



A Brief Idea about Social Anxiety Disorder in Modern Era: Review Article

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ABSTRACT:

Now social anxiety is a big problem in all over the World. Social anxiety is the fear of social situations and the interaction with other people that can automatically bring on feelings of self-consciousness, judgement, evaluation, and inferiority. Put differently social anxiety is the fear and anxiety of being judged and evaluated negatively by other people, leading to feelings of inadequacy, embarrassment, humiliation, and depression. If a person usually becomes anxious in social situations, but seems fine when they are by themselves, then social anxiety may be the problem. This paper described about social anxiety disorder.

Introduction:

In modern era Social anxiety disorder spreads everywhere. Social anxiety disorder, sometimes referred to as social phobia, is a type of anxiety disorder that causes extreme fear in social settings. People with this disorder have trouble talking to people, meeting new people, and attending social gatherings. They fear being judged or scrutinized by others.

The term social anxiety is, by most, not associated with being a serious, mental sickness. The common person usually thinks someone with social anxiety is simply not a “people person” However, social anxiety has been defined as either a disorder or phobia. Social Anxiety Disorder is an actual, under diagnosed psychiatric disorder which should be recognized not as mere shyness, but a psychological illness with symptoms and treatments.

The most common disorders in the World is social anxiety. Adults have a 28% chance to be affected by an anxiety disorder sometime in their life. Most of the people affected do not seek treatment, but those that do often get treated ineffectively.

Approximately 12% of all adults experience social anxiety disorder (SAD) at some time in their lives and it’s one of the most common of all of the anxiety disorders. Social anxiety is even more prevalent among adults with attention deficit hyperactivity disorder (ADHD or ADD), who experience SAD as a common comorbid condition.

People with social anxiety disorder may feel worried about appearing anxious, such as blushing or trembling, or about others thinking that they are awkward or unintelligent. Many people also have strong physical symptoms, such as an increased heart rate, feeling sick, or sweating. Social anxiety disorder is a relatively common mental health condition. Children with social anxiety disorder struggle with excessive self-consciousness that goes beyond common shyness. Kids with social anxiety disorder worry so much about being judged negatively by others that they stop doing the things that they need (and want) to do for fear of embarrassing themselves.

Social anxiety disorder mostly affects adolescents, although it can also begin in childhood. Undiagnosed and untreated, it can lead to isolation and depression.

Objectives:

- Describe the meaning and symptoms of social anxiety disorder.
- Explain how to evaluate for social anxiety disorder.
- Outline the management options available for social anxiety disorder.
- Review Litterateurs on social anxiety disorder
- Identify commonly feared social situations.
- Know the prevalence and treatments of social anxiety disorder.

- Identify effective treatments for social anxiety disorder.
- To know the types and effects of Social anxiety disorder
- To know the causes and stages of Social anxiety disorder
- To describe the impact of Social anxiety disorder in educational Institution

What Is Social Anxiety disorder?

Social anxiety disorder is associated with a distinct fear of potential, devastating scrutiny and judgment from others in one or more social situations. For people with social anxiety, worries about humiliation and rejection are persistent, often lasting six months or more. Crippling worry about negative judgment from others may restrict participation in activities, interests, and relationships; it may prevent a person from building a satisfying life.

Meaning of Social Anxiety Disorder:

Social anxiety disorder (also called **social phobia**) is a mental health condition. It is an intense, persistent fear of being watched and judged by others. This fear can affect work, school, and your other day-to-day activities.

Expression of Social Anxiety Disorder:

Some individuals with social anxiety can't eat in front of other people, avoid public places where they may be forced into conversations with strangers, and loathe public speaking. Many teens and young adults with ADHD are susceptible to social anxiety due to executive functioning challenges that impair emotional control, working memory, and self-awareness (metacognition). They may avoid specific triggering situations such as in-person classes or feel intensely nervous and uncomfortable in any social environment.

