Social Anxiety and Perception of Early Parenting Among American,
Chinese American and Social Phobic Samples: A Test of Etiological Hypotheses

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I declare that this thesis reports my original work, and that no part of it has been previously accepted or presented for the award of any degree or diploma by an university. To the best of my knowledge no material previously published or written by another person is included, except where due acknowledgement is given in the text.
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Abstract

Etiological research on social phobia has demonstrated a relationship between prior experience with controlling and unaffectionate parents and social anxiety in later life (Arrindell, Emmelkamp, Monsma, & Brilman, 1983; Bruch, Heimberg, Berger, & Collins, 1989; Parker, 1979). However, all of these studies were conducted with American or European samples. Similar research with other cultural groups has not been conducted. The present study was designed to assess whether the association between social anxiety and early restrictive parenting style previously demonstrated among social phobics occurs in persons from Chinese or Chinese American culture. Three subject groups (American social phobics, American volunteers, and Chinese/Chinese American volunteers) were evaluated with measures of anxiety and behavior in social evaluative situations and measures of their parents' child-rearing characteristics. Multivariate analyses of variance revealed overall group differences on these sets of measures. In terms of social anxiety, Chinese/Chinese Americans were similar to the American volunteers, while social phobics reported greater anxiety on all measures of social evaluative concerns. In terms of early parenting, however, both social phobics and Chinese Americans reported that their parents isolated them from social activities, made them feel ashamed when acting inappropriately, and showed excessive concern with the opinions of others, (more so than the parents of the American volunteers). Like the parents of American volunteers, Chinese/Chinese American parents often joined family activities (more so than the parents of social phobics). The patterns of association between the early experience of restrictive parenting and later social anxiety also differed across three samples. On the whole, the association between parenting style that emphasized opinions of others and shame tactics was evident in the American social phobics and nonanxious volunteers but much less so in the Chinese/Chinese American sample.
Introduction

Anxiety in social or performance situations is a common experience (Heimberg, Dodge, & Becker, 1987). While social anxiety is an unpleasant but transitory experience for most people, some individuals are extremely fearful of these situations and may avoid them whenever possible (Scholing & Emmelkamp, 1990). These individuals are said to suffer from a condition called social phobia, defined as the persistent fear of situations in which the person is exposed to possible scrutiny by others and fears that he or she may do something or act in a way that will be humiliating or embarrassing (American Psychiatric Association, 1987). Unfortunately, a significant number of people are affected by social phobia. In fact, a recent epidemiological survey conducted by Myers et al. (1984) revealed that the six-month prevalence of social phobia ranged from 0.9% to 1.7% for males and from 1.5% to 2.6% for females. Higher rates have also been reported in other studies (e.g., Barlow, 1985; Heimberg & Barlow, 1988).

Despite the prevalence of social fears and their potentially disabling impact, social phobia has not received widespread attention (Heimberg et al., 1987). Social phobia was first identified by Marks and Gelder (1966) of Great Britain. However, it was not until the publication of the third edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-III; American Psychiatric Association, 1980) that social phobia was recognized as an anxiety disorder in American psychiatry. As a result of this belated recognition, our empirical knowledge of social phobia has lagged behind our knowledge of other anxiety disorders, so much so that social phobia has been dubbed the "neglected anxiety disorder" (Liebowitz, Gorman, Fyer, & Klein, 1985b, p.729).

Since the publication of DSM-III, there has been a surge of research on social phobia, and confidence has increased that it is a diagnostic entity distinct from other anxiety disorders such as agoraphobia and panic disorder (Heimberg & Barlow, 1988; Heimberg et al., 1987). In terms of demographic characteristics, social phobic patients are younger and more likely to be single than agoraphobic patients at the time of referral for treatment (Amies, Gelder, & Shaw, 1983). Social
phobics are also less likely to be female and more likely to have finished high school or to be employed full-time. They are more fearful of scrutiny, more likely to report habitual alcohol abuse and suicide attempts than agoraphobics (Amies et al., 1983), but they are less likely to be depressed than agoraphobic, dysthymic or panic disorder patients (Heimberg, Klosko, Dodge, Shadick, Becker, & Barlow, 1989). In terms of physiology, social phobic patients have shown less response (i.e., a lower probability of panic attack) to challenge with sodium lactate (Liebowitz et al., 1985a) or carbon dioxide (Rapee, Mattick, & Murrell, 1986) than agoraphobic or panic disorder patients.

Although the diagnosis of social phobia is now relatively well-established, little is known about the cause and development of social phobic symptoms. In fact, research on the etiology of social phobia has been described as "virtually nonexistent" (Bruch, 1989, p.57). However, studies of the etiology of anxiety disorders in general have suggested that familial factors may contribute to the development of social phobia (Reich & Yates, 1988). Children of anxiety disorder patients are much more likely to receive a diagnosis of anxiety disorder than children of normal persons (Turner, Beidel, & Costello, 1987), and the likelihood of a concordant diagnosis of anxiety disorder is twice as high in monozygotic twins as in dizygotic twins (Torgersen, 1983). However, while concordance for anxiety disorders was established in these studies, concordance for specific anxiety disorders was not. That is, monozygotic twins who both experienced anxiety disorder were not necessarily likely to have the same anxiety disorder. Turner and Beidel (1989) suggest that anxiety proneness rather than anxiety disorder may be genetically transmitted. The development of a specific anxiety disorder may be further influenced by environmental, psychological, or behavior variables (e.g., family environment, temperament, social skills). The present study examines the role of an aspect of family environment, restrictive parenting style, on the development of social phobia.

A number of retrospective studies have examined the perceptions of social phobics and other patient groups of their parents' behavior and the atmosphere in the family home. Preliminary findings (to be described in more detail in a later section) suggest that phobic disorders are associated with a controlling and rejecting stance on the part of the patients' parents (Gerlsma,
Emmelkamp, & Arrindell, 1990) and that social phobics' parents are even less affectionate and more controlling than the parents of agoraphobics and normal controls (Arrindell, Emmelkamp, Monsma, & Brilman, 1983; Parker, 1979). However, these studies are mostly descriptive and offer little explanation as to why these aspects of parenting behavior are prominent among parents of social phobics and less so among parents of normals or patients with other anxiety or affective disorders. More research is clearly needed to examine the early parental and developmental characteristics of social phobic patients, how these factors operate, and in what ways they are different from those of other phobic patients.

The present study was designed to further examine the role of early parental restriction in fostering the development of social anxiety in later life. Moreover, it investigated whether the disruptive effects of this kind of parenting style are specific to individuals who were brought up in Western cultures. Previous studies on this topic have examined Caucasians who lived in Europe or the United States. However, similar studies have rarely been conducted among other cultural groups, and any attempt at generalization of these findings to non-Western societies requires extreme caution. Such generalization is particularly questionable when the culture or society involved holds a differing philosophy regarding appropriate relations between parents and children. In terms of parental restriction, Eastern cultures (especially Chinese and Japanese) often consider strict and formal behavior on the part of parents to be quite appropriate (Li, 1985; Vernon, 1982). Is this kind of parental behavior likely to foster social anxiety among individuals of Chinese upbringing? If this were shown to be the case, the role of restrictive parenting in the development of social anxiety is not specific to Western culture. However, if it were not evident that Chinese persons are more socially anxious than their Western counterparts, and if they are not likely to become socially anxious despite their early experience with parents who are restrictive and emotionally unexpressive, the role of restrictive parenting and its impact needs to be more carefully delineated.
Three samples were included in the present study: non-anxious Chinese or Chinese American persons, American social phobic patients who were seeking treatment for their social anxiety, and non-anxious American persons. The groups were compared on the dimensions of self-reported social anxiety and their perceptions of their parents' child-rearing style. The study first described the differences and the similarities among the three samples in terms of these two dimensions. It was hypothesized that social phobics would not only be more socially anxious than the other samples but would also report that they were raised by restrictive parents. To determine the culture-specific nature of early restrictive parenting style and its impact, the Chinese subjects' reports of parental restrictiveness and social anxiety were compared to the reports of the other subjects. It was hypothesized that Chinese subjects would be similar to nonanxious Americans in terms of social anxiety but relatively more similar to social phobics in terms of reported parental restrictiveness. Furthermore, the study examined the patterns of relationships between restrictive parenting style and social anxiety among the three samples and attempted to identify any difference in patterning between the cultural groups (Chinese and American).

The remainder of this section reviews several areas of research pertaining to the present study. First, a range of parental behaviors and their relationships to children's behavior are described. The focus is then placed on restrictive parental behaviors and their relationship to social phobia. Several empirical findings are presented in support of the association of this parenting style and social phobia. On the other hand, these findings may not be generalizable to the Chinese culture. Although child rearing in Chinese cultural groups is often characterized by restrictive practices and Chinese parents (especially fathers) are not emotionally expressive, it is not evident that adults of Chinese upbringing are more socially anxious. In this regard, restrictive child rearing is discussed in the context of Chinese traditions. This discussion is followed by reviews of two additional areas of relevant literature, research on the characteristics of Chinese parents and cross-cultural research concerning anxiety among Chinese persons. Finally, a set of research hypotheses, which was the subject of the investigation, is presented.
Parenting Styles and Their Differential Relationships with Children's Behavior

Parenting styles and their effects on the child have been widely studied. Due to the intimate and protracted relations between parent and child, psychologists generally agree that a parent's child-rearing attitudes and behavior make a significant impact on the emotional, personality and social development of the child (Bowlby, 1951; Chiu, 1987; Herbert, 1986; Schaefer & Bell, 1958). In search of parenting styles commonly practiced among parents in Western societies, researchers have identified a variety of important parenting variables. To name a few, parents may be overprotective or overindulgent (Levy, 1943; 1970), permissive, authoritarian, or authoritative (Baumrind, 1971). Four dimensions of maternal behavior (sensitivity-insensitivity, acceptance-rejection, cooperation-interference, and accessibility-ignoring) have also been identified by Ainsworth, Bell, and Stayton (1975). In addition, Schaefer (1959; 1961) has developed a circumplex model of parenting behavior that is described by the central dimensions of Autonomy versus Control and Love versus Hostility. A number of dimensions of parental behavior are identifiable in terms of the interaction between these two central dimensions. However, it is beyond the scope of this paper to review each hypothesized component of parenting style. Since social anxiety is the focus of this study, literature that describes parental behaviors specifically related to social anxiety in the child is presented.

Herbert (1986) distinguished two types of parenting styles that were likely to impair the social and emotional development of the child. The first type was maternal overprotection - unduly close contact with and control over the child, both socially and physically. An overprotective mother determines most of the activities of the child. The mother attempts to dictate what the child should think as though he/she has no mind of his/her own. Maternal overprotection may be of the dominant type (e.g., determining who are the child's playmates and where the child plays; constantly reminding the child that opinions of others are very important) or the indulgent type (e.g., sleeping in the same room of the child for years) (Levy, 1943), and the child may be affected in two ways. Long periods of dominant overprotection from the mother discourage independence and may lead to
child behaviors which are excessively dependent, passive, submissive, timid, awkward and generally apprehensive. On the other hand, the behavior profile of children with overprotective and indulgent mothers is characterized by disobedience, impudence, tantrums, excessive demands, egocentrism and a low sense of responsibility. Maternal overprotection does not prepare the child for interpersonal relationships and social situations. The child is thus more likely to be socially anxious and inhibited.

The second kind of problematic parent behavior is characterized by deprivation, rejection, and lack of affection (Herbert, 1986). Maternal rejection may be caused by previous rejecting relations between the mother and her own mother. Having been denied an affectionate and supportive relationship as a child, the mother may later lack the capacity to show affection in general. In the parent-child relationship, she is unable to empathize with her own children's needs for nurturance. Violence or deprivation, or both, are not uncommon. The hostility dimension described by Schaefer is especially prominent when the mother suffers from a psychological disorder, most notably depression (Elmer, 1967) or alcohol abuse (Belsky, 1978). In terms of the child's prospects, there are many moderating influences which determine the seriousness of the consequences of maternal rejection. However, Herbert comments that extremely rejecting mothers are very rare, and the impact of maternal rejection on social development of the child is not specific.

In view of the detrimental impact of maternal restriction and rejection on the social adaptation and emotional development of the child, anxiety research has recently focused on the association of these parenting characteristics and development of anxiety in later life. In particular, restrictive behavior on the part of both fathers and mothers has been associated with avoidance and fear of evaluative situations which is prominent among social phobic patients. It is to these studies that this review now turns.

Characteristics of Social Phobics' Families of Origin

According to a recent review of research on the etiology of emotional disorders conducted in the 1980s by American and European psychologists (Gerlsma et al., 1990), a specific set of parental child-rearing characteristics is prominent among various types of disorders such as anxiety
and depression. These studies focused primarily on the nature of parent-child interactions as recalled by the children who later suffered from phobic disorders. When their reports were compared to those of healthy controls, it was shown that parents of phobic patients were less affectionate and more controlling. However, groups of phobic patients could be distinguished in terms of the varying extent of parental affection (or lack of affection) and control they experienced. In particular, when compared to agoraphobic patients, social phobic patients perceived their parents as even more overprotective and less affectionate (Parker, 1979). Similar conclusions were reached in studies by Arrindell et al., (1983), and Arrindell, Kwee, Methorst, Van Der Ende, Pol and Moritz (1989). An additional factor, parental rejection, was also shown to differentiate the two groups. Arrindell et al. (1989) reported that social phobic inpatients perceived both parents as rejecting while agoraphobic inpatients reported rejecting behavior only on the part of their mothers.

Although parents of social phobic patients tend to be overprotective and less affectionate, previous research has not explained why certain parental characteristics are associated with one type of anxiety disorder and not others. On the other hand, personality psychologists who study the related problem of shyness have offered theoretical notions about the effects of certain parent behaviors on children's shyness and social anxiety. According to Bruch (1989), these notions are important to the study of social phobia because both shyness and social phobia involve excessive concern about potential and real social-evaluative threat. Specifically, he refers to two personality theorists whose postulations appear relevant to the evolution of social evaluative concerns. First, Allaman and colleagues (Allaman, Joyce, and Crandell, 1972) suggest that parenting practices that convey rejection to a child may instill a preoccupation with others' evaluative remarks, perhaps leading to a generalized fear of negative evaluation. This notion is based on earlier research which showed an association between shyness and a parenting style that was either rejecting or overprotective (Allaman et al., 1972; Baumrind, 1967; Becker, 1964).

The second personality theorist is Buss (1980, 1986) who argues that sensitivity to social evaluation during childhood years may be fostered by parental child-rearing attributes which isolate
the child, emphasize the importance of others' opinions regarding appropriate behavior, and de-
emphasize family sociability. Presumably, isolation may prevent the child from engaging in activities
through which social skills can be acquired and social fears can be extinguished. Buss contends that
excessive admonitions about appropriate behavior and appearance can contribute to the
development of shyness when a child seeks to avoid the attention and scrutiny of others. The notion
of family sociability is consistent with Daniels and Plomin's (1985) finding that infant shyness was
related to lower parental scores on the subscale of the Family Environment Scale which reflects the
family's involvement in social activities. Buss (1980) and Plomin and Daniels (1986) argue that the
presence of social anxiety in one or both parents may limit the likelihood that the family will
socialize with other families and thereby limit the opportunities the child has to learn how to
interact effectively in social situations.

