Current Conceptualizations of Shyness and Its Treatment

Social Fitness:
Theory and Practice

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Overview

Social Fitness: Theory and Practice

    Definitions

    The Model

    Social Fitness Training

Background:

    Self-blame and Shame in Shyness

        Vicious Cycles and Infinite Loops

        Changing Self-blame

Other-blame and Anger

    Correlated and an Interpersonal problem, Impact on Empathy

Three Vicious Cycles:

    Fight - Flight; Shame - Self-blame; Resentment - Blaming Others

How do we change behavior and reduce negative emotion?
    Research with Children; the Sunnyvale Project

The Experience of Shyness
SAD FIXs

Self - Blame and Shame

Avoidance

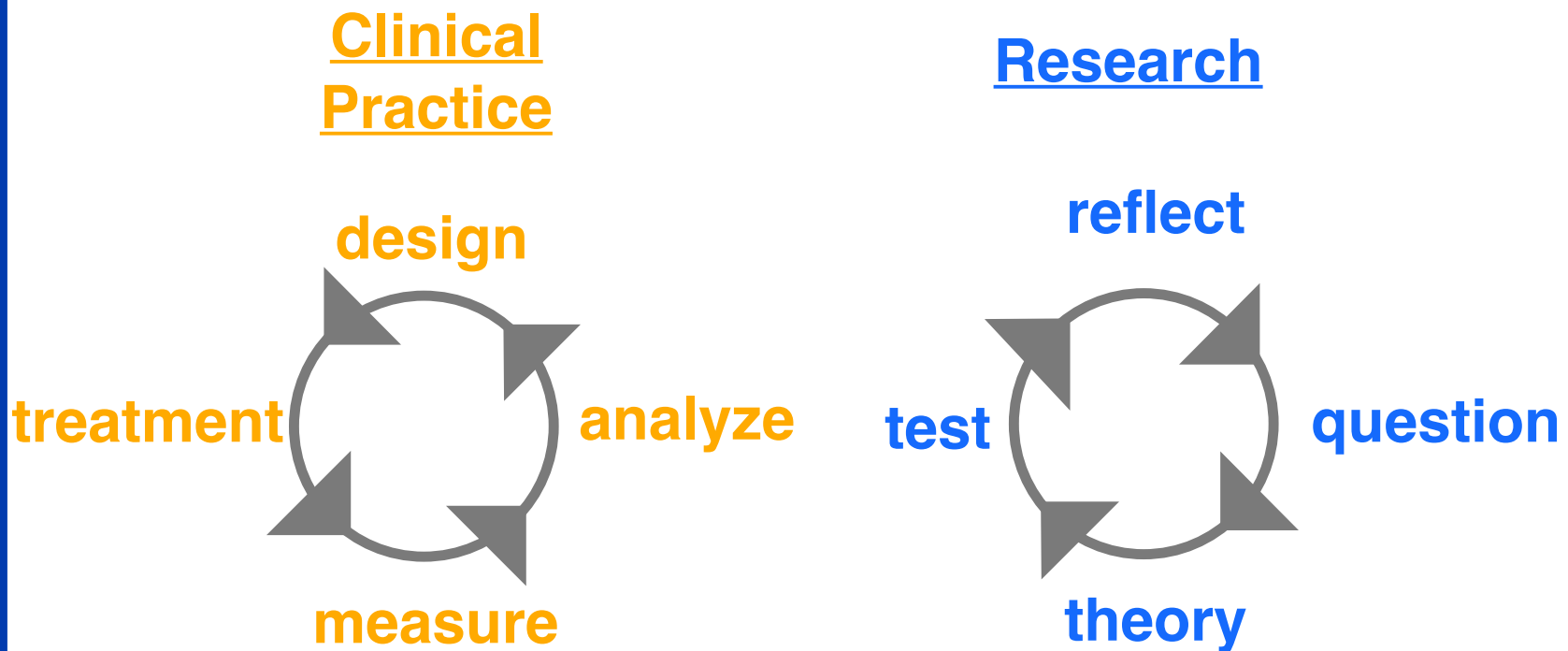**D**istress

Fear of Negative Evaluation

I Must, but I Can't!

