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Impact of Gender on Negative Affectivity

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Abstract

The aim of this study was to examine whether there is a significant difference in the negative affectivity between Males and Females. The sample (N=89 where there were 44 males and 45 females) was chosen using the quota sampling method to represent four different districts in Sri Lanka. The negative affectivity was assessed using the Negative affectivity subscale of the Positive and Negative Affectivity Schedule (PANAS). The analysis of data was carried out using Parametric statistical procedures after the normality was established and the independent samples t tests revealed that there was no statistically significant difference (where $t(87)=0.378$, $p=0.707$ which is >0.05) between the negative affectivity scores of males (Mean= 21.25, SD =7.83) and females (Mean=21.91, SD = 8.66).

Keywords: *Affectivity, Gender, Depression, Clinical Condition, Effect, Functional Capacity*

Introduction

The word affect is bit strange concept to those who are not directly involved in research in Psychology. But it actually refers to someone's feeling content and expression. Further when someone speaks of affect or affectivity it connotes how it influences someone's decisions too (Ackerman, 2020). Scholarly literature refers these positive affect and negative affect to the dimensions of self report mood of a person (Watson, Clark & Carey, 1988). Watson, Clark and Carey(1988) further state that Negative affect dimension which actually represents the subjective distress of the person stand for such mood states as fear, anxiety, hostility, scorn and disgust , anger, guilt and shame, irritability, and other unpleasant emotions (Stringer, 2013) and these are having dominant predisposition to experience negative emotional states and several clinical conditions such as depression whereas

positive affect represents a person's general wellbeing and competence (Watson, Clark & Carey, 1988) and also joy, alertness and interest too (Miller, 2011). As these two mood states are existing in two opposite poles and given person cannot experience both states at one time, but they can experience one of these at a given time in a certain degree as mild, moderate or severe (Ackerman, 2020). The scholars in the field consider that, when positive affect is taken, it is rather an influencing factor for a person to be happy than a byproduct of being happy (Scott, 2020). The same principle can be applied to negative affect too. It seems in the literature that more attention is paid to study the different dimensions and variables in Negative affect due to its association with depression and anxiety (Sanmartin et.al, 2018).

When it is discussed the factors affecting positive and negative affectivity, perhaps countless dimensions can be thought of. They may include dispositional temperament, childhood experiences, genetics, neurological factors, structural abnormalities; electrochemical communication related functioning, personality traits such as neuroticism (Ackerman, 2020) so on. The best way to understand the etiological influences on positive and negative affectivity is to find causal or correlational bonds between variables.

Negative affectivity and its relation to clinical conditions

The association between negative affectivity and various psychological clinical conditions have been well documented in the literature. Sanmartin et.al (2018) in two studies where they attempted to validate the brief version of the Positive and Negative Affect Schedule for Children-Short Form (PANAS-C-SF) in a Spanish child sample in first study, and to examine the existence of four affective profiles: self-fulfilling (high PA and low NA), low affective (low PA and NA), high affective (high PA and NA), and self-destructive (low PA and high NA) and to relate them to optimism and pessimism in the second study using the survey method (interviews and questionnaires) found that high scores in optimism correlated with self fulfilling profile and low scores in pessimism correlated with the self fulfilling profile. The results also showed that self destructive profile correlated with low scores in optimism and high scores in pessimism. These findings show that pessimism (which is measured by negative affectivity) is associated with clinically significant unhealthy behaviors while optimism is associated with clinically significant healthy behaviors.

But among the studies conducted on the association between negative affect and clinical variables some contradictory/opposite findings have been revealed too. Another psychological variable which is closely associated with Negative affect is stress. Vast array of studies in the discipline of psychology as well as outside the discipline have been conducted in order to understand the role of negative effect on stress. Sometimes negative affect functions as a mediating variable for stress and in the other situations it functions as a dispositional causation for person to experiences stress. The later has attracted the attention of many of the researchers in the field. In order to examine the roles that Negative Affectivity (NA) and Positive Affectivity (PA) play in the stressor-strain relationship, Rydstedt (2013) conducted a study titled "The Conceptual Roles of Negative and Positive Affectivity in the Stressor-Strain Relationship" using a sample of 731 Swedish engine room officers. The affectivity was measured using PANAS (positive and Negative affectivity Schedule). The results revealed no supportive findings for the hypothesis.

