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Translation and Standardization of the Social Anxiety Questionnaire (SAQ)

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Abstract

Social anxiety refers to an intense fear of evaluation from others in social situations, which in severe cases results in Social Anxiety Disorder (SAD) or Social Phobia. The prevalence rate of Social Anxiety is rapidly increasing. So, there is a significant need to study this area and to have valid instruments that can evaluate Social Anxiety and related problems. In Pakistan, clinicians may at times struggle to assess several clinical phenomena as almost all measures are in English language, which a large majority does not understand. Therefore, the present study was designed to translate and standardize the Social Anxiety Questionnaire (SAQ) by Caballo et al. (2010) into Urdu Language. The research was done in two phases. The first phase included translation of the scale to Urdu language through the standard procedure of Back translation. The second phase included the standardization of the scale. Exploratory Factor Analysis was done to assess construct validity. Internal consistency was assessed through Cronbach's Alpha (0.96). The results showed strong reliability and validity of SAQ-Urdu.

Keywords: Exploratory Factor Analysis, Internal Reliability, Social Anxiety Disorder, Social Anxiety Questionnaire, Urdu Translation

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Introduction

According to American Psychological Association (2018), "Social Anxiety is a fear of social situations in which embarrassment may occur (e.g., making conversation, meeting strangers, dating) or there is a risk of being negatively evaluated by others (e.g., seen as stupid, weak, or anxious). Social anxiety involves apprehensiveness about one's social status, role, and behavior. When the anxiety causes an individual significant distress or impairment in functioning, a diagnosis of social phobia may be warranted."

The prevalence rate of Social anxiety disorder is 12% in United States (Kessler et al., 2005). In Pakistan, a large number of students report being anxious and fearful when socially interacting with others or performing in public (Ahmad & Bano, 2013). Jefferies and Ungar (2020) assessed the prevalence of social anxiety in seven countries (Thailand, USA, Brazil, Vietnam, China, Russia and Indonesia). The results revealed an increase in the global prevalence of social anxiety as compared to previous researches.

Social anxiety encompasses two primary types: Social Interaction Anxiety, characterized by an excessive fear of interacting with others or groups, and Performance Anxiety, involving the fear of performing activities in front of others (Hughes et al., 2006).

Social anxiety is commonly explained by a model given by Clark and Wells in 1995. According to this model, individuals with social anxiety strongly believe in making a good impression to other people. However, they have another belief that they will be unable to do so. These unconditional beliefs lead to assumptions. These individuals

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develop conditional beliefs about how they behave in front of others and they form high expectations from themselves. When the person goes into a social situation, these negative beliefs get activated. They use their internally generated information to evaluate how they appear to another person. A sense of threat spreads through the person, which leads to different cognitive, affective and behavioral responses. Individuals often use safety behaviors to prevent the negative consequences of the situation. However, these safety behaviors strengthen the negative beliefs and increase social anxiety.

The formal assessment methods used to measure social anxiety include self-report tests, diagnostic interview and clinician-administered instruments (Letamendi et al., 2009). Self-rating methods are most commonly used as they offer time efficiency and reduced errors compared to other assessment methods. They are also very cost friendly as they require minimum training. (Letamendi et al., 2009).

Many self-report scales, such as the Social Phobia Inventory, Social Interaction Anxiety Scale, and Liebowitz Social Anxiety Scale, are commonly used to assess social anxiety disorder. However, these scales often exhibit limitations, including their non-empirical item development, inconsistent factorial structures, and a lack of representation for certain significant social situations. Additionally, some scales have been developed with small sample sizes, limiting their generalizability.

Social Anxiety Questionnaire (SAQ) resolves many of these issues. The items on SAQ were empirically developed. SAQ has been validated on a very large sample and also in different cultures (Caballo et al., 2012). The development of the SAQ included 24,423 participants and more than 100 researchers. It also resolves the problem of inconsistency between factor structures as all the researches have shown the same five-factor solution (Caballo et al., 2012). SAQ consists of 5 dimensions: Speaking in public/ talking with people in authority, Interactions with the opposite sex, Assertive expression of annoyance, disgust or displeasure, Criticism and embarrassment and Interactions with strangers. The items are ranked on a 5-point Likert Scale (Caballo et al., 2012). Psychometric properties of SAQ have been identified in clinical as well as non-clinical samples. The results have shown good psychometric properties (Caballo et al., 2015). SAQ was originally developed in Spanish. It has been translated into English, Persian and French. It has adequate validity and reliability in all these languages (Bravo et al., 2019; Caballo et al., 2012; Mosarazee et al., 2020). Movahedian et al. (2022) conducted SAQ in a sample of university students in Iran, the results showed a good reliability (0.88).

