



PERGAMON

Behaviour Research and Therapy 41 (2003) 795–807

**BEHAVIOUR  
RESEARCH AND  
THERAPY**

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## Masculinity–femininity as a national characteristic and its relationship with national agoraphobic fear levels: Fodor’s sex role hypothesis revitalized

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Accepted 30 November 2001

### Abstract

Hofstede’s dimension of national culture termed Masculinity–Femininity [Hofstede (1991). *Cultures and organizations: software of the mind*. London: McGraw-Hill] is proposed to be of relevance for understanding national-level differences in self-assessed agoraphobic fears. This prediction is based on the classical work of Fodor [Fodor (1974). In: V. Franks & V. Burtle (Eds.), *Women in therapy: new psychotherapies*

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for a changing society. New York: Brunner/Mazel]. A unique data set comprising 11 countries (total  $N = 5491$  students) provided the opportunity of scrutinizing this issue. It was hypothesized and found that national Masculinity (the degree to which cultures delineate sex roles, with masculine or tough societies making clearer differentiations between the sexes than feminine or modest societies do) would correlate *positively* with national agoraphobic fear levels (as assessed with the Fear Survey Schedule—III). Following the correction for sex and age differences across national samples, a significant and large effect-sized national-level (ecological)  $r = +0.67$  ( $P = 0.01$ ) was found. A highly feminine society such as Sweden had the lowest, whereas the champion among the masculine societies, Japan, had the highest national Agoraphobic fear score.

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*Keywords:* Sex roles; Agoraphobia; Cross-cultural assessment; National masculinity–femininity; Hofstede; Fodor

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## 1. Introduction

The essential feature of *Agoraphobia* is anxiety about being in places or situations from which escape might be difficult (or embarrassing) or in which help may not be available in the event of having panic-like symptoms (e.g. fear of having a sudden attack of dizziness or a sudden attack of diarrhea) or a panic attack. A panic attack is defined as a discrete period of intense fear or discomfort, in which a number of anxiety symptoms (e.g. ‘palpitations, pounding heart, or accelerated heart rate’, ‘sweating’, ‘trembling or shaking’, ‘fear of dying’, ‘sensations of shortness of breath’, ‘chest pain or discomfort’) developed abruptly and reached a peak within 10 min (American Psychiatric Association [APA], 1995, p. 405). The anxiety typically leads to a pervasive avoidance of a variety of situations that may include being alone outside the home or being alone at home; being in a crowd of people; travelling in an automobile, bus, or airplane; or being on a bridge or in an elevator (APA, 1995, p. 406). Some individuals are able to expose themselves to the feared situations but endure these with considerable dread; often an individual is better able to confront a feared situation when accompanied by a companion. In addition, individuals’ avoidance of situations may impair their abilities to travel to work or to carry out homemaking responsibilities (e.g. grocery shopping, taking children to the doctor) (APA, 1995, p. 406). The *Diagnostic and statistical manual of mental disorders*—fourth edition (DSM-IV; APA, 1995, p. 406) distinguishes between Panic Disorder With Agoraphobia and Agoraphobia Without a History of Panic Disorder.

Fodor (1974), among many others (e.g. Chambless & Goldstein, 1980; Chambless, 1982, 1989; Brehony, 1983; Wolfe, 1984), have advanced theoretical speculations for explaining the higher frequencies in adulthood of (agora)phobic conditions in females as compared to males by pointing to the dependence and superhelplessness that are inherent to the stereotypically feminine sex role. Thus, these authors have argued that as young girls grow to become women, traditional societal mores promote dependency, shaping their behaviour and aspirations by deemphasizing autonomy and mastery while fostering expectations of protection and guidance. By contrast, for boys socialization entails reinforcement for quite different behaviour: males are expected to be independent, confronting, and instrumental in their approach towards the world (cf. Woody & Chambless, 1989). In the classical view of Fodor (1974) in which, incidentally, high masculinity and high femininity are assumed to be mutually exclusive *traits*, phobic behaviour of any kind, albeit

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