In the scientific approach to differentiate between depression and anxiety, some of the researchers have made attempts to use positive and negative affectivity. Using a clinical sample, Watson, Clark and Carey (1988) interviewed 150 individuals and they were also assessed using trait positive affect and negative affect scales. The results of the study revealed that A broad correlation showed between negative affectivity and symptoms and diagnoses of both anxiety and depression, and appeared to be a general predictor of psychiatric disorder. In contrast, positive affectivity was as they say "consistently related (negatively) only to symptoms and diagnoses of

depression, indicating that the loss of pleasurable engagement is a distinctive feature of depression” Watson, Clark and Carey (1988). This is another example for how negative affectivity is associated with clinically significant psychopathology. Further consistent findings were revealed in the study conducted by Dunne et.al (2019). This group of researchers conducted their study in order to assess the change in Positive and Negative affectivity during pharmacological treatment and cognitive therapy. Using a sample of 180 adult outpatients during two studies in their clinical trials, they examined whether there is a change in depressed mood (negative affectivity) and decreased interest and pleasure (low positive affectivity). The results of the study revealed that treatments were effective in repairing negative affectivity than repairing problems in positive affectivity. Consistent findings have been found by Lonigan, Philips and Hooe (2003) whose study revealed the relationship of this negative affectivity with depression and anxiety even in children’s samples.

Negative affectivity and its functional (or dysfunctional) capacities

In the clinical domain that we discussed above, negative affectivity is closely link to the symptomatic representation of depression and anxiety. The role it performs is mostly dysfunctional. In the several studies that we discuss here is speak of how negative affectivity appears to be dysfunctional in several domain that an individual has to function. In a research work titled “The Influence of Positive and Negative Affectivity on Attitude Change toward Organizations” conducted by Siomkos, Rao and Narayanan (2001). The researchers examined differences in pre and post product harm crisis attitude change in positively and negatively oriented individuals in an organizational setting. The results revealed that vividness of the situation is more powerful than the affective orientation and when it comes to non personalized attitudes affectivity cannot be considers as a strong predictor.

Kaplan, Geist, Luchman and Haynes (2009) examined how positive and negative affectivity are related to various performance dimensions and they adopted an organizational psychology /personality psychology perspective. A meta analysis was conducted with 57 studies and results showed that “Positive affectivity was related to organizational citizenship behaviors but not withdrawal behaviors, and Negative affectivity was related to organizational citizenship behaviors, withdrawal behaviors, counterproductive work behaviors, and occupational injury” (Kaplan, Geist, Luchman & Haynes,2009).

Effect of Gender on Negative affectivity

Gender is considered as a risk factor for certain clinical conditions. For example, WHO mentions “Gender differences occur particularly in the rates of common mental disorders - depression, anxiety and somatic complaints. These disorders, in which women predominate, affect approximately 1 in 3 people in the community and constitute a serious public health problem. Unipolar depression, predicted to be the second leading cause of global disability burden by 2020, is twice as common in women”. As certain disorders such as depression and anxiety are central clinical representations of negative affect, the above statement by WHO indicates that there is need of wider attention to be paid for the studies on gender differences in negative affectivity.

Influence of individual differences on negative affectivity can be discussed from diverse perspectives. They can be psychologically unique conditions as well as biosocial constructs such as gender. As the present study aims at understanding impact of gender on the negative affectivity of the individuals, this section covers some of the existing literature in the domain. In a study conducted by Thomsen et.al (2005), the researchers aimed at understanding whether age and gender differences in negative affect could be explained by emotional regulation while controlling the life events. The sample included individual from two age groups (N=195, those who are

between 20-35 years of age) and (N=302, those who are between 70-85 years of age). The sample was given Emotional Control Questionnaire-Rehearsal, Marlowe–Crowne Social Desirability Scale, Profile of Mood States, Beck’s Depression Inventory and List of Recent Experiences as assessment tools and after the analysis, the results showed that “age differences in negative affect are mediated by defensiveness and life events. Gender differences in negative affect were due to the young women’s higher scores on negative affect”. These showed that the negative affect is influenced by gender significantly for young women.

When analyzing the gender effects on affect further studies have indicated that the negative affect is reported women than men where as positive affect is reported equally by both genders. In order to understand the gender differences in negative affect and well being as indicated by emotional intensity, Fujita, Diener and Sandvik (1991) carried out a research and a college student sample consisting 66 women and 34 men was used for the study. Their study concluded that though women higher negative affect it is balance by higher intense positive emotions experienced by them. So, this study presents some contradictory findings with the existing literature. With these, it arises some difficulties to conclude that whether women’s experience of negative affect is higher or generally, they are inclined to experience intense emotions. This requires a new study to examine the accurate representation of gender effects on negative affect. In another study by Joiner and Blalock (1995) it was reported that gender differences can be seen in some forms of depressive state only.