Translating and standardizing the SAQ into Urdu, the national language of Pakistan, is a significant contribution to address language barriers and enhance assessment validity. Leveraging the scale's established psychometric properties in various countries, this effort will be considered valuable for the Pakistani context.

Present study aimed to translate Social Anxiety Questionnaire in Urdu and to establish the initial validity and reliability of Urdu version of SAQ,

Method

The method was divided into two phases. In the Phase I of this study, the Social Anxiety Questionnaire (SAQ) was translated in Urdu Language. The method of Back translation was used. After taking permission from the IRB and the author of the scale, the research began.

The standard back translation procedure was employed to translate SAQ into Urdu. At first the English version of SAQ was given to 3 three bilingual translators who were proficient in English and Urdu to translate the scale from English to Urdu. All translators had completed their post-graduation. The researchers reviewed the 3 translations for the grammar, clarity and a sense of meaning with original version. The

version with highest score in these three categories was selected.

Subsequently, three bilingual translators who were proficient in Urdu and English translated the items from Urdu to English. All the translators had a post graduate degree. This was a blind translation, as the translators had no prior knowledge of the original questionnaire. The resulting translations were compared with the original English questionnaire to ensure content consistency, revealing discrepancies in items 3, 7, and 25. These items were retranslated and reviewed. The final version of SAQ-Urdu was selected on the basis of the highest scores on the three categories (grammar, clarity and sense of meaning).

In Phase II of the study, the standardization of the SAQ-Urdu version encompassed three steps. In the first step, 350 participants, including both men and women aged 18-45, were purposively selected, with permissions obtained from relevant institutes which included one public university, one private university, one private clinic, one public clinic and psychiatric departments of two public hospitals. The sample size was determined through g-power analysis with effect size and participants were selected through purposive sampling techniques. 300 participants were chosen from general population whereas 50 participants were selected from clinical population. Every clinical participant had a prior diagnosis of Social Anxiety Disorder according to the DSM-5-TR. A part of clinical population was added in this study to see the difference of scoring in clinical and non-clinical population as seen in the methodologies of other similar articles (Caballo et al., 2012; Wagner et al., 2017).

Participants were informed about the study's nature and their rights. Demographic sheets and the SAQ-Urdu version were administered, and data was analyzed using SPSS. Firstly, data was screened and descriptive statistics were run. The second step involved establishing construct validity through exploratory factor analysis. The third step assessed internal consistency using Cronbach's Alpha.

Ethical Considerations

Permissions from authors, Institutional Review Board and institutions were taken before conducting the study. The participants were provided with information regarding the study's objectives and nature. Informed consent was taken from them. The privacy and confidentiality of the participants was maintained and all their queries were catered.

Results

Table 1 states that majorly females were participants for this study (Clinical=82%; Non-Clinical=67%). A majority of participants were unmarried (81%) and unemployed (80%). The mean age of both non-clinical as well as clinical participants was 24 years. The minimum monthly family income of participants was 20000 whereas the maximum monthly family income was 11000000. The mode value of Monthly family income was 100000.

Exploratory Factor Analysis

Exploratory Factor Analysis was done to check the construct validity of SAQ-Urdu and to explore the factor structure of the scale. Direct Oblimin Rotation method was selected which is a type of oblique rotation. Factor correlation matrix showed values above 0.3, which indicates that oblique rotation was best suited as the factors had correlation among them. Kaiser’s Criterion was considered for the extraction because as research suggests, it can be accurate when the sample size exceeds 250. In this study, the sample size was 350 which fulfilled the Kaiser’s Criterion requirement.

