# Anxiety and the Social: A Critical Standpoint on Content-Structure related Meaning

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**Abstract:** The study of anxiety through the lens of the social has majorly limited itself to understanding influences and consequences of anxiety. This paper examines anxiety as an emotion in psychological science, and evaluates the representation of the social in content-structure aspects of anxiety. The tendency to categorize constructs in discrete categories has long existed in Psychology. This approach has led to isolating social anxiety as a separate category from the source trait of anxiety, as seen in measures of general anxiety. The idea of conceptualizing specific anxieties such as social anxiety, separation anxiety serves a purpose in the field of psychology. However conceptualising and measuring the construct of anxiety in general has largely ignored broader aspects of an individual as a social being. A striking similarity can be inferred in the approach to categorize the experience and meaning of anxiety and the medicalpathological approach to categorize disorders. Both of which largely focuses on the physiological, cognitive and behavioral representations which are found in content of measures as well as symptoms of syndromes. This paper makes a cause for a multidimensional approach to the measuring of anxiety, with a focus on including broader aspects of the social into the content domain of general anxiety.

Key words: Anxiety, Emotions, Social, Content, Structure, Syndromes

The tradition of studying emotions and emotionality has long been one of the central aspects of psychological research and psychology as a discipline. Emotions in psychology are primarily understood to be mental states or processes associated to physiological, cognitive and behavioral processes, rather than a broader social construct. On the other hand the area of sociology of emotions lay emphasis upon how emotions are influenced by individuals position in social structures, and also their culture, which does not only influence their cognitive appraisal

and emotional arousal, but also provides a script on how and when to express our emotions and the nature of its consequences in an interactive space (Stets & Turner, 2008).

Anxiety as an emotion can be understood as "an aversive, cognitive-affective reaction characterized by autonomic arousal and apprehension regarding impending potentially negative outcomes" (p.67, Leary, 1983). Social influences and consequences of anxiety as developmental conditioning and learning, triggers and cues, context and situations, antecedents or cause and effects have been discussed through theory and research in psychology. However the setting of boundaries to the construct of anxiety and its semantic components has been cognized through its content and structure analysis in psychology. Such analysis of content and structure are presented in measures, structural models and symptoms of syndromes. This paper evaluates anxiety as an emotion in psychological science, and examines the representation of the social in content-structure aspects of anxiety.

## What is the Social? And why is it important in Anxiety?

Early psychodynamic, experiential and existential traditions in psychology have recognized the influence of social aspects such as the norms, power, isolation, rejection, separation, exclusion as a part of the experience of anxiety. For e.g. Sigmund Freud (1924) conceptualized the conflict between human desires represented in the id and social values, norms and prohibitions, represented in the superego as moral anxiety. While he looked at neurotic anxiety as experienced when the ego which represents balance and ones rational side, feels that it will lose control over the desires of the id, which in turn would lead to social consequences. Freud's neurotic anxiety remained the core of anxiety conceptualization till the late 1970s and found prominence in the framing of anxiety neurosis till DSM- II. Contemporary psychoanalyst Jules Masserman (1965) linked anxiety to social stress where, in his conceptualization of 'anxiety as a narcissistic fear' he highlights aspects of the socially unknown, unaccustomed, unpredictable and uncontrollable. Psychodynamic literature has also explained how repressed relationship conflicts, fear of separation, socially pressures and socially threatening experiences manifests in anxiety. Through the experimental method behaviorist have tried to explain how anxiety is socially conditioned. While existential psychologists like Irvin Yalom speak about how the awareness of one's sense of isolation as a part of our being, can make us experience

deep levels of anxiety. It is apparent how classical theorists in the field of psychology gave social aspects and processes its due weight in understanding the experience of anxiety.

