

DA LI POSTOJI VEZA ANKSIOZNOSTI KAO CRTE LIČNOSTI SA CRTAMA DEPRESIVNE LIČNOSTI?

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SAŽETAK

Uvod/cilj: Rezultati dosadašnjih istraživanja ukazuju da postoji povezanost između simptoma depresije i anksioznosti, kao i da je javljanje ovih simptoma delimično uslovljeno crtama ličnosti. Cilj ovog istraživanja je bio da se ispita da li postoji veza između anksioznosti kao crte ličnosti sa crtama depresivne ličnosti među odraslim ispitanicima iz Crne Gore, kako bi dobili smernice za primenu programa za očuvanje mentalnog zdravlja.

Metode: U okviru ove studije preseka bilo je uključeno 355 ispitanika. Podaci od svih ispitanika iz Crne Gore prikupljeni su onlajn putem, kroz *Google Forms* platformu. Pored opšteg upitnika, korišćeni su upitnici za ispitivanje crta ličnosti anksioznosti (engl. *Anxiety Trait 29 – AT29*) i depresivnosti („Depresivna ličnost“ – DL). U statističkoj analizi podataka korišćen je *Pearson*-ov koeficijent korelacije i jednofaktorska analiza varianse.

Rezultati: Od 355 ispitanika, uzrasta od 18 do 68 godina, 74,6% su činile žene. Značajna visoka pozitivna korelacija dobijena je između crta anksioznosti i crta depresivne ličnosti ($r=0,82$, $p<0,01$). Pored toga, obe ove crte ličnosti bile su značajno više ispoljene kod žena, osoba sa nižim stečenim stepenom obrazovanja i lošim socio-ekonomskim stanjem. Mlađi i nezaposlena lica su imali značajno više izražene crte anksioznosti, ali značajna razlika nije utvrđena u pogledu izraženosti crta depresivne ličnosti. Nije bilo značajne ispoljenosti anksioznih i depresivnih crta ličnosti u odnosu na bračni status i zaposlenost.

Zaključak: Kada znamo da se u značajnom broju slučajeva crte anksioznosti i depresivnosti javljaju zajedno, onda možemo osmisiliti programe prevencije i podrške kod osoba kod kojih bi se rano detektovale ove crte, kako bi se sprečilo da poteškoće u funkcionisanju prerastu u anksioznost ili depresiju.

Ključne riječi: anksionost kao crta ličnosti, depresivne crte ličnosti, demografske karakteristike

Uvod

Anksioznost možemo posmatrati u skladu sa Spilbergerovom teorijom koja definiše razliku između crte i stanja anksioznosti (1). Anksioznost kao crta ličnosti predstavlja sklonost da se odgovori stanjem anksioznosti pri anticipaciji pretečih situacija (čak i kada su situacije objektivno bezopasne), dok je stanje anksioznosti subjektivno, svesno opaženo stanje straha i zebnje, koje može biti isprovocirano nekim spoljašnjim ili unutrašnjim stimulusom opaženim kao opasnost ili pretinja. Osnovna razlika je u tome što je anksioznost kao crta stabilna dispozicija, koja se ispoljava kroz više situacija tokom vremena, dok je anksioznost kao stanje tranzitorna, vezana za date okolnosti u datom trenutku.

Depresivna ličnost se opisuje kao ličnost koja je dominantno tužna, sumorna, obeshrabrena, preozbiljna, sa sniženim samopouzdanjem i izraženom sklonošću ka osećanju krivice, a ostali aspekti funkcionisanja se mogu označiti kao normalni (2). Po Šnajderu sledećih 7 crta ličnosti sačinjava depresivnu ličnost ili depresivnu psychopathiju: mirna, introvertna, pasivna i neassertivna; turobna, pesimistična, ozbiljna i nesposobna za šalu; samokritična, samooptužujuća i samoomalovaložavajuća; skeptična, hiperkritična i teško udovoljava; savesna, odgovorna i samodisciplinovana; zamišljena i zabrinuta; preokupirana negativnim događajima, osećanjem neadekvatnosti i sopstvenim nedostacima (2).

