment of Arab culture and without channels for the Arab mother culture. The first channel for the Arab world was not opened until after the 1967 war and after the opening of the borders when additional channels were opened following the peace agreements (Abu Asbeh, 2007).

Today, according to the Central Bureau of Statistics, the Palestinian Arab population comprises 21% of the Israeli population. The group is divided as follows: Moslems (70%), Christians (21%) and Druze (9%) (CBS, 2018). While they still suffer from policies of discrimination, as well as social control

a doubt, this is an innovative and unique study due to its unique model, which is characterized by special social-emotional, educational, systemic and political aspects. Due to the uniqueness of the student population of colleges for teacher's education, it is important to investigate the subject of social anxiety (including its subtypes) and its relationship with these aspects, while relating to the Israeli educational system.

It is important to note that teaching students will constitute the future teacher population in primary and high schools; therefore, it is interesting to examine their levels of social anxiety and the implications of these levels on their performance during their future vocational and school training process. At the same time, special attention needs to be given to intervention programs aimed at reducing these levels of social anxiety and enabling an optimal absorption the future Palestinian Arab minority teachers in Israel.

Methodology

Objective and hypotheses of the study

social interaction. Social anxiety is one of the most common social disorders in child and adolescent populations. Most of the studies conducted on social anxiety used models of adults in both American and European populations. There are consequently few studies of Palestinian Arab student teachers in Israeli society, and this is what prompted us to carry out the current study. Furthermore, the research literature demonstrates that there is a link between social anxiety and a range of social-emotional and educational aspects which attest to the negative ramifications of this disorder for various domains in life. Individuals with this problem therefore need treatment in order to improve their adjustment to their natural environment.

In this current study, we choose a sample of Palestinian Arab minority in Israel student teachers from academic colleges for teacher education. This is a multicultural minority that includes students of education with a diverse ethnic-religious background (Muslims, Christians and Druze) and undergoes a process of socialization that includes a variety of difficulties and pressures that characterize the Israeli educational system in general and the Arab education system in particular. Without

2. There are positive correlations between specific social anxiety and generalized social anxiety and between social fear, social avoidance and depression, and negative correlations between them and motivation for learning, self-esteem and perceived social and family support.

3. There are differences between student teachers with specific social anxiety and those with generalized social anxiety based on the demographic variables of gender, age, study track, work, family status, income level and religious-ethnic background.

4. Student teachers with specific social anxiety will demonstrate lower levels of social anxiety, social fear, social avoidance and depression and higher levels of motivation for learning, self-esteem and perceived social and family support than student teachers with generalized social anxiety.

5. There are correlations between levels of social anxiety (specific and generalized) and between levels of depression, self-esteem, motivation for learning and

The uncertainty surrounding the definition of the term "social anxiety" (particularly generalized social anxiety), the epidemiology and psychopathology of this disorder and its subtypes, both specific and generalized, as well as the lack of identification of the demographic, social-emotional and educational differences among persons with specific and generalized social anxiety led to this study.

This study is unique in its sampling because most of the studies conducted on this topic used clinical samples of adults and adolescents outside the educational framework, whereas this one selected a sample of student teachers from various places and cultures from Arab minority in the north of Israel. In other words, since this is a topic which has not been studied in Israeli colleges or among student teachers from Arab minority in Israel, it is therefore an innovation in this area. Its results have caused the researchers to discuss the ramifications of the above-mentioned aspects of the student-teacher educational environment. The hypotheses of this study are therefore as follows:

1. There are more student teachers with specific social anxiety than with generalized social anxiety.

Retraining and continuing education	50	9.2%
Conditional	76	14%
Pre-academic preparatory program	49	9%
Graduate	63	11.6%
Specialty		
English	92	29.1%
Mathematics	55	17.4%
Arabic	18	5.7%
Special education	36	11.4%
Sciences	58	18.4%
Early childhood	57	
Academic year		
Year 1	118	42.6%
Year 2	59	21.3%
Year 3	71	25.6%
Year 4	29	10.3%

Study tools

The questionnaires given to the participants were as follows:

a. *Profile and background data*: This questionnaire contains some demographic background variables relating to the perceived social and family support.

Participants

The 543 participants (Males=44; Females=495) in the study are Arab student teachers from teacher education colleges in north Israel enrolled in different tracks: pre-academic preparatory studies, conditional, regular track, graduate and vocational training and continuing studies from various departments (Arabic, English, mathematics, early childhood and special education). All the participants are native Arabic speakers and a large majority are studying for a bachelor's degree. They were selected by the researchers in a random cluster sampling. The sample consists of 543 student teachers. Table 1 presents the demographic characteristics of the sample.

