SELF-FOCUSED ATTENTION IN THE TREATMENT OF SOCIAL PHOBIA

SHEILA R. WOODY,†* DIANNE L. CHAMBLESS† and CAROL R. GLASS‡

†Department of Psychology, Yale University, P.O. Box 208205, New Haven, CT 06520-8205, U.S.A., †Department of Psychology, University of North Carolina, Chapel Hill, NC 27599-3270, U.S.A. and ‡Catholic University of America, Washington, DC 20016, U.S.A.

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Summary—For those with social phobia, self-focused attention has been linked with impairment in social performance, increased social anxiety, and a higher frequency of self-critical thoughts during social situations. The purpose of this investigation was to assess correlates of changes in situational self-focus over the course of cognitive-behavioral treatment (CBT). Focus of attention was assessed after in-session role-plays and after in vivo homework assignments during group CBT for social phobia. Analyses revealed a significant decrease in self-focused attention over time; focus on events and stimuli outside of the self remained unchanged. Treatment gains on anxiety during dyadic interactions, on negative self-judgments, and on personalized social fears were related to reduction in self-focused attention. Those with public speaking phobias showed a strong relationship between decreased self-focus and speech anxiety. These findings suggest that changes in self-focused attention during the course of CBT are related to important therapeutic gains. Specific interventions aimed at decreasing self-focus may be a useful treatment strategy. Copyright © 1997 Elsevier Science Ltd

INTRODUCTION

The cognitive manifestations of social phobia are striking. In the midst of social situations, or even in anticipation of them, individuals with social phobia spend much of their attention on negative self-evaluation (Beidel, Turner & Dancu, 1985; Cacioppo, Glass & Merluzzi, 1979; Glasgow & Arkowitz, 1975; Glass, Merluzzi, Biever & Larsen, 1982; Rapee & Lim, 1992; Stopa & Clark, 1993). Even shy persons, who lack the intense fear and avoidance associated with social phobia, spend more time self-focusing during a social interaction than those who are not shy (Melchior & Cheek, 1990). The pervasiveness of self-directed cognitive activity in social phobia has spawned numerous studies investigating the effects of self-focused attention on social anxiety, social performance, and cognitions in social situations.

Self-focus has been observed to be detrimental to performance in social-evaluative settings, even in individuals who are not pre-selected for social anxiety. For instance, Liebling and Shaver (1973) asked Ss to copy passages of Swedish text, using the presence of a mirror as a self-focus manipulation. The presence of the mirror was detrimental to performance, but only when the Ss were under pressure to perform well in an evaluative condition. In non-evaluative conditions, self-focus did not impact on performance. Similar results were reported by Carver, Peterson, Follansbee and Schier (1983) in their series of experiments with high and low test-anxious Ss. The presence of a mirror hampered the anagram-solving performance of only the test-anxious Ss, who were, by definition, evaluation-sensitive. Presence of the mirror, which has been shown to enhance self-focused attention (Carver & Scheier, 1978), actually facilitated the performance of non test-anxious Ss.

In studies of socially phobic individuals, dispositional self-awareness has been linked to poor performance in behavioral avoidance tests (Hope & Heimberg, 1988). Those high in public self-consciousness, which is dispositional self-awareness (Duval & Wicklund, 1972; Fenigstein, Scheier & Buss, 1975), demonstrated less social skill in the social situation, reported more
anxiety, and reported more frequent negative thoughts. In another study, moderately socially anxious Ss engaged in phone conversations with strangers. Subjects expressing low self-confidence were judged as much less skilled than highly confident (but also anxious) Ss, but only in the presence of a video camera, which evokes self-focused attention. Low and high confidence Ss were judged to be equally socially competent when the camera was not present (Burgio, Merluzzi & Pryor, 1986).

On the theory that excessive self-focus impairs performance by detracting from attentional resources necessary for optimally maintaining the social situation (Hartman, 1983; Ingram, 1990; Sarason, 1975), several studies have operationalized self-focused attention as a diminished ability to recall events during the social situation. Observer ratings of social performance have been related to strong recall of external stimuli during social situations in some studies (Daly, Vangelisti & Lawrence, 1989), but not others (Stopa & Clark, 1993). Results from a study by Kimble and Zehr (1982) bring into question the validity of inferring self-focus from decreased attention to other social events. In that study, highly self-conscious Ss showed poor recall for visually perceived information about a social partner (e.g. sweater color) but not for verbally presented information (e.g. home town), which may be more relevant for social performance.

In addition to the link with diminished social performance, self-focus has been associated with increased negative affect. In several mood induction studies, negative mood resulted in increased self-focused attention (Salovey, 1992; Wood, Saltzberg & Goldsmidt, 1990a; Wood, Saltzberg, Neale, Stone & Rachmiel, 1990b). Reversing the direction of causal inquiry, manipulated self-focused attention has not resulted in reports of increased anxiety or negative affect when the self-focus manipulation involved a mirror (Carver & Scheier, 1978, 1981; Fenigstein, 1979). One exception was a study by Gibbons et al. (1985) in which psychiatric patients with major affective disturbances reported greater negative affect in the presence of a mirror than those patients not faced with a mirror. In two studies that manipulated focus of attention more directly, self-focus resulted in higher anxiety ratings (Wells, 1991; Woody, 1996).

The most consistent domain in which self-focused attention adversely affects people with social phobia is in negative cognition. Negative self-judging cognitions are endemic to social phobia. Obviously, some degree of self-focus is required for salient self-judgment to occur. Some of the earliest investigators of the phenomenon of self-focus in social anxiety, Duval and Wicklund (1973), found that self-focused Ss (mirror manipulation) attributed more responsibility to themselves in hypothetical situations. Self-focused attention in laboratory social situations results in fewer positive cognitions (Burgio et al., 1986; Fenigstein, 1979) and lower self-ratings of social skill (Daly et al., 1989; Johnson & Glass, 1989).

The consistency with which self-focused attention has been linked to social anxiety, poor social performance, increased anxiety, and negative self-judgments, has led to several theories proposing mechanisms governing the role self-focus may play in social phobia (Carver et al., 1983; Hartman, 1983; Hope, Gansler & Heimberg, 1989; Schlenker & Leary, 1982). Some have even argued that treatment will be successful only to the extent that it involves a decrease in self-focused attention (Hartman, 1983; Ingram, 1990), although this idea remains untested.

Cognitive–behavior therapy (CBT) conducted in groups has been amassing evidence of efficacy for the treatment of social phobia (Heimberg et al., 1990; Heimberg, Salzman, Holt & Blendell, 1993; Mattick & Peters, 1988; Mattick, Peters & Clarke, 1989). The present study was designed to examine the relationship between changes in focus of attention and treatment gains in group CBT for social phobia. We tracked focus of attention over the course of treatment to provide preliminary data on whether clients’ attentional focus changed over the course of CBT. Our more important aim was to examine whether treatment changes in focus of attention are related to improvement in a comprehensive assessment of social anxiety symptoms.

METHOD

Subjects

Prospective clients who contacted the clinic were interviewed by the second author (D.L.C.), an expert in the diagnosis and treatment of anxiety disorders. Clients who received a primary
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