Symptoms of Social Anxiety disorder:

- Feeling uncomfortable talking to people outside of your immediate family and/or keeping conversations very short
- Having trouble making or keeping friends
- Worrying for days or even weeks before an event
- Being intensely afraid other people will negatively judge you
- Avoiding experiences or places where social interaction will occur (parties, classes, stores, restaurants, gyms, grocery stores, etc.)
- Feeling very self-conscious around other people and in front of them
- Feeling embarrassed to eat in front of others
- Experiencing panic attacks including nausea, shaking, or perspiration in social environments.

Types of Social Anxiety Disorders are:

- Generalized Anxiety Disorder
- Obsessive-Compulsive Disorder (OCD)
- Panic Disorder
- Post-Traumatic Stress Disorder (PTSD)
- Social Phobia (or Social Anxiety Disorder)
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Generalized Anxiety Disorder	Generalized Anxiety Disorder, GAD, is an anxiety disorder characterized by chronic anxiety, exaggerated worry and tension, even when there is little or nothing to provoke it.
Obsessive-Compulsive Disorder (OCD)	Obsessive-Compulsive Disorder, OCD, is an anxiety disorder and is characterized by recurrent, unwanted thoughts (obsessions) and/or repetitive behaviors (compulsions). Repetitive behaviors such as hand washing, counting, checking, or cleaning are often performed with the hope of preventing obsessive thoughts or making them go away. Performing these so-called "rituals," however, provides only temporary relief, and not performing them markedly increases anxiety.
Panic Disorder	Panic disorder is an anxiety disorder and is characterized by unexpected and repeated episodes of intense fear accompanied by physical symptoms that may include chest pain, heart palpitations, shortness of breath, dizziness, or abdominal distress.
Post-Traumatic Stress Disorder (PTSD)	Post-Traumatic Stress Disorder, PTSD, is an anxiety disorder that can develop after exposure to a terrifying event or ordeal in which grave physical harm occurred or was threatened. Traumatic events that may trigger PTSD include violent personal assaults, natural or human-caused disasters, accidents, or military combat.

Social Phobia (or Social Anxiety Disorder)	Social Phobia, or Social Anxiety Disorder, is an anxiety disorder characterized by overwhelming anxiety and excessive self-consciousness in everyday social situations. Social phobia can be limited to only one type of situation - such as a fear of speaking in formal or informal situations, or eating or drinking in front of others - or, in its most severe form, may be so broad that a person experiences symptoms almost anytime they are around other people.
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Stages of social anxiety disorder

Childhood:

Social anxiety begins at infancy whereby at that stage it is normal and a necessary emotion for effectual social functioning and proper developmental growth. Cognitive growth and pressures during late childhood and early adolescence end up causing repeated social anxiety. The most commonly identified anxieties that have been associated with adolescents are focused on relationships with their peers to whom they are attracted to. They also feel anxiety when it comes to fear of public speaking, peer rejections, self-consciousness, blushing, and past behavior. Most adolescents get past their fears. Majority of the children get diagnosed with social anxiety disorder something that if not monitored closely, leads to their failure in education. Social anxiety majorly is fear of criticism by peers. This brings a lot of distress to children in their daily activities like playing with the other kids, reading, or speaking. Nevertheless, some children who suffer social anxiety end up acting out as a result of their extreme fear. The greatest dilemma of identifying the social anxiety disorder in children is that it can be confused to basic shyness.

Adults:

It is easier to identify and recognize social anxiety in adults since they shy away from social situations and love keeping such issues to themselves. The Common adult social anxiety forms include public speaking anxiety, performance anxiety, stage fright, as well as being timid, all of which can assume clinical forms hence become anxiety disorders. The criteria used to distinguish between the clinical and the nonclinical social anxiety forms include intensity and behavioral level and psychosomatic disruption and the anticipatory fear nature. Social anxieties can also be grouped in accordance to the level of the triggering social situations.