Table 1

Frequency and Percentage of Demographics of Clinical, Non-Clinical and Total Sample (N=350)

Variables	Non-Clinical (*N*=300)) *F(%)*	Clinical (*N*=50) *F(%)*	Total (*N*=350) *F(%)*
Gender			
Males	100(33.3)	8(15.7)	108(30.9)
Females	200(66.7)	42(82.4)	242 (69.1)
Marital Status			
Unmarried	248(82.7)	37(72.5)	285(81.4)
Married	51(17.0)	13(25.5)	64(18.3)
Separation	1(0.3)		1(0.3)
Education			
Primary	2(0.7)		2(0.6)
Matric/O-levels	6(2.0)		6(1.7)
Intermediate/A-Levels	14(4.7)		14(4.0)
Undergraduate	193(64.3)	25(49.0)	218(62.3)
Graduate	75(25.0)	16(31.4)	91(26)
Post Graduate	10(3.3)	8(15.7)	18(5.1)
Family System			
Nuclear	225(75)	38(74.5)	263(75.1)
Joint	75(25)	12(23.5)	87(24.9)
Medical Illness			
Yes	14(4.7)	2(3.9)	16(4.6)
No	286(95.3)	48(94.1)	334(95.4)
Psychological Illness			
Yes	-	50(100)	50(14.3)
Social Anxiety Disorder	-	50(100)	50(14.3)
No	300(100)	-	300(85.7)
Addiction			
Yes	3(1)	-	3(0.9)
No	297(99)	50(100)	347(99.1)

Table 2

Kaiser-Meyer-Olkin Measure and Bartlett's Test Results (N=350)

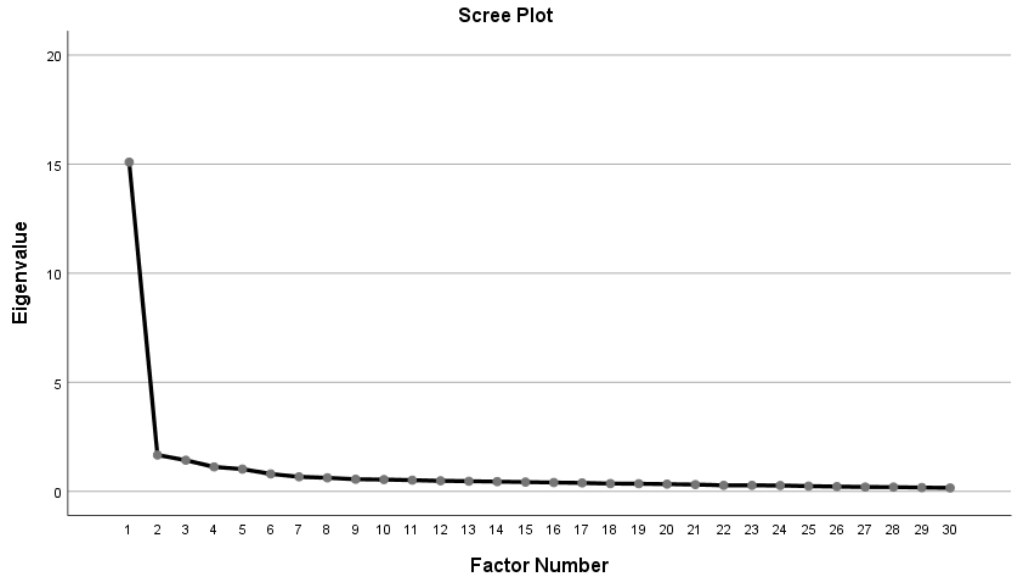
KMO sampling	Bartlett's test of Sphericity		
	Approx. Chi-Square	df	*p*
0.96	7528.71	435	0.00

Note. KMO= Kaiser-Meyer-Olkin Measure*, df*= degree of freedom*, p*=Significance value

The result of the above table proves the suitability of sample for factor analysis. As KMO value is 0.96 which is close to 1 and Bartlett's test value is significant (p<.001).

Figure 1

Scree Plot for Factor Structure of SAQ Urdu (n=350)



The above Scree plot exhibits the Eigen values and the retained number of factors. It was used to determine the final number of factors.

