UNIVERSITI PUTRA MALAYSIA

DETERMINATION OF THE EFFECTIVENESS OF UNIFIED GROUP COGNITIVE BEHAVIOUR THERAPY FOR PATIENTS WITH HETEROGENEOUS ANXIETY DISORDERS IN KLANG VALLEY, MALAYSIA

JAMILAH HANUM BINTI ABDUL KHAIYOM

FPSK(P) 2017 5

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By

JAMILAH HANUM BINTI ABDUL KHAIYOM

Thesis Submitted to the School of Graduate Studies, Universiti Putra Malaysia, in Fulfillment of the Requirements for the Degree of Doctor of Philosophy

February 2017

DEDICATION

To all my patients with anxiety disorders,

may we continuously strive to live in the present.

"Men are disturbed, not by things,but by the view which they take of them."

Epictetus – Greek Stoic Philosopher

Abstract of thesis presented to the Senate of Universiti Putra Malaysia in fulfillment of the requirement for the Degree of Doctor of Philosophy

DETERMINATION OF THE EFFECTIVENESS OF UNIFIED GROUP COGNITIVE BEHAVIOUR THERAPY FOR PATIENTS WITH HETEROGENEOUS ANXIETY DISORDERS IN KLANG VALLEY, MALAYSIA

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February 2017

Chairman : Associate Professor Firdaus Binti Mukhtar, PhD
Faculty : Medicine and Health Sciences

The prevalence rate of anxiety disorders both globally and in Malaysia has increased for the past decade. However, many patients with anxiety disorder remain under-treated or untreated. Based on the literature review, the problems were rooted in poor treatment delivery on this disorder (i.e., poor dissemination of treatments to the clinicians and limited availability of treatments for patients). Therefore, current study intended to provide solutions to this problem. There are two phases of study. Phase 1 involved the validation of measures used. While Phase 2 evaluate the effectiveness of Unified Group Cognitive Behaviour Therapy as an adjunct to pharmacological treatment (Treatment-As-Usual) (Group CBT+TAU) for patients with heterogeneous anxiety disorders in Klang Valley, Malaysia.

Patients diagnosed with heterogeneous anxiety disorders (*N*=242) were randomly allocated to receive either Unified GCBT+TAU (*n*=81), or Group Relaxation Training (GRT)+TAU (*n*=81), or TAU alone (*n*=80). The Unified GCBT+TAU and GRT+TAU consisted of eight and seven sessions, respectively. The primary outcome measure was the Beck Anxiety Inventory-Malay. The secondary outcome measures consisted of other symptom measures of anxiety (PAS-Malay and FQ-Malay), catastrophic cognition measures (CCQ-Modified-Malaysia and ACQ-Malaysia), a quality of life measure (WHOQOL-BREF-Malay), and a symptom measure of depression (Beck Depression Inventory-Malay). All the measures were validated in terms of its construct and its criterion prior to be used in the study. The participants completed the questionnaire battery at pre-treatment (week 0), middle of the treatment (week 4), post-treatment (week 8), and follow-ups (1-month, 3-month, and 6-month after the treatment).

General linear model (i.e., repeated measures MANOVA and mixed ANOVA) and an intention-to-treat with last observation carried forward model was used for data analyses. Participants receiving Unified GCBT+TAU improved more significantly and at a faster rate than the GRT+TAU group and TAU group. The effect size (Cohen's *d*) of the Unified GCBT+TAU group for the primary outcome measure was 1.61, ranging from 0.98 to 1.30 for the other secondary outcome measures. Meanwhile, the effect size of the GRT+TAU group for the primary outcome measure was 0.70, ranging from 0.12 to 0.54 for the other secondary outcome measures. On the other hand, the effect size of the TAU group for the primary outcome measure was 0.09, ranging from 0.02 to – 0.28 for the other secondary outcome measures. Furthermore, 70.1% and 36.7% of the participants receiving Unified GCBT+TAU and GRT+TAU, respectively, experienced either reliable or clinically significant change. Meanwhile, none of the participants in the TAU group experienced any reliable or clinically significant change from pre-treatment to post-treatment.

The findings suggest that Unified GCBT, when used in addition to TAU, is faster and more effective in reducing symptoms of anxiety disorders, decreasing catastrophic cognitions, increasing the quality of life, and reducing comorbid symptoms of depression among the patients with anxiety disorders in Klang Valley, Malaysia, when compared to GRT+TAU and TAU alone.

Abstrak tesis yang dikemukakan kepada Senat Universiti Putra Malaysia sebagai memenuhi keperluan untuk Ijazah Doktor Falsafah

PENGESAHAN KEBERKESANAN TERAPI KOGNITIF TINGKAH LAKU BERSEPADU SECARA BERKUMPULAN BAGI PESAKIT-PESAKIT GANGGUAN KEBIMBANGAN DI LEMBAH KLANG, MALAYSIA

Oleh

JAMILAH HANUM BINTI ABDUL KHAIYOM

Februari 2017

Pengerusi : Profesor Madya Firdaus Binti Mukhtar, PhD
Fakulti : Perubatan dan Sains Kesihatan

Kadar kelaziman gangguan kebimbangan di peringkat global mahupun Malaysia telah meningkat sejak sedekad yang lalu. Walau bagaimanapun, ramai pesakit yang mengalami gangguan kebimbangan tidak dapat mendapat rawatan yang sewajarnya. Berdasarkan kajian literatur yang dijalankan, masalah ini berakar umbi daripada kelemahan dalam penyampaian rawatan. Oleh kerana yang demikian, kajian ini bertujuan untuk memberikan penyelesaian kepada masalah ini. Terdapat dua fasa di dalam kajian ini. Fasa pertama melibatkan pengesahan skala yang digunapakai. Manakala fasa kedua bertujuan mengesahkan keberkesanan Terapi Kognitif Tingkah Laku Bersepadu Secara Berkumpulan sebagai rawatan tambahan kepada rawatan farmakologi (Rawatan-Seperti-Biasa) *(Group CBT+TAU)* untuk pesakit-pesakit yang mengalami gangguan kebimbangan di Lembah Klang, Malaysia.

Pesakit yang didiagnos dengan gangguan kebimbangan heterogen (*N*=242) telah ditempatkan secara rawak untuk menerima sama ada *Unified GCBT+TAU* (*n*=81), atau *GRT+TA*U (*n*=81), atau *TAU* (*n*=80). *Unified GCBT+TAU* dan *GRT+TAU* masing-masing terdiri daripada 8 sesi dan 7 sesi. Skala penilaian utama adalah soal selidik *BAI-Malay*. Manakala skala penilaian sekunder adalah terdiri daripada soal selidik lain yang berkaitan dengan gejala kebimbangan (iaitu, *PAS-Malay* dan *FQ-Malay*), soal selidik pemikiran malapetaka (*CCQ-Modified-Malaysia* dan *ACQ-Malaysia*), soal selidik kualiti kehidupan *(WHOQOL-BREF-Malay)*, dan soal selidik gejala kemurungan *(Beck Depression Inventory-Malay)*. Semua skala telah disahkan dari sudut konstruk dan kriteria sebelum diguna pakai dalam kajian ini. Peserta kajian menyelesaikan semua soal selidik yang dinyatakan pada tempoh pra-rawatan (minggu 0), pertengahan rawatan (minggu ke-4), selepas rawatan (minggu ke-8), dan ketika tempoh penilaian susulan (1 bulan, 3 bulan, dan 6 bulan selepas rawatan).

Model *general linear (iaitu repeated measures MANOVA and mixed ANOVA)* dan model *intention-to-treat with last observation carried forward* telah digunakan untuk analisis data. Peserta yang menerima *Unified GCBT+TAU* menjadi bertambah baik pada kadar yang lebih cepat dan signifikan daripada kumpulan *GRT+TAU* dan *TAU* sahaja. Saiz kesan (Cohen *d*) kumpulan *Unified GCBT+ TAU* pada hasil penilaian utama adalah 1.61, manakala saiz kesan untuk hasil penilaian sekunder adalah antara 0.98-1.30. Sementara itu, saiz kesan untuk kumpulan *GRT+TAU* untuk hasil penilaian utama adalah 0.70, manakala saiz kesan untuk hasil penilaian sekunder adalah antara 0.12-0.54. Sebaliknya, saiz kesan untuk kumpulan *TAU* bagi hasil penilaian utama adalah 0.09, manakala saiz kesan untuk hasil penilaian sekunder adalah antara 0.02 hingga -0.28. Disamping itu, 70.1% dan 36.7% daripada peserta-peserta yang menerima *Unified GCBT + TAU* dan *GRT + TAU*, masing-masing, mengalami perubahan positif yang boleh dipercayai atau perubahan klinikal yang signifikan. Sementara itu, tidak ada peserta dalam kumpulan *TAU yang* mengalami apa-apa perubahan positif yang dipercayai atau perubahan klinikal yang signifikan di antara tempoh pra-rawatan dan pasca-rawatan.

Kajian ini mencadangkan bahawa *Unified GCBT*, apabila digunakan sebagai tambahan kepada *TA*U, lebih cepat dan lebih berkesan mengurangkan gejala gangguan kebimbangan, mengurangkan pemikiran malapetaka, meningkatkan kualiti hidup, dan mengurangkan gejala-gejala kemurungan sampingan di kalangan pesakit-pesakit psikiatri yang mengalami gangguan kebimbangan di Lembah Klang, Malaysia, jika dibandingkan dengan *GRT+TAU* dan *TAU* sahaja.

ACKNOWLEDGEMENTS

Working as a Ph.D. student in Universiti Putra Malaysia was magnificent as well as challenging experience to me. In all these years, many people were instrumental directly or indirectly in shaping up my academic career. It was hardly possible for me to thrive in my doctoral work without the valuable support of these personalities. Here is a small tribute to all those people.

First of all, I wish to thank my supervisor **Dr. Firdaus Mukhtar** and co-supervisor **Emeritus Professor Tian Po Oei** for introducing me to the world of combustion research on Group Cognitive Behaviour Therapy for Anxiety Disorders. It was only due to their valuable guidance, passions, and commitments that I was able to complete my research work in a respectable manner. I am very grateful to my other two co-supervisors **Associate Professor Normala Ibrahim** and **Professor Sherina Mohd. Sidik**, without whose able supervision, a newcomer like me would not be able to perform the sophisticated RCT research in psychological medicine arena.

I wish to express my gratitude to **Ministry of Education Malaysia, International Islamic University Malaysia (IIUM),** and **Universiti Putra Malaysia (UPM)** for funding my doctoral degree through the Biasiswa Skim Latihan Akademik IPTA (SLAI), IIUM Funding for Ph.D. Research, and UPM's Research University Grant Scheme.

I would also like to convey my deep regards to all the site investigators **(Head of Psychiatric Department in the study sites – Dr. Azizul, Dr. Lim, Dr. Mazni, Dr. Salina, Dr. Sharifah, Dr. Toh, Dr. Zulkifli, and Datin Dr. Fauziah)** and enumerators **(students and nurses in the study sites – Qarem, Aina Sofea, Sr. Thila, SN Noraziah, SN Norasikin, SN Azzahra, SN Roziah, SN Che Yam, and Puan Anthiletchmi)** for allowing their precious time to assist me in the data collections, at the same time providing me their valuable suggestions.

I am privileged for having **Joel, Dr. Phang, Selina, Sindhu, Helen, Fatimah, Hilwa, Haidzat, Sakinah,** and **Kak Nani** as my colleges who have provided great company during my Ph.D. candidature. Especially, the great company of Joel throughout the ups and down and the generosity of Dr. Phang in sharing and guiding me to the beautiful world of meditation and mindfulness. I am lucky and blessed with the presence of my very best buddies, **Shakira, Adila, Hasmah, Rohana, Huda,** and **Aimi**, for their buoyant, spirited, entertaining, and refreshing characters. Their very existence serves as my serotonin, endorphins, and dopamine booster. I am honoured for having **Dr. Alizi, Dr. Harris**, and **Dr. Shukran** as my superior at the Department of Psychology, IIUM. Their understanding and continuous encouragements assured me of finishing what I have started. I cannot thank enough my colleagues at the department, especially **Kak Diana** who mentored me on statistical analysis; **Kak Mimi** and **Kak Jusmawati,** who always lend their shoulders and ears for me.

Above all, I would like to thank my family; my husband **Hafiz** for his personal support and great patience at all times. My sweet little angels **Nisa'** and **Omar,** who love me unconditionally and served as my inspiration to pursue this undertaking. My parents, **Mariaton** and **Abdul Khaiyom** for their time and energy in taking care of my children whenever I need them. Their unequivocal support throughout, as always, for which my mere expression of thanks likewise does not suffice. I love you both so much! Not to forget, my late grandmother, **Uwan Sufiah** for taking care of me since I was a baby until I am married. Your *du'a* and love has made me a better person. My parents-in-law, **Tamizi** and **Wahiah** for their understanding and acceptance of both my strengths and weaknesses. My siblings **(Along Nizam, Angah Idzwan, Alang Idham,** and **Dik Li Nazri)** and siblings-in-laws **(Kak Ida, Maz, Kak Syahirah, *arwah* Abang Nizam, Yasir,** and **Aiman)** for their encouragements and reassurance.

Finally, my special thanks to my **study participants**. While I have said the same for others on this list, it is true that this thesis could not have been completed without your participation. Thank you.

I certify that a Thesis Examination Committee has met on 6 February 2017 to conduct the final examination of Jamilah Hanum binti Abdul Khaiyom on her thesis entitled "Determination of the Effectiveness of Unified Group Cognitive Behaviour Therapy for Patients with Heterogeneous Anxiety Disorders in Klang Valley, Malaysia" in accordance with the Universities and University Colleges Act 1971 and the Constitution of the Universiti Putra Malaysia [P.U.(A) 106] 15 March 1998. The Committee recommends that the student be awarded the Doctor of Philosophy.

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This thesis was submitted to the Senate of the Universiti Putra Malaysia and has been accepted as fulfillment of the requirement for the degree of Doctor of Philosophy.The members of the Supervisory Committee were as follows:

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I hereby confirm that:

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ACQ-Malaysia	Agoraphobic Cognitions Questionnaire-Malaysia
AD	Anxiety disorders
Agora	Agoraphobia
BAI-Malay	Beck Anxiety Inventory-Malay
BDI-Malay	Beck Depression Inventory-Malay
BT	Behaviour therapy
BZD	Benzodiazepines
CBT	Cognitive Behaviour Therapy
CC	Clinical change
CCQ-Modified-Malay	Catastrophic Cognitions Questionnaire-Modified-Malay
CPG	Clinical Practice Guideline
DSM-IV-TR	Diagnostic and Statistical Manual of Mental Disorders (4^{th} ed.) –Text Revision
DSM-5	Diagnostic and Statistical Manual of Mental Disorders (5^{th} ed.)
ES	Effect size
FQ-Malay	Fear Questionnaire-Malay
GAD	Generalized anxiety disorder
ITT	Intention-to-treat analysis
MAOIs	MAO inhibitors
MOH	Ministry of Health
NasSA	Noradrenergic and specific serotoninergic antidepressant
PAS-Malay	Panic Agoraphobia Scale-Malay
PD	Panic disorder
PPA	Per-protocol analysis

RC	Reliable change
RCT	Randomized controlled trial
RT	Relaxation Training
SAD	Social anxiety disorder
SP	Specific phobia
SNRIs	Serotonin-norepinephrine reuptake inhibitors
SSRIs	Selective serotonin reuptake inhibitors
TCA	Tricyclic antidepressants
USA	The United States of America
WHO	The World Health Organizations
WHOQOL-BREF-Malay	World Health Organization Quality of Life-BREF-Malay
WMH	The World Mental Health

CHAPTER 1

INTRODUCTION

1.1 Background

Anxiety disorders (AD) has emerged as one of the most common mental illness exists around the world (Steel et al., 2014). The evidence was clear when the World Health Organizations (WHO) considered AD as one of the core disorders should be assessed in the World Mental Health (WMH) surveys apart from mood disorders and substance use disorders (Kessler et al., 2009). Based on meta-analytic reviews of 202 studies from 94 countries globally, the lifetime prevalence of AD was found to range in between 12.9% and 16.6%. In other words, about one in eight people to one in six people will experience an anxiety disorder in their lifetime (Somers et al., 2006; Steel et al., 2014). In the United States of America (USA), AD represents the single largest mental health problem with 18.1% prevalence rate (Kessler et al., 2005) and more than 19 million American adults having an anxiety disorder in a given year (National Institute of Mental Health (NIMH), 2005).

Apart from having high prevalence rate, AD (i.e., panic disorder, agoraphobia, social anxiety disorder, and social phobia) is also characterized by early age of onset (Kessler et al., 2005). The disorder is associated with the development of other psychiatric comorbidity particularly among ADs and depressive disorders (Brown et al., 2001), and has a prolonged chronic course with high relapse (Penninx et al., 2011). Due to its chronic nature, patients with AD tend to have poor quality of life (Olatunji, Cisler, & Tolin, 2007) and significant impairments in their roles functioning (i.e., social, family, and work) (Alonso et al., 2011; Hoffman, Dukes, & Wittchen, 2008; Senaratne et al., 2010). Furthermore, AD with other psychiatric comorbidity are also associated with increased risks of suicidal ideation, suicide attempts and completed suicide (Allan et al., 2015; Bentley et al., 2016; Kanwar et al., 2013).

However, mortality alone does not give a complete picture of the burden of disease borne by individuals in different population. The disability-adjusted life year (DALY) is a measure to calculate the overall disease burden, expressed as the number of years lost due to ill-health, disability, or early death. Using DALYs, the burden of disease that cause premature death but litte disability (such as drowning or measles) can be compared to that of diseases that do not cause death but do cause disability (such as cataract causing blindness). One DALY represents the loss of the equivalent of one year of full health (WHO, 2017). According to Baxter and colleagues (2014), AD accounted for 390 DALYs per 100 000 persons in 2010, globally, with no distinct changed observed over time. Furthermore, AD is the sixth leading cause of disability (in terms of years of life lived with disability), in both high-income and low- and middle-income countries. (Baxter et al., 2014). Regarding gender, females accounted for 65% of the DALYs caused by AD, with the highest

burden in both men and women experienced by those aged between 15 and 34 years (Baxter et al., 2014).

The burden of AD was also reported in the increase of economic cost since 2005. In 2010, € 74.4 billion Euros was spent in Europe, which has been the second highest expenditure after mood disorder (Olesen, Gustavsson, Svensson, Wittchen, & Jönsson, 2012). The high economic cost owing to lost work productivity and high medical resource use (Hoffman, Dukes, & Wittchen, 2008). Apart from the economic burden, the social implications of AD is diverse and far-reaching. For example, AD is associated with lack of education and income-generation opportunities, limiting their chances of economic development and depriving them of social networks and status within a community (World Health Organization, 2011).

1.2 Statement of the Problem

Despite the size, burden, and costs of AD, many patients remain under-treated or untreated. Even if they were treated, the standard of evidence-based interventions in routine clinical practice could be disappointing (Baldwin et al., 2010).