Causes of social anxiety disorder

The causes of social anxiety disorder are complex. They are likely to involve a combination of genetic and environmental factors. Social anxiety disorder typically starts early in life, during a person's adolescence or teenage years, but it can affect people of all ages. The condition is more common in females than males.

- Adverse life events: Stressful or traumatic events — such as abuse, violence, the death of a loved one, or a prolonged illness — may increase the risk of an anxiety disorder. Previous bullying, humiliation, or rejection can also increase the risk.
- Parenting styles: Some sources suggest that overprotective parenting can increase a child's risk of social anxiety.
- Biological: Social anxiety disorder is at present thought to have some relation with abnormal brain circuits function that control emotion and "fight or flight" reaction center in a person's brain. Genetic factors could also have a hand in this disorder since social anxiety has been proved to occur to a person whose first-degree relative like parent, sibling, or even child is suffering from the same.
- Psychological: The progress of social anxiety disorder in a person can also develop from upsetting or embarrassing social experiences in past, like being bullied or abandoned by peers.
- Environmental: A person suffering from social anxiety disorder can develop fear from seeing the behavior of other people or observing what happened to another person as a result of a certain behavior like being laughed at or being made fun of. Also, children who go through over protection from their parents sometimes fail to get good social skills in their normal development.

Complications of social anxiety disorder

Social anxiety disorder is treatable. Without treatment, however, it can be debilitating. The symptoms of social anxiety disorder can significantly disrupt the person's work and social life and may result in a lack of social support, low achievement at work and in other areas, a reduced quality of relationships, and a reduced quality of life. Social anxiety disorder is associated with other mental health concerns, including low self-esteem, depression, substance misuse, and suicidal ideation. With appropriate treatment, it is possible to reduce the symptoms of social anxiety disorder, which can greatly improve quality of life.

Effect of Social Anxiety Disorder:

Physical Effects	<p>Physical effects of social anxiety disorder can be common, even while social anxiety involves primarily psychological and social behaviors. These are some physical effects that may be experienced:</p> <ul style="list-style-type: none"> • Racing heart or tightness in chest due to nervousness • Difficulties in occupational functioning • Shortness of breath • Nausea or gastrointestinal upset • Dizziness or faintness
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	<ul style="list-style-type: none"> • Muscle tension • Profuse sweating/shaking
Psychological Effects	<p>Social anxiety disorder involves extreme anxiety, to the point that severe psychological disturbances can result, particularly if it is left untreated. Some of the psychological effects that may be experienced include:</p> <ul style="list-style-type: none"> • Emotional detachment • Severe low self-esteem • Extreme feelings of fear inferiority • Irrational thoughts and perception • Excessive self-consciousness • Severe depression • Dysregulation of emotions • Emotional outbursts • Panic attacks
Social Effect	<p>Social anxiety disorder will directly affect our ability to relate to others socially. Effects of social anxiety on one's social life include:</p> <ul style="list-style-type: none"> • Avoidance of social events or functions • Difficulty initiating or sustaining relationships • Isolation from others due to extreme shyness • Inability to establish intimacy in relationships • Decreased performance in work or school • Marital or familial conflicts due to low self-esteem

Examples of social anxiety disorder in various site:

WORK AND SCHOOL	Examples: difficulty with job interviews; problems interacting with bosses or co-workers; trouble asking and answering questions in meetings or classes; refusing job promotions; avoiding certain types of jobs or career paths; poor performance at work or school; decreased enjoyment of work or school.
RELATIONSHIPS	Examples: difficulty developing and keeping friendships and romantic relationships; trouble opening up to others; difficulty sharing opinions
RECREATIONAL ACTIVITIES/HOBBIES	Examples: difficulty developing and keeping friendships and romantic relationships; trouble opening up to others; difficulty sharing opinions
DAY-TO-DAY ACTIVITIES	Examples: difficulty completing daily activities, such as going grocery shopping, going out to eat, taking the bus, asking for directions, etc.

