
Revealing Social Anxiety And Its Issues

Anxiety decreasing with exercise agrees with a plethora of research (e.g. Goodwin, 2003; Petruzzello et al., 1991). One study suggests exercise frequency, instead of previous history is most important to reduce anxiety and that the more anxious exercisers benefit most (Wilson et al., 1981). Impressively, exercise has similar effectiveness to traditional anxiety management approaches (Ryan et al., 1983). However, exercise, if not carefully administered and managed, can also induce acute panic attacks (Broocks et al., 1998) perhaps indicating needs to explore specific anxiety disorders.

This especially relates to anxiety sensitivity (AS) which is a fear of anxiety sensations, based on beliefs they lead to harmful consequences (Reis, 1991). More specifically, sensations like a racing heartbeat are perceived as indicative of a heart attack in those with high AS. Conversely low AS recognise these feelings as uncomfortable but harmless and transient (Sabourin et al., 2011). Exercise can effectively reduce anxiety sensitivity (Broman-Fulks et al., 2004), which is dominant in most forms of anxiety (Taylor et al., 1992). Ströhle (2009) suggests exercise-based exposure to feelings similar to that of anxiety symptoms, demonstrates how they are non-threatening in nature. Even low intensity exercise is better than none (Broman-Fulks et al., 2004). Consequently, anxiety is reduced in those exercising. However, AS can prevent exercise initiation (Sabourin et al., 2011), due to unpleasant feelings of fear, rather than enjoyment, during exercise. Subsequently, distress means avoidance is likely, reducing exercise frequency, and perhaps explaining increased anxiety with inactivity (Smits and Zvolensky, 2006).

Bahrke and Morgan (1978) propose the distraction hypothesis contributes to reduced anxiety with exercise by suggesting exercise distracts from stressful feelings and allows 'time-out' from them. However, positive benefits from this are perhaps transient suggesting alternative mechanisms are affecting the relationship. Alternatively, media attention focuses on positive psychological consequences of exercise like endorphins and 'runner's high', so people may simply report feeling better after exercise because they expect to and are told they should. Therefore, a placebo effect may occur (Szabo, 2013).

A barrier to exercise is social anxiety (Treasure et al., 1998). More specifically, social physique anxiety (SPA) which involves concerns surrounding evaluation by others of body figure (Hart et al., 1989). Individuals are less likely to participate if they feel anxious about a situation, so SPA inversely associates with exercise participation (Treasure et al., 1998), indirectly affecting anxiety. This is a potential reason for inactive people having higher anxiety. However, some people exercise to decrease physical insecurities, whilst others just avoid exercise (Gammage et al., 2004), therefore SPA works both as an incentive and deterrent. Future studies may benefit from exploring which of these dominates.

SPA is rife in exercise environments since the body is vulnerable to evaluation and participants often feel pressure to conform to certain body shapes (Krane et al., 2001). This is unsurprising given the importance of physical attractiveness in society and the perceived norms only those who are fit and thin are accepted within an exercise environment (Packer, 1989). Previous research suggests inactive individuals have increased body dissatisfaction (Petrie, 1996). Specifically, exercisers wear revealing clothing in mirrored rooms, raising bodily awareness and

social comparison (Frederick and Shaw, 1995). These may increase SPA and prevent participation, explaining increases in anxiety with inactivity. On the other hand, exercise can increase physique confidence, therefore decreasing SPA (Hausenblas et al., 2004), potentially further justifying why active individuals have reduced social anxiety.

SPA and AS influence negative affect during exercise (Ekkekakis et al., 2010). Both factors may be important targets for intervention to help anxious individuals enjoy their initial exercise experience. Making individuals less identifiable and creating a supportive environment may decrease evaluation (Martin and Fox 2001). Consequently, reducing evaluation potentially diminishes social anxiety, allowing increased exercise behaviour to further decrease anxiety levels. However, the present study used the PASAS to measure social anxiety which is more sport-specific, so future studies should employ general exercise-based measures.