

Potential Risk Factors and Early Experiences to the Development of Social Phobia in Adolescents

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Abstract: This paper explores potential risk factors and underlying experiences associated with the development of social phobia in adolescents, emphasizing the importance of early intervention and treatment. Factors investigated include gender roles, cultural influences, socioeconomic status, parental psychopathology, alcohol use, early memories, and family environment. Gender differences reveal higher rates of social phobia among females, while collectivist cultures and adverse childhood experiences significantly contribute to its prevalence. Dysfunctional family environments are associated with an increased risk and higher persistence of social phobia, particularly due to their influence on childhood experiences. Alcohol use may exacerbate symptoms and lead to higher persistence due to its link to alcohol dependence. Parental psychopathology demonstrates a higher prevalence and co-occurrence with other comorbidities across all ages. Low socioeconomic status and popularity serve as additional risk factors. The paper critiques understudied aspects of these factors and suggests future research directions to enhance understanding and inform effective prevention strategies.

Keywords: Social phobia, Risk factors, Adolescents

1. Introduction

Social phobia is a relatively common anxiety disorder in the general population and typically begins to emerge during adolescence [1]. Individuals with social phobia often exhibit a fear of social situations, worrying about the judgment and humiliation of others and thus avoiding interactions with strangers [2,3]. However, compared to other psychiatric disorders, social phobia is more likely to go unnoticed and untreated [4], which could further exacerbate the symptoms and persistence of social phobia, as well as other comorbidities [1]. Although the causes of social phobia are challenging to predict, a large body of research has conducted experiments focusing on the potential factors that may increase the likelihood of social phobia in adolescence [5-7]. More importantly, it demonstrated a significant relationship between social phobia and a confluence of factors, including gender roles, culture, socioeconomic status, parental psychopathology, alcohol use, early memories, and family environment.

This paper examines the possible risk factors and early experiences associated with the development of social phobia in adolescents in order to draw more attention to social phobia and provide early intervention and treatment. Furthermore, the paper discusses the reviewed literature's limitations and suggests future research directions for examining the causes of social phobia.

2. Potential Risk Factors

2.1. Gender Roles

The differences in gender roles are known as a crucial factor in social phobia, with a variety of studies suggesting that females are more likely to develop social phobia [6-8]. Female adolescents are thought to be more prone to introversion and shyness, as well as more common characteristics, for instance, submissive behaviors and avoidant personalities [7]. As a result, females have a higher prevalence of social phobia, as these behaviors effectively lead to the symptoms of social phobia and its development. Women and men also appeared to fear different social situations, as well as showing different levels of fear [9,10]. Hofmann et al. concluded that women often experience a more intense fear than men with a similar social phobia condition [10]. Women often showed fear in social situations, including authority and working environments, while men frequently exhibited fear in dating situations [9].

Nevertheless, social phobia may have a more significant impact on males' social functioning than females. It has been observed that a significant percentage of 15-year-old males with social phobia were without close friends and romantic relationships at age 17 compared to those without social phobia [11]. There were no differences for females with and without social phobia [11]. Therefore, while social phobia may affect males more, there is sufficient evidence to suggest that females have higher rates of social phobia and that gender differences play an essential role in the association of social phobia.

2.2. Culture

It has been suggested that social phobia is likely to be more common in collectivist cultures than in individualistic cultures, where there are more rules or underlying expectations for social behavior [10]. This specifies that individuals in collectivist cultures, for instance, Southeast Asians and South Americans, will be more concerned about their behavior in social situations to avoid going against social norms and violating the rules for social behavior [10]. In addition, collectivistic cultures are more tolerant toward social retention and isolation [12]. This may be related to the fact that individuals in collectivist cultures are less likely to promote independent self-construals, in which they do not perceive themselves as having independent, unique attributes and are vulnerable to social influences [10]. Hofmann et al. suggested that this could lead to lower self-esteem as most people try to fit in with the social context instead of differentiating themselves from others [10]. Likewise, it may increase concerns about one's behavior in social situations as individuals are primarily influenced by social and other external sanctions. Thus, the evidence suggests that collectivist countries tend to exhibit higher levels of social phobia.

2.3. Socioeconomic Status & Popularity

Individuals affected by social phobia are more likely to be in the lower class and socioeconomic status of society [13,14]. Patel et al. concluded that the social-phobic group has an overall lower possibility of having higher education qualifications, as well as teaching and nursing qualifications, compared to the non-social-phobic group [14]. Similarly, their results indicated that the social-phobic group had a significantly higher level of drug dependency than the non-social-phobic group (20.4% vs. 14.7%). In addition, the authors reflected an overall lower household income among the social-phobic group due to less percent of the population being full-time workers and lower employment rates.

On the other hand, social status also predicted social phobia in adolescents in small communities such as schools [15]. According to Henricks et al., less popular female adolescents are more likely to develop social phobia [15]. The authors argued that they attempted to reduce the feeling of anxiety

by increasing social avoidance. As a result, this leads to higher levels of social phobia symptoms [15]. Moreover, the author noted that low popularity is actively associated with victimization and that social avoidance could be a safe strategy used by less popular girls to protect themselves from being victimized. However, this behavior is likely to further contribute to social phobia. Although more research is needed to prove the link between popularity and social phobia, low popularity is thought to increase social avoidance in female adolescents. At the same time, it only has a negligible effect on boys [15].

