

Efficacy of Cognitive-Behavioral Therapy in Optimizing Counseling Outcomes for Fast Remission of Social Anxiety with Panic Attacks

Sonia Mukhtar^{1,2,3}, Shamim Mukhtar⁴, Fatima Naeem⁵, Waleed Rana⁶

¹Department of Medicine, Universidad de Oviedo (Spain)

²Global Disaster Medicine – Health Needs and response, Karolinska Institutet (Sweden)

³Department of Primary Care and Population Health, University of Nicosia (Cyprus)

⁴College of Earth & Environmental Sciences, University of the Punjab, Lahore, Pakistan

⁵Institute of Clinical Psychology, University of Management and Technology, Lahore

⁶Hainan Medical University, Hainan General Hospital, Haikou, China

Received: 2024-05-20.

Accepted: 2024-09-30.



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J Clin Med Kaz 2024; 21(5): 50–55

Corresponding author:

Waleed Rana.

E-mail: waleedrana312@gmail.com.

ORCID: 0000-0002-6679-5112.

Abstract

Aims: The case study evaluates the efficacy of Cognitive Behavioral Therapy in optimizing counseling outcomes for social anxiety and panic attacks within an academic setting. Counseling sessions were conducted with a 23-year-old female client over a four-month period at T.S Government College.

Method: The study utilized a single case study design A-B-A. The client presented with symptoms of social anxiety and panic attacks, impacting various aspects of her life including academic performance, interpersonal relationships, social interactions and family dynamics.

Results: Cognitive Behavioral Therapy techniques including Cognitive Restructuring, Social Skills Training, Role Play and Role Reversal, and Systematic Desensitization through Gradual Exposure, were implemented over 8 sessions. Assessment tools including pre-post ratings, behavioral observations and therapy blueprints were utilized to assess the severity of social anxiety.

Conclusion: A significant decrease in the severity of social anxiety and panic attacks based on both subjective self-reporting and objective observations suggesting Cognitive Behavioral Therapy as an approach of counseling for individuals with social anxiety with panic attacks in educational setting.

Keywords: Cognitive Behavioral Therapy, case study, case report, social anxiety, panic attacks, cognitive restructuring, systematic desensitization, role play, role reversal, social skills training.

Introduction

Social anxiety disorder (SAD) is one of the most prevalent mental health conditions characterized by excessive fear and discomfort in social situations, often leading to avoidance behaviors and significant impairment in daily functioning [1]. Social anxiety is the fear of social situations that involves interaction with other people. Panic attack is a sudden surge of overwhelming anxiety and fear leading to physiological and emotional changes along with fear of having additional panic attacks. Individuals with social anxiety disorder may experience intense anxiety, panic attacks, and distress when faced with social interactions, particularly in academic settings being one of the prominent areas where these challenges could manifest

profoundly [2, 3]. It causes impairment in individual's psychosocial functioning where an individual becomes stagnant and dependent on others [4]. The impact of social anxiety on academic performance, interpersonal relationships, and holistic well-being emphasizes the importance of effective therapeutic interventions [5].

To manage social anxiety and panic attacks with rapid outcomes, both pharmacological and psychological approaches have been developed. Studies comparing these treatments indicate that Cognitive Behavioral Therapy (CBT) is more effective than long-term pharmacological treatment. Cognitive Behavioral Therapy (CBT) has emerged one of the significant evidence-based therapeutic approach for managing social anxiety and panic attacks due to its

informed effectiveness focusing on cognitive restructuring, exposure techniques, and behavioral interventions [6]. CBT aims at identifying and modifying maladaptive thoughts, beliefs, and behaviors that could contribute to social anxiety symptoms, making it particularly suitable for addressing the cognitive and behavioral aspects of social anxiety disorder [7]. Despite the effectiveness and psychotherapeutic outcomes of CBT, there is a need for more research to evaluate its efficacy in specific contexts, such as academic or educational settings, where social anxiety can significantly impact academic performance, personal functioning, interpersonal relationships, and overall well-being. Understanding the effectiveness of CBT in optimizing counseling outcomes for social anxiety and panic attacks within educational environments is critical for informing evidence-based practices and improving mental health support for students.

