

Review Article

A critical discussion of the outcome literature of cognitive behavioural therapy for social anxiety disorder

Tehreem Riaz¹, Muhammad Akram^{1*}, Momina Iftikhar¹, Fethi Ahmet Ozdemir², Gawel Solosky², Aymen Owais Ghauri³, Adonis Sfera⁴, Pragnesh Parmar⁵

¹Department of Eastern Medicine, Government College University Faisalabad, Pakistan


²Department of Molecular Biology and Genetics, Faculty of Science and Art, Bingol University, Bingol, 1200, Türkiye

³Department of Eastern Medicine, Jinnah University for Women, Karachi, Pakistan

⁴University of California Riverside, Patton State Hospital, USA

⁵Additional Professor and HOD, Forensic Medicine and Toxicology, AIIMS, Bibinagar, Telangana, India

*Corresponding author email: Makram_0451@hotmail.com

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Abstract

SAD is a common mental condition with high prevalence rate and early onset resulting in the social avoidance and dysfunctioning. From the outcomes of several research studies it is highlighted that among of the numerous cognitive behavioural model, individual behavioural therapy plays most important role for social anxiety disorder. The research on CBT's effectiveness in treating SAD symptoms and a poor life quality is summarised in this article. In this review, the relative effectiveness of various CBT techniques is also discussed for both short-term and long-term follow-up periods. This review examines the strengths and limitations of the existing evidence base by critically examining empirical studies in this topic. It examines methodological concerns like as sample characteristics, outcome measurements, and treatment regimens, all of which might have an impact on the interpretation of results. Furthermore, the study identifies areas that require additional investigation

and makes recommendations for future studies to improve SAD understanding and treatment. The aim of this review is to offer a thorough examination of the existing outcome literature on CBT for SAD. The study investigates the efficacy of CBT in lowering symptoms of social anxiety and enhancing functional results. It also investigates long-term therapy maintenance and discovers potential moderators and mediators of treatment outcomes.

Key words

Social anxiety disorder, CBT, Individual behavioural therapy.

Introduction

SAD is a disabling and chronological disorder effecting more than 15 million population of America and has a annual prevalence rate more than 12.1 percent of population [1]. SAD is quite common, but only in the past few years has it started to receive significant attention [2]. This mental disorder has early chronic course and onset which may results in the impairment of daily life activities [3] and lead to avoidance to school [4, 5], behaviours, stress, and behaviours [6], intimate relationships and friendship [7, 8]. Individuals suffering from SAD are living alone and being less likely to be married than those without mental problems or people with other anxiety disorders [9]. Individuals suffering from SAD endure great anxiety and distress in social situations, resulting in significant impairment in many areas of their lives, including job, school, and relationships. Cognitive-behavioral therapy (CBT) has emerged as a major psychological solution for SAD, with promising results in symptoms reduction and functional outcomes improvement.

From the large number of research studies it is narrated that Cognitive behavioural therapy is one of the best and effective treatment for SAD. For the treatment of SAD, Cognitive behavioural therapy can administered in individual formats or groups [10, 11]. This therapy is suggested for long terms because successful CBT for the treatment of SAD results in positive adaptive changes and self view [12]. By critically assessing the outcome literature and identifying gaps and limitations in the evidence base, the findings of this review will contribute to the current literature on the effectiveness of CBT for

SAD. This review will provide insights into the elements that may influence the effectiveness of CBT for SAD by identifying methodological difficulties and examining potential sources of variation in treatment outcomes. It will also include recommendations for future research directions to improve knowledge and treatment of social anxiety disorder.

The purpose of current investigational study is to describe the CBT's effectiveness in order to treat social anxiety disorder. In addition to this, how cognitive behavioural therapy alters the patient's dysfunctioning with social anxiety disorder also described in this review.

Social anxiety disorder and its impact

SAD, also known as social phobia is a widespread and debilitating mental health illness characterised by an acute and persistent fear of social situations. Individuals suffering from SAD endure substantial distress and anxiety in a variety of social circumstances, including public speaking, social interactions, and performance scenarios. These worries frequently result in avoidance behaviours, which can significantly limit an individual's capacity to participate in social activities, build relationships, and achieve personal and professional goals.