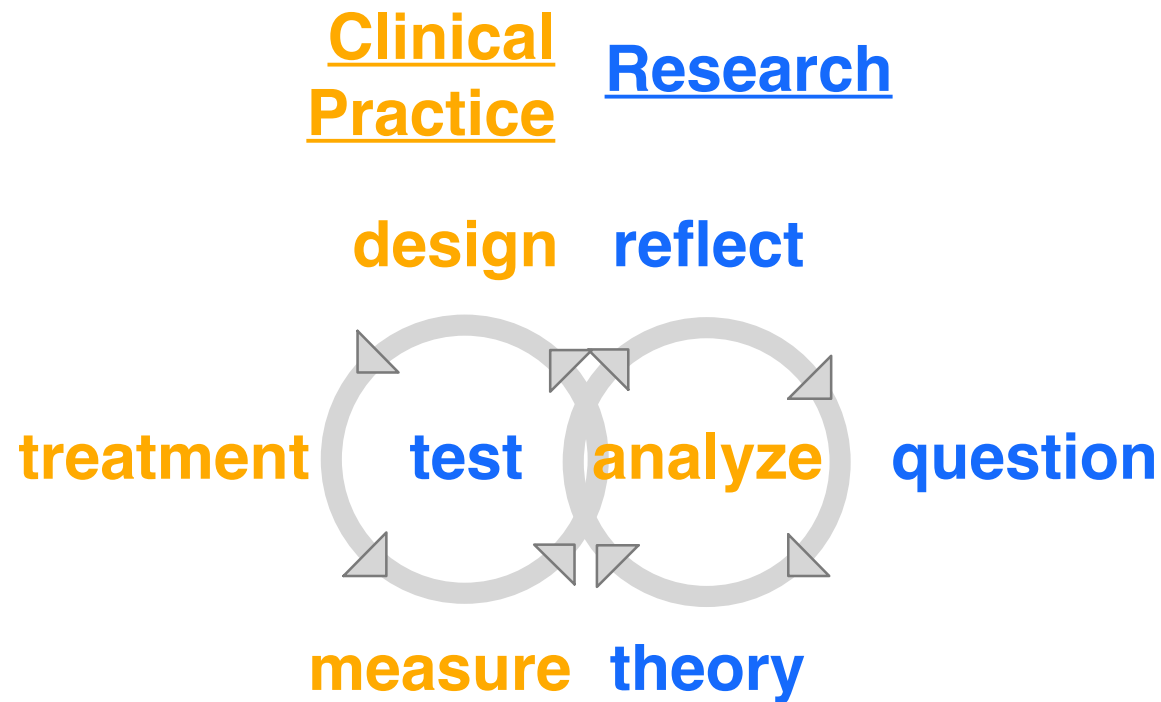**X**-posure: Fear of both Failure & Success

Self - Sabotage

Bad Brain Day

Perspectives: Co-informing

Clinical Practice

design

treatment   **analyze**

measure

Research

reflect

test   **question**

theory

Perspectives: Integrated

Clinical Practice   **Research**

design   **reflect**

treatment   **test**   **analyze**   **question**

measure   **theory**

Social Fitness Model

Social Fitness addresses both needs for emotional connection and needs for agency or competence.

Social Fitness implies satisfying interpersonal relationships, adequate emotion regulation, an adaptive cognitive style, and the proactive pursuit of personal and professional goals.

Social Fitness involves frequent social exercise. There are many situations in which to practice and many kinds of behaviors that may be considered adaptive.

Just as people play golf, tennis, hike, and jog to stay physically fit, people join groups and communities, maintain close relationships, meet new people, cultivate friendships, and develop intimacy with a partner to stay socially fit.

Social Fitness: Cognition and Emotion

Adaptive thinking patterns and emotion regulation are important components of social fitness.

Shy individuals reverse the self-enhancement bias in social situations, blame themselves and others, and experience shame and resentment.

When one is ashamed, others appear contemptuous, when fearful, others look dangerous, when vulnerable, others appear powerful and potentially threatening.

Negative emotion and negative thoughts affect each other in an escalating reciprocal pattern.