Early and effective interventions can reduce the burden of AD (Baldwin et al., 2010), especially with the use of evidence-based psychological treatment such as group cognitive behaviour therapy (group CBT) which has been recommended as the first-line psychological treatment for AD (Baldwin et al., 2014; Katzman et al., 2014; MOH Singapore, 2015; National Institute for Health and Care Excellence, 2011; The Australian Psychological Society, 2010).

Despite the above, patients suffer from AD remain under-treated or untreated (Baldwin et al., 2010). Apart from minimal supports and lack of recognitions for psychological treatments for AD by Malaysia government, the barriers to the psychological treatment of AD were rooted from poor treatment delivery (i.e., dissemination of treatments to the clinicians and limited availability of treatments for patients). Norton and Philipp (2008) clearly argued that the poor dissemination of efficacious treatments be due to time and financial costs to teach and preparing clinicians for specific-diagnosis treatment procedures (e.g., group cognitive behaviour therapy for panic disorder). Even if the clinicians were ready to deliver effective treatments in a group format (i.e., less cost of involved), the issue of treatments availability persists due to the number of patients need to constitute a therapy group with the same diagnosis.

Looking at the growing number of patients with AD in Malaysia and the problem of very minimal number of mental health experts (Abdul Wahab Khan, 2008; Deva, 2004; Ng, 2012) to conduct group CBT for specific diagnosis of AD, current study aims to address the issue by evaluating the use of Unified Group CBT for heterogeneous AD.

1.3 Objective of the Study

The general objective for this study is to determine the effectiveness of Unified Group Cognitive Behaviour Therapy as an adjunct to pharmacotherapy among patients with heterogeneous AD.

The specific objectives of the study are:

1. To determine the effectiveness of a Unified Group Cognitive Behaviour Therapy+Treatment-As-Usual (Group CBT+TAU) (experimental group) for patients with heterogeneous AD compared to Group Relaxation Training+Treatment-As-Usual (Group RT+TAU) (comparison group) and Treatment-As-Usual (TAU) alone (control group) in reducing the symptoms of anxiety during mid-intervention, after the intervention, and at follow-up periods (i.e., 1-month, 3-month, and 6-month after intervention) in Klang Valley, Malaysia.

2. To determine the effectiveness of a Unified Group CBT+TAU for patients with heterogeneous AD compared to Group RT+TAU and TAU alone in reducing the catastrophic cognitions during mid-intervention, after the intervention, and at follow-up periods (i.e., 1-month, 3-month, and 6-month after intervention) in Klang Valley, Malaysia.

3. To determine the effectiveness of a unified Group CBT+TAU as an intervention programme for adult psychiatric patients with heterogeneous AD compared to Group RT+TAU and TAU alone in increasing the quality of life during mid-intervention, after the intervention, and at follow-up periods (i.e., 1-month, 3-month, and 6-month after intervention) in Klang Valley, Malaysia.

4. To determine the effectiveness of a unified Group CBT+TAU as an intervention programme for adult psychiatric patients with AD compared to Group RT+TAU and TAU alone in reducing the comorbid depressive symptoms during mid-intervention, after the intervention, and at follow-up periods (i.e., 1-month, 3-month, and 6-month after intervention) in Klang Valley, Malaysia.

1.4 Research Hypotheses

The research hypotheses for the current study are:

1. The Unified Group CBT+TAU is more effective than Group RT+TAU and TAU alone in reducing the symptoms of anxiety among patients with heterogeneous AD, in the middle of intervention, after the intervention, and at follow-up periods. Same as the above, Group RT+TAU is more effective than TAU alone.

2. The Unified Group CBT+TAU is more effective than Group RT+TAU and TAU alone in reducing the catastrophic cognitions, in the middle of intervention, after the intervention, and at follow-up periods. Same as the above, Group RT+TAU is more effective than TAU alone.

3. The Unified Group CBT+TAU is more effective than Group RT+TAU and TAU alone in increasing the quality of life, in the middle of intervention, after the intervention, and at follow-up periods. Same as the above, Group RT+TAU is more effective than TAU alone.

4. The Unified Group CBT+TAU is more effective than Group RT+TAU and TAU alone in reducing the comorbid depressive symptoms, in the middle of intervention, after the intervention, and at follow-up periods. Same as the above, Group RT+TAU is more effective than TAU alone.

1.5 Significance of the Study

Since the Unified Group CBT for patients with heterogeneous AD is relatively new, the results of the current study would be essential for the body of knowledge related to this treatment. Not to mention, the current study has taken into considerations the limitations of the methodology for previous studies to bridge the presence of gaps.

The use of Unified Group CBT+TAU for heterogeneous AD would benefit patients with AD to receive treatments in a more reasonable time. Moreover, through group discussions, they could learn from other team members, increase social support systems, and would have the opportunity to recognize common experiences shared.

The treatment protocol of Unified Group CBT was designed not only to reduce the symptoms of AD but also to reduce negative cognitions and depressive comorbidity symptoms. By reducing these elements, the treatment also would increase the quality of life of the patients. Furthermore, the components of treatment would prepare patients with knowledge about the nature of AD, skills related to the management of their anxiety symptoms and negative thoughts. Moreover, skills such as relaxation techniques, problem-solving, and relapse preventions would increase the chances of remission.

REFERENCES

Abdul Wahab Khan, R. K. (2008). Why do wee need more clinical psychologists? *Malaysian Journal of Medical Sciences*, *15*(2), 1–2.

Abdullah, T., & Brown, T. L. (2011). Mental illness stigma and ethnocultural beliefs, values, and norms: an integrative review. *Clinical Psychology Review*, *31*(6), 934–48. doi:10.1016/j.cpr.2011.05.003

Abubakar, A., & Fischer, R. (2011). The factor structure of the 12-item General Health Questionnaire in a literate Kenyan population. *Stress and Health*, *28*, 248–254. doi:10.1002/smi.1420

Addis, M. E., Wade, W. A., & Hatgis, C. (1999). Barriers to dissemination of evidence-based practices: Addressing practitioners' concerns about manual-based psychotherapies. *Clinical Psychological: Science and Practice*, *6*, 430–441.

Aida, J., Hizlinda, T., Siti Fatimah, S., Mohd Muhaimin, A., Chai, S., Sahrina, W., & Teo, B. (2014). Psychological disorders and help seeking behaviour among Malaysian medical students in their clinical years. *Medicine & Health*, *9*(2), 114–123.

Aknouche, N., & M. Noor, N. (2014). The Primacy of the self in shame : can shame be benevolent ? *American International Journal of Social Sciences*, *3*(1), 59–79.

Allan, N. P., Norr, A. M., Boffa, J. W., Durmaz, D., Raines, A. M., & Schmidt, N. B. (2015). Examining the unique relations between anxiety sensitivity factors and suicidal ideation and past suicide attempts. *Psychiatry Research*, *228*(3), 441–447. doi:10.1016/j.psychres.2015.05.066

Alloy, L. B., Kelly, K. A., Mineka, S., & Clements, C. M. (1990). Comorbidity of anxiety and depressive disorders: A helplesness-hopelessness perspective. In J. D. Maser & C. R. Cloninger (Eds.), *Comorbidity of mood and anxiety disorders* (pp. 499–543). Washington, DC: American Psychiatric Press.

Al-Naggar, R. A. (2012). Prevalence and associated factors of phobia and social anxiety among university students. *ASEAN Journal of Psychiatry*, *13*(2).

Alonso, J., Petukhova, M., Vilagut, G., Chatterji, S., Heeringa, S., Üstün, T., … Kessler, R. (2011). Days out of role due to common physical and mental conditions: Results from the WHO World Mental Health surveys. *Molecular Psychiatry*, *16*, 1234–1246. doi:10.1038/mp.2010.101

American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (4th ed., t.). Washington, DC: Author.

American Psychiatric Association. (2013). *Diagnostic and statistical manual of*

mental disorders (5th ed.). Washington, DC: Author.

American Psychological Association. (2002). Criteria for evaluating treatment guidelines. *American Psychologist*, *57*(12), 1052–1059. doi:10.1037//0003-066X.57.12.1052

Andrée Löfholm, C., Brännström, L., Olsson, M., & Hansson, K. (2013). Treatment-as-usual in effectiveness studies: What is it and does it matter? *International Journal of Social Welfare*, *22*, 25–34.

Anthony, M. M., Orsillo, S. M., & Loemer, L. (Eds.). (2002). *Practitioner's Guide to Empirically Based Measures of Anxiety*. New York, NY: Kluwer Academic Publishers.

Arch, J. J., Ayers, C. R., Baker, A., Almklov, E., Dean, D. J., & Craske, M. G. (2013). Randomized clinical trial of adapted mindfulness-based stress reduction versus group cognitive behavioral therapy for heterogeneous anxiety disorders. *Behaviour Research and Therapy*, *51*, 185–196. doi:10.1016/j.brat.2013.01.003

Arch, J. J., & Craske, M. G. (2009). First-line treatment: A critical appraisal of cognitive behavioral therapy developments and alternatives. *Psychiatric Clinics of North America*, *32*, 525–547. doi:10.1016/j.psc.2009.05.001

Ardakani, A., Seghatoleslam, T., Habil, H., Jameei, F., & Rashid, R. (2013). A pilot study of prevalence of psychiatric disorder among drug-dependent patients: A report from an addiction centre in Malaysia. *International Medical Journal*, *20*(5), 537–541.

Armstrong, K. A., & Khawaja, N. G. (2002). Gender differences in anxiety: an investigation of the symptoms, cognitions, and sensitivity towards anxiety in a nonclinical population. *Behavioural and Cognitive Psychotherapy*, *30*, 227–231.

Armstrong, K. A., Khawaja, N. G., & Oei, T. P. S. (2006). Confirmatory factor analysis and psychometric properties of the Anxiety Sensitivity Index - Revised in clinical and normative populations. *European Journal of Psychological Assessment*, *22*(2), 116–125. doi:10.1027/1015-5759.22.2.116

Arnau, R. C., Broman-Fulks, J. J., Green, B. A., & Berman, M. E. (2014). The Anxiety Sensitivity Index — Revised: confirmatory factor analyses, structural invariance in Caucasian and African American Samples, and score reliability and validity. *Assessment*, *16*(2), 165–180.

Arntz, A. (2003). Cognitive therapy versus applied relaxation as treatment of generalized anxiety disorder. *Behaviour Research and Therapy*, *41*, 633–646. doi:10.1016/S0005-7967(02)00045-1

Arrindell, W. A. (1993a). The fear of fear concept: Evidence in favour of multidimensionality. *Behaviour Research and Therapy*, *31*, 139–148.

Arrindell, W. A. (1993b). The fear of fear concept: stability, retest artefact and predictive power. *Behaviour Research and Therapy*, *31*(2), 139–48. Retrieved from http://www.ncbi.nlm.nih.gov/pubmed/8442739

Atiken, J. R., & Benson, J. W. (1984). The use of relaxation/desensitization in treating anxiety associated with flying. *Aviation Space and Environmental Medicine*, *55*(3), 196–199.

Attkisson, C. C., & Zwick, R. (1982). The Client Satisfaction Questionnaire: Psychometric properties and correlations with service utilization and psychotherapy outcome. *Evaluation and Program Planning*, *5*, 233–237.

Austin, D. W., & Richards, J. C. (2006). A test of core assumptions of the catastrophic misinterpretation model of panic disorder. *Cognitive Therapy and Research*, *30*(1), 53–68. doi:10.1007/s10608-006-9010-4

Austin, S. F., Sumbundu, A. D., Lykke, J., & Oestrich, I. H. (2008). Treating panic symptoms within everyday clinical settings: The feasibility of a group cognitive behavioural intervention. *Nordic Journal of Psychiatry*, *62*, 287–293. doi:10.1080/08039480801984016

Azhar, M. Z. (1998). Cognitive psychotherapy experience with Kelantan clients. *Medical Journal of Malaysia*, *53*(2), 165–169.

Azhar, M. Z. (2000). Comparison of Fluvoxamine alone, Fluvoxamine and cognitive psychotherapy and psychotherapy alone in the treatment of panic disorder in Kelantan - Implications for management by family doctors. *Medical Journal of Malaysia*, *55*(4), 402–408.

Azhar, M. Z., & Noorjan, K. O. N. (2007). Effectiveness of different SSRI antidepressants in combination with CBT for short-term management of panic disorder. *Malaysian Journal of Medicine and Health Sciences*, *3*(2), 37–43.

Azhar, M. Z., Varma, S. L., & Dharap, A. S. (1994). Religious psychotherapy in anxiety disorder patients. *Acta Psychiatrica Scandinavica*, *90*, 1–3.

Bagozzi, R. P., & Yi, Y. (1988). On the evaluation of Structural Equation Models. *Journal of the Academy of Marketing Science*, *16*, 74–94.

Baharom, N., Hassan, M. R., Ali, N., & Shah, S. A. (2012). Improvement of quality of life following 6 months of methadone maintenance therapy in Malaysia. *Substance Abuse Treatment, Prevention, and Policy*, *7*(1), 32. doi:10.1186/1747-597X-7-32

Baldwin, D. S., Allgulander, C., Altamura, A. C., Angst, J., Bandelow, B., den Boer, J., … Zohar, J. (2010). Manifesto for a European Anxiety Disorders Research Network. *European Neuropsychopharmacology*, *20*(6), 426–432. doi:10.1016/j.euroneuro.2010.02.015

Baldwin, D. S., Anderson, I. M., Nutt, D. J., Bandelow, B., Boer, J. A. Den, David, M., … Lidbetter, N. (2014). Evidence-based pharmacological treatment of anxiety disorders , post-traumatic stress disorder and obsessive-compulsive disorder : A revision of the 2005 guidelines from the British Association for Psychopharmacology. *Journal of Psychopharmacology*, 1–37. doi:10.1177/0269881114525674

Bandelow, B. (1999). *Panic and Agoraphobia Scale (PAS)*. Seattle, WA: Hogrefe & Huber Publishers.

Bandelow, B., Brunner, E., Broocks, A., Beinroth, D., Hajak, G., Pralle, L., & Ruther, E. (1998). The use of the Panic and Agoraphobia Scale in a clinical trial. *Psychiatry Research*, *77*, 43–49.

Bandelow, B., Reitt, M., Röver, C., Michaelis, S., Görlich, Y., & Wedekind, D. (2015). Efficacy of treatments for anxiety disorders : a meta-analysis. *International Clinical Psychopharmacology*, *30*, 183–192. doi:10.1097/YIC.0000000000000078

Bandelow, B., Seidler-Brandler, U., Becker, A., Wedekind, D., & Rüther, E. (2007). Meta-analysis of randomized controlled comparisons of psychopharmacological and psychological treatments for anxiety disorders. *The World Journal of Biological Psychiatry*, *8*(3), 175–187. doi:10.1080/15622970601110273

Bandelow, B., Sher, L., Bunevicius, R., Hollander, E., Kasper, S., Zohar, J., & Ller, H. Ü. R. M. Ö. (2012). Guidelines for the pharmacological treatment of anxiety disorders , obsessive – compulsive disorder and posttraumatic stress disorder in primary care. *International Journal of Psychiatry in Clinical Practice*, *16*(January), 77–84. doi:10.3109/13651501.2012.667114

Bandura, A. (1977). Self-efficacy: Toward a unifying theory of behavioral change. *Psychological Review*, *84*(2), 191–215.

Bandura, A. (1986). *Social foundations of thought and action: A social cognitive theory*. Englewood Cliffs, NJ: Prentice Hall.

Bandura, A. (2012). Social cognitive theory. In P. A. M. V Van Lange, A. W. Kruglanski, & E. T. Higgins (Eds.), *The handbook of theories of social psychology: Volume 1*. London.

Barlow, D. H. (2000). Unraveling the mysteries of anxiety and its disorders from the perspective of emotion theory. *American Psychologist*, *55*(11), 1247–1263.

Barlow, D. H. (2002). *Anxiety and its disorders: The nature and treatment of anxiety and panic*. (Second ed.). New York, NY: The Guilford Press.

Barlow, D. H., Allen, L. B., & Choate, M. L. (2004). Toward a unified treatment for emotional disorders. *Behavior Therapy*, *35*(2), 205–230.

Barlow, D. H., Brown, T. A., & Craske, M. G. (1994). Definitions of panic attacks and panic disorder in the DSM-IV: Implications for research. *Journal of Abnormal Psychology*, *103*(3), 553–564. doi:10.1037//0021-843X.103.3.553

Barlow, D. H., Gorman, J. M., Shear, M. K., & Woods, S. W. (2000). Cognitive-behavioral therapy, imipramine, or their combination for panic disorder. *Journal of the American Medical Association*, *283*(19), 2529–2536.

Bartlett, M. S. (1954). A note on the multiplying factors for various chi square approximation. *Journal of the Royal Statistical Society*, *16*, 296–298.

Baxter, a. J., Scott, K. M., Vos, T., & Whiteford, H. a. (2012). Global prevalence of anxiety disorders: A systematic review and meta-regression. *Psychological Medicine*, 1–14. doi:10.1017/S003329171200147X

Baxter, A. J., Vos, T., Scott, K. M., Ferrari, A. J., & Whiteford, H. A. (2014). The global burden of anxiety disorders in 2010. *Psychological Medicine*, *44*, 2363–2374. doi:10.1017/S0033291713003243

Beck, A. T. (1976). *Cognitive therapy and the emotional disorders*. New York, NY: Penguin Books.

Beck, A. T. (1996). Beyond belief: A theory of modes, personality, and psychopathology. In P. M. Salkovskis (Ed.), *Frontiers of cognitive therapy* (pp. 1–25). New York, NY: The Guilford Press.

Beck, A. T. (2005). The current state of cognitive therapy. *Archives of General Psychiatry*, *62*, 953–959.

Beck, A. T., & Clark, D. A. (1997). An information processing model of anxiety: Automatic and strategic processes. *Behaviour Research and Therapy*, *35*, 49–58.

Beck, A. T., Emery, G., & Greenberg, R. L. (1985). *Anxiety disorders and phobias: A cognitive perspective.* New York, NY: Basic Books.

Beck, A. T., Emery, G., & Greenberg, R. L. (2005). *Anxiety disorders and phobias: A cognitive perspective.* (2nd ed.). New York, NY: Basic Books.

Beck, A. T., & Steer, R. A. (1988). Psychometric properties of the Beck Depression Inventory: Twenty-five years of evaluation. *Clinical Psychology Review*, *8*(1), 77–100.

Beck, A. T., & Steer, R. A. (1993). *Beck Anxiety Inventory Manual*. San Antonio, TX: Psychological Corporation.

Beck, A. T., Ward, C. H., Mendelson, M., Mock, J., & Erbaugh, J. (1961). An inventory for measuring depression. *Archives of General Psychiatry*, *4*, 561–571.