IS THERE A CONNECTION OF ANXIETY AS A PERSONALITY TRAIT WITH DEPRESSIVE PERSONALITY TRAITS?

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SUMMARY

Introduction/Aim: The results of previous research indicate that there is a connection between the symptoms of depression and anxiety, and that the occurrence of these symptoms is partly conditioned by personality traits. The aim of this study was to examine the correlation between anxiety as a personality trait and depressive personality traits among the respondents from Montenegro, in order to obtain guidance for the application of mental health programs.

Method: The cross-sectional study included 355 respondents. Data were collected online, through the Google Forms platform. In addition to the general questionnaire, questionnaires for the evaluation of anxiety-related traits and depressive personality traits (DP) were used.

Results: Of 355 respondents, aged 18 to 68, 74.6% were women. A high positive correlation between the anxiety-related traits and depressive personality traits was significant ($r = 0.82$, $p < 0.01$). In addition, we found that both of these traits were more pronounced in women, in respondents with lower educational levels and poorer material status. Younger respondents and unemployed persons had significantly more pronounced anxiety-related traits, but there was no significant difference regarding depressive personality traits. There was no significant difference regarding the pronounced anxious and depressive personality traits related to marital status and employment.

Conclusion: Having in mind the fact that anxious and depressive personality traits occur simultaneously in a significant number of cases, it is important to detect these traits early and implement prevention programs in order to prevent them from developing into anxiety or depression.

Key words: anxiety trait, depressive personality traits, gender, age

Introduction

Anxiety can be observed from the perspective of Spielberger's theory, which defines the difference between trait and state anxiety (1). Anxiety as a personality trait is a tendency to respond with the state of anxiety when threatening situations are anticipated (even when situations are objectively harmless), while state anxiety is a subjective, consciously perceived state of fear and worry, which may be provoked by some outer or inner stimuli, which are seen as threatening or dangerous. The basic difference is that anxiety as a trait is a stable disposition, which is manifested through different situations over time, while anxiety as a state is transitory, connected with certain circumstances at the given moment.

A depressive person is described as a person, who is dominantly sad, gloomy, discouraged, too

serious, with low self-confidence and pronounced inclination to the feeling of guilt, while other aspects of functioning may be marked as normal (2). According to Shneider, the following seven personality traits make a depressive personality or depressive psychopathy: calm, introvert, passive and non-assertive; gloomy, pessimistic, serious, unable to joke; self-critical, self-reproaching and self-scornful; skeptical, hypercritical and hard to please; conscientious, responsible and self-disciplined; pensive and worried; preoccupied with negative events, feeling of inadequacy and their own shortcomings (2).

Certain pathological personality traits (such as self-sacrifice, avoiding the criticism, distrust, impulsive behavior, unstable behavior) correlate with the symptoms of depression and anxiety

Pokazalo se da određene patološke crte ličnosti (kao što su samo-žrtvovanje, izbegavanje kritike, nepoverenje, impulsivnost, nestabilnost raspoloženja) koreliraju sa simptomima depresije i anksioznosti (3). Anksioznost kao crta pozitivno korelira sa ruminacijom i depresijom, dok mentalna fleksibilnost negativno korelira sa anksioznošću, ruminacijom i depresijom (4). Moguće je da mentalna fleksibilnost moderira vezu između anksioznosti kao crte i depresije, pri čemu ruminacija ima medijatorski efekat. Pored toga, kao medijator između ranije anksioznosti i kasnije depresivnosti registruje se izbegavajuće ponašanje (5).

Rezultati sugerisu da je depresija u vezi sa crtama kao što su neuroticizam/negativna emocionalnost, ekstraverzija/pozitivna emocionalnost i savesnost. Šta više, izgleda da karakteristike ličnosti doprinose početku i toku depresije različitim putevima (6). Visok neuroticizam je dokazano prediktor psiholoških problema, što nam govori da su crte ličnosti korisni indikatori za skrining psiholoških problema i efektivan put ka prevenciji u opštoj populaciji (7). Postavlja se pitanje da li rane intervencije kod osoba sa visokim neuroticizmom mogu biti efektivne u preveniraju kasnijeg bola i doživljaja nesposobnosti povezanih sa anksioznim i depresivnim poremećajima (8).