Diagnosis of Social Anxiety Disorder

- A doctor may ask questions about the person's medical history and carry out a physical exam to rule out any physical causes of their symptoms. They may then refer the person to a mental health professional.
- A mental health professional will ask the person about their symptoms, including when they occur, how often they occur, and when they started.
- Clinicians use the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition to diagnose mental health conditions, including social anxiety disorder.

The diagnostic criteria for Social Anxiety Disorder

- having a persistent fear about one or more social situations that might involve scrutiny from others (such as conversations, social interactions, being observed, or performing in front of others)
- having a fear of acting in a way that others will judge negatively or that might lead to rejection or offense (such as a fear of seeming anxious or of doing something embarrassing)
- avoiding situations that might cause feelings of anxiety
- experiencing symptoms that persist for 6 months or longer, cause significant distress, or impair the person's work, social life, or other key areas

Medications

A doctor may suggest antidepressants to treat social anxiety disorder. For instance, they may prescribe drugs known as SSRIs (selective serotonin reuptake inhibitors), such as:

- Fluoxetine (Prozac)
- Paroxetine (Paxil)
- Sertraline (Zoloft)

The doctor may also suggest antidepressants called SNRIs (selective serotonin and norepinephrine reuptake inhibitors). Some examples are:

- Duloxetine (Cymbalta)
- Venlafaxine (Effexor)

Keep in mind that medicine alone won't be a quick fix for anxiety. The patient will have to wait for it to take effect -- 2 to 6 weeks is a good guideline. And it might take a while to figure out side effects and find the right fit. Some people are able to wean off medication after a few months, and others need to stay on it if their symptoms start to come back. But taking those first steps will lead the social anxiety disorder patient to a less stressful life.

How social anxiety impacts the student at school and College:

Early school

In the early school years, young students tend to experience a number of physical symptoms such as stomachaches or complaints about feeling ill, in anticipation of, or when expected to be in, a social or performance based situation. In addition, these students may cry, whine, freeze, or cling to parents/caregivers, begging the parent/caregiver to stay. These students may even refuse to participate in various activities or to attend school, either by not going, or if they are forced to go, by not speaking (e.g., to the teacher, peers, or administrative staff).

Middle school

In middle school, students are starting to become more self-conscious, and may begin to expect things to go "badly" when they are around peers or at school. They might be overly concerned about others looking at them or talking about them in a bad way. In addition, these students recognize that school is becoming important and may begin to fear the perceived negative judgment by others, of their work. While these students may continue to experience many of the same feelings and behaviors as in younger students, now they are starting to be able to identify what is so upsetting for them.

High school

In high school and beyond, students are typically more self-focused and may have harsh negative thoughts about themselves. They may be more likely to mumble or avoid eye contact. These older students often struggle with academics as they are unable to participate fully in class or to engage in group and oral projects. This can lead to "skipping" school and/or using drugs or alcohol in order to cope. Finally, students may also have trouble dating or experience social problems due to extreme social fear or embarrassment. Unfortunately, not all students are able to recognize that their anxious response may be unreasonable given the situational demands, making it hard for teachers to encourage students to take a different perspective and gain courage to confront their fears.

College and University :

Many studies have indicated that social anxiety is a prevalent disorder among university students. For example, studies from Sweden and India have reported the prevalence of SAD among university students to be 16.1% and 19.5%, respectively.

College Students with social anxiety often avoid or don't participate in group projects or lectures in college due to embarrassment and self-consciousness, their fear of being criticized, or worrisome physical symptoms, such as sweating or stuttering. More than being shy, introverted or socially awkward, social anxiety is a diagnosable form of anxiety that is accompanied by a constant feeling of apprehension regarding social or performance situations and a fear of judgement from others. Be patient and positive as students learn new ways to cope. Encourage all students in the classroom to try relaxation techniques. Encourage shy students to try to speak for themselves, when they can, rather than speaking for them. Identify a "safe place" for when a student feels overwhelmed.

