Overcoming a social phobia psychology essay

Social anxiety disorder also known as social phobia, is a psychological anxiety disorder in which people have a strong irrational fear of interaction, or being in situations that may cause one to be judged, because one feels overly burden about being embarrassed or criticized. A scale-based questionnaire is able to diagnose those with social phobia as many tend to confuse social phobia with shyness or introversion.

Every individual suffering from social phobia inadvertently experiences somatic symptoms such as sweating, palpitations, blushing, and racing heart, but some individuals may experience fewer symptoms as compared to others. There are two types of social phobia, namely; generalized social phobia, the fear of most social situations, and specific social phobia, the fear of one or several kinds of social situations. Social phobia causes an individual to involuntarily avoid social contact and be terse in communication, and is often accompanied by discomfort, apprehension, and lack of confidence.

Treatment for social anxiety consists of psychotherapy, pharmacotherapy or a combination of both. This article is proving that social phobia can be treated and even prevented if people start paying attention to little details.

Annotated Bibliography

Ellis, A. (1991) Rational- emotive treatment of simple phobias. Psychotherapy: Theory, Research, Practice, Training. Special Section: Prescriptive Matching in Psychotherapy: Psychoanalysis for Simple Phobias, 28(3), 452-456. doi: 10. 1037/0033-3204. 28. 3. 452

Ellis explains what rational-emotive treatment (RET) is. It is a treatment method showing people with such anxiety that they are overly demanding themselves that they must carry out their responsibilities well. It also shows them that they should not feel uneasy as it is the main cause of their phobias.

Heiser, N. A., Turner, S. M., Beidel, D. C., & Roberson-Nay, R. (2009). Differentiating social phobia from shyness. Journal of Anxiety Disorders, 23(4), 469-476, doi: 10. 1016/j. janxdis. 2008. 10. 002

Heiser is trying to differentiate social phobia from shyness via behavioral tasks which assessed anxiety and social skill level in participants. Social phobia is a legitimate clinical disorder that is well-defined whereas shyness is a more vague term, and both has very similar defining features. Shyness is a normal personality trait whereas social phobia is a medical disorder which can be treated.

Lader, M. (1998). The clinical relevance of treating social phobia. Journal of Affective Disorders, 50, S29-S34, doi: 10. 1016/S0165-0327(98)00091-3

According to Lader, social phobia is the fear of being scrutinised by others in social circumstances which frequently climaxes in evasion of such situations. Many victims of social paranoia do not seek for assistance and the problem does not surface when they seek medical advice for other conditions. The introduction of an array of effective treatments has significantly improved the diagnosis in these victims, particularly, their quality of life.

Rapee, R. M., & Heimberg, R. G. (1997). A cognitive-behavioral model of anxiety in social phobia. Behaviour Research and Therapy, 35(8), 741-756, doi: 10. 1016/S0005-7967(97)00022-3

Rapee discusses about a model of the experience of anxiety in social situations in persons facing social phobia. The model illustrates how these people evaluate information in relation to the dissimilarity between people with high and low social nervousness. It is debated that misrepresentations and prejudices in the processing of social/evaluative information lead to intensified anxiety in social situations and thus, invoking social phobia.

Stuart, A. M. (1999). Social phobia: diagnosis, severity and implications for treatment. European Archives of Psychiatry and Clinical Neuroscience, 249, S1-S6. doi: 10. 1007/PL00014161

Stuart discusses how social phobia has been neglected by the public. The reason for people neglecting this common disorder is that it is difficult to differentiate this disorder from simply shyness. The symptoms for such phobia would be anxiety occurring when examine him or her and is illustrated as frightened of social situations. It is also discussed in article that it has negative consequences on a person leaving them inept in public.

Stuart, A. M., Montgomery, D. B., & Kotak, A. (1996). S-38-1 – Treatment of social phobia. European Neuropsychopharmacology, 6, 149, doi: 10. 1016/0924-977X(96)87995-8

Social phobia can be treated and it is most effective when discovered and treated early as it can prevent the development of harmful coping strategies

such as alcoholism and drug abuse. It also notes that treatment should be initiated when symptoms are associated with significant psychosocial impairment and that psychological therapy is useful either in isolation or when combined with drug therapy.

Haug, T. T., Hellstrøm, K., Blomhoff, S., Humble, M., Madsbu, H. P., & Wold, J. E. (2000). The treatment of social phobia in general practice. Is exposure therapy feasible? Family Practice, 17(2), 114-118, doi: 10. 1093/fampra/17. 2. 114

Most social phobic sufferers seek treatment in primary care settings, but family practitioners are not well-versed to carry out exposure therapy. Hence, Haug attempts to confer the feasibility of exposure therapy in general practice. On top of that, an investigation on the effect of psychotherapy alone or in conjunction with sertraline on generalized social phobia is discussed as well.

Veale, D. (2003). Treatment of social phobia. Advances in Psychiatric Treatment, 9, 258-264, doi: 10. 1192/apt. 9. 4. 258

Veale converses about the assessment of epidemiology, diagnosis, and psychopathology. Clinical presentations, cultural factors, and the dissimilarities of agoraphobia and social phobia are incorporated as well. The repercussions of psychotherapy – graded self-exposure and cognitive restructuring – will be further discoursed.