In an empirical investigation of Allaman et al.'s and Buss' formulations, a set of parental
characteristics was examined among social phobic subjects by Bruch, Heimberg, Berger, and Collins
(1989). Bruch et al. compared 21 social phobic (generalized type) and 22 agoraphobic patients in
terms of their perception of their parents' child-rearing attitudes and behaviors. The two samples
differed on all dimensions of parental behavior. Social phobics' parents were rated as more
restrictive than the parents of the agoraphobics. Parental childrearing attitudes and behaviors that
distinguished the social phobic subjects were: (1) excessive concerns about opinions of others; (2)
parents' tendency to isolate them from social experiences; (3) limited social activities as a family with
others families; and (4) more commonly reported social fears among their mothers. In addition,
Bruch and Heimberg (1991) reported that parents of social phobics (both generalized and
circumscribed types) tended to use shame method to discipline their children.

This review of parental behaviors and social anxiety supports the notion that controlling and
unaffectionate parental behaviors are related to social anxiety in the child. However, this conclusion
is largely based on American and European research. As such it has not taken account of whether,
and if so how, controlling and emotionally unexpressive parents may foster social anxiety in
individuals from non-Western cultures. An alternative view of parental restrictiveness and its effects is offered by Eastern cultures, such as the Chinese and the Japanese. Although these cultural groups represent a large portion of the world population and an increasing portion of many Western countries (e.g. the United States; Gardner, Robey, & Smith, 1985), their views on child-rearing are quite different from Western ideas. Nevertheless, Western researchers have not studied how parents who are controlling and show less affection may (or may not) affect social anxiety in these cultural groups. In fact, the Western view is incomplete without considering differing social and cultural contexts wherein parents and children interact. If this kind of parenting does not in some way cultivate social anxiety in a variety of cultures, one begins to view the phenomenon as a culturally determined rather than more general aspect of human behavior. The following discussion concentrates on the Chinese view of restrictive parenting. An examination of Chinese culture and its justification for strict and formal child-rearing is presented.

**Chinese Culture and Chinese Parenting Styles**

While parental restrictiveness is deemed an assault on individuality and self-assertion and lack of parental affection may have negative effects on one's social skills in Western culture, parental practices that emphasize restriction, obedience to authority, and control of emotional expressions are highly valued in Chinese culture (Chiu, 1987; Sue & Kirk, 1972; Tseng, 1973). This section discusses aspects of Chinese culture which justify parental restrictiveness and formal parent-child relations. It concludes with a review of research on Chinese parenting styles.

The Confucian tradition occupies the central stage in Chinese culture. As a philosophy, Confucianism has two interrelated goals. On the individual level, it seeks to illuminate the avenue through which an individual can become a 'jun zi' (君子), a person of virtues and gentlemanly conduct (Smith, 1973). On the societal level, it prescribes how social stability can be achieved through the respect for 'li' (禮), the general rules of propriety (Chai & Chai, 1967). These two goals were expounded by Confucius and his disciples in the Classic of Filial Piety (孝經) and the Four Books; namely, Confucian Analects (論語), The Works of Mencius (孟子), The Great Learning
The first goal emphasizes the realization of the inner quality of the moral self by way of self-discipline (Confucius, cited in Legge, Trans., 1971) and self-denial to uphold higher moral principles (‘she sheng qu yi’; 拆生取義) (Confucius, cited in Legge, Trans. 1970). The Confucian ideal of a man, however, does not end with being a virtuous person. Rather, the perfection of a 'jun zi' follows a progression of 'xiu shen' (self-refinement; 修身), 'ji jia' (putting one's family in good order; 齊家), 'zhi guo' (virtuous rule of the state; 治國), and 'ping tian xia' (establishment of a peaceful Kingdom; 平天下). It starts with the cultivation of the moral self, extends to the strengthening of the family, moves on to dedicated service to the state, and finally arrives at the establishment of a universal order of relationship.

The second goal emphasizes the fulfillment of social obligations as prescribed by the codes of 'li'. It is of utmost importance for all social actors, regardless of their social positions, to abide by 'li' in order to preserve harmonious relationships. A model of social relationship is that of the Five Universal Obligations 'wu lun' (五倫), in the order of prominence, those between sovereign and minister, father and son, elder brother and younger brother, husband and wife, and friend and friend (Confucius, cited in Legge, Trans. 1971). This model of relationship clearly depicts a hierarchical structure within which interaction between a superior and a subordinate is regulated (Fairbank, 1966). The codes of 'li' explicitly spell out the appropriate manners and behavior for both parties involved in a wide variety of social settings. Failure to follow 'li' will inevitably result in disruption of the relationship, and to a larger extent, lead to turmoil and social upheaval (Wright, 1962).

The ideals of self-restraint, social cohesion, and stability were readily adopted by the Han emperor Wu-ti (140-87 B.C.) to justify autocratic rule of an expanding empire (Smith, 1973). For 2,000 years of imperial rule, educated elite had been incorporated into the ruling class through the institution of examinations based on Confucian classics. The role of Confucian scholars was two-fold. First, as government officials they provided services to the emperors. Second, as cultural transmitters they expounded and disseminated Confucian tenets to the peasantry by writing legends,
drama, folk stories and songs (Bond & Hwang, 1986). Confucius' teachings were thus widely received and became deeply ingrained in people's thinking and social behavior.

Once Confucian ideology permeated the fabric of traditional society, its theory of man and model of social harmony helped sustain the political status quo, male dominance, and paternal authority over the household. The maintenance of social order began with the family because the household was viewed as a microcosm of society (Confucius, cited in Legge, Trans. 1966). Parent-child relations and the child's relations with other senior members within a household would eventually be extended to relations with authority in society. To ensure stable relations, a strong emphasis on filial piety appeared in Chinese families and extended to relations with other members of the society. The virtue of filial piety, as interpreted in the context of Chinese traditions, consists of several qualities: unquestioning obedience to the parents, concern for and understanding of their needs and wishes with the intention of pleasing and comforting them (Tseng & Hsu, 1972). In return, the father (or other senior members) should support and nurture the needs of children. Therefore, the father was the head of the household and had authority over all household activities and decisions. The emphasis on filial piety legitimized unequal distribution of power in the family and compelled the junior members of the family to comply with parental instructions, especially the instructions of the father (Confucius, cited in Legge, Trans. 1971). The father was then liable for the conduct of the members of his household. However, in order to minimize undesirable or deviant behavior, stringent rules were imposed on children. Harsh requirements towards younger children were considered the kindness of the father because what he required of them was beneficial to the refinement of their moral character. The father thus claimed the role of 'stern parent' while the mother played the role of 'affectionate parent' (Yang & Hwang, 1980), but discipline was still an indispensable component of Chinese child rearing. Restrictiveness was therefore hardly construed as pathological in traditional Chinese society. Instead, it was held in high esteem.

To recapitulate, traditional Chinese culture was built upon the Confucian ideology which aimed at refining the quality of one's moral self and maintaining the harmony of society. These aims
were achieved through the teachings of self-discipline, self-renewal and self-denial at the personal level, and through the fulfilment of social obligations as prescribed by 'li'. In terms of child-rearing, Chinese parents taught their children about self-restraint and appropriate social behavior so that they would grow up to be virtuous persons and to respect social order. Moreover, fathers were stern and not likely to show affection while mothers might be more affectionate. However, both parents emphasized restraints on the children, and restrictive parenting became a rightful and common practice among Chinese parents.

Given the diversity of the Chinese population as a multi-ethnic group, its dispersed geographic distribution, and the emergence of prominent Chinese societies outside the Mainland in modern times, any description of Chinese culture as a monolithic and static cultural system based solely on Confucianism is unwarranted. Besides Confucianism, the evolution of Chinese culture witnessed the incorporation of popular teachings by Taoists and Buddhists. It had also been enriched by the assimilation of ethnic minorities through conquest and intermarriage. Nevertheless, Confucian doctrines remained central to the maintenance of social order and personal fulfillment. While it is beyond the scope of this section to elaborate on how Confucianism has survived and prospered in spite of various sources of criticism, a brief description of the historical context of antagonism is useful to our understanding of Confucianism in modern China.

Historically, Confucianism and many schools of thought had competed for intellectual allegiance and political influence. However, it was not until recent times that it encountered its most severe challenge. During the reform movement in the late Ching Dynasty (1898), reformists attempted to re-interpret Confucian teachings to support their political agenda. However, Confucian orthodoxy was inadvertently undermined. With the collapse of monarchism, Western-educated liberals launched a full-scale attack on Confucianism, calling it the root of China's ills and the culprit that brought China great humiliation before the Western Powers. Then came the Great Cultural Revolution in the 1960s and the Anti-Confucius Campaign in the 1970s, Maoists movements to ultimately eradicate Confucian influence once and for all. Paradoxically, the severity
of attack over the last century had affirmed the fact that Confucianism was a powerful ideology deeply seated in Chinese culture. Kam Louie (1980, p.150), in the conclusion of his book *Critiques of Confucius in Contemporary China*, rightly observes, "...a country's past cannot be put into a museum and forgotten simply by will of a government or the pen of an intellectual. This is especially so for China, which has such a long and continuous tradition." It is therefore imperative for students of humanities and behavioral sciences to investigate the Confucian legacy in Chinese society into the present day. In the paragraphs that follow, empirical studies pertaining to the examination of the continual presence of Confucian values in Chinese societies is reviewed, with special attention to child-rearing styles.

At the most general level, an important question is whether Chinese persons living in a host of cultures outside China still retain certain fundamental Confucian values. In a cross-cultural study on work-related values, Hofstede (1983) reported that Chinese subjects in Hong Kong, Taiwan, and Singapore were very similar on two dimensions of cultural variation, namely, individualism versus collectivism and small versus large power distance. Individualism represents a preference for a loosely knit social framework wherein individuals are expected to take care of themselves and their immediate families only, whereas collectivism stands for a preference for a tightly knit social framework which allows individuals to look after themselves and all members of the clan in exchange for unquestioned loyalty. A small power distance society is one where people strive for power equalization and demand justification for power inequalities, whereas a large power distance society is characterized by the public acceptance of hierarchical order and the idea that everyone plays a part. Hofstede showed that Chinese subjects from various geographical locations were highly collective and moderately high in power distance. Interestingly, Chong, Cragin, and Scherling (1983) administered the Hofstede survey to Chinese subjects in the People's Republic of China (PRC), and their findings were comparable to Hofstede's. These empirical findings suggest the persistent influence of traditional values and point to the fact that these cultural norms have survived the impact of modernization (Bond & Hwang, 1986). More importantly, if traditional norms can survive
in the public sphere of life, their presence in the private domain (such as the family) may be even stronger. However, it is possible that the collectivist characteristic of the PRC subjects as reported by Chong et al. may be accounted for by the communist influence in that country. Whether their findings are additional evidence that Chinese cultural norms have survived the impact of modernization and even radical political changes such as in the PRC requires further investigation.

Cross-cultural studies on family dynamics generally support the notion that Chinese traditions are preserved at the familial level. Psychological research on child-rearing styles of Chinese parents suggest that they are restrictive in regard to impulse control and intolerant of aggressive behavior (e.g., Chiu, 1987; Ho & Kang, 1984; Kriger & Kroses, 1972; Sollenberger, 1968; Tseng & Hsu, 1969-70). Ho (1986) points out that parental restrictiveness is evident when the child reaches 4 to 6 years. Children of age 4 and under are regarded as incapable of learning very much, and they are not exposed to strict discipline. However, restrictions on aggressive behavior have been applied to children regardless of age. Vernon (1982) adds that restrictive practices are also applied to infants and toddlers in the areas of weaning and toilet training. In terms of family education, great emphasis is placed on obedience, proper conduct, moral training and the acceptance of social obligations. In contrast, independence, assertiveness, and creativity are less likely to be emphasized.

Researchers have also examined parent-child communications in Chinese families and report that Chinese parents, especially fathers, are distant, formal and emotionally unexpressive (e.g., Boys' & Girls' Clubs Association, 1980; Mitchell, 1972a & b; Tsai, 1966). The following section focuses on the areas of impulse control and parent-child communications and how they are interpreted in the light of the Confucian influence.

Kriger and Kroses (1972) studied mothers' treatment of children using the Parental Attitude Research Instrument (Schaefer, Bell, & Bayley, 1959) by comparing Chinese American, Jewish, and Protestant mothers. Chinese American mothers scored significantly higher than the Jewish or Protestant mothers on the authoritarian-control dimension. Using the same instrument, Chiu (1987) compared Chinese mothers in Taiwan, Chinese American mothers who immigrated from
Taiwan, and American mothers. Significant differences appeared on the dimension of authoritarian-control where the Chinese mothers scored highest, followed by the Chinese American mothers and the American mothers. In this comparison, Chinese American mothers were less restrictive than Chinese mothers but more restrictive than American mothers. Chiu's findings partly agree with Kriger and Kroses' results in that American mothers were less restrictive than mothers of Chinese descent. Regarding fathers' treatment of children, Niem and Collard (1972) report that Chinese fathers were more often involved in the discipline of their sons than American fathers. Besides the fathers, relatives and adults other than their parents were involved in disciplining Chinese children more frequently than other American adults.

Su (1968) studied the responses of 708 Taiwanese primary-school (grades 4 to 6) students to a questionnaire about parental roles. Although both parents were reported as disciplinarian by 43.64% of the children, most children perceived their father as the harsher disciplinarian (65.54%), the authority figure at home (66.81%), and the parent of whom the child was more afraid (61.16%). In contrast, the mother was perceived as the more forgiving parent (52.82%, as compared with 39.55% for the father) and to be better liked by the child (35.03%, as compared with 22.6%). More boys than girls reported that the father spent more time in disciplining them, administered more punishments, and was a harsher disciplinarian than the mother, and viewed their mother as more forgiving and favorable. Overall, the data suggested that father-child affectional distance was greater than that between the child and the mother. Moreover, parent-child relations of the opposite sex was more affectionate that those of the same sex. It also appeared that there was a direct association between the amount and severity of discipline and affectional distance.

In studying both primary-school and secondary-school children in Taiwan, Yuan's (1972) results only partly agreed with Su. A majority (82.08%) of the Taiwanese primary-school children perceived that both the father and the mother were disciplinarians and their instructions had to be obeyed. However, among the secondary-school children, the mother was perceived as more of a disciplinarian than the father (43.65% versus 30.39%). Only 25.96% of the subjects mentioned both
parents as disciplinarians. There was a tendency among the older children to perceive the father as more lenient and favorable than the mother. Another report that supports the role of parents as disciplinarians from the older children's view is Chan's (1981b) study. Chan queried 1408 Hong Kong secondary school students on parental treatment, teaching, and discipline, and then compared these results to the cross-cultural patterns reported by Chan (1976b). Using the Parent Image Differential (Ginsburg, McGinn, and Harburg, 1970), three favorable factors (Concerned, Democratic, Rational) and three unfavorable factors (Restrictive, Demanding, Autocratic) were identified for both the father and the mother. In general, the mother was viewed more favorably than the father. Boys experienced more restrictive treatment and demanding teaching by the father, as well as more autocratic discipline by both parents, than the girls. On the whole, the children's attitudes towards home were positively related to favorable factors and negatively to unfavorable factors. By way of cross-cultural comparison, Chan reported that the Hong Kong subjects were more similar to those from Singapore than those from America or Mexico.

