

BACKGROUND

- Social anxiety is highly prevalent in the general population and is frequently associated with significant social, interpersonal, and professional impairment (Xu et al. 2012).
- Social anxiety typically stems from a fear of social situations where a person believes that negative evaluation is likely and will have negative consequences for them, resulting in behaviors such as avoidance and social isolation (Modini et al. 2018).
- Prior findings indicate that women are both more likely to develop social anxiety disorder (SAD) than men, as well as report greater clinical severity compared to men (Asher et al. 2017).
- The Program for the Education and Enrichment of Relational Skills (PEERS®) is an evidence-based, caregiver-assisted social skills intervention for young adults with autism spectrum disorder (ASD) and other social challenges, such as social anxiety (Laugeson 2017).
- While gender differences in social anxiety may exist in the general population, previous research suggests that PEERS® is equally efficacious for females and males (McVey et al. 2017).
- Previous research also indicates that young adults who participate in PEERS®, many of whom suffer from social anxiety, demonstrate increased social skills following treatment (Laugeson et al. 2015); however, gender variance in social anxiety levels following the PEERS® intervention has yet to be examined.

OBJECTIVE

- The purpose of this study is to assess the influence of gender on treatment outcome, specifically related to changes in levels of reported social anxiety, among young adults with ASD and other social challenges following the UCLA PEERS® program.
- We hypothesized that while both males and females would show significant decreases in social anxiety following treatment, no significant difference in treatment gains would be observed between young adult female and young adult male participants.

METHODS

PARTICIPANTS

- N: 121 young adults with ASD and other social challenges presenting for treatment at the UCLA PEERS® Clinic
- Age: $M=22.89$, $SD=4.029$, range 17 to 37
- Gender: 90 males (74.4%), 31 females (25.6%)
- Ethnicity: Caucasian 63.5% ($n=73$); Asian 11.3% ($n=13$); Hispanic 7.8% ($n=9$); African American 2.6% ($n=3$); Native American 0.9% ($n=1$); Middle Eastern 0.9% ($n=1$); Other 13% ($n=15$)

MEASURES

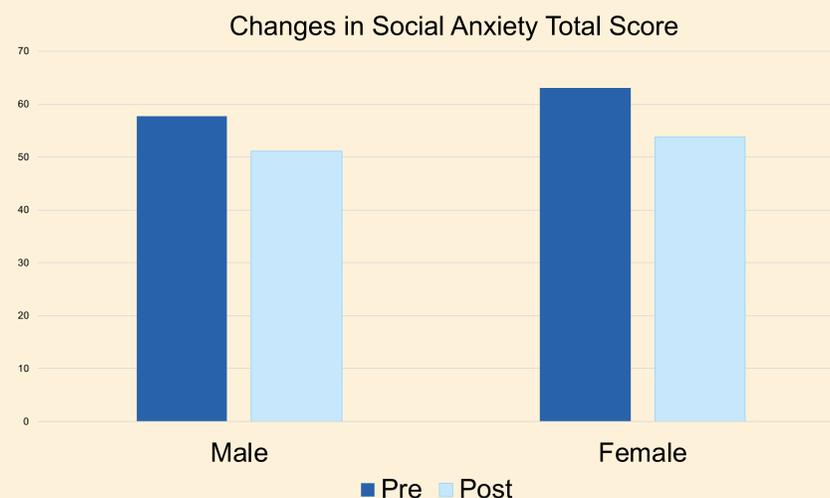
- Treatment outcome was assessed using parent-reports on the Social Anxiety Scale (SAS; La Greca 1999) pre- and post-treatment.

TREATMENT

- Young adults and caregivers attended weekly 90-minute group treatment sessions over 16-weeks.
- Skills were taught using didactic instruction in a small group format which included role-playing demonstrations, behavioral rehearsal activities, and weekly homework assignments.
- Treatment sessions focused on making and keeping friends, dating etiquette, and handling peer conflict and rejection.
- Topics of instruction included:
 - Using appropriate conversational skills
 - Choosing appropriate friends
 - Using electronic forms of communication
 - Using humor and assessing humor feedback
 - Starting, entering, and exiting conversations between peers
 - Organizing successful get-togethers with friends
 - Developing romantic relationships and using appropriate dating etiquette
 - Handling arguments and disagreements with friends and romantic partners
 - Handling rejection, teasing, bullying, and rumors/gossip

RESULTS

- Paired samples T-tests show significant decreases in social anxiety on the SAS from pre- to post-treatment across both genders: Female ($t=4.61$, $p<.001$) and male ($t=6.13$, $p<.001$).
- Results from an ANOVA reveal no statistically significant difference in rate of decreased parent-reported SAS scores across male and female populations, $F(1, 118)=1.296$, $p=.257$), supporting the original hypothesis.



CONCLUSION

- Results reveal that while significant decreases in social anxiety are observed following treatment, there is no significant difference in the amount of progress reported following the PEERS® intervention between the male and female participants.
- This finding is consistent with previous research suggesting that the PEERS® intervention is equally efficacious for females and males (McVey et al. 2017).
- Future research might examine to what extent gender impacts social anxiety among the adolescent and preschool populations to further ensure unbiased intervention.
- Additional research might also investigate the influence of gender on other aspects of treatment following PEERS®.

REFERENCES

- Asher, M., Asnaani, A., & Aderka, I. M., (2017). Gender differences in social anxiety disorder: A review. *Clinical Psychology Review*, 56, 1-12. doi: 10.1016/j.cpr.2017.05.004.
- La Greca, A. M. (1999). *Social Anxiety Scales for Children and Adolescents Manual*. Miami, FL: University of Miami.
- Laugeson, E. A. (2017). *PEERS® for Young Adults: Social Skills Training for Adults with Autism Spectrum Disorder and Other Social Challenges*. New York, NY: Routledge.
- Laugeson, E. A., Gantman, A., Kapp, S. K., Orenski, K., & Ellingsen, R. (2015). A randomized controlled trial to improve social skills in young adults with autism spectrum disorder: The UCLA PEERS® program. *Journal of Autism and Developmental Disorders*, 45(12), 1-12. DOI: 10.1007/s10803-015-2504-8.
- McVey, A.J., Schiltz, H., Haendel, A. Dolan, B.K., Willar, K.S., Pleiss, S... Van Hecke, A.V. (2017). Does gender matter in intervention for ASD? Examining the impact of PEERS® social skills intervention on social behavior among females with ASD. *Journal of Autism and Developmental Disorders*, 47(7), 2282-2289. doi: 10.1007/s10803-017-3121-5.
- Modini, M., Rapee, R. M., & Abbott, M.J. (2018). Processes and pathways mediating the experience of social anxiety and negative rumination. *Behaviour Research and Therapy*, 103, 24-32. doi: 10.1016/j.brat.2018.01.009.
- Xu, Y., Schneier, F., Heimberg, R. G., Prins, A. L., Liebowitz, M. R., Wang, S., & Blanco, C. (2011). Gender differences in social anxiety disorder: Results from the national epidemiologic sample on alcohol and related conditions. *Journal of Anxiety Disorders*, 26, 12-19. doi: 10.1016/j.janxdis.2011.08.006.

CONTACT INFORMATION

For additional information, please contact:
 Julia Zukin at peersclinic@ucla.edu or (310) 26-PEERS
 Or visit the PEERS® website at www.semel.ucla.edu/peers