Beck, J. G., Stanley, M. A., Baldwin, L. E., Deagle III, E. A., & Averill, P. M. (1994). Comparison of cognitive therapy and relaxation training for panic disorder. *Journal of Consulting and Clinical Psychology*, *62*(4), 818–826.

Beck, J. S. (2011). *Cognitive behavior therapy: Basics and beyond* (2nd editio.). New York, NY: The Guilford Press.

Behling, O., & Law, K. S. (2000). *Translating questionnaires and other research instruments: Problems and solutions*. Thousand Oaks, CA: Sage Publications.

Bell, C. J., Colhoun, H. C., Carter, F. a, & Frampton, C. M. (2012). Effectiveness of computerised cognitive behaviour therapy for anxiety disorders in secondary care. *The Australian and New Zealand Journal of Psychiatry*, *46*(7), 630–40. doi:10.1177/0004867412437345

Benson, H. (1975). *The relaxation response*. New York, NY: Morrow.

Bentler, P. M., & Bonett, D. G. (1980). Significance tests and goodness of fit in the analysis of covariance structures. *Psychological Bulletin*, *88*, 588–606.

Bentley, K. H., Franklin, J. C., Ribeiro, J. D., Kleiman, E. M., Fox, K. R., & Nock, M. K. (2016). Anxiety and its disorders as risk factors for suicidal thoughts and behaviors: A meta-analytic review. *Clinical Psychology Review*, *43*, 30–46. doi:10.1016/j.cpr.2015.11.008

Bjornsson, A. S., Bidwell, L. C., Brosse, A. L., Carey, G., Hauser, M., Mackiewicz Seghete, K. L., … Craighead, W. E. (2011). Cognitive-behavioral group therapy versus group psychotherapy for social anxiety disorder among college students: A randomized controlled trial. *Depression and Anxiety*, *28*, 1034–1042. doi:10.1002/da.20877

Blanco, C., Heimberg, R. G., Schneier, F. R., Fresco, D. M., Chen, H., Turk, C. L., … Liebowitz, M. R. (2010). A placebo-controlled trial of phenelzine, cognitive behavioral group therapy, and their combination for social anxiety disorder. *Archives of General Psychiatry*, *67*(3), 286–296.

Blomhoff, S., Haug, T. T., Hellström, K., Holme, I., Humble, M., Madsbu, H. P., & Wold, J. A. N. E. (2001). Randomised controlled general practice trial of sertraline, exposure therapy and combined treatment in generalised social phobia. *The British Journal of Psychiatry*, *179*, 23–30. doi:10.1192/bjp.179.1.23

Bohni, M. K., Spindler, H., Arendt, M., Hougaard, E., & Rosenberg, N. K. (2009). A randomized study of massed three-week cognitive behavioural therapy schedule for panic disorder. *Acta Psychiatrica Scandinavica*, *120*, 187–195. doi:10.1111/j.1600-0447.2009.01358.x

Bolognesi, F., Baldwin, D. S., & Ruini, C. (2014). Psychological interventions in the treatment of generalized anxiety disorder: A structured review. *Journal of*

Psychopathology, *20*, 111–126.

Borkovec, T. D., & Costello, E. (1993). Efficacy of applied relaxation and cognitive-behavioral therapy in the treatment of generalized anxiety disorder. *Journal of Consulting and Clinical Psychology*, *61*(4), 611–619.

Boschen, M. J., & Oei, T. P. S. (2008). A cognitive behavioral case formulation framework for treatment planning in anxiety disorders. *Depression and Anxiety*, *25*, 811–823. doi:10.1002/da.20301

Bouchard, S., Gauthier, J., Laberge, B., French, D., Pelletier, M.-H., & Godbout, C. (1996). Exposure versus cognitive restructuring in the treatment of panic disorder with agoraphobia. *Behaviour Research and Therapy*, *34*(3), 213–224.

Bouton, M. E., Mineka, S., & Barlow, D. H. (2001). A modern learning theory perspective on the etiology of panic disorder. *Psychological Review*, *108*(1), 4–32. doi:10.1037//0033-295X.108.1.4

Bouvard, M., Cottraux, J., Talbot, F., Mollard, E., Duhem, S., Yao, S. N., … Cungi, C. (1998). Validation of the French translation of the Agoraphobic Cognitions Questionnaire. *Psychotherapy and Psychosomatics*, *67*, 249–253.

Bova, N., Jonge, J. De, & Guglielmi, D. (2013). The Demand-Induced Strain Compensation Questionnaire : A cross-national validation study. *Stress and Health*. doi:10.1002/smi.2550

Bowen, R., Baetz, M., & D'Arcy, C. (2006). Self-rated importance of religion predicts one-year outcome of patients with panic disorder. *Depression and Anxiety*, *23*, 266–273. doi:10.1002/da

Bowen, R. C., & D'Arcy, C. (2003). Response of patients with panic disorder and symptoms of hypomania to cognitive behavior therapy for panic. *Bipolar Disorders*, *5*, 144–149.

Boyd, A., Van de Velde, S., Vilagut, G., de Graaf, R., O'Neill, S., Florescu, S., … Kovess-Masfety, V. (2015). Gender differences in mental disorders and suicidality in Europe: Results from a large cross-sectional population-based study. *Journal of Affective Disorders*, *173*, 245–254. doi:10.1016/j.jad.2014.11.002

Brewin, C. R. (1996). Theoretical foundations of cognitive-behavior therapy for anxiety and depression. *Annual Review of Psychology*, *47*, 33–57.

Brislin, R. W. (1970). Back-translation for cross-cultural research. *Journal of Cross-Cultural Psychology*, *1*(3), 185–216. doi:10.1177/135910457000100301

Brown, E. J., Juster, H. R., Heimberg, R. G., & Winning, C. D. (1998). Stressful life events and personality styles: Relation to impairment and treatment outcome in patients. *Journal of Anxiety Disorders*, *12*(3), 233–251.

Brown, T. A., Campbell, L. A., Lehman, C. L., Grisham, J. R., & Mancill, R. B. (2001). Current and lifetime comorbidity of the DSM-IV anxiety and mood disorders in a large clinical sample. *Journal of Abnormal Psychology*, *110*(4), 585–599. doi:10.1037//0021-843X.110.4.585

Brown, T. A., Chorpita, B. F., & Barlow, D. H. (1998). Structural relationships among dimensions of the DSM-IV anxiety and mood disorders and dimensions of negative affect, positive affect, and autonomic arousal. *Journal of Abnormal Psychology*, *107*(2), 179–192.

Browne, M. W., & Cudeck, R. (1993). Alternative ways of assessing model fit. In K. A. Bollen & J. S. Long (Eds.), *Testing Structural Equation Models* (pp. pp. 136–162). Beverly Hills, CA: Sage Publications.

Bruce, S. E., Yonkers, K. a, Otto, M. W., Eisen, J. L., Weisberg, R. B., Pagano, M., … Keller, M. B. (2005). Influence of psychiatric comorbidity on recovery and recurrence in generalized anxiety disorder, social phobia, and panic disorder: A 12-year prospective study. *The American Journal of Psychiatry*, *162*(6), 1179–1187. doi:http://dx.doi.org/10.1176/appi.ajp.162.6.1179

Buckner, J. D., Cromer, K. R., Merrill, K. A., Mallott, M. A., Schmidt, N. B., Lopez, C., … Joiner Jr., T. E. (2009). Pretreatment intervention increases treatment outcomes for patients with anxiety disorders. *Cognitive Therapy and Research*, *33*(1), 126–137. doi:10.1007/s10608-007-9154-x.Pretreatment

Bullis, J. R., Sauer-Zavala, S., Bentley, K. H., Thompson-Hollands, J., Carl, J. R., & Barlow, D. H. (2015). The Unified Protocol for Transdiagnostic Treatment of Emotional Disorders: Preliminary exploration of effectiveness for group delivery. *Behavior Modification*, *39*(2), 295–321. doi:10.1177/0145445514553094

Bulmer, M. G. (1979). *Principles of statistics*. New York: Dover Publications.

Burns, D. D., & Spangler, D. L. (2000). Does psychotherapy homework lead to improvements in depression in Cognitive-Behavioral Therapy or does improvement lead to increased homework compliance ? *Journal of Consulting and Clinical Psychology*, *68*(1), 46–56. doi:10.1037//0022-006X.68.1.46

Byrne, B. M. (2010). *Structural equation modeling with AMOS: Basic concepts, applications, and programming* (2nd ed.). New York, NY: Routledge Taylor & Francis Group.

Carleton, R. N., Collimore, K. C., & Asmundson, G. J. G. (2007). Social anxiety and fear of negative evaluation: Construct validity of the BFNE-II. *Journal of Affective Disorders*, *21*, 131–141. doi:10.1016/j.janxdis.2006.03.010

Carmines, E. G., & Zeller, R. A. (1979). *Reliability and validity assessment*. Newbury Park, CA: Sage Publications.

Castro, W. P., Roca Sánchez, M. J., Pitti González, C. T., Bethencourt, J. M., De la Fuente Portero, J. A., & Marco, R. G. (2014). Cognitive-behavioral treatment and antidepressants combined with virtual reality exposure for patients with chronic agoraphobia. *International Journal of Clinical and Health Psychology*, *14*(1), 9–17. doi:10.1016/S1697-2600(14)70032-8

Catell, R. B. (1966). The scree test for number of factors. *Multivariate for Behavioural Research*, *1*, 245–276.

Chambless, D. L., Beck, a T., Gracely, E. J., & Grisham, J. R. (2000). Relationship of cognitions to fear of somatic symptoms: A test of the cognitive theory of panic. *Depression and Anxiety*, *11*(1), 1–9. Retrieved from http://www.ncbi.nlm.nih.gov/pubmed/10723629

Chambless, D. L., Caputo, G. C., Bright, P., & Gallagher, R. (1984). Assessment of "fear of fear" in agoraphobics: The Body Sensations Questionnaire and the Agoraphobic Cognitions Questionnaire. *Journal of Consulting and Clinical Psychology*, *52*, 1090–1097.

Chambless, D. L., Caputo, G. C., Jasin, S. E., Gracely, E. J., & Williams, C. (1985). The mobility inventory for agoraphobia. *Behaviour Research and Therapy*, *23*(1), 35–44. doi:10.1016/0005-7967(85)90140-8

Chan, C. M. H., Wan Azman, W. A., MD Yusof, M., Ho, G.-F., & Krupat, E. (2014). Effects of depression and anxiety on mortality in a mixed cancer group: a longitudinal approach using standardised diagnostic interviews. *Psycho-Oncology*. doi:10.1002/pon.3714

Chan, Y. H. (2003). Randomized controlled trials (RCTs) – Sample Size : The Magic Number ? *Singapore Medical Journal*, *44*(4), 172–174.

Checkoway, H., Pearce, N., & Kriebel, D. (2007). Selecting appropriate study designs to address specific research questions in occupational epidemiology. *Occupational and Environmental Medicine*, *64*, 633–638. doi:10.1136/oem.2006.029967

Chen, J., Nakano, Y., Ietzugu, T., Ogawa, S., Funayama, T., Watanabe, N., … Furukawa, T. A. (2007). Group cognitive behavior therapy for Japanese patients with social anxiety disorder: Preliminary outcomes and their predictors. *BMC Psychiatry*, *7*, 69–78. doi:10.1186/1471-244X-7-69

Chin, E. G., Drescher, C. F., Trent, L. R., Darden, M., & Johnson, L. R. (2015). Searching for a screener: Examination of the factor structure of the General Health Questionnaire in Malaysia. *International Perspectives in Psychology: Research, Practice, Consultation*, *4*(2), 111–127.

Choi, Y.-H., Vincelli, F., Riva, G., Wiederhold, B. K., Lee, J., & Park, K. (2005). Effects of group experiential cognitive therapy for the treatment of panic disorder with agoraphobia. *Cyberpsychology & Behavior*, *8*(4), 387–393.

Clair, A. L., Oei, T. P. S., & Evans, L. (1992). Anne L. Clair, Tian P.S. Oei, and Larry Evans. *Comprehensive Psychiatry*, *33*(5), 310–318.

Clark, D. A., & Beck, A. T. (2010). *Cognitive therapy of anxiety disorders: Science and practice*. New York: The Guilford Press.

Clark, D. A., Beck, A. T., & Alforn, B. (1999). *Scientific foundations of cognitive theory and therapy of depression.* New York, NY: Wiley.

Clark, D. A., Steer, R. A., & Beck, A. T. (1994). Common and specific dimensions of self-reported anxiety and depression: Implications for the cognitive and tripartite models. *Journal of Abnormal Psychology*, *103*(4), 645–654.

Clark, D. M. (1986). A cognitive approach to panic. *Behaviour Research and Therapy*, *24*(4), 461–70.

Clark, D. M. (1988). A Cognitive Model of Panic. In S. Rachman & J. D. Maser (Eds.), *Panic: Psychological Perspectives* (pp. pp. 71–89). Hillsdale, NJ: Erlbaum.

Clark, D. M., Ehlers, A., Hackmann, A., Mcmanus, F., Fennell, M., Grey, N., … Wild, J. (2006). Cognitive therapy versus exposure and applied relaxation in social phobia: A randomized controlled trial. *Journal of Consulting and Clinical Psychology*, *74*(3), 568–578. doi:10.1037/0022-006X.74.3.568

Clark, D. M., & Salkovskis, P. M. (1989). Panic disorder. In K. Hawton, P. M. Salkovkis, J. Kirk, & D. M. Clark (Eds.), *Cognitive Behaviour Therapy: A Practical Guide*. Oxford: Oxford University Press.

Clark, D. M., Salkovskis, P. M., Hackmann, A. N. N., Middleton, H., Anastasiades, P., & Gelder, M. (1994). A comparison of cognitive therapy, applied relaxation and imipramine in the treatment of panic disorder. *British Journal of Psychiatry*, *164*, 759–769.

Clark, D. M., Salkovskis, P. M., Ost, L. G., Breitholtz, E., Koehler, K. a, Westling, B. E., … Gelder, M. (1997). Misinterpretation of body sensations in panic disorder. *Journal of Consulting and Clinical Psychology*, *65*(2), 203–13. Retrieved from http://www.ncbi.nlm.nih.gov/pubmed/9086683

Clark, L. A., & Watson, D. (1991). Tripartite model of anxiety and depression: Psychometric evidence and taxonomic implications. *Journal of Abnormal Psychology*, *100*(3), 316–336.

Clum, G. a., Broyles, S., Borden, J., & Watkins, P. Lou. (1990). Validity and reliability of the panic attack symptoms and cognitions questionnaires. *Journal of Psychopathology and Behavioral Assessment*, *12*(3), 233–245. doi:10.1007/BF00960620

Cohen, J. (1988). *Statistical power analysis for the behavioral sciences* (2nd ed.). New Jersey: Erlbaum.

Cohen, J. (1990). Things I have learned (So Far). *American Psychologist*, *45*(12), 1304–1312.

Comrey, A. L., & Lee, H. B. (1992). *A first course in factor analysis* (2nd ed.). Hillsdale, NJ: Lawrence Erlbaum Associates.

Cox, B. J., Ross, L., Swinson, R. P., & Direnfeld, D. M. (2015). A comparison of social phobia outcome measures in cognitive-behavioral group therapy. *Behavior Modification*, *22*(3), 285–297.

Cox, B. J., Swinson, R. P., Parker, J. D., Kuch, K., & Reichman, J. T. (1993). Confirmatory factor analysis of the Fear Questionnaire in panic disorder with agoraphobia. *Psychological Assessment*, *5*, 235–237.

Cox, B. J., Swinson, R. P., & Shaw, B. F. (1991). Value of the Fear Questionnaire in differentiating agoraphobia and social phobia. *British Journal of Psychiatry*, *159*, 842–845.

Craske, M. G., Roy-Byrne, P., Stein, M. B., Sullivan, G., Hazlett-Stevens, H., Bystritsky, A., & Sherbourne, C. (2006). CBT intensity and outcome for panic disorder in a primary care setting. *Behavior Therapy*, *37*, 112–119.

Cuijpers, P., Sijbrandij, M., Koole, S., Huibers, M., Berking, M., & Andersson, G. (2014). Psychological treatment of generalized anxiety disorder : A meta-analysis. *Clinical Psychology Review*, *34*(2), 130–140. doi:10.1016/j.cpr.2014.01.002

Davidson, J. R. T., Potts, N. L. S., Richichi, E. A., Ford, S. M., Krishnan, R. R., Smith, R. D., & Wilson, W. (1991). The Brief Social Phobia Scale. *Journal of Clinical Psychiatry*, *52*(11, Suppl.), 48–51.

Deacon, B. J., Abramowitz, J. S., Woods, C. M., & Tolin, D. F. (2003). The Anxiety Sensitivity Index - Revised: psychometric properties and factor structure in two nonclinical samples. *Behaviour Research and Therapy*, *41*(12), 1427–1449. doi:10.1016/S0005-7967(03)00065-2

Delsignore, A. (2008). Does prior psychotherapy experience affect the course of cognitive-behavioural group therapy for social anxiety disorder? *The Canadian Journal of Psychiatry*, *53*(8), 509–516.

Delsignore, A., Carraro, G., Mathier, F., Znoj, H., & Schnyder, U. (2008). Perceived responsibility for change as an outcome predictor in cognitive-behavioural group therapy. *British Journal of Clinical Psychology*, *47*, 281–293. doi:10.1348/014466508X279486

Department of Statistics Malaysia. (2010). *Population distribution and basic demographic characteristic report 2010*. Retrieved from http://www.statistics.gov.my/portal/index.php?option=com_content&view=article&id=1215:population-distribution-and-basic-demographic-characteristic-report-population-and-housing-census-malaysia-2010-updated-

2972011&catid=130:population-distribution-and-bas

Deva, M. P. (2004). Malaysia mental health country profile. *International Review of Psychiatry*, *16*, 167–176. doi:10.1080/09540260310001635203

Dhillon, H. K., Singh, H. J., Shuib, R., Hamid, A. M., & Nik Mahmood, N. M. Z. (2006). Prevalence of menopausal symptoms in women in Kelantan, Malaysia. *MATURITAS: The European Menopause Journal*, *54*, 213–221. doi:10.1016/j.maturitas.2005.11.001

Dijk, C., Buwalda, F. M., & de Jong, P. J. (2012). Dealing with fear of blushing : A psychoeducational group intervention for fear of blushing. *Clinical Psychology and Psychotherapy*, *19*, 481–487. doi:10.1002/cpp.764

Dugas, M. J., Ladouceur, R., Léger, E., Freeston, M. H., Langlois, F., Provencher, M. D., & Boisvert, J.-M. (2003). Group cognitive–behavioral therapy for generalized anxiety disorder: Treatment outcome and long-term follow-up. *Journal of Consulting and Clinical Psychology*, *71*(4), 821–825. doi:10.1037/0022-006X.71.4.821

Dwyer, L., Olsen, S., & Oei, T. P. S. (2013). Cognitive-behavioral group therapy for heterogeneous anxiety and mood disorders in a psychiatric hospital outpatient clinic. *Journal of Cognitive Psychotherapy: An International Quarterly*, *27*(2), 138–154.