Misra (2014) argues that the nature and experience of emotions cannot be viewed in vacuum. It needs to be related to an individual's appraisal of their socio-cultural context, and the form of behaviors and patterned responses that operate within a social system. Its interesting to note that when we compare the three major theories of emotional experience i.e. James-Lange, Cannon-Bard and Satcher-Singer, the common factor that remains constant is cognitive appraisal of the environment i.e. perception and interpretation of the environment (see Bystritsky & Kronemyer, 2014). By environment here we are also referring majorly to the social environment

Our cognitive appraisal is also influenced by the effect of cultural beliefs and social learning's on our schemas through which we interpret situations as anxiety provoking. Hence even though the physiological, cognitive and psychological aspects of anxiety may be universal, the meaning of the intrapersonal and interpersonal experience is determined by socio-cultural factors such as social meanings, roles, situations and cultural practices (Kirmayer et al., 1995). For e.g. an individual has a natural tendency to escape shame, as it is threatening to the self and hence may be a cause of anxiety. However what is considered as shameful is defined by the socio-cultural ideals one lives with, which ultimately shapes up our belief that a certain action on the part of the individual or occurrence of a certain type of event can lead to shame.

When we think of the social in context of anxiety, the area of social anxiety holds prominence in contemporary research. However later in our discourse we will highlight how the scope of its content is limited and also the conceptual issues which come along with it. Hence it becomes important to rethink the 'social' in the content domain of anxiety. Different elements relating to interactional, group involvement or performance contingencies, such as fears, apprehensions, or avoidance of social situations or social interaction, fear of meeting strangers, fear of evaluation, conscious of being observed and being tensed about performing in front of others are important to consider. Some aspects of separation anxiety such as worrying about losing close ones, ending up being alone, etc. and aspects of social appearance anxiety which may include 'fear of how I appear to others' or 'being concerned about others find you unattractive' etc. can also be considered in the content domain. Similarly anxiety arising out of fear of authorities and those in power positions also become an important inclusion, especially in cultures where the power distance is high. Anxiety is also experienced as a result of rigid

socializations processes such as concerns about not being able to fulfill one's social roles, familial roles, being worried about not living up to expectations of others or disappointing others and also fearing ridicule or humiliation for being non-conformist. Anxiety may also arise from perceived threat, risk, peril or danger (Hunt, 1999) with one's anticipation of discrimination, abuse, violence, stigmatization, stereotyping, exclusion or even social change. These sociocultural aspects define the manner in which we understand the experience of anxiety as an active social being functioning in a cultural ethos. Hence social aspects should not be viewed only as situational factors that elicit anxiety (Endler, 1997).

### Content-Structure Representations in Psychological Measures of Anxiety

The study of anxiety as a psychological trait and the simultaneous examination of it as a construct in the psychometric tradition in psychology led to the attempts to define and appropriate the content domain on anxiety, understand anxiety as trait v/s state, unidimensional v/s multidimensional and the debate of conceptualizing it in terms of categories or a continuum. However along with general anxiety scales, there also existed many other context driven specific anxiety scales such as social anxiety scales (Turner et al., 1989; Inderbitzen-Nolan & Walters 2000), social appearance anxiety scale (Hart et al. 2008), fear of negative evaluation scale (Leary, 1983; Watson, 1969), social avoidance and distress scale (Watson, 1969) etc. Based on Allport's (1937) conceptualization of a 'trait', trait anxiety can be understood to be a general overarching and relatively stable predisposition towards anxiety proneness. On the other hand categories such as social anxiety, separation anxiety etc. dwell upon context specific yet relatively stable conceptualizations of anxiety. Psychologists can simply view these as an attempt to understand and measure specific constructs, to serve a specific purpose. However the question here is not whether specific constructs such as social anxiety are needed and if the measurement of same is important. As the discipline of psychology tries to address human problems, examining factors that inhibit or causes distress in social functioning is necessary. The issue here still remains is the absence of social aspects while appropriating the content domain and measuring the construct of general anxiety is justified or necessary. An examination of many commonly used anxiety scales tell us about the nature of items sampled in the content domain of anxiety.

In the Hamilton Anxiety Scale, factor analysis yielded a two-factor structure of 'psychic symptoms' and 'somatic symptoms' (Hamilton, 1959). Psychological factors included worries, anticipating the worst, tension, inability to relax, fears, poor concentration, insomnia etc. And under somatic it looked cardiovascular symptoms, respiratory symptoms, sensory and muscular symptoms, gastrointestinal symptoms etc. This scale despite giving a comprehensive account of 88 elements of anxiety under 15 variables, did not account for social aspects; except for three elements under the variable of fear i.e. fear of strangers, fear of crowds and fear of being left alone.

