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Acknowledgement of the use/non-use of AI: I confirm that I have not used any AI tools in the research and creation of this assignment. I confirm that I have not presented any AI generated materials as my own work. I confirm I have copies of my drafts, notes, and other resources I used, which I may be asked to provide in evidence.

HEADING
Author name (your name)

Introduction Classification: Anxiety or fear-related disorder SAD remained a common anxiety disorder (benchmark lifetime ≈ up to 12%; 12-month ≈ up to 7%). The absolute number of people experiencing clinically significant social anxiety very likely increased during and after the pandemic (2020 onward), especially among adolescents and young adults, because national data show rising anxiety and greater mental-health service demand in those groups. However, a precise UK SAD prevalence for each year 2020–2025 is not available in a single national source.(Digital.nhs.uk, 2025) How widespread is social anxiety disorder? Prevalence (the number of individuals impacted) According to estimates, 7.1% of adults in the US experienced SAD within the previous year. 12.1% of U.S. people have a lifetime prevalence (at some point in their lives). Although rates vary by country and income level, a global survey indicated an average	(Title - name of the chosen mental disorder) Social anxiety disorder Definition Social anxiety (social phobia) is a long-term and overwhelming fear of social situations. It usually starts in teenage years and can affect daily activities, work, relationships, and self-confidence.	Current services and treatments : Social anxiety disorder (SAD) can be managed and treated using a variety of efficient services and therapies. These include: self-help techniques, pharmaceuticals, and psychiatric therapy. The most research-backed treatment for SAD is cognitive behavioural therapy, or CBT. helps people feel less anxious by focusing on recognising and combating negative thought patterns and introducing them to social situations gradually. Often includes instruction on social skills. (Hofmann et al., 2012) Exposure Therapy Acceptance and Commitment Therapy(ACT) Group Therapy Medications Self-Help and Lifestyle Strategies Social anxiety disorder can be managed through a variety of evidence-based treatments and services. Cognitive-behavioral therapy (CBT) is the first-line treatment and often includes exposure to feared social situations and cognitive restructuring, and it can be
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lifetime prevalence of ~4.0% across countries (12-month ~2.4%, 30-day ~1.3%).

Central BioMed

According to some estimates, lifetime prevalence in Europe is approximately 6.7% (range ~3.9–13.7%). (National Institute of Mental Health (NIMH), 2022)

How were people with social anxiety disorder viewed in the past?

Historically, people with social anxiety disorder were often seen as merely “shy,” “nervous,” or socially awkward, and their experiences were not recognized as a distinct medical condition. Early medical professionals described extreme shyness as a form of “social neurosis,” but it was largely neglected in psychiatric research. The disorder was first formally identified as “social phobia” in the 1960s and was included in the DSM-III in 1980, though with strict diagnostic criteria. The concept changed throughout time. The DSM-IV first used the term “social anxiety disorder” in 1994, and the DSM-5 (2013) improved the criteria to more accurately reflect the variety of social concerns, including anxiety related to performance alone. Evidence-based therapies like cognitive-behavioral therapy and drugs like SSRIs were developed as a result of medical experts’ move from seeing it as mild shyness to seeing it as a crippling disorder (Stein & Stein, 2008).

Causes

Social anxiety disorder (SAD) **does not have one single proven cause**, but research shows it develops through a combination of **biological, psychological, and environmental factors**. The major contributors identified include:

Genetics

- SAD tends to run in families.
- This doesn’t mean there is a “social anxiety gene,” but multiple genes may increase vulnerability.(Baba, Kloiber and Zai, 2021)

Brain Structure & Function

- People with SAD often show **heightened amygdala activity**, the brain region involved in fear and threat response.
- Differences in **serotonin regulation** have also been observed.

Social anxiety disorder is not caused by introversion, weakness, or simply being shy.It is a recognized mental health disorder, not a personal failing or personality flaw.(Mathew, Coplan and Gorman, 2001)

given in person, online, or through guided self-help. It is also advised to take medications, especially selective serotonin reuptake inhibitors (SSRIs) like escitalopram or sertraline. Other choices include beta-blockers for situational anxiety and short-term benzodiazepines in some situations. While new methods like virtual reality therapy and internet-based CBT are showing promise, support groups and peer assistance can be used in addition to official treatments. Additionally, lifestyle choices (sleep, exercise, social support), mindfulness, and relaxation techniques can help control symptoms. According to the National Institute for Health and Care Excellence [NICE], 2013,

Recommendations

When you experience anxiety or nervousness in social settings, it's called social anxiety. Talking to one person or joining a small group is a good way to start helping. Recognise when your ideas are overly pessimistic and remind yourself that mistakes are OK. Deep breathing is one type of relaxation technique that might help you relax. Taking care of your body, steadily honing your social skills, and being Causes

Research indicates that social anxiety disorder (SAD) arises as a result of a confluence of biological, psychological, and environmental factors rather than having a single established cause.

		Temperament & Personality • Individuals with a behaviorally inhibited, shy, or fearful temperament in childhood have a higher risk of developing SAD.(Clauss and Blackford, 2012) • Increased sensitivity to social rejection or criticism plays a role. Symptoms Individuals with social anxiety disorder experience intense and persistent fear or anxiety in one or more social or performance situations where they may be exposed to scrutiny or evaluation by others. They worry that they will act in a way or show symptoms that will be negatively judged, embarrassed, rejected, or humiliated. These situations almost invariably provoke fear or anxiety and are either actively avoided or endured with great distress. The level of anxiety is disproportionate to the actual risk posed by the situation and is persistent, lasting for months rather than a brief reaction. The anxiety causes significant impairment in daily functioning—socially, academically, occupationally—and the symptoms are not better explained by another mental disorder, medical condition, or substance use.(Ahmad, 2022)		Conclusions In order to wrap up this assignment, I have discussed the definition of the selected mental condition, social anxiety, as well as the classification of anxiety or fear-related disorders. How common is social anxiety disorder, and what are the available treatments and services? There is no single known cause of social anxiety disorder (SAD), and I discussed genetics, how persons with SAD were perceived in the past, symptoms, diagnosis, and necessary advice.
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		Diagnosis Social Anxiety Disorder, as defined in both the ICD-11 and DSM-5, is diagnosed when a person experiences marked and persistent fear or anxiety in one or more social or performance situations where they may be observed or evaluated by others. The fear centers on being judged, embarrassed, humiliated, or rejected, and social situations almost always trigger this anxiety. As a result, the individual typically avoids these situations or endures them with intense distress. The level of anxiety is out of proportion to the real level of threat or the social context, and the symptoms have been present for a prolonged period rather than for a short-term episode. The anxiety also causes significant impairment or distress in daily life—socially, academically, occupationally, or in other important areas of functioning. The diagnosis is made only when these symptoms are not better explained by another mental disorder, a medical condition, substance use, or inadequate language ability.(Ahmad, 2022)		
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