This case study aims to evaluate the efficacy of Cognitive Behavioral Therapy in optimizing counseling outcomes for social anxiety and panic attacks within an academic setting. The study employs a single case study design using the A-B-A format to provide an in-depth analysis of the therapeutic process and counseling outcomes for a 23-year-old female client experiencing social anxiety and panic attacks. The chosen setting for this case study was T.S Government College, where counseling sessions were conducted over a four-month period. The client's experiences, challenges, and progress throughout the psychotherapeutic process were examined, focusing on the implementation of various CBT techniques such as Cognitive Restructuring, Social Skills Training, Role Play and Role Reversal, and Systematic Desensitization through Gradual Exposure, tailored to the client's specific needs and challenges. Specific techniques have been devised which base on CBT model. Majorly cognitive restructuring acted as to modify client's misinterpretations of physiological sensations to accurately perceiving them as usually bodily states. Secondly gradual exposure to feared avoiding situations either in imagination or in vivo performed a function of invalidation of the learned experiences of social anxiety and avoidance and individual becomes adapt to encounter them without being anxious or afraid of the situation. Moreover, homework assignments provided an opportunity to comprehend what clients have learned in counseling settings and modified their cognitive and behavioral patterns to gain control over their living. Cognitive Behavioral Therapy is the most thoroughly studied non-pharmacological approach to the counseling of social anxiety disorder and its efficacy seems to be prevalent in impaired quality of life as a consequence [8, 9].

The significance of this study specifically in the post-COVID pandemic era is profound, as it addresses a critical need for effective mental health interventions with the psychosocial aftermath of the pandemic [10]. The COVID-19 crisis has had a pervasive impact on global mental health, particularly exacerbating conditions of anxiety disorders, including social anxiety and panic attacks, due to prolonged social isolation, uncertainty, and disruptions to daily life, followed by unique challenges including remote learning, limited social interaction, and concerns about academic performance. This study's findings contribute to the growing literature body of evidence supporting the use of CBT as an effective intervention for social anxiety and panic attacks, especially in times of crisis. By demonstrating the effectiveness of CBT in reducing anxiety symptoms, this study reinforces the value of continued mental health support as society transitions into the post-COVID era [11]. As the world continues to deal with the long-term psychological impacts of

COVID-19, the findings offer valuable insights for mental health practitioners and policymakers for accessible, evidence-based therapies like CBT [12].

By exploring the client's experiences, coping strategies and progress throughout the counseling process and investigating the effectiveness of CBT in addressing social anxiety and panic attacks in an educational context, this study contributes to the growing body of literature on evidence-based interventions for mental health issues among college students. The findings have implications for counseling practices in academic settings and may inform the development of tailored psychological interventions to offer support to individuals with social anxiety in achieving better academic and social functioning. Overall, this case study aims at bridging the gap between research and practice in the importance of integrating empirically supported interventions like CBT into counseling services to strengthen outcomes for individuals struggling with social anxiety and panic attacks, particularly in educational environments where social interactions play a crucial role in personal and academic development as well as enhance mental health support and holistic wellbeing of individuals.