Edimansyah, B. A., Rusli, B. N., & Naing, L. (2007). Reliability and construct validity of the Malay version of the Depression Anxiety Stress Scales (DASS) in automotive assembly workers in Malaysia. *Malaysian Journal of Public Health Medicine*, *7*(1), 25–30.

Edimansyah, B. A., Rusli, B. N., Naing, L., Mohamed Rusli, B. A., Winn, T., Raja, B., & Tengku Mohamed Ariff, B. R. H. (2008). Self-perceived depression, anxiety, stress and their relationships with psychosocial job factors in male automotive assembly workers. *Industrial Health*, *46*, 90–100.

Effective. (2015). *Merriam-Webster Dictionary*. Retrieved June 28, 2015, from http://www.merriam-webster.com/dictionary/effective

Erickson, D. H. (2003). Group cognitive behavioural therapy for heterogeneous anxiety disorders. *Cognitive Behaviour Therapy*, *32*(4), 179–186. doi:10.1080/16506070310001686

Erickson, D. H., Janeck, A. S., & Tallman, K. (2007). A cognitive-behavioral group for patients with various anxiety disorders. *Psychiatric Services*, *58*(9), 1205–1211.

Erickson, D. H., Janeck, A. S., & Tallman, K. (2007). A cognitive-behavioral group for patients with various anxiety disorders. *Psychiatric Services*, *58*(9), 1205–1211.

Evans, C., Margison, F., & Barkham, M. (1998). The contribution of reliable and clinically significant change methods to evidence-based mental health. *Evidence-Based Mental Health, 1*, 70–72.

Evans, L., Holt, C., & Oei, T. P. S. (1991). Long-term follow-up of agoraphobics treated by brief intensive group cognitive behavioural therapy. *Australian and New Zealand Journal of Psychiatry*, *25*(3), 343–349. doi:10.3109/00048679109062635

Fadzil, A., Balakrishnan, K., Razali, R., Sidi, H., Malapan, T., Japaraj, R. P., … Abdul Manaf, M. R. (2013). Risk factors for depression and anxiety among pregnant women in Hospital Tuanku Bainun, Ipoh, Malaysia. *Asia-Pacific Psychiatry*, *5*, 7–13. doi:10.1111/appy.12036

Fatt, Q. K., Atiya, A. S., Heng, N. G. C., & Beng, C. C. (2007). Validation of the Hospital Anxiety and Depression Scale and the psychological disorder among premature ejaculation subjects. *International Journal of Impotence Research*, *19*, 321–325. doi:10.1038/sj.ijir.3901528

Fedoroff, I. C., & Taylor, S. (2001). Psychological and pharmacological treatments of social phobia: A meta-analysis. *Journal of Clinical Psychopharmacology*, *21*(3), 311–324.

Field, A. (2009). *Discovering statistics using SPSS* (Third edit.). London: Sage Publications.

Foa, E. B., & Kozak, M. J. (1986). Emotional processing of fear: Exposure to corrective information. *Psychological Bulletin*, *99*(1), 20–35.

Fuad, M. D., Al-Zurfi, B. M. N., Qader, M. A., Abu Bakar, M. F., Elnajeh, M., & Abdullah, M. R. (2015). Prevalence and risk factors of stress, anxiety and depression among medical students of a private medical university in Malaysia. *Education in Medicine Journal*, *7*(2), 52–59. doi:10.5959/eimj.v7i2.362

Furukawa, T. A., Nakano, Y., Funayama, T., Ogawa, S., Ietsegu, T., Noda, Y., … Akechi, T. (2013). Cognitive-behavioral therapy modifies the naturalistic course of social anxiety disorder: Findings from an ABA design study in routine clinical practices. *Psychiatry and Clinical Neuroscience*, *67*, 139–147. doi:10.1111/pcn.12035

Furukawa, T. A., Watanabe, N., & Churchill, R. (2007). Combined psychotherapy plus antidepressants for panic disorder with or without agoraphobia. *Cochrane Database Systematic Review*, (Issue 1).

Galassi, F., Quercioli, S., Charismas, D., Niccolai, V., & Barciulli, E. (2007). Cognitive-behavioral group treatment for panic disorder with agoraphobia. *Journal of Clinical Psychology*, *63*(4), 409–416. doi:10.1002/jclp

Gan, W. Y., Mohd Nasir, M. T., Zalilah, M. S., & Hazizi, A. S. (2011). Disordered

eating behaviors, depression, anxiety and stress among Malaysian university students. *College Student Journal*, *45*(2), 296–309.

García, M. S. (2004). Effectiveness of cognitive-behavioural group therapy in patients with anxiety disorders. *Psychology in Spain*, *8*(1), 89–97.

Gaston, J. E., Abbott, M. J., Rapee, R. M., & Neary, S. A. (2006). Do empirically supported treatments generalize to private practice? A benchmark study of a cognitive-behavioural group treatment programme for social phobia. *British Journal of Clinical Psychology*, *45*, 33–48. doi:10.1348/014466505X35146

Gaudlitz, K., Plag, J., Dimeo, F., & Ströhle, A. (2015). Aerobic exercise training facilitates the effectiveness of cognitive behavioral therapy in panic disorder. *Depression and Anxiety*, *32*, 221–228. doi:10.1002/da.22337

Gelernter, C. S., Uhde, T. W., Cimbolic, P., Arnkoff, D. B., Vittone, B. J., Tancer, M. E., & Bartko, J. J. (1991). Cognitive-behavioral and pharmacological treatments of social phobia. *Archives of General Psychiatry*, *48*, 938–945.

Gellatly, R., & Beck, A. T. (2016). Catastrophic thinking: A transdiagnostic process across psychiatric disorders. *Cognitive Therapy and Research*. doi:10.1007/s10608-016-9763-3

Gill, J. S., Koh, O., & Pillai, S. K. (2010). Anxiety disorders among incarcerated drug users. *Malaysian Journal of Psychiatry*, *19*(1), 1–7.

Glenn, D., Golinelli, D., Rose, R. D., Roy-Byrne, P., Stein, M. B., Sullivan, G., … Craske, M. G. (2014). Who gets the most out of cognitive-behavioral therapy for anxiety disorders? The role of treatment dose and patient engagement. *Journal of Consulting and Clinical Psychology*, *81*(4), 639–649. doi:10.1037/a0033403.Who

Gloster, A. T., Klotsche, J., Gerlach, A. L., Hamm, A., Ströhle, A., Gauggel, S., … Wittchen, H.-U. (2014). Timing matters: Change depends on the stage of treatment in cognitive behavioral therapy for panic disorder with agoraphobia. *Journal of Consulting and Clinical Psychology*, *82*(1), 141–153. doi:10.1037/a0034555

Gloster, A. T., Wittchen, H.-U., Einsle, F., Lang, T., Helbig-Lang, S., Fydrich, T., … Arolt, V. (2011). Psychological treatment for panic disorder with agoraphobia: A randomized controlled trial to examine the role of therapist-guided exposure in CBT. *Journal of Consulting and Clinical Psychology*, *79*(3), 406–20. doi:10.1037/a0023584

Goddard, C. (1996). The "Social Emotions" of Malay (Bahasa Melayu). *Ethos*, *24*(3), 426–464.

Goldfried, M. R., & Wolfe, B. E. (1998). Toward a more clinically valid approach to therapy research. *Journal of Consulting and Clinical Psychology*, *66*(1), 143–150.

Goldstein, A. J., & Chambless, D. L. (1978). A reanalysis of agoraphobia. *Behavior Therapy*, *9*, 47–59. doi:10.1016/S0005-7894(78)80053-7

Goodwin, R. D. (2002). Anxiety disorders and the onset of depression among adults in the community. *Psychological Medicine*, *32*, 1121–1124.

Gould, R. A., Buckminster, S., Pollack, M. H., Otto, M. W., & Yap, L. (1997). Cognitive-behavioral and pharmacological treatment for social phobia: A meta-analysis. *Clinical Psychological: Science and Practice*, *4*, 291–306.

Gould, R. A., Otto, M. W., & Pollack, M. H. (1995). A meta-analysis of treatment outcome for panic disorder. *Clinical Psychology Review*, *15*(8), 819–844.

Gould, R. A., Otto, M. W., Pollack, M. H., & Yap, L. (1997). Cognitive behavioral and pharmacological treatment of generalized anxiety disorder: A preliminary meta-analysis. *Behavior Therapy*, *28*, 285–305.

Graaf, R. De, Bijl, R. V, Smit, F., Vollebergh, W. A. M., & Spijker, J. (2002). Risk factors for 12-Month comorbidity of mood , anxiety, and substance use disorders: Findings from the Netherlands Mental Health Survey and Incidence Study. *American Journal of Psychiatry*, *159*(April), 620–629.

Grace, J., Lee, K. K., Ballard, C., & Herbert, M. (2001). The relationship between post-natal depression, somatization and behaviour in Malaysian women. *Transcultural Psychiatry*, *38*(27), 26–34. doi:10.1177/136346150103800103

Gros, D. F., Antony, M. M., McCabe, R. E., & Lydiard, R. B. (2011). A preliminary investigation of the effects of cognitive-behavioral therapy for panic disorder on gastrointestinal distress in patients with comorbid panic disorder and irritable bowel syndrome. *Depression and Anxiety*, *28*, 1027–1033. doi:10.1002/da.20863

Groves, P. M., & Thompson, R. F. (1970). Habituation: A dual-process theory. *Psychological Review*, *77*(5), 419–450.

Gupta, S. K. (2011). Intention-to-treat concept: A review. *Perspectives in Clinical Research*, *2*(3), 109–112. doi:10.4103/2229

Haahr, M. (1998). True Random Number Generator. *RANDOM.ORG Randomness and Integrity Services Ltd.* Retrieved April 29, 2013, from https://www.random.org/

Haikal, M., & Hong, R. Y. (2010). Journal of Anxiety Disorders The effects of social evaluation and looming threat on self-attentional biases and social anxiety. *Journal of Anxiety Disorders*, *24*(3), 345–352. doi:10.1016/j.janxdis.2010.01.007

Hair, J. F., Black, W. C., Babin, B. J., & Anderson, R. E. (2010). *Multivariate data analysis* (7th ed.). Upper Saddle River, NJ: Pearson Prentice Hall.

Hakim, H., & Razak, I. A. (2014). Dental fear among medical and dental undergraduates. *The Scientific World Journal*, *2014*, 1–5.

Hamm, A. O., Richter, J., & Pané-Farré, C. a. (2014). When the threat comes from inside the body : A neuroscience-based learning perspective of the etiology of panic disorder. *Restorative Neurology and Neuroscience*, *32*(1), 79–93. doi:10.3233/RNN-139011

Haque, A. (2005). Mental health concepts and program development in Malaysia. *Journal of Mental Health*, *14*(2), 183–195. doi:10.1080/09638230500059997

Haque, A. (2008). Culture-bound syndromes and healing practices in Malaysia. *Mental Health, Religion & Culture*, *11*(7), 685–696. doi:10.1080/13674670801958867

Harris, P. M. (1998). Attrition revisited. *American Journal of Evaluation*, *19*(3), 293–305.

Hartono, J. L., Mahadeva, S., & Goh, K.-L. (2012). Anxiety and depression in various functional gastrointestinal disorders: Do differences exist ? *Journal of Digestive Diseases*, *13*, 252–257. doi:10.1111/j.1751-2980.2012.00581.x

Harvey, A. G., & Gumport, N. B. (2015). Evidence-based psychological treatments for mental disorders: Modifiable barriers to access and possible solutions. *Behaviour Research and Therapy*, *68*, 1–12. doi:10.1016/j.brat.2015.02.004

Hasanah, C. I., Naing, L., & A Rahman, A. R. (2003). World Health Organization Quality of Life Assessment: Brief version in Bahasa Malaysia. *The Medical Journal of Malaysia*, *58*(1), 79–88. Retrieved from http://www.ncbi.nlm.nih.gov/pubmed/14556329

Hedman, E., Mörtberg, E., Hesser, H., Clark, D. M., Lekander, M., Andersson, E., & Ljótsson, B. (2013). Behaviour Research and Mediators in psychological treatment of social anxiety disorder: Individual cognitive therapy compared to cognitive behavioral group therapy. *Behaviour Research and Therapy*, *51*(10), 696–705. doi:10.1016/j.brat.2013.07.006

Hegel, M. T., Ravaris, C. L., & Ahles, T. A. (1994). Combined cognitive-behavioral and time limited alprazolam treatment of panic disorder. *Behavior Therapy*, *25*, 183–195.

Heimberg, R. G., Liebowitz, M. R., Hope, D. A., Schneier, F. R., Holt, C. S., Welkowitz, L. A., … Klein, D. F. (1998). Cognitive behavioral group therapy vs phenelzine therapy for social phobia: 12-week outcome. *Archives of General Psychiatry*, *55*, 1133–1141.

Heldt, E., Blaya, C., Isolan, L., Kipper, L., Teruchkin, B., Otto, M. W., … Manfro, G. G. (2006). Quality of life and treatment outcome in panic disorder: Cognitive behavior group therapy effects in patients refractory to medication treatment. *Psychotherapy and Psychosomatics*, *75*, 183–186.

doi:10.1159/000091776

Heldt, E., Gus Manfro, G., Kipper, L., Blaya, C., Isolan, L., & Otto, M. W. (2006). One-year follow-up of pharmacotherapy-resistant patients with panic disorder treated with cognitive-behavior therapy: Outcome and predictors of remission. *Behaviour Research and Therapy*, *44*, 657–665. doi:10.1016/j.brat.2005.05.003

Heldt, E., Gus Manfro, G., Kipper, L., Blaya, C., Maltz, S., Isolan, L., … Otto, M. W. (2003). Treating medication-resistant panic disorder: Predictors and outcome of cognitive-behavior therapy in a Brazilian public hospital. *Psychotherapy and Psychosomatics*, *72*, 43–48. doi:10.1159/000067188

Herbert, J. D., Rheingold, A. A., & Goldstein, S. G. (2002). Brief cognitive behavioral group therapy for social anxiety disorder. *Cognitive and Behavioral Practice*, *9*, 1–8.

Hermesh, H., Schapir, L., Marom, S., Skopski, R., & Barnea, E. (2015). Bruxism and oral parafunctional hyperactivity in social phobia outpatients. *Journal of Oral Rehabilitation*, *42*, 90–97. doi:10.1111/joor.12235

Hettema, J. M., Neale, M. C., & Kendler, K. S. (2001). A review and meta-analysis of the genetic epidemiology of anxiety disorders. *American Journal of Psychiatry*, *158*(October), 1568–1578.

Hinton, D. E., Barlow, D. H., Reis, R., & de Jong, J. (2016). *A transcultural model of the centrality of "Thinking a Lot" in psychopathologies across the globe and the process of localization: A Cambodian refugee example*. *Culture, Medicine and Psychiatry*. Springer US. doi:10.1007/s11013-016-9489-4

Hinton, D. E., Park, L., Hsia, C., Hofmann, S., & Pollack, M. H. (2009). Anxiety disorder presentations in Asian populations : A Review. *CNS Neuroscience & Therapeutics*, *15*, 295–303. doi:10.1111/j.1755-5949.2009.00095.x

Hinton, D. E., & Pollack, M. H. (2009). Introduction to the special issue: anxiety disorders in cross-cultural perspective. *CNS Neuroscience & Therapeutics*, *15*, 207–209. doi:10.1111/j.1755-5949.2009.00097.x

Hinton, D. E., Um, K., & Ba, P. (2001). Kyol goeu ('wind overload') part ii: Prevalence, characteristics, and mechanisms of kyol goeu and near-kyol goeu episodes of khmer patients attending a psychiatric clinic. *Transcultural Psychiatry*, *38*(December), 433–460.

Hoffman, D. L., Dukes, E. M., & Wittchen, H.-U. (2008). Human and economic burden of generalized anxiety disorder. *Depression and Anxiety*, *25*, 72–90. doi:10.1002/da

Hofmann, S. G. (2005). Perception of control over anxiety mediates the relation between catastrophic thinking and social anxiety in social phobia. *Behaviour Research and Therapy*, *43*, 885–895. doi:10.1016/j.brat.2004.07.002

Hofmann, S. G., Asnaani, A., Vonk, I. J. J., Sawyer, A. T., & Fang, A. (2012). The efficacy of cognitive behavioral therapy: A review of meta-analyses. *Cognitive Therapy and Research*, *36*(5), 427–440. doi:10.1007/s10608-012-9476-1.The

Hofmann, S. G., Smits, J. A. J., Rosenfield, D., Simon, N., Otto, M. W., Meuret, A. E., … Pollack, M. H. (2013). D-Cycloserine as an augmentation strategy with cognitive-behavioral therapy for social anxiety disorder. *American Journal of Psychiatry*, *170*(7), 751–758.

Hofstede, G. (1984). *Culture's consequences: International differences in work-related values.* Newsbury Park, CA: Sage Publications.

Hofstede, G. (2001). *Culture's consequences: Comparing values, behaviors, institutions, and organizations across nations.* (2nd editio.). Thousand Oaks, CA: Sage Publications.

Hollis, S., & Campbell, F. (1999). What is meant by intention to treat analysis? Survey of published randomised controlled trials. *BMJ*, *319*(7211), 670–674.

Hong, R. Y., & Cheung, M. W.-L. (2015). The structure of cognitive vulnerabilities to depression and anxiety: Evidence for a common core etiologic process based on a meta-analytic review. *Clinical Psychological Science*, *3*(6), 892–912. doi:10.1177/2167702614553789

Hooke, G. R., & Page, A. C. (2002). Predicting outcomes of group cognitive behavior therapy for patients with affective and neurotic disorders. *Behavior Modification*, *26*(5), 648–658. doi:10.1177/014544502236655

Hu, L. T., & Bentler, P. M. (1995). Evaluating Model Fit. In R. H. Hoyle (Ed.), *Structural Equation Modeling: Concepts, Issues, and Applications* (pp. pp.76–99). Thousand Oaks, CA: Sage Publications.

Hunsley, J., Elliott, K., & Therrien, Z. (2013). *The efficacy and effectiveness of psychological treatments*. Ottawa. Retrieved from http://www.cpa.ca/docs/File/Practice/TheEfficacyAndEffectivenessOfPsychologicalTreatments_web.pdf

IBM, C. (2012). IBM SPSS Statistics for Windows. Armonk, NY: IBM Corp.

Ibrahim, N., Osman, Z. J., Khin Ohmar, N. N. J., Ismail, S. I. F., Phang, C. K., Mukhtar, F., & Mohd Sidik, S. (2014). Reliability and factor structure of the General Health Questionnaire-12 among university students. *Malaysian Journal of Medicine and Health Sciences*, *10*(2), 53–60.

IPH, I. for P. H. (2008). *The third National Health and Morbidity Survey 2006 (NHMS III). Volume 1*. Kuala Lumpur: Ministry of Health Malaysia.

