

Criticism in the Romantic Relationships of Individuals With Social Anxiety

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Social anxiety is associated with difficulties in intimate relationships. Because fear of negative evaluation is a cardinal feature of social anxiety disorder, perceived criticism and upset due to criticism from partners may play a significant role in socially anxious individuals' intimate relationships. In the present study, we examine associations between social anxiety and perceived, observed, and expressed criticism in interactions with romantic partners. In Study 1, we collected self-report data from 343 undergraduates and their romantic partners on social anxiety symptoms, perceived and expressed criticism, and upset due to criticism. One year later couples reported whether they were still in this relationship. Results showed that social anxiety was associated with being more critical of one's partner, and among women, being more upset by criticism from a partner. Social anxiety was not related to perceived criticism, nor did criticism variables predict relationship status at Time 2. In Study 2, undergraduate couples with a partner high ($n = 26$) or low ($n = 26$) in social anxiety completed a 10-minute, video-recorded problem-solving task. Both partners rated their perceived and expressed criticism and upset due to criticism following the interaction, and observers coded interactions for criticism. Results indicated

that social anxiety was not significantly related to any of the criticism variables, but post hoc analyses cast doubts upon the external validity of the problem-solving task. Results are discussed in light of known difficulties with intimacy among individuals with social anxiety.

Keywords: social anxiety; criticism; perceived criticism; romantic relationships

SOCIAL ANXIETY DISORDER (SAD), one of the most common mental disorders (Kessler et al., 2005), is associated with considerable disability (Stein & Kean, 2000). In addition to the millions of Americans who suffer from SAD, many more experience subthreshold symptoms of social anxiety. Indeed, social anxiety exists on a continuum, with SAD representing the most severe subset of sufferers (Ruscio, 2010). Individuals with SAD and those high in social anxiety symptoms have difficulty forming relationships, including romantic relationships (e.g., Davidson, Hughes, George, & Blazer, 1994), and continue to experience relationship difficulties even when they are successful in establishing romantic relationships. Social anxiety is associated with decreased relationship satisfaction (Filsinger & Wilson, 1983; Porter & Chambless, 2014), decreased social support (Porter & Chambless, 2014, 2016; Rapee, Peters, Carpenter, & Gatson, 2015), communication difficulties (Wenzel, Graff-Dolezal, Macho, & Brendle, 2005), and difficulties with intimacy, self-disclosure, and emotional expression (Porter & Chambless, 2014; Sparrevojn & Rapee, 2009; Wenzel, 2002) in romantic relationships, as well as higher rates of relationship dissolution (Porter & Chambless, 2016).

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Although effective treatments for SAD have been developed, including cognitive-behavioral therapy and serotonin-norepinephrine reuptake inhibitors (Mayo-Wilson et al., 2014), these treatments may not adequately address the interpersonal difficulties of individuals with SAD: CBT is associated with small improvements in satisfaction with interpersonal functioning among individuals with SAD, but many treatment completers fail to achieve normative levels of satisfaction in this domain (Eng, Coles, Heimberg, & Safren, 2005; Watanabe et al., 2010). Thus, treatment innovations may be needed to improve relationship quality in this population. A potentially fruitful focus for such innovation is perceived criticism.

Perceived criticism is an important aspect of relationship functioning that has received little attention in research on social anxiety. Perceived criticism has demonstrated high negative correlations with relationship satisfaction (Renshaw, 2008). It has also been identified as a predictor of poor response to treatment across a number of different disorders, including panic disorder with agoraphobia, obsessive-compulsive disorder, major depressive disorder (MDD), bipolar disorder, substance use disorders, and psychosis (Masland & Hooley, 2015). A related construct that is typically assessed along with perceived criticism is how upset an individual becomes when criticized. We are unaware of any published studies examining the associations between upset due to criticism and relationship satisfaction. However, like perceived criticism, upset due to criticism has been linked to treatment outcome: It has been found to predict poor clinical outcomes in bipolar disorder (Miklowitz, Wisniewski, Miyhara, Otto, & Sachs, 2005) and to mediate the relationship between perceived criticism and weekly ratings of mood and anxiety symptoms (Steketee, Lam, Chambless, Rodebaugh, & McCulloch, 2007). Although the relations of perceived criticism and upset due to criticism to treatment outcome in SAD have not been adequately studied,¹ the literature on other anxiety disorders suggests that decreasing perceived criticism and upset due to criticism among patients with SAD has the potential to improve treatment response rates and increase relationship satisfaction (see Chambless, 2012). An important

first step in this line of research is to determine whether perceived criticism and upset due to criticism are in fact elevated among individuals high in social anxiety.

Although perceived criticism has generally been found to be unrelated to measures of concurrent psychopathology (Renshaw, 2008), there is strong theoretical reason to believe that individuals high in social anxiety may perceive their partners as more critical and may become more upset by a partner's criticism. First, the cardinal feature of SAD is an excessive fear of negative evaluation from others (Rapee & Heimberg, 1997). Individuals with SAD are theorized to be constantly scanning their environments for signs of negative evaluation and to more readily detect social threats or interpret ambiguous social cues as signs of negative evaluation (Rapee & Heimberg, 1997). Empirical data from casual interactions indicates that individuals high in social anxiety tend to perceive their interactions with others in a more negative light than do their interaction partners (e.g., Stopa & Clark, 1993) and are more attuned to signs of disapproval from others relative to individuals who are less anxious (e.g., Veljaca & Rapee, 1998). Individuals high in social anxiety may therefore be more likely to notice criticism from a romantic partner and to interpret a partner's comments as critical. Second, for these individuals, criticism from a partner may be particularly upsetting, as it may be interpreted as confirmation of these individuals' worst fears, that they will be negatively evaluated and rejected by others.

We are aware of only one study examining the relationship between perceived criticism and concurrent social anxiety symptoms: In a community sample, Masland, Hooley, Tully, Dearing, and Gotlib (2015) found no significant differences in social anxiety symptoms between individuals who perceived high levels of criticism from the relative or person with whom they shared the closest relationship versus those who perceived low levels of criticism from this individual. However, participants in this study were not required to rate perceived criticism from a romantic partner specifically, the authors did not examine the relationship between social anxiety and upset due to criticism, and participants were unselected for social anxiety. Thus, we believe that the relationships between perceived criticism and upset due to criticism from a romantic partner and social anxiety warrant further study. Further study of these questions is important because social anxiety is associated with difficulties in romantic relationships, but the reasons for these difficulties are poorly understood. If social anxiety is indeed associated with heightened levels of

¹In the only study in which perceived criticism was tested as a predictor of response to treatment for SAD (Fogler, Tompson, Steketee, & Hofmann, 2007), no predictive relationship was observed. However, a major flaw of this study is that patients rated perceived criticism from friends, family members, or romantic partners with whom they may have had no more than a weekly telephone contact. Subsequent research has shown that perceived criticism may only exert detrimental effects on treatment outcome when it comes from a romantic partner or parent and when the respondent lives with that person (Renshaw, 2007).

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