



## Research paper

Development and validation of the Core Beliefs Questionnaire in a sample of individuals with social anxiety disorder<sup>☆</sup>

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## ARTICLE INFO

**Keywords:**  
Social anxiety disorder  
Core Beliefs  
Self-beliefs  
Assessment  
Treatment  
Psychometric

## ABSTRACT

**Background:** Prominent cognitive models of social anxiety have consistently emphasised the importance of beliefs about the self in the aetiology and maintenance of social anxiety. The present study sought to develop and validate a new measure of core beliefs about the self for SAD, the Core Beliefs Questionnaire (CBQ).

**Methods:** Three versions of the CBQ were developed: a Trait version (fundamental absolute statements about the self), a Contingent version (statements about the self related to a specific social-evaluative situation), and an Other version (statements about how others view the self in social-evaluative situations generally). The psychometric features of the scales were examined in clinical ( $n=269$ ) and non-clinical ( $n=67$ ) samples.

**Results:** Exploratory factor analysis yielded a one factor model for all three versions of the questionnaire. Total scores differentiated individuals with SAD from individuals without a psychiatric condition, and demonstrated excellent internal consistency. The three CBQ versions had positive associations with social anxiety while controlling for depression, although zero-order correlations indicated the Trait version was more strongly related to depression than social anxiety, the Contingent version was similarly related to depression and social anxiety, and the Other version was more strongly related to social anxiety than depression. Scores on all three versions of the CBQ reduced from pre- to post-treatment and this change predicted treatment outcome.

**Limitations:** This is the first validation study of the CBQ.

**Conclusions:** This study provides initial support for the reliability and validity of the CBQ.

## 1. Introduction

Social anxiety disorder (SAD) is characterised by an intense and persistent fear of social or performance situations where the individual is exposed to possible scrutiny from others (American Psychiatric Association, 2013). The disorder is common (lifetime prevalence around 12%), chronic, and debilitating (Ruscio et al., 2008; Wittchen and Fehm, 2003). In a number of existing psychological models of SAD, specific enduring maladaptive beliefs about the self in relation to social-evaluative contexts are proposed to contribute to the persistence of the disorder (Clark and Wells, 1995; Heimberg et al., 2010; Hofmann, 2007; Moscovitch, 2009; Rapee and Heimberg, 1997; Wong and Rapee, 2016; see also Gregory et al., 2016, for a review). For example, in Clark and Wells' (1995) model, such beliefs include: high standard beliefs (e.g., "I have to get everyone's approval"), conditional beliefs (e.g., "If I make mistakes, others will reject me"), and unconditional beliefs (e.g., "People think I'm inferior"). In one relatively recent model

of SAD, maladaptive beliefs about the self in relation to social-evaluative contexts, as well as maladaptive beliefs about the self that stand independent of social-evaluative context, have been emphasised. According to Moscovitch's (2009) model, an individual with SAD believes that there are flaws in aspects of their self, which may include their social skills or behaviours (e.g., "I will have nothing to say"), their control and concealment of anxiety (e.g., "I will sweat"), their physical appearance (e.g., "I am ugly"), or their character or personality (e.g., "I am stupid").

In accordance with the majority of models of SAD, researchers have developed measures that focus on capturing maladaptive beliefs about the self in relation to social-evaluative contexts (see Wong et al., 2016, for a review). There are currently several psychometrically validated measures (see Table 1). These measures of enduring maladaptive beliefs have been shown to have significant positive associations with measures of social anxiety symptoms ( $r$ s range from .38 and .85; Boden et al., 2012; Fergus et al., 2009; Gros and Sarver, 2014; Levinson et al.,

<sup>☆</sup> This research was supported by National Health and Medical Research Council Grants (192107, 434213) awarded to Ronald M. Rapee.

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**Table 1**  
Existing psychometrically validated measures of enduring maladaptive beliefs of individuals with SAD.