In general, this group of studies reported that Chinese or Chinese American parents are more strict regarding impulse control and more ready to discipline their children than Western parents. Part of the explanation of this difference can be drawn from Ho's (1986) interpretation in terms of the concept of filial piety. Ho points out that parents of Chinese descent are more concerned with impulse control, a concern that is grounded in the Confucian ethic of filial piety. On the basis of the correlational patterns reported by Ho and Kang (1984), he draws the association between attitudes toward filial piety and the placing of great emphasis on strict discipline and proper behavior. In addition, there is a negative association between attitudes toward filial piety and parental emphasis on the child's expressions of opinions, independence, self-mastery, and creativity. Since greater restrictiveness among Chinese parents is a function of the Confucian influence, the degree of parental restrictiveness among various Chinese cultural groups should vary according to the strength of Confucian traditions. However, existing research provides limited support for this assumption. Kriger and Kroses' (1972) did not compare the Chinese American group with a

Studies by Niem and Collard (1972), Su (1968), Yuan (1972) and Chan (1981b) support the contention that Chinese children are subject to parental discipline and that parent's instructions are to be obeyed. Regarding Niem and Collard's study, Ho (1986) points out that Chinese children are subject to more generalized adult controls since age and generational rank are important determinants of authority in a culture of large power distance. In Western culture, power distance is small and the parents are the main agent of discipline. However, Ho also suggests that the inconsistency of the three studies in terms of which parent is the main agent of discipline is a sign of some departure from the traditional pattern of father as the main disciplinarian. That departure may be symptomatic of the social changes that are taking place among the Chinese outside China. Nonetheless, we should take note of the age differences of subjects studied by these investigators. The children's view of the parent as disciplinarians and which parent is more likely to discipline them seems to vary as they grow older. It is premature to conclude that the father (or the mother) is the main disciplinary agent in the modern Chinese family.

This section has discussed parenting styles in the context of Chinese traditions. It has showed that Chinese parents adopt the restrictive style of parenting while placing relatively less emphasis on affectionate expression than restriction. Studies that compare various Chinese samples to Western samples in term of parenting styles were also discussed. Overall, the empirical findings support the general contention that Chinese or Chinese American parents are restrictive in childrearing, more so than Western parents.

Anxiety among Chinese and Chinese Americans

Given the positive association between restrictive parenting and social anxiety is observed in the West and the findings that Chinese parenting is generally restrictive, it is logical to speculate that persons of Chinese upbringing would be likely to be socially anxious. However, this hypothesis has not been examined. In fact, due to the esteem given to strict parental child-rearing in Chinese
culture, it is not surprising that no research has examined the association of Chinese restrictive parenting and the development of social and emotional problems of children. While information about relationship between anxiety and parenting restriction is limited, Wilson's (1970, 1974) theory of autocentrism is relevant to the current discussion. His theory summarizes the emotional consequences for Chinese children of parental restrictions, but he also reasons for the positive functions served by those restrictions. The theory of autocentrism argues that Chinese childrearing is characterized by the socialization methods of withdrawal of maternal love and use of group shaming to punish misbehavior. These socialization practices cause the child a high degree of anxiety and fear about losing love and being abandoned. Nevertheless, they also function to facilitate the internalization of values which guide behavior independently of others, which Wilson refers as autocentrism.

Aside from the rarity of theories that denote the impact of strict upbringing on development of anxiety in the Chinese child, there is a paucity of studies on this topic. Both Li (1974) and Law (1979) have associated Chinese restrictive parenting with the child's anxiety in school settings. Li (1974) ascribes high test anxiety in Hong Kong school children to the emphasis on obedience and dependence by Chinese mothers. Law (1979) contends that the emphasis on children's education and academic excellence by parents is so extreme that it provokes anxiety in the children. However, both researchers studied Hong Kong school children and their anxiety in school settings only. The extent of generalization of their results to other Chinese children of various ages and in different settings is limited.

On the other hand, a considerable amount of empirical research has studied Chinese emotionality, and the topics of anxiety and neuroticism are often discussed. As early as the 1930s in mainland China, anxiety among Chinese persons was evaluated with questionnaires and standardized scales such as the Bernreuter Personality Inventory (e.g., Shen, 1936), Thurstone's Neurotic Inventory and Personality Schedule (e.g., Chou & Mi, 1937; Pai, Sung, & Hsu, 1937; Smith, 1938), and the Woodworth-Cady-Mathews Questionnaire (e.g., Westbrook & Yao, 1937). All studies
showed higher mean scores on emotionality or neuroticism among Chinese persons compared to American norms.

Unlike research which exclusively studied the mainland Chinese, studies during the last three decades examined the responses of Chinese students in Taiwan and Hong Kong and used self-report measures such as the Cattell 16 Personality Factor Questionnaire (16 PF) (e.g., Scofield & Sun, 1960; Sun, 1968). Chu (cited in Yang, 1986), examined the responses of a large sample ($n = 453$) of Taiwanese students on the 16 PF. They scored lower in Ego Strength (calm, emotionally stable) and higher in Premsia (sensitive, sentimental), Guilt Proneness (timid, worrisome), Protension (suspicious, jealous), and Identity Significance (frustrated, tense) than the American norms. Sue and Kirk (1972) administered the Omnibus Personality Inventory to 236 Chinese American students and reported higher mean scores on Anxiety Level (more apt to be uncomfortable and anxious) and lower mean scores on Personal Integration (less at ease with themselves and others). Chang and Lu (1969) used a Chinese version of the Guilford Zimmerman Temperament Survey with college and high-school students and found that the Chinese mean for Emotional Stability was lower than that of the Americans. Although different instruments were used, the studies on Taiwanese subjects generally support previous findings that Chinese subjects tended to score higher on anxiety.

On the other hand, several studies presented findings on Chinese anxiety that were inconsistent with the results of previous studies. Kao (1962) compared the responses of 2,398 college students in Taiwan on the revised Thurstone Temperament Schedule to Thurstone's norms for American students. The Chinese group's average emotionality score was similar to that of the American group in both sexes. Chan and Eysenck (1981) evaluated 732 adults in Hong Kong with the Chinese version of the Eysenck Personality Questionnaire (EPQ). When compared to the British norms, only Chinese males were found to score slightly higher than British males on the Neuroticism Scale. Further cross-cultural comparisons using the EPQ were conducted by Gong (1984), in which 2,517 adults in mainland China were compared to the English and Greek norms.
obtained by Dimitriou and Eysenck (1978). Chinese subjects scored slightly higher than the English norms on Neuroticism and were both more neurotic and emotionally labile than the Greek norms. However, Gong noted that the usefulness of EPQ with Chinese subjects in clinical and educational settings has not been demonstrated. It was uncertain if Chinese subjects were truly more emotionally unstable and anxious than the Western samples given that the measures were developed in different cultures.

While the view that Chinese persons are more anxious than the Western samples is well-received, critics argue that the previous data were distorted. They question the relevance of these findings to the conclusion that Chinese persons are more emotional, anxious, or neurotic than Westerners (Yang, 1986). Although plausible arguments have been offered to explain Chinese anxiety (e.g., racial differences, parental pressure for young people to go abroad, socioeconomic instability in recent Chinese history), there is no explanation about the deviation of their findings from the studies on early childhood of Chinese children. Both studies by Freedman and Freedman (1969) and Kagan, Kearsley, and Zelazo (1978) report, on the basis of directly observing behavior of children (1 day to 2-1/2 years old) in nursery schools, that Chinese children are more calm and passive and less excitable than American children. In this regard, anxiety researchers have not explained the dispositional change from stability (at young age) to instability (at older age).

In addition, some serious confounding factors are identifiable in the comparative studies (Hsu, 1951). Hsu argues that data which appear to indicate real differences actually reflect material differences in the cultures. Since many items on the temperament tests or scales are standardized with American and British subjects, material elements (such as subway systems, 10-cent stores) described in those items may not be found in mainland China, Taiwan, or even Hong Kong (where the underground railway system began its operation only in 1980s). The lack of certain elements of material culture makes the application of many of the items to Chinese persons' experience impossible. Yang (1986) added that many studies administered instruments developed and standardized in a Western culture to a sample of Chinese persons, and the problems of conceptual
and methodological equivalence were not addressed. Even though differences were found and the
effects of cultural difference were appraised, the unwarranted assumption of conceptual and
methodological equivalence decreased the credibility of their conclusions.

To recapitulate, the temperamental characteristic of anxiety among Chinese persons has
been examined in many studies over the last 50 years. Most of these studies assert that Chinese
persons are more anxious than their American and European counterparts. However, the validity of
these findings is open to question. Thus, generalization of results require caution.

Overview of Study Objectives and Hypotheses

The aim of the present research is two-fold. With the three comparison groups of Chinese
(and Chinese American persons), Americans, and social phobic patients, this study examined
whether Chinese subjects were brought up by parents who were more restrictive than or as restrictive
as the American parents whose children later develop social anxiety problems (i.e., social phobics).
The following hypotheses were examined: (1) given a retrospective questionnaire about the parents'
childrearing attitudes and behavior, the Chinese and the social phobic patients would both perceive
their parents as being restrictive, more so than the nonanxious Americans; and (2) given a variety of
self-report measures of attitudes and behavior in social situations, the Chinese and nonanxious
American subjects would both report similar degree of social anxiety, significantly lower than the
social phobic patients; and (3) the patterns of association between parenting styles and social anxiety
level would differ between Chinese and the two American groups - parental restrictiveness and social
anxiety level would be positively associated with each other in both American and social phobic
groups, whereas among Chinese subjects, this association would not be evident.

To evaluate the first hypothesis, a perceived parental childrearing attitudes questionnaire
was given to subjects. It measured the aspects of parental concern about the opinions of others, the
tendency of parents to isolate the child from social activities, to use shaming methods to deal with
inappropriate child behavior, and to take the family for social events. The second hypothesis
involved the comparison of responses to a variety of questionnaires concerning anxiety and behavior
in social situations. These questionnaires measured the dimensions of fear of negative evaluation, social avoidance and distress, fear of social interactions, fear of being observed by others, social phobic fear, public self-consciousness, and dating history. The third hypothesis required comparison of patterns of association between parents' characteristics as reported by subjects and subjects' own social anxiety level.
Method

Subjects

**Chinese/Chinese Americans.** Thirty male and thirty female adult volunteers of Chinese or Chinese American descent (mean age = 32.53 years, SD = 8.69; age range = 18 to 54 years) were solicited by a printed advertisement enclosed in the bimonthly newsletter of the Chinese Community Center (CCC) of the New York Capital District. While a formal diagnostic evaluation was not possible, each individual was screened by telephone to rule out anxiety disorder, affective disorder, substance abuse or psychological treatment (except for marital problems) within the past two years. They were admitted into the study if they passed screening and could read and write fluent English. This stratified sample matched the comparison samples on age and sex. These individuals received $25 for their participation, and an additional $5 per completed packet was donated to the CCC on their behalf. Descriptive information about the Chinese or Chinese American subjects and their parents is reported in Table 1. The majority of Chinese respondents were born and brought up in Chinese-speaking countries, as were their parents. For most of them, Chinese was their first spoken and written language. However, Chinese subjects were more educated than their parents. Most subjects had received their baccalaureate degree and many had completed graduate study. Additional demographic characteristics of the Chinese/Chinese Americans and other subject samples are reported in Table 2. Group differences of demographic characteristics will be discussed in a subsequent section.

**Social phobics.** The clinical sample was comprised of 34 male and 33 female outpatients (mean age = 35.69 years, SD = 8.87; age range = 18 to 53 years) who sought treatment for social phobia at the Center for Stress and Anxiety disorders, University at Albany, State University of New York (CSAD) and who were accepted into an ongoing treatment outcome study. Potential clinical subjects were first assessed with the Anxiety Disorders Interview Schedule-Revised (ADIS-R; DiNardo & Barlow, 1988). All subjects met DSM-III-R criteria for social phobia, and none received
Table 1
Demographic Characteristics of Chinese or Chinese American Sample and Their Parents

<table>
<thead>
<tr>
<th>Demographic Characteristics</th>
<th>Chinese/Chinese Americans</th>
<th>Fathers</th>
<th>Mothers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample size</td>
<td>60 (50% male)</td>
<td>60</td>
<td>60</td>
</tr>
<tr>
<td>Birthplace</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chinese-speaking countries(^a)</td>
<td>47 (78.3%)</td>
<td>59 (98.3%)</td>
<td>57 (95.0%)</td>
</tr>
<tr>
<td>South-East Asian countries(^b)</td>
<td>4 (6.7%)</td>
<td>1 (1.7%)</td>
<td>2 (3.3%)</td>
</tr>
<tr>
<td>United States</td>
<td>9 (15.0%)</td>
<td>0</td>
<td>1 (1.7%)</td>
</tr>
<tr>
<td>Years spent in Chinese-speaking or South-East Asian countries</td>
<td>17.9 (SD=9.70)</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Years spent in English-speaking countries(^c)</td>
<td>14.6 (SD=9.76)</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>First spoken language</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mandarin (or Chinese dialects)</td>
<td>44 (73.3%)</td>
<td>58 (96.7%)</td>
<td>57 (95.0%)</td>
</tr>
<tr>
<td>English</td>
<td>16 (26.7%)</td>
<td>2 (3.3%)</td>
<td>3 (5.0%)</td>
</tr>
<tr>
<td>First written language</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chinese</td>
<td>34 (56.7%)</td>
<td>56 (93.3%)</td>
<td>55 (91.7%)</td>
</tr>
<tr>
<td>English</td>
<td>26 (43.3%)</td>
<td>4 (6.7%)</td>
<td>4 (6.7%)</td>
</tr>
<tr>
<td>None</td>
<td>0</td>
<td>0</td>
<td>1 (1.6%)</td>
</tr>
<tr>
<td>Religion</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chinese/Eastern religion(^d)</td>
<td>3 (5.0%)</td>
<td>18 (30.0%)</td>
<td>25 (41.7%)</td>
</tr>
<tr>
<td>Protestantism/Catholicism</td>
<td>33 (55.0%)</td>
<td>17 (28.3%)</td>
<td>18 (30.0%)</td>
</tr>
<tr>
<td>None</td>
<td>21 (35.0%)</td>
<td>22 (36.7%)</td>
<td>14 (23.3%)</td>
</tr>
<tr>
<td>Not reported</td>
<td>3 (5.0%)</td>
<td>3 (5.0%)</td>
<td>3 (5.0%)</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grade school or less</td>
<td>1 (1.7%)</td>
<td>16 (26.7%)</td>
<td>25 (41.7%)</td>
</tr>
<tr>
<td>Some high school</td>
<td>1 (1.7%)</td>
<td>11 (18.3%)</td>
<td>14 (23.3%)</td>
</tr>
<tr>
<td>High school graduate</td>
<td>0</td>
<td>7 (11.7%)</td>
<td>5 (8.3%)</td>
</tr>
<tr>
<td>Some college</td>
<td>9 (15.0%)</td>
<td>2 (3.3%)</td>
<td>6 (10.0%)</td>
</tr>
<tr>
<td>College graduate</td>
<td>14 (23.3%)</td>
<td>15 (25.0%)</td>
<td>7 (11.7%)</td>
</tr>
<tr>
<td>Graduate school(^e)</td>
<td>35 (58.3%)</td>
<td>9 (15.0%)</td>
<td>3 (5.0%)</td>
</tr>
<tr>
<td>Place where education completed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chinese-speaking countries</td>
<td>4 (6.7%)</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>South-East Asian countries</td>
<td>1 (1.7%)</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>United States</td>
<td>53 (88.3)</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Other English-speaking countries(^c)</td>
<td>2 (3.3%)</td>
<td>--</td>
<td>--</td>
</tr>
</tbody>
</table>

