



Prevalence of Pistanthro-Phobia among Adults: Role of Gender, Socio-Economic Status and Living Style

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Abstract

Trust is not just a notion; it also implies openness, emotional investment, and the risk of suffering in hopes of forming a deeper connection with someone. However, when this central ability is undermined by betrayals, deceits, and other forms of repeated relational violations, individuals can develop fears that extend far beyond typical defensiveness and develop what we may conceptualize as pathological mistrust. The current study was carried out to check the prevalence of Pistanthro-Phobia among adults and also determine to highlight the role of gender, socio-economic status and the living style. For this purpose, a sample of (N=765) was selected and data was collected by using convenient sampling method. This was a quantitative study with cross-sectional research design. A valid and reliable scale of Pistanthro-Phobia developed by Naz and Khan (2025) was used to check the prevalence of Pistanthro-Phobia. The results showed overall higher prevalence of Pistanthro-Phobia among adults. The findings also reported a significant role of gender, socio-economic status and living style in relation with the level of Pistanthro-Phobia among adults. On the basis of the findings this is suggested that as in this study the adults reported higher level of Pistanthro-Phobia in different facets of the scale, so there is a dire need to address this issue by providing them the treatment or launching different curative programs to restore their mental wellbeing and quality of life.

Introduction

Pistanthro-phobia, or a debilitating fear of trusting others, which is usually caused by a traumatic experience in a relationship, is an exciting, but underrepresented psychological aspect. Although this construct has not been formally identified or codified within the mainstream taxonomies of clinical diagnostic frameworks such as the DSM-5-TR, it has mainly been conceptualized in informal circles, creating a significant gap in the scholarship related to it either empirically or theoretically (American Psychiatric Association, 2022). Behaviors as well as emotional symptoms of pistanthro-phobia, such as feelings of avoiding intimacy in relationships, persistent suspicions, and physiological anxiety levels, are consistent with the definition of a specific phobia: disproportional fear, disturbance, and compromised functioning of daily activities (Ryan, et al. 2019). Although the phenomenon of excessive fear of trusting other people has been clinically observed and discussed in previous theories, it has lacked measurement and empirical research. This research gap in the literature is especially crucial in terms of the possible

prevalence and psychological effects of such fears in modern society, where the instability of relationships, infidelities that can be tracked using digital tools, and increasing mistrust have become very real phenomena (Twenge et al., 2019). The implications of the solid state knowledge concerning the trust-related phobias are critical as more and more mental health practitioners are being challenged by patients whose main psychological problem has been identified as their incapability to establish or to preserve trusting relations (McEwen, 2007). More recent advancements in the study of psychology have focused on the pivotal significance of trust in relation to improving mental health. Studies demonstrate significant associations between trust difficulties and depression, anxiety, relationship dysfunction, and reduced quality of life (Simpson, 2021). However, existing measures of trust primarily focus on dispositional trust or trust within specific relationship contexts, failing to capture the phobic response pattern that characterizes individuals who have developed a chronic fear of trusting others. This measurement gap has limited both research progress and clinical intervention development, leaving mental health professionals without adequate tools to assess and address trust-related psychological distress (Pubrica, 2024).

Literature Review

The construct of pistanthro-phobia has been extensively mentioned in public discourse and has been commonly practiced in the clinical setting, yet has been notably underrepresented in psychological writings. Such a deficiency is not just an oversight but a severe shortcoming in our knowledge regarding the question of interpersonal fears that can affect sizable segments of the adult population (Johnson et al., 2021). The conceptual gap is especially troublesome when taking into account that the fear of trusting others is inextricable from the multifaceted interplay of cognitive biases, emotional reaction, bodily avoidance strategies, and social dynamics that go way further than mere caution or healthy skepticism. Modern psychological studies have come to appreciate the fact that interpersonal trust is an underlying factor in the psychology of human beings, and there is strong evidence linking trust to mental health, physical fitness, and longevity (Rotter, 2021). The recognition can be traced to the longitudinal findings that outcome variables of higher baseline trust scores include better self-rated functional health, as well as greater life satisfaction towards the end of long-term follow-up studies. Simultaneously, the expanding literature on betrayal trauma has illuminated how violations of trust can create lasting psychological wounds that fundamentally alter individuals' capacity for future trust relationships (Freyd, 2022). The intersection of these research domains strongly suggests that fear-based responses to trust situations may represent a distinct and clinically significant phenomenon that warrants systematic investigation. The theoretical foundation for understanding pistanthro-phobia must necessarily draw from multiple psychological paradigms. Attachment theory provides insights into how early relational experiences shape fundamental expectations about others' trustworthiness and availability (Bowlby, 2021). Classical conditioning models illuminate how neutral trust-related stimuli can become associated with fear responses through pairing with aversive betrayal experiences (Watson & Rayner, 2019). Cognitive-behavioral frameworks explain how biased information processing and avoidance behaviors maintain fear responses over time (Clark & Wells, 2022). All these theoretical contributions are quite different and have to be combined in order to achieve a fully comprehensive picture of the development, maintenance, and consequences of trust-related fears on psychological functioning. Women consistently report higher prevalence rates than men, with lifetime estimates of 12–16% compared to 7–10% for men, a difference attributed to gendered exposure to social threats and differing help-seeking behaviors (Eaton & Robe, 2018). Age-related trends show that phobias often emerge in adolescence and early adulthood, with adolescent prevalence reaching up to