Measure	Description of beliefs measured	Type of belief (s) captured according to cognitive theory <sup>a</sup>	Example items	References
21-item Social Thoughts and Beliefs Scale (STABS)	Beliefs that other people are more socially competent; beliefs related to behaving awkwardly or appearing anxious in social situations	CB Type 2, IB	"Other people are bored when they are around me" (CB Type 2); "When I am in a social situation, I appear clumsy to other people" (IB)	Turner et al., 2003; see also Fergus et al., 2009; Gros and Sarver, 2014
9-item Core Extrusion Schema (CES-R)	Beliefs about revealing one's self leading to negative evaluation	IB	"If I said what I really think, people would probably reject me" (IB)	Levinson et al., 2015; see also Rodebaugh, 2009
15-item Self-Beliefs related to Social Anxiety (SBSA)	Three maladaptive belief types based on the Clark and Wells (1995) model of SAD: high standard beliefs, conditional beliefs, unconditional beliefs	CB Type 2, IB	"People think I'm inferior" (CB Type 2); "If I make mistakes, others will reject me" (IB)	Wong and Moulds, 2011; Wong et al., 2009; see also Wong and Moulds, 2009
9-item Maladaptive Interpersonal Belief Scale (MIBS)	Interpersonal beliefs related to SAD	CB Type 1, CB Type 2, IB	"I am lovable" [reverse scored] (CB Type 1); "People like me" [reverse scored] (CB Type 2); "If people knew how nervous I get, they would think I was weird" (IB)	Boden et al., 2012

<sup>a</sup> CB Type 1=Core Belief Type 1=beliefs about the self that are global, generalised, and absolute; CB Type 2=Core Belief Type 2=beliefs about the self that reflect the (perceived) perspective of other people and are therefore relatively less global, generalised, and absolute; IB=Intermediate Beliefs=beliefs about the self that are contextualised in social-evaluative situations and are therefore even less global, generalised, and absolute.

2015; Rodebaugh, 2009), with some studies also showing this relationship to be independent of depression levels (Wong and Moulds, 2011; Wong et al., 2014).

Interestingly, when the beliefs contained in these measures are examined more closely, it is evident that there are degrees to which these maladaptive beliefs about the self include a social-evaluative context. A framework that allows the categorisation of such beliefs can be found in cognitive theory (Beck, 2011; Clark and Beck, 1999). In cognitive theory, core beliefs about the self, irrespective of social-evaluative context, are considered to be the most fundamental level of cognition, reflecting global, generalised, and absolute statements about the self. Stable negative core beliefs are typically thought to characterise individuals with depression, and although individuals with SAD can also hold negative core beliefs, their core beliefs are thought to be less stable (i.e., activated typically by social-evaluative situations; Clark and Wells, 1995). In contrast to core beliefs, intermediate beliefs are proposed within cognitive theory to capture rigid context-dependent attitudes, rules, and assumptions related to the self. Applying this framework to existing measures of maladaptive beliefs for SAD, it is evident that there is one measure that captures core beliefs about the self (see Table 1; designated as Core Beliefs Type 1). Three measures capture beliefs about the self that are similar to core beliefs but reflect the (perceived) perspective of other people, and so are relatively less global, generalised, and absolute (see Table 1; designated as Core Beliefs Type 2). Finally, all existing measures capture beliefs about the self that are contextualised in social-evaluative situations and these beliefs are the least global, generalised, and absolute of all the beliefs assessed (see Table 1; designated as Intermediate Beliefs).

It is clear from the current literature that there is no comprehensive and dedicated measure of core beliefs about the self for SAD. The current study therefore aimed to develop and validate such a measure, referred to as the Core Beliefs Questionnaire (CBQ). To reflect the hierarchy of beliefs in cognitive theory and comprehensively capture beliefs over a range of social-evaluative contexts, the CBQ has three versions: a Trait version (fundamental absolute statements about the self), a Contingent version (statements about the self related to a specific social-evaluative situation), and an Other version (statements about the self related to social-evaluative situations generally). In relation to models of SAD, the three versions of the CBQ capture beliefs that are most closely related to the unconditional beliefs of Clark and Wells' (1995) model.

Given there is no prior analysis of the factor structure of the three versions of the CBQ, we aimed to conduct exploratory factor analyses (EFA) on the three measures. Considering the relative homogeneity of the items, we predicted that all three versions of the CBQ would exhibit single factor structures. We also aimed to determine the internal consistency, construct validity, and response to treatment of the three versions of the CBQ. Based on previous research (Wong et al., 2014), we predicted that all three versions of the CBQ would be positively associated with social anxiety symptoms even when controlling for depression levels. Additionally, based on the role of absolute beliefs in depression, we predicted that the Trait version would be more strongly related to depression levels than social anxiety levels while the Contingent and Other versions would be more strongly associated with social anxiety levels than depression levels. We further predicted that the three versions of the CBQ would be able to discriminate individuals with SAD from non-clinical control individuals. Finally, we predicted that scores on the three versions of the CBQ would decrease for individuals with SAD following a course of cognitive-behavioural therapy (CBT).

## 2. Method

### 2.1. Participants

The clinical sample consisted of 269 (127 female) adults participat-

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