IF: CURRENT PSYCHOTIC DISORDER, OR IN RESIDUAL PHASE OF SCHIZOPHRENIA, CHECK HERE_____ AND SKIP TO *OBSESSIVE COMPULSIVE DISORDER,* F.12

***SOCIAL PHOBIA*(Social Anxiety Disorder)**

Is there anything that you were ever afraid to do or felt uncomfortable doing in front of other people, like speaking, eating or writing?
How about being shy or afraid to be around kids or grownups you don't know very well?

Anything else (you were afraid to do?)

What were you afraid would happen when.....?

IF YES: Are there other times when you like being around other people, like your family or kids (grownups) you know well? That is, times when you don't feel scared to be around people?

IF PUBLIC SPEAKING ONLY: Do you think that you are more scared about this that most kids in your class?

SOCIAL PHOBIA CRITERIA

A. A marked and persistent fear of one or more social or performance situations in which the person is exposed to unfamiliar people or to possible scrutiny by others. The individual fears that he or she will act in a way (or show anxiety symptoms) that will be humiliating or embarrassing. **Note: In children, there must be evidence of capacity for social relationships with familiar people and the anxiety must occur in peer settings, not just in interactions with adults.**

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GO TO ***SPECIFIC PHOBIA*, F. 8**

PHOBIC SITUATION(S) Check:

..... generalized (any or most social situations)
..... public speaking
..... eating in front of others
..... writing in front of others
..... other SPECIFY:.....)

Do you always feel afraid or worried when you (CONFRONTED PHOBIC STIMULUS)?

(Do you always (start crying, get really upset, freeze, feel like being all by yourself) when you (CONFRONTED PHOBIC STIMULUS)?)

B. Exposure to the feared social situation almost invariably provokes anxiety, which may take the form of a situationally bound or situationally predisposed panic attack. **Note: in children, the anxiety may be expressed by crying, tantrums, freezing, or withdrawal from the social situation.**

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GO TO ***SPECIFIC PHOBIA*, F. 8**

Did you think that you were more afraid of (phobic activity) than you should be been (or than made sense)?

C. The person recognizes that the fear is excessive or unreasonable. **Note: In children, this feature may be absent.**

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CONTINUE

IF NOT OBVIOUS: Did you go out of your way to avoid.....?

Do you have trouble joining in games? Or stay away from other children?

IF NO: How hard is it for you to .....?

D. The feared social or performance situations are avoided, or else endured with intense anxiety or distress.

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GO TO ***SPECIFIC PHOBIA*, F. 8**

IF UNCLEAR WHETHER FEAR WAS CLINICALLY SIGNIFICANT: How much did (phobia) interfere with your life?

IF DOES NOT INTERFERE WITH LIFE: How much does knowing that you have this fear bother you?

E. The avoidance, anxious anticipation. or distress in the feared social or performance situation(s) interferes significantly with the person's normal routine, occupational (academic) functioning or with social activities or relationships with others, or there is marked distress about having the phobia.

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GO TO ***SPECIFIC PHOBIA*, F. 8**

IF UNCLEAR: Has this been going on (for 6 months)*?

*Use phrase understandable to the subject referring to the past six months (e.g., "since August" or "all this school year").

F. In individuals under age 18 years, the duration is at least **6 months.**

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GO TO ***SPECIFIC PHOBIA*, F. 8**

IF UNKNOWN: Were you taking any street drugs or medications during the times when you had (any of the SXS described above)?

G. The fear or avoidance is not due to the direct effects of a substance (e.g., drugs of abuse, medication) or a general medical condition, and is not better accounted for by Panic Disorder With or Without Agoraphobia, Separation Anxiety Disorder, Body Dysmorphic Disorder, a Pervasive Developmental Disorder, or Schizoid Personality Disorder.

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R/O GENMED/SUBSTANCE INDUCED ANXIETY Consider ***GENMED/SUBST***

IF NOT ALREADY CLEAR: RETURN TO THIS ITEM AFTER COMPLETING INTERVIEW.

H. If a general medical condition or other mental disorder is present, the fear in A is unrelated to it, e.g., the fear is not of stuttering, trembling (in Parkinson's disease) or exhibiting abnormal eating behavior (in Anorexia Nervosa or Bulimia Nervosa).

?	1	3

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Consider ***Anxiety Disorder NOS***

PRIMARY ANXIETY DISORDER

Social Phobia Criteria A, B, D, E, F, G& H are coded "3"

?	1	3

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GO TO ***SPECIFIC PHOBIA*,** F. 8

SOCIAL PHOBIA

SPECIFY IF **Generalized Type:** if the fears include most social situations (also consider the additional diagnosis of Avoidant Personality Disorder).

?	1	3

↑ ↑

SOCIAL PHOBIA

GO TO ***SPECIFIC PHOBIA*,** F. 8

SOCIAL PHOBIA, GENER-ALIZED TYPE