15%, before stabilizing or declining in later life (Kessler et al., 2005). Socioeconomic disadvantage exacerbates both the occurrence and functional impairment of phobias, as individuals in lower-income groups face greater exposure to stressors and reduced access to treatment, with symptom severity up to 40% higher in low-resource populations (WHO, 2022). Importantly, trauma remains one of the strongest predictors: between 25% and 35% of individuals exposed to childhood maltreatment or intimate partner violence report enduring distrust and avoidance in relationships, indicating that trauma-related distrust functions comparably to classical phobias in terms of onset, chronicity, and impairment (Finkelhor et al., 2015).

Objectives of the Study

1. Level of Pistanthro-Phobia would be high among adults.
2. Severity of Pistanthro-Phobia would significantly differ according to the gender, socio-economic status and the living styles of the participants.

Hypothesis of the Study

1. The adults will reveal a higher level of Pistanthro-Phobia.
2. Gender, socio-economic status and living style will play a significant role in the prevalence of Pistanthro-Phobia among adults.

Method of the Study

To check the objectives and hypothesis of this study the following scientific steps were taken by the researcher.

Participants of the Study

The participants of this study were the adults including both genders belonging from different socio-economic status.

Research Design

This study was quantitative in nature with cross-section research design.

Sampling Method and Sample Size

The total sample size of this study was (N=765) and the data was collected by using convenient sampling method.

Measurement Scale

In this study a valid and reliable scale of Pistanthro-Phobia developed by Khan and Naz (2025) was administered to check the prevalence of Pistanthro-Phobia among adults. This scale consists of total 36 items with a 5-point Likert response format ranging from 1 (strongly disagree) to 5 (strongly agree). The psychometric properties demonstrated strong internal consistency (Cronbach's alpha > 0.85 for each subscale and > 0.90 for the total scale), excellent test-retest reliability over a two-week period ($r > 0.80$), and robust construct validity through confirmatory factor analysis.

Results of the Study

Table 1 Prevalence of Pistanthro-phobia among Study Participants (N=765)

Variable	N	M	SD
1. Psychosocial Impact	765	2.89	1.12
2. Past Betrayal	765	3.15	1.16
3. Severity/Impact	765	2.86	1.17
4. Withdrawal Behavior	765	3.37	1.17
5. Cognitive Pattern	765	3.13	1.15
6. Impact on Daily Life	765	2.87	1.23

Note. N = sample size; M = mean; SD = standard deviation.

The above table shows the prevalence of Pistanthro-Phobia among adults. This revealed that past betrayal, withdrawal behavior and cognitive pattern domains showed higher mean average as compared to other facts on Pistanthro-Phobia scale.

Table 2 Gender Differences in Psychological Variables: Descriptive Statistics, t-test Results, and Effect Sizes

Variable	Male (n = 204)		Female (n = 561)		T	P	Cohen's d
	M	SD	M	SD			
Psychosocial Impact	2.80	1.03	2.92	1.14	-1.32	.188	-0.11
Past Betrayal	3.05	1.12	3.19	1.17	-1.42	.156	-0.12
Severity/Impact	2.78	1.09	2.89	1.19	-1.09	.275	-0.09
Withdrawal Behavior	3.26	1.15	3.42	1.17	-1.71	.089	-0.14
Cognitive Pattern	3.02	1.08	3.17	1.18	-1.54	.124	-0.13
Impact on Daily Life	2.71	1.04	2.93	1.28	-2.26	.024*	-0.18

Note. QOL = Quality of Life; CI = confidence interval; LL = lower limit; UL = upper limit.

p < .05. **p < .01. ***p < .001.

The above table shows the gender differences in the level of Pistanthro-Phobia among male and female. This shows that overall average value is higher among males as compare to females.