Note: Dashes indicate absence of demographic information. \(^a\) = Hong Kong, People's Republic of China, Taiwan; \(^b\) = Malaysia, Philippines, Singapore; \(^c\) = Canada, Scotland, United States; \(^d\) = Ancestral worship, Buddhism, Taoism; \(^e\) = Master's or PhD degree.
Table 2
Demographic Characteristics of Chinese or Chinese Americans, Social Phobic Patients, and American Volunteers

<table>
<thead>
<tr>
<th>Demographic Characteristics</th>
<th>Chinese/Chinese Americans</th>
<th>Social Phobics</th>
<th>American Volunteers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample size</td>
<td>60 (50% male)</td>
<td>67 (50.7% male)</td>
<td>50 (50% male)</td>
</tr>
<tr>
<td>Years of age (SD)</td>
<td>32.53 (8.69)</td>
<td>35.69 (8.87)</td>
<td>33.38 (9.41)</td>
</tr>
<tr>
<td>Ethnicity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caucasians</td>
<td>--</td>
<td>64 (95.5%)</td>
<td>46 (92.0%)</td>
</tr>
<tr>
<td>Blacks</td>
<td>--</td>
<td>2 (3.0%)</td>
<td>2 (4.0%)</td>
</tr>
<tr>
<td>Hispanics</td>
<td>--</td>
<td>1 (1.5%)</td>
<td>2 (4.0%)</td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>23 (38.3%)</td>
<td>27 (40.3%)</td>
<td>19 (38.0%)</td>
</tr>
<tr>
<td>Married/cohabitating</td>
<td>37 (61.7%)</td>
<td>29 (43.3%)</td>
<td>24 (48.0%)</td>
</tr>
<tr>
<td>Divorced/separated/widowed</td>
<td>0</td>
<td>11 (16.4%)</td>
<td>7 (14.0%)</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High school or less</td>
<td>2 (3.4%)</td>
<td>14 (20.9%)</td>
<td>14 (28.0%)</td>
</tr>
<tr>
<td>Some college</td>
<td>9 (15.0%)</td>
<td>13 (19.4%)</td>
<td>15 (30.0%)</td>
</tr>
<tr>
<td>College graduate</td>
<td>14 (23.3%)</td>
<td>22 (32.8%)</td>
<td>12 (24.0%)</td>
</tr>
<tr>
<td>Graduate school</td>
<td>35 (58.3%)</td>
<td>18 (26.9%)</td>
<td>9 (18.0%)</td>
</tr>
<tr>
<td>Employment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Homemaker</td>
<td>7 (11.7%)</td>
<td>5 (7.5%)</td>
<td>1 (2.0%)</td>
</tr>
<tr>
<td>Student</td>
<td>17 (28.3%)</td>
<td>12 (17.9%)</td>
<td>3 (6.0%)</td>
</tr>
<tr>
<td>Employed full-time</td>
<td>36 (60.0%)</td>
<td>48 (71.6%)</td>
<td>42 (84.0%)</td>
</tr>
<tr>
<td>Employed part-time</td>
<td>0</td>
<td>0</td>
<td>3 (6.0%)</td>
</tr>
<tr>
<td>Unemployed</td>
<td>0</td>
<td>1 (1.5%)</td>
<td>1 (2.0%)</td>
</tr>
<tr>
<td>Retired</td>
<td>0</td>
<td>1 (1.5%)</td>
<td>0</td>
</tr>
<tr>
<td>Mean yearly household income (in US currency)</td>
<td>39028.85$^{a,b}$</td>
<td>31419.68$^{a}$</td>
<td>44825.56$^{b}$</td>
</tr>
</tbody>
</table>

Note: Dashes indicate that the characteristics were irrelevant. Group means sharing superscripts are not significantly different at p < .05, using Duncan's multiple range criterion.
a comorbid diagnosis of current major depression, bipolar disorder, psychotic disorder, or active alcohol or drug dependence within the past three months. Interviewers also rated each individual on the Clinician's Severity Rating Scale (CSR), a 0-to-8 global clinician rating included in the ADIS-R that incorporates both level of anxiety and degree of functional interference. All clinical subjects received a CSR rating equal to or greater than 4, indicating, at least, moderate impairment in daily functioning. The initial diagnosis of social phobia was further confirmed by a second clinician using the social phobia sections of the ADIS-R and the Schedule for Affective Disorders and Schizophrenia - Lifetime for Anxiety Disorders (SADS-LA; Fyer, Endicott, Manuzza, & Klein, 1985). Both ADIS-R and SADS-LA interviews have a distinguished history in the diagnosis of anxiety disorders and have been characterized by high rates of interrater agreement for the diagnosis of social phobia (ADIS-R Kappa = 0.87, Barlow & DiNardo, in press; SADS-LA Kappa = 0.68, Manuzza et al., 1989).

Americans. A group of 25 male and 25 female American comparison subjects (mean age = 33.38 years, SD = 9.02; age range = 19 to 59 years) were recruited from the Albany community by bulletin board advertisements which requested the participation of non-anxious volunteers in a comparative study conducted by CSAD. Each potential subject was screened by telephone in the same manner as the Chinese/Chinese American respondents. These individuals received $30 for their participation. For the purpose of this study and other ongoing studies, American subjects were again contacted and 39 persons responded. They received an additional $20 for participating in these studies.

Demographic differences. Apart from age and gender ratio, the three samples differed in demographic characteristics. Chinese/Chinese Americans differed from the social phobics and American controls on marital status ($\chi^2(4, N=177) = 11.66, p < 0.02$) in that they reported no cases of divorce or separation; and education ($\chi^2(6, N=177) = 29.85, p < 0.00004$) in that they were more likely to have had graduate education and less likely to have only a high school education. Chinese/Chinese Americans also differed from the American controls on employment ($\chi^2(2,
N = 110) = 13.14, p < 0.001) in that they were more likely to be students and less likely to be employed full-time. Social phobics' yearly household income was the lowest among three groups, being significantly lower than the American controls (F(2, 153) = 3.16, p < 0.05). However, social phobics were similar to their American counterparts in terms of ethnicity (Chi^2(2, N = 117) = 0.83, ns), marital status (Chi^2(2, N = 117) = 0.29, ns), education (Chi^2(3, N = 117) = 3.69, ns) and employment status (Chi^2(2, N = 117) = 5.37, ns). Also, the social phobics did not differ from the Chinese/Chinese Americans on employment (Chi^2(2, N = 127) = 2.7, ns).

Measures of Anxiety and Behavior in Social Situations

Social Avoidance and Distress Scale. The Social Avoidance and Distress Scale (SADS; Watson & Friend, 1969) assesses two aspects of social-evaluative anxiety; the experience of distress and discomfort in interpersonal interactions and the deliberate avoidance of social situations. The SADS is a 28-item true/false questionnaire which includes items about general social situations (e.g., "I often find social occasions upsetting" and "I try to avoid talking to people unless I know them well"). Watson and Friend (1969) reported several findings in support of the reliability of the SADS: (a) a mean point-biserial item-total correlation of 0.77, (b) Kuder-Richardson Formula 20 (KR-20) coefficient of homogeneity of 0.94, and (c) a 1-month test-retest coefficient of 0.68. Regarding the validity of the SADS, high scoring SADS subjects prefer to work alone and tend to avoid social interactions (Watson & Friend, 1969), and report more negative self-statements (Cacioppo, Glass, & Merluzzi, 1979) and fewer positive self-statements (Heimberg, Acerra, & Holstein, 1985) in anticipation of an interaction with someone of the opposite sex than low scoring SADS subjects.

Fear of Negative Evaluation Scale. The Fear of Negative Evaluation Scale (FNE; Watson & Friend, 1969) measures an additional component of social-evaluative anxiety; the fear of receiving negative evaluations from others. FNE items involve concern about other's evaluations, avoidance of evaluative situations, distress about negative evaluation, and expectation of being negatively evaluated. Sample items include "I am afraid that I may look ridiculous and make a fool of myself" and "I feel very upset when I commit some social error". Subjects rate each statement as "true" or
"false" and obtain a final score ranging from 0 to 30. Watson and Friend (1969) reported the following data regarding the reliability of the FNE: (a) a mean point-biserial item-total correlation of 0.72, (b) a KR-20 coefficient of homogeneity of 0.94, and (c) a 1-month test-retest coefficient of 0.78. The validity of the FNE was also evaluated in several studies. High scoring FNE subjects became more anxious in social-evaluative situations and worked harder to avoid disapproval or gain approval (Watson & Friend, 1969), tended to avoid potentially threatening social comparisons (Friend & Gilbert, 1973), and felt worse about receiving negative evaluations than low scoring FNE subjects (Smith & Sarason, 1975). On the whole, both the SADS and FNE are among the most frequently used scales in studies of social anxiety and social phobia (Heimberg, 1988). They have been recommended for the assessment of social anxiety or as outcome measures in studies of social phobia, although there is continuous debate about their appropriateness as measures of treatment outcome (Heimberg, Hope, Rapee, & Bruch, 1988; Turner, McCanna, & Beidal, 1987).

**Social Interaction Anxiety Scale.** The 20-item Social Interaction Anxiety Scale (SIAS; Mattick & Clarke, 1989) measures anxiety experienced in social situations. The SIAS consists of a series of self-statements describing one's typical cognitive, affective, or behavioral reaction to a variety of situations requiring social interaction in dyads or groups. Sample situations are "going to a party", "talking to an attractive member of the opposite gender", "expressing one's feelings". Subjects are asked to rate each item on a scale ranging from 0 (not at all characteristic or true of me) to 4 (extremely characteristic or true of me). The summative score (after reversing the 3 positively-worded items) ranges from 0 to 80, indicating the degree of social interactional anxiety. Mattick and Clarke (1989) also provided data about the SIAS's reliability and validity, involving samples of 243 DSM-III-diagnosed Australian social phobics, 481 college students, 315 community volunteers, and smaller samples of agoraphobics and simple phobics. Cronbach's alphas for the SIAS from these samples ranged from 0.88 to 0.93, while test-retest coefficients for intervals of 3 to 13 weeks in small samples of untreated social phobics exceeded 0.90. Heimberg, Mueller, Holt, Hope, and Liebowitz (1991) further demonstrated the high internal consistency of the SIAS. Using 66 DSM-III-R-
diagnosed American social phobics, 53 college students, and 50 community volunteers, they reported Cronbach's Alpha coefficients ranging from 0.85 to 0.90. Moreover, both studies indicated that the SIAS was highly correlated with several measures of interactional and performance anxiety; namely, the SADS, FNE, Social Phobia Subscale of the Fear Questionnaire (Marks & Mathews, 1979), Interaction Anxiousness Scale (Leary, 1983), Audience Anxiousness Scale (Leary, 1983), and the Liebowitz Social Phobia Scale (Liebowitz, 1987).

**Social Phobia Scale.** The Social Phobia Scale (SPS; Mattick & Clarke, 1989) measures anxiety about being observed by others in social situations. The SPS contains 20 statements pertaining to situations in which the individual might be observed while undertaking certain activities in the presence of others (e.g., speaking to a group, eating or writing in public, using a public rest room). Subjects rate each statement using a 0-to-4 scale. The SPS demonstrated good internal consistency in the studies conducted by Mattick and Clarke (1989) and Heimberg et al. (1991). Mattick and Clarke (1989) recorded Cronbach's alphas of 0.89 to 0.94 for the five samples noted above. Test-retest correlations in small samples of untreated Australian social phobics exceeded 0.90 at intervals of up to 13 weeks. High Cronbach's alphas were also reported by Heimberg et al. (1991), ranging from 0.87 to 0.93 among their three samples (American social phobics, college students and community volunteers). In both studies, convergent validity of the SPS was shown by significant correlations with measures of interactional and performance anxiety (e.g., the SADS, FNE, Fear Questionnaire, Interaction Anxiousness Scale, Audience Anxiousness Scale, the Liebowitz Social Phobia Scale). In addition, differences in discriminant power between the SPS and SIAS were reported by Heimberg and colleagues. The SPS was more highly related to measures of performance anxiety (Liebowitz Social Phobia Scale Performance subscale and Fear Questionnaire Social Phobia subscale among social phobics), whereas the SIAS was more highly related to measures of interactional anxiety (SADS, Liebowitz Social Phobia Scale Social Interaction subscale, Interaction Anxiety Scale, Social Interaction Self-Statement Test; Heimberg et al., 1991).

**Fear Questionnaire.** Subjects' degree of avoidance due to anxiousness in social situations
was assessed with the Social Phobia subscale of the Fear Questionnaire (FQ-SP; Marks & Mathews, 1979). The subscale consists of five social phobic fear situations (e.g., "Eating or drinking with other people" and "Being criticized"). Subjects indicate how much they avoid each of the situations because of fear or unpleasant feelings by a rating of 0 (would not avoid it) to 8 (always avoid it), with higher scores reflecting more severe phobic responses. Good overall test-retest reliability has been demonstrated for the Fear Questionnaire and its Agoraphobia, Blood-Injury Phobia and Social Phobia subscales. Mark and Mathews reported a coefficient of 0.82 for the three subscales combined over a one-week period. The validity of the FQ has been supported in several studies as it routinely discriminated between phobic and non-phobic samples (Corcoran & Fischer, 1987).

**Public Self-Consciousness Scale.** Subjects' public self-consciousness was measured by the 7-item Public Self-Consciousness Subscale (PSC) of the Self-Consciousness Scale (Fenigstein, Scheier, & Buss, 1975). The PSC examines the tendency to think about oneself as a social object. Sample items are "I'm concerned about my style of doing things" and "Before I leave my house, I check how I look". Subjects rate the items on a scale of 1 (very uncharacteristic) to 5 (very characteristic), producing a total possible range of 5 to 35. Fenigstein and colleagues reported adequate test-retest correlations for the PSC ($r = 0.74$) among non-clinical samples. Scheier and Carver (1985) reported an internal consistency reliability of 0.79 for the PSC. Other studies also provided data regarding reliability and discriminant validity (Carver & Glass, 1976; Turner, Scheier, Carver, & Ickes, 1978) involving college samples. Hope and Heimberg (1988) assessed social phobics and reported that the PSC was related to most self-reported measures of social anxiety, including the SADS and FNE. PSC scores also predicted degree of anxiety reported during an individualized behavioral test.

**Self-Rating of Shyness.** Subjects responded to a single item in which they rated their degree of shyness compared to persons of similar age, gender, and background on a scale of 1 (much more shy) to 5 (much less shy) (SHY; Bruch et al, 1989). SHY discriminated among social phobics ($M = 4.05$, $SD = 0.92$) and agoraphobics ($M = 2.77$, $SD = 1.27$) in the Bruch et al. (1989) study.