Social Fitness Training

Twenty-six Weekly Two-hour Cognitive-Behavioral Group sessions within an interpersonal theory framework

Daily Workouts

Self-Monitoring, Self-reinforcement

Exposures with Cognitive Restructuring

Changing negative attributions, beliefs about the self and others

Social Skills Training - meeting and conversing

Communication Training - Where do I go from here?

Building intimacy - self-disclosure, handling criticism, conflict

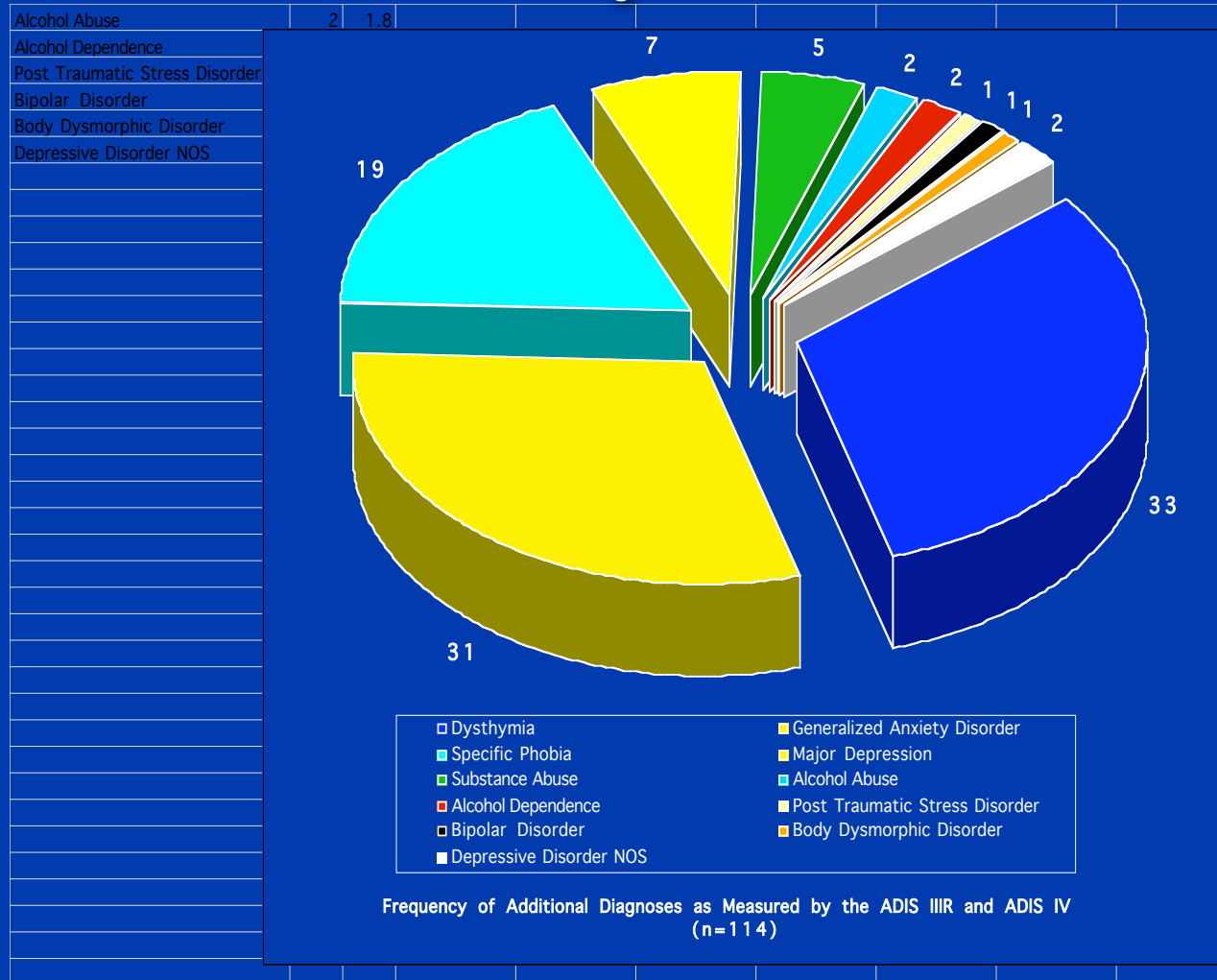Expression of Feelings

Empathy - listening

Attentional Focus Flexibility Training: self- other, empathic response

Video Taping

Client Demographics

	N		
GENDER	507		63% MALE; 37% FEMALE
AGE	499	16 - 71	M = 34
EDUCATION	462	4 - 26	M = 16
MARITAL STATUS	477	70%	NEVER MARRIED
		11%	DIVORCED/SEP
OCCUPATION	468	40%	PROFESSIONAL
		21%	BUSINESS
		13%	STUDENT
		2%	HOMEMAKER
		6.4%	UNEMPLOYED
		8%	LAB/TECHNICIAN
ETHNICITY	438	79%	CAUCASION
		11%	ASIAN
		10%	OTHER

Comorbidity in Clinic Sample

Alcohol Abuse	2	1.8
Alcohol Dependence		