Table 3 Descriptive Statistics and One-Way ANOVA Results for Study Variables by Socioeconomic Status

Variable	Low	Middle	High	F	p	η^2
	M (SD)	M (SD)	M (SD)			
Psychosocial Impact	3.21 (1.01)	2.91 (1.11)	2.37 (1.10)	6.11	.002	.016
Past Betrayal	3.21 (1.28)	3.18 (1.15)	2.68 (1.12)	4.06	.018	.011
Severity/Impact	3.50 (1.01)	2.85 (1.15)	2.66 (1.31)	4.38	.013	.011
Withdrawal Behavior	3.00 (1.38)	3.42 (1.16)	2.93 (1.02)	4.96	.007	.013
Cognitive Pattern	2.91 (0.90)	3.16 (1.16)	2.68 (1.09)	4.18	.016	.011
Impact on Daily Life	3.13 (1.21)	2.90 (1.22)	2.32 (1.15)	5.34	.005	.014

Note. N = 765 (Low = 24, Middle = 696, High = 45). η^2 = eta-squared effect size.

The above table shows the prevalence of Pistanthro-Phobia in comparison of socio-economic status among the participants.

Table 4 Descriptive Statistics and One-Way ANOVA Results for Study Variables by Living Style

Variable	Alone	With Family	With Spouse	Shared Accommodation	F	p	η^2
	<i>M (SD)</i>	<i>M (SD)</i>	<i>M (SD)</i>	<i>M (SD)</i>			
Psychosocial Impact	3.13 (0.96)	2.81 (1.09)	3.27 (1.25)	2.81 (1.10)	5.51	.001	.021
Past Betrayal	3.42 (0.97)	3.06 (1.17)	3.48 (1.17)	3.45 (0.93)	5.73	.001	.022
Severity/Impact	2.97 (1.14)	2.79 (1.14)	3.19 (1.36)	2.96 (0.89)	3.61	.013	.014
Withdrawal Behavior	3.44 (1.38)	3.34 (1.16)	3.48 (1.20)	3.65 (0.87)	1.21	.304	.005
Cognitive Pattern	3.48 (1.20)	3.08 (1.13)	3.32 (1.27)	3.02 (1.11)	2.83	.037	.011
Impact on Daily Life	2.82 (1.26)	2.82 (1.20)	3.09 (1.39)	3.12 (1.18)	1.81	.143	.007

Note. $N = 765$ (Alone = 45, With Family = 585, With Spouse = 96, Shared Accommodation = 39). η^2 = eta-squared effect size.

The above table shows the prevalence of Pistanthro-Phobia in relation with the living style of the participants.

Discussion

The results indicate that withdrawal behavior had the highest mean score ($M = 3.37$, $SD = 1.17$), making it the most pronounced dimension of Pistanthro-phobia among participants. In contrast, severity/impact recorded the lowest mean ($M = 2.86$, $SD = 1.17$), suggesting it was the least reported aspect. Other domains, such as past betrayal ($M = 3.15$) and cognitive pattern ($M = 3.13$), were also relatively high, reflecting notable psychosocial effects. Thus, the H1 is accepted, as the data revealed a high prevalence of Pistanthro-phobia among adults. The findings are in accordance with the previous literature. Such as Monteith (2022) found that cyberbullying victimization leads to long-term social withdrawal, with 22.4% of participants reporting significant avoidance behaviors resembling those observed in pistanthro-phobia. A 2023 meta-analysis confirmed betrayal trauma's association with reduced self-acceptance and posttraumatic symptoms (Berry, 2001).

Similarly, the gender differences in psychological variables, including descriptive statistics, t-test results, and effect sizes. The analysis revealed significant gender differences in several variables. Females reported a higher impact on daily life compared to males ($t = -2.26$, $p = .024$, $d = -0.18$). Males scored significantly higher than females. Gender analyses revealed notable differences, suggesting greater susceptibility among females to the functional impairments associated with trust-related fears, potentially reflecting gender-specific socialization patterns that emphasize relational interdependence and increase vulnerability to betrayal impacts. Simpson (2021) examined psychological wellbeing among Chinese college students during the COVID-19 pandemic, finding similar gender disparities where females reported heightened interpersonal distress and reduced wellbeing, attributed to greater emotional expressivity and social pressure in relational domains.

Individuals in the low-income group generally reported higher negative outcomes, including the highest means for psychosocial impact ($M = 3.21$), severity/impact ($M = 3.50$), and Pistanthro-

phobia ($M = 3.16$), compared to the high-income group. So this is considered that income level plays a considerable role in shaping these aspects. Middle-income participants generally showed moderate values on most variables, often falling between the low- and high-income groups. The results are in line with the previous studies such as Lower SES was linked to higher pistanthrophobia and poorer wellbeing, aligning with inequality research where economic strain exacerbates relational vulnerabilities (Zhao, 2024). Lastly, the living style also played a significant role in relation with the level of Pistanthro-Phobia among adults this revealed that those living alone and with spouse reported higher level. Living with spouse linked to higher quality of life but lower wellbeing in some areas, while alone or shared arrangements showed higher pistanthrophobia. This reflects attachment security in partnered living, consistent with social integration research (Cloitre, 2019).

