Mindful Continuing Education

Social Anxiety Disorder in Youth

Introduction

1. Social anxiety disorder (SAD) is a prevalent mental disorder among youth, and although amenable to treatment, outcome seems to be less favorable for SAD than for other anxiety disorders among young people, and it is associated with chronicity, psychiatric comorbidity, social impairment, and:

- A. Persistent fear and shame
- B. Vulnerability to substance misuse
- C. Reduced quality of life
- D. Poor educational experiences

2. Although research on diagnostic subtypes of SAD has been extensive, generalization of these ?ndings to youth patients can be problematic, as contextual and developmentally related di?erences between youth and adults are known to in?uence SAD expression.

A. True

B. False

3. Which of the following is an accurate statement about research pertaining to the development of fear and avoidance in social situations among youth?

A. In previous studies of SAD subtypes in both adults and youth, fear and avoidance have either been equated, or avoidance alone has been examined

B. Rapee and Spence proposed that in youth, social fear develops independently of avoidance, in the sense that the typical onset of SAD in early adolescence is re?ected in an increase in social fear rather than any increase in avoidance

C. The level of fear tends to increase more with age than the propensity to avoid distressful situations

D. Researchers who examined age-related differences of avoidance and fear in youth across three predetermined fear domains demonstrated that fear and avoidance follow different paths with increased age, with avoidance demonstrating a steeper increase than fear

Results

4. Among youth with social anxiety disorder, the three most prevalent feared and avoided situations were giving a report or reading aloud in front of the class, answering questions in class, and:

- A. Being asked to do something they did not really want to do
- B. Participating in a musical or athletic performance
- C. Speaking to unfamiliar adults
- D. Starting or joining in on a conversation

Discussion

5. Three distinct content-based subtypes of SAD were identified among clinically referred youth, including:

- A. Achievement, perception, and communication
- B. Performance, observation, and interaction
- C. Production, awareness, and participation
- D. Action, judgment, and association

6. Which of the following is a NOT a correct statement about recent theories concerning social anxiety state?

A. Self-characteristics are perceived as deficient and at odds with perceived societal expectations and norms

B. A core defining feature of the disorder is a "distorted, negative view of self" which includes maladaptive beliefs about the self, regarding attributes and likableness

C. When exposed to public scrutiny or critical others these characteristics are thought to have a detrimental effect on the individual

D. Core fears fall into three broad correlated dimensions including concerns about social acceptance, concerns about performance and social interaction, and concerns about being criticized by others

7. Clinical recommendations resulting from study findings include each of the following EXCEPT:

A. In terms of treatment planning, it may be important to assess avoidance separately from fear since youth with anxiety problems may under-report their fears because they consistently avoid feared situations

B. Assessing avoided situations independently from feared situations may elicit pertinent information for better targeted treatment

C. Treatment should be tailored to general core fears and focus on underlying maladaptive selfbeliefs that cover numerous domains

D. Treatment results from generic programs designed for several anxiety disorders may improve if the exposure tasks involved deal with the associated automatic thoughts within the

Young Children Have Social Worries Too-Introduction

8. Children with social anxiety have di?culties with social competence, may have poor mental health in adulthood, and in 8 and 9-year olds, social anxiety is:

A. Negatively associated with friendship and positively associated with peer victimization

B. Negatively associated with play and positively associated with illness

C. Negatively associated with school success and positively associated with parental overattachment

D. Negatively associated with self-confidence and positively associated with poor concentration

9. While social anxiety disorder in often diagnosed in early adolescence, symptoms of social anxiety have been identified much earlier in childhood, and it can be diagnosed as distinct from other anxiety disorders in children as young as:

A. 3-4 years

- B. 4-5 years
- C. 5-6 years
- D. 6-7 years

10. Carpenter et al. (2015) found that a history of preschool social anxiety predicted less functional connectivity between the amygdala and ventral frontal cortices when children viewed angry faces, indicating a potential di?culty with emotion regulation.

A. True B. False

11. Research examining social anxiety in young children holds potential for furthering our understanding of the development of anxiety across childhood, but to conduct this type of work with young children it is imperative that we have valid and reliable measures of social anxiety for this age group that:

- A. Measure youth and parent responses
- B. Can be administered quickly and easily
- C. Are able to be adapted to various settings
- D. Have proven content validity and test-retest reliability

Discussion

12. Psychometric evaluation provides initial evidence that the SWAIY is a reliable and valid measure of social anxiety in children aged between four and eight years old as a means of measuring symptoms of social anxiety and:

- A. Social worries
- B. Social competence
- C. Social inadequacy
- D. Social disinclination

Discussion

13. Which of the following is NOT a correct statement about the SWAIY measure?

A. The SWAIY is the ?rst measure to focus on child social anxiety that has been developed for use with parents of young children

B. Such a measure will facilitate investigation of the development and stability of social anxiety in younger children, as well as the relationship between social anxiety symptoms and later social and mental health outcomes

C. SWAIY is a brief, stand-alone measure, requiring parents to complete only 10 items D. The SWAIY focuses on observable behaviors in specific social situations as well as cognitive and developmental symptoms

14. The authors recommend assessing the discriminate validity of the SWAIY in relation to clinically diagnosed mood disorders to see if it is able to differentiate between social anxiety and other child anxiety disorders.

A. True B. False

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