



## Self-perception and rumination in social anxiety

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### ABSTRACT

The present study examined the relationship between perceptions of performance and post-event processing (PEP) following task feedback in individuals with social phobia and matched control participants. Groups of high and low socially anxious participants engaged in a structured 5-min conversation in groups of four people. Following the conversation, false feedback (given in the form of either high scores or moderate scores) was given and self-appraisals of performance, levels of positive and negative mood, and levels of PEP were assessed. Results showed that participants' perceptions of their own performance and levels of positive affect significantly predicted the degree to which they engaged in negative rumination about the task. The moderate score condition was found to be detrimental for socially anxious individuals' self-appraisals and PEP, whereas controls showed no significant difference in self-appraisal and PEP, regardless of feedback. The results are discussed in relation to current cognitive models of social phobia and both treatment implications and directions for future research are explored.

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Cognitive models of social anxiety (Clark & Wells, 1995; Rapee & Heimberg, 1997) outline post-event processing (PEP) as one of the core cognitive processes that maintain social anxiety. The PEP period has been conceptualised as rumination related to perceived inadequacies and mistakes pertaining to one's social performance (Kocovski & Rector, 2007). According to Clark and Wells, the socially anxious individual engages in PEP due to the inherently ambiguous nature of social interactions. As a result of their selective retrieval of threat-related internal and external information, the PEP period is characterised by negative self-perceptions and feelings, which may be exaggerated and distorted. The repetitive review of such negative-laden thoughts serves to maintain the socially anxious individual's negative perception of themselves, thereby maintaining their sense of inadequacy.

The occurrence of PEP as described by Clark and Wells has been well supported in the current literature. A number of studies, using various methodologies including self-report (Fehm, Schneider, & Hoyer, 2007; Kocovski & Rector, 2007; McEvoy & Kingsep, 2006), diary method (Lundh & Sperling, 2002), social and performance situations (Abbott & Rapee, 2004; Dannahy & Stopa, 2007; Edwards, Rapee, & Franklin, 2003; Perini, Abbott, & Rapee, 2006), and experimental manipulations (Field & Morgan, 2004; Kashdan & Roberts, 2007; Kocovski, Endler, Rector, & Flett, 2005; Mellings &

Alden, 2000) have demonstrated that compared to healthy controls, socially anxious individuals experience greater levels of PEP following anxiety provoking social situations.

Due to the cumulative support for the role of PEP in cognitive models of social anxiety disorder, many researchers have turned to focus on the factors that influence the level of PEP for socially anxious individuals. For example, Kocovski and Rector (2007) found that levels of social anxiety predicted the degree to which participants engaged in PEP after an exposure task. Similarly, Fehm et al. (2007) found that fear of negative evaluation, which is an aspect of social anxiety, was significantly associated with PEP. However, according to Clark and Wells' (1995) model, a specific relationship exists between a negative perception of performance in social situations and the tendency to engage in PEP. That is, the more negative one's self-appraisal is in social situations, the higher the degree of negative PEP. Abbott and Rapee (2004) showed that compared to the control group, socially phobic individuals tend to have more negative appraisals of their own performance following a speech task, and these individuals engaged in more negative post-event rumination. In addition, social anxiety and negative self-appraisal scores significantly predicted PEP, supporting Clark and Wells' (1995) model. Subsequent treatment improved perceptions of performance and reduced negative rumination.

To further study the relationship between negative self-perceptions and PEP, Perini et al. (2006) asked a socially anxious group and a control group to perform an impromptu speech and to appraise their own performance immediately after the task. They found that compared to controls, the socially phobic group engaged

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in more PEP, but this relationship was mediated by the participants' perception of their own performance. When perception of performance was statistically controlled, the relationship between social anxiety and PEP became non-significant. Taken together, Abbott and Rapee (2004) and Perini et al. (2006) suggest that the level of PEP may be influenced by an individual's negative misperception of their own performance during anxiety provoking situations, supporting the key role for cognitive factors in PEP.

Even though many studies have shown that socially anxious individuals tend to underestimate their own performance (Alden & Wallace, 1995; Mellings & Alden, 2000; Rapee & Hayman, 1996; Rapee & Lim, 1992; Stopa & Clark, 1993), and that this negative appraisal of performance predicts PEP (Abbott & Rapee, 2004; Perini et al., 2006), there have not been any studies that have directly examined the effect of manipulating perception of performance via feedback on the level of PEP. In a study not specific to social anxiety, Thompson, Webber, & Montgomery (2002) manipulated the valence of feedback on a problem-solving task and examined its effects on negative rumination with a sample of worriers and non-worriers. They found that following an induction to make participants believe they had failed on a task, worriers showed elevated anxiety, had more negative affective reactions and greater intrusive thoughts related to their failure. Because socially anxious individuals are typically concerned with others' evaluation of them and see positive appraisal by other as being crucial to maintaining a stable self-image, manipulating the perceived valence of feedback is likely to have an effect on self-appraisal of social performance and any subsequent rumination.