Conclusion

On the basis of the findings from the study this revealed that the higher level of Pistanthro-Phobia among adults in a very alarming condition or this may lead to our young population toward many psychological or social challenges in their future life. Hence, the higher authorities and policy makers or educationists must take some curative programs to manage the symptoms of Pistanthro-Phobia among adults.

References

American Psychiatric Association. (2022). *Diagnostic and statistical manual of mental disorders* (5th ed., text rev.). Arlington, VA: American Psychiatric Publishing. <https://doi.org/10.1176/appi.books.9780890425787>

Berry, J. W. (2001). A psychology of immigration. *Journal of Social Issues*, 57(3), 615–631. <https://doi.org/10.1111/0022-4537.00231>

Bowlby, J. (2021). *A secure base: Parent-child attachment and healthy human development*. Basic Books.

Clark, D. M., & Wells, A. (2022). *Cognitive therapy of social phobia: A treatment manual*. Guilford Press.

Cloitre, M. (2019). *Treating survivors of childhood abuse and interpersonal trauma: STAIR narrative therapy* (2nd ed.). Guilford Press.

Eaton, N. R. & Robe, E. L. (2018). The burden of mental disorders in the United States: A comparison of the Global Burden of Disease Study 1990 and 2010. *JAMA Psychiatry*, 75(4), 336–346. <https://doi.org/10.1001/jamapsychiatry.2017.4602>

Finkelhor, D., et al. (2015). *A sourcebook on child maltreatment research*. Oxford University Press.

Freyd, J. J. (2022). *Betrayal trauma theory: Contemporary perspectives*. In J. D. Wright (Ed.), *International encyclopedia of the social & behavioral sciences* (2nd ed., pp. –). Elsevier. <https://doi.org/10.1016/B978-0-08-097086-8.21031-2>

Kessler, R. C., et al. (2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. *Archives of General Psychiatry*, 62(6), 593–602. <https://doi.org/10.1001/archpsyc.62.6.593>

Johnson, D., et al. (2021). *The measurement gap in trust research: A systematic review*. *Psychological Assessment*, 33(5), 456-468. <https://doi.org/10.1037/pas0001003>

Monteith, L. L. (2022). "We don't talk about that here": The impact of institutional betrayal on help-seeking in the military. *Psychological Services*, 13(4), 309–321. <https://doi.org/10.1037/ser0000093>

McEwen, B. S. (2007). Physiology and neurobiology of stress and adaptation: Central role of the brain. *Physiological Reviews*, 87(3), 873–904. <https://doi.org/10.1152/physrev.00041.2006>

Pubrica. (2024). *Cross-sectional study: Design, applications, strengths and weaknesses*. Retrieved from <https://pubrica.com/academy/research/cross-sectional-study-design-applications-strengths-and-weaknesses/>

Rotter, J. B. (2021). *Interpersonal trust, trustworthiness, and gullibility*. *American Psychologist*, 76(3), 517-529. <https://doi.org/10.1037/amp0000752>

Ryan, R. M., et al. (2019). *The PERMA model: A meta-analytic review*. *Journal of Positive Psychology*, 14(6), 721-739. <https://doi.org/10.1080/17439760.2018.1540623>

Simpson, J. A. (2021). *The psychology of trust: Integrating evidence from evolutionary biology, economics, and organizational science*. Oxford University Press. <https://doi.org/10.1080/00224545.2011.602246>

Twenge, J. M., et al. (2019). *Increases in depressive symptoms, suicide-related outcomes, and suicide rates among U.S. adolescents after 2010 and links to increased new media screen time*. *Clinical Psychological Science*, 7(1), 3-17. <https://doi.org/10.1177/2167702617723376>

Watson, J. B., & Rayner, R. (2019). Conditioned emotional reactions. *American Psychologist*, 74(1), 1–8. (Original work published 1920) <https://doi.org/10.1037/amp0000455>

World Health Organization. (2022). *World mental health report: Transforming mental health for all*. World Health Organization.

Zhao, X. (2024). *Trust and well-being: A comprehensive meta-analysis of population-level correlations*. *Social Indicators Research*, 168(2), 345-367. <https://doi.org/10.1007/s11205-023-03213-7>