**Dating History Questionnaire.** The Dating History Questionnaire (DHQ; Bruch et al.,
1989) asks subjects how many different persons they had dated and the total number of dates they had during three age periods: from age 14 to 15, age 15 to 18, and age 18 to 21. Subjects select one of five alternatives that best describes their dating behavior. Choices for number of dating partners range from "none" to "five or more people", which correspond to scoring weights of 0 to 4. Summing scores across the three age periods yields a total possible range of 0 to 12. Choices for number of dates range from "none" to "eleven or more dates", which correspond to scoring weights of 0 to 4. A total score across the three age periods may range from 0 to 12. The DHQ discriminated total number of dating partners among social phobics (M = 4.62, SD = 3.35) and agoraphobics (M = 7.41, SD = 2.5) in the Bruch et al. (1989) study.

**Early Parenting Measures**

**Perceived parental child-rearing attitudes.** Bruch et al. (1989) developed this 19-item scale which measures four aspects of perceived parental childrearing attitudes (PPCA). It consists of a 5-item Others' Opinions Subscale (OS; e.g., "My parents placed importance on how it would look to other people if I didn't do well in school."), a 5-item Shame Subscale (SS; e.g., "I can remember saying or doing something foolish at a family gathering and having one of my parents ridicule me in front of other people."), a 5-item Social Isolation Subscale (IS; e.g., "Even when I got older my parents didn't like me going out unless it was a special occasion."), and a 4-item Family Sociability Subscale (FS; e.g., "Our family liked having parties."). Items in this instrument were adapted from Parker, Tupling, and Brown's (1979) Parental Bonding Instrument, Schafer's (1965) Children's Report of Parental Behavior and Bloom's (1985) Family Attitude Survey. For a sample of 21 social phobics and 22 agoraphobics, the instrument demonstrated good internal consistency with alphas of 0.71 for OS, 0.80 for IS, and 0.86 for FS (Bruch et al., 1989). A Cronbach's coefficient of 0.80 for SS among 70 social phobics and 39 community controls was reported by Bruch and Heimberg (1991).

**History of parental anxiety.** Parents' level of anxiety was retrospectively measured with the 13-item Parental History of Social Anxiety questionnaire (PHSA; adapted from Bruch et al., 1989). After indicating if subjects' caretakers were their biological parents, they rated the degree of
avoidance and anxiousness displayed by each parent during the time the subjects were growing up. They then rated the degree of avoidance exhibited by each parent in four fear situations (e.g., "being criticized" and "speaking to an audience") on a scale ranging from 0 (would not avoid it or feel fearful) to 8 (avoid it always if possible). These situations were adapted from Marks and Mathews' (1979) Fear Questionnaire Social Phobia subscale. According to Bruch and colleagues, the PHSA for mothers (but not fathers) significantly differentiated between social phobics and agoraphobics. Social phobics rated their mothers as significantly more avoidant on the social phobia items than agoraphobics ($M = 23.4$ vs $M = 16.9$, $F(1,26) = 6.93$, $p < 0.05$).

Procedure

Chinese/Chinese American subjects completed all questionnaire measures at home and returned them to CSAD in sealed envelopes within a one-month period. The packet included the SADS, FNE, SPS, SIAS, FQ-SP, PSC, SHY, DHQ, PPCA, and PHSA. The same list of questionnaires were completed at home by social phobic subjects as part of a questionnaire packet given prior to their treatment. All American volunteers completed the FNE, SPS, SIAS, FQ-SP, PSC, SHY, DHQ, PPCA, and PHSA at home as part of a questionnaire packet given during the first recruitment. The SADS was completed as part of another questionnaire packet during the second recruitment of American subjects.

Information about subjects' identity and questionnaire responses were treated confidentially. Each completed set of questionnaires was coded with an arbitrary identity number. Subjects' responses and information were stored in a locked cabinet.
Results

Comparison of Anxiety and Behavior in Social Situations

Measures of social anxiety and behavior were analyzed with both multivariate and univariate tests, and a summary of results is presented in Table 3. To test the significance of differences across groups and between genders on these measures, a two (gender) by three (groups: Chinese/Chinese American, American, social phobic) factorial multivariate analysis of variance (MANOVA) was first conducted. Pillai's trace criterion was chosen as the index of significance. Significant overall differences were examined with univariate analyses of variance (ANOVAs) and followed where appropriate with post hoc Duncan's multiple range tests. Dating history data were analyzed separately from measures of social anxiety because they reflected behavior during time periods that were relatively more distant in time and required greater retrospection than other measures. DHQ scores were assessed by ANOVAs and post hoc Duncan's tests.

Social anxiety. The MANOVA on measures of social anxiety revealed significant main effects for group ($F(14,220) = 7.64, p < 0.0001$) and gender ($F(7,109) = 2.98, p < 0.007$), but no interaction effect ($F(14,220) = 0.50, ns$). The univariate ANOVAs revealed significant differences across groups on all social anxiety measures (SADS, FNE, SIAS, SPS, FQ-SP, PSC, and SHY; see Table 3). Duncan's multiple range tests ($p < 0.01$) identified higher mean scores on all anxiety measures for the social phobic sample while no significant differences appeared on any measure between the Chinese/Chinese American and American volunteers.

The univariate ANOVAs also revealed significant gender differences for three measures of social anxiety: the SIAS ($F(1,141) = 4.41, p < 0.04$), the SPS ($F(1,141) = 6.83, p < 0.01$), and the FQ-SP ($F(1,167) = 8.69, p < 0.004$). In each case, women achieved higher scores than men.

Differences in dating history. The univariate ANOVAs indicated significant group differences in terms of total number of dating partners ($F(2,171) = 22.93, p < 0.0001$) and total number of dates ($F(2,171) = 19.84, p < 0.0001$) from age 14 to 21. Examination of dating history for each of the three age periods (age between 14 and 15, 15 and 18, 18 and 21) was also conducted with
Table 3
Means and Standard Deviations for Measures of Anxiety and Behavior in Social Situations for the Three Samples, and Univariate F Values for the Group and Gender Effects

<table>
<thead>
<tr>
<th>Measure</th>
<th>Chinese/Chinese Americans (n = 60)</th>
<th>Social Phobics (n = 67)</th>
<th>American Volunteers (n = 50)</th>
<th>Group Effect</th>
<th>Gender Effect</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
<td>SD</td>
<td>M</td>
</tr>
<tr>
<td>SADS</td>
<td>6.62a</td>
<td>5.40</td>
<td>19.69b</td>
<td>6.98</td>
<td>6.08a</td>
</tr>
<tr>
<td>FNE</td>
<td>11.73a</td>
<td>7.79</td>
<td>25.03b</td>
<td>5.08</td>
<td>11.30a</td>
</tr>
<tr>
<td>SIAS</td>
<td>21.87a</td>
<td>11.07</td>
<td>46.19b</td>
<td>15.21</td>
<td>19.86a</td>
</tr>
<tr>
<td>SPS</td>
<td>15.07a</td>
<td>9.99</td>
<td>32.70b</td>
<td>14.29</td>
<td>12.52a</td>
</tr>
<tr>
<td>FQ-SP</td>
<td>9.22a</td>
<td>4.74</td>
<td>21.37b</td>
<td>6.24</td>
<td>8.22a</td>
</tr>
<tr>
<td>PSC</td>
<td>14.43a</td>
<td>6.48</td>
<td>24.49b</td>
<td>10.38</td>
<td>17.16a</td>
</tr>
<tr>
<td>SHY</td>
<td>2.52a</td>
<td>0.95</td>
<td>4.15b</td>
<td>0.75</td>
<td>2.54a</td>
</tr>
<tr>
<td>DHQ</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- total number of partners</td>
<td>2.85a</td>
<td>2.43</td>
<td>5.63b</td>
<td>3.26</td>
<td>5.96b</td>
</tr>
<tr>
<td>- age 14 to 15</td>
<td>0.32a</td>
<td>0.79</td>
<td>1.31b</td>
<td>1.36</td>
<td>1.40b</td>
</tr>
<tr>
<td>- age 15 to 18</td>
<td>0.78a</td>
<td>1.04</td>
<td>2.00b</td>
<td>1.51</td>
<td>2.24b</td>
</tr>
<tr>
<td>- age 18 to 21</td>
<td>1.75a</td>
<td>1.34</td>
<td>2.31b</td>
<td>1.39</td>
<td>2.32b</td>
</tr>
<tr>
<td>- total number of dates</td>
<td>4.15a</td>
<td>3.19</td>
<td>7.12b</td>
<td>3.65</td>
<td>7.74b</td>
</tr>
<tr>
<td>- age 14 to 15</td>
<td>0.42a</td>
<td>0.94</td>
<td>1.48b</td>
<td>1.48</td>
<td>1.76b</td>
</tr>
<tr>
<td>- age 15 to 18</td>
<td>1.30a</td>
<td>1.66</td>
<td>2.60b</td>
<td>1.62</td>
<td>2.88b</td>
</tr>
<tr>
<td>- age 18 to 21</td>
<td>2.43a</td>
<td>1.56</td>
<td>3.04b</td>
<td>1.42</td>
<td>3.10b</td>
</tr>
</tbody>
</table>

Note: SADS = Social Avoidance & Distress Scale; FNE = Fear of Negative Evaluation Scale; SIAS = Social Interaction Anxiety Scale; SPS = Social Phobia Scale; FQ-SP = Fear Questionnaire - Social Phobia Subscale; PSC = Public Self-Consciousness Scale; SHY = Self-Rating of Shyness; DHQ = Dating History Questionnaire. ***p < 0.0001; **p < 0.005; *p < 0.05. Means sharing superscripts are not significantly different, using Duncan's multiple range tests (p < 0.01). Total sample size varies from 147 to 177 due to missing data.
a series of ANOVAs. Group differences in number of dating partners and number of dates occurred during each of these age periods. Duncan's multiple range tests determined that Chinese/Chinese American subjects were significantly different from the other two samples in all comparisons, consistently reporting smaller numbers of dating partners and dates in each age period. The other groups did not differ from each other in any comparison. The effect of gender and the interaction effect failed to attain statistical significance in every analysis.

**Measures of Early Parenting Attitudes and Behavior**

Prior to the examination of group and gender differences, the reliability of the early parenting measures which were recently developed by Bruch et al. (1989) was evaluated. Cronbach's alphas were calculated for the subscales of the Perceived Parental Child-Rearing Attitudes Scale (PPCA) that measure parental emphasis of others' opinions (OS), shame tactics (SS), social isolation of (IS), and the tendency to join family activities (FS). Thereafter, the measures were examined for group and gender differences using both multivariate and univariate tests, as summarized in Table 4. A two (gender) by three (group) factorial MANOVA was conducted followed by a series of univariate ANOVAs and Duncan's multiple range tests where appropriate. Other tests were conducted on parents' history of social anxiety. Chi-square tests were conducted to examine the proportion of fathers and mothers who were reported to be anxious and shy. Moreover, parents' anxiety scores were analyzed with one-way ANOVAs.

**Internal consistency reliability estimates.** The PPCA subscales demonstrated acceptable internal consistency with Cronbach's alphas of 0.64 for OS, 0.84 for SS, 0.59 for IS, 0.69 for FS.

**Parental restrictiveness.** The MANOVA on measures of early parenting behavior and attitudes revealed a significant main effect of group ($F(8,332) = 5.34, p < 0.0001$), but no significant differences for gender ($F(4,165) = 0.85, ns$) or the interaction ($F(8,332) = 1.28, ns$). The univariate ANOVAs demonstrated significant group differences on all four subscales (OS, SS, IS, and FS). Duncan's tests showed that parents of American volunteers received lower ratings on three subscales (OS, SS, and IS) than the parents of Chinese/Chinese American subjects or the social phobics, who
Table 4
Means and Standard Deviations for Measures of Early Parenting and Parental History of Anxiety for the Three Samples, and Univariate F Values for the Group and Gender Effects

<table>
<thead>
<tr>
<th>Measure</th>
<th>Chinese/Chinese Americans (n = 60)</th>
<th>Social Phobics (n = 67)</th>
<th>American Volunteers (n = 50)</th>
<th>Group Effect</th>
<th>Gender Effect</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
<td>SD</td>
<td>M</td>
</tr>
<tr>
<td>PPCA</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- others’ opinions</td>
<td>12.90\textsuperscript{a}</td>
<td>3.75</td>
<td>12.64\textsuperscript{a}</td>
<td>4.35</td>
<td>10.11\textsuperscript{b}</td>
</tr>
<tr>
<td>- shame</td>
<td>10.98\textsuperscript{a}</td>
<td>4.36</td>
<td>10.45\textsuperscript{a}</td>
<td>4.61</td>
<td>7.91\textsuperscript{b}</td>
</tr>
<tr>
<td>- social isolation</td>
<td>12.68\textsuperscript{a}</td>
<td>4.03</td>
<td>12.55\textsuperscript{a}</td>
<td>4.26</td>
<td>10.38\textsuperscript{b}</td>
</tr>
<tr>
<td>- family sociability</td>
<td>13.00\textsuperscript{a}</td>
<td>3.79</td>
<td>10.79\textsuperscript{b}</td>
<td>3.94</td>
<td>12.51\textsuperscript{a}</td>
</tr>
<tr>
<td>PHSA</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- mothers’ anxiety</td>
<td>11.38</td>
<td>7.15</td>
<td>10.69</td>
<td>7.65</td>
<td>9.38</td>
</tr>
<tr>
<td>- fathers’ anxiety</td>
<td>7.67</td>
<td>6.82</td>
<td>7.94</td>
<td>7.15</td>
<td>6.98</td>
</tr>
</tbody>
</table>

Note: PPCA = Perceived Parental Child-Rearing Attitudes Scale; PHSA = Parental History of Social Anxiety Questionnaire. ***p < 0.0001; **p < 0.005. Means sharing superscripts are not significantly different, using Duncan’s multiple range tests (p < 0.01). Total sample size varies from 147 to 177 due to missing data. Dashes indicated that the effect was not measured.
did not differ from each other. On the FS subscale, parents of American and Chinese/Chinese American subjects were rated similarly, while the mean score for the parents of social phobics was significantly lower. In sum, Chinese/Chinese American parents, like the parents of social phobics, tended to emphasize others' opinions, use shame tactics, and isolate their children from social activities. However, like the American volunteers, Chinese/Chinese American parents and their children often socialized with other families.

**Parental history of social anxiety.** Measures of parental history of anxiety did not show differences among the three samples. The first index of parental anxiety was the number of fathers and mothers who were reportedly anxious and shy on an occasional basis or more often. The chi-square statistic revealed no differences in the ratio of anxious and shy mothers for the three groups ($\chi^2(2, N=174) = 4.44, ns$). Ratios of anxious and shy fathers reported by the three groups of subjects were similar ($\chi^2(2, N=170) = 1.71, ns$). Furthermore, subjects' ratings of parents' anxiety in the four social situations were compared, and univariate ANOVAs indicated no significant differences in mothers' anxiety ($F(2,172) = 1.13, ns$) or fathers' anxiety ($F(2,167) = 0.22, ns$). Overall, as reported by their children, parents of the three groups of subjects did not differ in their anxiety.