Materials and methods

The participant in this case study was a 23-year-old female client with presenting problems of social anxiety and panic attacks. She sought counseling services due to the impact of these symptoms on her academic, interpersonal, social, and family functioning. A single case study design using the A-B-A model was utilized in this study. Presenting problems were assessed by establishing a baseline of pre-post treatment and evaluation for effectiveness of CBT. The A-B-A model involved three phases: baseline (A), intervention (B), and post-intervention (A). This design allowed for the assessment of the effects of the intervention by comparing baseline measures with post-intervention measures. The initial phase (Phase A – Baseline Assessment) involved the assessment of the client's social anxiety symptoms and panic attacks (severity, frequency and occurrences) through self-reported measures, behavioral observations, and psychotherapeutic/counseling interviews. This phase established baseline data against which the intervention's effectiveness could be measured. The intervention phase (Phase B) spanned over a four-month period and consisted of eight counseling sessions using Cognitive Behavioral Therapy (CBT) techniques. The techniques included: Cognitive restructuring which included identifying and challenging irrational thoughts related to social anxiety and panic attacks, Social Skills training involving teaching effective social interaction skills to reduce social anxiety, Role Play and Role Reversal which focused on practicing social scenarios and adopting different roles to address anxiety triggers, and Systematic Desensitization through Gradual Exposure which involved gradual exposure to anxiety-provoking situations to reduce fear and avoidance behaviors. Following the intervention phase comes the Post-Intervention Assessment (Phase A), the client's social anxiety symptoms and panic attacks (severity, frequency and occurrences) were reassessed using the same measures employed during the baseline assessment. This phase aimed at evaluating the effectiveness of CBT in managing social anxiety and panic attacks. Quantitative data obtained through a single-case experiment in sessions by establishing a baseline with assessment protocol for pre-post treatment for efficacy of CBT which were analyzed using statistical methods to assess changes in social anxiety severity and panic attacks.

Qualitative data from therapy blueprints and clinical observations were analyzed thematically to gain insights into the client's experiences and progress throughout the intervention. Ethical considerations were kept in by taking the client with informed consent by ensuring the privacy, confidentiality and professional ethical concerns. Ethical considerations were intact while dealing with the client in one-on-one session and session by session discussion with the supervisor and approved by Ethical Committee of the Institute of Clinical Psychology, University of Management and Technology, Lahore, against the ethical criteria based on The American Psychological Association, The British Psychological Society and The Pakistan Association of Clinical Psychologists.

Assessment

A 23 years old female was self-referred client taken from T.S Government College presented with lacking self-confidence, feeling afraid of talking to boys and in a group. In physical symptom assessment, addition to palpitations, pounding heart, sweating and chilling hands, numb limbs, dry mouth and shortness of breath along with the fear of getting fainted, being unable to talk and getting embarrassed in front of people. Consequently, she avoided every possible interaction she can; avoid crowd situations and particularly class gatherings and going anywhere alone due to fear of being exposed and afraid. Her problem started when she was studying in a school grade 6 when two of her class fellows tried to get physical with her. About she told her mother and her mother talked to the school principal and then she felt so embarrassed because everyone knew and make fun of her. Later she had studied at girl's college where she felt the same experiences but start of co-education in bachelors with academic requirement of communication and speaking in gathering were perquisite brought her panic attack with severity. In her personal history, she responded that she had no hobby and she likes to spend time at her room alone watching television. From her family, she believed that she was the only girl who experiences this because her family members including her two sisters and four brothers were the opposite since their childhood. After her first panic attack in the crowd, she became fearful that she might have developed any coronary disease and might die of heart attack. For last couple of months she was having panic attacks on daily basis and she remained anxious all the time. Although at one point she had Valium and Xanax but she stopped using because she didn't want to depend on medication either. She approached counseling psychologist from the Institute of Clinical Psychology, University of the Management and Technology, Lahore. Standard psychological assessment modalities were incorporated including behavioral observation, counseling interview, and subjective rating of her presenting complaints, baseline chart, projective measures of Draw a Person Test (DAP) and through self-report measures through Student Problem Checklist scale and Self-Esteem Scale for adults (SES) [13–17]. Her behavioral observation in classroom setting, during sessions, interaction with her teachers and class fellows outside the class room indicated her social anxiety. And measures provided rich information about how she see herself, how she perceive others attitude towards herself and about her social relations the way she generally behave. She was a college student and a college student generally faces mental health problems so to assess those mental health problems Students Problem Checklist Scale was used.

