

# Social Anxiety Disorder

## Abstract

Social Phobia, now known as social anxiety disorder, is actually characterised by excessive anxiety and self-consciousness in daily life situations. It is basically a psychiatric disorder. It reduces quality of life, leading to occupational failures, among many other things. SAD is the second most commonly diagnosed anxiety disorder, next to specific phobia, in the world. The teenage years are the most vulnerable one. SAD can wreak havoc on the lives of those affected. For example, a person may decline a job that requires meeting new people quite often. People with SAD often develop major depressive disorder and alcohol use disorders. Several stress can affect daily routine work, school or other activities of course. Studies have identified a link between social anxiety and impaired social behaviour. It is intense anxiety or experiencing fear of being judged wrongfully or rejected in a social situation. Exposure to the phobic object usually precipitate panic attacks leading to avoidance. People with this disorder are generally fearful of public embarrassment. They think that they may appear to be foolish or otherwise inadequate in some ways. Hence, phobic situations are avoided or tolerated with great distress. It is an excessive case of emotional discomfort, and results in heightened fear of interactions with others, all these being irrational, of course.

**Keywords:** Social, Anxiety, Depression, Disorder.

### Introduction

The study tries to focus on SAD as a discrete categorical entity, where the more social situations one is afraid of and avoid, the more impaired one is. At times, people fail to take into account the relationships among SAD's specified symptoms. Researchers have found that SAD has received very little attention, in case of diagnosis. It is also important that people with an actual SAD diagnosis might have a number of interconnected symptoms. Because of SAD, everyday social situations cause a lot of anxiety and fear and self-consciousness leads to isolation, bringing temporary relief. But, this increasing withdrawal into social isolation might adversely affect relationships, one's profession, family setting etc. Might also lead to low self-esteem, depression, weak social skills and the like. So, to combat all these, we need to find ways to fight SAD and go on to a healthy and normal social life.

### REVIEW

In a study done by Baumeister and Leary, in 1995, it was stated that ostracism from a social group, at times, negatively impacts a variety of health related problem including one's sense of belonging, and self-esteem. Due to the importance of various social relationships, humans fear negative evaluation by peers.

According to American Psychiatric Association, 1980, when SAD was introduced as a diagnostic category in DSM, it referred to specific phobia. The DSM- III stated that "both social and simple phobias generally involve a circumscribed stimulus.....when more than one type is present, multiple diagnosis should be made." (p.225).

In recent times, treatment protocols for SAD include behaviour therapy, social skills training, cognitive therapy, and finally interpersonal therapy. Among all the above, the cognitive behavioural therapy (CBT) is the most validated approach for anxiety disorders.

### Objectives of the Study

While trying to study SAD, we need to find out the various symptoms, cause and subsequent treatments to the condition. There are specific phobias which need special attention. It is very important to keep in mind, that any diagnosis is not warranted, in case there is no marked impairment in social functioning or notable distress. All symptoms must be demonstrated persistently over a period of time, at least 6 months.



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**Findings**

Culture determines social norms, and hence symptoms of SAD must be considered within a cultural frame.

Social Phobia includes fear of public performance and social interaction. Children and adults with this disorder may be afraid to eat or drink in front of others. Social interaction anxiety occurs in context of various social events. For example social gatherings, wedding, meeting strangers, etc.

In case of children, shyness is very usual. As a result, they may not want to go to school, non-participation in co-curricular activities, etc.

A very strong evidence of SAD is found in case of Performance, where it is co-morbid with other anxiety syndromes. This occurs whenever there is a possible judgemental situation. Society is becoming increasingly technology savvy and there is pressure for productivity is all-encompassing. It gives rise to what is called selective autism, a speaking phobia.

**Causes**

Any anxiety disorder is not developed or caused by a single factor, but a combination of various things. It may be life experiences, physical health, personality factors, etc.

Some of these are-

**Personal Factors**

People who are absolute perfectionist, timid, lack of self-esteem, dominating, usually develop this disorder.

**Family History of Mental Health Conditions**

Anxiety can run in family. However it may or may not penetrate into the next generation.

**Stressful Events**

Work stress, pregnancy, relationship problems, job hopping, emotional setback, and trauma.

**Physical Problems**

Chronic illness, hypertension, heart disease.

**Substance Use**

To bust tensions, people might take to alcohol, drugs, which in most cases aggravate the problems leading to anxiety.

**Symptoms**

There can be several types of symptoms like physical, emotional and behavioural ones.

Physical signs include;

1. Abdominal pain
2. Avoiding eye-contact
3. Weeping, tantrums
4. Confusion
5. Heart Palpitation
6. Freezing up
7. Failure to speak
8. Shaky voice
9. Trembling
10. Dry mouth

**Behavioural and emotional signs**

1. Blaming others for social failures
2. Fear of meeting people in the authority
3. Panic attacks when confronting feared situations
4. Refraining from certain activities
5. A blank mind

6. Avoiding situations where he thinks he will be the centre of attraction
7. One may be over-sensitive to criticism
8. Non – assertive
9. Low self-esteem
10. Distress in occupational functioning

Focusing on child's SAD, it is more important to find out the ways with the help of which he may cope with SAD. The child needs to be educated about the ways in which anxiety influences thinking and learn how to behave in a pro-active manner.

