



# Mental contamination in the “dirty kiss”: Imaginal betrayal or bodily fluids?



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## ABSTRACT

It has been suggested that an act of a betrayal by a trusted person is a particularly important “violation” which can lead to feelings of “mental contamination”. Most experimental research has used an imaginal task referred to as the “dirty kiss” (an imagined scenario of a non-consensual kiss). The theoretical emphasis in these studies has been on the element of betrayal; however, prominent in the imaginal task is that it involves contact and saliva. The aim of the present study was to disentangle these elements. Female participants ( $n=80$ ) were randomised to one of four conditions involving betrayal and contact/no contact. They imagined themselves as either receiving a non-consensual kiss from a friend or a stranger, or having a valued personal belonging stolen by a friend or a stranger. The betrayal manipulation was effective. Participants who imagined a non-consensual kiss reported the greatest feelings of mental contamination, irrespective of their relationship to the perpetrator. Violations not involving imagined physical contact did not result in feelings of contamination whether or not betrayal was evoked. It is concluded that imagined physical contact but not imagined betrayal is important in evoking feelings of contamination in this procedure.

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## 1. Introduction

Obsessions focused on the fear of contamination have been found to be one of the most common forms of obsessions within OCD. Several studies have reported that around half of the participants in their clinical samples had fears of contamination (Rasmussen & Eisen, 1992; Rachman & Hodgson, 1980). Rachman (2004) defines contamination as a powerful and persistent feeling of having been infected as a result of direct physical contact with an object that is perceived to be contaminated. Rachman (2006) has also proposed that some contamination fears arise in the absence of direct physical contact; and describes this as “mental contamination” (MC) which is said to lead to a feeling of “internal or emotional dirtiness” (Herba & Rachman, 2007, p. 2805).

MC has been hypothesised to arise after a transgression which leaves an individual feeling betrayed, humiliated, ashamed, disgusted or violated and to lead to urges to wash (Coughtrey, Shafan, Lee & Rachman, 2012). At its simplest, individuals suffering from mental contamination may engage in washing not because they are dirty, but rather because they have been “treated like dirt”. Additionally, the perpetrator of the betrayal can in some cases become the source of the contaminant (Rachman, 2010).

Rachman (2006) highlights two key features that differentiate mental contamination from contact contamination; firstly that it generates a sense of internal intangible dirtiness, and secondly that it comes from a human source. Mental contamination has been associated with a number of triggers; it has been thought to be associated with immorality, for instance events that are perceived by the individual as wrong or inappropriate can generate symptoms of mental contamination (Elliott & Radomsky, 2009). This immorality can originate from the actions of the human source that has caused the individual harm, or it can be self-generated if an individual feels they have violated one of their own moral standards, or if their mind is generating unacceptable thoughts or images (Rachman, 2006; Coughtrey et al., 2012).

Fairbrother, Newth and Rachman (2005) used the paradigm of the “dirty kiss” in an analogue (non-clinical) sample. Female undergraduate students were asked to listen to a recording of an imagined scenario that involved them in a consensual kiss with a man they were attracted to. Participants were then randomised to either listen to the consensual kiss scenario again or to listen to an imagined scenario that involved them in a non-consensual kiss, in which the man forces a kiss upon them. Those in the non-consensual condition reported feeling significantly more dirty on both the outside and inside, felt more immoral and ashamed and reported a greater urge to wash.

Herba et al. (2007) further examined vulnerability to mental contamination by randomising female undergraduate participants

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to listen to a recording of an imagined scenario that involved them in a non-consensual kiss with an undesirable man or a consensual kiss with desirable man. Participants in the non-consensual condition reported stronger feelings of dirtiness and urge to wash with 27% of participants in this group rinsing in response to the experiment.

Elliott et al. (2009) conducted a similar study differentiating between receiving a consensual or non-consensual kiss from either a moral or immoral man. Participants in the non-consensual moral condition and non-consensual immoral conditions did not significantly differ in reported feelings of dirtiness or urges to wash but they reported significantly greater feelings of dirtiness and urge to wash than participants in the consensual immoral condition. Participants in the consensual immoral condition reported significantly greater feelings of dirtiness and urges to wash than those in the consensual moral condition.

Following on from their 2009 study Elliot and Radomsky (2012) conducted a similar study which aimed to tease apart the manipulations of the physical description of the imagined protagonist by asking participants to imagine either a physically clean or dirty man who carried out either a consensual or non-consensual kiss. Participants who were asked to imagine the non-consensual kiss from a dirty man reported the greatest feelings of mental contamination however participants who were asked to imagine a non-consensual kiss from a clean man also experienced mental contamination to a similar extent on a number of the key dependent variables reported in this study.

