Introduction: Internalizing disorders are incredibly burdensome afflictions, which often negatively impact interpersonal relationships (La Greca & Harrison, 2005). These disorders involve the reflection of distress inwards and include a range of disorders such as depression and anxiety (Bayer et al., 2011). Previous studies support associations between depression and various aspects of empathic responding, such as being overly empathic, experiencing high levels of distress in response to interpersonal problems, and lacking interpersonal perspective-taking, (Batanova & Loukas, 2011; Cusi et al., 2010; Lee, 2009; Thoma et al., 2011) but very few studies have investigated the link between social anxiety and empathy.

Hypothesis: Based on the previous literature examining the link between depression and empathy and the high co-morbidity between depression and anxiety (de Jong et al., 2012; Thoma et al., 2011), we predicted higher levels of social anxiety symptoms would be associated with higher levels of empathic concern, personal distress, and lower levels of perspective-taking.

Method: Undergraduate psychology students (N=218; 76.7% female; 44.1% African-American, 24.3% Caucasian; M_{age}=19.69, SD_{age}=1.90) completed one self-report measure of empathic concern, personal distress, and perspective-taking and one measuring depression and anxiety. Multiple linear regression analyses were used to test social anxiety as a predictor of the empathy constructs after accounting for age, gender, race, and depression.

Results: As hypothesized, increases in social anxiety symptoms predicted significantly higher levels of interpersonal personal distress. However, contrary to the hypotheses, social anxiety symptoms were not associated with empathic concern or perspective taking. These findings suggest that individuals afflicted with social anxiety become emotionally involved in the experience of others in a self-focused but not other-oriented way, perhaps at the expense of being cognitively and affectively connected with others.

Conclusion/Discussion: Although depression and anxiety are highly co-morbid and connected through a common underlying internalizing factor (Krueger, McGue, & Iacono, 2001), they differ in their association with two constructs of empathy. Thus, empathy and interpersonal factors may help distinguish these two disorders.

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