In their article titled “Gender differences in depression: The role of anxiety and generalized negative affect” these researchers identified the tripartite model of depression and anxiety as: pure form depression and anxiety, co-morbid depression and anxiety, and mixed anxiety-depression. Using the questionnaire method for 106 college students, to measure depression, anxiety and negative affectivity, their results revealed that gender differences are visible only in the in the categories of co-morbid depression and anxiety and mixed anxiety-depression, but not in the category of “pure depression or anxiety”. These results indicate that the effect of gender on negative affect and its resulting or associated conditions have presented an ambiguous picture.

The gender representation in negative affect in children has again presented a different picture from the information that we have discussed in previous two paragraphs. In order to examine the development of gender differences in affective expression and in the relationship between mood and achievement related self-judgments, Reber and Flammer (2002) interviewed 434 children and found that there was no gender difference in affective expression in children, but there was a substantial difference in adolescents. Further they found that boys reported less affect than girls. Even for the achievement related beliefs, there was no gender difference reported. The researchers assumed that boys may inhibit affective expression. This study speaks of affective expression in general but not the negative affectivity. So, it seems that some phenomenon is left for future researchers to examine. But in contrast, higher prevalence of negative mood state has been reported in girls in a study done by Monteagudo et.al (2013). In their study titled “Gender differences in negative mood states in secondary school students: health survey in Catalonia (Spain)”, the researchers aimed at determining the prevalence of negative mood states in adolescents according to gender and also to analyze how it varies among schools, and to evaluate the associated factors. A large sample of adolescents (N=9340) between the ages of 14-16 was used for the study and the results of the study has revealed that about 19% of adolescents indicated an existence of a negative mood state, with a higher prevalence in girls where the percentage was 25%. The factors associated with negative mood states were “use of tranquilizers” and “having eating disorders” in girls and “not exercising” and “poor self-perception of health status” in boys as the researchers mentioned in their own words.

The discussions on Gender differences on negative affect have been further inconclusive due to the contradictory findings that have been presented by various studies. Kennedy (2013) states presenting his view on sex

differences in emotional behavior, that “With respect to overt actions, while men and women both report feeling sadness at the same levels, women tend to display overt signs of sadness while men tend to withdraw”. With this kind of implications in the existing literature in the field, it indicates that further research is needed to come to a generalized conclusions on the impact of gender on negative affectivity.

Having gender difference in negative affect is found to make one of the genders more vulnerable for certain clinical conditions. Xu et.al (2008) conducted a study on “Gender effects on mood and cigarette craving during early abstinence and resumption of smoking” using 26 female and 38 male smokers and the results showed that overnight abstinence caused more negative mood symptoms and cigarette craving in females than men making them more vulnerable for relapse of the clinical condition.

Several research findings associate feminine gender with negative affectivity. Langer (2003) conducted a study on “Mood disturbances in the Cancer setting: Effects of Gender and Patient/spouse role” and among the other findings of the study, it was also reported that female caregivers of cancer patients have reported greater depression and anxiety than males. The limitation of this study is it has aimed at studying the gender differences in a clinical sample, of which the findings is difficult to generalize to the average population.

The mood is also associated with psychological wellbeing of a person. Replicating a previous study by Grimmell and Stern (1992), Grimmell (1998), further investigated how self discrepancy (comparing actual behavior with gender role ideal) impacts on depressed mood and the results indicated confirmed the findings of previous study which says that self discrepancy influence negative mood. These findings indicate that gender role is a key factor mediating someone’s negative mood.

When examining the effect of gender on negative affectivity, according to the careful observation of some of the results of some studies, we can see that gender differences exists in the expressivity of the emotions rather than which pole that particular emotions fall. (i.e. rather than considering the differences in negative pole or positive affectivity pole, the differences exist in other dimensions). In a study done by Deng,Chang,Yang,Huo,Zhou (2016) , the researchers examined gender differences in emotional experience and expressivity which are measured by Heart Rate (HR). After showing video clips which depicted several positive and negative emotions (sadness, anger, horror, disgust, neutrality, amusement, surprise, and pleasure), the results revealed that though there are gender differences in emotional experience and expressivity, the men’s heart rate decreased when they watched the video clips which induces anger, amusement and pleasure where as women showed higher arousal. There had not been a gender difference with regard to horror and disgust and even for sadness and surprise. Overall, the findings have revealed that men have showed more intense emotional experiences but women have showed higher emotional expressivity (specially with reference to negative emotions). These results allow us to raise a question that whether gender differences actually exist in the negative positive poles or intensity vs. expressivity dimensions of emotions.