Post Traumatic Stress Disorder		
Bipolar Disorder		
Body Dysmorphic Disorder		
Depressive Disorder NOS		

□ Dysthymia   ■ Generalized Anxiety Disorder
■ Specific Phobia   ■ Major Depression
■ Substance Abuse   ■ Alcohol Abuse
■ Alcohol Dependence   ■ Post Traumatic Stress Disorder
□ Bipolar Disorder   ■ Body Dysmorphic Disorder
■ Depressive Disorder NOS

Frequency of Additional Diagnoses as Measured by the ADIS IIIR and ADIS IV
(n=114)

Clients' Pre-test Scores

	N		
MILLON-APD	152	70% YES;	30% NO
SAD	277	94% YES	6% N0
BDI	182		M = 12
BFNE	138	1 - 5	M = 4.0
HEND/ZIM SHYQ	67	1 - 5	M = 3.5
SAQ-Self-blame	79	1 - 9	M = 6.0
SAQ-Shame	78	0 - 4	M = 2.7
EOS-Other Blame	100	1 - 7	M = 3.7
IIP-Socially avoidant	119	0 - 32	M = 22.0
SELF-ESTEEM	296	0 - 100	M = 43.8
TRAIT ANXIETY	267	0 - 100%	M = 89%
ENTITY THEORY	32	1 - 5	M = 3.2
EMOT SUPPRESS	30	1 - 7	M = 4.3
REAPPRAISAL	30	1 - 7	M = 3.6

Vicious Cycles: Fight or Flight

fear

automatic
thoughts

approach   avoid
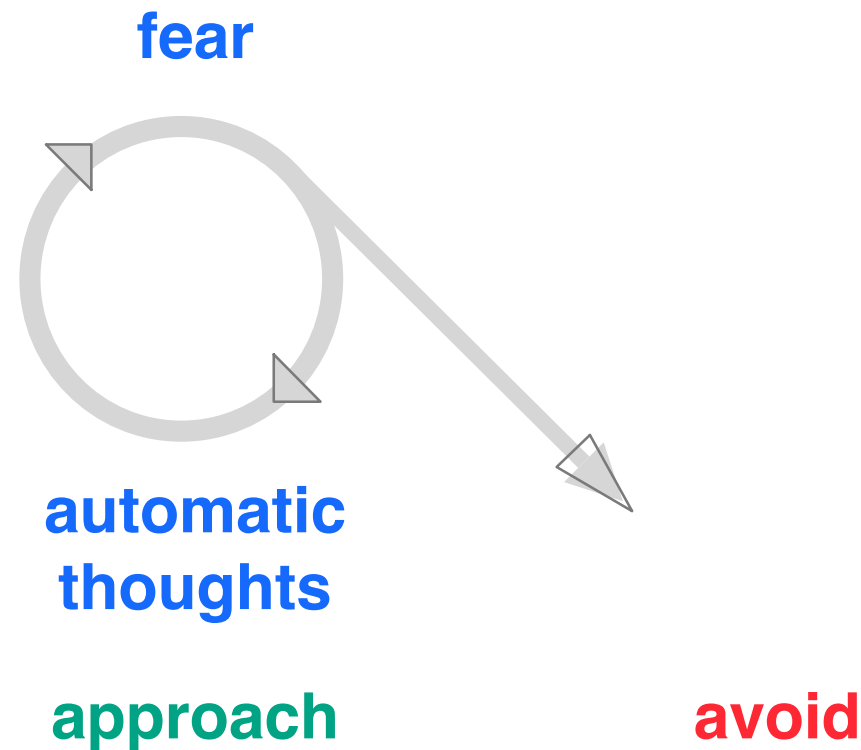
Vicious Cycles: Shame & Blame