Table 1 Client's Pre and Post scores on Student Problem Checklist Scale

Factors	M	SD	Range		Post-test score	Pre-test score
			Min	Max		
Sense of being dysfunctional	14.56	8.95	5.61	22	23.51	30
Loss of confidence	9.37	5.99	3.38	21	15.36	32
Lack of self-regulation	11.97	5.08	6.89	13	17.05	15
Anxiety Proneness	5.39	4.51	0.88	07	9.9	14
Factor Total	40.49	19.65	20.84	63	60.14	91

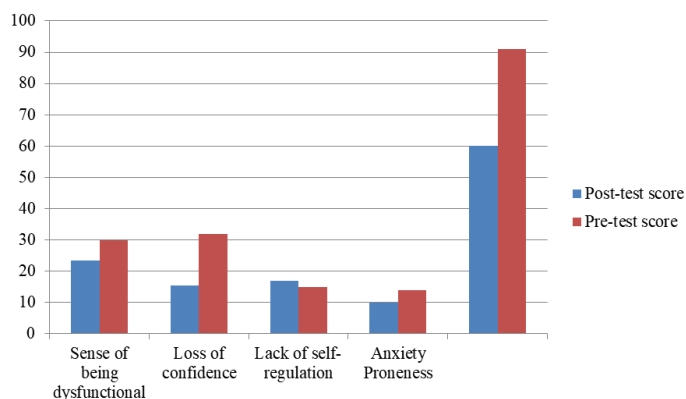


Figure 1 – Pre and Post score of Student Problem Checklist Scale of the client

Besides her social anxiety problem and generally feeling anxious and feared she seemed to have low self-esteem problem as well. In order to explore the experience and expressions of self-esteem of the client, Self-Esteem Scale was used.

Table 2 Client Pre and Post scores on Self-Esteem Scale for Adults (SES)

Factors	M	SD	Range		Pre-test score	Post-test score
			Min	Max		
Low self-esteem	16.31	6.87	9.44	23.12	26	15
Resilience	32.44	6.81	25.93	39.55	25	37
Withdrawal	14.86	6.77	8.09	21.63	25	13
Sociability	20.52	4.46	16.06	24.98	10	21
Self-confidence	25.36	5.37	19.99	30.73	20	28

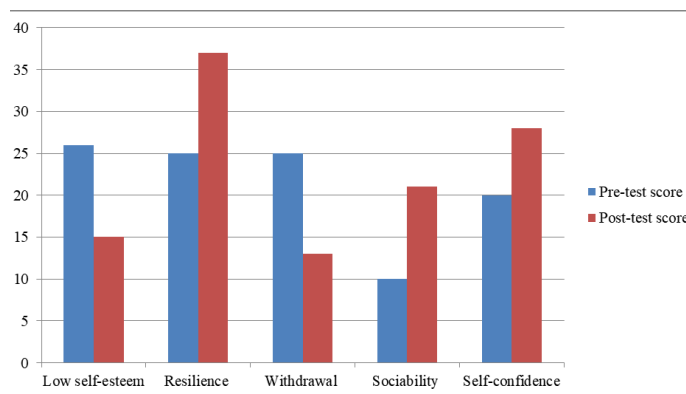


Figure 2 – Pre and Post score of Self-esteem Scale of Adults (SES) of the client

After the Pre and Post subjective ratings and Pre and Post ratings on self-report measures score indicated social anxiety, lack of self-confidence could be a result of sense of being

dysfunctional that leads towards her proneness of anxiety. In Eastern culture students are more sensitive to negative things and she had been experiencing negative reactions since a child and has been comparing that negative things with the positive things. That social withdrawal must have affected her self-confidence in her sociability cleared in before and after test scores.

Client was introduced with Cognitive Behavioral Therapy (CBT) and counseling was carried out over 4 months during which 8 therapeutic sessions were taken. The counseling techniques mainly comprised of rapport building for the prospective interventions, diaphragmatic breathing, and progressive muscle relaxation to manage her panic attacks, cognitive restructuring, Psychoeducation about her experiences, homework, behavioral experiment, and working on polarities to set the grounds for further techniques, incorporate social skills training, employ role play and role reversal, evokes behavioral rehearsal, and systematic desensitization with gradual exposure to feared situations and exercises to build self-esteem.