Table 1: Personal demographic characteristics of the sample (N=543).

Variable	**Number of subjects**	**%**
Study framework		
Regular	305	56.2%

fear) was 0.91 while the reliability of the second (social avoidance) was 0.89.

c. *Beck Depression Inventory – ("BDI")* (Beck et al., 1961): This is one of the most widely used tools for measuring the severity of depression. Developed by Aaron Beck, the creator of the cognitive therapy approach, it is based on a multiple-choice questionnaire consisting of 21 questions which are self-reported by the subject. The answers were assessed using the Likert scale from 0 to 3. For example, "I don't cry any more than usual" or "I don't have any thoughts of killing myself". The BDI version used today was intended for subjects aged 13 and up and contains symptoms of depression such as hopelessness and irritability, feelings of guilt and punishment, tiredness, weight loss, loss of interest in sex. The internal reliability test of this questionnaire found that Cronbach's alpha = 0.77.

d. *Motivation for Learning Questionnaire:* The questionnaire consists of 15 participants such as gender, age, academic year, study track.

b. *Liebowitz Social Anxiety Scale - ("LSAS") (*Liebowitz, 1987): The questionnaire was designed to assess social anxiety and it contains two measures: social fear and social avoidance of social situations. It contains 24 items (13 of which describe performance situations and 11 which describe social interaction situations). Each statement of fear/anxiety is scored separately on a scale from 0 (none) to 4 (severe) and social avoidance on a scale from 0 (never) to 4 (usually). For example, "going to a party" or "delivering a speech in public". The higher the score, the greater the degree of the respondent's social anxiety. The final grade will be calculated as an average of the subject's responses. The internal reliability test of the LSAS found that Cronbach's alpha = 0.94. The internal reliability of the two components of this questionnaire was also tested and it was found that the reliability of the first (social

self-esteem. The participants are asked to express their agreement with statements, without stopping, on a Likert scale from 1 to 4 where 1 is "strongly agree" and 4 is "strongly disagree". For example, "I feel I have a number of positive qualities" or "I wish I had more self-esteem". An analysis of the questionnaire presents two elements: positive self-esteem and negative self-esteem. It is important to note that the scale was reversed for items 3, 5, 8, 9 and 10 in this questionnaire. The internal reliability test of this questionnaire found that Cronbach's alpha = 0.76.

f. *The Multidimensional Scale of Perceived Social Support* ("MSPSS") (Zimet, Dahlem, Zimet, & Farley, 1988): This is a questionnaire comprising 12 statements which examine the subjective perception of the respondents regarding the degree of social and family support available to them from three sources – family (includes items 3, 4 and 8), friends (includes items 6, 7 and 9) and significant others (includes items taken from the Motivated Strategies for Learning Questionnaire ("MSLQ") which was developed by Pintrick et al., 1991. The answers were assessed using a 7-point Likert scale where 1 is "not at all true of me" while 7 is "very true of me". For example, "I am very interested in what we are learning in this class" or "It is very important for me to understand what is being taught in this class". The questionnaire measures the motivational beliefs relating to learning in a particular class and also examines the learning strategies of the students in that class. The objective of the questionnaire is to assess the motivation for learning of the students. The questionnaire measures three elements: intrinsic achievement orientation, task value and critical thinking. The internal reliability test of this questionnaire found that Cronbach's alpha = 0.88.

e. *Rosenberg Self-Esteem Questionnaire ("RSEQ")* (Rosenberg, 1965): This is a ten-item scale which measures

students they were sent to the researchers for subsequent encoding and analysis. For ethical reasons, it was explained to the participants that this study is completely anonymous, and that the data they provided would be used for this specific study and would not sent to any third parties.

Findings

In order to examine the differences in social anxiety based on the age variable, the subjects were divided into two groups. (A) “Young” student teachers born in and after 1990. (B) "Adult" students born before 1990. Palestinian Arab minority student teachers in Israel born before 1990 are considered young because they studied during the first years of their careers, while others born after 1990 are perceived as adults because they constitute the population of student teachers who are in their last years of training, especially those who are in the third year or induction year. A test was conducted on independent samples, as presented in Table 3.

Table 2: Comparison between young and adult students at the social anxiety level (N=543).

