

CHALLENGES IN TREATING SOCIAL ANXIETY DISORDER (SAD)



Challenges in Treating SAD

- Studies have consistently reported that most patients with SAD benefit from cognitive behavior therapy (Mayo-Wilson E., et al., 2014; Carpenter et al., 2017).
- There are however many clients who drop out of treatment and respond poorly or incompletely (Springer, Levy and Tolin, 2018; Norton & Price, 2007).
- Many clients who improve with treatment also continue to have residual symptoms and impaired functioning (Hoffmann and Bogels, 2006; Marom et al, 2009).



Challenges in Treating SAD

- In this symposium, we will be talking about some of the factors that can operate to diminish treatment efficacy and impede resolution of symptoms.
- Strategies that have been found to be helpful in addressing these factors will be outlined.



Challenges in Treating SAD: Presenters

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“Reducing the detrimental impact of Maladaptive perfectionism in treating and SAD”

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“Managing challenges to engaging & retaining socially anxious clients in treatment”

Randy Weiss

Licensed Clinical Social Worker

Randy Weiss Therapy

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“Excessive Internet use as a safety Behavior in SAD”

Robert Yielding

Clinical Psychologist

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“Cannabis Use: a treatment interfering behavior in SAD”



Reducing the Detrimental Impact of Maladaptive Perfectionism in Treating Social Anxiety Disorder

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I have no financial relationships to
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Maladaptive Perfectionism (MP): Multidimensional Approach

Hewitt & Flett (1991, 2004) identified three dimensions which is reflected in the multidimensional scale they developed:

- (1) Self-oriented perfectionism
- (2) Socially prescribed perfectionism
- (3) Other-oriented perfectionism

Multidimensional Approach: Maladaptive Perfectionism

Frost et al (1990) defined maladaptive perfectionism along six dimensions and developed a multi dimensional scale of perfectionism with six sub scales:

(a) Concern over mistakes

(b) Doubts about actions

(c) Personal standards

(d) Parental expectations

(e) Parental criticism

(f) Organization



Maladaptive Perfectionism: Unidimensional Approach

The focus of the definitions in this approach has been on:

- self worth being contingent on meeting high standards
- the rigidity of the standards
- the elevated standards having a negative impact on the individual.

Clinical Perfectionism

- Definition: “Over dependence on self evaluation in the determined pursuit of personally demanding, self-imposed standards in at least one highly salient domain, despite significant adverse consequences (Shafran, Cooper and Fairburn, 2002) ”.
- A specific and focused treatment intervention based on this conceptualization has been developed.

Maladaptive Perfectionism and Social Anxiety Disorder (SAD)

- Perfectionism has been identified as a risk factor and also a maintaining factor in SAD (Clark & Wells, 1995).
- MP has been found to predict treatment response. Thus non-responders to treatment had higher pretreatment scores on MP as compared to responders (Lundh & Ost, 2001).
- Ashbaugh et al (2007) found that the **changes in perfectionism** predicted the level of social anxiety at the end of treatment, **even when pre-treatment levels of social anxiety was controlled** - implicating perfectionism as a maintaining factor.
- Studies have looked at changes in perfectionism following CBT for SAD and found significant improvements in perfectionism (Lundh & Ost, 2001; Ashbaugh et al., 2007; Rosser et al., 2003).