2.4. Parental Psychopathology

Parents with a background of social phobia or other psychiatric disorders may have a higher risk of social phobia in their offspring [16,17]. Stein et al. indicated that there is a higher incidence rate of a generalized social phobia than the non-generalized subtype among relatives of probands with generalized social phobia [18]. Offspring of parents with generalized social phobia also develop the disorder at an earlier age compared to the non-generalized subtype [18]. Correspondingly, Lieb et al. proved the earlier age onset of a generalized type of social phobia with parental psychopathology and with a higher rate of prevalence of social phobia in almost every year of age [16]. Additionally, a study by Stein et al., although required further research, demonstrated that other comorbidities of social phobia, including panic disorder, post-traumatic stress disorder, and major depression, have a higher prevalence among first-degree relatives of individuals with social phobia [18]. Parental psychopathology is also thought to be associated with higher rates of persistence of social phobia in offspring; however, it is not an independent predictor but rather a result of interactions with a dysfunctional family environment [17].

2.5. Alcohol use

Cruz et al. concluded that there is an association between social phobia and alcohol consumption in adolescents [19]. Although a few studies have failed to show this relationship, most studies have provided evidence of a positive association [19]. Adolescents often tend to consume alcohol to temporarily relieve stress and anxiety, which could exacerbate the symptoms and persistence of social phobia as it could significantly affect one's mood, as well as lead to more severe alcohol dependence [19, 20]. In a previous study, Schneier et al. also demonstrated that social phobia is significantly associated with mood and anxiety among individuals with alcohol dependence [21]. Therefore, alcohol consumption has shown a possibility to influence the development of social phobia and should be intervened at an early stage to prevent both social phobia and alcohol dependence from becoming more severe.

3. Early Experiences and Environment

3.1. Early Memories

Early childhood memories are thought to be associated with the development of social phobia and the establishment of a negative self-image [22,23]. Recollections of past unfavorable social experiences may lead to fear of negative evaluations and increased anxiety in social situations [24]. Wild et al. suggested that these negative images tend to recur in different social situations because they are fundamentally connected, thus reactivating memories of early adverse socialization experiences [23]. Moreover, the authors also found that negative images are likely to continue to influence a person's thoughts about their appearance and behavior in front of others, thereby causing them to feel less confident and worse than they appeared to be. Thus, early memories of negative

images could further increase anxiety and social performance in individuals affected by social phobia [24].

3.2. Childhood Family Environment

According to Brook & Schmidt, a negative family environment is believed to have an unhealthy impact on a child and potentially promote the development of social phobia later in life [4]. This is evidenced by adolescent patients with social phobia who experienced parental separation, overcontrol, overprotection, and frequent rejection or emotional neglect during childhood [4]. In a later study, Michail and Birchwood also mentioned that dysfunctional parental behaviors, especially overcontrol, overprotection, and emotional neglect in childhood, are strongly associated with social phobia, as a significant number of individuals with social phobia reported experiencing these behaviors in their early years [25]. In addition, an unfavorable family environment as an independent factor could lead to a higher persistence of social phobia, while the listed factors have also contributed to the high persistence of social phobia [17]. Thus, children raised in environments with dysfunctional parents are more likely to suffer from social phobia and have higher persistence.

4. Conclusion

4.1. Summary

This literature review explores the potential risk factors of social phobia from various aspects that may influence the likelihood of developing social phobia during adolescence as well as its persistence. Among the populations, females generally have a higher prevalence of social phobia than males [5-7]. Women are also likely to feel a higher level of fear than males with similar social phobia conditions [10]. This paper also demonstrates that lower socioeconomic status and lower popularity in communities such as schools would increase the risk of having social phobia as well as contributing to its development [14,15]. Individuals with a collectivist cultural background, early memories of negative social experiences, or growing up in a dysfunctional family, especially experiencing overprotection and emotional neglect, are also more likely to be affected by social phobia [10,23,25]. Furthermore, the level of alcohol use and having family members with a history of psychiatric disorders both demonstrate a positive association with social phobia [16,19].

4.2. Directions for Future Research

Considering the literature reviewed in this paper, further research should examine the effects of medication use on study participants. In particular, to examine how the different types of medication taken by individuals may potentially affect social phobia in different ways. Furthermore, investigating people diagnosed with social phobia and focusing on their medication history (before and after being diagnosed with social phobia) to explore if any particular medication has ever ameliorated or exacerbated their condition, which may also influence the results of studies on potential risk factors of social phobia [7]. Similarly, more studies could be conducted to explore the association between social phobia and alcohol use, as very few studies have looked deeply into this relationship. In addition, investigating the impact of alcohol consumption on the development and symptoms of social phobia, as many studies identified the effects of social phobia on alcohol consumption, but few have examined it from the opposite perspective.

In terms of limitations, there needs to be more study that discusses the subtypes of social phobia in-depth, for instance, whether different risk factors are more likely to lead to generalized or non-generalized social phobia and the reason why this could occur [18]. In general, increasing the number

of study participants in a study is necessary because it allows for more cases to be examined in the study, helps to draw more convincing conclusions, and prevents bias in the samples.

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