What Teachers Can Do

The best way to help student is to acknowledge the problem in supportive, non-judgmental ways. The Teacher can do the following:

- Use structured classroom activities, small groups, or assigned partners so shy students are not left out

- Assign a classroom buddy to provide support
- Help with social interactions and rewarding efforts
- Be patient and positive as students learn new ways to cope
- Encourage all students in the classroom to try relaxation technique
- Encourage shy students to try to speak for themselves, when they can, rather than speaking for them
- Identify a "safe place" for when a student feels overwhelmed
- Encourage attendance, which may require shortened school days and modified class schedules
- Collaborate with regular meeting with parents, counselors, and school staff

How to Improve Social Anxiety

Talk with a therapist	A trained mental health professional can: <ul style="list-style-type: none"> ● offer more insight on the difference between social anxiety and shyness ● help you identify social anxiety triggers ● teach helpful coping strategies, social skills, and relaxation techniques ● offer guidance with challenging and replacing or reframing negative thoughts
Explore specific situations that trigger anxiety	Start by listing situations that cause the most discomfort, the ones you feel utterly unable to face. These might include: <ul style="list-style-type: none"> ● interviewing for a new job ● meeting with a professor to ask for help ● introducing yourself to someone you're attracted to
Challenge negative thoughts	<ul style="list-style-type: none"> ● accidentally saying something rude or offensive ● calling someone by the wrong name ● tripping or spilling something on yourself ● laughing, sneezing, or coughing at the wrong time ● getting sick in front of other people
Take small steps	<ul style="list-style-type: none"> ● At the store, skip the self-checkout and challenge yourself to make small talk with the cashier instead. ● Raise your hand in class to ask a question. ● Compliment a classmate's or co-worker's outfit. ● Host a small gathering for close friends and loved ones — socializing in your own space can help you feel more comfortable.
Role-play with people you trust	<ul style="list-style-type: none"> ● You're searching for an item at the drugstore and have to explain what you're looking for to the clerk. ● You pronounce the name of your friend's date wrong and they correct you. ● Your boss asks a question during a work meeting and you give the wrong answer. ● You trip and fall in front of a large crowd of people.
Try relaxation techniques	<ul style="list-style-type: none"> ● Inhale slowly through your nose for a count of 4 seconds. ● Hold the breath for 7 seconds. ● Exhale slowly for a count of 8 seconds. ● Slowly tense each group of muscles in your body, beginning with your toes. ● Hold the tension for a count of 5 seconds. ● Slowly exhale as you release the tension. Focus on the new looseness in your muscles for a count of 10 seconds, breathing slowly. ● Move on to the next muscle group and repeat
Watch out for subtler types of avoidance	<ul style="list-style-type: none"> ● At parties, you keep busy in the kitchen, washing dishes and preparing food. ● When you find yourself in a conversation, you encourage the other person to talk about themselves. ● In a group, you stick to the edge, looking down at your phone so no one talks to you.

How I Can Help:

- **Counselling**—Many people with social anxiety disorder benefit from a form of counselling called cognitive-behavioral therapy or CBT. A mental health professional trained in CBT can help you work through the thoughts or beliefs and behaviours that lead to or maintain your social anxiety. CBT helps you cope with social anxiety by teaching you skills to build confidence in social situations. You can also learn how to interact with people and maintain relationships. CBT is usually a short-term treatment. You can get the most out of treatment by regularly practicing CBT skills.
- **Exposure**—Exposure (sometimes called desensitization) helps you “unlearn” anxiety associated with a situation or thing. With the guidance and support of a qualified professional, you gradually take small, planned steps towards a situation you fear until you no longer feel overwhelmed by that situation. It can be a very effective treatment for many different phobias, including social phobia. Exposure is an important part of CBT treatment for social anxiety.
- **Medication**—Anti-anxiety medications or antidepressants can be used in combination with counselling or exposure to reduce your body's response to anxiety.
- **Support groups**—You are not alone. Anxiety disorder support groups in person or online are a great way to share your experiences and learn from the experiences of others.
- **Self-help**—There are some things you can do on your own to help keep you feeling better. Regular exercise, eating well, managing stress, spending time with friends and family, spirituality, and monitoring your use of alcohol and other drugs can help keep anxiety from getting worse.