The question of whether the perpetrator of an imagined non-consensual act can experience feelings of mental contamination in the same way as the victim was explored by (Rachman, Radomsky, Elliott & Zysk, 2012). In a series of 4 related experiments male undergraduate participants were randomised to imagine themselves at a party at which they gave a female a consensual or non-consensual kiss. New elements were added to the scenarios with the progression of experiments, aimed at heightening the effect of the procedure (Rachman et al., 2012). The theme of betrayal was made prominent in experiment 3 of the series, by asking participants to imagine that following the kiss they deny that the kiss was their idea and that they blame the woman in front of others. The participants were asked to imagine that the woman in the scenario was the sister of their best friend, who consequently tells the participant they have 'betrayed' them. Participant's feelings of contamination and urges to wash increased with the progression of the experiment and the largest increase was following the experiment in which elements of betrayal were made prominent (Rachman et al., 2012). This study demonstrated that feelings of mental contamination can also be evoked in the perpetrator of an imagined non-consensual act as well as the victim.

Although it can be concluded from the work on the "dirty kiss" paradigm that betrayal may be key to the experience of mental contamination, there is an obvious issue in that participants were asked to visualise being kissed, which clearly involves imagining elements of contact contamination and bodily fluids. Feelings of dirtiness may have been a response to the imagined idea of physical contamination rather than issues of betrayal and moral violation. Rachman (2010) defines betrayal as "a sense of being harmed by the intentional actions, or omissions, of a person who was assumed to be a trusted and loyal friend, relative, partner, colleague or companion" (p. 304).

When considering Rachman's (2010) definition of betrayal, in light of previous studies, (Fairbrother et al. . 2005; Herba et al., 2007; Elliott et al. 2009, 2012) the participants' relationship to the imagined male perpetrator is not specified, the perpetrator is described only as a 'man'. It is only in Rachman et al. (2012) study examining the effect on the perpetrator, that a relationship between the perpetrator and victim is made explicit. Rachman's

(2010) definition of betrayal suggests that the act is carried out by a trusted or loyal friend, and subsequently an event like this is more likely to generate feelings of mental contamination compared to a violation carried out by a stranger. In this study we are primarily concerned with the victims perceived relationship to the perpetrator and potential consequent betrayal.

We believe it is important to distinguish between two issues in this area; firstly, the extent to which an imagined violation involving betrayal by a trusted person is different from that by someone who is not trusted by the victim. Secondly, the relative importance of an imagined act of violation involving imagined physical contact with the person including contact with their saliva and an imagined act of violation not involving contact. The present study evaluates both factors by comparing an imagined non-consensual kiss with an imagined theft of an important valued item by either a trusted person or a stranger. The impact that feelings of betrayal have on feelings of mental contamination, specifically feelings of dirtiness and urges to wash are examined. We hypothesised that the important element in the "dirty kiss" experiments is the imagining of kissing rather than the element of betrayal; we therefore compared high vs low betrayal and unwanted kissing vs non-contact betrayal (theft).

## 2. Method

### 2.1. Participants

Female students and employees at the University of Bath ( $n=80$ , mean age 21.56, SD 4.79, range = 18–43) participated in this study. Sixty-six participants were undergraduate students, 4 were postgraduate, and 10 were in full-time employment. Participants were randomly assigned to one of four imagined conditions in a  $2 \times 2$  design; Non-consensual kiss by a stranger (KS,  $n=22$ ), Non-consensual kiss by a friend (KF  $n=19$ ), Theft by a stranger (TS,  $n=20$ ), Theft by a friend (TF,  $n=19$ ).

*Measures Patient Health Questionnaire (PHQ-9)*: The PHQ-9 assesses the severity of depression symptoms over the past two weeks. A PHQ-9 score greater than or equal to 10 was found to have a sensitivity of 88% (Kroenke, Spitzer & Williams, 2001).

*General Anxiety Disorder Assessment (GAD-7)*: This scale assesses the severity of generalised anxiety disorder symptoms. The scale has a sensitivity of 82% for generalised anxiety disorder specifically when using a threshold score of 10 (Kroenke, Spitzer, Williams, Monahan, & LöWe, 2007).

*Obsessive Compulsive Inventory (OCI)*: This is a self-report inventory for assessing symptoms of obsessive-compulsive disorder. The OCI has been found to have excellent reliability and validity, and is able to distinguish well between those who have OCD and those who do not (Foa, Kozak, Salkovskis, Coles & Amir, 1998).

*Vancouver Obsessional Compulsive Inventory – Mental Contamination Scale (VOCI-MC)*: (Rachman, 2006): This is a 20 item scale measuring aspects of mental contamination. Participants rate each item e.g. "Having an unpleasant image or memory can make me feel dirty inside" on a five point scale from 0 = 'not at all' to 4 = 'very much'. The VOCI-MC has high internal consistency (Cronbach's  $\alpha$  0.94; Rachman, 2006).

*Mental Contamination Report (MCR)*: The MCR for this study is a 19-item adapted questionnaire based on previous Mental Contamination Reports administered by Elliott and Radomsky (2009). The questionnaire assesses participants ease and vividness of imagining the scenario, feelings of dirtiness and its location, associated urges, level of perceived responsibility and blame and questions about previous experiences. The report was identical for all conditions; however, the last three questions which ask about previous experience, differed depending on whether or not the

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