Table 3

Eigen Values, Percentage of Variance and Cumulative Percentage (N=350)

Factor Number	Eigen Values	% of Variance	Cumulative %
Factor 1	15.09	50.31	50.30
Factor 2	1.67	5.55	55.86
Factor 3	1.43	4.76	60.62
Factor 4	1.12	3.74	64.36
Factor 5	1.02	3.40	67.76

The factors with Eigen values above 1 were included. The cumulative variance for five-factor structure was 67%.

Table 4

Item loading for Exploratory Factor Analysis with Direct Oblimin of SAQ-Urdu . (N=350)

Sr. No.	Item No.	Item Description	Factor 1	Factor 2	Factor 3	Factor 4	Factor 5
1	10	Making new friends	.028	-.051	-.043	**.701**	.085
2	13	Maintaining conversation	.098	.000	.094	**.778**	.082
3	15	Greeting strangers	-.013	-.037	-.018	**.686**	.109
4	17	Talking to strangers	.022	.155	-.018	**.825**	-.103
5	19	Eye contact with new people	.036	.000	-.020	**.696**	.040
6	22	Going to an event with one acquaintance	-.078	.226	-.144	**.656**	-.058
7	3	Public speaking	**.467**	-.002	-.134	.244	.090
8	7	Meeting with superiors	**.406**	.184	-.136	.123	.143
9	12	Speaking up	**.479**	.145	.059	.338	-.005
10	18	Being questioned	**.675**	.168	-.048	.015	.135
11	25	Speaking on behalf of group	**.333**	.193	-.108	.202	.141
12	29	Talking to superior	**.601**	.163	-.091	.070	.123
13	4	Asking someone out	-.084	.269	**-.624**	-.057	.009
14	6	Watched by attractive people	.207	-.041	**-.464**	.069	.233
15	20	Asked out	.163	-.041	**-.429**	.070	.273
16	23	Starting conversation with attractive person	.259	.022	**-.512**	.235	-.072
17	27	Holding hand	-.076	.029	**-.787**	.036	.065
18	30	Express interest to attractive person	.190	.009	**-.533**	.102	.024
19	1	Ignored	.056	**.597**	.062	.070	.133
20	8	One-sided conversation	-.040	**.687**	-.027	.018	.104
21	16	Teased in public	-.038	**.780**	-.014	.104	-.052
22	21	Mistake in public	.107	**.637**	-.105	.029	.018
23	24	Being reprimanded	.218	**.559**	-.002	-.030	.033
24	28	Being criticized	.015	**.670**	-.093	.021	.020
25	2	Requesting neighbor	-.056	.186	-.208	.118	**.444**
26	5	Complaining to waiter	-.048	-.001	-.159	.244	**.516**
27	9	Refusing	.137	.003	.109	.066	**.761**
28	11	Expressing hurt	.005	.099	-.202	.101	**.495**

Sr. No.	Item No.	Item Description	Factor 1	Factor 2	Factor 3	Factor 4	Factor 5
29	14	Expressing annoyance	-.046	.223	-.022	.065	**.610**
30	26	Addressing bothersome behavior	.191	.073	-.156	-.034	**.570**

Note. Highest factor loadings of each item are shown in bold.

Table 4 shows that 5 factors were extracted during exploratory factor analysis.

Table 5

Descriptive Characteristics of all Factors (N=350)

Factors	Factor Description	Items	*M*	*SD*	Min	Max
Factor 1	Speaking in public/ Talking with people in authority	3, 7, 12, 18, 25, 29	17.41	6.94	6	30
Factor 2	Criticism and Embarrassment	1, 8 ,16, 21, 24, 28	17.61	6.64	6	30
Factor 3	Interactions with the opposite sex	4, 6, 20, 23, 27, 30	17.85	6.75	6	30
Factor 4	Interactions with strangers	10, 13, 15, 17, 19, 22	16.97	6.78	6	30
Factor 5	Assertive expression of annoyance, disgust or displeasure	2, 5, 9, 11, 14, 26	17.30	7.07	6	30

Note. *M*= Mean, *SD*= Standard deviation

Table 5 shows that 6 items were extracted in each factor. They were the same as the original scale. Factor 3, “Interactions with the opposite sex” had the topmost mean score (17.85).