IPH, I. for P. H. (2011). *The fourth National Health and Morbidity Survey 2011 (NHMS IV 2011). Vol. II: Non-communicable diseases*. Kuala Lumpur:

Ministry of Health Malaysia.

Ismail, Z., Mohamad, M., Isa, M. R., Fadzil, M. A., Yassin, S. M., Ma, K. T., & Abu Bakar, M. H. (2015). Factors associated with anxiety among elderly hypertensive in primary care setting. *Journal of Mental Health*, *24*(1), 29–32. doi:10.3109/09638237.2014.971148

Jacobi, H., Wittchen, H.-U., Hölting, C., Höfler, M., Pfister, H., Müller, N., & Lieb, R. (2004). Prevalence , co-morbidity and correlates of mental disorders in the general population: Results from the German Health Interview and Examination Survey (GHS). *Psychological Medicine*, *34*, 1–15.

Jacobson, N. S., & Truax, P. (1991). Clinical significance: A statistical approach to denying meaningful change in psychotherapy research. *Journal of Consulting and Clinical Psychology*, *59*(1), 12–19.

Jardine, R., Martin, N. G., & Henderson, A. S. (1984). Genetic covariation between neuroticism and the symptoms of anxiety and depression. *Genetic Epidemiology*, *1*, 89–107.

Johnson, B. (2015). Psychotherapy: Understanding group therapy. *American Psychological Association*. Retrieved June 13, 2016, from http://www.apa.org/helpcenter/group-therapy.aspx

Johnson, P. L., Federici, L. M., & Shekhar, A. (2014). Etiology, triggers and neurochemical circuits associated with unexpected, expected, and laboratory-induced panic attacks. *Neuroscience and Biobehavioral Reviews*, 1–26. doi:10.1016/j.neubiorev.2014.07.027

Jöreskog, K. G., & Sörbom, D. (1993). LISREL 8: Structural equation modeling with the SIMPLIS command language. Chicago: Scientific Software International.

Jusoh, A. S., Abdullah, K. L., Ahmad, A., Ghazali, S., Mohd Shafie, Z., Mansor, M., … Haque, M. (2014). Anxiety symptoms and associated factors among outpatient antenatal mother: A cross-sectional study at University Malaya Medical Centre, Malaysia. *International Medical Journal*, *21*(6), 531–535.

Kader Maideen, S. F., Mohd Sidik, S., Rampal, L., & Mukhtar, F. (2015). Prevalence, associated factors and predictors of anxiety: A community survey in Selangor, Malaysia. *BMC Psychiatry*, *15*, 262–273. doi:10.1186/s12888-015-0648-x

Kaiser, H. (1970). A second generation Little Jiffy. *Psychometrika*, *35*, 401–415.

Kaiser, H. (1974). An index of factorial simplicity. *Psychometrika*, *39*, 31–36.

Kampman, M., Keijsers, G. P., Hoogduin, C. A., & Hendriks, G. J. (2002). A randomized, double-blind, placebo-controlled study of the effects of adjunctive paroxetine in panic disorder patients unsuccessfully treated with

cognitive-behavioral therapy alone. *Journal of Clinical Psychiatry*, *63*, 772–777.

Kanwar, A., Malik, S., Prokop, L. J., Sim, L. A., Feldstein, D., Wang, Z., & Murad, M. H. (2013). The association between anxiety disorders and suicidal behaviors: A systematic review. *Depression and Anxiety*, *30*, 917–929. doi:10.1002/da.22074

Kaplan, J. S., & Tolin, D. F. (2011). Exposure therapy for anxiety disorders. *Psychiatric Times*. Retrieved from http://www.psychiatrictimes.com/anxiety/exposure-therapy-anxiety-disorders

Karim, W. J. (1990). *Emotions of culture: A Malay perspective.* New York, NY: Oxford University Press.

Karlson, C. W., & Rapoff, M. A. (2009). Attrition in randomized controlled trials for pediatric chronic conditions. *Journal of Pediatric Psychology*, *34*(7), 782–793.

Katzman, M. A., Bleau, P., Blier, P., Chokka, P., Kjernisted, K., & Ameringen, M. Van. (2014). Canadian clinical practice guidelines for the management of anxiety , post-traumatic stress and obsessive-compulsive disorders. *BMC Psychiatry*, *14*(Suppl 1), 1–83.

Kaur, G., Tee, G. H., Ariaratnam, S., Krishnapillai, A. S., & China, K. (2013). Depression, anxiety and stress symptoms among diabetics in Malaysia: A cross-sectional study in an urban primary care setting. *BMC Family Practice*, *14*(69), 1–13.

Kaur, S., Zainal, N. Z., Low, W. Y., Ramasamy, R., & Sidhu, J. S. (2014). Factor structure of Hospital Anxiety and Depression Scale in Malaysian patients with coronary artery disease. *Asia-Pacific Journal of Public Health*, *27*(4), 450–460. doi:10.1177/1010539514533719

Kawaguchi, A., Watanabe, N., Nakano, Y., Ogawa, S., Suzuki, M., Kondo, M., … Akechi, T. (2013). Group cognitive behavioral therapy for patients with generalized social anxiety disorder in Japan: Outcomes at 1-year follow-up and outcome predictors. *Neuropsychiatric Disease and Treatment*, *9*, 267–275.

Kazantzis, N., Deane, F. P., & Ronan, K. R. (2000). Homework assignments in cognitive and behavioral therapy: A meta-analysis. *Clinical Psychological: Science and Practice*, *7*, 189–202.

Kazdin, A. E. (1999). The meanings and measurement of clinical significance. *Journal of Consulting and Clinical Psychology*, *67*(3), 332–339.

Kenardy, J., Evans, L., & Oei, T. P. S. (1989). Cognitions and heart rate in panic disorders during everyday activity. *Journal of Anxiety Disorders*, *3*(1), 33–43. doi:10.1016/0887-6185(89)90027-3

Kenardy, J., Oei, T. P. S., Ryan, P., & Evans, L. (1988). Attribution of panic attacks: Patient perspective. *Journal of Anxiety Disorders*, *2*(3), 243–251. doi:10.1016/0887-6185(88)90005-9

Kenardy, J., Oei, T. P. S., Weir, D., & Evans, M. (1993). Phobic anxiety in panic disorder: Cognition, heart rate, and subjective anxiety. *Journal of Anxiety Disorders*, *7*(4), 359–371. doi:10.1016/0887-6185(93)90031-F

Kendler, K. S., Heath, A. C., Martin, N. G., & Eaves, L. J. (1987). Symptoms of anxiety and symptoms of depression: Same genes, different environments? *Archives of General Psychiatry*, *44*, 451–457.

Kessler, R. C., Aguilar-Gaxiola, S., Alonso, J., Chatterji, S., Lee, S., Ustün, T. B., & Üstün, T. B. (2009). The WHO World Mental Health (WMH) Surveys. *Psychiatrie (Stuttgart, Germany)*, *6*(1), 5–9. Retrieved from http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=2995950&tool=pmcentrez&rendertype=abstract

Kessler, R. C., Amminger, G. P., Aguilar-Gaxiola, S., Alonso, J., Lee, S., & Ustün, T. B. (2007). Age of onset of mental disorders: A review of recent literature. *Current Opinion in Psychiatry*, *20*(4), 359–364. doi:10.1097/YCO.0b013e32816ebc8c

Kessler, R. C., Berglund, P., Demler, O., Jin, R., Merikangas, K. R., & Walters, E. E. (2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. *Archives of General Psychiatry*, *62*(June 2005), 593–602.

Kessler, R. C., McGonagle, K. A., Zhao, S., Nelson, C. B., Hughes, M., Eshleman, S., … Kendler, K. S. (1994). Lifetime and 12-month prevalence of DSM-III-R psychiatric disorders in the United States: Results from the National Comorbidity Survey. *Archives of General Psychiatry*, *51*, 8–19.

Kessler, R. C., Nelson, C. B., McGonagle, K. A., & Liu, J. (1996). Comorbidity of DSM-III-R major depressive disorder in the general population: Results from the US National Comorbidity Survey. *The British Journal of Psychiatry*, *168*(Suppl. 30), 17–30.

Kessler, R. C., Wai, T. C., Demler, O., & Walters, E. E. (2005). Prevalence, severity, and comorbidity of twelve-month DSM-IV disorders in the National Comorbidity Survey Replication (NCS- R). *Archives of General Psychiatry*, *62*(6), 617–627. doi:10.1001/archpsyc.62.6.617.Prevalence

Khawaja, N. G. (2003). Revisiting the factor structure of the Agoraphobic Cognitions Questionnaire and Body Sensations Questionnaire : A confirmatory factor analysis study. *Journal of Psychopathology and Behavioral Assessment*, *25*(1).

Khawaja, N. G., & Oei, T. P. (1998). Catastrophic cognitions in panic disorder with and without agoraphobia. *Clinical Psychology Review*, *18*(3), 341–65.

Retrieved from http://www.ncbi.nlm.nih.gov/pubmed/9564584

Khawaja, N. G., & Oei, T. P. S. (1992). Development of a catastrophic cognition questionnaire. *Journal of Anxiety Disorders*, *6*(4), 305–318. doi:10.1016/0887-6185(92)90002-O

Khawaja, N. G., Oei, T. P. S., & Baglioni, A. J. (1994). Modification of the catastrophic cognitions questionnaire (CCQ-M) for normals and patients: Exploratory and LISREL analyses. *Journal of Psychopathology and Behavioral Assessment*, *16*(4), 325–342. doi:10.1007/BF02239410

Kim, B. S. K., Atkinson, D. R., & Yang, P. H. (1999). The Asian Values Scale: Development, factor analysis, validation, and reliability. *Journal of Counseling Psychology*, *46*(3), 342–352. doi:10.1037//0022-0167.46.3.342

Kindt, M. (2014). A behavioural neuroscience perspective on the aetiology and treatment of anxiety disorders. *Behaviour Research and Therapy*, *62*, 24–36. doi:10.1016/j.brat.2014.08.012

Kirmayer, L. J. (2001). Cultural variations in the clinical presentation of depression and anxiety: Implications for diagnosis and treatment. *Journal of Clinical Psychiatry*, *62*(Suppl 13), 22–30.

Knapp, P., & Beck, A. T. (2008). Cognitive therapy: foundations, conceptual models, applications and research. *Revista Brasileira de Psiquiatria*, *30*(Suppl II), S54–64.

Kohn, R., Saxena, S., Levav, I., & Saraceno, B. (2004). The treatment gap in mental health care. *Bulletin of the World Health Organization*, *82*, 858–866.

Korompeli, A., Muurlink, O., Tzavara, C., Velonakis, E., Lemonidou, C., & Sourtzi, P. (2014). Influence of shiftwork on Greek nursing personnel. *Safety and Health at Work*, *5*, 73–79. doi:10.1016/j.shaw.2014.03.003

Koszycki, D., Benger, M., Shlik, J., & Bradwejn, J. (2007). Randomized trial of a meditation-based stress reduction program and cognitive behavior therapy in generalized social anxiety disorder. *Behaviour Research and Therapy*, *45*, 2518–2526. doi:10.1016/j.brat.2007.04.011

Kristensen, A. S., Mortensen, E. L., & Mors, O. (2009). The structure of emotional and cognitive anxiety symptoms. *Journal of Anxiety Disorders*, *23*(5), 600–8. doi:10.1016/j.janxdis.2009.01.009

Lamb, D. H., & Strand, K. H. (1980). The effect of a brief relaxation treatment for dental anxiety on measures of state and trait anxiety. *Journal of Clinical Psychology*, *36*(1), 270–275.

Lamplugh, C., Berle, D., Milicevic, D., & Starcevic, V. (2008). A pilot study of cognitive behaviour therapy for panic disorder augmented by panic surfing. *Clinical Psychology and Psychotherapy*, *15*, 440–445.

Land Public Transport Commission. (2013). Land public transport master plan: Greater Kuala Lumpur/Klang Valley. Retrieved June 5, 2015, from http://eps.mbpj.gov.my/SlideTod/MBPJ_GKLKV_Nov2013_SPAD.pdf

Lang, P. J. (1968). Fear reduction and fear behaviour. Problems in treating a construct. In J. M. Shliem (Ed.), *Research in psychotherapy* (pp. 332–368). Washington, DC: American Psychological Association.

Lang, P. J. (1977). Imagery in therapy: An information processing analysis of fear. *Behavior Therapy*, *8*, 862–886.

Last, C. G., & Hersen, M. (1989). *Handbook of anxiety disorders*. New York, NY: Pergamon General Psychology Series.

Lauber, C., & Rössler, W. (2007). Stigma towards people with mental illness in developing countries in Asia. *International Review of Psychiatry.*, *19*(2), 157–78. doi:10.1080/09540260701278903

Le Boeuf, A. (1986). Relaxation-induced anxiety in an agoraphobic population. *Perceptual Motor Skills*, *62*(3), 1986.

Lecrubier, Y., Sheehan, D. V, Weiller, E., Amorim, P., Bonora, I., Harnett Sheehan, K., & Dunbar, G. C. (1997). The Mini International Neuropsychiatric Interview (MINI). A short diagnostic structured interview: Reliability and validity according to the CIDI. *European Psychiatry*, *12*(5), 224–231. doi:10.1016/S0924-9338(97)83296-8

LeDoux, J. (2012). Rethinking the emotional brain. *Neuron*, *73*(4), 653–676. doi:10.1016/j.neuron.2012.02.004

LeDoux, J. E. (1996). *The emotional brain: The mysterious underpinnings of emotional life*. New York, NY: Simon & Schuster.

Lee, H. B., & Oei, T. P. S. (1994). Factor structure, validity, and reliability of the fear questionnaire in a Hong Kong Chinese population. *Journal of Psychopathology and Behavioral Assessment*, *16*(3), 189–199. doi:10.1007/BF02229207

Lee, K., Noda, Y., Nakano, Y., Ogawa, S., Kinoshita, Y., Funayama, T., & Furukawa, T. A. (2006). Interoceptive hypersensitivity and interoceptive exposure in patients with panic disorder: specificity and effectiveness. *BMC Psychiatry*, *6*(32), 1–10. doi:10.1186/1471-244X-6-32

Leonard, J. H., Ali, J. E., Vikram, M., Saraswathy, V., Hanif, F. M. R., Nihayah, M., & Ayiesah, R. (2013). Risk of mental health disorders among farmers involved in palm plantation occupation. *La Clinica Terapeutica*, *164*(5), 197–200. doi:10.7417/CT.2013.

Liebowitz, M. R., Heimberg, R. G., Schneier, F. R., Hope, D. A., Davies, S., Holt, C. S., … Klein, D. F. (1999). Cognitive-behavioral group therapy versus

phenelzine in social phobia: Long term outcome. *Depression and Anxiety*, *10*, 89–98.

Lilliecreutz, C., Josefsson, A., & Sydsjö, G. (2010). An open trial with cognitive behavioral therapy for blood- and injection phobia in pregnant women — a group intervention program. *Archives of Women's Mental Health*, *13*, 259–265. doi:10.1007/s00737-009-0126-x

Lim, Y.-J., Yu, B.-H., & Kim, J.-H. (2007). Korean Anxiety Sensitivity Index-Revised: Its factor structure,reliability, and validity in clinical and nonclinical samples. *Depression and Anxiety*, *341*, 331–341. doi:10.1002/da

Lin, L. P., Yee, W. S., & Selamat, N. W. (2011). Anxiety and depressive symptoms and health-related quality of life status among patients with cancer in Terengganu, Malaysia. *ASEAN Journal of Psychiatry*, *12*(1).

Little, T. D. (1997). Mean and covariance structures (MACS) analyses of cross-cultural data: Practical and theoretical issues. *Multivariate Behavioral Research*, *32*(1), 53.

Lívia, S., & Leonardo, F. F. (2011). A review of studies concerning treatment adherence of patients with anxiety disorders. *Patient Preference and Adherence*, *5*, 427–439.

Longley, S. L., Watson, D., Noyes, R., & Yoder, K. (2006). Panic and phobic anxiety: Associations among neuroticism , physiological hyperarousal , anxiety sensitivity , and three phobias. *Journal of Anxiety Disorders*, *20*, 718–739. doi:10.1016/j.janxdis.2005.11.005

Lua, P. L., & Wong, S. Y. (2012). The reliability of the Malay versions of Hospital Anxiety Depression Scale (HADS) and Mcgill Quality of Life Questionnaire (MQO) among a group of patients with cancer in Malaysia. *Malaysian Journal of Psychiatry*, *21*(1), 1–13.

Lubis, D. U., Jaya, E. S., Arjadi, R., Hanum, L., Astri, K., & Dwi Putri, M. D. (2013). Preliminary study on the effectiveness of short group cognitive behavioral therapy (GCBT) on Indonesian older adults. *PLOS ONE*, *8*(2), e57198. doi:10.1371/journal.pone.0057198

Lundgren, J., Carlsson, S. G., & Berggren, U. (2006). Relaxation versus cognitive therapies for dental fear — A psychophysiological approach. *Health Psychology*, *25*(3), 267–273. doi:10.1037/0278-6133.25.3.267

Ma, X., Xiang, Y., Cai, Z.-J., Lu, J.-Y., Li, S.-R., Xiang, Y.-Q., … Ungvari, G. S. (2009). Generalized anxiety disorder in China: Prevalence, sociodemographic correlates, comorbidity, and suicide attempts. *Perspectives in Psychiatric Care*, *45*(2), 119–128.

Maeda, N. (1975). Family circle, community, and nation in Malaysia. *Current Anthropology*, *16*(1), 163–166.

Magee, W. J. (1999). Effects of negative life experiences on phobia onset. *Social Psychiatry and Psychiatric Epidemiology*, *34*, 343–351.

Mahadeva, S., & Goh, K.-L. (2011). Anxiety, depression and quality of life differences between functional and organic dyspepsia. *Journal of Gastroenterology and Hepatology*, *26*(Suppl. 3), 49–52. doi:10.1111/j.1440-1746.2011.06656.x

Malaysian Psychiatric Association. (2005). Survey: Stigma keeps millions with anxiety disorders from treatment. Retrieved June 13, 2012, from http://www.psychiatry-malaysia.org/html/consensus_intro.shtml

Manjula, M., Prasadarao, P. S. D. V., Kumaraiah, V., & Raguram, R. (2014). Temporal patterns of change in panic disorder during cognitive behaviour therapy : An Indian study. *Behavioural and Cognitive Psychotherapy*, *42*(August 2013), 513–525. doi:10.1017/S1352465813000635

Manzoni, G. M., Pagnini, F., Castelnuovo, G., & Molinari, E. (2008). Relaxation training for anxiety: A ten-years systematic review with meta-analysis. *BMC Psychiatry*, *12*(8), 41–52. doi:10.1186/1471-244X-8-41

Marcellus, L. (2004). Are we missing anything? Pursuing research on attrition. *Canadian Journal of Nursing Research*, *36*, 82–98.

