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Young people with higher social anxiety are less likely to adopt the perspective of another: Data from the Director task



Victoria Pile ^a, Simone P.W. Haller ^{b, 1}, Chii Fen Hiu ^{b, 1}, Jennifer Y.F. Lau ^{a, *}

^a Department of Psychology, Institute of Psychiatry, King's College London, London, UK

^b Department of Experimental Psychology, University of Oxford, UK

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ABSTRACT

Background and objectives: Young people with social anxiety display poor social functioning but it is unclear whether this is underscored by difficulties in key social cognitive abilities, such as perspective taking. Here, we examined whether increased social anxiety is associated with reduced accuracy on a perspective taking task and whether this relationship is stronger at particular periods within adolescence.

Methods: Fifty-nine adolescents aged 11–19 years completed the computerised Director Task (DT) and the Social Anxiety Scale for Adolescence. In the DT, participants virtually move objects by following either instructions given by the 'Director' (who can see only some objects), or a simple rule to ignore certain objects.

Results: Participants who scored above the clinical cut-off for social anxiety ($n = 17$) were less accurate when they had to take the perspective of the Director into account than those scoring below cut-off, yet performed similarly on control trials. Preliminary analysis indicated that poorer performance was most strongly associated with social anxiety in mid-adolescence (14–16.5 years).

Limitations: The DT has been used previously to measure online perspective taking but the underlying cognitive mechanisms have not been fully elucidated. Extending these findings using additional measures of perspective taking would be valuable.

Conclusions: Adolescents with higher social anxiety were less accurate at taking the perspective of a computerised character, with some suggestion that this relationship is strongest during mid-adolescence. If replicated, these findings highlight the importance of addressing specific social cognitive abilities in the assessment and treatment of adolescent social anxiety.

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1. Introduction

Social anxiety is common in adolescence and many cases that onset in this age range persist into adulthood (Kessler et al., 2005). Social exchanges and relationships are integral to human life and social fears and worries that emerge during adolescence can yield impairment, distress and negative long-term outcomes, resulting in substantial economic costs for society (Acarturk et al., 2009). For example, people with social anxiety have higher levels of unemployment (Patel, Knapp, Henderson, & Baldwin, 2002), absenteeism from work (Lecrubier et al., 2000) and reduced work

productivity (Wittchen, Fuetsch, Sonntag, Müller, & Liebowitz, 2000). Frontline cognitive behavioural treatments for social anxiety in youth primarily target negative biases in cognitions about social situations (for example, interpreting an ambiguous situation negatively with thoughts such as "they are judging me"). As well as biased cognitive processing, some young people with social anxiety may have more basic difficulties in social understanding (Banerjee & Henderson, 2001) that contribute to negative outcomes in social situations, and in turn drive social fears and worries (Banerjee et al., 2008). Whilst there is a robust literature demonstrating a link between social anxiety and biased cognitions, less research has measured social understanding in social anxiety. From a therapeutic perspective, it is important to differentiate between cognitions about social performance that are biased compared to those that are founded in *actual* skill deficit. Indeed, young people with social anxiety may have a deficit in social skills – they are more

* Corresponding author. Department of Psychology, Institute of Psychiatry, King's College London, De Crespigny Park, London SE5 8AF, UK.

E-mail address: jennifer.lau@kcl.ac.uk (J.Y.F. Lau).

¹ Joint second authors.

likely to be disliked, neglected, and bullied, and have fewer and poorer friendships (Bernstein, Bernat, Davis, & Layne, 2008; Blöte, Kint, & Westenberg, 2007; La Greca & Harrison, 2005; Greco & Morris, 2005; Miers, Blöte, & Westenberg, 2010; Scharfstein, Alfano, Beidel, & Wong, 2011; Spence, Donovan, & Brechman-Toussaint, 1999; Verduin & Kendall, 2008) (difficulties that appear to be specific to social anxiety rather than other anxiety disorders (Scharfstein et al., 2011a; Verduin & Kendall, 2008)). Studies using measures of self- and parent-report, as well as behavioural assessments, pinpoint problematic social skills, compared to their non-anxious peers (Alfano, Beidel, & Turner, 2008; Beidel, Turner, & Morris, 1999; Inderbitzen-Nolan, Anderson, & Johnson, 2007; Rao et al., 2007; Scharfstein et al., 2011b; Spence et al., 1999), although a few studies have not replicated this association (Cartwright-Hatton, Hodges, & Porter, 2003; Cartwright-Hatton, Tschernitz, & Gomersall, 2005; Erath, Flanagan, & Bierman, 2007). What is less clear is whether socially anxious adolescents also have difficulties in social cognitive abilities, which are cognitive skills that facilitate understanding of social situations, such as being able to adopt another's perspective. In this paper, we explored whether difficulty in taking the perspective of other people is linked to social anxiety during adolescence. Moreover, as adolescence may reflect a period of protracted social learning and development, difficulties in social cognitive abilities in this age range could influence exposure to maladaptive social experiences and relationships – underscoring the need to target these early.