Cilj ovog istraživanja je bio da se ispita da li postoji veza između anksioznosti kao crte ličnosti sa crtama depresivne ličnosti među odraslim ispitanicima iz Crne Gore, kako bi dobili smernice za primenu programa za očuvanje mentalnog zdravlja.

Metode

U studiju je uključeno 355 ispitanika koji su pristupili upitniku onlajn preko *Google Forms* platforme. Link za pristup upitniku je: <https://docs.google.com/forms/d/e/1FAIpQLSdygvFmMpY-HIK9oMTDeMJYKPyKiuKehLbmSyveHRSsPERsnQ/viewform>. Upitnik su popunjavala punoletna lica iz Crne Gore koja su pristupila linku tokom septembra i oktobra 2020. godine.

Opštim upitnikom prikupljeni su od ispitanika sledeći podaci: pol (ženski i muški), starost (numerička varijabla, transformisana u dve kategorije mlađi - od 18 do 43 godine i stariji - od 44 do 68 godina), regija u kojoj osoba živi (jug, centralna regija i sever Crne Gore), stičeno obrazovanje (srednja škola, fakultet, magisterske ili doktorske studije), radni status (nezaposlen, zaposlen), bračni status (neuda-

ta/neoženjen, bračna zajednica, vanbračna zajednica, razveden/a, udovac/udovica) i socio-ekonomski status (loš, prosečan, dobar).

Za ispitivanje anksioznosti kao crte ličnosti korišćen je standardni upitnik pod nazivom Crti ličnosti – 29 (engl. *Anxiety Trait 29 – AT 29*) (2), koji su konstruisale i standardizovale Snežana Tovilović i Zdenka Novović, 2009. godine. Skala se sastoji od 29 ajtema, a ukupan skor je suma pojedinačnih skorova. Skala je konstruisana kao petostepena skala Likertovog tipa. Na ispitivanom uzorku dobijena je izrazito visoka interna konzistentnost skale – Krombah alfa je iznosio 0,96.

Za ispitivanje depresivne ličnosti korišćena je standardizovani upitnik pod nazivom Depresivna ličnost (DL) (2), koju su konstruisale i standardizovale Zdenka Novović, Ljiljana Mihić i Snežana Tovilović, 2008. godine. Skala sadrži 26 ajtema, a ukupan skor je suma pojedinačnih skorova. U pitanju je petostepena skala Likertovog tipa. Na ispitivanom uzorku dobijene su visoke interne konzistentnosti – u studentskom i opštem uzorku: 0,90, i kliničkom: 0,84.

Podaci su obrađivani u statističkom programu SPSS, a za statističku analizu podataka korišćen je Pearsonov koeficijent linearne korelacije i jednofaktorska analiza varijanse.

Rezultati

U istraživanju je učestvovalo 355 ispitanika, od čega 265 (74,8%) žena i 90 (25,4%) muškaraca (tabela 1). Starost ispitanika se kretala od 18 do 68 godina. Najveći procenat ispitanika je bio iz centralne regije Crne Gore (72,1%), a zatim sa juga (17,5%) i severa Crne Gore (10,4%). Po pitanju obrazovanja, 40% ispitanika je bilo sa završenom srednjom školom, 47,9% sa fakultetom i 12,1% sa magisterskim ili doktorskim studijama. Zaposleni su činili 59,7% ispitanika, a nezaposleni 40,3%. Skoro svaka druga osoba je bila neodata/neoženja, 26,2% je bilo u bračnoj zajednici, 24,8% u vanbračnoj vezi, a 2,5% je bilo razvedeno. Čak 82,3% ispitanika se izjasnilo da ima prosečno socio-ekonomsko stanje, 9,9% loše, a 7,9% dobro.

Žene su, u poređenju sa muškarcima, imale značajno izraženije crte anksioznosti ($F=13,34$; $p < 0,01$) i crte depresivnosti ($F=5,35$; $p<0,05$) (tabela 1). Pokazalo se da starost nije značajan faktor koji utiče na ispoljavanje depresivnih crta, ali je crta anksioznosti bila značajno više izražena kod

(3). Anxiety as a trait correlates positively with rumination and depression, while mental flexibility correlates negatively with anxiety, rumination and depression (4). Mental flexibility may possibly moderate the relationship between trait anxiety and depression (4), while rumination has a mediating effect. In addition, avoidance behavior has been registered as a mediator between previous anxiety and later depression (5)

The results suggest that depression is connected with personality traits such as neuroticism/negative emotionality, extravert behavior/positive emotionality and conscientiousness. Moreover, it seems that personality traits contribute to the onset and course of depression in different ways (6). High neuroticism was proved to be the predictor of psychological problems, which speaks of the fact that personality traits are useful indicators for the screening of psychological problems and efficient way towards the prevention in general population (7). The question arises whether early interventions in persons with high neuroticism can be efficient in preventing the later pain and emotions of incapacity related to anxiety and depressive disorders (8).

The aim of this study was to examine the connection between trait anxiety and depressive personality traits among adult respondents from Montenegro, in order to get directions for the application of programs for the maintenance of mental health.

Methods

The study included 355 respondents, who completed the questionnaire online via Google Forms platform. The link that was used to access the questionnaire was: <https://docs.google.com/forms/d/e/1FAIpQLSdygvpFmMpYHIK9oMTDeMJYKPyKiuKehLbmSyveHRSsPERsnQ/viewform>. The questionnaire was completed by adult persons from Montenegro, who accessed the link in September and October 2020.

The following data were collected from the respondents with the help of the general questionnaire: sex (female and male), age (numerical variable transformed into two categories: younger – from the age of 18 to 43 and older – from the age of 44 to 68), region where the person lived (south, central region and north of Montenegro), education (high school,

faculty, master or doctoral studies), employment status (unemployed, employed), marital status (not married, married, common-law marriage, divorced, widow/widower), socio-economic status (poor, average, good).

For the assessment of anxiety as a personality trait, we used a standard questionnaire Anxiety Trait 29 (AT-29), which was designed and standardized by Snezana Tovilovic and Zdenka Novovic in 2009. The scale consists of 29 items, while the total score is the sum of individual scores. The scale was designed as a 5-point Likert scale. Particularly high consistency of the scale was obtained for this sample – Cronbach's alpha amounted to 0.96.

For the assessment of depressive personality we used the standardized questionnaire Depressive Personality (DP), which was made and standardized by Zdenka Novovic, Ljiljana Mihic and Snezana Tovilovic in 2008. The scale consists of 26 items, while the total score is the sum of individual scores. It is a 5-point Likert scale. High internal consistency was obtained for the examined sample – for the students' and general sample: 0.90, and clinical: 0.84.

Data were analyzed with the help of SPSS statistical program, while Pearson's linear correlation coefficient and one-factor analysis of variance were used for the statistical analysis of data.

Results

The study included 355 respondents, 265 women (74.8%) and 90 men (25.4%) (Table 1). The respondents' age ranged from 18 to 68 years. The highest percentage of respondents was from the central region of Montenegro (72.1%), and then from the south (17.5%) and north (10.4%). As far as their education is concerned, 40% of respondents finished high school, 47.9% of them graduated from the faculty, while 12.1% of them graduated from master or doctoral studies. 59.7% of them were employed, while 40.3% were unemployed. Almost every other person was not married, 26.2% were married, 24.8% in common-law marriage, and 2.5% were divorced. Even 82.3% of them stated that they had average socio-economic status, 9.9% poor and 7.9% good.

Women, in comparison to men, had significantly more pronounced anxiety-related personality traits ($F=13.34$; $p<0.01$) and depressive traits ($F=5.35$; $p<0.05$) (Table 1). It was shown that

Tabela 1. Distribucija ispitanika Crne Gore prema izraženosti anksioznih (AT29) i depresivnih (DL) crta ličnosti u odnosu na njihove demografske karakteristike

Varijable	AT29 skala $\bar{x} \pm SD$	Jednofaktorska analiza varijanse	DL skala $\bar{x} \pm SD$	Jednofaktorska analiza varijanse
Ukupno (N=255)	49,40±25,49		38,48±18,37	
Pol				
Žene (N=265)	52,23±26,17	F=13,34 p<0,001	39,79±18,34	F=5,35 p=0,02
Muškarci (N=90)	41,07±21,43		34,63±18,01	
Uzrast (godine)				
Mlađi (18-43) (N=320)	50,40±25,65	F=5,09	38,98±18,53	F=2,35
Stariji (44-68) (N=35)	40,23±22,23	p=0,03	33,97±16,40	p=0,13
Stepen obrazovanja				
Srednja škola (N=142)	55,77±24,90	F=8,42	43,96±17,80	F=11,63
Fakultet (N=170)	46,18±25,72	p<0,001	35,41±18,76	p<0,001
Magisterske ili doktorske studije (N=43)	41,09±21,96		32,51±13,71	
Mesto stanovanja				
Jug Crne Gore (N=62)	51,26±26,00	F=0,20	38,23±19,11	F=0,18
Centralna Crna Gora (N=256)	49,03±25,50	p=0,82	38,29±18,23	p=0,83
Sever Crne Gore (N=37)	48,84±25,08		40,22±18,54	
Bračni status				
Slobodan (N=165)	50,28±26,67	F=0,54	40,19±19,22	F=1,31
Vanbračna zajednica (N=88)	49,75±23,52	p=0,65	37,59±15,98	p=0,26
Bračna zajednica (N=93)	48,43±25,30		37,06±18,94	
Razveden/a (N=9)	39,78±25,88		30,44±17,25	
Radni status				
Nezaposlen (N=143)	53,83±25,28	F=7,35	40,67±16,87	40,67±16,87
Zaposlen (N=212)	46,42±25,25	p=0,01	37,00±19,22	37,00±19,22
Socio-ekonomski status				
Loš (N=35)	60,17±25,57	F=4,45	48,66±20,13	F=6,28
Prosečan (N=192)	48,81±25,29	p=0,01	37,54±17,91	p<0,001
Dobar (N=28)	42,07±24,29		35,57±17,47	

\bar{x} -aritmetička sredina; SD-standardna devijacija.

mlađih ispitanika ($F=5,09$; $p<0,05$). Kada pogledamo obrazovni nivo, najslabije izražena crta anksioznosti bila je prisutna kod osoba sa završenim magistarskim ili doktorskim studijama, nešto veća kod osoba sa završenim fakultetom, a najveća kod osoba sa završenom srednjom školom ($F=8,42$; $p<0,01$). Slično je dobijeno u pogledu izraženosti crta depresivne ličnosti kod osoba različitih obrazovnih nivoa ($F=11,63$; $p<0,01$). Anksiozne crte ($F=4,45$; $p<0,05$) i crte depresivne ličnosti ($F=6,28$; $p<0,01$) su bile značajno više kod osoba sa lošim, nego kod osoba sa prosečnim i dobrim socio-ekonomskim stanjem. Zaposleni i nezaposleni ispitanici se nisu značajno razlikovali u pogledu izraženosti crta depresivne ličnosti, ali su se razlikovali u pogledu crte anksioznosti, koja je bila značajno više izražena kod nezaposlenih ispitanika nego kod zaposlenih ($F=7,35$; $p<0,05$). Regija iz koje ispitanici dolaze i bračni status nisu se pokazali kao faktori

koji značajno utiču na izraženost anksioznih i depresivnih crta ličnosti.

Statistički značajna visoka pozitivna korelacija dobijena je između crte anksioznosti i crta depresivne ličnosti ($r=0,82$; $p<0,01$) (tabela 2).