The impact of social anxiety disorder is far-reaching and can impair many facets of a person's life. Individuals with SAD may suffer acute dread of being humiliated, ashamed, or adversely assessed by others in social circumstances. As a result, individuals may avoid social events, parties, or public speaking engagements, resulting to feelings of loneliness

and isolation. Avoidance behaviours linked with SAD can also impede academic or professional advancement, as individuals may avoid opportunities requiring social engagement or public performance. Furthermore, social anxiety disorder is frequently associated with other mental health diseases such as depression, generalised anxiety disorder, or substance use disorders. These illnesses can increase the impact of SAD on an individual's general well-being and quality of life. Individuals with SAD are not unusual to experience considerable impairment in a variety of domains, including work or school functioning, interpersonal connections, and overall psychological well-being.

The negative consequences of social anxiety disorder extend beyond the individual who suffers from it. The limits caused by SAD may also influence family members, friends, and colleagues. Social relationships may become strained, socialisation possibilities may be limited, and misconceptions regarding the nature of the disease may occur. As a result, treating social anxiety disorder is critical not just for the individual's well-being but also for the overall functioning and quality of life of those around them.

CBT has emerged as a major intervention for social anxiety disorder, providing clients with an organised and evidence-based approach to managing their symptoms and improving their quality of life. Identifying and challenging negative thought patterns, practising relaxation techniques to control anxiety, gradually approaching feared social situations through exposure exercises, and establishing effective social skills and coping strategies are all part of CBT for SAD.

Significance of CBT for social anxiety disorder

Cognitive-behavioral therapy (CBT) has acquired widespread acceptance as a first-line treatment option for social anxiety disorder (SAD). CBT is important in the therapy of SAD

because of its evidence-based success, comprehensive treatment components, and long-term advantages for people who suffer from social anxiety symptoms. This section will go through the importance of CBT for SAD in great depth.

Effectiveness Based on Evidence

Numerous research studies and meta-analyses have consistently shown that CBT is beneficial in lowering social anxiety symptoms and improving functional results in people with SAD. In the treatment of SAD, CBT has been demonstrated to be superior to placebo and other therapies such as medicine. It offers a structured and evidence-based framework for dealing with the cognitive, emotional, and behavioural aspects of social anxiety, resulting in significant symptom reduction and better quality of life.

Components of a Comprehensive Treatment

CBT for SAD combines a variety of treatment techniques and tactics that target the underlying mechanisms that cause social anxiety. Cognitive restructuring, exposure therapy, social skills training, and relaxation techniques are common components. These components work together to challenge negative thoughts, beliefs, and assumptions about social circumstances, to allow for gradual exposure to fearful situations, to create effective coping mechanisms, and to boost self-confidence and social competence. CBT's all-encompassing character ensures a thorough approach to tackling the numerous components of social anxiety.

Long-Term Advantages

CBT not only focuses on symptom reduction, but also on providing individuals with long-term skills and methods for managing social anxiety. CBT assists individuals in developing new ways of thinking, behaving, and responding to social situations by targeting maladaptive thought patterns and behavioural patterns. These abilities can be applied in a variety of circumstances, giving individuals the tools they need to handle social interactions and obstacles outside of the

treatment space. The long-term effects of CBT allow individuals to retain their improvement and increased functioning even after therapy is completed.

Self-efficacy and Empowerment

One of the most significant benefits of CBT for SAD is the emphasis on empowering patients and increasing self-efficacy. Individuals with SAD eventually address their concerns, question negative beliefs, and experience good outcomes through collaborative goal-setting, skill-building exercises, and exposure-based practises. This approach promotes a sense of empowerment, self-confidence, and self-belief, allowing individuals to gain control of their anxiety and actively participate in previously avoided social activities. CBT increases self-efficacy, which leads to higher self-esteem and a larger sense of personal agency.

Individualised Treatment and Flexibility

CBT for SAD allows for flexibility and individualised treatment planning depending on each individual's unique needs and circumstances. Therapists can adjust interventions to the individual's specific issues, incorporate cultural elements, and modify therapy procedures to the individual's preferences and goals. This personalised strategy boosts therapy involvement and the chance of successful treatment outcomes.

Review of Literature

One study [13] carried out clinical trials of CBT with 42 treatment trials for the treatment of SAD. In this analysis six conditions were designed and compared as controlled, placebo, CT, EXP, EXP and CT, and social skills training. The outcome of the study supported the efficacy of CBT in order to treat SAD.