The aim of the present study was to investigate whether manipulating perception of performance via false feedback has an effect on PEP among a group of non treatment seeking student group with social phobia compared with a group of non-anxious control participants, and if so, whether this effect is different for the two groups. Because social interaction anxiety is a core problem for those with social phobia, a social interaction task, adapted from Leary, Cottrell, and Phillips (2001) was used to elicit social anxiety. We chose to compare responses to two forms of false feedback following a social interaction task for socially phobic and control participants. Participants were randomly allocated to either a high score condition or to a moderate score condition. The high score condition reflected predominantly positive evaluation by three peers following a social interaction task. By comparison, the moderate score condition equated to a "pass score" from three peers following a social interaction, which participants were told was neither a strongly positive nor strongly negative evaluation of their interaction performance. The moderate score condition, as opposed to a condition including predominantly negative evaluation, creates a condition of uncertainty about the nature of the feedback and was intended to enhance anxiety and impact self-appraisals of performance and rumination negatively. Previous research has documented the detrimental effect of conditions of ambiguity for socially anxious people (Amir, Foa, & Coles, 1998; Constans, Penn, Ihen, & Hope, 1999; O'Banion & Arkowitz, 1977; Stopa & Clark, 1993). The two conditions will be directly compared, allowing the impact of social feedback to be assessed.

Given the evidence that the relationship between social anxiety and negative rumination is mediated by perception of performance, and also given that the valence of feedback received on problem-solving tasks can influence subsequent negative rumination and affectivity, the present study hypothesised that

1. In relation to perception of performance, socially anxious individuals who receive moderate scores will report more negative self-appraisal compared to those who receive high

scores, while non-anxious controls will not show significant differences in self-appraisal.

2. In relation to PEP, socially anxious individuals who receive moderate scores will report higher levels of PEP compared to those who receive high scores, while non-anxious controls will not show significant differences in PEP
3. Negative self-appraisal of one's interaction performance will significantly predict PEP levels after controlling for self-reported levels of trait and state anxiety and depressive symptoms.
4. In relation to subjective affectivity:
  - a) Participants who receive moderate scores will experience a decrease in positive affect (PA) and increase in negative affect (NA) and state anxiety, and these effects are expected to be stronger for the socially anxious group than for the control group.
  - b) Participants who receive high scores will experience an increase in PA and decrease in NA and state anxiety. These effects are expected to be stronger for the control group than for the socially anxious group.

## Method

One thousand two hundred and eighty seven first year psychology undergraduate students completed the Social Interaction Anxiety Scale (SIAS; Mattick & Clarke, 1998). Students with scores above 40 and below 15 were selected to participate in the study in exchange for course credit. Extreme groups were chosen to maximise the chances of finding an effect. A cut-off score of 36 for the screening of high socially anxious individuals has been recommended by Peters (2000). However, the present study employed a more stringent score of 40 to minimise the false positive rate. There are no guidelines for cut-off scores for low socially anxious individuals; thus we employed a score of 15 which allowed for sufficient sample size. In order to attract more participants, community volunteers were also recruited, and were paid a small sum for their travel expenses. Community volunteers were recruited via online advertisements targeting individuals who were either socially anxious or socially confident. These volunteers did not differ from the student sample on any demographic variables. A total of 89 participants who met the SIAS cut-off criteria were administered the Anxiety Disorders Interview Schedule for DSM-IV-TR (American Psychiatric Association, 2000) by the first author (ADIS; DiNardo, Brown, & Barlow, 1994) to determine their clinical status. In addition, the Avoidant Personality Disorder section of the International Personality Disorder Examination (IPDE; Loranger, Janca, & Sartorius, 1997) was also administered. Only those who met criteria for a principal diagnosis of social phobia were invited to participate in the study. Among those who were administered the ADIS-IV, 8 were excluded for not meeting criteria for social phobia, and 1 participant was unable to complete the interview. The ADIS interviews were videotaped and coded by an independent rater (a third year doctoral level clinical psychology student) who was experienced in coding speech and interaction tasks and was blind to the diagnostic status of the participants. Inter-rater reliability for a principal diagnosis of social phobia was calculated using kappa coefficients, and showed excellent agreement ( $k = .87$ ).

The final sample consisted of 40 participants in the clinical group and 40 participants in the control group, among whom 6 (3 clinical, 3 control) were community volunteers. Within those in the clinical group, 20% also met criteria for Avoidant Personality Disorder. The mean clinician rated severity on a 9 point scale (0–8) for the principal diagnosis of social phobia was 5.2 ( $SD = 1.17$ ) with a higher score indicating greater severity. Within the clinical group, 17.5% of participants also met criteria for another Axis I disorder

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