Butler & Nolen-Hoeksema (1994) , in a research to examine the hypothesis that “women are more likely than men to focus on themselves and their mood when in a depressed mood, and that this leads them to experience longer periods of depressed mood” carried out two studies and the results found that women engaged more on emotion related tasks than males in the first study and even in the second study the females showed a ruminative coping method which focused on their emotions. But the results also indicated that there are no gender differences when ruminative levels are controlled. These results also indicate that there is an association between gender and negative mood experience.

With the objective of providing physiological (neurochemical) evidences for gender differences in negative affectivity, Verhagen et.al (2010) conducted a study on effects of gender and ethnicity on Brain Derived Neurotrophic factor (BDNF) which is a nerve growth factor that is responsible for producing antidepressant effects. In this Meta analytic study the researchers used 2812 depressed patients who met DSM criteria and 10843 as controls. The results of the study showed that in men, the BDNF functions as a significant factor in developing major depressive disorder than women. Though this study presents the findings which stand for the gender-based influence on negative affect, it is inconsistent with some other studies which we discussed which says that women are at a greater risk. Examining further the link between negative mood and some pathology, Cyders et.al (2016) conducted their study on “Gender-Specific Effects of Mood on Alcohol-Seeking Behaviors” and found that “negative mood was associated with a significantly increased peak breath alcohol concentration with a trend toward a greater effect in men than in women Cyders et.al (2016). But contradictory findings were presented by Thayer et.al (2003) and even by Torres et.al (2020) in their study to examine “Gender Differences in Negative Mood, Emotional Intelligence and Tobacco Use among Young Adults” no gender differences were found in those variables: negative affect and emotional intelligence in Tobacco addicted Youth.

The choice of happy mood vs. sad mood in the movies represents someone’s general affective orientation towards certain stimuli. In order to study this, Banerjee et.al (2008) conducted an experimental study to understand the effect of gender on sensation seeking film choice and the results of this study showed that “female viewers reported a greater preference than male viewers for happy-mood films. And also, male viewers reported a greater preference for high-arousal films compared to female viewers, and female viewers reported a greater preference for low-arousal films compared to male viewers” (Banerjee et.al (2008).

When having an overview on the existing literature on the impact of gender on negative affectivity, several reasons appears to pose a need for conducting further studies on the selected topic area. Among them, the contradictory evidences of available literature are one of the prime significance. Several research findings have shown that there are gender differences in negative affectivity. Nevertheless, there is also considerable amount of studies which claim that there is no influence of gender on negative affectivity. This contradictory nature of the evidences in the available literature implies that more research in the area is needed to come to authentic conclusions and accurate generalizations about the effect of gender on negative affect.

Among the available past studies on the topic, it seems that there are very limited number of studies which studied the effect of gender on negative affect only. Many of the studies which are variable have considered studying both negative and positive affect and any other variable such as depressed mood, or emotional expressivity in general. So, this implies that a future study is needed to influence the single influence on this single variable in order to have a wider understanding.

The available literature presents some methodological insufficiencies too. Among the available studies only few of the studies have used Positive and Negative Affectivity Schedule (PANAS) as an assessment tool. Some of the studies have relied on DSM criteria (in order to reach conclusions on depressed mood in general). As it seems that positive and negative affectivity is better explained by PANAS it is highly recognized that this tool suits better than other devises to study affect. In a future research, the use of PANAS is needed for generating accurate representation.

On the basis of the light shed by the existing literature and the rationalistic assumptions of the available findings, the present study aimed to study whether there is a difference between male participants and female participants in their negative affectivity score. This has led to develop the following hypothesis for this study.

Hypothesis0- there is no statistically significant difference in the Negative affectivity mean scores obtained by Males and Females.

Hypothesis1- there is a statistically significant difference in the Negative affectivity mean scores obtained by Males and Females

Methods

Sample

The sample of this study included 89 individuals (44 Males and 45 Females) those who were between the ages of 22-38 years. The sample was selected using cluster random sampling method. In order to make the sample more heterogeneous, it included a mixed group of people those who are employed, unemployed and those who are married, unmarried.