Talking to your doctor, asking questions, and feeling in charge of your own health are also very important. Always talk to your doctor about what you're doing on your own.

Review of Articles:

So many works have done on social anxiety disorder. Here some of these work are given here.

Sl. no	year	Title	Ref	Says
1	2021	Social anxiety disorder in review: two decades of progress	Rosario B. Hidalgo, Stewart D. Barnett and Jonathan R. T. Davidson, <i>International Journal of Neuropsychopharmacology</i> (2001), 4, 279–298. Copyright # 2001 CINP	SAD is responsive to both cognitive-behavioural and pharmacological treatments with strong effect sizes found for both, and comparisons of these two modalities suggest they are of comparable efficacy.
2	2020	Symptoms and causes of anxiety, and its diagnosis and management	s Rosa Milne, Royal Cornhill, Mary Munro, Robert Gordon, <i>Nursing Times</i> [online] October 2020 / Vol 116 Issue 10	It is essential that nurses working in both primary and secondary care, regardless of their specialism, have a good knowledge and understanding of anxiety, its possible causes, signs and symptoms, treatments and support. A better understanding of the needs and experiences of those with anxiety will facilitate a person-centred approach and providing meaningful recovery-focused care.
2	2019	Social anxiety disorder and emotion regulation problems in adolescents	Petra Sackl-Pammer ^{1†} , Rebecca Jahn ^{2†} , Zeliha Özlü-Erkilic ³ , Eva Pollak ¹ , Susanne Ohmann ¹ , Julia Schwarzenberg ¹ , Paul Plener ¹ and Türkan Akkaya-Kalayci, Sackl-Pammer et al. <i>Child Adolesc Psychiatry Ment Health</i> (2019) 13:37	Promoting adaptive emotion regulation should be a central component of psychotherapy (cognitive behavioral therapy-CBT) for social anxiety in adolescents from the beginning of the therapy process
3	2018	Understanding Social Anxiety Disorder in Adolescents and Improving Treatment Outcomes: Applying the Cognitive Model of Clark and Wells (1995)	Eleanor Leigh & David M. Clark, <i>Clinical Child and Family Psychology Review</i> volume 21, pages 388–414 (2018)	the great potential for adapting and refining the cognitive model of social anxiety disorder (Clark and Wells 1995) for adolescents in order to improve treatment outcomes for this population.
4	2017	Causes of Social Anxiety among Elementary Grade Children	Attiya Inam*, Adeela Mahjabeen* and Muhammad Abiodullah, <i>Bulletin of Education and Research</i> August 2017, Vol. 39, No. 2 pp. 31-42	In the absence of many choices or information, children may consider it normal to obey their parents and do as they are told. It may also be that these children face so many other socio economic problems that authoritative parenting contributes much less to social anxiety relative to other factors.
5	2016	An integrative network approach to social anxiety disorder: The complex dynamic interplay among attentional bias for threat, attentional control, and symptoms	Alexandre Heerena, Richard J. McNally, <i>Journal of Anxiety Disorders</i> 42 (2016) 95–104	findings suggest the value of extending the network approach beyond self-reported clinical symptoms to incorporate process-level measures from laboratory tasks to gain new insight into the mechanisms of SAD.
6	2015	Generalized social anxiety disorder: A still-neglected anxiety disorder 3 decades since Liebowitz's review	Toshihiko Nagata, Futoshi Suzuki, and Alan R. Teo, <i>Psychiatry and Clinical Neurosciences</i> 2015; 69: 724–740	patients with generalized SAD had been conceptualized as having avoidant personality disorder and were thought to need long-term social skills training.
7	2014	Treatment of Separation, Generalized, and Social Anxiety Disorders in Youths	Justin Mohatt, Shannon M. Bennett, John T. Walkup, (<i>Am J Psychiatry</i> 2014; 171:741–748)	Early identification and treatment of the childhood-onset anxiety disorders is critical to preventing future disability