The Clinical anxiety scale (Westhuis and Thyer, 1989) had most items which represent psychological aspects of anxiety and very few items which represent the physiological aspects of anxiety. This scale however had 4 items out of 25 items which measured social fears. These included being uncomfortable in a crowd, fear of and avoiding being alone, fear of and avoiding a social situation, and being afraid that one will faint in public. The Taylor manifest anxiety scale (Taylor, 1953), one of the oldest and commonly used scale, had only two items out of 50 items that represented social aspects. These included 'being afraid of someone almost all the time' and 'being afraid of people, one knew could not hurt them'. The rest of the items could be classified as either psychological or physiological.

Several scales were specifically designed to just measure cognitive and somatic content of anxiety such as the Cognitive Somatic Anxiety Questionaire (Schwartz et. al. 1978) and State-Trait Inventory for Cognitive and Somatic Anxiety (Ree et. al. 2008). The somatic and the cognitive are very distinct modalities of human functioning. Hence it would be only natural to yield good fit indices through factor analysis. The only social aspect which was covered in the second scale was one item on social approval i.e. 'I think that others would not approve of me', and was classified under the cognitive domain. Zung (1971) developed two measures of anxiety. The first one, Anxiety Status Inventory (ASI), which was an observer rating scale, and included 5 affective and 15 somatic symptom items. The second self-rating anxiety scale (SAS) has 7 psychological and 13 somatic items. The Beck's Anxiety Inventory (Beck et al., 1988), one of the most used anxiety inventories has 15 items which are somatic in nature and divided into neurophysiological, panic and autonomic scales, while 6 items were classified under subjective (psychological) scale.

Endler et al. (1991) strongly advocated the idea that anxiety was a multidimensional concept, rather than looking at it as a unidimensional concept, as most authors discussed earlier did. Endler's Multidimensional Anxiety Scales (EMAS) did cover a dimension on apprehension of social evaluation in its trait measure, apart from somatic and cognitive factors. However firstly, social evaluation is only one aspect of social anxiety. Secondly as discussed earlier, social anxiety in itself is a very narrow representation of what can be covered under the 'social aspects' of anxiety. It is clearly evident that social aspects of anxiety were not covered under, most of the scales of general anxiety. Even if few scales had some items, the presence was negligible. A study done by Keedwell and Sainath (1996) that inspected the items of 11 most commonly used scales of anxiety, support these observations. In their analysis they classified the items to fall under mainly cognition, mood, behavior, overarousal and the somatic. A reason for the social not being covered in the scales of general anxiety, is the availability of specific measures on social aspects of anxiety. The basic problem here is to assume that the construct of general anxiety and other constructs related to social aspects of anxiety are mutually exclusive categories.

The application of the categorical approach to anxiety has led to the idea of "many anxieties". Even social anxiety viewed as one of the many specific anxieties, is further disguised with the idea of "many social anxieties" such as speech anxiety, social evaluative anxiety, dating anxiety etc. However it would be flawed to assume a superordinate-subordinate type of hierarchical structure, usually found in many trait theories. Here the 'anxiety' is the central aspect, what changes is the contingent situation, such as anxiety before going on a date or anxiety before giving a speech etc (Leary, 1983). The somatic experience of general anxiety and social anxiety is more or less the same. What differs among the two is the nature of perceived threat. Recent fMRI studies have shown no difference in neural activity among generalized anxiety disorder and social anxiety disorder patients (Blair et al., 2012; Buff et al., 2016). However people with generalised anxiety disorder were hyper-responsive to threat-related brain activity, when comparing exposure to threatening and neutral pictures. Similar results were not found in the case of Social Anxiety Disorders (Buff et al., 2016). This indicates that general anxiety is more responsive to social threat and therefore may be acting as a source trait.