Discussion/Therapeutic Outcome

In current study psychoeducation in initial sessions produced insight in client regarding psychological and physiological nature of her problems rather than merely relying on observed bodily symptoms. Cognitive Behavioral techniques not just helped client to challenge her thoughts and beliefs of her concerns, panic through evidence based Socratic inquiry but also, she was capable of recognizing a high occurrence of her Negative Automatic Thoughts (NATs) related to panic in relevance to her low occurrence of such events from virtually to reality [18–20]. Through behavioral techniques with integration of cognitive practice helped the client to systematically exposure of feared situation where she recovered from panic attacks by monitoring her progress, her thoughts and her behavior and consequently challenging and changing those to adept towards healthy pattern of thoughts and behaviors. Furthermore, reduction in her panic attacks alongside social avoidance was brought about through systematic desensitization. She structured herself a rating of anxiety first that provokes situations ranging from low to higher level of anxiety and then step by step she was being able to face situations where integration of homework, behavioral experiments, working on polarities, by the complementation of social skills from imagination of role play to role reversal to reality while it was conditioned with her relaxed state [21–25]. And at the end of the counseling sessions, she was able to deal her life without anyone’s guidance or assistance.

Decision of terminating therapy was taken after behavioral, cognitive and affective goals were discernibly achieved, and a means of maintaining changes already achieved and generally problem-solving skills acquired in counseling. By mutual decision of the client and counselor sessions were ended by reviewing the major events of the counseling experience, acknowledging the changes the client has made, and ending on a positive note. Reviewed through blueprint of how the problem was started, what kept the problem going, important lessons she learned in therapy and coping strategies she had learned which she will continue applying in her life [26].

Thus, it is suggested that CBT was not just only helpful in reducing presenting complaints of panic attacks and social anxiety but its outcome remained stable and consistent in a long run. In light of the above findings, it is proposed that mental health practitioners in Pakistan culture would even better results if the cognitive behavioral therapy techniques with clients facing mental health complaints apart from the clinical population. The findings of the current case study hold significant implications for educational counseling, particularly within college settings, where cultural phenomena intersect with challenges faced by adolescent girls who are dealing with social anxiety and panic attacks, influencing their coping mechanisms and adjustment processes. This study emphasized on the need of tailored counseling interventions to address the unique needs of diverse students struggling with the mental health issues.

Limitations and Recommendations

One implication involves the development of counseling plans specifically designed to help young girls in managing and improving their academic and personal challenges related to social anxiety and panic attacks. These plans should be informed specifically considering the aftermath of impacts of the COVID-19 global pandemic on the youth by a deep understanding of both inter- and intra-cultural dynamics within

Table 3 Case Formulation of the client

Condi-tions	Past	Present	Future
Social	<ul style="list-style-type: none"> • Role of parenting • Lack of social support 	<ul style="list-style-type: none"> • Distant relationship with father • Intimacy vs. isolation • Social milieu 	<ul style="list-style-type: none"> • Psycho education • Environment (new college & internship) • Role of family
Psycho-logical	<ul style="list-style-type: none"> • Fear was developed when her male class fellows tried to get physical • Immature defense mechanism avoidance • Anal stage + autonomy vs. shame 	<ul style="list-style-type: none"> • Anxiety become more prevalent when she joined co-education college • Introjections • Cognitions + behavior • Low self esteem • Conflict between ideal/real self • Fear of opposite gender 	<ul style="list-style-type: none"> • Client’s personal motivation • Role of cognition, emotions and behavior
Biolo-gical	<ul style="list-style-type: none"> • Adolescence • Attachment 	<ul style="list-style-type: none"> • Transition to Young adulthood • Temperament 	<ul style="list-style-type: none"> • Attachment new roles / new responsibilities