8	2013	Social Anxiety and Social Anxiety Disorder	Amanda S. Morrison and Richard G. Heimberg, <i>Annu. Rev. Clin. Psychol.</i> 2013. 9:249–74	Persons with SA/SAD suppress the expression of a range of emotions, not just anxiety, and they further believe that the expression of emotion is a sign of weakness, supporting the notion that expressive suppression may be the wiser course
9	2012	THE ANXIETY SPECTRUM AND THE REFLEX PHYSIOLOGY OF DEFENSE: FROM CIRCUMSCRIBED FEAR TO BROAD DISTRESS	Lisa M. McTeague, <i>DEPRESSION AND ANXIETY</i> 29:264–281 (2012)	fear circuitry could be dysregulated in chronic, pervasive anxiety, and preliminary functional neuroimaging findings suggest that deficient amygdala recruitment could underlie attenuated reflex responding. In summary, adaptive defensive engagement during imagery may be compromised by long-term dysphoria and stress—a phenomenon with implications for prognosis and treatment planning.
10	2011	Social Anxiety Disorder	Nesrin Dilbaz, Aslı Enez and Serçin Yalçın Çavuş, Chapter · September 2011, p 23-31, DOI: 10.5772/19367 · Source: InTech	SAD is a prevalent and disabling disorder that often remains undetected unless the clinician takes a careful history. Present consensus supports that as first-line treatment in SAD because of their proven efficacy, tolerability and ability to treat co-morbid conditions such as depression or other anxiety disorders
11	2010	Cultural aspects in social anxiety and social anxiety disorder	Stefan G. Hofmann , Anu Asnaani , Devon E. Hinton . <i>Depression and anxiety</i> , Volume27, Issue12 December 2010 Pages 1117-1127	the prevalence and expression of social anxiety/SAD depends on the particular culture.
12	2009	High Anxieties: The Social Construction of Anxiety Disorders	Ian R Dowbiggin, <i>Can J Psychiatry.</i> 2009;54(7):429–436.	The influence of third-party reimbursement on the history of psychiatric diagnosis has been significant. Social and cultural trends have altered the history of psychiatric diagnosis. The power of the pharmaceutical industry has shaped the classification of mental illnesses
13	2008	Social anxiety disorder	ProfMurray BSteinMD, ProfDan JSteinMD, <i>The Lancet</i> , Volume 371, Issue 9618, 29 March–4 April 2008, Pages 1115-1125	A range of effective cognitive behavioural and pharmacological treatments for children and adults now exists; the challenges lie in optimum integration and dissemination of these treatments, and learning how to help the 30–40% of patients for whom treatment does not work.
14	2007	Social anxiety spectrum and diminished positive experiences: theoretical synthesis and meta-analysis	Todd B Kashdan, <i>Clin Psychol Rev.</i> 2007 Apr;27(3):348-65. doi: 10.1016/j.cpr.2006.12.003. Epub 2007 Jan 10.	The specificity of theory and data to social interaction anxiety is supported by an examination of existing work on social performance/observation fears and other anxiety conditions. Overall, these findings highlight the importance of diminished positive psychological experiences in understanding excessive social anxiety.
15	2006	Cognitive mechanisms of social anxiety reduction: an examination of specificity and temporality	Jasper A J Smits I, David Rosenfield, Renee McDonald, Michael J Telch, <i>J Consult Clin Psychol</i> 2006 Dec;74(6):1203-12.	A potential implication is that exposure-based treatments for social anxiety might focus more attention on correcting faulty appraisals of social threat occurrence.
16	2005	Self-Evaluative Biases in Social Anxiety	Andrea R. Ashbaugh, Martin M. Antony PhD, Randi E. McCabe, Louis A. Schmidt & Richard P. Swinson , <i>Cognitive Therapy and Research</i> volume 29, pages387–398(2005)	They suggests that although socially anxious individuals may have clear performance skills deficits, they overestimate the extent to which these behavioral deficits are apparent to others.
17	2004	Social Anxiety in Adolescents	Khyati Mehtalia*1 , G.K.Vankar, <i>Indian Journal of Psychiatry</i> , 2004, 46(3)221-227	Social Anxiety Disorder (SAD) is a common adolescent disorder, with major depression as a comorbidity and associated with impairment in academic functioning. All adolescents especially with depression consulting medical professionals should be interviewed for SAD and treated.