Most of the conceptualizations of social anxiety revolve around fear of social evaluation, apprehension about interactions, nervousness about audience, discomfort about social situations, self-consciousness and reticence in the presence of others (Beidel, Turner & Dancu, 1985; Leary,

1983; Turner, Beidel & Townsley, 1990). These conditions in social anxiety are limited to behaviors in social encounters, which may include a dyad or a group of individuals, formal or informal. Hence the concept of social anxiety covers only a narrow aspect of a human's existence as a social being, and therefore do not necessitate or justify the absence of social aspects of anxiety while determining the content domain of general anxiety.

### Anxiety and Anxiety Disorders: An uncomfortable juxtaposition

Another reason why categorical approach is still used to conceptualize general anxiety as a distinct entity from other specific forms of anxiety, despite several conceptual issues, is that most of the contemporary literature on Anxiety has been conjointly addressed with anxiety disorders. Such as anxiety and general anxiety disorder, and social anxiety with social anxiety disorder. There seems a similarity in approach to categorize the experience of anxiety in the same lines as the medical-pathological approach to categorize disorders.

Thomas Stephen Szasz through his prolific writings has tried to debunk this biological reductionism which is motivated to make mental and emotional issues look like physical disease. His critique can be applied to pathological ways of understanding anxiety, in which the diagnostic categories are ambiguous unlike physical-organic disease and cannot be considered as discrete categories, a problem which began from the DSM III. From here began the attempts to move from a broad and dynamic understanding of anxiety neurosis to what we referred to earlier as diagnostic categories of 'many anxieties' or 'many anxiety disorders'. Each of which were understood in terms of criteria based discrete categories.

In DSM V, to be diagnosed with a general anxiety disorder, one criterion is that the client should not be diagnosed with any other anxiety disorder such as social anxiety disorder or separation anxiety disorder. This problem also began and was persistent from the DSM III. This in a way relegated generalized anxiety disorder to being a less important condition, dependent on the diagnosis of other related anxiety disorders (Horwitz, 2013). This becomes a theoretically absurd criterion as generalized anxiety in itself is considered a parallel to the source trait of general anxiety. This is also evident with how DSM V symptom criteria on physiological and psychological aspects resemble how trait measures of general anxiety represent the content domain of anxiety we discussed earlier. In fact the idea of 'general' in generalized anxiety

disorder can be understood as that what is not specific, what Allport (1937) defined in a trait as 'generalized tendency'. Bystritsky & Kronemyer (2014) addresses this theoretical problem, wherein they elucidate that symptoms or features of a disorder are understood to co-occur together in clusters called syndromes, for e.g. social anxiety disorder or separation anxiety disorder. However all these symptoms and syndromes in actuality are parts of a higher order cognitive phenotype i.e. the construct of anxiety, wherein individual symptoms could be understood on a continuum and does not necessitate its concurrence in clusters.

Hans Eysenck one of the earliest proponents of neuroticism trait being a stable personality characteristic, mocked the medical fraternity for looking at anxiety as a categorical approach in DSM III, while anxiety was in reality multidimensional in nature (see Horwitz, 2013). More recently Endler (1997) also supported the idea of multidimensionality of anxiety, where he defines trait anxiety as "one's proneness or predisposition to feel anxious in various types of stressful situations" (p.140). His idea that different people feel anxious in different type of situations, represents his notion of multidimensionality. Here Anxiety when viewed in terms of a continuum, rather than a category represents the severe levels of anxiety, as an 'anxiety disorder' while the milder and moderate levels is what most people experience in their day to day life (Endler & Kocovski, 2001).

To conclude, the idea of viewing anxiety as multidimensional, supports the idea that different aspects of the 'social' related to social anxiety, separation anxiety, fear of authorities and those in power positions, social appearance anxiety etc. could be included into a social dimension of trait anxiety. People's responses on the measures of anxiety, are subjected to factor analytic techniques which have been majorly used to determine the structure of anxiety, and validate its multidimensionality. The underlying bias in the use of this approach is when researchers conveniently leave out the 'social' from the content. With no clear logic then, would the 'social' evolve as a dimension in the structural analysis of anxiety.

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