Social perspective taking is the ability to differentiate your own from another's mental state, and to use understanding of another's mental state to comprehend and predict that person's behaviour (van den Bos, van Dijk, Westenberg, Rombouts, & Crone, 2011). Consistent with this definition, proficiency in social perspective taking is associated with greater trust and a greater ability to adapt behaviour to others (Fett et al., 2014). Preliminary data suggests that poor social perspective taking could be linked to social anxiety (Banerjee & Henderson, 2001; Gini, 2006). However, much of this research relies on self-, parent- or teacher-report (Banerjee & Henderson, 2001) or the relationship has been indirectly inferred on the basis of observed negative peer experiences, such as bullying (Gini, 2006). These do not rule out the possibility that the observed difficulties are confounded by existing negative social experiences. Experimental measures that present standardised scenarios across participants are needed to provide a more objective online measure of engagement in perspective taking. Studies using experimental measures to assess social cognitive skills more generally, have suggested an association with social anxiety in children. These have demonstrated that young people with social anxiety show reduced accuracy in recognising facial affect (Simonian, Beidel, Turner, Berkes, & Long, 2001) and poorer understanding of faux pas scenarios which require more advanced mental state reasoning skills (Banerjee & Henderson, 2001). Emerging evidence therefore suggests that some young people with social anxiety may have an actual skills deficit.

Engagement in perspective taking refers to the idea that whilst the young person is often capable of taking another's perspective when explicitly told to do so, there may be individual differences in the extent to which young people employ this skill (Crone & Dahl, 2012). In this study we used the computerised Director task (DT) as an experimental measure of online perspective taking, to extend existing findings. This task has been used in a number of studies (Fett et al., 2014; Mills, Dumontheil, Speekenbrink, & Blakemore, 2015; Dumontheil, Apperly, & Blakemore, 2010) to assess how social cognitive capacities may vary across age in adolescence (although see Santiesteban, Shah, White, Bird, and Heyes, 2015 for alternative accounts of what this task measures). Engagement in

perspective taking ability could be influenced by motivational and state factors, for example feeling socially anxious or worrying is likely to increase the person's focus on themselves (Miers, Blöte, & Westenberg, 2011) and so reduce engagement in perspective taking. A computerised task is advantageous as, whilst it cannot eradicate the influence of state anxiety (and therefore self-focus) on performance, it can reduce it to a greater degree than other measures, such as observational tasks. An additional advantage of this task is that both accuracy and reaction time (RT) are measured. Although accuracy could offer an overall indication of difficulty with perspective-taking, under circumstances where participants are able to derive the correct response through compensatory effortful mental strategies no differences may be apparent on overall accuracy. In contrast, RT on these correct trials may capture more subtle differences in how automatically or efficiently information is processed (when accuracy is prioritised).

As well as aiming to explain why some young people experience social anxiety, we were interested to explore whether the link between social cognitive difficulties and social anxiety changes with age across adolescence. A variety of significant changes occur during adolescence, including changes in cognitive processing. For example, during adolescence the degree to which young people think about their own thoughts (i.e. meta-cognition), and the thoughts of others, increases (Elkind & Bowen, 1979; Selman, 1980). These changes, which are likely to be supported by maturing neural circuits, are proposed to be adaptive as social situations and networks become more complex and hierarchical during adolescence (Haller, Cohen Kadosh, & Lau, 2013). Indeed, previous studies using the Director task have reported age-typical improvements (Dumontheil et al., 2010). These age typical improvements may serve to magnify or draw focus to adolescents who do not make the same improvements in their social cognitive abilities and so who may experience social anxiety as a result. Specifically, for the majority of adolescents, gradual improvements in perspective taking ability during adolescence may improve their awareness that everyday social situations are often intricate and ambiguous (Haller et al., 2013) and allow them to 'fine-tune' responses to complex interpersonal situations. However, for others who experience a slower age-associated improvement in perspective-taking, the increased complexity of social networks may result in everyday social situations seeming confusing and challenging. In this subset of adolescents, changes in perspective-taking ability could instead increase social fears, potentially explaining why many cases of social anxiety onset at puberty or during adolescence. It may, therefore, be possible that individual differences in social cognitive ability are associated with social anxiety at different stages of its developmental trajectory. Tentatively, we explored here whether this relationship is stronger at later stages of adolescence. So, we investigated not only age-associated changes in perspective taking, but also whether the relationship between social anxiety and perspective taking could be stronger at later stages of adolescence.

In summary, we explored two sets of questions. Our primary hypothesis was that youths scoring above clinical cut-off for social anxiety, compared to those scoring below cut-off, would demonstrate reduced accuracy (and possibly RT) on a measure of social perspective taking. Second, as well as replicating previous findings that young people more automatically take account of another person's perspective with increasing age (van den Bos et al., 2011; Güroğlu, van den Bos, & Crone, 2009) (i.e. become quicker and more accurate), we explored a new hypothesis: that the link between perspective-taking and social anxiety changes with age in adolescence. Here, we predicted that the association strengthens with age as social cognitive abilities improve.

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