

# **Social Anxiety Disorder**

Most people experience some form of social anxiety at some time in their lives, such as performance anxiety, shyness or stage fright. Some studies have indicated that the most common fear that people have is not spiders or snakes, but is the fear of public speaking. And while most people have anxiety in social situations at times, for some people the anxiety can become debilitating, and be classified as a Social Anxiety Disorder.

## **Social Phobia and Avoidant Personality Disorder**

Social anxiety becomes Social Anxiety Disorder when the symptoms become more severe and lead to more impairment in functioning. The DSM-IV identifies two main diagnoses related to social anxiety. One, Social Phobia, has been shown to affect as many as 13 percent of the population. The defining characteristic of Social Phobia is that sufferers have a persistent fear in one or more social or performance situations. People with Social Phobia fear they will act in a way that will be embarrassing or humiliating. They worry excessively about what others think of them, and assume that others are constantly judging them in a negative way leading to fear of interacting with others or of being observed performing any task. Being in such a situation almost always leads to severe anxiety that can include panic attacks. People with Social Phobia know their fears are exaggerated and unreasonable, so often are very hard on themselves for having these fears. They frequently worry that they will be judged negatively for even having the anxiety, and worry that others will see their symptoms such as blushing, shaking, sweating or stuttering. They, in effect, develop anxiety about their anxiety. People with Social Phobia typically will avoid the feared situation. This can lead to serious interference with normal functioning such as holding jobs or being in school, and relationships are often very difficult to develop and maintain.

Another diagnostic category related to social anxiety is Avoidant Personality Disorder (APD). There is a great deal of overlap between Social Phobia and APD. The DSM-IV even says that they may be alternate conceptualizations of the same condition. APD is a pervasive pattern of social inhibition, feelings of inadequacy and hypersensitivity to negative evaluation. People with APD often avoid occupational activities that involve much interaction with others, avoid new

activities and risks, want assurance that they will be liked before getting involved with other people, tend to hold back in relationships and view themselves as inept and inferior. People with APD also fear criticism, disapproval and rejection. This disorder also leads to interference with normal functioning occupationally, educationally and interpersonally.

### **Treatment**

The most common treatment for Social Anxiety Disorder is a combination of medication and cognitive-behavioral therapy. In cognitive-behavioral therapy the focus is on identifying self-defeating thoughts and behaviors and replacing them with healthier ones. This form of therapy helps the sufferers identify the specific thoughts that are leading to the social anxiety and to logically examine them and replace them with more realistic and positive thoughts. For example, a man with social anxiety disorder may fear going to a public place where there will be crowds such as a store or mall because he has the belief that everyone will be looking at him and thinking bad thoughts about him. He can be helped to look at the thinking errors in these beliefs. One thinking error at work in this example is “mind reading”: the belief that “I know what others are thinking.” This belief can be reframed as “most people aren’t going to be thinking about me or even paying much attention to me at all, and I have no way of knowing what they might be thinking. It’s possible some may even have positive thoughts about me.”

People with Social Anxiety Disorder are encouraged to identify their thinking errors and to challenge and replace them with more functional ways of thinking. Sufferers are also encouraged to replace their negative self-evaluations. Instead of continually criticizing themselves for their perceived inadequacies, including criticizing themselves for being anxious, they are encouraged to be more accepting of themselves as imperfect humans, just like everyone else. They are also encouraged to accept themselves Social Anxiety Disorder with their anxiety. Changing such entrenched beliefs does not happen overnight and requires much practice. People with Social Anxiety Disorder are also encouraged to step out of their comfort zones and to try new behaviors. When they do this they usually find that their fears did not materialize. A person may be encouraged to initiate a conversation with someone they don’t know well, or to try an activity they have been avoiding. They are instructed to pay attention to the outcome to see if their

fears were realized. If their fears did actually come true, the person is encouraged to evaluate whether it truly affected his or her life. For example, a woman may fear walking down a crowded street as she has the belief that she may stumble while walking and everyone will laugh at her. If, in fact, she does stumble and someone laughs, she can be encouraged to see that this had no real impact on her life and was not a catastrophe. If people with Social Anxiety Disorder can be helped to worry less about what others are thinking, much of their anxiety will diminish.

Social Anxiety Disorder is a very treatable disorder. When people combine the proper medications with treatment to help modify dysfunctional thoughts and behaviors, change and relief from debilitating symptoms can be rapid and lasting.

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#### Reference:

Thomas, W. (July 2007). Social Anxiety Disorder. *Mental Health Matters*. 4(9). Gratiot Medical Center: An Affiliate of MidMichigan Health.