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The etiology of social phobia: Toward a developmental profile

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Abstract

Social phobia is an extremely disruptive and distressing anxiety disorder that can impact on many areas of an individual's life. Yet, despite the fact that lifetime prevalence rates are relatively high, its etiology is still poorly understood. The aim of this review is to draw together findings from the broad base of nonclinical literature associated with behavioral inhibition (BI), shyness, social anxiety, and passive-anxious withdrawal and to compare these findings with those from the limited number of clinical studies with social phobics. Such comparison is not unproblematic due to conceptual differences between terms used and methodological divergence; these issues are discussed in some detail. The consonance of findings, however, suggests a viable profile for the developmental course of social phobia. This profile incorporates temperament variables, behavioral motivational, parenting styles, peer relationships, and internalization problems. Finally, specific suggestions for future research are offered.

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1. Introduction

Social phobia is an anxiety disorder characterized by “a marked and persistent fear of social or performance situations in which embarrassment may occur” (American Psychiatric Association, 1994, p. 411). People with social phobia are concerned that they will react with noticeable and embarrassing signs of strong physiological arousal, such as blushing, shaking, or trembling. As a consequence, activities such as eating, drinking, writing or speaking in public, expressing an opinion in a group, and talking to a member of the opposite sex or to an authority figure may actively be avoided to evade the perceived negative evaluation of others. As most of our everyday functioning involves contact with other people, social phobia can be an extremely disruptive disorder, which usually causes great distress in the sufferer and sometimes for those close to them.

Epidemiological studies based on *Diagnostic and Statistical Manual of Mental Disorders Third Edition Revised* (DSM-III-R) (American Psychiatric Association, 1987) criteria suggest that social phobia may be far more prevalent than earlier studies examining extreme social anxiety suggested. Indeed, social phobia may be the most frequently occurring anxiety disorder. Lifetime prevalence rates as high as 13.3% have been reported in the United States (Kessler et al., 1994) and 14.4% in France (Weiller, Bissierbe, Boyer, Lepine, & Lecrubier, 1996). Age of onset varies considerably. Although a number of studies have found the mean to be during midadolescence (Davidson, Hughes, George, & Blazer, 1993; Öst, 1987; Turner, Beidel, Dancu, & Keys, 1986), other epidemiological data suggest greatest risk of onset to be between ages 5 and 9 (Boyd et al., 1990; Schneier, Johnson, Hornig, Liebowitz, & Weissman, 1992). In addition, the course of social phobia is usually chronic and unremitting and the quality of life is poorer than in other anxiety disorders in relation to childhood, friends, partner, and health (Bech & Angst, 1996; Beidel, Turner, & Morris, 1999; Weiller et al., 1996).

Research into social phobia has taken place in a number of countries, indicating that it is an ubiquitous phenomenon. Despite its prevalence, however, scant attention has been paid to researching the etiology of this disorder, suggesting that little has changed since Bruch's (1989) review of familial and developmental antecedents. Several recent studies have taken a more general approach, consistently finding an association between overinvolved and controlling parental behaviors and anxiety disorders in children (Hudson & Rapee, in press; Siqueland, Kendall, & Steinberg, 1996). In addition, social learning within the family environment appears to be related to presence of anxiety disorders, in that anxious children's selection of avoidant responses to ambiguous scenarios have been found to increase following discussions with their parents (Barrett, Rapee, Dadds, & Ryan, 1996). While these studies include themes that are relevant to social phobia, their primary objective was not to identify differential etiological determinants of the various anxiety disorders. Indeed, only a handful of studies have explicitly explored parent–child relationships in relation to social phobia and none have looked at the wider spectrum of interpersonal relating that occurs during the developmental years. Specific research investigating an association between social phobia and temperamental correlates is also extremely limited. This is in stark contrast to the broad base of related literature that has emerged in terms of descriptive

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