



Gender role traits among individuals with social anxiety disorder[☆]

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ABSTRACT

The present study investigated differences between individuals with and without social anxiety disorder (SAD) in instrumentality and expressiveness, personality traits traditionally linked to the male and female gender roles, respectively. Based on evolutionary and self-discrepancy theories, it was hypothesized that individuals with SAD would score lower on instrumentality and report a discrepancy between their perceived and ideal level of instrumentality compared to control participants. Sixty-four patients with SAD and 31 non-anxious control participants completed a battery of questionnaires, including ratings of their perceived and ideal gender role attributes and current psychosocial distress. Results supported the hypotheses, and provided initial evidence that a discrepancy between perceived and ideal instrumentality may be linked to social anxiety severity, depression and lower quality of life. No differences were detected between groups in expressiveness. The present findings suggest that individuals with SAD perceive themselves to be deficient in instrumentality. They also suggest that increasing instrumentality among individuals with SAD may be beneficial for treatment.

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1. Introduction

Social anxiety is a fear of being judged negatively by others or a fear of being humiliated or embarrassed in front of others (Schultz, Heimberg, & Rodebaugh, 2008). Individuals with social anxiety disorder (SAD) experience anxiety in social or performance situations to the point that it produces marked interference or distress (American Psychiatric Association [APA], 2000). Women are more likely than men to have a lifetime SAD diagnosis (Weinstock, 1999). A recent study (McLean & Hope, 2010) failed to find reporting biases in anxiety symptoms based on gender. As such, it appears that there are other factors that may explain gender differences in social anxiety.

One potential explanatory variable for gender differences in social anxiety may be low perceived instrumentality experienced by individuals with high social anxiety (Trower & Gilbert, 1989). Instrumentality is “an individual’s striving for independence, mastery, task accomplishment, and self-assertiveness” (Stake, 1997, p. 541). Instrumentality is a gender-role linked personality trait, as instrumental traits, such as independence, have been associated

with the traditional masculine gender role. Conversely, expressive traits, such as interpersonal relatedness, have been associated with the traditional feminine gender role (Spence & Helmreich, 1978). Expressiveness is “an individual’s striving for connectedness with others and encompasses interpersonal cooperativeness, sensitivity to others’ needs, and emotional openness” (Stake, 1997, p. 542). Instrumentality and expressiveness are unitary constructs that have not been found to be correlated with each other (Spence & Helmreich).

1.1. Theories of social anxiety

Trower and Gilbert (1989) proposed a psychobiological/ethological theory of social anxiety, according to which individuals with SAD view social relationships from a competitive framework whereas individuals low in social anxiety view them from a cooperative framework. Gilbert (2001) further elaborated this theory from an evolutionary viewpoint, positing that humans compete for or defend their social resources (e.g., social approval), which are valuable because they predict success in friendships and sexual relationships. Gilbert also posited that individuals with SAD doubt their ability to attain a dominant position in social relationships and, therefore, attempt to retain their lower social status and avoid social rejection. Achieving a dominant position in social relationships often requires independence and assertiveness. Individuals with SAD probably do not believe they can exhibit these traits in social situations (i.e., they have low perceived instrumentality).

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Walters and Hope (1998) found that non-anxious individuals were more likely than individuals with SAD to exhibit dominant behaviors (e.g., giving commands) but did not differ from socially anxious individuals in submissive or cooperative behaviors (e.g., head nods) during a social interaction.

According to Self-Discrepancy Theory (SDT; Higgins, 1987; Higgins, 1996), individuals' self-concept is determined by: an actual self (perceived traits that individuals possess), an ideal self (traits that they wish or hope for), and an ought self (traits they believe they should possess). Higgins and other researchers (e.g., Burke, 1996) hypothesized that a discrepancy between people's ideal/ought selves and actual self leads to psychosocial distress. Higgins also predicted that a discrepancy between one's actual and ideal self would result in depression-related symptoms (e.g., sadness), whereas a discrepancy between one's actual and ought self would result in anxiety-related symptoms (e.g., agitation). Partial support for these predictions has been found in both non-clinical and clinical populations (e.g., Grimmell, 1998; Strauman, 1989). For example, Grimmell (1998) found that actual-ideal discrepancies in instrumentality were related to depression scores in undergraduate women.

However, anxiety may also be related to actual-ideal discrepancies, as there is high comorbidity between depression and anxiety (Kessler, Chiu, Demler, Merikangas, & Walters, 2005). Further, it is possible that researchers are actually measuring the discrepancy between individuals' actual selves and ideal/ought selves combined, as ideal traits may also be traits that individuals feel obligated to possess. In support of these hypotheses, Grimmell and Stern (1992) found that actual-ideal discrepancies in instrumentality were stronger predictors of both depression and anxiety than a measure of instrumentality alone in a sample of university students.