Area	Group	N	Mean	Standard deviation	t

items 1, 2, 5 and 10). Use of this questionnaire produces three measures based on the averages for each item, so that the scores range between 1 and 7. The higher the score, the greater the perceived degree of social and family support. The answers were assessed on a 7-item scale where 1 is “Extremely applicable” and 7 is “Extremely inapplicable”. For example, “my family really tries to help me” or “there is a person close to me who cares about my feelings”. The internal reliability test of this questionnaire found that Cronbach’s alpha = 0.91.

Procedure

The researchers contacted Palestinian Arab minority student teachers in Israel, explained the goals and objectives of the study and asked if they would respond to the questionnaires. The data were collected by the researchers while they were in college but not during lecture times. They explained to the participants how to fill in the questionnaires without interfering in or influencing their responses. After the questionnaires had been filled in by the

anxiety received grades higher than the mean and a 1-1.5 standard deviation, while students with generalized social anxiety received grades higher than the mean and a 1.5 standard deviation, as illustrated in Table 3.

Social anxiety	Adult	13 1	0.88	0.53	2.*51
	Young	39 2	1	0.46	

$(*p < 0.05)$

Table 3: Breakdown of levels of social anxiety among the three study categories (N = 543).

Category	Number	Percentage
Student teachers without social anxiety	454	83.4%
Student teachers with specific social anxiety	55	10.1%
Student teachers with generalized social anxiety	34	6.3%

The findings of the study have been described based on the various hypotheses, as follows:

The findings presented in Table 2 indicate a statistically significant difference between the mean values in the social anxiety dimension $(t(521) = 2.51,\ p < 0.05)$. The social anxiety mean value among the young subjects was found to be higher than the social anxiety mean value among the adult subjects. The participants in the study were also divided into two groups in order to examine the social anxiety differences based on the gender variable: men student teachers (N=44) and women student teachers (N=495). The findings indicated that there is no difference in the social anxiety level mean value based on this variable.

The subjects were also divided into three categories at the social anxiety level based on a quantitative criterion for the Liebowitz Social Anxiety Scale. Students with no social anxiety received grades below the mean and standard deviation. Students with specific social

social anxiety and between various social-emotional and educational aspects (N=89).

	Social Fear	Social Avoidance	Depression	M. for L.	S.E.	P. S. and Fr. Sup
Specific social anxiety	0.36**	0.195	0.107	-0.059	-0.130	-0.272*
Generalized social anxiety	0.8***23	0.771***	0.386*	0.190	0.111	0.059

$(***p < 0.001)$ $(**p < 0.01)$ $(*p < 0.05)$

The findings presented in Table 5 reveal the following:

1. A statistically significant positive link between the specific social anxiety of the subject and his social fear $(r_p = 0.36, \quad p < 0.01)$ so that the greater the specific social anxiety of the subject, the greater his social fear.

2. A statistically significant negative link between the specific social anxiety of the subject and between his perceived social and family support $(r_p = -0.272, \quad p < 0.05)$ so that the greater the perceived social and family support of the subject, the lower his specific social anxiety.

First hypothesis: there are more student teachers with specific social anxiety than with generalized social anxiety.

The study's findings as illustrated in Table 4 indicate that the category of student teachers with specific social anxiety (N=55; 10.1%) was more prevalent than the category of student teachers with generalized social anxiety (N=34; 6.3%), meaning that the first hypothesis of the study has been substantiated.

Second hypothesis: there are positive links between specific social anxiety and generalized social anxiety and social fear, social avoidance and depression, and negative links between them and motivation for learning, self-esteem and perceived social and family support.

The correlations were tested by Pearson's correlation coefficient, as described in Table 4:

Table 4: The correlation coefficients between specific and generalized

with specific social anxiety and student teachers with generalized social anxiety based on the demographic variables: gender, age, study track, work, marital status, income level and religious-ethnic background.

The differences between specific social anxiety and generalized social anxiety were examined in relation to various demographic variables using Mann-Whitney tests on two independent samples (because the independent variable was categorical). The findings indicated a statistically significant difference between the two groups in the age dimension only. The findings indicate a statistically significant difference between the two groups of social anxiety $(z = -2.22,\ p < 0.05)$. The average age among student teachers with generalized social anxiety $(M = 24.78,\ SD = 5.24)$ was found to be higher than the average age among student teachers with specific social anxiety $(M = 23.12,\ SD = 3.70)$.