**Association of Social Anxiety and Early Parenting Style across the Three Samples**

The third hypothesis involved the comparison of how early parenting styles were associated with social anxiety among Chinese/Chinese Americans, social phobics, and American normal controls. Instead of comparing three correlation matrices that showed correlation coefficients among the seven social anxiety measures and four parental behavior measures, the underlying dimensions of the two sets of measures were determined by factor analyses, and indices of social anxiety and parental attitudes were developed. Correlation coefficients between these summative scores were then obtained for three samples. To determine whether the association between social anxiety and parenting style differed between groups, tests for the significance of differences between independent correlations were then conducted.
Table 5  
Factor Loadings of Social Anxiety and Early Parenting Measures

<table>
<thead>
<tr>
<th>Scale</th>
<th>Factor Loading</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Social Anxiety Measures</strong></td>
<td></td>
</tr>
<tr>
<td>Factor: Social Anxiety</td>
<td></td>
</tr>
<tr>
<td>SIAS</td>
<td>0.93</td>
</tr>
<tr>
<td>SADS</td>
<td>0.87</td>
</tr>
<tr>
<td>FNE</td>
<td>0.87</td>
</tr>
<tr>
<td>SPS</td>
<td>0.81</td>
</tr>
<tr>
<td>FQ-SP</td>
<td>0.81</td>
</tr>
<tr>
<td>SHY</td>
<td>0.79</td>
</tr>
<tr>
<td>PSC</td>
<td>0.55</td>
</tr>
<tr>
<td><strong>Early Parenting Measures</strong></td>
<td></td>
</tr>
<tr>
<td>Factor 1: Psychological Control</td>
<td></td>
</tr>
<tr>
<td>SS</td>
<td>0.88</td>
</tr>
<tr>
<td>OS</td>
<td>0.88</td>
</tr>
<tr>
<td>Factor 2: Behavioral Control</td>
<td></td>
</tr>
<tr>
<td>FS</td>
<td>0.93</td>
</tr>
<tr>
<td>IS</td>
<td>0.85</td>
</tr>
</tbody>
</table>

Note: SIAS = Social Interaction Anxiety Scale; SADS = Social Avoidance & Distress Scale; FNE = Fear of Negative Evaluation Scale; SPS = Social Phobia Scale; FQ-SP = Fear Questionnaire - Social Phobic Subscale; SHY = Self-Rating of Shyness; PSC = Public Self-Consciousness Scale; SS = Shame Subscale; OS = Others' Opinions Subscale; FS = Family Sociability Subscale (all items reversed); IS = Social Isolation Subscale. Factor loadings of early parenting measures were yielded after varimax rotation.
Factor analyses of two sets of measures. Underlying dimensions of the social anxiety measures and early parenting measures were revealed by principal components analysis with varimax rotation, and the factor loadings from each factor analysis are shown in Table 5. From the analysis of measures of social anxiety (SADS, FNE, SIAS, SPS, FQ-SP, PSC, and SHY), a single factor with an eigenvalue of 4.63 was extracted. The total variance explained by this factor was 66.1%. Factor analysis of the four subscales of parental child-rearing attitudes yielded a two factor solution, accounting for 81.5% of the total variance. The first factor pertained to psychological control (over-emphasis of others' opinions and shame tactics). It accounted for 50.1% of the total variance (eigenvalue = 2.0). The second factor, accounting for 31.4% of the total variance (eigenvalue = 1.25), was represented by subscales pertaining to behavioral control (social isolation of children and lack of family sociability). On the basis of these findings, three summative scores were calculated, using unit weighting of items with significant loadings - a social anxiety score, a psychological control score, and a behavioral control score.

Correlational analyses. Correlation coefficients between the social anxiety score and the two control scores were calculated for each sample. Table 6 shows these coefficients in three correlational matrices. The correlation between the social anxiety score and the psychological control score for each sample was significant. However, the correlation coefficients were significantly greater in both American groups. The correlation between the two scores for the Chinese/Chinese American group was $r = 0.32$ ($p < 0.01$), for the social phobic group was $r = 0.64$ ($p < 0.0001$), and for the American volunteer group was $r = 0.68$ ($p < 0.0001$). Tests for the significance of differences between independent correlations (between the social anxiety and psychological control scores) revealed that the correlation for the social phobics was significantly larger than it was for the Chinese/Chinese Americans ($z = 1.96$, $p < 0.05$). American volunteers also showed a significantly larger correlation between these two scores than the Chinese/Chinese Americans ($z = 2.0$, $p < 0.01$). These correlations for the American and social phobic groups did not differ ($z = 0.26$, ns). In contrast, the social anxiety score was not significantly correlated with behavioral control score in any sample.
Table 6
Correlations of Social Anxiety Score and Psychological and Behavioral Control Scores for Three Samples

<table>
<thead>
<tr>
<th>Variable</th>
<th>Chinese/Chinese Americans (n = 60)</th>
<th>Social Phobics (n = 67)&lt;sup&gt;a&lt;/sup&gt;</th>
<th>American Volunteers (n = 50)&lt;sup&gt;b&lt;/sup&gt;</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>1 2 3</td>
<td>1 2 3</td>
<td>1 2 3</td>
</tr>
<tr>
<td>1. Social Anxiety Score</td>
<td>1.00 0.32* 0.13</td>
<td>1.00 0.64** 0.24</td>
<td>1.00 0.68** 0.37</td>
</tr>
<tr>
<td>2. Psychological Control Score</td>
<td>1.00 0.21</td>
<td>1.00 0.22</td>
<td>1.00 0.17</td>
</tr>
<tr>
<td>3. Behavioral Control Score</td>
<td>1.00</td>
<td>1.00</td>
<td>1.00</td>
</tr>
</tbody>
</table>

Note: Due to missing data on some measures of social anxiety, <sup>a</sup>n = 33, <sup>b</sup>n = 27 in tests for significance of difference between independent correlations. *p < 0.01; **p < 0.0001.
Discussion

Summary of Results and Acknowledgement of A Limitation

The present study investigated a number of hypotheses about social anxiety, early parenting experiences, and the association between the two among Chinese/Chinese Americans, American volunteers, and Americans seeking treatment for social phobia. Previous research has documented a relationship between social anxiety and the perception of restrictive child-rearing practices by subjects' parents. In the current study, it was hypothesized that this pattern would be demonstrated, but only in the comparison of social phobics and nonanxious Americans. Arguments raised earlier in this document suggest that Chinese parents utilize a formal, distant and restrictive style, but that this style serves a far different purpose in Chinese culture. Therefore, it was expected that Chinese subjects would report a history of restrictive parenting but that they would not report excessive social anxiety. It was further hypothesized that a strong association between social anxiety and a history of restrictive parenting would not emerge in the Chinese/Chinese American sample. In general, these hypotheses were strongly supported.

Hypothesis I: Chinese/Chinese American volunteers and social phobic patients would both perceive their parents as being restrictive, more so than the nonanxious American volunteers.

This hypothesis was partially supported in that Chinese/Chinese Americans rated their parents as significantly more restrictive than did the American volunteers and as restrictive as did the social phobic patients on three of the four dimensions. Chinese/Chinese Americans and social phobics reported that their parents overemphasized the opinions of others, used shame as a method of discipline and isolated them from social activities. These restrictive dimensions were not perceived as characteristic of the parents of nonanxious Americans. However, Chinese/Chinese Americans and American controls rated their parents similarly on family sociability. In fact, Chinese/Chinese American parents joined family activities significantly more often than social phobics' parents and as often as parents of American volunteers. In terms of parental anxiety, the
three groups did not differ in the frequency with which they described their parents as anxious and shy or the degree of their parents' anxiety.

**Hypothesis II:** Chinese/Chinese American and American subjects would both report similar degree of social anxiety, significantly lower than the social phobic patients.

This hypothesis was supported. Nonanxious American volunteers and Chinese/Chinese American subjects presented similar degrees of social evaluative fears, significantly lower than that of social phobic patients. In effect, social phobics were distinguished from two other groups on every measure of social anxiety included in the study. American and Chinese/Chinese American subjects did not differ from each other in self-reported social anxiety. The only difference between Chinese/Chinese Americans and American controls appeared on the measures of history of dating behavior. Chinese/Chinese Americans reported significantly fewer dating partners and fewer dates during adolescence than both nonanxious and social phobic Americans while the latter two groups were not different from each other.

**Hypothesis III:** The pattern of association between perceived restrictive child-rearing characteristics of parents and social anxiety of subjects would be positive for both American and social phobic groups, whereas this association would be less prominent among Chinese/Chinese Americans.

This hypothesis was partially supported in that the association between social anxiety and certain characteristics of parental restriction (i.e., psychological control as defined by emphasis of others' opinions and use of shame tactics) was highly positive in both American groups. American volunteers reported less psychological restriction by their parents and also reported lesser degrees of social anxiety. American social phobics, who recalled that their parents were high on the index of psychological control, also reported greater anxiety. For Chinese/Chinese Americans, despite their experience of psychological control comparable to that of social phobics, their social anxiety level was as low as nonanxious Americans' and significantly lower than social phobics'. The association between parental psychological control and social anxiety was also positive for Chinese/Chinese Americans.
Americans, yet the magnitude of this association was significantly less than it was for two American groups. In other words, Chinese/Chinese American persons who reported the experience of psychological restriction by their parents were less likely to be socially anxious than American persons with similar experiences. However, the association between social anxiety and parental characteristics of behavioral control (i.e., social isolation and low family sociability) was not significant for any group.

Despite overall encouraging results, the present study is limited by the strategy of measurement. Retrospective self-report of parental styles may be influenced by reconstructive and selective memory and current biases related to mood state or social desirability. In this regard, social phobics may be more likely to remember being mistreated as a self-serving way of explaining their disability. The potential contribution of this reporting style and reporting bias specific to the patient group need to be assessed.

**Parental Restrictiveness**

Social phobics experienced a higher level of parental control during their pre-adult years, more so than nonanxious Americans. In this study, social phobics' parents were perceived to exhibit characteristics similar to those described in previous studies (Arrindell et al., 1983; Bruch & Heimberg, 1991; Bruch et al., 1989; Parker, 1979). In particular, social phobics perceived their parents as overemphasizing the opinions of others, prepared to use shame as a method to discipline, restraining them from joining social activities, and deemphasizing family sociability. Parents of nonanxious American were perceived to be significantly less restrictive than parents of social phobic patients on all counts.

For the first time, Chinese/Chinese Americans were evaluated with measures of perceived child-rearing characteristics in a cross-cultural comparative study. The results showed a high level of perceived restrictiveness among the parents of Chinese/Chinese Americans, comparable to that of social phobics. Parents of the Chinese/Chinese American group tended to overemphasize the opinions of others, use shame tactics to reprimand the child, and discourage the child from
socializing with others. However, they were as likely as the parents of nonanxious Americans to participate in social activities with other families. This finding supports the view of many cross-cultural studies that Chinese or Chinese American parents are more controlling than their American counterparts (Chiu, 1987; Hsu, 1981; Kriger & Kroses, 1972; Lin & Fu, 1990). The emphasis on others' opinions and shame tactics are justified by the social orientation of Chinese culture. Yang (1981) contends that Chinese persons' concern about the opinions of others reflects their general tendency to act in accordance with external expectations or social norms in order to protect the social self and function as an integral part of the social network. Group shaming as a punishment for misbehavior is used in Chinese child rearing because it helps to internalize moral values (Wilson, 1970) and to preserve social relationships (Wolf, 1970). By rebuking a child and making this known to the friends or relatives involved, the parents assure the other parties that they do not allow such inappropriate behavior to disrupt their good relationships. By the same token, the higher score on family sociability among Chinese subjects may be a reflection of their strong sense of social orientation and the need for maintenance of familial and social harmony. Socializing with other families (especially ceremonies or festive celebration, such as birthdays of family's senior members) shows respect for the other families involved. It also promotes interdependence (cohesion) within the family, which is consistent with Confucian principles (Lin & Fu, 1990).

While Confucian traditions may underlie restrictive parenting among Chinese persons, what accounts for the findings of higher parental restrictiveness among social phobics? This finding has been reported in several studies (e.g., Arrindell et al., 1989) but the reasons have yet to be fully explicated. One plausible explanation is that the parents of social phobics may themselves be anxious. According to Buss (1980; 1986), the presence of social anxiety in one or both parents might limit the tendency for the family unit to socialize with others, thereby reducing opportunities for the child to learn how to interact effectively. However, the present findings do not support this contention and disagree with existing literature. Unlike social phobics' parents studied by Bruch et al. (1989), parents of the present patient group were not perceived to be more avoidant in social
situations than parents of the other comparison groups. In other words, social phobics subjects who
reported restrictive child-rearing by their parents did not perceive their parents to be anxious.
Therefore, parental anxiety cannot explain differences in parental restrictiveness or their children’s
anxiety in the current study.

Despite the lack of significance in the present analysis, the relationship of parental anxiety
to social phobics’ anxiety bears closer examination. Social phobic patients in the study by Bruch et
al. (1989) perceived their mothers as socially anxious and avoidant, more so than the agoraphobic
patients’ reports about their mothers, and similar findings were reported by Bruch and Heimberg
(1991) in comparison to normal subjects, so the lack of significant findings in the present study
cannot be taken as the last word. Further research in this area might examine whether anxiety
among parents promotes social anxiety or social phobia in children by promoting restrictive
parenting (a hypothesis not examined in the current study). In other words, are anxious parents
more likely to be restrictive parents since this might serve to keep their own anxiety at bay? Would
the combination of parental anxiety and parental restrictiveness be more likely to contribute to the
development of socially anxious children? If so, it might also be worthwhile to consider if this
connection is stronger for anxious mothers than anxious fathers since mothers may be more likely to
spend more time with children during their developmental years than fathers.

An issue in the evaluation of anxiety in the parents of social phobics concerns the diagnosis
of social phobic subtype. DSM-III-R (American Psychiatric Association, 1987) distinguishes
between generalized social phobia in which the person fears most social situations and other
circumscribed (or limited) social phobias. It is possible that the relationship of parental anxiety and
social phobia (or the connection between parental anxiety, restrictive parenting, and social phobia)
is a function of social phobic subtype. This notion was examined by Bruch and Heimberg (1991).
Maternal anxiety was perceived to be higher among generalized social phobics than among
circumscribed social phobics or normals. Both types of social phobics rated their parents as more
psychologically controlling than normal subjects. However, generalized social phobics attributed
greater behavioral control to their parents than circumscribed social phobics and normals. The relationship of subtype to these variables requires further examination.

Future studies might also assess other variables that are potentially related to parental restrictiveness. Factors that are related to parental psychological control deserve special attention since the present study revealed a significant association between social anxiety and parental psychological control. However, the examination of psychological control was limited in this study since only two relevant measures (others' opinions and shame subscales) were included and the notion of psychological versus behavioral control was derived in the course of data analysis. Other parental variables of interest include the setting of unrealistically high expectations or unreachable standards or inconsistent rules. In addition, parental rejection was not addressed in this study although the parenting literature (e.g., Gerlsma et al., 1990; Herbert, 1986) has implied its possible contribution to the development of social anxiety.

**Anxiety in Social Situations**

Chinese/Chinese American subjects were similar to the American controls in their response to the social anxiety measures and considerably less anxious than the social phobic subjects. Thus, the widely-held view of greater anxiety among Chinese persons (Chou & Mi, 1937; Sue & Kirk, 1972) was not upheld. According to this view, Chinese persons are more anxious and neurotic than Americans or Europeans (Yang, 1986). However, as reviewed earlier, the research on which this position rests has serious conceptual and methodological flaws.