Table 6

Correlation between Factor 1 items and Means of all Factors (N=350)

Variable	1	2	3	4	5	6	7	8	9	10	11
Item 3	-	.56***	.67***	.67***	.56***	.63***	**.82****	.52***	.59***	.62***	.60***
Item 7	-	-	.57***	.66***	.55***	.73***	**.81****	.61***	.63***	.64***	.65***
Item 12	-	-	-	.68***	.61***	.65***	**.83****	.54***	.49***	.65***	.56***
Item 18	-	-	-	-	.71***	.74***	**.89****	.59***	.60***	.62***	.65***
Item 25	-	-	-	-	-	.62***	**.81****	.61***	.62***	.66***	.65***
Item 29	-	-	-	-	-	-	**.87****	.62***	.62***	.65***	.66***
F1	-	-	-	-	-	-	-	.69***	.71***	.76***	.75***
F2	-	-	-	-	-	-	-	-	.66***	.65***	.67***
F3	-	-	-	-	-	-	-	-	-	.66***	.74***
F4	-	-	-	-	-	-	-	-	-	-	.71***
F5	-	-	-	-	-	-	-	-	-	-	-

Note. F1= Factor 1, F2= Factor 2, F3=Factor 3, F4=Factor 4, F5=Factor 5
**p<.01, ***p<.001

Table 6 shows that all the items included in Factor 1 had the highest correlations with the mean score of Factor 1. This supports our results by showing that the items were in the correct Factor.

Table 7

Means and Standard Deviations on SAQ-Urdu and SAQ-30 (N=350)

	SAQ-Urdu				**Original Scale (SAQ-30)**			
Factor No.	**Males (*N*=108)**		**Females (*N*=242)**		**Males (*N*=5060)**		**Females (*N*=10,601)**	
	M	(SD)	M	(SD)	M	(SD)	M	(SD)
Factor 1	15.77	(6.26)	18.14	(7.12)	16.3	(4.78)	19.68	(5.04)
Factor 2	14.84	(5.69)	18.85	(6.66)	18.00	(4.33)	19.51	(4.19)
Factor 3	16.42	(6.28)	18.48	(6.87)	17.04	(4.96)	19.29	(5.00)
Factor 4	15.53	(6.44)	17.62	(6.84)	13.17	(4.19)	14.11	(4.55)
Factor 5	15.74	(6.47)	18.00	(7.24)	15.74	(4.26)	17.14	(4.41)
SAQTotal	78.36	(26.2)	91.18	(30.36)	80.22	(16.7)	89.67	(17.62)

The data from this study was compared with the Means and Standard Deviations of original questionnaire provided by Caballo et al. (2010). In both studies the highest

mean scores that men got were on Factor 4 (Interactions with the opposite sex). Overall, women had higher Social anxiety.

Table 8

Internal Consistency of the Social Anxiety Questionnaire-Urdu (SAQ-Urdu) and the Original Scale (SAQ-30) (N=350)

Factors	Number of items	(SAQ-Urdu) α	(SAQ-30 English version) α
Factors Total	30	0.96	0.91
Factor 1	6	0.91	0.92
Factor 2	6	0.88	0.80
Factor 3	6	0.87	0.85
Factor 4	6	0.91	0.84
Factor 5	6	0.89	0.76

Note. α=Cronbach alpha coefficient

The results show that the alpha coefficient for the total factor structure of SAQ-Urdu was 0.96. Both versions of the questionnaire have excellent reliability.

Discussion

Present research aimed at translating and standardizing a social anxiety questionnaire for the Pakistani population, addressing the significant impact of social anxiety on daily life and well-being. The increasing prevalence of SAD, as highlighted by Wittchen et al. (2011) highlights the urgency of better understanding, assessing, and treating SAD.

The research was divided into two phases. The first phase included the translation of SAQ in Urdu Language through the method of Back translation. Back-translation is the most commonly used quality assessment tool in international and cross-cultural social research (Tyupa, 2011). In the second phase, construct validity and internal consistency was assessed to ensure the authenticity of scale.