Furthermore, the differences between the averages of student teachers with specific social anxiety and the student

3. A statistically significant positive link between the high specific social anxiety of the subject and between his social fear level $(r_p = 0.823,\ p < 0.001)$ so that the higher the social anxiety of the subject, the higher his social fear level.
4. A statistically significant positive link between the generalized social anxiety of the subject and his social avoidance level $(r_p = 0.771,\ p < 0.001)$ so that the higher the generalized social anxiety of the subject, the higher his social avoidance level.
5. A statistically significant positive link between the generalized social anxiety of the subject and his depression level $(r_p = -0.386,\ p < 0.05)$ so that the higher the generalized social anxiety of the subject the higher his depression level. The second hypothesis was partly substantiated.

Third hypothesis: there are differences between student teachers

Table 5: Results of the t-tests conducted to examine the differences between generalized social anxiety and social anxiety in relation to the various social-emotional and educational aspects (N=89).

Aspect	Category	N	Mean	Standard deviation	t
Social anxiety	Generalized social anxiety	34	1.99	0.29	*** 8.677
	Specific social anxiety	55	1.55	0.06	
Social fear	Generalized social anxiety	34	2.05	0.30	*** 8.433
	Specific social anxiety	55	1.58	0.22	
Social avoidance	Generalized social anxiety	34	1.89	0.47	*** 4.329

teachers with generalized social anxiety were examined in relation to the other demographical variables. The differences were tested using t tests and F tests. The findings indicated that there are no differences between the two social anxiety groups in all the above variables. The third hypothesis was partly substantiated.

Fourth hypothesis: student teachers with specific social anxiety will demonstrate lower levels of social anxiety, social fear, social avoidance and depression and higher levels of motivation for learning, self-esteem and perceived social and family support than student teachers with generalized social anxiety.

T-tests using two independent samples were conducted on the differences between specific social anxiety and generalized social anxiety in relation to the social-emotional and educational aspects. The findings indicated a statistically significant difference between the two groups of social anxiety in only three dimensions (social anxiety, social fear and social avoidance), as presented in Table 5.

subjects with generalized social anxiety was found to be higher than the mean social avoidance level among the subjects with specific social anxiety.

Moreover, t-tests were conducted on the differences between the means of student teachers with generalized social anxiety and the student teachers with specific social anxiety in relation to the depression, motivation for learning, self-esteem and perceived social and family support variables. The findings indicated that there are no differences in all the above variables and dimensions. These findings partly substantiate the fourth hypothesis.

Fifth hypothesis: there are links between levels of social anxiety (specific and generalized) and between levels of depression, self-esteem, motivation for learning, and perceived social and family support.

Tests were conducted on percentage breakdowns and links between a two-dimensional breakdown of levels of social anxiety crossed with levels of depression, self- esteem, motivation for learning and perceived social and family support as described in Table 6.

Specific social anxiety	5 2	1.5 2	0.22

$(***p < 0.001)$

The findings presented in Table 5 reveal the following:

A statistically significant difference between the mean values in the social anxiety dimension $(t(87) = 8.677, \quad p < 0.001)$. The mean specific social anxiety among the subjects with generalized social anxiety was found to be higher than the mean social anxiety level among the subjects with specific social anxiety.

A statistically significant difference between the mean values in the social fear dimension $(t(87) = 8.433, \quad p < 0.001)$. The mean social fear level among the subjects with generalized social anxiety was found to be higher than the mean social fear level among the subjects with specific social anxiety.

A statistically significant difference between the mean values in the social avoidance dimension $(t(84) = 4.329, \quad p < 0.001)$. The mean social avoidance level among the

and self- esteem $(\chi^2(2)=1.972,\ p>0.05)$ and between levels of social anxiety and levels of perceived social and family support $(\chi^2(4)=3.383,\ p>0.05)$. The fifth hypothesis was partly substantiated.

Discussion and conclusions

Various epidemiological studies conducted on clinical samples of adults have attempted to find a solution to the problem of distinguishing between the characteristics of specific social anxiety and generalized social anxiety (Faravelli et al., 2000; Magee et al., 1996; Nagata et al., 2015; Pini et al., 1997; Wilson, & Rapee, 2005; Zubeidat et al., 2007). The researchers focused on diverse topics such as frequency, socio-demographic factors and comorbidity in order to investigate the differentiation between the characteristics of these subtypes. The findings of these researchers were varied and sometimes contradictory because of the use of diverse populations (adults versus adolescents and/or clinical versus normative), differing tools, varying methodological processes and criteria to differentiate between the two forms of social anxiety. It is important to note

Table 6: Breakdown of subjects by levels of depression, self-image, motivation for learning, perceived social and family support and social anxiety levels (N=543).

