Defensiveness is related to increased startle magnitude

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Abstract

Previous work has demonstrated that individuals with a repressive coping style (i.e. those high in defensiveness and low in trait anxiety) tend to show higher levels of physiological reactivity than non-repressors. The present study examined archival data from a two-session experiment to assess whether repressors would show greater reactivity as measured by the eye blink component of the acoustic startle response. Following Weinberger et al.'s (1979) fourfold repression taxonomy, and using the EPQ-L and EPQ-N scales as measures of defensiveness and anxiety, participants were identified as repressors, true low anxious, true high anxious, and defensive high anxious. Results revealed that defensiveness, but not repression per se, was associated with greater startle magnitude. The effect was observed in the first session, but not in the second. Implications for these findings are discussed.

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1. Introduction

The current conceptualization of the “repressive coping style” is based on a 2×2 taxonomy described by Weinberger, Schwartz, and Davidson (1979). This taxonomy defines repressive coping as a construct comprised of high defensiveness, the tendency to endorse unlikely virtues and deny minor faults, combined with low levels of reported trait anxiety. The construct is typically measured using scales assessing defensiveness and self-reported anxiety. Weinberger et al.
(1979) proposed that social desirability scales (e.g. the Marlowe–Crowne Social Desirability Scale; Crowne & Marlowe, 1964) might tap an orientation toward repressive–defensive coping. Individuals scoring high on defensiveness scales and low on anxiety scales are generally classified as “repressors”, whereas those scoring low on defensiveness and low on anxiety are classified as “true low anxious”. Those scoring low on defensiveness scales and high on anxiety are classified as “true high anxious”, while individuals scoring high on both defensiveness and anxiety scales are known as “defensive high anxious”.

While “repressors” by definition report low levels of trait anxiety, they often paradoxically display higher levels of physiological reactivity (e.g. Derakshan & Eysenck, 1997, 2001; Weinberger et al., 1979). For instance, a number of studies have demonstrated a relationship between repressive coping and greater cardiovascular activity. In their 1979 study, Weinberger, Schwartz, and Davidson measured heart rate (HR) increases during a phrase association task. They found that repressors showed HR increases that were comparable to those observed in high anxious individuals and greater than those observed in low anxious individuals. A later study by Kiecolt-Glaser and Greenberg (1983) found greater HR responses in repressors relative to low and high anxious individuals during a role-playing task. In another study, Asendorpf and Scherer (1983) had repressors, true low and high anxious groups, as well as a defensive high anxious group perform a potentially anxiety-arousing free association task. Repressors showed higher HRs relative to the true low anxious group. Newton and Contrada (1992) demonstrated that repressors, relative to high and low anxious groups, showed increased HR during a task in which participants were led to believe they were being watched by a group of observers.

The present study examined archival data from a study originally designed to examine startle habituation in a slide/startle paradigm (LaRowe, 1997). Although the Marlowe–Crowne Social Desirability Scale (MCSD; Crowne & Marlowe, 1964) is typically used for the assessment of the defensiveness dimension (e.g. Asendorpf & Scherer, 1983; Weinberger et al., 1979), this measure was not available as it was not a part of the original data collection protocol. However, a number of other scales have served as measures of defensiveness in a variety of studies, including the MMPI Lie scale (Freska et al., 1988), the Repressive–Defensiveness scale from the Weinberger Adjustment Inventory (Brown et al., 1996), and the Eysenck Personality Questionnaire Lie scale.
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