

Health anxiety and attentional bias toward virusrelated stimuli during the COVID-19 pandemic

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Abstract

After the COVID-19 worldwide spread, evidence suggested a vast diffusion of negative consequences on people's mental health. Together with depression and sleep difficulties, anxiety symptoms seem to be the most diffused clinical outcome. The current contribution aimed to examine attentional bias for virus-related stimuli in people varying in their degree of health anxiety (HA). Consistent with previous literature, it was hypothesized that higher HA would predict attentional bias, tested using a visual dot-probe task, to virus-related stimuli. Participants were 132 Italian individuals that participated in the study during the lockdown phase in Italy. Results indicated that the HA level predicts attentional bias toward virus-related objects. This relationship is double mediated by the belief of contagion and by the consequences of contagion as assessed through a recent questionnaire developed to measure the fear for COVID-19. These findings, indicative of attentional bias for virus-related cues, are discussed in the context of cognitive-behavioral conceptualizations of anxiety suggesting a risk for a loop effect. Future research directions are outlined.

Procedure

- 1) select pictures of virus-related objects and neutral objects
- 2) create 40 pairs of virus-related and neutral objects (Test trials)
- 3) create 40 pairs of neutral and neutral objects (Filler trials)
- 4) create the visual dot probe task
- 5) collect data from the dot probe task
- 6) clean collected data by removing a) trials with incorrect response b) trials with reaction times < 250 ms and > 1000 ms
- 7) compute attentional bias by subtracting reaction times to congruent trials (target and probe in the same position) from reaction times to incongruent trials (target and probe in different position)
- 8) calculate health anxiety score
- 9) calculate fear for COVID-19 score (and its subfactors "belief of contagion" and "consequences of contagion")
- 10) perform double mediation model