Anxiety sensitivity and disgust sensitivity interact to predict contamination fears

Josh M. Cisler *, John M. Reardon, Nathan L. Williams, Jeffrey M. Lohr

Department of Psychology, University of Arkansas, 216 Memorial Hall, Fayetteville, AR 72701, United States

Received 31 May 2006; received in revised form 13 August 2006; accepted 1 September 2006

Available online 23 October 2006

Abstract

Research has begun to demonstrate that contamination fears are comprised of both fear and disgust, but whether these emotions interact and how they may interact within the domain of contamination fears has not been researched. The present study investigated whether the fear of aversive sensations (i.e., anxiety sensitivity) interacts with the propensity to respond with disgust (i.e., disgust sensitivity) to predict contamination fear. In study 1, 377 participants completed the Disgust Scale, the Vancouver Obsessional Compulsive Inventory, and the Anxiety Sensitivity Index. Results revealed that anxiety sensitivity and disgust sensitivity independently predict contamination fear, and these main effects were qualified by an interaction between these constructs. Study 2 replicated these findings in a smaller sample (N = 98) using the Padua inventory as the index of contamination fear. The authors discuss the results in terms of a possible functional role of disgust in contamination fear.

© 2006 Elsevier Ltd. All rights reserved.

Keywords: OCD; Contamination fear; Disgust; Anxiety sensitivity

* Corresponding author. Tel.: +1 479 575 4256.
E-mail address: jcisler@uark.edu (J.M. Cisler).
1. Introduction

Fear and disgust are distinct basic emotions (Levenson, 1992; Woody & Teachman, 2000). Fear is characterized by sympathetic arousal, escape/avoidance, and appraisal of threat or danger, whereas disgust is characterized by parasympathetic arousal, aversion/rejection, and appraisals of potential contamination (Woody & Teachman, 2000). Traditional anxiety disorder research has focused primarily on the emotion of fear, but recent research suggests that disgust may play an important role in the phenomenology of some anxiety disorders. For example, disgust has been implicated in small animal phobias (e.g., snakes, spiders; Matchett & Davey, 1991), blood-injection-injury phobia (BII; de Jong & Merckelbach, 1998), and obsessive-compulsive disorder (OCD; Mancini, Gragnani, & D'Olimpio, 2001).

In light of the accumulating evidence implicating disgust in the phenomenology of particular anxiety disorders, it follows that the affective component of anxious responding towards particular stimuli is comprised of both fear and disgust. Recent research suggests that this conceptualization is particularly relevant to contamination-related OCD. Rachman (2004) defines contamination as the intense, subjective experience of directly or indirectly contacting a stimulus (e.g., a person, object, thought) appraised as contaminated, impure, or spoiled. Contamination fears are theorized to be acquired similar to the modes of acquisition in other fears and phobias (see Rachman, 1977), but most frequently through vicarious and instructional learning and less frequently through classical conditioning (Rachman, 2004). Research has consistently revealed that self-report measures of fear and disgust strongly predict contamination fear (Olatunji, Sawchuk, Arrindell, & Lohr, 2005; Thorpe, Patel, & Simonds, 2003), indicating that the affective component of contamination fear is comprised of both fear and disgust. Research has not investigated whether these emotions interact or how they may interact within the domain of contamination fears.

Disgust sensitivity (DS) and anxiety sensitivity (AS) are two specific constructs relevant to disgust and fear. DS refers to an individual’s propensity to respond to disgusting stimuli with the emotion of disgust and is commonly measured with the Disgust Scale (DS; Haidt, McCauley, & Rozin, 1994). In contrast, AS refers to an individual’s belief that interoceptive manifestations of fear (e.g., heart palpitations, feeling faint) signal imminent physical harm (e.g., heart attack) or loss of cognitive and/or affective control (Riess & McNally, 1985). Current theories define AS hierarchically with a broad higher-order general AS factor and three specific lower-order factors: fears of physical sensations, fears of cognitive sensations, and fears of social implications of anxious symptoms (e.g., Zinbarg, Barlow, & Brown, 1997; Zinbarg, Brown, Barlow, & Rapee, 2001). Additionally, Riess (1997) proposed that AS is a “fear amplification factor, so that increases in AS leads to increased fearfulness” (p. 210) and also that “AS beliefs . . . [increase] a person’s proneness to respond fearfully to a wide range of stimuli” (p. 210).

Although AS has been clearly implicated in the prediction of panic symptoms (e.g., Plehn & Peterson, 2002; also see Taylor, 1999; for a discussion of AS and its relation to psychopathology), the AS construct may have relevance for a broader spectrum of anxiety related responding. Williams, Chambless, and Ahrens (1997) found that individuals who are sensitive to bodily sensations may evidence fears of strong affective states in general, and this finding suggests that AS may encompass the fear of other emotions. The emotion of disgust involves specific aversive characteristics. Physiologically, disgust involves decreased heart rate and increased skin conductance.
دریافت فوری متن کامل مقاله

امکان دانلود نسخه تمام متن مقالات انگلیسی
امکان دانلود نسخه ترجمه شده مقالات
پذیرش سفارش ترجمه تخصصی
امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
امکان دانلود رایگان ۲ صفحه اول هر مقاله
امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
دانلود فوری مقاله پس از پرداخت آنلاین
پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات