

Facial Affect and Interpersonal Affiliation: Displays of Emotion During Relationship Formation in Social Anxiety Disorder

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SUMMARY

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Negative behaviors associated with social anxiety disorder (SAD), such as negative impressions by others and eventual social exclusion, are expected to deprive individuals with SAD from positive interpersonal connection. Identifying these particular behaviors therefore would inform treatment strategies. The purposes of this study were: (a) to characterize frequency and intensity of smiling and fear facial displays in individuals diagnosed with SAD versus a control group and (b) to investigate the relationship between these facial expressions and others' desire to further affiliate.

Measures used in the study were: Facial Action Coding System, to index facial expressions by tracking individual muscle movements, called action units; Structured Clinical Interview for DSM-IV, SCID-I SAD module, and Mini International Neuropsychiatric Interview; LSAS, to measure social anxiety symptom severity; and Desire for Future Interaction (DFI), to measure motivation to engage in further contact.

The task used in the study was relationship formation: a conversation between a participant and a confederate beginning with an "open-ended ice breaker" followed by five relationship-building questions from the Aron et al. (1997) paradigm. The participant and confederate were instructed to take turns as "speaker" and listener." After the conversation, the confederate completed the DFI for the participant.

The SAD and control groups had significantly different levels of social anxiety, as well as significantly different levels of depression symptoms. During the relationship formation task, the SAD group displayed significantly less frequent and intense smiling. Lower participant smiling, both in frequency and intensity, when listening was found to be associated with lower DFI. Social anxiety severity had no effect on the relationship between smiling and DFI. No clinically significant instances of fear display occurred within either group.

One possible explanation for low smiling in SAD is that low frequency of smiling may reflect lower felt emotional experience. Another posits that low smiling is driven by physiological processes or by expressive suppression, which is a common emotion regulation strategy used by individuals with SAD. Further research may benefit from more naturalistic interpersonal interactions and extending to other contexts depending on culture, gender, and other types of interactions.

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