Exploratory Factor Analysis (EFA) was carried out to check the factor structure of SAQ-Urdu. The assumptions were fulfilled for EFA as the Kaiser-Meyer-Olkin (KMO) was 0.96 indicating a compact correlation pattern suitable for reliable factor analysis. Additionally, the Barlett's test of sphericity confirmed the suitability with a significant p-value of less than 0.001, rejecting the null hypothesis. This result indicates that the correlation matrix differs significantly from the identity matrix, supporting the sample's appropriateness for EFA.

Principal axis factoring with direct Oblimin Rotation was employed due to factors showing correlations above 0.3. The scree plot revealed five factors, in line with Kaiser's criterion suggesting retention of factors with Eigen values above 1, and these five factors explained 67% of the variance. Items were retained in factors based on their highest loadings and theoretical relevance as also described by the original author of SAQ English version (Caballo et al., 2010). Wagner et al. (2017) also found a five-factor structure. Interestingly, all the items were retained in the same factors as in the original scale.

The first factor “Speaking in public/ Talking with people in authority” which showed 50.31% of variance focused on having to speak in front of people or talking to someone who is in a higher position than you. A study by Caballo et al. (2014) has shown that women are likely to score higher on social anxiety related to fearing authority and speaking in public. Cox et al. (2008) suggested that public speaking was

an important factor in social anxiety. The second factor "Criticism and Embarrassment" which showed 5.55% of variance focused on the fear of being judged, criticized, or humiliated by others. According to Gerlach et al. (2003), embarrassment is a very notable symptom of social phobia. The third factor "Interactions with the opposite sex" showed 4.76% of variance focused on the unease experienced when a person has to interact with a personal of opposite gender. Vriends et al. (2017) showed that single women with SAD were more likely to have self-focused attention and anxiousness when talking to an attractive male. The fourth factor "Interactions with strangers" showed 3.74% of variance, which includes the uneasiness felt when talking to an unfamiliar person. The fifth factor "Assertive expression of annoyance, disgust or displeasure" showed 3.40% of variance. This factor includes the discomfort experienced when expressing negative emotions assertively. A comparative analysis between the alpha values of SAQ-Urdu and the original SAQ-English indicated excellent internal consistency reliability for all factors in SAQ-Urdu, with Cronbach's alpha ranging from 0.87 to 0.96 and an overall value of 0.96, surpassing the original SAQ-30's alpha of 0.91(Caballo et al., 2015) and the French version's alpha of 0.94 (Lecomte et al., 2019).

The results showed that the scale had a five-factor structure. It had excellent internal reliability and could be used on Urdu-speaking people.

Limitations and Recommendations

The sample size of clinical population was small due to which it is possible that the findings may not have fully captured the experience of people with Social Anxiety Disorder (SAD).

Future researchers can standardize the SAQ-Urdu in other cities of Pakistan to enhance the generalizability of the assessment tool and ensure its applicability across diverse populations. Researchers can use SAQ-Urdu to compare the social anxiety levels among individuals with other constructs, providing valuable insights into the relationship between social anxiety and various factors. The SAQ-Urdu can also be employed as a pre-posttest measure to evaluate the outcome of Social anxiety treatment.

Implications

The study has provided valuable access to an appropriate assessment tool, the SAQ-Urdu, for measuring social anxiety in Urdu-speaking populations, addressing a gap in available resources for assessing mental health in this demographic group.

Conclusion

In conclusion, this study highlighted the significance of social anxiety and the urgent need for understanding, assessing, and treating this condition. The study successfully translated the Social Anxiety Questionnaire (SAQ) in Urdu language, ensuring its reliability and validity. Exploratory Factor Analysis revealed five distinct factors including public speaking, criticism and embarrassment, interactions with the opposite sex, interactions with strangers, and assertive expression of annoyance. The questionnaire demonstrated excellent internal consistency. SAQ-Urdu can now serve as a valuable tool for assessing social anxiety in individuals.

Contribution of Authors

Mishal Javaid: Conceptualization, Investigation, Methodology, Data Curation, Formal Analysis, Writing – Original Draft

Abia Nazim: Conceptualization, Methodology, Writing - Reviewing & Editing, Supervision

Conflict of Interest

There is no conflict of interest declared by the authors.

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Data Availability Statement

The datasets of the current study are not available publicly due to ethical reasons but

are available from the corresponding author [M.J.] upon the reasonable request.

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