Various social-emotional and educational aspects and levels of social anxiety		N (%)	
		No anxiety	Specific social anxiety
Depression	No depression	(77) 418	(7.7) 4
	With depression	(6.6) 36	(2.4) 1
Self-esteem	Normal	(79) 429	(9.6) 5
	Low	(4.6) 25	(0.6) 3
Motivation for learning	High	(10.1) 55	(2.4) 1
	Normal	(63.5) 345	(7.7) 4
	Low	(9.9) 54	(0) 0
Perceived social and family support	High	(10.5) 57	(1.1) 6
	Average	(61.1) 332	(7.2) 39
	Low	(12) 65	(1.8) 1

$(**p<0.01)$

The findings in Table 6 indicated that there is a statistically significant link between levels of depression and levels of social anxiety $(\chi^2(2)=13.906,\ p<0.01)$, and a statistically significant association between levels of motivation for learning and social anxiety $(\chi^2(4)=14.014,\ p<0.01)$ while there are no statistically significant links between levels of social anxiety

gender. These findings are similar to the findings from various studies which reported higher levels of social anxiety among young people than among adults and no differences or no statistically significant differences in levels of social anxiety between men and women (Amies et al., 1983; Davidson et al., 1993; Magee et al., 1996; Myers et al., 1984; Weiller et al., 1996; Zubeidat et al., 2007). In this regard, Ranta et al., 2012, found that there are no gender differences in social anxiety among Finnish adolescents. There were more occurrences of specific and generalized social anxiety than those found in other studies (Olivares et al., 2004; Essau et al., 2000, Wittchen et al., 1999; Zubeidat et al., 2007) and this indicates that social anxiety and pressure are more widespread among Palestinian Arab minority student teachers in Israel. Nevertheless, as with the majority of the above-mentioned studies, the incidence of the group of student teachers with specific social anxiety was higher than the incidence of the group of student teachers with generalized social anxiety, which substantiates the first hypothesis of this study. In this context, Rabe-Jablonska et al., 2004, report that 7% of adolescents have generalized social anxiety compared with 17% who that in this study the researchers selected variables linked to the academic dynamic in order to distinguish between the two subtypes of social anxiety such as social fear, social avoidance, depression, self-esteem, motivation for learning and perceived social and family support. In addition, the proliferation of criteria and their flawed differentiation between specific social anxiety and generalized social anxiety in populations of adults and adolescents (normative and clinical), the few studies of populations of student teachers and the use of different methodological processes of the above-mentioned researchers, prompted the researchers to define their own clear criterion.

Use of this criterion enabled the identification of 89 (16.4%) student teachers with social anxiety, of whom 55 (10.1%) comprised groups of student teachers with specific social anxiety, while the remaining 34 (6.3%) were defined as student teachers with generalized social anxiety. The first findings indicated that the mean of social anxiety among the young subjects was found to be higher than the mean of social anxiety among adult subjects, while no difference was found in the mean of social anxiety based on

Kowalski, 1995), and a statistically significant positive correlation between social anxiety and social fear and social avoidance (Bjornsson et al., 2011; Zubeidat et al., 2007). The findings also pointed to a statistically significant positive correlation between generalized social anxiety and social fear, social avoidance and depression. In other words, the higher the level of social fear, social avoidance and depression, the higher the level of generalized social anxiety. In this context, various studies conducted on adult populations pointed to a statistically significant correlation between social anxiety and depression (Faravelli et al., 2000; Pini et al., 1997; Wilson, & Rapee, 2005), and a statistically significant correlation between social anxiety and social fear and social avoidance (Bjornsson et al., 2011; Zubeidat et al., 2007). Moreover, it was found that social anxiety disorder is positively linked to suicidal intentions among those with the disorder (Bjornsson et al., 2011). It was also found that the problems most overlapping with social anxiety are other anxieties, social fear and social avoidance of social situations (Faravelli et al., 2000; Magee et al., 1996).

have specific social anxiety, while other studies (Furmark et al., 2000; Stein et al., 2000) of adults found that specific social anxiety was significantly more widespread than generalized social anxiety.

