



Fear of self and obsessionality: Development and validation of the Fear of Self Questionnaire



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ABSTRACT

Obsessions – particularly those directly relating to causing harm – often contain or imply evaluative dimensions about the self, reflecting a fear as to who the person might be – or might become. Following from research indicating that such beliefs are relevant to OCD, and the wider literature in social psychology regarding ‘feared’ or ‘undesired’ self-guides, the current study describes the development and validation of a new questionnaire—the Fear of Self Questionnaire, in 8- and 20-item versions. The questionnaire was piloted in two non-clinical samples ($n=258$; $n=292$). Exploratory and confirmatory factor analyses supported the unidimensionality of the measure. The questionnaire showed a strong internal inconsistency, and good divergent and convergent validity, including strong relationships to obsessional symptoms and with other processes implicated in cognitive models of OCD (e.g. obsessive beliefs, inferential confusion). Implications are discussed.

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1. Introduction

In the last few decades, cognitive-behavioural theories have led to considerable advances in our understanding of Obsessive-Compulsive Disorder (OCD). These models often emphasize the role of beliefs and appraisals in the development and maintenance of OCD (Rachman, 1997, 1998; Salkovskis, 1985, 1999) and are associated with effective treatment (Steketee, 1993). Cognitive-behavioural models suggest that obsessions find their origin in normal intrusive phenomena, which if appraised negatively, may give rise to negative affect along with compulsive behaviours, neutralizing activities and avoidance. For example, a thought that “I may have left the stove on” would lead to negative affect and neutralizing behaviours if the individual had the appraisal that “The house will burn down and I’ll be to blame”, but not if they appraised it as “What a strange thing to think; I’m probably just overworked” (Doron & Moulding, 2009). In other words, it is only if intrusive thoughts are appraised as threatening, or otherwise significant, that the person may engage in compulsive behaviours to neutralize these thoughts and/or the implications of the

misappraisal. However, this also raises the question of why some intrusions are appraised as significant whereas others are not (Doron, Kyrios, & Moulding, 2007).

For any given individual, intrusions and obsessions often revolve around a specific theme, where the person experiences obsessions in one particular area of life, but not in another (Rachman, 2003). The thematic nature of obsessions suggests that there are other cognitive factors that may underlie the particular appraisals that are made (Doron & Kyrios, 2005). In particular, several OCD researchers have proposed that the escalation of intrusive thoughts into obsessions linked to the extent to which intrusive thoughts threaten core perceptions of the self (e.g., Bhar & Kyrios, 2007; Clark & Purdon, 1993; Rowa, Purdon, Summerfeldt, & Antony, 2005). Likewise, others have suggested that self-themes and those areas of life where the person distrusts their own self render a person vulnerable to a particular selective set of obsessional doubts (Aardema & O’Connor, 2007; O’Connor, Aardema & Pélissier, 2005). In the current article, we examine the hypothesis that “fear of self” perceptions may be linked with obsessive compulsive (OC) symptoms and cognitions.

Recent cognitive models of OCD have focused on self-perceptions that would lead to sensitivity to intrusions (see Doron & Kyrios, 2005). For instance, Purdon and Clark (1999; Clark, 2004) proposed that the ego-dystonicity of intrusive

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thoughts may play a crucial role in the development of obsessions. They hold that unwanted intrusive thoughts that are contrary to the person's self-view are more likely to be interpreted as significant and threatening. Similarly, an ambivalent or fragile self-view has been proposed to increase the likelihood that intrusions are interpreted as threatening, thereby exacerbating symptoms (Bhar & Kyrios, 2007; Clark, 2004). As noted by Mark Freeston and Robert Ladouceur, "It is no coincidence that we typically see harming obsessions among gentle people, religious obsessions among religious people, thoughts about sexuality among highly moral people, and thoughts about mistakes among careful people: the more important something is, the worse it seems to have a thought about it" (Freeston & Ladouceur, 1998, p. 141).

Doron and Kyrios (2005; Doron, Kyrios, & Moulding, 2007; Doron, Moulding, Kyrios, & Nedeljkovic, 2008) have argued that highly valued self-domains where the person lacks confidence may contribute to sensitivity to intrusions. Intrusive thoughts that threaten these "sensitive" self-domains are more likely to become the object of appraisal, preoccupation and anxiety. Aspects of self that have been implicated include social acceptance (Rachman, 1997), job competence (cf. Salkovskis, Shafran, Rachman, & Freeston, 1999) and morality (Rachman & Hodgson, 1980), and sensitivity in these domains significantly relate to higher levels of OC symptoms (Doron et al., 2007, 2008). Experimental studies also show that threat to specific self-domains (e.g., morality or relationships) may result in an increase in thematically-related (e.g., contamination and relationship-centered) obsessive-compulsive behavioural tendencies (i.e., Doron, Sar-El, & Mikulincer, 2012; Doron, Szepesnwol, Karp, & Gal, 2013). Given the above, it is no wonder that many individuals struggling with personally significant obsessions go to great lengths to conceal their thoughts from others (Newth & Rachman, 2001).