In an effort to avoid the biases of past research, the present study used measures that allowed direct comparison of behavior and anxiety of both Chinese and American subjects in specific situations. Moreover, the disadvantage of material difference was minimal because of the dual-cultural experience of the majority of the Chinese/Chinese American subjects. The genuine Chinese influence was reflected in their demographic characteristics (e.g., birthplace, language and number of years spent in Chinese-speaking countries) and those of their parents (e.g., birthplace, language and education), and certainly their experience of parental restriction as described in the preceding
section. The Western influence on the other hand, was reflected in the number of years they spent in English-speaking countries (M = 14.6 years) and the large portion of education completed in the United States (88.3%). Thus, there was little doubt that they understood the social situations and material culture involved in the questionnaires. The findings revealed that Chinese/Chinese American persons were quite similar to American controls in their anxiety in social situations that involved interaction and scrutiny by others. As a result, the hypothesis that Chinese persons are more anxious than American normal adults is not supported.

While Chinese/Chinese American persons did not differ from American controls on measures of social anxiety, they did report few dating partners and fewer dates than American controls. Surprisingly they also reported less dating activity than did the social phobics. Moreover, this pattern of infrequent dating activity was present in each of the three age periods (between age 14 and 15, 15 and 18, 18 and 21). It is unlikely that this infrequent dating activity was related to anxiety, since this explanation is inconsistent with the findings for social anxiety. Although a lack of dating activity has been implicated as a cause of social anxiety in later life (Buss, 1980; 1986), Chinese/Chinese Americans turned out to be no different from the American controls and much less anxious than American social phobic patients. Therefore, the dating history does not objectively reflect the degree of anxiety during adolescence of Chinese/Chinese American persons. Anxiety in later life may be attenuated because Chinese/Chinese American families are actively related to other families (high family sociability) and can provide ample opportunities for their youngsters to practice social skills in that context. On the other hand, Chinese/Chinese American subjects reported that their parents isolated them from social activities (including dating activities) possibly reflecting the general concern of Chinese/Chinese parents on how their children behave in their absence. This concern is particularly related to the high expectation of Chinese/Chinese American parents for children's academic achievement (Lin & Fu, 1991). Chinese/Chinese American teenagers may spend more time studying than dating with the result being greater academic achievement rather than greater social anxiety.
The gender differences on three anxiety measures were not expected but not inconsistent with previous findings. Female subjects scored higher than male subjects in the present study on the SIAS, SPS, and FQ-SP. Previous studies on gender differences pointed to the fact that males were more highly represented in social phobic samples (Bourdon et al., 1988). However, when differences were found on social anxiety measures, women presented greater fear than men (Eskin, Orsillo, Heimberg, Holt, & Liebowitz, 1991). The SIAS, SPS and FQ-SP were also administered by Eskin and colleagues who reported significantly higher scores for women on the FQ-SP and a trend for higher scores among women on the SIAS and SPS. Unfortunately, Eskin et al.'s study did not include a normal control group. Also, it is uncertain whether females in general would show higher anxiety or if this difference would emerge only on certain anxiety measures. It is possible that women, patient or non-patients, of various cultural backgrounds are inclined/able/feel compelled to reveal their fears, moreso than men. This possibility awaits future investigation.

Pattern of Association between Social Anxiety and Parental Restrictiveness

The present study is the first to examine the association between social anxiety and restrictive parenting style from a multi-cultural perspective. Overall, the relationship between social anxiety and the psychological dimension of parental restriction was positive. The findings corroborate aspects of Buss' (1980; 1986) theory in that socially anxious persons were more likely to report parents who over-emphasized the importance of others' opinions regarding appropriate behavior and appearance and who used shame tactics as a method of control. However, Buss' formulations about the role of isolation of the child and low family sociability were not validated by the present study. The examination of relationships between social anxiety and perceived parental behavioral control yielded no significant findings.

Further examination of the patterns of association within the different subject groups revealed interesting results. The strength of association between social anxiety and perceived psychological control was virtually identical for the American volunteers ($\tau = 0.68$) and social phobic patients ($\tau = 0.64$). On the other hand, the strength of association was significantly weaker for the
Chinese/Chinese Americans ($r = 0.32$), accounting for only one-fourth as much variance as among the American groups. The psychological dimension of parental control was positively related to social anxiety, but the magnitude differed as a function of culture. In a Western society like the United States, parents who exaggerate the importance of other's opinions and use shaming methods to discipline their children will likely foster development of social anxiety on the part of the child. However, the presence of these parental styles does not strongly predispose Chinese/Chinese Americans to become socially anxious later in life.

One may argue that difference in the strength of association lies in the bias of the Chinese sample. While the Chinese/Chinese American sample did not differ from the two American samples in terms of gender, mean age, or household income, they reported a higher level of education, a more stable family structure, and a lower proportion of full-time employment. These socio-demographic differences may attenuate social anxiety in Chinese/Chinese American subjects. For example, higher levels of education may introduce more exposure to other points of view beyond one's own culture and upbringing. Also, international travel provides experiences for Chinese persons to overcome obstacles, gain confidence, and hence reduce anxiety. However, there are reasons to believe that these family and social characteristics of the Chinese sample did not contribute to the differential association observed in the present study.

First, the lower proportion of full-time employment among the Chinese subjects is mainly a result of the larger number of students in the sample. Second, while over 81% of Chinese/Chinese American subjects had completed college, as compared to less than 60% of the social phobics and 42% of the nonanxious Americans, the higher proportion of Chinese subjects simply represents the higher educational achievement of the Chinese population in the United States (Gardner et al., 1985). There is no evidence that being in school or having higher education would attenuate the impact of parental psychological control on social anxiety. On the contrary, emphasis on education and longer periods of schooling are often cited as correlates of Chinese parental control of their children (Law, 1979; Li, 1974; Lin & Fu, 1990). Therefore, one should expect a stronger, not weaker,
association among the Chinese subjects. Third, the relative stability of family found in the Chinese sample is also evident at the national level (Gardner et al., 1985; p.21). It is plausible that high family stability and low social anxiety are both influenced by exogenous factor(s) that have not been examined by students of social phobia.

In sum, the social and demographic profile of the Chinese sample correspond closely to the Chinese population in the United States. Thus findings about the Chinese subjects in this study can be generalized to the larger population. Even though social and demographic differences exist between the Chinese and the American subjects, there is no good reason to believe they contribute to the differential associations observed in the present study.

On the other hand, the varying impact of parental psychological control on social anxiety in Chinese and American cultures may be a function of collectivism versus individualism. The characteristics of collectivism were first proposed by Hofstede (1983) as an account of ongoing influence of Confucian values in overseas Chinese communities. Nevertheless, collectivism is also relevant to the discussion of the differential effects of psychological control. The American (or Western) culture is characterized by individualism which emphasizes the importance of self. A person’s achievement and function is often defined by how well he or she performs. Negative evaluations in social situations are implications of poor performance, and inability to cope with them is deemed pathological. Collectivism, on the other hand, is characteristic in Chinese cultural groups and emphasizes the importance of the group. A person’s interest should take account of the group’s interest, and personal achievement that benefits group interests is praised. Negative evaluations are deemed essential for individual improvement and improvement of the group of which the person is a part. Given the constructive function of social evaluation and the support of the group, the person under scrutiny would focus on how to improve himself or herself for the benefit of the group, rather than feeling defeated and incapable. In that sense, negative evaluative remarks may be less anxiety-provoking for the individual in a collectivist society than in an individualist society. Chinese/Chinese Americans in the present study spent the earlier period of their lives in Chinese-speaking,
predominantly collectivist countries. Consistent with Hofstede's findings from a range of Chinese cultural groups, the influence of Chinese collectivist concepts are persistent and have survived the impact of American individualism. Future research may provide evidence by evaluating subjects' focus on the group interest versus self interest in social evaluative situations and the association with parental restrictiveness in two cultures.

In view of how perceived parental restrictiveness is differentially related to social anxiety in two cultures, future studies should be more sensitive to the cultural interpretation of these relationships. In fact, any attempt to theorize about the association of a particular parenting style with child behavior should consider the cultural interpretation of this style and the social structure that conditions interpersonal behavior. For example, the opinions of others in Chinese culture may serve as important indicators of how to act appropriately (Yang, 1981a). Without them, a Chinese person may be fearful of acting inappropriately in social gatherings. It is not surprising that Chinese parents place great value on teaching their children to take note of others' opinions. On the contrary, parents in the Western culture may often teach their children to think independently. When excessive emphasis is placed on others' opinions, it contradicts an important cultural theme. The child may become preoccupied with social remarks which may lead to generalized fear of negative evaluation (Allaman et al., 1972; Buss, 1980). Despite the difference in emphasis, they are deemed appropriate in the cultural context wherein the parent-child relations are conditioned.

**Implications for the Etiology of Social Phobia**

Using a multi-cultural approach, the present study attempted to test the relevance of Buss' (1980; 1986) formulations regarding certain aspects of perceived restrictive parenting and their relationship to social anxiety. Buss suggested that (1) sensitivity to social evaluation is fostered early in life by parents who emphasize the opinions of others; (2) coping skills in social situations may be limited by social isolation and a lack of emphasis on family sociability; and (3) social-evaluative concerns may be exacerbated during adolescence when the child fails to develop additional skills to cope with increasing exposure to public scrutiny. As a result, some individuals show excessive fears
of social evaluative situations during adulthood. The development of social anxiety, however, is not inevitable. Buss pointed out that sensitivity to social evaluation may diminish during the adolescent years. Given the opportunity to acquire necessary coping skills, the individual may learn to interact effectively and dispel these social fears, even in novel situations. In sum, Buss' theory has provided the basis to identify child-rearing characteristics that may nurture the development of social phobia.

Western research (e.g., Bruch et al., 1989) has demonstrated the relevance of Buss' theory for the development of generalized social phobia among Americans. In the present study, parents of Chinese/Chinese American subjects reportedly tended to emphasize others' opinions and isolate their children from social activities, a pattern which western research suggests should nurture a high sensitivity to social evaluation among children. Despite the pattern, however, Chinese/Chinese American subjects showed a level of social anxiety that was significantly lower than that of the social phobics and similar to that of the American controls.

If the hypothesized relationship between childhood sensitivity and adult anxiety holds, why does such sensitivity persist and develop into phobia among social phobic patients, but not among Chinese/Chinese American persons? Again, Buss' theory is informative regarding the solution to this puzzle - development of social anxiety is not inevitable despite childhood sensitivity, and coping skills and opportunities to acquire such skills may be decisive factors. The key may lie in the emphasis on family sociability among Chinese/Chinese Americans. Among the three parental characteristics mentioned in Buss' formulation, both emphasis on others' opinions and social isolation were reported by the American social phobics and Chinese/Chinese American subjects. Family sociability, the other dimension of parental behavioral control, was characteristic among parents of the Chinese and the American groups but not among parents of social phobics. Like the American controls, Chinese/Chinese American subjects and their parents were often involved in social activities with other families. High family sociability is consistent with the extreme value that Chinese culture places on the interest of the group to which the individual belongs. Attending an event with other families is an act of respect to the host family as well as other families. Older
members of the family also "coach" the younger ones in social skills that are appropriate in a collectivist society. These kinds of activities provide exposure to social evaluation, and therefore strengthen one's ability to cope with public scrutiny. By frequent participation in social gatherings with other families (together with close supervision of parents and other relatives), Chinese/Chinese American persons may obtain the necessary social skills which would otherwise be available in a variety of social activities in a western society. In other words, close parental supervision in group-based (family oriented) activities may compensate for the lack of other social activities and thus lessen social evaluative concerns in a collectivist environment. Sociability among Chinese families may also reflect Chinese parents' preference and/or approval of family activities over unsupervised individual activities, and thus explain the reportedly high social isolation prescribed by Chinese/Chinese American parents in this study.

Future research can be designed to examine additional aspects of psychological and behavioral control among parents of Chinese/Chinese American controls and social phobics, as well as social phobics in western societies. Family sociability deserves priority, given its potential inoculating effect on social anxiety in Chinese culture. As for parental psychological control, there is also a need for research on additional aspects of parental behavior, such as the setting of unrealistically high expectations, unreachable standards, or inconsistent rules. Regardless of the anxiety and parental variables awaiting examination, it is necessary for future research to examine the relationships of parental control and social anxiety as a function of cultural conditions.
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Appendix A:

Background Information .................................................................71
BACKGROUND INFORMATION

Today's Date: ____________________________

Information About Yourself

Name: ____________________________

Phone: home ____________________________ work ____________________________

Age: ________ Sex: (check one) female_______ male_______

Ethnicity/Race: a white____ black____ hispanic____ American Indian____

Asian or Pacific Islander____

Birthplace: b (check one) China________ Hong Kong_______ Taiwan_______

United States____ Other (specify)____________________________

If born outside the United States, in what year did you arrive in the United States? b ________

Number of years you have spent in: b

Chinese-speaking countries__________ English-speaking countries__________

Other (specify language and duration)__________________________

Primary Language:a English____ Spanish____ Other (specify)________________

Primary Language: b

(a) spoken: Mandarin____ Cantonese____ English____ Other (specify)________________

(b) written: Chinese____ English____ Other (specify)__________________________
Information About Yourself (continued)

Religion: (check one):

Buddhism/Taoism_____ Protestant/Catholic_____ Jewish_____ Other_____

Marital Status: (check one) Married/Living with someone_____

Single (never married)____ Divorced/Separated____ Widowed_____ 

Living Situation: (check all that apply)

I live alone____ I live with my spouse_______ I live with my parent(s)_____

I live with my girlfriend/boyfriend_____ Other (specify)_____________________

Yearly Household Income:___________________________

Employment: (check all that apply)

Employed full-time____ (specify job)_____________________________________

Employed part-time____ (specify job)_____________________________________

Homemaker____ Retired____ Student____ Armed Forces____

Unemployed____ (specify duration)_______________________________________

Highest Level of Education Completed: (check one)

Grade school____ Some high school____ High school diploma____

Some college____ College graduate____ Graduate school____

Other (specify)_____________________________________________________

Place Where Highest Level of Education Completed: (check one)

China_____ Hong Kong______ Taiwan____ United States____

Other (specify)_____________________________________________________

- continued -
### Information About Your Parent(s)

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<thead>
<tr>
<th><strong>Parents' Religion:</strong> (^b) (check one)</th>
<th><strong>Buddhism/Taoism</strong></th>
<th><strong>Protestant/Catholic</strong></th>
<th><strong>Other (specify)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Highest Level of Education Completed:</strong> (^b)</th>
<th><strong>Some grade school</strong></th>
<th><strong>Grade school</strong></th>
<th><strong>Some high school</strong></th>
<th><strong>High school diploma</strong></th>
<th><strong>Some college</strong></th>
<th><strong>College graduate</strong></th>
<th><strong>Graduate school</strong></th>
<th><strong>Other (specify)</strong></th>
</tr>
</thead>
<tbody>
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<td></td>
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</tr>
</tbody>
</table>

**Note:** a = Items that were not administered to Chinese/Chinese Americans; b = Items that were administered only to Chinese/Chinese Americans.
Appendix B:

Questionnaires

1. Fear Questionnaire - Social Phobia Subscale (FQ-SP) ..................................................76
2. Perceived Parental Child-Rearing Attitudes Scale (PPCA).............................................77
3. Parental History of Social Anxiety Questionnaire (PHSA).............................................79
4. Dating History Questionnaire (DHQ) ............................................................................81
5. Public Self-Consciousness Scale (PSC) ...........................................................................83
6. Self-Rating of Shyness (SHY).......................................................................................... 84
7. Fear of Negative Evaluation Scale (FNE) ........................................................................85
8. Social Avoidance and Distress Scale (SADS) .................................................................87
9. Social Phobia Scale (SPS).................................................................................................89
10. Social Interaction Anxiety Scale (SIAS) .........................................................................90
FQ-SP

**DIRECTIONS:** Choose a number from the scale below to show how much you would avoid each of the situations listed below because of fear or other unpleasant feeling. Then write the number you chose in the box opposite each situation.

