

Cognitive Indicators of Social Anxiety in Youth: A Structural Equation Analysis

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Previous studies have demonstrated significant relationships among various cognitive variables such as negative cognition, self-efficacy, and social anxiety. Unfortunately, few studies focus on the role of cognition among youth, and researchers often fail to use domain-specific measures when examining cognitive variables. Therefore, the purpose of the present study was to examine domain-specific cognitive variables (i.e., socially oriented negative self-referent cognition and social self-efficacy) and their relationships to social anxiety in children and adolescents using structural equation modeling techniques. A community sample of children and adolescents ($n = 245$; 55.9% female; 83.3% Caucasian, 9.4% African American, 2% Asian, 2% Hispanic, 2% “other,” and 1.2% not reported) completed questionnaires assessing social cognition and social anxiety symptomology. Three latent variables were created to examine the constructs of socially oriented negative self-referent cognition (as measured by the SONAS scale), social self-efficacy (as measured by the SEQSS-C), and social anxiety (as measured by the SPAI-C and the Brief SA). The resulting measurement model of latent variables fit the data well. Additionally, consistent with the study hypothesis, results indicated that social self-efficacy likely mediates the relationship between socially oriented negative self-referent cognition and social anxiety, and socially oriented negative self-referent cognition yields significant direct and indirect effects on social anxiety. These findings indicate that socially oriented negative cognitions are

associated with youth's beliefs about social abilities and the experience of social anxiety. Future directions for research and study limitations, including use of cross-sectional data, are discussed.

Keywords: social anxiety; social self-efficacy; socially oriented negative self-statements; youth

THE MOST EFFICACIOUS METHOD of treatment for social anxiety among children and adolescents is cognitive-behaviorally based treatment (Chambless & Ollendick, 2001; Chambless et al., 1998; Davis, May, & Whiting, 2011; Hodson, McManus, Clark, & Doll, 2008; Ollendick & King, 2004; Silverman & Ollendick, 2008; Silverman, Pina, & Viswesvaran, 2008). Unfortunately, until recently, cognitive variables have been largely overlooked in children (Davis & Ollendick, 2005; Davis et al., 2011), and cognitive components of treatment have been focused more on skills implementation than thought modification (Melfsen et al., 2011). Although exposure is the most critical component of cognitive behavior therapy (CBT; Davis & Ollendick, 2005), it has been posited that children can benefit from cognitive strategies in therapy, given the appropriate circumstances and modifications (Davis et al., 2011; Melfsen et al., 2011; Ronen, 1992). Previous studies have implicated specific cognitive variables (e.g., negative self-referent cognitions, self-concept, self-efficacy, and coping beliefs) in the presentation of social anxiety, but questions remain as to the specific role that each cognitive variable plays. The purpose of the present

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study was to further explore the relationships among socially oriented cognitive variables and social anxiety among children and adolescents using structural equation modeling (SEM) techniques to better delineate the cognitive process of social anxiety in youth and perhaps inform and enhance cognitive-behavioral treatment practices.

Although social phobia is known as a clinical disorder that involves an excessive or unreasonable, marked and persistent fear of social situations that invariably provokes an anxiety response (DSM-IV-TR; American Psychiatric Association, 2000), Schlenker and Leary (1982) defined the continuous construct of "social anxiety," as a broader and more encompassing construct that results from the prospect or presence of personal evaluation along with a fear of social failure and criticism. Two types of situations, interaction anxiety and performance anxiety, have predominantly been identified as anxiety-provoking and distinguishable areas of social anxiety (Mattick & Clarke, 1998). Whereas each of these areas is distinct, both have demonstrated strong relationships with socially oriented cognitive variables.

Negative cognition has been linked to the manifestation of social anxiety among youth and adults (Cieslak, Benight, & Lehman, 2008; Glass & Furlong, 1990; Leary & Atherton, 1986; Muris, 2002). Children are thought to be capable of perspective taking and recursive thought (i.e., thinking about what another person is thinking about) beginning around 7–8 years of age, with full development of more abstract "other" perspective thinking by age 15 years (Selman, 1980; Selman & Jaquette, 1977). Similarly, research regarding theory of mind (TOM), the ability to attribute mental states, beliefs, intents, and so on to oneself and others, suggests that perspective taking and metacognition begin to develop as young as 5–7 years with TOM being more fully developed by the middle teenage years (Wellman, Cross, & Watson, 2001). Negative self-evaluations, as well as perceptions of how others view oneself, are thought to heavily impact one's own anxiety for social situations and performance in those situations (Clark & Wells, 1995; Leary, 1983). Given this information, onset of childhood social anxiety typically occurs, not surprisingly, between the late childhood and mid-teenage years (DSM-IV-TR; Davis, Munson, & Tarzca, 2009; Van Roy, Kristensen, Groholt, & Clench-Aas, 2009).

Negative self-referent cognition is classified as internal dialogue that is negative in content, state oriented, and can have a lasting emotional impact on disordered and nondisordered youth (Ronan, Kendall, & Rowe, 1994; Sood & Kendall, 2007). General negative self-statements are associated with

irrational beliefs, fear of negative evaluation, and global behavior ratings of social interactions (Glass & Furlong, 1990), with a greater number of negative self-statements being positively correlated with higher levels of social anxiety in adults (e.g., Glass & Furlong, 1990), children, and adolescents (e.g., Wichmann, Coplan, & Daniels, 2004). However, the content and frequency of negative self-statements tend to differ across different anxiety-provoking situations (King, Mietz, Tinney, & Ollendick, 1995; Prins, 1986; Sood & Kendall, 2007), and therefore, it may be more appropriate to examine the impact of more situationally specific negative self-referent cognition in social anxiety. Rudy and Davis (2013) created a measure designed specifically to address negative self-referent cognition among the two types of social anxiety (performance anxiety and interaction anxiety). Preliminary investigations indicated that situationally constrained (socially oriented) negative cognitions were highly associated with the increased self-report of social anxiety among youth (Rudy & Davis, 2013). Melfsen and colleagues (2011) demonstrated similar findings with a similar assessment measure (i.e., the SAKK; Graf, Gerlach, & Melfsen, 2007) designed for assessment of German youth. Using vignette-based social scenarios, Prinstein, Cheah, and Guyer (2005) found that their parallel construct, critical self-referent attributions were positively associated with increased internalizing symptoms such as depression, social anxiety, and loneliness. Further, Clark and Wells's (1995) cognitive model of social anxiety indicated that negative social cognitions and self-focused attention play a crucial role in the manifestation of social anxiety, a finding that has been corroborated with youth by multiple researchers (e.g., Hodson et al., 2008; Johnson & Glass, 1989).

The construct of self-efficacy has also been established as an important cognitive component of the experience of social anxiety. Bandura (1977, 1997) described self-efficacy as the belief in one's own capability to do something. This construct is also thought to be best understood as situationally specific in nature (Bandura, 1977, 1997; Leary & Atherton, 1986) but is likely somewhat more stable or trait based than negative self-statements (Bandura, 2001). Socially oriented self-efficacy, or "social self-efficacy," is best described as a person's belief in his or her ability to accurately execute social situations. For instance, if a person does not believe that he or she can accurately perform a social situation, the lack of confidence is likely to heighten anxiety and decrease the probability of competently handling the situation (Leary & Atherton, 1986). In youth, researchers have repeatedly demonstrated the connection between social self-efficacy and social

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