



## The etiology of social phobia: Empirical evidence and an initial model

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### Abstract

Research into the etiology of social phobia has lagged far behind that of descriptive and maintaining factors. The current paper reviews data from a variety of sources that have some bearing on questions of the origins of social fears. Areas examined include genetic factors, temperament, childrearing, negative life events, and adverse social experiences. Epidemiological data are examined in detail and factors associated with social phobia such as cognitive distortions and social skills are also covered. The paper concludes with an initial model that draws together some of the current findings and aims to provide a platform for future research directions.

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### 1. Introduction

Social phobia is a debilitating disorder that affects a relatively large percentage of the population. While tremendous strides have been made in our understanding of potential maintaining factors in this disorder and consequently in its management, we are still a long way from knowing why one person develops the disorder and another does not. In turn, this information can be used to develop prevention efforts and ultimately reduce the incidence of the disorder (see [Spence, 2001](#)). Given that social phobia

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also precedes several other debilitating disorders such as depression and substance abuse for many individuals, understanding of the etiology of social phobia may help to improve understanding of these other disorders as well.

To date, there have been no single, landmark studies that comprehensively pull together a large part of the puzzle of the onset of social phobia. However, a wealth of empirical evidence provides insight and hints to a myriad of separate aspects that may be influential in the onset of social fears. These include epidemiological studies that point to unique features of social phobia that may be involved in its onset, as well as more descriptive and experimental studies in clinical and high-risk populations that focus on putative causal constructs. In this article, we attempt to draw together a wide variety of information relevant to social phobia that we believe may have bearing on questions of etiology. In some ways, these data raise more questions than they answer, but this is beneficial since it is important to provide guidance and direction to future investigations of causal mechanisms in social phobia. While it is impossible at this stage to provide a complete picture of the causes of social fears, in the final section we attempt to draw together some of this information and provide an initial model that will hopefully allow some concerted efforts for future research to better understand the onset of social phobia and ultimately produce far more comprehensive models.

## **2. Descriptive features of social phobia relevant to issues of onset**

### *2.1. Diagnostic threshold*

An issue of major consideration for any theory of the etiology of social phobia is whether the disorder should be considered a qualitatively distinct category, or as simply a relatively arbitrary cut along a broader dimension or continuum. Evidence on this point can be examined from studies of the distribution of social fears in various samples. Such data generally indicate that fear and avoidance of social situations typically occur broadly and normally across the population (Essau, Conradt, & Peterman, 1999; Mattick & Clarke, 1998; Stein, Torgrud, & Walker, 2000; Turner, Beidel, Dancu, & Stanley, 1989).

A related direction of research involves examination of the effects of variations in diagnostic threshold on the prevalence of social phobia in community samples. Several studies have identified one or more “subthreshold” or “symptom only” groups of individuals with social fears (Merikangas, Avenevoli, Acharyya, Zhang, & Angst, 2002; Pelissolo et al., 2000; Stein, Walker, & Forde, 1994). In most cases, differences between these “groups” can be best explained by simple quantitative relationships.

Some research has also examined similarities and differences between the diagnostic category of social phobia and the highly related personality construct of shyness. Some early research comparing individuals who scored high on measures of shyness with those who met diagnostic criteria for social phobia, failed to indicate significant differences on measures of thought content, physiological responsiveness, or behavioral patterns (Turner, Beidel, & Larkin, 1986; Turner, Beidel, & Townsley, 1990). In contrast, a more recent study has indicated some minor differences (Heiser, Turner, & Beidel, 2003), but methodological problems (such as measurement error) might easily explain these data.

Based on the above considerations, we would argue that social phobia should most parsimoniously be viewed as lying on a continuum of social anxiety (Rapee, 1995). This continuum would begin at the

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