

Social anxiety in children: social skills deficit, or cognitive distortion?

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Abstract

Background. Treatments for childhood social anxiety have traditionally employed social skills training, based on the assumption that affected children have social skills deficits. Recent conceptualisations of social anxiety in adults have questioned this assumption, and have suggested that socially anxious individuals merely *believe* that they have skill deficits. A recent study using children provided preliminary confirmation of this for younger populations, and also suggested that beliefs about appearing nervous are of particular importance.

Methods. Two groups of children, aged 10–11 years (analogue high social anxiety/low social anxiety), participated in a conversation with an unfamiliar adult. They then rated their performance in a number of domains, after which independent observers also rated their performances.

Results. Independent observers were unable to distinguish between the low and high social anxiety groups. However, high socially anxious children rated themselves as appearing significantly less skilled than their low socially anxious counterparts. Notably, high socially anxious children rated themselves particularly poorly in terms of how nervous they looked.

Conclusions. Socially anxious children may not necessarily display social skill deficits. However, they may believe that they appear nervous during social encounters. Clinicians should consider using CBT techniques to address these concerns, rather than relying on social skill remediation.

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1. Introduction

There has been a widely held assumption that people suffering from social anxiety are experiencing some kind of social skills deficit, and the treatment of choice for this client group has, therefore, been ‘social skills training’ (e.g. Bijstra & Jackson, 1999; Hayward et al., 2000; Spence, Donovan, & Brechman-Toussaint, 2000). This approach has met with some success, which has often been interpreted as giving support to the social skills deficit theory. However, more recently, these assumptions have been questioned.

Recent cognitive models of social anxiety (derived mainly for adult clients) have proposed that sufferers do not generally lack adequate social skills. They do, however, *believe* that they lack social skills—a belief that may seriously undermine their confidence in social situations (e.g. Clark & Wells, 1995; Rapee & Heimberg, 1997). Cognitive interventions designed to modify these deleterious beliefs about social skills deficits have met with early success (e.g. Wells & Papageorgiou, 2001).

In addition, there is now direct evidence that the socially anxious do not necessarily lack social skills. Several studies have reported that individuals with social anxiety (or non-clinical participants with high levels of reported social anxiety) do not lack social skills compared to their low socially anxious counterparts (e.g. Rapee & Lim, 1992; Strahan & Conger, 1998).

A number of studies, however, have reported social skill deficits in the socially anxious, (e.g. Beidel, Turner, & Dancu, 1985; Segrin & Flora, 2000; Spence, Donovan, & Brechman-Toussaint, 1999), but it is possible that there is a simple explanation for some of the discrepant results reported by these studies. In particular, most of the studies that reported deficits had asked participants to *self-report* on their own social skills. In two studies where both objective and subjective reports of social skills were taken, it was only on the subjective reports that any deficits were apparent. (Segrin, 1999; Segrin & Kinney, 1995). This indicates that self-reporting of social skills may produce biased results—and supports the new conceptualisations of social anxiety as a deficit in confidence in social skills, rather than a deficit in social skills per se. In several studies where small observable differences were apparent in socially anxious adults, these were substantially magnified by self-reports of performance, when compared with observer ratings (e.g. Norton & Hope, 2001). Furthermore, most studies recognise that there is considerable overlap in the performance of the socially anxious and non-socially anxious groups, such that some socially anxious participants receive very good performance ratings from observers. These facts suggest that impaired social skills cannot be the major cause of social anxiety in all cases.

To date, little work has examined the role of social skills in the development of social anxiety in children. However, examination of social skills in the early stages of social anxiety is crucial to the understanding not only of child anxiety, but to the understanding of any deficits that may be apparent in adults with long-standing disorders. It is quite possible that any deficits in social skill that are apparent in adults may not be the cause of their anxiety, but arise as a consequence. Many adults with severe social anxiety avoid social encounters, and report having done so for many years. It is quite possible that the consequent lack of social activity could result in under-rehearsed social skills. If this theory is correct, we may hypothesise that socially anxious children, who have had less opportunity to engage in social avoidance, will not yet

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