<table>
<thead>
<tr>
<th>Score</th>
<th>Avoidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Would not avoid it</td>
</tr>
<tr>
<td>1</td>
<td>Slightly avoid it</td>
</tr>
<tr>
<td>2</td>
<td>Definitely avoid it</td>
</tr>
<tr>
<td>3</td>
<td>Markedly avoid it</td>
</tr>
<tr>
<td>4</td>
<td>Always avoid it</td>
</tr>
</tbody>
</table>

1. Eating or drinking with other people
2. Being watched or stared at
3. Talking to people in authority
4. Being criticized
5. Speaking or acting to an audience
PPCA

**DIRECTIONS:** Each of the statements below describes an attitude or style that parents might have when relating to their children. As you remember your mother and father during the time you lived at home, rate each statement in terms of how characteristic it is of their way of relating to you or raising you. After rating each item place a checkmark in the appropriate space to the right to indicate which parent, or in some cases if both parents, had this attitude. Of course, if you rated the attitude as not characteristic then you would not mark this part. Please be sure to answer all the items and base your ratings on the following scale:

<table>
<thead>
<tr>
<th></th>
<th>1 = not all characteristic</th>
<th>2 = a little characteristic</th>
<th>3 = somewhat characteristic</th>
<th>4 = definitely characteristic</th>
<th>5 = very characteristic</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Mother</th>
<th>Father</th>
<th>Both Parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. My parents seldom had other people over to the house</td>
<td>( )</td>
<td>( )</td>
<td>( )</td>
</tr>
<tr>
<td>7. Before going out as a family my parents often lectured me about what not to do so that other people wouldn't think I was foolish.</td>
<td>( )</td>
<td>( )</td>
<td>( )</td>
</tr>
<tr>
<td>8. If my parents thought that I was letting somebody down (friend, teacher, neighbor, etc.) they acted disappointed and would cast it up to me.</td>
<td>( )</td>
<td>( )</td>
<td>( )</td>
</tr>
<tr>
<td>9. Our family liked having parties.</td>
<td>( )</td>
<td>( )</td>
<td>( )</td>
</tr>
<tr>
<td>10. Often my parents seemed concerned that us kids never do anything that would bother other people.</td>
<td>( )</td>
<td>( )</td>
<td>( )</td>
</tr>
<tr>
<td>11. If I had trouble with other kids my age (e.g., bullied, excluded, etc.) my parents told me to avoid them and to find something to do on my own.</td>
<td>( )</td>
<td>( )</td>
<td>( )</td>
</tr>
<tr>
<td>12. I can remember saying or doing something foolish at a family gathering and having one of my parents ridicule me in front of other people.</td>
<td>( )</td>
<td>( )</td>
<td>( )</td>
</tr>
<tr>
<td>13. Whenever I made no attempt to overcome my fears about something that most young people can handle, my parents acted disappointed and would criticize me for acting that way.</td>
<td>( )</td>
<td>( )</td>
<td>( )</td>
</tr>
</tbody>
</table>

-continued-
1 = not all characteristic
2 = a little characteristic
3 = somewhat characteristic
4 = definitely characteristic
5 = very characteristic

14. Generally, my parents told me to think for myself. ( ) ( ) ( )
15. Socializing with other people often made my parents uncomfortable. ( ) ( ) ( )
16. If I did poorly in something at school (e.g., a class, athletic activity, play, etc.) my parents took it personally and acted like I shamed the family. ( ) ( ) ( )
17. My parents enjoyed taking the family to visit other people. ( ) ( ) ( )
18. Even when I got older my parents didn’t like me going out unless it was a special occasion. ( ) ( ) ( )
19. Seldom could I dress the way I wanted to because my parents worried that other people (e.g., relatives, neighbors, etc.) would say something. ( ) ( ) ( )
20. As a family, we had a large number of friends. ( ) ( ) ( )
21. Generally, my parents encouraged me to meet new people, and they enjoyed meeting my friends. ( ) ( ) ( )
22. If I acted afraid to talk to somebody (e.g., teacher, neighbor, etc.) my parents acted disappointed and would criticize me for acting unfriendly. ( ) ( ) ( )
23. One or both of my parents seemed to want to isolate the family from other people. ( ) ( ) ( )
24. My parents placed importance on how it would look to other people if I didn’t do well in school. ( ) ( ) ( )
PHSA

DIRECTIONS: Answer the following questions about your parents based on your own perceptions. Be sure to note in the first part whether you were raised by your natural parents or by someone else. If you were raised by someone else, please indicate by whom and then complete the remaining items.

25. I was raised by: (Check one of the following)
   ___ both biological parents
   ___ my biological mother
   ___ my biological father
   ___ stepparent and biological parent
   ___ someone else; indicate ____________________

Mother's behavior: (If raised by her or similar person)

26. I believe that my mother: (check one)
   ___ has always been a shy person.
   ___ was shy in the past, but is not shy now.
   ___ was never a shy person.

27. I believe that my mother feels nervous and anxious: (check one)
   ___ most of the time
   ___ quite often
   ___ sometimes
   ___ occasionally
   ___ very seldom

Using the scale below, choose a number that best indicates how much you think your mother would avoid each of the situations listed below because of fear or other unpleasant feelings. Then write the number you chose in the box opposite each situation.

<table>
<thead>
<tr>
<th>Would not avoid it</th>
<th>Slightly avoid it</th>
<th>Definitely feel fearful</th>
<th>Markedly avoid it</th>
<th>Always if possible</th>
</tr>
</thead>
<tbody>
<tr>
<td>0----------1-------2--------3--------4--------5--------6--------7--------8</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

28. Talking to people in authority
29. Speaking to an audience
30. Being watched while doing something (e.g., signing a check)
31. Being criticized
   - continued -
Father’s behavior: (If raised by him or similar person)

32. I believe that my father: (check one)
   ___ has always been a shy person.
   ___ was shy in the past, but is not shy now.
   ___ was never a shy person.

33. I believe that my father feels nervous and anxious: (check one)
   ___ most of the time
   ___ quite often
   ___ sometimes
   ___ occasionally
   ___ very seldom

Using the scale below, choose a number that best indicates how much you think your father would avoid each of the situations listed below because of fear or other unpleasant feelings. Then write the number you chose in the box opposite each situation.

<table>
<thead>
<tr>
<th>Would not avoid it</th>
<th>Slightly avoid it</th>
<th>Definitely avoid it</th>
<th>Markedly avoid it</th>
<th>Avoid it always if possible</th>
</tr>
</thead>
<tbody>
<tr>
<td>or feel fearful</td>
<td>and try to avoid it</td>
<td>feel fearful</td>
<td>avoid it</td>
<td></td>
</tr>
</tbody>
</table>

34. Talking to people in authority

35. Speaking to an audience

36. Being watched while doing something (e.g., signing a check)

37. Being criticized
DIRECTIONS: Read and answer all of the questions. We realize it may be hard to remember certain things but try to give us your best estimate.

38. How many different boys/girls did you date by the end of 9th grade (age 14 or 15)?

   ___ none
   ___ one person
   ___ two people
   ___ three or four people
   ___ five or more

39. What was the total number of dates you had by the end of 9th grade (age 14 or 15)?

   ___ none
   ___ one
   ___ 2 to 5 dates
   ___ 6 to 10 dates
   ___ 11 or more dates

40. How many different boys/girls did you date between the 9th grade (age 14 or 15) and the end of 12th grade (age 17 or 18), or your senior year in high school?

   ___ none
   ___ one person
   ___ two people
   ___ three or four people
   ___ five or more

41. What was the approximate total number of dates you had between the 9th grade (age 14 or 15) and the end of 12th grade (age 17 or 18)?

   ___ none
   ___ one
   ___ 2 to 5 dates
   ___ 6 to 10 dates
   ___ 11 or more dates

- continued -
42. From the time you left high school (age 17 or 18) until the time that you reached age 21, how many different persons did you date?

___ none
___ one person
___ two people
___ three or four people
___ five or more

43. What was the approximate total number of dates you had between the ages of 18 and 21?

___ none
___ one
___ 2 to 5 dates
___ 6 to 10 dates
___ 11 or more dates
PSC

DIRECTIONS: Read of the following statements about how you think and feel about yourself. With the help of the following scale, mark the degree to which the statement describes you on the green answer sheet:

A = very uncharacteristic
B = a little characteristic
C = somewhat characteristic
D = characteristic
E = very characteristic

44. I'm concerned about my style of doing things.
45. I care a lot about how I present myself to others.
46. I'm self-conscious about the way I look.
47. I usually worry about making a good impression.
48. I'm concerned about what other people think of me.
49. I'm usually aware of my appearance.
SHY

DIRECTIONS: Compared to persons of similar age, sex and background to you, how shy are you? Mark your response on the green computer answer sheet using the following scale:

A = much more shy
B = more shy
C = about as shy
D = less shy
E = much less shy

51. _____
FNE

**DIRECTIONS:** Please answer the following questions by marking "A" on the green computer answer sheet if a statement typically describes you and mark "B" if it does not.

52. I rarely worry about seeming foolish to others.
53. I worry about what people will think of me even when I know it doesn't make sense.
54. I become tense and jittery if I know someone is sizing me up.
55. I am unconcerned even if I know people are forming an unfavorable impression of me.
56. I feel very upset when I commit some social error.
57. The opinions that important people have of me cause me little concern.
58. I am often afraid that I may look ridiculous or make a fool of myself.
59. I react very little when other people disapprove of me.
60. I am frequently afraid of other people noticing my shortcomings.
61. The disapproval of others would have little effect on me.
62. If someone is evaluating me I tend to expect the worst.
63. I rarely worry about what kind of impression I am making on someone.
64. I am afraid that others will not approve of me.
65. I am afraid that people will find fault with me.
66. Other people's opinions of me do not bother me.
67. I am not necessarily upset if I do not please someone.
68. When I am talking to someone, I worry about what they may be thinking about me.
69. I feel that you can't help making social errors sometimes, so why worry about it.
70. I am usually worried about what kind of impression I make.

- continued -
71. I worry a lot about what my superiors think of me.
72. I know someone is judging me, it has little effect on me.
73. I worry that others will think I am not worthwhile.
74. I worry very little about what others may think of me.
75. Sometimes I think I am too concerned with what other people think of me.
76. I often worry that I will say or do the wrong things.
77. I am often indifferent to the opinions others have of me.
78. I am usually confident that others will have a favorable impression of me.
79. I often worry that people who are important to me won’t think very much of me.
80. I brood about the opinions my friends have about me.
81. I become tense and jittery if I know I am being judged by my superiors.
SADS

**DIRECTIONS:** Please answer the following questions by marking "A" on the green computer answer sheet if a statement typically describes you and mark "B" if it does not.

82. I feel relaxed even in unfamiliar social situations.
83. I try to avoid situations which force me to be very sociable.
84. It is easy for me to relax when I am with strangers.
85. I have no particular desire to avoid people.
86. I often find social occasions upsetting.
87. I usually feel calm and comfortable at social occasions.
88. I am usually at ease when talking to someone of the opposite sex.
89. I try to avoid talking to people unless I know them well.
90. If the chance comes to meet new people, I often take it.
91. I often feel nervous or tense in casual get-togethers in which both sexes are present.
92. I am usually nervous with people unless I know them well.
93. I usually feel relaxed when I am with a group of people.
94. I often want to get away from people.
95. I usually feel uncomfortable when I am in a group of people I don't know.
96. I usually feel relaxed when I meet someone for the first time.
97. Being introduced to people makes me tense and nervous.
98. Even though a room is full of strangers, I may enter it anyway.
99. I would avoid walking up and joining a large group of people.
100. When my superiors want to talk with me, I talk willingly.

- continued -
101. I often feel on edge when I am with a group of people.
102. I tend to withdraw from people.
103. I don't mind talking to people at parties or social gatherings.
104. I am seldom at ease in a large group of people.
105. I often think up excuses in order to avoid social engagements.
106. I sometimes take the responsibility for introducing people to each other.
107. I try to avoid formal social occasions.
108. I usually go to whatever social engagements I have.
109. I find it easy to relax with other people.
SPS

**DIRECTIONS:** For each question, please mark a letter on the green computer answer sheet to indicate the degree to which you feel the statement is characteristic or true of you. The rating scale is as follows:

- **A** = not at all characteristic or true of me
- **B** = slightly characteristic or true of me
- **C** = moderately characteristic or true of me
- **D** = very characteristic or true of me
- **E** = extremely characteristic or true of me

110. I become anxious if I have to write in front of other people.
112. I can suddenly become aware of my own voice and of others listening to me.
113. I get nervous that people are staring at me as I walk down the street.
114. I fear I may blush when I am with others.
115. I feel self-conscious if I have to enter a room where others are already seated.
116. I worry about shaking or trembling when I'm watched by other people.
117. I would get tense if I had to sit facing other people on a bus or a train.
118. I get panicky that others might see me faint, or be sick or ill.
119. I would find it difficult to drink something if in a group of people.
120. I would make me feel self-conscious to eat in front of a stranger at a restaurant.
121. I am worried people will think my behavior odd.
122. I would get tense if I had to carry a tray across a crowded cafeteria.
123. I worry I'll lose control of myself in front of other people.
124. I worry I might do something to attract the attention of other people.
125. When in an elevator, I am tense if people look at me.
126. I can feel conspicuous standing in a line.
127. I can get tense when I speak in front of other people.
128. I worry my head will shake or nod in front of others.
129. I feel awkward and tense if I know people are watching me.
DIRECTIONS: For each question, please mark a letter on the green computer answer sheet to indicate the degree to which you feel the statement is characteristic or true of you. The rating scale is as follows:

A = not at all characteristic or true of me
B = slightly characteristic or true of me
C = moderately characteristic or true of me
D = very characteristic or true of me
E = extremely characteristic or true of me

130. I get nervous if I have to speak with someone in authority (teacher, boss).
131. I have difficulty making eye-contact with others.
132. I become tense if I have to talk about myself or my feelings.
133. I find difficulty mixing comfortably with the people I work with.
134. I find it easy to make friends of my own age.
135. I tense-up if I meet an acquaintance in the street.
136. When mixing socially, I am uncomfortable.
137. I feel tense if I am alone with just one person.
138. I am at ease meeting people at parties, etc.
139. I have difficulty talking with other people.
140. I find it easy to think of things to talk about.
141. I worry about expressing myself in case I appear awkward.
142. I find it difficult to disagree with another's point of view.
143. I have difficulty talking to attractive persons of the opposite sex.
144. I find myself worrying that I won't know what to say in social situations.
145. I am nervous mixing with people I don't know well.
146. I feel I'll say something embarrassing when talking.
147. When mixing in a group, I find myself worrying I will be ignored.
148. I am tense mixing in a group.
149. I am unsure whether to greet someone I know only slightly.