



Pergamon

Anxiety Disorders
16 (2002) 585–598

JOURNAL
OF
**Anxiety
Disorders**

Scrutinizing the relationship between shyness and social phobia

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Received 27 November 2000; received in revised form 15 March 2001; accepted 26 April 2001

Abstract

The nature of the relationship between shyness and social phobia can be clarified by assessing rates of social phobia in highly shy and normative samples. In the present study, 2202 participants were screened and categorized on a shyness scale as highly shy (90th percentile) or “normatively” shy (40–60th percentile). The Composite International Diagnostic Interview and the Structured Clinical Interview for DSM-IV Axis II Personality Disorders (SCID-II; Avoidant Personality Disorder module) were used to assign clinical diagnoses. Approximately 49% of individuals in the highly shy group had a social phobia diagnosis compared to 18% in the normatively shy group. Significantly more generalized social phobia (36% vs. 4%) and avoidant personality disorder (14% vs. 4%) diagnoses were present in the highly shy group compared to the normatively shy group. Equal rates of nongeneralized social phobia (i.e., 14% vs. 14%) were present in the highly shy and the normatively shy comparison group. Findings suggest that shyness and social phobia (especially the generalized type) are related constructs but not completely synonymous; an individual can be extremely shy yet not have a social phobia diagnosis.

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Keywords: Social phobia; Social anxiety disorder; Shyness; Subtypes; Comorbidity; Adolescents

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1. Introduction

In concert with a growing awareness of the high prevalence and seriousness of social phobia have come questions about its diagnostic boundaries (Den Boer, 1997; Stein, 1996). Of particular interest is the ambiguity surrounding social phobia's distinction from normal shyness. Also, there is some popular concern that normative personality traits, such as shyness, are being pathologized (Stein, 1999).

A review of the literature has found that social phobia and shyness share many symptoms (see Henderson & Zimbardo, 2001; Turner, Beidel, & Townsley, 1990). Individuals who are shy and individuals with social phobia both experience heightened autonomic arousal in social situations (e.g., increased heart rate, blushing, sweating) (Beidel, Turner, & Dancu, 1985; Henderson, 1992; Pilkonis, 1977). In addition, social skills deficits (e.g., limited eye contact, speech latencies), avoidance of social interactions, and cognitions reflecting fear of negative evaluation are characteristic of both groups (Heimberg, Hope, Dodge, & Becker, 1990; Herbert, Hope, & Bellack, 1992; Ludwig & Lazarus, 1983; Zimbardo, 1977).

Although symptom profiles of social phobia and shyness overlap significantly, prevalence rates of the two constructs are different. Rates of shyness range from 40 to 50% (Carducci & Zimbardo, 1995; Zimbardo, 1977) while rates of social phobia range from 3 to 16% (Furmark et al., 1999; Kessler et al., 1994; Wacker, Mullegans, Klein, & Battegay, 1992). Furthermore, at least 90% of college students report being shy at some point in their lives (Zimbardo, Pilkonis, & Norwood, 1975).

According to Turner et al. (1990), variables that may distinguish shyness from social phobia include severity of avoidance, level of impairment in social and occupational functioning, and course. More specifically, individuals who are shy report less avoidant behaviors and less impairment, and their symptoms often exhibit a transitory course compared to individuals with social phobia (Pilkonis, 1977; Schneier, Johnson, Hornig, Liebowitz, & Weissman, 1992; Turner, Beidel, & Larkin, 1986; Wells, Tien, Garrison, & Eaton, 1994). Differences between shyness and social phobia also may be explained by conceptualizing shyness subgroups. For example, Zimbardo (1977) proposed that there are two types of shy individuals; (1) shy introverts who prefer to be alone and lack social skills and, (2) shy extraverts who desire to interact with others, but lack social skills and experience internal distress and cognitive distortions about social situations. Similarly, Pilkonis (1977) divided shy individuals into publicly shy and privately shy subgroups. Using these conceptualizations, it may be that certain shyness subgroups are more likely to manifest social phobia than others.

Although it is easy to infer that shyness and social phobia are related, the empirical nature of this relationship remains unclear. Currently, there is only one study that presents data regarding the distribution of social phobia among highly shy individuals. St. Laurant, Henderson, and Zimbardo (2000) retrospectively reviewed charts of 114 patients presenting for treatment at a shyness clinic and reported that 97% of their sample had a generalized social phobia diagnosis. The rate of avoidant personality disorder, a disorder that is frequently comorbid with

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