Marchand, A., Roberge, P., Primiano, S., & Germain, V. (2009). A randomized, controlled clinical trial of standard, group and brief cognitive- behavioral therapy for panic disorder with agoraphobia: A two-year follow-up. *Journal of Anxiety Disorders*, *23*, 1139–1147. doi:10.1016/j.janxdis.2009.07.019

Marks, I. M., & Mathews, A. M. (1979). Brief standard self-rating for phobic patients. *Behaviour Research and Therapy*, *17*(3), 263–7. Retrieved from http://www.ncbi.nlm.nih.gov/pubmed/526242

Marks, I. M., Swinson, R. P., Başoğlu, M., Kuch, K., Noshirvani, H., O'Sullivan, G., … Wickwire, K. (1993). Alprazolam and exposure alone and combined in panic disorder with agoraphobia: A controlled study in London and Toronto. *British Journal of Psychiatry*, *162*, 776–787.

Marks, M. P., Basoglu, M., Alkubaisy, T., & Sengun, T. S. (1991). Are anxiety symptoms and catastrophic cognitions directly related? *Journal of Anxiety Disorders*, *5*, 247–254.

Marom, S., Gilboa-Schectman, E., Aderka, I. M., Weizman, A., & Hermesh, H. (2009). Impact of depression on treatment effectiveness and gains maintenance in social phobia: A naturalistic study of cognitive behavior group therapy. *Depression and Anxiety*, *26*, 289–300. doi:10.1002/da.20390

Mastor, K. a., Jin, P., & Cooper, M. (2000). Malay culture and personality: A Big Five perspective. *American Behavioral Scientist*, *44*(1), 95–111. doi:10.1177/00027640021956116

McCarthy, O., Hevey, D., Brogan, A., & Kelly, B. D. (2013). Effectiveness of a cognitive behavioural group therapy (CBGT) for social anxiety disorder: Immediate and long-term benefits. *The Cognitive Behaviour Therapist*, *6*, 1–13. doi:10.1017/S1754470X13000111

McEvoy, P. M., Burgess, M. M., & Nathan, P. (2014). The relationship between interpersonal problems, therapeutic alliance, and outcomes following group and individual cognitive behaviour therapy. *Journal of Affective Disorders*, *157*, 25–32. doi:10.1016/j.jad.2013.12.038

McEvoy, P. M., Erceg-Hurn, D. M., Saulsman, L. M., & Thibodeau, M. A. (2015). Imagery enhancements increase the effectiveness of cognitive behavioural group therapy for social anxiety disorder: A benchmarking study. *Behaviour Research and Therapy*, *65*, 42–51. doi:10.1016/j.brat.2014.12.011

McEvoy, P. M., Grove, R., & Slade, T. (2011). Epidemiology of anxiety disorders in the Australian general population: Findings of the 2007 Australian National Survey of Mental Health and Wellbeing. *The Royal Australian and New Zealand College of Psychiatrists*, *45*, 957–967. doi:10.3109/00048674.2011.624083

McEvoy, P. M., & Nathan, P. (2007). Effectiveness of cognitive behavior therapy for diagnostically heterogeneous groups: A benchmarking study. *Journal of Consulting and Clinical Psychology*, *75*(2), 344–350. doi:10.1037/0022-006X.75.2.344

McEvoy, P. M., Nathan, P., & Norton, P. J. (2009). Efficacy of transdiagnostic treatments: A review of published outcome studies and future research directions. *Journal of Cognitive Psychotherapy: An International Quarterly*, *23*(1), 20–33. doi:10.1891/0889-8391.23.1.20

McGlynn, F. D., Moore, P. M., Rose, M. P., & Lazarte, A. (1995). Effects of relaxation training on fear and arousal during in vivo exposure to a caged snake among DSM-III-R simple (snake) phobics. *Journal of Behavioral Therapy and Experimental Psychiatry*, *26*(I), 1–8.

Mellor, D., Vinet, E. V, Xu, X., Mamat, N. H., Richardson, B., & Román, F. (2015). Factorial invariance of the DASS-21 among adolescents in four countries. *European Journal of Psychological Assessment*, *31*(2), 138–142. doi:10.1027/1015-5759/a000218

Mendlowicz, M. V., & Stein, M. B. (2000). Quality of life in individuals with anxiety disorders. *American Journal of Psychiatry*, *157*, 669–682.

Merikangas, K. R., Zhang, H., Avenevoli, S., Acharyya, S., Neuenschwander, M., & Angst, J. (2003). Longitudinal trajectories of depression and anxiety in a prospective community study: The Zurich Cohort Study. *Archives of General Psychiatry*, *60*, 993–1000.

Meulenbeek, P., Willemse, G., Smit, F., van Balkom, A., & Spinhoven, P. (2010).

Early intervention in panic: pragmatic randomised controlled trial. *The British Jour*, *196*, 326–331. doi:10.1192/bjp.bp.109.072504

Michael, T. (2004). Epidemiology of anxiety disorders, 2–6.

Michalowski, J. M., & Holas, P. (2013). Polish adaptation and validation of the Agoraphobic Cognitions Questionnaire and the Body Sensations Questionnaire. *Psychiatria Polska*, *47*(4), 679–687.

Michelson, L., & Mavissakalian, M. (1983). Temporal stability of self-report measures in agoraphobia research. *Behaviour Research and Therapy*, *21*, 695–698.

Mineka, S., Watson, D., & Clark, L. A. (1998). Comorbidity of anxiety and unipolar mood disorders. *Annual Review of Psychology*, *49*, 377–412.

Ministry of Federal Territories. (2014). Greater Kuala Lumpur / Klang Valley. *Official Website*. Retrieved June 2, 2015, from http://app.kwp.gov.my/greaterklkv/home/

Mirza, I., & Jenkins, R. (2004). Risk factors, prevalence, and treatment of anxiety and depressive disorders in Pakistan: Systematic Review. *BMJ*, *328*(April), 1–5.

Moffitt, T. E., Caspi, A., Taylor, A., Kokaua, J., Milne, B. J., Polanczyk, G., & Poulton, R. (2010). How common are common mental disorders? Evidence that lifetime prevalence rates are doubled by prospective versus retrospective ascertainment. *Psychological Medicine*, *40*, 899–909. doi:10.1017/S0033291709991036

MOH Ministry of Health Singapore. (2015). *MOH clinical practice guidelines 1/2015: Anxiety disorders (Executive summary)*. Singapore. Retrieved from https://www.moh.gov.sg/content/dam/moh_web/HPP/Doctors/cpg_medical/current/2015/anxiety_disorders/cpg_Anxiety Disorders Apr 2015 - Summary Card.pdf

Mohd Sidik, S., Arroll, B., & Goodyear-Smith, F. (2011). Prevalence of anxiety among women attending a primary care clinic in Malaysia. *British Journal of General Practice*, (June), 326–332. doi:10.3399/bjgp11X577990.Conclusion

Mohd Sidik, S., Arroll, B., & Goodyear-Smith, F. (2012). Validation of the GAD-7 (Malay version) among women attending a primary care clinic in Malaysia. *Journal of Primary Health Care*, *4*(1), 5–12.

Mohd. Zain, A. (2001). Mental Illness and Malay Culture: A Study of Kelantan Malays. In A. Haque (Ed.), *Mental Health in Malaysia: Issues and Concerns* (pp. 197–219). Kuala Lumpur: University of Malaya Press.

Moher, D., Hopewell, S., Schulz, K. F., Montori, V., Gøtzsche, P. C., Devereaux, P. J., … Altman, D. G. (2012). CONSORT 2010 explanation and elaboration:

Updated guidelines for reporting parallel group randomised trials. *International Journal of Surgery*, *10*(1), 28–55. doi:10.1016/j.ijsu.2011.10.001

Morgan, H., & Raffle, C. (1999). Does reducing safety behaviours improve treatment response in patients with social phobia? *Australian and New Zealand Journal of Psychiatry*, *33*, 503–510.

Mörtberg, E., Berglund, G., & Sundin, Ö. (2005). Intensive cognitive behavioural group treatment for social phobia: A pilot study. *Cognitive Behaviour Therapy*, *34*(1), 41–49. doi:10.1080/16506070510010657

Mühlberger, A., Hermann, M. J., Wiedemann, G. C., Ellgring, H., & Pauli, P. (2001). Repeated exposure of flight phobics to flights in virtual reality. *Behaviour Research and Therapy*, *39*(9), 1033–1050.

Mukhtar, F. (2009a). Demonstrasi latihan relaksasi: Progressive muscle relaxation. Kubang Kerian, Kelantan, Malaysia: Pusat Pengajian Sains Kesihatan, Universiti Sains Malaysia.

Mukhtar, F. (2009b). Latihan imaginasi dan autogenik: Versi Bahasa Melayu. Kubang Kerian, Kelantan, Malaysia: Pusat Pengajian Sains Kesihatan, Universiti Sains Malaysia.

Mukhtar, F. (2009c). Progressive muscle relaxation: Versi Bahasa Malaysia untuk golongan dewasa. Kubang Kerian, Kelantan, Malaysia: Pusat Pengajian Sains Kesihatan, Universiti Sains Malaysia.

Mukhtar, F., Abdul Khaiyom, J. H., & Low, J. L. (2013). *Jom-lah relaks*. Kajang, Selangor, Malaysia: Aras Mega (M) Sdn. Bhd.

Mukhtar, F., Abu Bakar, A. K., Mat Junus, M., Awaludin, A., Abdul Aziz, S., Midin, M., … Ahmad, N. A. (2012). A preliminary study on the specificity and sensitivity values and inter-rater reliability of MINI International Neuropsychiatric Interview (MINI) in sensitivity values and inter-rater reliability. *ASEAN Journal of Psychiatry*, *13*(2).

Mukhtar, F., & Oei, T. P. S. (2008). Exploratory and confirmatory factor validation and psychometric properties of the Beck Depression Inventory for Malays (BDI-Malay) in Malaysia. *Malaysian Journal of Psychiatry*, *17*(1), Online Early.

Mukhtar, F., & Oei, T. P. S. (2010). Exploratory and confirmatory factor validation of the Dysfunctional Attitude Scale for Malays (DAS-Malay) in Malaysia. *Asian Journal of Psychiatry*, *3*(3), 145–51. doi:10.1016/j.ajp.2010.07.007

Mukhtar, F., & Oei, T. P. S. (2011). *Terapi kognitif tingkah laku bagi rawatan anziety*. UPM Serdang, Selangor, Malaysia: Penerbit Universiti Putra Malaysia.

Mukhtar, F., Oei, T. P. S., & Mohd Yaacob, M. J. (2011). Effectiveness of group Cognitive Behaviour Therapy augmentation in reducing negative cognitions in the treatment of depression in Malaysia. *ASEAN Journal of Psychiatry*, *12*(1), 50–65. doi:10.1016/j.ajp.2011.04.002

Mukhtar, F., & Zulkefly, N. S. (2011). The Beck Anxiety Inventory for Malays (BAI-Malay): A preliminary study on psychometric properties. *Malaysian Journal of Medicine and Health Sciences*, *7*(January), 73–79.

Murphy, M. T., Michelson, L. K., Marchione, K., Marchione, N., & Testa, S. (1998). The role of self-directed in vivo exposure in combination with cognitive therapy, relaxation training, or therapist-assisted exposure in the treatment of panic disorder with agoraphobia. *Journal of Anxiety Disorders*, *12*(2), 117–138.

Musa, R., Abu Bakar, A. Z., & Ali Khan, U. (2012). Two-year outcomes of methadone maintenance therapy at a clinic in Malaysia. *Asia-Pacific Journal of Public Health*, *24*(5), 826–32. doi:10.1177/1010539511404396

Musa, R., Fadzil, M. A., & Zain, Z. (2007). Translation, validation and psychometric properties of Bahasa Malaysia version of the Depression Anxiety and Stress Scales (DASS). *ASEAN Journal of Psychiatry*, *8*(2), 82–89.

Musa, R., Ramli, R., Abdullah, K., & Sarkarsi, R. (2011). Concurrent validity of the depression and anxiety components in the Bahasa Malaysia version of the Depression Anxiety and Stress Scales (DASS). *ASEAN Journal of Psychiatry*, *12*(1), 1–5.

Nakano, Y., Lee, K., Noda, Y., Ogawa, S., Kinoshita, Y., Funayama, T., & Watanabe, N. (2008). Cognitive-behavior therapy for Japanese patients with panic disorder: Acute phase and one-year follow-up results. *Psychiatry and Clinical Neuroscience*, *62*, 313–321. doi:10.1111/j.1440-1819.2008.01799.x

Nathan, P. E., Stuart, S. P., & Dolan, S. L. (2000). Research on psychotherapy efficacy and effectiveness: between Scylla and Charybdis? *Psychological Bulletin*, *126*(6), 964–981. doi:10.1037/0033-2909.126.6.964

Nathan, P., & Gorman, J. (2002). *A guide to treatments that works* (2nd ed.). New York, NY: Oxford University Press.

National Institute of Mental Health (NIMH). (2005). Facts about anxiety disorders. Retrieved June 6, 2012, from www.nimh.nih.gov/publicat/numbers.cfm

Néron, S., Lacroix, D., & Chaput, Y. (1995). Group vs individual cognitive behaviour therapy in panic disorder: An open clinical trial with a six month follow-up. *Canadian Journal of Behavioural Science*, *27*(4), 379–392.

Newby, J. M., McKinnon, A., Kuyken, W., Gilbody, S., & Dalgleish, T. (2015). Systematic review and meta-analysis of transdiagnostic psychological treatments for anxiety and depressive disorders in adulthood. *Clinical*

Psychology Review, 40, 91–110. doi:10.1016/j.cpr.2015.06.002

Ng, A. L. O. (2012). Clinical psychology in Malaysia: Issues and opportunities. In N. M. Noor & M. A. Dzulkifli (Eds.), *Psychology in Malaysia: Current Research and Future Directions* (pp. 182–220).

Ng, A. L. O. (2015). Clinical psychology in Malaysia: Roles and issues. In S. Haque & E. Sheppard (Eds.), *Culture and Cognition: A Collection of Critical Essays*. Great Britain: Peter Lang.

Ng, C. H. (1997). The stigma of mental illness in Asian cultures. *Australian and New Zealand Journal of Psychiatry., 31*, 382–390. doi:10.3109/00048679709073848

Ng, J., Zaidun, S., Hong, S., Tahrin, M., Au Yong, A., & Khan, A. (2009). Determining the attitudes of a rural community in Penang, Malaysia towards mental illness and community-based psychiatric care. *The Internet Journal of Third World Medicine, 9*(1).

NICE National Institute for Health and Care Excellence. (2011). *Generalised anxiety disorder and panic disorder in adults: Management*. Retrieved from http://www.nice.org.uk/guidance/cg113/chapter/1-recommendations

Norcross, J., Beutler, L., & Levant, R. (2006). *Evidence-based practices in mental health*. Washington, DC: American Psychological Association.

Norton, P. J. (2008). An open trial of a transdiagnostic cognitive-behavioral group therapy for anxiety disorder. *Behavior Therapy, 39*, 242–250.

Norton, P. J. (2012a). A randomized clinical trial of transdiagnostic cognitve-behavioral treatments for anxiety disorder by comparison to relaxation training. *Behavior Therapy*, *43*, 506–517. doi:10.1016/j.beth.2010.08.011

Norton, P. J. (2012b). Transdiagnostic group CBT for anxiety disorder: Efficacy, acceptability, and beyond. *Spanish Journal of Clinical Psychology*, *17*, 205–217.

Norton, P. J., & Barrera, T. L. (2012). Transdiagnostic versus diagnosis-specific CBT for anxiety disorders: A preliminary randomized controlled noninferiority trial. *Depression and Anxiety*, *29*, 874–882. doi:10.1002/da.21974

Norton, P. J., Barrera, T. L., Mathew, A. R., Chamberlain, L. D., Szafranski, D. D., Reddy, R., & Smith, A. H. (2013). Effect of transdiagnostic CBT for anxiety disorders on comorbid diagnoses. *Depression and Anxiety, 30*, 168–173. doi:10.1002/da.22018

Norton, P. J., Hayes, S. A., & Hope, D. A. (2004). Effects of a transdiagnostic group treatment for anxiety on secondary depression. *Depression and Anxiety, 20*, 198–202. doi:10.1002/da.20045

Norton, P. J., Hayes, S. A., & Springer, J. R. (2008). Transdiagnostic cognitive–behavioral group therapy for anxiety: Outcome and process. *International Journal of Cognitive Therapy*, *1*(3), 266–279.

Norton, P. J., & Hope, D. A. (2005). Preliminary evaluation of a broad-spectrum cognitive-behavioral group therapy for anxiety. *Journal of Behavior Therapy*, *36*, 79–97. doi:10.1016/j.jbtep.2004.07.002

Norton, P. J., & Philipp, L. M. (2008). Transdiagnostic approaches to the treatment of anxiety disorders: A quantitative review. *Psychotherapy Theory, Research, Practice, Training*, *45*(2), 214–226. doi:10.1037/0033-3204.45.2.214

Norton, P. J., & Price, E. C. (2007). A meta-analytic review of adult cognitive-behavioral treatment outcome across the anxiety disorders. *The Journal of Nervous and Mental Disease*, *195*(6), 521–531. doi:10.1097/01.nmd.0000253843.70149.9a

Nunnally, J., & Bernstein, I. (1994). *Psychometric theory*. New York: McGraw-Hill.

O'Connor, K., Marchand, A., Brousseau, L., Aardema, F., Mainguy, N., Landry, P., … Bouthillier, D. (2008). Cognitive-behavioural, pharmacological and psychosocial predictors of outcome during tapered discontinuation of benzodiazepine. *Clinical Psychology and Psychotherapy*, *15*, 1–14.

Oei, T. P. S. (2002a). *A group CBT manual for anxiety, panic and phobia.* (3rd editio.). Brisbane, Australia: CBT Unit, Toowong Private Hospital.

Oei, T. P. S. (2002b). *CBT anxiety/panic disorder program workbook*. Toowong, Queensland, Australia: Toowong Private Hospital.

Oei, T. P. S., & Boschen, M. J. (2009). Clinical effectiveness of a cognitive behavioral group treatment program for anxiety disorders: A benchmarking study. *Journal of Anxiety Disorders*, *23*, 950–957. doi:10.1016/j.janxdis.2009.06.004

Oei, T. P. S., & Browne, A. (2006). Components of group processes: Have they contributed to the outcome of mood and anxiety disorder patients in a group cognitive-behaviour therapy program? *American Journal of Psychotherapy*, *60*(1), 53–71.

Oei, T. P. S., & Dingle, G. (2008). The effectiveness of group cognitive behaviour therapy for unipolar depressive disorders. *Journal of Affective Disorders*, *107*, 5–21.

Oei, T. P. S., & Llamas, M. Y. E. (1997). Does concurrent drug intake affect the long-term outcome of group cognitive behaviour therapy in panic disorder with or without agoraphobia? Behaviour research and. *Behaviour Research and Therapy*, *35*(9), 851–857.

