

COGNITIVE AND METACOGNITIVE BELIEFS: SEPARATING GAD FROM CHRONIC WORRY



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Introduction

- Chronic worry is a core feature of generalized anxiety disorder (GAD; American Psychiatric Association, 2022).
- However, not all chronic worriers have GAD (Ruscio, 2002; Ruscio & Borkovec, 2004).
- Metacognitions may separate GAD from chronic worry (Penney et al., 2013). Prior studies have not included anxiety sensitivity and intolerance of uncertainty, which are also associated with GAD and worry (Norton et al., 2005).
- The current study investigated which of these anxiety-related factors may help differentiate GAD from chronic worry.

Method

- **Community Sample:** $N = 624$; M age = 43.20 (18-65yr)
 - 50.3% Female, 48.6% Male, 0.8% Non-Binary
- **Undergrad Sample:** $N = 1020$; M age = 20.78 (17-49yr)
 - 72.0% Female, 24.0% Male, 2.3% Non-Binary
- Generalized Anxiety Disorder Questionnaire-IV
- Penn State Worry Questionnaire
- Anxiety Sensitivity Index-3
 - Physical Concerns (ASI-P)
 - Social Concerns (ASI-S)
 - Cognitive Concerns (ASI-C)
- Intolerance of Uncertainty Scale-18
 - Prospective Intolerance of Uncertainty (IUS-P)
 - Inhibitory Intolerance of Uncertainty (IUS-I)
- Metacognitions Questionnaire-30
 - Negative Beliefs about Worry (MCQ-NBW)
 - Positive Beliefs about Worry (MCQ-PBW)

Fears & Beliefs About The Danger Of Worry May Be What Leads To GAD

Community

DV: GADQ-IV	<i>R</i>	<i>R</i> ² Change	<i>t</i>	<i>pr</i>
Step 1.	.853**	.728**		
PSWQ			40.72**	.85
Step 2.	.883**	.052**		
PSWQ			13.32**	.47
ASI-P			-0.74	-.03
ASI-S			2.49*	.10
ASI-C			3.93**	.16
IUS-P			2.90**	.12
IUS-I			0.54	.02
MCQ-NBW			4.46**	.18
MCQ-PBW			-3.12**	-.13

Note. *pr* = partial correlation. * $p < .05$, ** $p < .01$.

Undergraduate

DV: GADQ-IV	<i>R</i>	<i>R</i> ² Change	<i>t</i>	<i>pr</i>
Step 1.	.783**	.613**		
PSWQ			39.95**	.78
Step 2.	.824**	.067**		
PSWQ			14.46**	.42
ASI-P			1.90	.06
ASI-S			1.44	.05
ASI-C			2.61**	.08
IUS-P			0.17	.01
IUS-I			0.91	.03
MCQ-NBW			9.28**	.28
MCQ-PBW			0.60	.02

Note. *pr* = partial correlation. * $p < .05$, ** $p < .01$.

Discussion

- Across both samples, worry severity was consistently associated with ASI-S, IUS-P, IUS-I, MCQ-NBW, and MCQ-PBW.
- GAD symptoms were associated with ASI-S, IUS-P, IUS-I, and MCQ-NBW across both samples.
- Only ASI-C and MCQ-NBW were consistently associated with GAD symptoms when controlling for worry severity.
- This may indicate that fears about one's sanity and mental well-being, and beliefs that worry is uncontrollable, may be what leads chronic worry to progress to clinical GAD.
- The current study supports the idea that chronic worry alone does not necessarily lead to GAD, and that fears regarding mental health and worry are important components of GAD.

Addendum

Scan below to see the abstract, a copy of the poster, and full reference list



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