Social Phobia/Social Anxiety disorder

Social Phobia is defined as a fear of negative evaluation from others - the fear of being judged and criticised. It is a fear of social situations that involve interaction with other people.

Social phobics experience overwhelming anxiety and excessive self-consciousness when in social situations, accompanied by fear of humiliation and embarrassment. Whilst it is usual for most people to feel apprehensive about certain social events, such as public speaking, the anxiety experienced by social phobics is so intense that it can literally make sufferers of this condition avoid any social situation. In common with most anxiety disorders, social phobics are often well aware that their anxiety is irrational and misplaced, yet despite this, feel powerless and unable to overcome their fears.

Specific and general social phobia

There are two types of social phobia; ‘general’ social phobia and ‘specific’ social phobia. Those with general social phobia worry excessively about being in any social situation. However, those with specific social phobia find their condition is limited to only one type of situation such as public speaking, eating/drinking in public, writing in front of others, fear of using public toilets in front of others, etc. People with specific social phobia often find they lead ‘normal’ lives and can get along fine in most social situations. However, when asked, for example, to give a speech, they find they go to pieces. They dry up, can’t think of anything to say, feel stupid, embarrassed and humiliated. However, the problem of specific social phobia is limited to specific social settings, and is therefore nowhere near as debilitating a problem as general social phobia.

People with general social phobia often have social skills deficits and report feeling shy most of their lives, often having limited social contact with others. Social phobics frequently find that as their peers develop further social skills, they themselves become more marginalised from society and develop sensitivity to rejection. They think that others think they are boring and unattractive. Such people cope with their problems by effectively minimising opportunities for negative evaluation by avoiding social contact wherever possible. As a result, to others the social phobic may seem aloof, strange, anti-social, etc. However, deep down most social phobics crave social involvement and acceptance from others. They long to have partners and an active social life but the social phobia prevents any of this.

Social phobics often experience significant distress in the following situations:
- Being teased or criticised
- Being the centre of attention
- Whilst being watched or observed while doing something
- Having to say something in a formal, public situation
- Meeting people in authority
- Going to parties
- Using public urinals/toilets
- Being introduced to other people
- Eating out/drinking in public
- Eye contact
- Making telephone calls
- Fear of examinations/interviews
Many social phobics find that their worries are associated with a particular physical symptom of their anxiety. For example, they fear that others will notice their excessive blushing - excessive highlighted for it is very rare that those with social phobias are exhibiting noticeable physical symptoms of anxiety.

How many people suffer with social phobia?
Social phobia is actually the third most prevalent psychiatric disorder, following only depression and alcohol dependence (Kessler et al. 1994). It is thought that social phobia affects approximately 2% of the population at any time. However, it is also believed that 90% of people with social phobia are misdiagnosed so the problem of social phobia is thought to be much larger than current statistics show.

What causes social phobia?
A large proportion of people with general social phobia say that they have always felt uncomfortable in company and cannot say for certain when their difficulties began. Therefore it seems that the origins of social phobia usually lie in childhood. Parents of social phobics often report that their children were indeed shy. Studies have shown that the rate of social phobia in a social phobic’s family is about three times higher than average, and that identical twins are more likely to have the disorder than fraternal twins. The findings suggest that social phobia has a genetic component. However, it is also likely that the behaviour of parents contributes to the likelihood of their children developing social phobia. Many social phobics describe their parents as both overprotective and insufficiently affectionate - constantly criticising them and worrying that they will do something wrong. Social phobic parents may over-emphasise manners and grooming or exaggerate the dangerousness of approaching strangers. Some people believe that social phobics learn social phobia from parents who avoided social situations in a social conditioning style.

Other studies have shown that the amygdale - a small structure in the brain - is associated with symptoms of social phobia. The amygdale is believed to be a central site in the brain that controls fear responses.

Another theory is that the disorder has a biochemical basis. Scientists are exploring the idea that heightened sensitivity to disapproval may be physiologically or hormonally based.

What can be done about social phobia?
Cognitive-Behavioural Therapy (CBT): As with many anxiety disorders, the main component of social phobia is negative thinking. For this reason, CBT is effective in treating social phobia. This therapy involves gradual exposure of social phobics to social situations which would usually cause distress. The first stage involves introducing the social phobic to the feared situation. The second stage is about building up the risk of disapproval in that situation so that the social phobic can build confidence to enable them to handle rejection or criticism. The third stage involves teaching the social phobic techniques to allow them to cope with disapproval. To do this, they are taught to develop constructive responses to their fears and perceived disapproval.

CBT also includes anxiety management training - teaching people techniques such as relaxation and breathing exercises to help control their levels of anxiety. The other important component of CBT is helping people to identify negative thought processes and enabling them to develop more realistic rational thoughts.

In general it is thought that social phobics respond relatively well to short-term therapy and do not benefit from years of
therapy where they analyse and ruminate over their problems as this can often make the social phobia worse.

**Self-help groups:** Attending a self-help group is an excellent way to meet others experiencing social phobia and provides a forum to share coping techniques, etc.

**Assertive/confidence-building courses:** Many local Adult Education Centres now offer assertiveness courses. These can be very helpful for social phobics who want to learn basic assertiveness skills to help them cope with everyday social encounters. Contact your local education authority for further information.

**Social skill training:** This is where people are taught simple social skills that most people take for granted, for example how to make conversation with a stranger. These training courses provide people with lots of chances to practice social skills with others who experience similar difficulties. The courses also allow participants to give constructive feedback. Social skills courses are usually run by psychology departments, so you will need to speak to your GP.

**Drug therapy:** SSRI’s (Selective Serotonin Re-uptake Inhibitors) have recently been shown to be effective in treating general social phobia. Beta-Blockers can be useful for specific social phobia when used to help with performance anxiety or stage fright. This is because these drugs help with the actual physical symptoms of anxiety such as shaking, sweating, etc. They are not usually found to be helpful for many with general social phobia. MAOIs (Monoamine Oxidase Inhibitors) can also be useful for treating social phobia; however, their use is often limited due to the dietary restrictions imposed on people taking them.

Medication in general for social phobia is often taken for more than 2 years.

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**More information**

For more information on a range of anxiety disorders, including social phobia or social anxiety, contact Anxiety UK:

Web: [www.anxietyuk.org.uk](http://www.anxietyuk.org.uk)
Email: info@anxietyuk.org.uk
Help line: 08444 775 774

Anxiety UK is the nation’s leading anxiety disorders charity. With more than 40 years experience, we provide access to therapy and support to a wide range of anxiety sufferers.

Anxiety UK strongly advises that people seek further information and guidance from their GP who will be able to make a formal diagnosis and suggest the best treatment available in your area.