In contrast, a test was conducted on the second hypothesis which argues that there are statistically significant positive correlations between specific and generalized social anxiety and social fear, social avoidance and depression and statistically significant negative correlations between them and motivation for learning, self-esteem and perceived social and family support. The findings pointed to a statistically significant positive correlation between specific social anxiety and social fear, and a statistically significant negative correlation between specific social anxiety and perceived social and family support. In other words, the higher the level of social fear the higher the level of the student's specific social anxiety, while the lower the level of perceived social and family support, the higher his level of specific social anxiety. This finding corresponds with previous findings which pointed to a negative correlation between social anxiety and low perceived social support and feelings of inferiority (Leary, &

anxiety. In any event, most researchers (Heimberg et al., 1993; Hofmann et al., 1999; Ngata et al., 2015; Olivares et al., 2004) who described this topic used adult populations and noted that the demographic variables do not differentiate between the two forms of social anxiety in a statistically significant manner, a conclusion which corresponds with most of the findings of the third hypothesis because of the lack of statistically significant differences between specific and generalized social anxiety in the demographic variables gender, work, marital status, study speciality, academic year, study framework, income level and religious-ethnic background.

The study's findings relating to the fourth hypothesis indicated that there is a statistically significant difference between the two categories of social anxiety in the social anxiety, social fear and social avoidance aspects only of all the social-emotional and educational aspects measured. This finding emphasizes the finding of Rapee, & Heimberg, 1997, which notes that the essential nature of specific and generalized social anxiety is more similar than different. This study maintains that there are no statistically

A test was conducted on the third hypothesis in connection with the differences between specific social anxiety and generalized social anxiety in various demographic variables. The findings of this study indicated that there is a statistically significant difference between the two groups only in the age variable where the average age among student teachers with generalized social anxiety was found to be higher than the mean age among student teachers with specific social anxiety. The scientific literature contains a few studies which attempted to distinguish between categories of social anxiety on the basis of demographic variables. Kessler et al., 1994, argued that specific and generalized social anxiety are not clearly distinguishable, whereas Rapee, & Heimberg, 1997, argue in theoretical cognitive-behavioural models that the essential nature of these two categories of specific social anxiety is similar. These researchers believe that these two forms of specific social anxiety are more similar than different, which supports the findings of this study. However, these are general arguments and this indicates that there is a need for future studies in order to differentiate between these two categories of social

in this study are similar to the findings of the above-mentioned studies, which partly substantiate this hypothesis.

The findings of the study relating to the fifth hypothesis indicated that there is a statistically significant correlation between levels of depression and levels of social anxiety (specific and generalized), a statistically significant correlation between levels of motivation for learning and social anxiety, while there are no statistically significant correlations between levels of social anxiety and levels of self-esteem and between social anxiety and levels of perceived social and family support. These findings are partly similar to various study findings which reported statistically significant correlations between social anxiety and other anxieties (Evans et al., 2016; Faravelli et al, 2000; Magee et al, 1996) and depression (Faravelli et al, 2000; Wilson, & Rapee, 2005; Pini et al, 1997; Koyuncu et al., 2015). In addition, previous findings reported that there is a statistically significant correlation between motivation for learning and levels of social anxiety among student teachers (Aggarwal, 2004; Elliot, & McGregor, 2001; Thompson, & Perry, 2005; Tseng, & Tsay, 2010).

significant differences between these two categories in terms of depression, motivation for learning, self-esteem and perceived social and family support, while student teachers with generalized social anxiety suffer from more levels of social anxiety, social fear and social avoidance than student teachers with specific social anxiety. As has been observed, the aspects linked to interaction and social performance situations are those which distinguish between student teachers with specific social anxiety and generalized social anxiety. These findings are similar to those of various researchers (Alden, & Mellings, 2004; Ballesteros, & Conde, 1999; Evans et al., 2016; Gelernter et al., 1992; Heimberg et al., 1993; Mannuzza et al., 1995; Yap et al., 2016) which revealed that people with generalized social anxiety report higher levels of anxiety in social interaction situations, and greater social fear and social avoidance of social situations that people with specific social anxiety. These findings could be the result of a lack of accuracy in the definition of the generalized type of social anxiety and the failure of DSM-5 to identify the basic characteristics, as noted in the introduction. Therefore, the findings of the study linked to the fourth hypothesis

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In conclusion, future studies will attempt to conduct in-depth investigations of the explanation for social anxiety and its subtypes, specific and generalized, in order to acquire a deeper understanding of this phenomenon among the student teachers who are destined to become the teachers of tomorrow.

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