Oei, T. P. S., & McAlinden, N. M. (2014). Changes in quality of life following group CBT for anxiety and depression in a psychiatric outpatient clinic. *Psychiatry Research, 220*, 1012–1018. doi:10.1016/j.psychres.2014.08.036

Oei, T. P. S., Moylan, A., & Evans, L. (1991). Validity and clinical utility of the Fear Questionnaire for anxiety disorder patients. *Psychological Assessment, 3*, 391–397.

Oei, T. P. S., & Mukhtar, F. (2008). Exploratory and confirmatory factor validation and psychometric properties of the Automatic Thoughts Questionnaire for Malays (ATQ-Malay) in Malaysia. *Hong Kong Journal of Psychiatry, 18*, 92–100.

Oei, T. P. S., Sawang, S., Yong, W. G., & Mukhtar, F. (2013). Using the Depression Anxiety Stress Scale 21 (DASS-21) across cultures. *International Journal of Psychology*, *48*(6), 1018–1029.

Öhman, A., Carlsson, K., Lundqvist, D., & Ingvar, M. (2007). On the unconscious subcortical origin of human fear. *Physiology and Behavior, 92*, 180–185. doi:10.1016/j.physbeh.2007.05.057

Öhman, A., Flynkt, A., & Lyndqvist, D. (2000). Unconscious emotion: Evolutionary perspectives, psychophysiological data and neuropsychological mechanisms. In R. D. Lane & L. Nadel (Eds.), *The Cognitive Neuroscience of Emotion* (pp. 296–327). New York, NY: Oxford University Press.

Olatunji, B. O., Cisler, J. M., & Tolin, D. F. (2007). Quality of life in the anxiety disorders: A meta-analytic review. *Clinical Psychology Review, 27*, 572–581.

Olesen, J., Gustavsson, A., Svensson, M., Wittchen, H.-U., & Jönsson, B. (2012). The economic cost of brain disorders in Europe. *European Journal of Neurology, 19*, 155–162. doi:10.1111/j.1468-1331.2011.03590.x

Ooi, K. G. (2009). *Historical Dictionary of Malaysia*. Maryland, USA: Scarecrow Press.

Ormrod, J. (1995). Short and long-term effectiveness of group anxiety management training. *Behavioural and Cognitive Psychotherapy, 23*, 63–70.

Ormrod, J. E. (1999). *Human learning* (3rd ed.). New Jersey: Prentice-Hall.

Osborne, J. W., & Overbay, A. (2004). The power of outliers (and why researchers should always check for them). *Practical Assessment, Research & Evaluation, 9*(6), Online. Retrieved from Retrieved July 12, 2015 from http://PAREonline.net/getvn.asp?v=9&n=6

Osman, A., Barrios, F. X., Osman, J. R., & Markway, K. (1993). Further psychometric evaluation of the Fear Questionnaire: Responses of college students. *Psychological Reports, 73*, 1258–1266.

Osman, A., Gutierrez, P. M., Barrios, F. X., Kopper, B. A., & Chiros, C. E. (1998). The Social Phobia and Social Interaction Anxiety Scales: Evaluation of psychometric properties. *Journal of Psychopathology and Behavioral Assessment, 20,* 249–264.

Öst, L.-G. (2008). Cognitive behavior therapy for anxiety disorders: 40 years of progress. *Nordic Journal of Psychiatry*, *62*(Suppl 47), 5–10. doi:10.1080/08039480802315590

Öst, L.-G., & Breitholtz, E. (2000). Applied relaxation vs. cognitive therapy in the treatment of generalized anxiety disorder. *Behaviour Change, 38*, 777–790.

Öst, L.-G., & Westling, B. E. (1995). Applied relaxation vs cognitive behavior therapy in the treatment of panic disorder. *Behaviour Research and Therapy*, *33*(2), 145–158.

Öst, L.-G., Westling, B. E., & Hellström, K. (1993). Applied relaxation, exposure in vivo and cognitive methods in the treatment of panic disorder with agoraphobia. *Behaviour Research and Therapy*, *31*(4), 383–394.

Otto, M. W., Pollack, M. H., & Maki, K. M. (2000). Empirically supported treatments for panic disorder: Costs, benefits, and stepped care. *Journal of Consulting and Clinical Psychology*, *68*(4), 556–563. doi:10.1037//0022-006X.68A556

Otto, M. W., Pollack, M. H., Penava, S. J., & Zucker, B. G. (1999). Group cognitive-behavior therapy for patients failing to respond to pharmacotherapy for panic disorder: A clinical case series. *Behaviour Research and Therapy*, *37*, 763–770.

Otto, M. W., Pollack, M. H., & Sabatino, S. A. (1996). Maintenance of remission following cognitive behavior therapy for panic disorder: Possible deleterious effects of concurrent medication treatment. *Behavior Therapy*, *27*, 473–482.

Otto, M. W., Pollack, M. H., Sachs, G. S., Reiter, S. R., Meltzer-Brody, S., & Rosenbaum, J. F. (1993). Discontinuation of benzodiazepine treatment: Efficacy of cognitive-behavioral therapy for patients with panic disorder. *American Journal of Psychiatry*, *150*, 1485–1490.

Otto, M. W., Smits, J. A. J., & Reese, H. E. (2005). Combined psychotherapy and pharmacotherapy for mood and anxiety disorders in adults: Review and analysis. *Clinical Psychology: Science and Practice*, *12*(1), 72–86. doi:10.1093/clipsy/bpi009

Padesky, C. A., & Greenberger, D. (1995). *Clinician's Guide to Mind Over Mood*. New York, NY: The Guilford Press.

Page, A. C., & Hooke, G. R. (2003). Outcomes for depressed and anxious inpatients discharged before or after group cognitive behavior therapy. *The Journal of Nervous and Mental Disease*, *191*(10), 653–659.

doi:10.1097/01.nmd.0000092174.38770.e9

Pan, Y., & de la Puente, M. (2005). *Census Bureau guideline for the translation of data collection instruments and supporting materials: Documentation on how the guideline was developed*. *Survey Methodology*. Washington, DC. Retrieved from https://www.census.gov/srd/papers/pdf/rsm2005-06.pdf

Parker, G., Cheah, Y. C., & Roy, K. (2001). Do the Chinese somatize depression? A cross-cultural study. *Social Psychiatry and Psychiatric Epidemiology*, *36*, 287–293.

Pedhazur, E. J. (1997). *Multiple regression in behavioral research: Explanation and prediction*. Fort Worth, TX: Harcourt Brace College Publishers.

Pedhazur, E. J., & Schmelkin, A. P. (1991). *Measurement, design, and analysis: An integrated approach.* Hillsdale, NJ: Lawrence Erlbaum.

Penninx, B. W. J. H., Nolen, W. a., Lamers, F., Zitman, F. G., Smit, J. H., Spinhoven, P., … Beekman, A. T. F. (2011). Two-year course of depressive and anxiety disorders: Results from the Netherlands Study of Depression and Anxiety (NESDA). *Journal of Affective Disorders*, *133*(1-2), 76–85. doi:10.1016/j.jad.2011.03.027

Pereyra Girardi, C. I., Ofman, S. D., Cófreces, P., & y Stefani, D. (2014). Traducción y validación del Cuestionario de Cogniciones Catastróficas Modificado (CCQ-M): Un estudio preliminar en sujetos varenos Argentinos. *Revista Argentina de Ciencias Del Comportamiento*, *6*(1), 6–14.

Phelps, E. a., & LeDoux, J. E. (2005). Contributions of the amygdala to emotion processing: From animal models to human behavior. *Neuron*, *48*, 175–187. doi:10.1016/j.neuron.2005.09.025

Ployhardt, R. E., & Oswald, F. L. (2004). Application of mean and covariance structure analysis: integrating correlational and experimental approaches. *Organizational Research Methods*, *7*(1), 27–65.

Pollack, M. H., Otto, M. W., Kaspi, S. P., Hammerness, P. G., & Rosenbaum, J. F. (1994). Cognitive-behavior therapy for treatment-refractory panic disorder. *Journal of Clinical Psychiatry*, (55), 200–205.

Ponnusamy, S., & Shazli Ezzat, G. (2005). Cognitive-behavioral treatment of panic disorder with agoraphobia. *Jurnal Sains Kesihatan Malaysia*, *3*(2), 67–78.

Power, K. G., Simpson, R. J., Swanson, V., & Wallace, L. A. (1990). Controlled comparison of pharmacological and psychological treatment of generalized anxiety disorder in primary care. *British Journal of General Practice*, *40*, 289–294.

Presser, S., Couper, M. P., Lessler, J. T., Martin, E., Martin, J., Rothgeb, J. M., & Singer, E. (2004). Methods for testing and evaluating survey questions.

Public Opinion Quarterly, *68*(1), 109–130.

Priscilla, D., Hamidin, A., Azhar, M. Z., Noorjan, K. O. N., Salmiah, M. S., & Bahariah, K. (2011). Anxiety disorders and quality of life among patients with hematological cancer in a Malaysian hospital. *Malaysian Journal of Medicine and Health Sciences*, *7*(2), 9–16.

Pusat Rujukan Persuratan Melayu. (2008). Sengsara. *Dewan Bahasa dan Pustaka*. Retrieved from http://prpm.dbp.gov.my/Search.aspx?k=sengsara

Quek, K. F., Low, W. Y., Razack, A. H., Chua, C. B., & Loh, C. S. (2002). Reliability and validity of the Malay version of the General Health Questionnaire (GHQ-12) among urological patients. *Medical Journal of Malaysia*, *57*(2), 169–177.

Quek, K. F., Low, W. Y., Razack, A. H., Loh, C. S., & Chua, C. B. (2004). Reliability and validity of the Spielberger State-Trait Anxiety Inventory (STAI) among urological patients: A Malaysian study. *Medical Journal of Malaysia*, *59*(2), 258–267.

Quek, K. F., Sallam, A. A., Ng, C. H., & Chua, C. B. (2008). Prevalence of sexual problems and its association with social, psychological and physical factors among men in a Malaysian population: A cross-sectional study. *The Journal of Sexual Medicine*, *5*, 70–76. doi:10.1111/j.1743-6109.2006.00423.x

Rachman, S. (1977). The conditioning theory of fear-acquisition: A critical examination. *Behaviour Research and Therapy*, *15*, 375–387.

Rajiah, K., & Saravanan, C. (2014). The effectiveness of psychoeducation and systematic desensitization to reduce test anxiety among first-year pharmacy students. *American Journal of Pharmaceutical Education*, *78*(9), 1–7.

Ramli, M., Rosnani, S., & Aidil Faszrul, A. R. (2012). Psychometric profile of Malaysian version of the Depressive, Anxiety and Stress Scale 42-item (DASS-42). *Malaysian Journal of Psychiatry*, *21*(1), 1–7.

Ramli, M., Salmiah, M. A., & Nurul Ain, M. (2009). Validation and psychometric properties of Bahasa Malaysia version of the Depression Anxiety and Stress Scale (DASS) among diabetic patients. *Malaysian Journal of Psychiatry*, *18*(2), 1–6.

Rapee, R. M. (1987). The psychological treatment of panic attacks: Theoretical conceptualization and review of evidence. *Clinical Psychology Review*, *7*, 427–438.

Rapee, R. M. (1993). Psychological factors in panic disorder. *Advances in Behaviour Research and Therapy*, *15*, 85–102.

Rapee, R. M., & Heimberg, R. G. (1997). A cognitive-behavioral social model phobia of anxiety in social phobia. *Behaviour Research and Therapy*, *35*(8),

741–756.

Rashid, R., Ramli, R., Wan Mahmud, W. A., Ahmad Zahari, M. M., Maisarah, M., Wan Azlinda Irnee, W. H., … Habil, M. H. (2013). Anxiety, depression and alcohol use among clients seeking treatment in government drug rehabilitation centre, Malaysia. *Journal of Health and Translational Medicine*, *16*, 4.

Razali, S. M. (1989). Somatization of depression in psychiatric out-patients. *Medical Journal of Malaysia*, *44*(4), 275–282.

Razali, S. M. (1997). Depression and witchcraft induced psychosomatic symptoms. *European Psychiatry*, *12*, 420–421.

Razali, S. M. (2000). Masked depression: An ambiguous diagnosis. *Australian and New Zealand Journal of Psychiatry*, *34*, 167.

Razali, S. M., Hasanah, C. I., Aminah, K., & Subramaniam, K. (1998). Religious-sociocultural psychotherapy in patients with anxiety and depression. *Australian and New Zealand Journal of Psychiatry*, *32*, 867–872.

Razali, S. M., Yunus, N. N. A. M., & Kumaraswamy, N. (2002). Relationship between alexithymia, personality and somatic symptoms. *International Medical Journal*, *9*(2), 117–120.

Razran, G. (1961). The observable unconscious and the inferable conscious in current Soviet psychophysiology: Interoceptive conditioning, semantic conditioning, and the orienting reflex. *Psychological Review*, *68*(2), 81–147.

Rees, C. S., McEvoy, P., & Nathan, P. R. (2005). Relationship between homework completion and outcome in cognitive behaviour therapy. *Cognitive Behaviour Therapy*, *34*(4), 242–247. doi:10.1080/16506070510011548

Reinecke, A., Thilo, K., Filippini, N., Croft, A., & Harmer, C. J. (2014). Predicting rapid response to cognitive-behavioural treatment for panic disorder: The role of hippocampus, insula, and dorsolateral prefrontal cortex. *Behaviour Research and Therapy*, *62*, 120–128. doi:10.1016/j.brat.2014.07.017

Roberge, P., Marchand, A., Reinharz, D., & Savard, P. (2008). Cognitive-behavioral treatment for panic disorder with agoraphobia: A randomized, controlled trial and cost-effectiveness analysis. *Behavior Modification*, *32*(3), 333–351.

Rodebaugh, T. L., & Heimberg, R. G. (2005). Combined treatment for social anxiety disorder. *Journal of Cognitive Psychotherapy: An International Quarterly*, *19*(4), 331–346.

Rosenberg, N. K., & Hougaard, E. (2005). Cognitive-behavioural group treatment of panic disorder and agoraphobia in a psychiatric setting: A naturalistic study of effectiveness. *Nordic Journal of Psychiatry*, *59*(3), 198–204. doi:10.1080/08039480510027670

Rosser, S., Erskine, A., & Crino, R. (2004). Pre-existing antidepressants and the outcome of group cognitive behaviour therapy for social phobia. *Australian and New Zealand Journal of Psychiatry.*, *38*, 233–239.

Rowa, K., & Antony, M. M. (2005). Psychological treatments for social phobia. *Canadian Journal of Psychiatry*, *50*(6), 308–316.

Rubin, A., & Babbie, E. (2001). *Research methods for social work*. Belmont, CA: Wadsworth/Thomson Learning.

Salina, M., Ng, C. G., Gill, J. S., Chin, J. M., Chin, C. J., & Yap, W. F. (2008). Social anxiety problem among medical students in University Malaya Medical Center (UMMC) - A cross-sectional study. *Malaysian Journal of Psychiatry*, *17*(2), 1–6.

Salkovskis, P. M. (1988). Phenomenology, Assessment and the Cognitive Model of Panic. In S. Rachman & J. D. Maser (Eds.), *Panic: Psychological perspectives* (pp. pp. 111–135). Hillsdale, NJ: Erlbaum.

Sánchez-Meca, J., Rosa-Alcázar, A. I., Marín-Martínez, F., & Gómez-Conesa, A. (2010). Psychological treatment of panic disorder with or without agoraphobia: A meta-analysis. *Clinical Psychology Review*, *30*(1), 37–50. doi:10.1016/j.cpr.2009.08.011

Saniah, A. R., & Zainal, N. Z. (2010). Anxiety, depression and coping strategies in breast cancer patients on chemotherapy. *Malaysian Journal of Psychiatry*, *19*(2), 1–6.

Santos, E., Palma, H., Nápoles, G., Romero, R., Gabriel, R., Grilo, V., & Pascoal, C. (2011). Earn your wings program: Description and efficacy of an intensive fear of flying treatment program. *Aviation Psychology and Applied Human Factors*, *1*(2), 61–69. doi:10.1027/2192-0923/a000010

Saravanan, C., & Wilks, R. (2014). Medical students' experience of and reaction to stress: The role of depression and anxiety. *The Scientific World Journal*, *2014*, 1–8.

Schienle, A., Schäfer, A., Hermann, A., Rohrmann, S., & Vaitl, D. (2007). Symptom provocation and reduction in patients suffering from spider phobia: An fMRI study on exposure therapy. *European Archives of Psychiatry and Clinical Neuroscience*, *257*, 486–493. doi:10.1007/s00406-007-0754-y

Schmidt, N. B., Buckner, J. D., Pusser, A., Woolaway-Bickel, K., Preston, J. L., & Norr, A. (2012). Randomized controlled trial of False Safety Behavior Elimination Therapy: A unified cognitive behavioral treatment for anxiety psychopathology. *Behavior Therapy*, *43*, 518–532. doi:10.1016/j.beth.2012.02.004

Schmidt, N. B., Wollaway-Bickel, K., Trakowski, J. H., Santiago, H. T., & Vasey, M. (2002). Antidepressant discontinuation in the context of cognitive

behavioral treatment for panic disorder. *Behaviour Research and Therapy*, *40*, 67–73.

Scholing, A., & Emmelkamp, P. M. G. (1996). Treatment of generalized social phobia: Results at long-term follow-up. *Behaviour Research and Therapy*, *34*, 447–452.

Scholten, W. D., Batelaan, N. M., Jlm, A., Balkom, V., Wjh, B., Smit, J. H., & Oppen, P. Van. (2013). Recurrence of anxiety disorders and its predictors. *Journal of Affective Disorders*, *147*(1-3), 180–185. doi:10.1016/j.jad.2012.10.031

Schulz, K. F., & Grimes, D. A. (2002). Generation of allocation sequences in randomised trials: chance, not choice. *Lancet*, *359*, 515–519.

Sedgwick, P. (2015). Intention to treat analysis versus per protocol analysis of trial data. *BMJ*, *350*, 1–2. doi:10.1136/bmj.h681

Seedat, S., Scott, K. M., Angermeyer, M. C., Berglund, P., Bromet, E. J., Brugha, T. S., … Kessler, R. C. (2009). Cross-national association between gender and mental disorders in the WHO World Mental Health Surveys. *Archives of General Psychiatry*, *66*(7), 785–795. doi:10.1001/archgenpsychiatry.2009.36.Cross-national

Senaratne, R., Ameringen, M. Van, Mancini, C., & Patterson, B. (2010). The burden of anxiety disorders on the family. *The Journal of Nervous and Mental Disease*, *198*(12), 876–880. doi:10.1097/NMD.0b013e3181fe7450

Shamsuddin, K., Fadzil, F., Wan Ismail, W. I., Shah, S. A., Omar, K., Muhammad, N. A., … Mahadevan, R. (2013). Correlates of depression, anxiety and stress among Malaysian university students. *Asian Journal of Psychiatry*, *6*(4), 318–323. doi:10.1016/j.ajp.2013.01.014

Sheehan, D. V., Lecrubier, Y., Harnett Sheehan, K., Janavs, J., Weiller, E., Keskiner, A., … Dunbar, G. C. (1997). The validity of the Mini International Neuropsychiatric Interview (MINI) according to the SCID-P and its reliability. *European Psychiatry*, *12*, 232–241. doi:10.1016/S0924-9338(97)83297-X

Sherina, M. S., Rampal, L., & Kaneson, N. (2005). The prevalence of anxiety among medical students. *Malaysian Journal of Medicine and Health Sciences*, *1*(1), 13–20.