Philippe R., et al. (2013) [14] designed experimental study to examine the changes in positive self view due to CBT. This study's objective was to ascertain whether patients suffering from social anxiety disorder differ from

healthy controls individuals regarding their perspective to self view. The findings indicated that at baseline, patients had more negative and less positive self-views as compared to healthy controls. CBT produced statistically and clinically significant changes when compared to the control, especially fewer negative and more positive self-views.

Krista De Castella, et al. (2014) [15], demonstrated the emotions and belief regarding to cognitive behavioural therapy in his experimental study. This study explored patients' "implicit theories" - beliefs about the fixed vs flexible nature of anxiety - as a crucial factor For SAD in CBT. This was done within the framework of randomised controlled CBT trial. CBT (n1424; 52% female) resulted in significantly reduced degrees of ingrained anxiety-related beliefs compared to waitlist (n1429; 58% female) (Mbaseline 1411.70 vs. MPost 147.08, d141.27). These implicit beliefs accounted for reductions in social anxiety symptoms brought on by CBT in an indirect manner ($k = 2.14$, [95% CI 1.40, 2.88]). These data imply that CBT for SAD may significantly alter patients view about their moods.

Falk, et al. (2013) [16], conducted controlled trials to evaluate the significance of CBT and psychodynamic therapy for the treatment of SAD. A waiting list condition, manual-guided CBT, manual-guided psychodynamic treatment, was allotted to 495 social anxiety disorder patients in an outpatient setting. Results indicated that CBT was substantially more effective for remission than psychodynamic therapy.

NICE guidelines for SAD with cognitive behavioural therapy/treatment

According to the NICE guidelines, Programs for cognitive behavioural therapy include exposure in vivo and cognitive restructuring. Some programmes also involve instruction in social and conversational skills as well as relaxation techniques. Recent research has uncovered a

number of mechanisms that, in addition to avoidance behaviour, seem to sustain social anxiety. Self-centered attention, erroneous self-perceptions, and the negative consequences of safety-seeking behaviours, such as how they alter other people's behaviour, are a few of these. Techniques that try to address these additional sustaining elements are part of several cognitive behavioural programmes. CBT can be given in a group or an individual setting. When it is presented in a group setting, other group members are frequently enlisted for exposure exercises and role plays. With six to eight participants in a group and two therapists, sessions typically take two to two and a half hours. When providing CBT in an individual setting, therapists may need to find other participants who occasionally join treatment sessions for role-plays.

According to the “A Cognitive Perspective on Social Phobia”

By recognising the mechanisms that typically inhibit cognitive change & creating effective procedures for reversing those sustaining processes, some of the most successful CBT for anxiety disorders have been historically created [17, 18]. In light of this, Clark, Wells, & colleagues have developed unique cognitive therapy for social phobia that tries to undo the model's sustaining mechanisms. The model places a lot of emphasis on safety behaviour, self-focused attention & negative self-processing; hence, the treatment focuses on how to change these traits in order to restructure social phobics' processing tactics to the greatest possible their chances of disproving their negative beliefs through direct observation of other people rather than themselves.

15 consistently referred social phobia patients had up to 16 sessions of therapy in order to get a rough idea of how effective our theory-derived cognitive treatment is [18]. The development was significant. Pre-post effect sizes were 2.7 and 3.7 respectively, with mean improvements of at post-treatment 11 points and at follow-up 15 points.

Several controlled experiments are being conducted in light of these encouraging preliminary findings, and their outcomes are eagerly anticipated. In the interim, therapeutic trials have validated the efficacy of a number of crucial steps in the whole treatment plan. It has been demonstrated that exposure to dreaded social circumstances can be made more successful by abandoning safety behaviours and switching to externally focused attention [19, 20].

Conclusion

In conclusion, social anxiety has a variety of indirect and intangible costs that are related to decreased productivity, social impairment, and lowered lifestyle quality. However, than those with other anxiety disorders, those with social anxiety disorder frequently experience reduced healthcare costs, which is a reflection of their underutilization of medical services. Cognitive-behavioural therapy (CBT) has received the greatest attention among non-pharmacologic treatment options for social anxiety disorder, and multiple studies have demonstrated its efficacy. Little is now known regarding the manner in which particular CBT strategies are most effective for SAD. In reality, there is still much to learn about the most effective ways to combine the various CBT strategies. It is obvious that these are significant research priorities for future.

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