shame

self-blame

approach   **avoid**

One Infinite Loop

fear   **shame**

**Negative
predictions**   **self-blaming
attributions**

approach   **avoid**
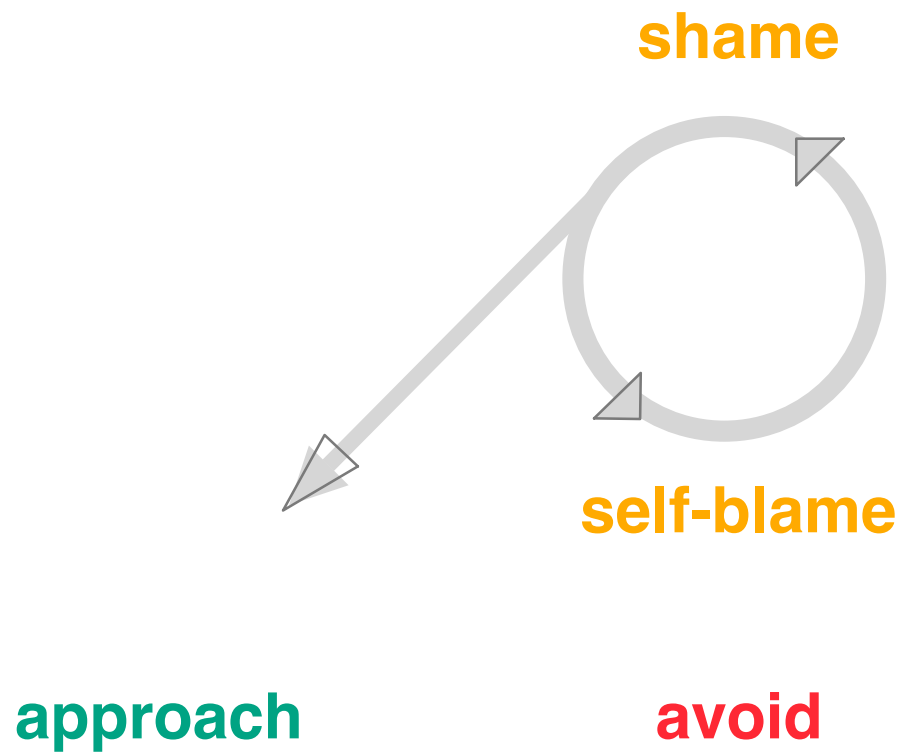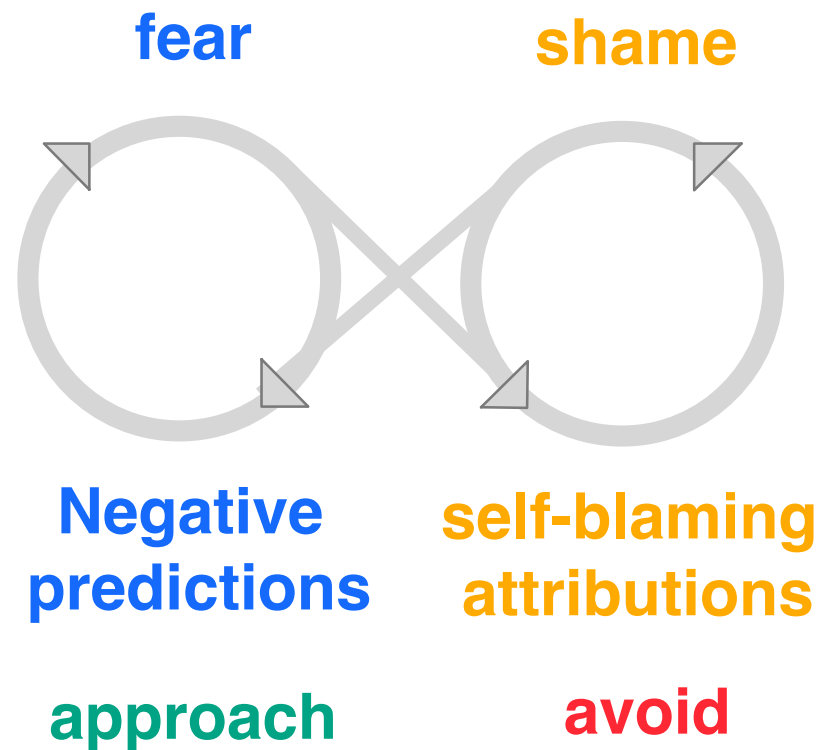
INWARD FOCUS
Moderates Self-blame in the Fearful

