



## Evidence for disgust sensitivity mediating the sex differences found in blood-injection-injury phobia and spider phobia

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### Abstract

Due primarily to high prevalence rates and the potential debilitating effects of specific fears, additional research is needed to examine potential causal factors of specific phobias. Studies have consistently found positive associations among disgust sensitivity (DS) and both blood-injection-injury (BII) and spider fears. Additionally, women, compared to men, consistently report elevated levels of DS and specific fears. Consequently, previous researchers have suggested that DS serves as an influential mediator of the sex differences in several specific phobias. As such, the current study's aim was to evaluate the potential role of DS as a mediator of the sex differences in BII and spider fears, while controlling for spurious factors (i.e., trait anxiety and negative affect). Using an undergraduate sample ( $N = 179$ ), the mediation test results provide strong evidence indicating that DS, independent of trait anxiety and negative affect, is a potent mediator of the sex differences in BII and spider fears. The current results implicate DS as a potential diath-

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esis/maintenance factor for BII fears and spider fears, and suggest consideration of individually tailored treatment protocols aimed at the amelioration of salient emotion dimensions.

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## 1. Introduction

Researchers have hypothesized that the emotion of disgust assumes a functional role in numerous aspects of human development (e.g., Rozin & Fallon, 1987). Mounting evidence suggests that disgust is readily acquired, with demonstrations of one-trial learning (e.g., Rozin, 1986), and a slower to extinguish than fear responding (e.g., Olatunji, Smits, Connolly, Willems, & Lohr, 2007; Smits, Telch, & Randall, 2002). These findings suggest a potentially influential role of disgust in psychological disorders. Specifically, several studies have implicated disgust sensitivity (DS) in the etiology and maintenance of blood-injection-injury (BII) phobia and spider phobia (Davey, 1992; Olatunji, Cisler, Meunier, Connolly, & Lohr, 2007; Tolin, Lohr, Sawchuk, & Lee, 1997).

The phenomenology associated with BII and spider phobia can negatively impact functioning in numerous situations (e.g., medical visits, sleep, etc). In particular, phobic reactions to BII and spider stimuli may result in negative physical, social, or psychological consequences resulting in avoidance or escape of necessary medical attention, experiencing embarrassment (e.g., fainting), or significant distress (e.g., nightmares). Traditional conceptualizations of anxiety disorders have focused on fear mediated avoidance (e.g., Mower, 1960). However, Matchett and Davey (1991) proposed that several specific phobias may function according to a disease avoidance model. Accordingly, one mechanism by which specific fears may manifest is through the fear of contamination and avoidance of disgust-relevant stimuli which may compromise the individual's physical well-being (e.g., Schienle, Start, Walter, & Vaitl, 2003). In line with the disease avoidance model, several researchers have since suggested that DS may operate as a vulnerability factor for spider (Mulken, de Jong, & Merckelbach, 1996) and BII (Olatunji, Smits, et al., 2007) fears.

To date, numerous empirical studies have evaluated the disease avoidance model of specific phobias (e.g., Olatunji, Cisler, et al., 2007; Sawchuk, Lohr, Tolin, Lee, & Kleinknecht, 2000). Specifically, studies have found support for disgust, independent of fear, to predict behavioral avoidance of both BII (e.g., Olatunji, Connolly, & David, 2007) and spider stimuli (Woody, McLean, & Klassen, 2005). Indeed the current literature suggests that DS functions within an etiological and maintenance capacity in psychological disorders. As such, one avenue by which DS may function is through sex differences commonly found in anxiety disorders.

Systematic research on the role of sex differences in DS may broaden our understanding of the development of several anxiety disorders including specific phobias. In a concise review, Craske (2003) detailed current evidence implicating adolescence as a salient developmental period for women to develop anxiety disorders at a relatively greater rate than men. Several environmental factors within adolescence are emphasized as likely etiological factors contributing to the sex differences in anxiety disorders. Specifically discussed are sex-specific socialization effects and psychosocial stressors, among others. Operating from a stress-diathesis framework, it is conceivable

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