Identity-Discrepancy Theory (IDT; Large & Marcussen, 2000; Marcussen & Large, 2003) extends Higgins' theory by proposing that individuals possess multiple role-identities (social roles) based on various personal characteristics for which there may be discrepancies between their aspirations and perceived obligations. This leads to distress in different situations in which these roles are enacted. Gender roles can be considered a specific role-identity wherein males and females with high social anxiety may experience actual-ideal or actual-ought discrepancies in gender role traits (e.g., instrumental traits).

1.2. Personality traits and social anxiety

Individuals with high social anxiety report greater perfectionism, including doubts about actions and the perception that others hold high expectations for them (e.g., Antony, Purdon, Huta, & Swinson, 1998). Socially prescribed perfectionism among individuals with social anxiety is associated with more severely maladaptive appraisals of social situations (Laurenti, Bruch, & Haase, 2008). Therefore, individuals with high social anxiety may set higher standards for themselves than do non-anxious individuals, but may also judge their performance in social situations as less than ideal. If so, these individuals would not be satisfied with their perceived social self as compared to their ideal social self.

1.3. Hypotheses

The present study investigated differences between individuals with and without SAD in perceived and ideal instrumental and expressive traits while controlling for gender. We hypothesized that individuals with SAD would score lower on perceived instrumentality than those without SAD. Further, we hypothesized that there would be a discrepancy between perceived and ideal instrumentality scores among individuals with SAD. Finally, we

hypothesized that among individuals with SAD, perceived-ideal discrepancies in instrumentality would be associated with severity of social anxiety, depression, anxiety sensitivity, and lower quality of life. Exploratory analyses examined whether individuals with SAD and individuals without SAD differed on perceived and ideal expressive traits.

2. Method

2.1. Participants

Sixty-four patients with SAD (mean age = 31.77; $SD = 9.92$) were recruited from the Adult Anxiety Clinic of Temple University in Philadelphia. All met *Diagnostic and Statistical Manual of Mental Disorders* (4th ed.; DSM-IV; APA, 1994) criteria for a principal diagnosis of SAD. Potential participants were excluded if they met criteria for bipolar disorder, psychotic disorder, organic mental disorder, or active substance dependence in the past 3 months. Thirty-one additional participants with no history of SAD or current Axis I disorder (mean age = 33.45; $SD = 11.09$) were recruited from the community via media advertisements. These participants were matched on age, gender, and race with the patients in the SAD group (see Table 1 for demographics).

2.2. Measures

2.2.1. Anxiety disorders interview schedule for DSM-IV: lifetime version (ADIS-IV-L; Di Nardo, Brown, & Barlow, 1994)

The ADIS-IV-L is a semi-structured diagnostic interview that assesses current and lifetime anxiety disorders. The inter-rater reliability for a diagnosis of SAD on the ADIS-IV-L is high ($k = .77$; Brown, Di Nardo, Lehman, & Campbell, 2001).

2.2.2. Personal attributes questionnaire (PAQ; Spence & Helmreich, 1978)

The PAQ is a self-report questionnaire measuring self-perceived gender role attributes. The PAQ contains three separate 8-item scales, two of which (self-perceived instrumentality, self-perceived expressiveness) were employed in the present study. Items consist of trait descriptions that are stereotypically more characteristic of a certain gender role. Traits are rated on a 5-point scale from "not at all" (e.g., *not at all independent*) to "very much" like the trait (e.g., *very independent*). The instrumentality scale assesses positive traits associated with the traditional masculine role (e.g., self-confident, active), and the expressiveness scale assesses positive traits associated with the traditional feminine role (e.g., warm, understanding). Internal consistencies for the instrumentality and expressiveness

Table 1
Demographic characteristics by group.

Measure	SAD group ($n = 64$) %	Control group ($n = 31$) %	Statistic		
			χ^2	df	p
Gender			0.02	1	.90
Male	56.20	54.80			
Female	43.80	45.20			
Education			4.20	2	.12
High school	7.80	22.60			
College	70.30	61.30			
Post Graduate	21.90	16.10			
Race			0.55	1	.46
White	75.00	67.74			
Other	25.00	32.26			
Marital status			0.52	2	.77
Married	10.90	6.50			
Single/Never married	75.00	77.40			
Separated/divorced/ widowed	14.10	16.10			

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