FEAR ⬇ INWARD FOCUS ⬆

   self-blame and state shame ⬇

FEAR ⬆ INWARD FOCUS ⬆

   self-blame and state shame ⬆

FEAR ⬆ SHY ⬆ INWARD FOCUS ⬆

   dispositional-shame ⬆

Students Changed Self-blaming Attributions and Reduced Shame

Negative interpersonal outcomes:
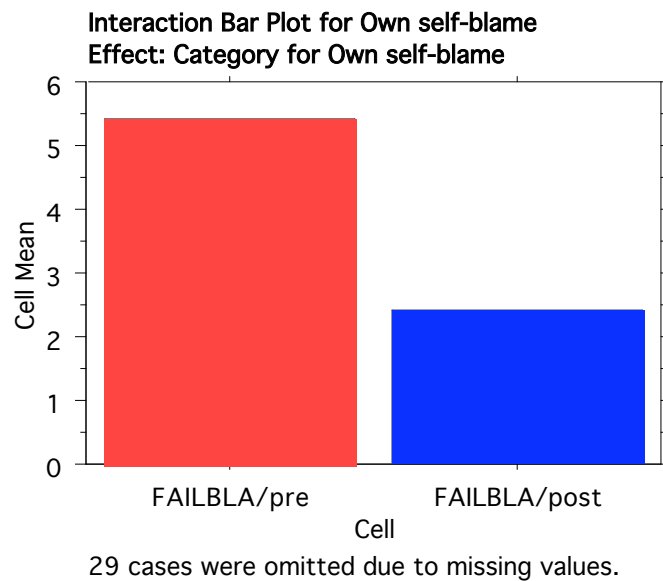
Internal, stable and global attributions ⬇

Self-blame and state shame ⬇

Social anxiety ⬇ social avoidance and distress ⬇
trait shame ⬇ depression ⬇

Results

Self-blame

State-shame
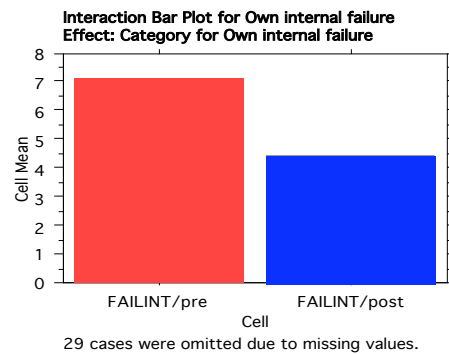

Interaction Bar Plot for Own self-blame
Effect: Category for Own self-blame

29 cases were omitted due to missing values.