Treating Maladaptive Perfectionism in SAD

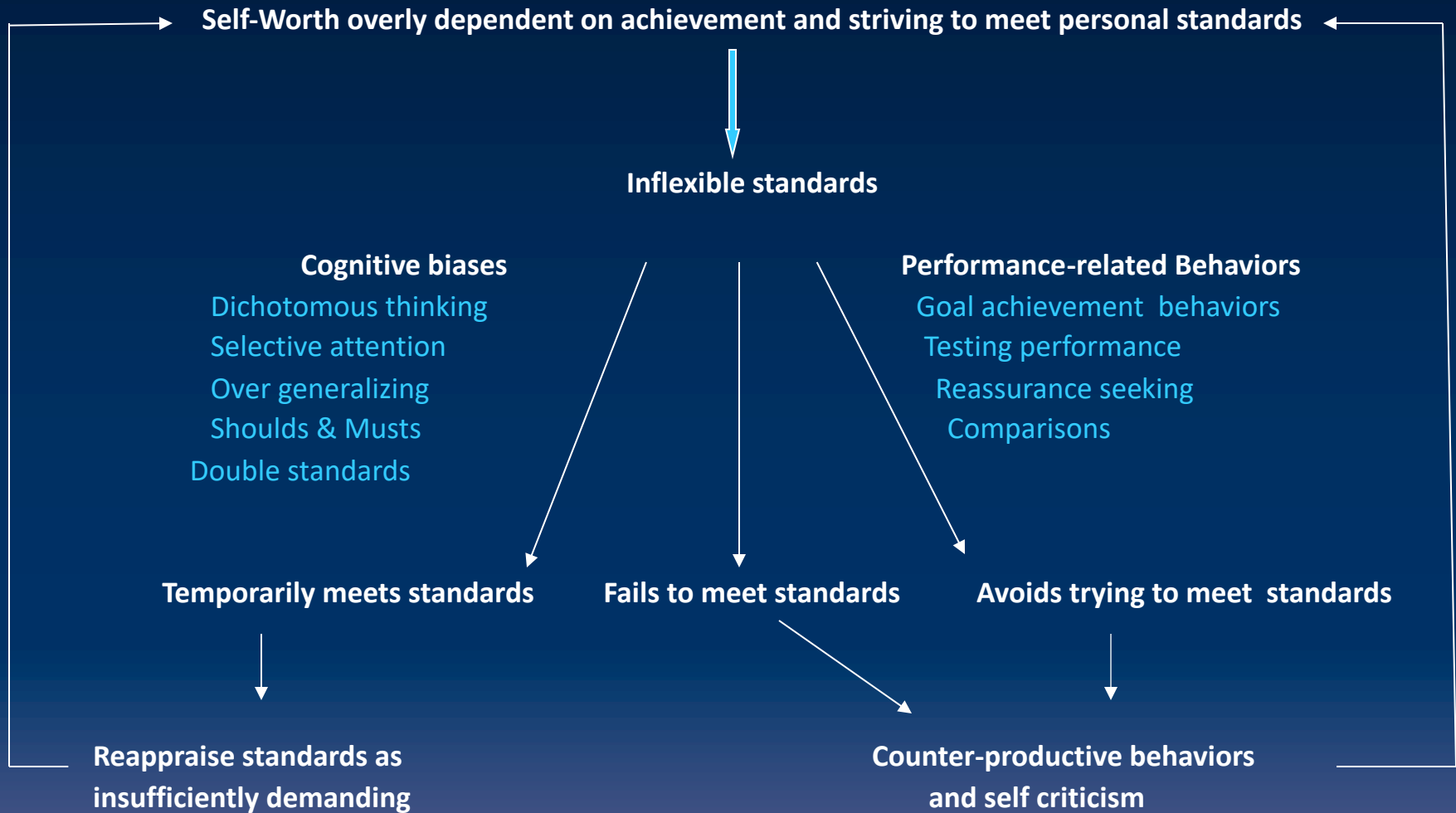
- It would make sense to start with treating the SAD even if perfectionism is clearly identified and is conceptualized as the maintaining factor in the disorder.
- It may be that the perfectionism does decline as the SAD is treated (Lundh & Ost, 2001; Ashbaugh et al., 2007; Rosser et al., 2003).
- In many cases though the perfectionism will interfere with the treatment. In such cases the perfectionism should be focused on and once it is successfully treated the treatment for SAD can be resumed if it still active.

Therapeutic alliance : Treating Maladaptive Perfectionism in SAD

- Early in therapy, clients higher on perfectionism perceive their therapist as less empathic and more judgmental than other clients.
- The quality of the therapeutic bond has been found to be linked to changes in MP and symptom resolution (Zuroff et al., 2000).
- The research findings have highlighted the importance of therapists needing to be high on congruence, empathic understanding, and unconditional regard in assisting a client to decrease levels of perfectionism (Zuroff et al., 2010).

Cognitive-Behavioral Model of Perfectionism

Illustrated with case examples of SAD



The revised cognitive-behavioral model of clinical perfectionism, reproduced from Shafran, Egan & Wade 2010

Treating Maladaptive Perfectionism in SAD

- The CBT intervention for MP based on the model is relatively brief and consists of ten 50 minute sessions.
- Strategies include:
 - (i) Increasing motivation to change by firstly helping the client to identify perfectionism as a problem and to place it within a cognitive-behavioral formulation that makes sense to the client.
 - (ii) Help the client to adopt alternate ways of thinking and behaving that will help the reduction of distress associated with the perfectionist functioning and also reduce it.
 - (iii) Using behavioral experiments to test competing hypothesis. This would often include exposure exercises.
 - (iv) The major goal of treatment is that of broadening the client's scheme for self evaluation - including many areas of the person's life, not basing it on achievements alone, including aspects of the kind of person he/she is).
 - (v) More lasting changes are made when the beliefs underlying the perfectionist behavior are modified.

Scales for Assessment of Maladaptive Perfectionism

1. Adaptive/Maladaptive perfectionism scale
2. Almost Perfect Scale
3. Clinical perfectionism Scale
4. Frost et al. Multidimensional Scale

Can be purchased at “www.guilford.com/egan-forms”

Available for photocopy to purchasers of :

Egan, S., Wade, T., Shafran, R., Antony M. (2014)

Cognitive Behavioral Treatment of Perfectionism. Guilford Press.

New York



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