18	2003	Treatment of social phobia	David Veale, <i>Advances in Psychiatric Treatment</i> (2003), vol. 9, 258–264	A cognitive model of the maintenance of social phobia is discussed. It is hypothesised that attentional shifting towards imagery, safety behaviours and ‘post-mortem’ analyses play a key role in symptom maintenance. The implications of this for treatment are described, and guidelines for pharmacological treatment are summarised.
19	2002	The developmental psychopathology of social anxiety disorder	Thomas Hollendick, Dina R Hirshfeld-Becker, <i>Biological Psychiatry</i> Volume 51, Issue 1, 1 January 2002, Pages 44-58	with a developmental psychopathology perspective, that multiple pathways to SAD exist and that the various precursors to SAD do not invariably lead to SAD.
20	2001	Social anxiety disorder in review: two decades of progress	Rosario B. Hidalgo, Stewart D. Barnett and Jonathan R. T. Davidson, <i>International Journal of Neuropsychopharmacology</i> (2001), 4, 279–298. Copyright # 2001 CINP	Phenelzine is clearly effective in SAD and certain benzodiazepines can offer significant relief of symptoms ; however, because use of each entails inherent risks, these medications should be used with caution, especially phenelzine. The RIMA moclobemide appears safe and well tolerated but has limited effectiveness in SAD ; the RIMA brofaromine appears more effective, but is not currently available for clinical use.
21	2000	Social Anxiety Disorder/Social Phobia: Epidemiology, Diagnosis, Neurobiology, and Treatment	Johan A. den Boer, <i>Comprehensive Psychiatry</i> , Vol. 41, No. 6 (November/December), 2000: pp 405-415	Optimum treatment strategies for social anxiety disorder have not been clearly defined. However, no one would disagree that treatment should be aggressive in view of the potential disability caused by the disorder. SSRIs show the most promise for the treatment of social anxiety disorder. Perhaps now is the time to look social anxiety disorder straight in the eye and treat it accordingly.

Summary

Social anxiety disorder is a relatively common mental health condition. Symptoms include an intense fear of certain social situations, a fear of ridicule, and a strong desire to avoid social situations.

The outlook for people with social anxiety disorder is actually good with treatment. Most of the people improve and begin to enjoy more dynamic lives. It is unfortunate that social anxiety disorder cannot possibly be prevented; nevertheless, seeking help soon after the symptoms surface can assist in making the treatment more effectual.

When severe or without treatment, the condition can be debilitating. However, with effective intervention — which might include talking therapies, medications, or both — people can greatly improve their quality of life.

The various anxiety disorders, theories, and associated treatments were reviewed. The treatment for anxiety disorders is based on a solid scientific foundation, grounded in research by experts from diverse fields. The research has investigated these biological, social, and psychological factors that contribute to anxiety disorders. This broad research base has led to the development of numerous, empirically-based treatments that have proven to be highly effective. As a result, thousands of courageous individuals have reclaimed their health, restored their functioning, and now enjoy richly rewarding and satisfying lives. The future remains optimistic for those who struggle with anxiety. We are confident that advancements in the treatment of anxiety disorders will continue to bring hope and relief to the people, and families, affected by these disorders.

References:

- Jorstad-Stein EC, et al. "Social Phobia: An Update on Treatment," *Psychiatric Clinics of North America* (Sept. 2009): Vol. 32, No. 3, pp. 641–63.
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