

# Chapter 60

## The Use of Gamification in Social Phobia

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### ABSTRACT

*Social phobia usually starts in adolescence. Social situations that include meeting people, talking in groups, or in more specific situations are going to be avoided by individuals. Therefore, this condition has the consequence of significant impairment in different occupations. Recent studies show that gamification is commonly applied to interventions for the treatment of chronic diseases, and although there are interventions concerning mental health, these are few and there is evidence that these interventions have positive effects on mental health, particularly among young people. The desensitization therapy program using gamification consisted of 15 sessions: an initial assessment session, 13 biweekly exposure therapy sessions, and the last reevaluation session corresponding to a total duration of the program of seven weeks. Each session, lasting approximately 50 minutes, is followed a formal structure consisting of the following phases. The intervention focused on shaping appropriate approach behaviors through a process of successive approximations.*

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## **SOCIAL PHOBIA**

Social phobia, also called social anxiety disorder, is the third most common neuropsychiatric disorder after depression and substance abuse, with a prevalence of approximately 12% throughout life in Western societies and which increases with age, and generally starts in childhood or adolescence (Bas-Hoogendam et al., 2017; Cabral & Patel, 2020; Erin et al., 2017; Hirsch, 2018; Kampmann, Emmelkamp, & Morina, 2016; Kishimoto & Ding, 2019; Lange & Pauli, 2019; Leichsenring & Leweke, 2017; Leigh & Clark, 2018; Miloff et al., 2015; Morrison et al., 2016; Rose & Tadi, 2020; Serlachius et al., 2019). Social phobia refers to the fear of exposure to one or more social situations, as well as excessive concern about your social performance and the focus is on fear of being negatively assessed (American Psychiatric Association, 2014; Apolinário-Hagen et al., 2020; Bas-Hoogendam et al., 2017; Clauss et al., 2019; Emmelkamp et al., 2020; Erin et al., 2017; Felnhof et al., 2019; Hirsch, 2018; Kampmann, Emmelkamp, Hartanto, et al., 2016; Kampmann, Emmelkamp, & Morina, 2016; Kampmann et al., 2019; H. Kim et al., 2018; Lange & Pauli, 2019; Leichsenring & Leweke, 2017; Miloff et al., 2015; National Collaborating Centre for Mental Health, 2013; Perna et al., 2020; Rose & Tadi, 2020; Serlachius et al., 2019; Wechsler et al., 2019). It should be noted that social phobia is characterized by anticipated anxiety and hypervigilance to social stimuli and the fact that individuals with this pathology are concerned with social judgment, creates an ambiguous and unpredictable situation (Clauss et al., 2019). Thus, social phobia is associated with a high intolerance to uncertainty which suggests that ambiguous or uncertain situations are critical for the disorder (Clauss et al., 2019). It is possible to mention that this pathology affects more females than males (Cabral & Patel, 2020; Rose & Tadi, 2020).

Therefore, social phobia represents a continuum of several feared social situations (Leichsenring & Leweke, 2017). In these situations, individuals who have a social phobia avoid eye contact, divert their attention from external suggestions and focus on internal ones, which contributes to the persistence of fear (H. Kim et al., 2018; Lange & Pauli, 2019). Studies have shown that individuals with this pathology show less fixation on the face, especially avoiding the eye region, which is perceived negatively by other people, as well as this type of behavior becomes more evident as the emotional intensity increases (H. Kim et al., 2018). People with angry or irritated facial expressions are more avoided compared to people with neutral or sad facial expressions (Lange & Pauli, 2019).

Social situations can be grouped into different groups that involve observation, interaction, and performance (National Collaborating Centre for Mental Health, 2013; Wechsler et al., 2019). As such, these include meeting people, talking in groups or more specific situations, such as at meetings, talking to authority figures or giving presentations, starting conversations, being seen in public, eating or drinking while being watched, working, going shopping, among others (Emmelkamp et al., 2020; National Collaborating Centre for Mental Health, 2013; Wechsler et al., 2019). Individuals with social phobia will try to avoid the above situations, which is not always feasible (Hirsch, 2018; Miloff et al., 2015; National Collaborating Centre for Mental Health, 2013; Pepper et al., 2019; Perna et al., 2020). Consequently, this condition results in significant impairment in different occupations, which, consequently, translates into a decrease in quality of life (Ahmed-Leitao et al., 2019; Bas-Hoogendam et al., 2017; Cabral & Patel, 2020; Kampmann, Emmelkamp, & Morina, 2016; Kampmann, Emmelkamp, Hartanto, et al., 2016; Kishimoto & Ding, 2019; Leichsenring & Leweke, 2017; Miloff et al., 2015; National Collaborating Centre for Mental Health, 2013). Individuals with social phobia are more likely to have a low level of education, to be single, and to have a lower socioeconomic level (Cabral & Patel, 2020; Perna et al., 2020;



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