Factors	Individual Factors	Systemic Factors
	1. Biological 2. Behavioral 3. Cognitive 4. Psychodynamic	1. Family (dynamics and traditions) 2. Academic/ occupational 3. Social 4. Cultural
Predisposing factors	Avoidance	Financial difficulties
Precipitating factors	Temperament	Lack of social support Co-education
Perpetuating factors	Self esteem	Lack of social circle
Protective factors	Personal motivation	Supportive sister Role of friends New internship

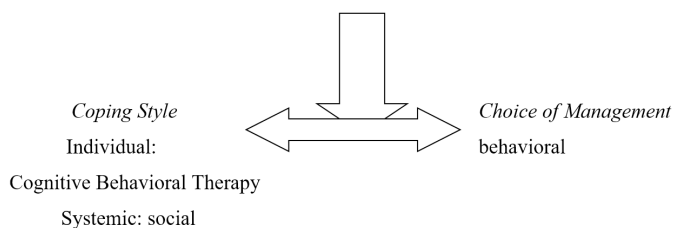


Figure 3 – Management for the client

the college setting, acknowledging the diverse backgrounds and challenging experiences of the student population [27-30]. Future research endeavors in this area should focus on exploring coping strategies integrated by individuals facing social anxiety and panic attacks. Specifically, there is a need to identify and differentiate between unhealthy coping strategies and positive coping mechanisms that promote resilience and well-being.

Conclusion

This case study highlights the significant efficacy of Cognitive-Behavioral Therapy (CBT) in achieving rapid remission of social anxiety and panic attacks within educational setting. The client, a 23-year-old female, exhibited notable improvements across various domains of her life, including academic performance, interpersonal relationships, and social interactions. Through a carefully structured A-B-A design, the study demonstrates that CBT, incorporating techniques such as Cognitive Restructuring, Social Skills Training, Role Play and Role Reversal, and Systematic Desensitization, can markedly reduce the severity of social anxiety and its associated symptoms, as observed through both subjective self-reports and objective behavioral assessments, highlighting the effectiveness of CBT as a targeted therapeutic approach for individuals experiencing these challenges. This study emphasized the significance of culturally sensitive and tailored counseling interventions in an academic setting, particularly for female students navigating social anxiety and panic-attacks which impacted various aspects of their life including academic performance, interpersonal relationships, social interactions and family dynamics. This case study can potentially facilitate school/college's administration, mental health practitioners and families to pay attention towards the challenges youth experiences, how severe it can become if not dealt with, identification of the risks and protective factors and taking preventive measures and management of problems related that could be dealt effectively through Cognitive-Behavioral Therapy.

Moreover, the results suggest that CBT can be particularly beneficial within educational settings, where social anxiety and panic attacks, brought on by the COVID-19 pandemic, may

severely hinder academic performance, socialization and family functioning including abuse and trauma [31-33]. The therapeutic interventions implemented in this case not only provided relief from acute symptoms but also equipped the client with long-term coping strategies to manage anxiety-provoking situations, thereby fostering resilience and promoting psychological well-being. The takeaways from this study emphasize the importance of integrating CBT into counseling programs within academic institutions to address the mental health needs of students amplified in the aftermath of COVID-19 pandemic. The successful implications of CBT in this context supports its continued use and further research into its long-term efficacy across diverse populations and settings. Future studies might explore how CBT can be adapted and optimized for broader use in educational environments, ensuring that more individuals benefit from this evidence-based therapeutic approach in managing the ongoing psychological impact of the pandemic.

Author Contributions: Conceptualization, S. M.; methodology, S. M.; validation, S. M.; formal analysis, W. R, Sh. M.; investigation, S. M.; resources, S. M.; data curation, S. M., writing – original draft preparation, S. M.; writing – review and editing, S. M, Sh. M, F. N, and W. R.; visualization, Sh. M.; supervision – FN; project administration – not applicable; funding acquisition – not applicable. The authors have read and agreed to the published version of the manuscript.

Disclosures: The authors have no conflicts of interest.

Acknowledgments: None.

Funding: None.

Availability of data and materials: The information about dataset and analyses for the present study is available from corresponding authors.

Informed Consent: The informed consent was taken from the study participants before administration.

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