Clinically speaking, the importance of specific self-themes in relation to OC symptoms is perhaps most evident in obsessions without overt compulsions, in particular those revolving around blasphemy, sexuality and aggression (Aardema & O'Connor, 2003, 2007). Often, the content of these obsessions is self-referential, containing faulty evaluative dimensions about the self, reflecting a fear as to what the self might be or might become ("I might be a murderer"; "I might be a sexual deviant"; "I might be crazy"). Indeed, Rachman (1997) suggested that individuals with OCD catastrophically interpret the content of intrusions as revealing hidden aspects of their own character. Thus, the appraisal of intrusions directly ties in with a fear of the self, either in terms of sensitivity to intrusions in this domain, or as a belief guiding the appraisal of intrusions.

In their inferential-confusion model of OCD, Aardema and O'Connor (2007) suggested that a fear of self or a distrust of self acts as a vulnerability factor that influences the content of blasphemous, sexual and aggressive obsessions. They argued that obsessions come about through a reasoning process termed "inferential confusion" where the person confuses an imagined reality (or an imagined feared self) with actual reality (or an actual self). For instance, a person may describe the following thought sequence, "I want to be a good mother...What if I'm a bad mother...If I'm a really bad mother I may suffocate my own baby...I just thought of suffocating my baby...I'm a terrible person and capable of suffocating my baby...I might think again of suffocating my baby...I just thought again of suffocating my baby..." (Aardema & O'Connor, 2007, p. 30). In such cases, the person confuses thinking about the possibility of the thought with thoughts that contain motivated intent with negative potential self-themes underlying the obsessional narrative.

Regardless of the exact nature of the obsessional sequence, be it appraisal-based cognitive theories or inferential confusion models,

fear of self-concerns are implicated in the development and/or maintenance of egodystonic obsessions. There is empirical support for the relationship between fear of self and OCD. Ferrier and Brewin (2005) found that those with OCD are more likely to draw negative conclusions about themselves on the basis of intrusions, compared with non-clinical and anxiety disorder controls, reflecting a feared self that is bad, immoral and insane. Likewise, Riskind, Ayers and Wright (2007) found that fleeting thoughts and images that do not justify a particular inference about the self are nonetheless often viewed by the person with OCD as evidence that they may perhaps be a dangerous person. Furthermore, this construct is tied directly to the greater literature from social psychology and personality regarding the structure of the self (e.g., Higgins, 1987). In particular, Markus and colleagues discussed another possible "self-guide" – "the feared self" – which is a set of qualities concerning the "me" that the person does not want to become, while they remain concerned that this could transpire (Markus & Nurius, 1986; Oyserman & Markus, 1990). Carver and colleagues suggested that actual-feared self-discrepancies may be more closely linked to avoidance processes whereas self-discrepancies between actual self and "who I ought to be" are linked to approach behaviours (Carver Lawrence, & Scheier, 1999). They suggested that the relative influence of the feared-self vs. the ought-self relates to which of these guides the individual believes they are closer to—the feared self tends to dominate anxiety when individuals perceive themselves as possibly becoming it. This literature is particularly germane in the case of OCD, as the literature cited above and clinical experience suggests that feared self is a central clinical feature of those with OCD, particularly for those suffering from obsessions about causing harm.

Yet, despite its recognized importance, there is currently no measure that directly targets a fear of self. There are cognitive measures that emphasize beliefs and appraisals such as importance given to thoughts or control of thoughts (e.g. *Obsessive Compulsive Cognitions Working Group*, 2005), occasionally reminiscent of a fear of self in terms of the manner in which a person may interpret their own thoughts, but the construct is not currently measured as an independent vulnerable theme directly relating to the self. Likewise, Bhar and Kyrios (2007) have developed a measure of self-ambivalence – a preoccupation with a dichotomous and changeable view of self – that is likely a related, but distinct, construct. The notion of a fear of self does not automatically imply ambivalence about the self, even though one might still expect the feared self to stand in opposition to the person's actual self. Experimental studies have shown the construct to be relevant to OCD in terms of the appraisal of intrusive thoughts, but a psychometric measure of fear of self that is independent of the interpretation of intrusive thoughts is lacking in the literature. While the construct has been captured in social and clinical literature (e.g., Carver et al., 1999; Ferrier & Brewin, 2005; Heppen & Ogilvie, 2003), these studies have tended to rely on idiosyncratic measures where individuals create self-descriptors, making them difficult to utilize in large scale studies relating to OCD. A psychometric measure directly targeting a fear of self is expected to have both research and clinical utility, and in turn, help to further improve our understanding of OCD.

The current article describes the development and validation of a new questionnaire measuring fear of self. It addresses the potential relevance of fear of self to OC symptoms, and also attempts to clarify some of the purported relations between self-concepts and appraisals. Two studies utilizing North American and Australian student and community populations are presented which describe the development and validation of this new questionnaire (study 1 and study 2, respectively). Both studies investigated the relationship of the questionnaire with other cognitive measures and symptoms of OCD, to assess the

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