Firstly, children should be trained in relaxation exercise. Deep – breathing should be encouraged. Along-with this, they should also have the knowledge in progressive muscle relaxation.

Secondly, the children should be taught cognitive reframing and remove all negative beliefs that reinforce their negative thoughts.

Thirdly, they should be taught the technique of problem- solving. Children often tend to avoid engaging in situations that cause the most anxiety. Hence, it is advisable that a child should identify the triggers and learn potential problem – solving strategies to work through the respective triggers.

Fourthly, the child can be given appropriate help in making friends along with behaviours like greetings, conversation starters, listening and responding and indulging oneself in several peer groups.

Lastly, a professional help can be sought for. A licensed mental health professional may be consulted to cope with the various symptoms and implement the relevant coping strategies.

**Diagnosis**

A mental health practitioner, usually a psychiatrist or a psychologist, may ask a person with probable SAD, to explain the frequency of occurrence of the likely symptoms.

In the US, the DSM conforms to all symptoms before a diagnosis is made, for e.g.

1. A persistent fear of social situations in which they think they will be negatively evaluated.
2. Disproportionate levels of anxiety.
3. Daily life being affected.

**Treatment**

SAD is life – long condition with changing severity. Treatments mainly deal with controlling of the symptoms and bringing confidence in the person.

One of the main treatment modes is psychotherapy. Among the many types of psychotherapy, the Cognitive Behavioural Therapy (CBT) has proven to be the most effective. CBT helps the patient to realize that their own thoughts actually determine their behaviour. The patients are encouraged to think positively. Through this, a cognitive element is designed to limit distorted thinking. On the other hand, a behavioural element is designed to change the patient's reaction to outside world through an exposure therapy. Often, they are made to prepare themselves for the worst, and thereby cope up with anxiety. There are several anxiety management training programmes.

CBT has no side effects, and generally lasts for 12 weeks. Group therapy or family therapy also

can be carried out to educate significant others. Besides psychotherapy, there is the option of medication. It mainly includes anti-depressants and other relevant medicines.

#### **Conclusion**

A feeling of shyness or discomfort in certain situations does not necessarily mean that it is a case of SAD. Some people are by nature, reserved, while others may be outgoing.

The various risk factors like family history, negative experiences, temperament, social and work demands should be effectively addressed. Prevention process should be there, for example; prioritizing issue in life, getting help early, avoiding use of unhealthy substance, etc. Coping strategies should be kept handy, but if left untreated, SAD can have severe consequences. It is important to understand the fact that treatments do not work overnight. Again, no single plan works for all patients. Adjustments to the plan are necessary, since patients respond differently, at times, to treatment. About one – third of people seeking for treatment have avoidant personality disorders.

Heeren and McNally made a study on this, where they concluded that, "The chief difference between a person with SAD and a shy person without SAD is that the probability of fearing one situation predicts fearing another situation."

In both the cases, the central node involves interactions with unfamiliar people. One may see positive benefits emerging if one starts trying to overcome his own social anxiety. Fulfilment in social situations often does involve meeting with new people.

Taking everything into consideration, the most affected anxiety is anxiety of performance in public. It is clear that overdependence on technology is playing a huge role in handicapping the development of verbal performance.

#### **References**

##### **Books**

- American Psychiatric Association . Diagnostic and Statistical Manual for Mental Disorders. 3rd edition Author; Washington, D.C.: 1980*
- Hofmann SG. Cognitive factors that maintain social anxiety disorder: A comprehensive model and its treatment implications. Cognitive Behaviour Therapy. 2007;36:195–209.*
- Baumeister RF, Leary MR. The need to belong: Desire for interpersonal attachments as a fundamental human motivation. Psychological Bulletin. 1995;117:497–529.*

##### **Web References**

- <https://adaa.org/understanding-anxiety/social-anxiety-disorder>
- <https://www.mayoclinic.org/diseases-conditions/social-anxiety-disorder/symptoms-causes/syc-20353561>
- <https://www.social-anxiety.com/area-of-concerns/performance-anxiety>
- <https://bmcpyschology.biomedcentral.com/articles/10.1186/s40359-019-0300-5>
- <https://www.psychom.net/social-anxiety-how-to-help-kids>
- <https://www.psychologytoday.com/intl/conditions/social-anxiety-disorder-social-phobia>
- <https://www.mentalhelp.net/anxiety/specific-phobias>
- <https://www.medicalnewstoday.com/articles/176891.php>
- <https://www.beyondblue.org.au/the-facts/anxiety/what-causes-anxiety>
- <https://www.verywellmind.com/social-anxiety-and-depression-go-hand-in-hand-3024695>
- <https://thiswayup.org.au/how-do-you-feel/shy/>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2846378/>