Interaction Bar Plot for State shame
Effect: Category for State shame

28 cases were omitted due to missing values.
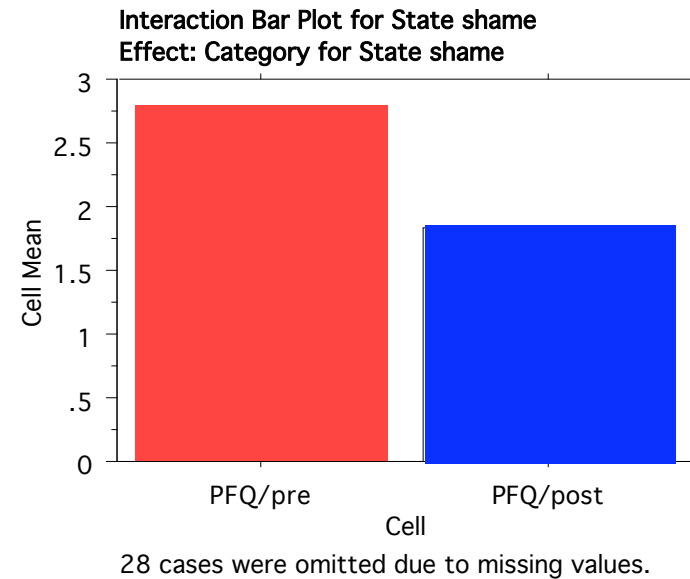
Results

Internal   Global   Stable

Interaction Bar Plot for Own internal failure
Effect: Category for Own internal failure

29 cases were omitted due to missing values.

Interaction Bar Plot for Own global failure
Effect: Category for Own global failure

29 cases were omitted due to missing values.

Interaction Bar Plot for Own stable failure
Effect: Category for Own stable failure

29 cases were omitted due to missing values.

Results Stanford Students

	N	F	p
Fear	25	4.52	.044
Depression	27	8.86	.006
Fear of Neg Eval	26	28.48	.0001
Social Anxiety	25	19.82	.0002
Social Avoidance and Distress	26	23.02	.0001
Trait Shame	26	17.76	.0003
Trait Guilt	26	6.96	.0142
Mattick Social Phobia	26	15.65	.0006

Results Clinic

	N	t	p
IIP-Avoidant	30	4.15	.000
IIP-Hostile	30	4.72	.001
IIP-Non-assertive	30	3.37	.002
IIP-Submissive dependent	30	3.63	.001
Depression	95	5.86	.000
Brief Fear of Neg Eval	54	5.57	.000
Social Anxiety	96	5.42	.000
Social Avoidance and Distress	60	6.97	.001
Trait Shame	90	4.96	.000
Trait Guilt	67	2.86	.01
STAXI Anger In	38	2.05	.048
Fearfulness	17	2.18	.045
SUDS reduction	50	29%	

Follow-up Study

Clients treated between 1994 - 1999

N = 43	Pre-test		Post-test		Follow-up	
Severity	Mean	SD	Mean	SD	Mean	SD
0 - 8						
	5.8	1.3	3.9	1.5	3.6	1.7
Interference	Mean	SD	Mean	SD	Mean	SD
0 - 8	5.7	1.6	3.5	1.8	3.6	1.9
Satisfaction						
1 - 10					7.9	2.1

Current Post-tests

	N		Post-test
BDI	182		M = 7.8
BFNE	138	1 - 5	M = 3.3
HEND/ZIM SHYQ	67	1 - 5	M = 2.9
SAQ-Self-blame	79	1 - 9	M = 3.2
SAQ-Shame	78	0 - 4	M = 1.6
EOS-Other Blame	100	1 - 7	M = 3.1
IIP-Socially avoidant	119	0 - 32	M = 16.5
ENTITY THEORY	2	1 - 5	M = 2.6 (ns)
EMOT SUPPRESS	12	1 - 7	M = 4.3 (ns)
REAPPRAISAL	12	1 - 7	M = 4.0 (ns)
SUDS	111	0 - 100	M = 31%
GOAL ATTAINMENT	144	0 - 10	M = 6.4

Shyness and Self-blame in a High School Sample

	Self-blame		Non-self-blame	
	Shy (n = 34)	Non-shy (n = 11)	Shy (n = 20)	Non-shy (n = 22)
Social Anxiety M	.69a	-.55c	-.05b	-.84c
SD	.85	.62	.80	.73
Fear Neg Eval M	.66a	-.40bc	-.02b	-.80c
SD	.66	1.02	.91	.85

Note: M and SD: standardized: p <.05

Conclusions

Good News:

    We have come a long way from the Prison Study.

Bad News:

    There is a long way to go.

Hopes and Dreams:

    Research with children and adolescents will prevent

    the development of chronic, painful shyness.

    We can become more effective at helping shy clients regulate
    negative emotion.

Thank you

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