Tools

Positive and Negative Affectivity Schedule (PANAS)

To assess the Negative affectivity dimension of the research participants, the Negative affectivity subscale of the “Positive and Negative Affectivity Schedule (Watson, Clark, & Tellegen, 1988)” was used. This is self report questionnaire which consists 20 items and is divided into two subscales as Positive affectivity scale and negative affectivity scale. Each subscale consist 10 affective wordings and the response pattern is presented in five points scale where 1 is represented as “Not at all” and 5 is represented as “very Much”. This measure is used as a measure of momentary changes of an individual’s affect as well as a global measure of the affect (Magyar-Moe, 2009). Further this measure can be used in both clinical as well as non-clinical settings.

Statistics Solutions (2020) reports “Reliability and Validity reported by Watson (1988) was moderately good. For the Positive Affect Scale, the Cronbach alpha coefficient was 0.86 to 0.90; for the Negative Affect Scale, 0.84 to 0.87. Over a 8-week time period, the test-retest correlations were 0.47-0.68 for the PA and 0.39-0.71 for the NA”. Sanmartin et.al (2018) showed that this, measure can be applied even in cross cultural settings too. Number of related studies show that PANAS have been used to assess various symptomatic representations of depression, anxiety and general distress. Recent attempts of cross cultural validation evidences have been shown by a study by Diaz –Garcia (2020) too.

Procedure

An online advertisement was published to request the consent for voluntary participation in the study and then cluster random sampling method was used (selecting four districts as clusters) to recruit participants for the study. The participants were distributed a soft copy of negative affectivity subscale of PANAS scale which was translated in to Sinhala and Back translated (which yielded no changes of the original) through online messaging portal and instructions were given before filling the measure. Each participant took an average time of 10 minutes to complete the measure. Then the total scores of each participant was calculated manually and prepared for analysis.

Analysis

The descriptive statistics showed that the mean negative affectivity scores of the two groups (Male and Female) as follows.

Report

NegAffectScore

Gender	Mean	N	Std. Deviation
Male	21.2500	44	7.82698
Female	21.9111	45	8.66241
Total	21.5843	89	8.21972

This shows that the mean negative affectivity score of male is 21.25 (where SD is 7.83) and the mean negative affectivity score of Female group is 21.91 (where SD is 8.66).

In order to test the hypothesis of this study, as the data was normally distributed, the researcher used independent sample t tests for comparing mean scores of two groups. The SPSS software was used to analyze the data. The mean scores of 44 male participants who responded to negative affectivity subscale were compare to 45 female participants who responded to the same measure. The output of analysis of the data is presented in the bellow table.

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
									Lower	Upper
NegAffectScore	Equal variances assumed	.407	.525	-.378	87	.707	-.66111	1.75124	-4.14189	2.81967
	Equal variances not assumed			-.378	86.468	.706	-.66111	1.74923	-4.13820	2.81598

The results showed that there was no statistically significant effect of gender $t(87)=0.378$, $p=0.707$ which is >0.05 .

Discussion

The researcher in the present study stated as null hypothesis that “- there is no statistically significant difference in the Negative affectivity mean scores obtained by Males and Females”. The statistical analysis of obtained data from both gender groups showed that there is no statistically significant difference of the negative affectivity scores obtained by members in two gender groups. So, the null hypothesis has to be accepted and the researcher has to reject the alternative hypothesis. These findings are consistent with Fujita, Diener and Sandvik (1991) but presents some contradictory findings with Thomsen et.al (2005) who said women have higher negative affectivity scores. Similar to the above studies, the findings of the present study is also contradictory with those of Reber and Flammer (2002), Monteagudo et.al (2013). And Langer (2003) who stated that there is a gender difference in the participant’s negative affectivity. However the ideas presented by Grimmell and Stern (1992), Grimmell (1998), can be placed in similar grounds with the results of this study and the ideas presented by Deng,Chang,Yang,Huo,Zhou (2016) is also partially true for findings of present study. Overall, the findings of this study showed that the gender differences of negative affectivity cannot be considered as a phenomenon that

can be applied for all samples and further investigation is needed. The existing literature shows that there are moderating variables for gender differences in negative affectivity, but when gender is taken as a moderating variable for negative affectivity there is a lack of empirical findings to conclude that gender differences of negative affectivity are global. This needs further research support.

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