

Shy Children, Phobic Adults: Nature and Treatment of Social Anxiety Disorder (2nd ed.)

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This edition of “*Shy Children, Phobic Adults: Nature and Treatment of Social Anxiety Disorder*” is an excellent and worthwhile revision of the 1998 similarly titled book, which had *Social Phobia* rather than *Social Anxiety Disorder* (SAD) in the title. Clinicians and researchers still use both terms to refer to the disorder; however, SAD is more descriptive of the chronic nature of the disorder so the change in title is very welcomed. The structure of the revised edition is identical to the original edition. However, there has been a lot of research on SAD in the time since the original edition. As such, if you find yourself in the situation of having a copy of the first edition and wondering whether to pick up a copy of this revised edition, do not hold off any further.

Before getting into the content of the book, it is important to highlight that Beidel and Turner truly are experts on SAD, both in terms of clinical practice and research. They have published extensively on SAD, as well as other anxiety disorders, putting them in an excellent position to offer this SAD text. Turner’s death in 2005 was a significant loss to the SAD clinical and research community.

Roughly speaking, the focus of the first half of the book is on a detailed description of SAD and its assessment, while the second half focuses on treatment. The first two chapters discuss the clinical presentation of SAD in adults (Chapter 1) and children and adolescents (Chapter 2). Part of the value of this book, both the original and this second edition, is the detailed descriptions of clinical presentations of SAD both in children and in adults. Too often we are focused on one population or the other and yet we often want information on both populations to share and discuss with students. A whole chapter is devoted to the prevalence of SAD (Chapter 3), representing a wonderful discussion of the range in prevalence rates often seen. In Chapter 4, the authors discuss the etiology of SAD and integrate findings from biological and psychological approaches to understanding the development of SAD. They nicely review the limited research and predict that the next decade will bring about more research on etiology. Next is a comprehensive chapter on the assessment of SAD (Chapter 5) in which Beidel and Turner review the main approaches to assessment, again separating the information based on population where appropriate (i.e., adults; children and adolescents). They include structured and semi-structured diagnostic interviews, clinician rated instruments, self-report scales, self-monitoring procedures, and behavioural assessment procedures. The section on self-report inventories includes a number of well validated instruments; however, there are a number of other self-report measures that are not included in this chapter. Therefore, other sources, in addition to this book, might be helpful for identifying self-report measures, particularly for research purposes.

The treatment portion of the book starts off with a chapter devoted to managing patients with SAD (Chapter 6) which highlights the importance of educating patients about the nature of SAD and discussing treatment expectations, but largely focuses on managing parents. In Chapter 7, the authors review the pharmacological treatment of SAD. They start off this chapter indicating that one of the most significant changes since their first edition is the amount of treatment outcome data available. This chapter alone makes purchasing the revised edition

worthwhile. The authors review the various classes of psychotropic medications and the available empirical evidence regarding efficacy. The final two chapters address psychological treatments for SAD, specifically Cognitive and Behavioral treatments for adults (Chapter 8) and children and adolescents (Chapter 9). These final two chapters discuss the up-to-date treatment outcome literature, as well as the implementation of treatment strategies.

Beidel and Turner strongly focus on behavioral strategies to treating SAD (e.g., exposure, including imaginal and in vivo exposure) and as such, CBT clinicians who are more cognitive in orientation might find there is a lack of emphasis on cognitive strategies, particularly if they are using this book as an aid in training students. It should be noted that Beidel and Turner do include a section on cognitive restructuring, basically outlining the approach taken in Heimberg's Cognitive Behavioral Group Therapy (Heimberg & Becker, 2002). In so doing, they note that "there is no actual empirical support" for the proposition that "changing thoughts can change emotions" (p. 249), the heart of the cognitive model. Clinicians who are more cognitively oriented can supplement this chapter with other sources when training students (e.g., Clark & Wells, 1995). Additionally, newer treatments, namely Mindfulness and Acceptance-based approaches are not mentioned in this book. However, at the time of this revision, there was very little evidence for the efficacy of these approaches. The evidence is building and perhaps such treatments might be mentioned in a future edition.

Beidel and Turner end off their epilogue by stating that "we hope this book serves to enlighten the field...and that our experiences will serve to help other clinicians effectively treat the disorder" (p. 319). Clearly they have enlightened the field by providing an update to such a comprehensive review of SAD which is easily shared with students and is useful for both research and clinical purposes.

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