Siegmund, A., Golfels, F., Finck, C., Halisch, A., Räth, D., Plag, J., & Ströhle, A. (2011). D -Cycloserine does not improve but might slightly speed up the outcome of in-vivo exposure therapy in patients with severe agoraphobia and panic disorder in a randomized double-blind clinical trial. *Journal of Psychiatric Research*, *45*(8), 1042–1047. doi:10.1016/j.jpsychires.2011.01.020

Singh, R. (1992). Single-session hypnotic treatment of insomnia in religious context. *Australian Journal of Clinical and Experimental Hypnosis*, *20*(2), 111–116.

Skapinakis, P., Bellos, S., Koupidis, S., Grammatikopoulos, I., & Theodorakis, P. N. (2013). Prevalence and sociodemographic associations of common mental disorders in a nationally representative sample of the general population of Greece. *BMC Psychiatry*, *13*, 163.

Smith, J. C. (1999). *ABC relaxation theory: An evidence-based approach*. New York, NY: Springer Publishing Company.

Smits, J. A. J., Hofmann, S. G., Rosenfield, D., DeBoer, L. B., Costa, P. T., Simon, N. M., … Pollack, M. H. (2013). D-Cycloserine augmentation of cognitive behavioral group therapy of social anxiety disorder: Prognostic and prescriptive variables. *Journal of Consulting and Clinical Psychology*, *81*(6), 1100–1112. doi:10.1037/a0034120

Smits, J. A. J., O'Cleirigh, C. M., & Otto, M. W. (2006). Combining cognitive-behavioral therapy and pharmacotherapy for the treatment of panic disorder. *Journal of Cognitive Psychotherapy: An International Quarterly*, *20*(1), 75–85.

Somers, J. M., Goldner, E. M., Waraich, P., & Hsu, L. (2006). Prevalence and incidence studies of anxiety disorders : A systematic review of the literature. *Canadian Journal of Psychiatry*, *51*(2), 100–113.

Spector. (2006). Method variance in organizational research. Truth or urban legend? *Organizational Research Methods*, *9*, 221–232.

Spielberger, C. D. (1985). Anxiety, cognition and affect: A state-trait perspective. In A. H. Tuma & J. Maser (Eds.), *Anxiety and the anxiety disorders* (pp. 171–182). Hillsdale, NJ: Erlbaum.

Starcevic, V., & Berle, D. (2006). Cognitive specificity of anxiety disorders: A review of selected key constructs. *Depression and Anxiety*, *23*, 51–61. doi:10.1002/da

Starcevic, V., Latas, M., Kolar, D., & Berle, D. (2007). Are there gender differences in catastrophic appraisals in panic disorder with agoraphobia. *Depression and Anxiety*, *24*, 545–552. doi:10.1002/da

Steel, Z., Marnane, C., Iranpour, C., Chey, T., Jackson, J. W., Patel, V., & Silove, D. (2014). The global prevalence of common mental disorders: A systematic review and meta-analysis 1980-2013. *International Journal of Epidemiology*, *43*(March), 476–493. doi:10.1093/ije/dyu038

Steinmetz, H., Schmidt, P., Tina-Booh, A., Wieczorek, S., & Schwartz, S. H. (2009). Testing measurement invariance using multigroup CFA: Differences between educational groups in human values measurement. *Quality and Quantity*, *43*, 599–616. doi:10.1007/s11135-007-9143-x

Stephenson, R., Marchand, A., & Lavallee, M.-C. (1999). A Canadian French adaptation of the Agoraphobic Cognitions Questionnaire: Cross-cultural validation and gender differences. *Scandinavian Journal of Behaviour Therapy*, *28*(2), 58–69.

Stewart, R. E., & Chambless, D. L. (2009). Cognitive–behavioral therapy for adult anxiety disorders in clinical practice: A meta-analysis of effectiveness studies. *Journal of Consulting and Clinical Psychology*, *77*(4), 595–606. doi:10.1037/a0016032

Subramaniam, K., Krishnaswamy, S., Jemain, A. A., Hamid, A., & Patel, V. (2006). The Clinical Interview Schedule-Revised (CIS-R)-Malay version, clinical validation. *Malaysian Journal of Medical Sciences*, *13*(1), 58–62.

Sullivan, G. M., & Feinn, R. (2012). Using effect size — or why the P value is not enough. *Journal of Graduate Medical Education*, (September), 279–282.

Swift, M. G. (1965). *Malay peasant society in Jelebu*. (A. Press, Ed.). London.

Szuhany, K. L., Kredlow, M. A., & Otto, M. W. (2014). Combination psychological and pharmacological treatments for panic disorder. *International Journal of Cognitive Therapy*, *7*(2), 122–135.

Tabachnick, B. G., & Fidell, L. S. (2007). *Using multivariate statistics* (5th ed.). Boston, MA: Pearson Education, Inc.

Taha, A. B., Lee, P. Y., Lin, K., Siti, R. G., & Hassan, S. (2015). Anxiety and depression in the primary health care clinics and the use of complementary and alternative medicine. *International Medical Journal*, *12*(2), 93–97.

Tan, P. C., Vani, S., Lim, B. K., & Omar, S. Z. (2010). Anxiety and depression in hyperemesis gravidarum: prevalence, risk factors and correlation with clinical severity. *European Journal of Obstetrics and Gynecology*, *149*(2), 153–158. doi:10.1016/j.ejogrb.2009.12.031

Tan, P. C., Zaidi, S. N., Azmi, N., Omar, S. Z., & Khong, S. Y. (2014). Depression, anxiety, stress and hyperemesis gravidarum : Temporal and case controlled correlates. *PLOS ONE*, *9*(3), e92036. doi:10.1371/journal.pone.0092036

Tanios, C. Y., Abou-saleh, M. T., Karam, A. N., Salamoun, M. M., Mneimneh, Z. N., & Karam, E. G. (2009). The epidemiology of anxiety disorders in the Arab world: A review. *Journal of Anxiety Disorders*, *23*, 409–419. doi:10.1016/j.janxdis.2008.10.009

Taylor, S. (1995). Anxiety Sensitivity: Theoretical and recent findings. *Behaviour Research and Therapy*, *33*(3), 243–258.

Taylor, S., Abramowitz, J. S., & Mckay, D. (2012). Non-adherence and non-response in the treatment of anxiety disorders. *Journal of Anxiety Disorders*, *26*(5), 583–589. doi:10.1016/j.janxdis.2012.02.010

Taylor, S., & Cox, B. J. (1998). An expanded Anxiety Sensitivity Index: Evidence for a hierarchic structure in a clinical sample. *Journal of Anxiety Disorders*, *12*, 463–483.

The Australian Psychological Society. (2010). *Evidence-based psychological interventions in the treatment of mental disorders: A literature review*. Flinders Lane, VIC. Retrieved from https://www.psychology.org.au/Assets/Files/Evidence-Based-Psychological-Interventions.pdf

Theodore, J. L. V., Corydon Hammond, D., Trudeau, D., Monastra, V., Perry, J., Lehrer, P., … Sherman, R. (2002). Template for developing guidelines for the evaluation of the clinical efficacy of psychophysiological interventions. *Applied Psychophysiology Biofeedback*, *27*(4), 273–281. doi:10.1023/A:1021061318355

Thomas, R. E., Grimshaw, J. M., Mollison, J., & Mcclinton, S. (2003). Cluster randomized trial of a guideline-based open access urological investigation service. *Family Practice*, *20*(6), 646–654. doi:10.1093/fampra/cmg605

Thornicroft, G. (2007). Most people with mental illness are not treated. *The Lancet*, *370*, 807–808. doi:10.1016/S0140-6736(07)61242-2.Depression

Thurstone, L. L. (1947). *Multiple factor analysis*. Chicago: University of Chicago Press.

Triscari, M. T., Faraci, P., Angelo, V. D., Urso, V., & Catalisano, D. (2011). Two treatments for fear of flying compared: Cognitive behavioral therapy combined with systematic desensitization or eye movement desensitization and reprocessing (EMDR). *Aviation Psychology and Applied Human Factors*, *1*(1), 9–14. doi:10.1027/2192-0923/a00003

Tucker, M., & Oei, T. P. S. (2007). Is group more cost effective than individual cognitive behaviour therapy? The evidence is not solid yet. *Behavioural and Cognitive Psychotherapy*, *35*, 77–91. doi:10.1017/S1352465806003134

Turner, R. J., & Lloyd, D. A. (2004). Stress burden and the lifetime incidence of psychiatric disorder in young adults: Racial and ethnic contrasts. *Archives of General Psychiatry*, *61*, 481–488.

Tyler, K. M., Normand, S.-L. T., & Horton, N. J. (2011). The use and abuse of multiple outcomes in randomized controlled depression trials. *Contemporary Clinical Trials*, *32*(2), 299–304. doi:10.1016/j.cct.2010.12.007.The

Tyrer, P., Murphy, S., Kingdon, D., Brothwell, J., Gregory, S., Seivewright, N., … Johnson, A. L. (1988). The Nottingham study of neurotic disorder: Comparison of drug and psychological treatments. *Lancet*, *2*, 235–240.

van Apeldoorn, F. J., Stant, A. D., van Hout, W. J. P. J., Mersch, P. P. A., & den Boer, J. A. (2014). Cost-effectiveness of CBT, SSRI, and CBT+SSRI in the

treatment for panic disorder. *Acta Psychiatrica Scandinavica*, *129*, 286–295. doi:10.1111/acps.12169

van Apeldoorn, F. J., van Hout, W. J. P. J., PPA, M., Huisman, M., Slaap, B. R., III Hale, W. W., … den Boer, J. A. (2008). Is a combined therapy more effective than either CBT or SSRI alone? Results of a multicenter trial on panic disorder with or without agoraphobia. *Acta Psychiatrica Scandinavica*, *117*, 260–270. doi:10.1111/j.1600-0447.2008.01157.x

van Apeldoorn, F. J., van Hout, W. J. P. J., Timmerman, M. E., Mersch, P. P. A., & Boer, J. A. den. (2013). Rate of improvement during and across three treatments for panic disorder with or without agoraphobia: Cognitive behavioral therapy, selective serotonin reuptake inhibitor or both combined. *Journal of Affective Disorders*, *150*(2), 313–319. doi:10.1016/j.jad.2013.04.012

van Gerwen, Lucas J Spinhoven, P., & Dyck, R. Van. (2006). Behavioral and cognitive group treatment for fear of flying: A randomized controlled trial. *Journal of Behavior Therapy*, *37*, 358–371. doi:10.1016/j.jbtep.2006.05.002

van Gerwen, L. J., Spinhoven, P., Diekstra, R. F. W., & van Dyck, R. (2002). Multicomponent standardized treatment programs for fear of flying: Description and effectiveness. *Cognitive and Behavioral Practice*, *9*, 138–149.

Vanderberg, R. J., & Lance, C. E. (2000). A review and synthesis of the measurement invariance literature: Suggestions, practices, and recommendations for organizational research. *Organizational Research Methods*, *3*(1).

Vierron, E., & Giraudeau, B. (2007). Sample size calculation for multicenter randomized trial: Taking the center effect into account. *Contemporary Clinical Trials*, *28*, 451–458. doi:10.1016/j.cct.2006.11.003

Vyskocilova, J., Prasko, J., Novak, T., & Pohlova, L. (2011). Is there any influence of personality disorder on the short-term intensive group cognitive behavioral therapy of social phobia. *Biomedical Papers of the Medical Faculty of Palacky University in Olomouc Czech Republic*, *155*(1), 85–94. doi:10.5507/bp.2011.005

Wahab, S., Shah, S. A., Hui, S. T., Hussin, S. J., Ahmat Nazri, M. F., Abdul Hamid, I. I., … Abdul Rahman, A. H. (2015). Anxiety and depressive symptoms among ischaemic heart disease patients in a Malaysian tertiary university hospital. *International Journal of Public Health Research*, *5*(1), 531–537.

Watanabe, N., Furukawa, T. A., Chen, J., Kinoshita, Y., Nakano, Y., Ogawa, S., … Noda, Y. (2010). Change in quality of life and their predictors in the long-term follow-up after group cognitive behavioral therapy for social anxiety disorder: A prospective cohort study. *BMC Psychiatry*, *10*, 81–90.

Watson, D., & Clark, L. A. (1984). Negative affectivity: The disposition to experience aversive emotional states. *Psychological Bulletin*, *96*(3), 465–490.

Watson, D., Clark, L. A., & Carey, G. (1988). Positive and negative affectivity and their relation to anxiety and depressive disorders. *Journal of Abnormal Psychology*, *97*(3), 346–353.

Watson, D., Clark, L. A., Weber, K., Assenheimer, J. S., Strauss, M. E., & Mccormick, R. A. (1995). Testing a tripartite model II . Exploring the symptom structure of anxiety and depression in student, adult, and patient samples. *Journal of Abnormal Psychology*, *104*(I), 15–25.

Watson, D., Weber, K., Assenheimer, J. S., Clark, L. A., Strauss, M. E., & Mccormick, R. A. (1995). Testing a tripartite model: I . Evaluating the convergent and discriminant validity of anxiety and depression symptom scales. *Journal of Abnormal Psychology*, *104*(1), 3–14.

Wertheimer, M. (2012). *A brief history of psychology* (5th editio.). New York, NY: Taylor & Francis Group.

Westbrook, D., Kennerley, H., & Kirk, J. (2011). *An introduction to cognitive behaviour therapy: Skills and applications* (2nd editio.). London: Sage Publications.

White, K. S., Brown, T. A., Somers, T. J., & Barlow, D. H. (2006). Avoidance behavior in panic disorder: The moderating influence of perceived control. *Behaviour Research and Therapy*, *44*, 147–157. doi:10.1016/j.brat.2005.07.009

Whittal, M. L., Otto, M. W., & Hong, J. J. (2001). Cognitive-behavior therapy for discontinuation of SSRI treatment of panic disorder: A case series. *Behaviour Research and Therapy*, *39*, 939–945.

Wittchen, H.-U., & Jacobi, F. (2005). Size and burden of mental disorders in Europe—a critical review and appraisal of 27 studies. *European Neuropsychopharmacology*, *15*, 357–376. doi:10.1016/j.euroneuro.2005.04.012

Wittes, J. (2002). Sample size calculations for randomized controlled trials. *Epidemiologic Reviews*, *24*(1), 39–53.

World Health Organization. (1997). *Programme on mental health: WHOQOL - Measuring quality of life*. Retrieved from http://www.who.int/mental_health/media/68.pdf

World Health Organization. (2011). *Global burden of mental disorders and the need for a comprehensive, coordinated response from health and social sectors at the country level*. *EB130/9*. Retrieved from http://www.who.int.libaccess.lib.mcmaster.ca/mental_health/policy/mhtargeti

ng/development_targeting_mh_summary.pdf

World Health Organization. (2017). *Disability-adjusted life years (DALYs)*. Retrieved from www.who.int/gho/mortality_burden_disease/daly_rates/text/en/

Yee, W. S., & Lin, L. P. (2011). Anxiety and depressive symptoms among communities in the east coast of peninsular Malaysia : A rural exploration. *Malaysian Journal of Psychiatry*, *20*(1), 1–13.

Yew, W. C. V., & Mohd. Noor, N. A. (2013). An examination of sociocultural factors influencing lifestyle, health and health-seeking behaviour – a case study of Malaysian. In M. Basri, K. Abd. Rahman, M. S. Mohamad Salleh, Z. Rini, & S. Ridzuan (Eds.), *ICSSR e-Journal of Social Science Research. Emerging Trends for Sustainability in Glocal Social Sciences: Opportunities and Challenges. E-ISSN: 2289-4977*. (Vol. 2013, pp. 325–353). Kajang, Malaysia: WorldConferences.net. Retrieved from http://worldconferences.net/journals/icssr/papericssr/344-353

Yonkers, K. a., Bruce, S. E., Dyck, I. R., & Keller, M. B. (2003). Chronicity, relapse, and illness - course of panic disorder, social phobia, and generalized anxiety disorder: Findings in men and women from 8 years of follow-up. *Depression and Anxiety*, *17*(3), 173–179. doi:10.1002/da.10106

Young, A. S., Klap, R., Sherbourne, C. D., & Wells, K. B. (2001). The quality of care for depressive and anxiety disorders in the United States. *Archives of General Psychiatry*, *58*, 55–61.

Young, J., & Beck, A. (1980). *Cognitive Therapy Rating Scale (CTRS)*. Bala Cynwyd, PA: Beck Institute for Cognitive Behavior Therapy. Retrieved from info@beckinstitute.org

Yusoff, M. S. B. (2013). Psychometric properties of the Depression Anxiety Stress Scale in a sample of medical degree applicants. *International Medical Journal*, *20*(3), 295–300.

Yusoff, M. S. B., Abdul Rahim, A. F., Baba, A. A., Ismail, S. B., Mat Pa, M. N., & Esa, A. R. (2013). Prevalence and associated factors of stress, anxiety and depression among prospective medical students. *Asian Journal of Psychiatry*, *6*(2), 128–133. doi:10.1016/j.ajp.2012.09.012

Yusoff, M. S. B., Abdul Rahim, A. F., Baba, A. A., Ismail, S. B., Mat Pa, M. N., & Esa, A. R. (2013). The impact of medical education on psychological health of students: A cohort study. *Psychology, Health& Medicine*, *18*(4), 420–430.

Yusoff, N., Wah, Y. L., & Cheng-Har, Y. (2011). Psychometric properties of the Malay version of the Hospital Anxiety and Depression Scale: A study of husbands of breast cancer patients in Kuala Lumpur, Malaysia. *Asian Pacific Journal of Cancer Prevention*, *12*, 915–917.

Zakariah, M. F., Lai, L.-L., & Loh, P.-S. (2015). Validation of the Malay version of the Amsterdam Preoperative Anxiety and Information Scale (APAIS). *Medical Journal of Malaysia*, *70*(4), 243–248.

Zvolensky, M. J., Arrindell, W. a, Taylor, S., Bouvard, M., Cox, B. J., Stewart, S. H., … Eifert, G. H. (2003). Anxiety sensitivity in six countries. *Behaviour Research and Therapy*, *41*(7), 841–859. doi:10.1016/S0005-7967(02)00187-0