Diskusija

U našem istraživanju uočena je značajna visoka pozitivna korelacija između crta ličnosti anksioznosti i crta depresivne ličnosti. Rezultat našeg istraživanja je u skladu sa rezultatima ranije sprovedenih istraživanja (4,9), koja su pokazala da postoji pozitivna veza između simtoma anksioznosti i depresije, ako se na osnovu brojnih rezultata anksiozne i depresivne crte shvate kao predisponirajući faktori za razvoj neurotskih simptoma (3,5,8). Anksioznost kao crta ličnosti predstavlja sklonost da se odgovori stanjem anksioznosti onda kada anticipiramo opasnost, bilo da je ona stvarna ili

Table 1. Distribution of respondents from Montenegro regarding anxious (AT-29) and depressive (DP) personality traits according to their demographic characteristics

Variables	AT29 scale $\bar{x} \pm SD$	Jednofaktorska analiza varijanse	DL skala $\bar{x} \pm SD$	Jednofaktorska analiza varijanse
Total (N=255)	49.40±25.49		38.48±18.37	
Pol				F=5.35
Women (N=265)	52.23±26.17	F=13.34 p<0.001	39.79±18.34	p=0.02
Men (N=90)	41.07±21.43		34.63±18.01	
Uzrast (godine)				
Mlađi (18-43) (N=320)	50.40±25.65	F=5.09 p=0.03	38.98±18.53	F=2.35
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Dobar (N=28)	42.07±24.29		35.57±17.47	

\bar{x} -mean; SD-standard deviation.

age was not a significant factor which influenced the manifestation of depressive traits, whereas anxiety-related traits were significantly more pronounced in younger respondents ($F=5.09$; $p<0.05$). As for the level of education, the most weakly pronounced trait anxiety was present in persons with master's or doctoral degree, somewhat higher in persons with bachelor's degree, and the highest in persons with high school diploma ($F=8.42$; $p<0.05$). The similar results were obtained for depressive personality traits depending on the level of their education ($F=11.63$; $p<0.01$). Anxiety-related traits ($F=4.45$; $p<0.05$) and depressive personality traits ($F=6.28$; $p<0.01$) were significantly higher in persons with poor than in persons with average and good socio-economic status. There was no significant difference between employed and unemployed respondents regarding depressive personality

traits, while difference was noted regarding trait anxiety, which was more pronounced in unemployed respondents in comparison to employed respondents ($F=7.35$; $p<0.05$). Region, where the respondents came from, and marital status were not factors that significantly influenced anxious and depressive personality traits.

The high positive correlation between trait anxiety and depressive personality traits was statistically significant ($r=0.82$; $p<0.01$) (Table 2).

Discussion

In our study, the high positive correlation between anxiety-related personality traits and depressive personality traits was significant. The results of this study are in accordance with the results of previously conducted studies (4,9), which showed the positive correlation between the symptoms of anxiety and depression, if according

Tabela 2. Deskriptivna statistika na skali anksioznosti (AT29) i na skali depresivnosti (DL)

Skale	Min	Max	\bar{x}	SD	Skjunitis	Kurtozis
AT29	2	114	49,40	25,49	0,23±0,13	-0,86±0,26
DL	0	101	38,48	18,37	0,41±0,13	-0,16±0,26

\bar{x} -aritmetička sredina; SD-standardna devijacija.

ne (10). Stanje anksioznosti podrazumeva svesno opaženo stanje straha i strepnje, koje je subjektivno i može biti isprovocirano nekim spoljašnjim ili unutrašnjim stimulusom opaženim kao opasnost ili pretnja. Crte depresivne ličnosti uključuju pesimističnost, pasivizaciju, samokritičnost, samooptuživanje, zabrinutost, preokupiranost negativnim događajima, osećanjem neadekvatnosti i sopstvenim nedostacima i ove crte su relativno trajne karakteristike ličnosti. Stanje depresivnosti može imati različit tok i trajanje, a karakteriše ga doživljaj intenzivne tuge, potištenosti, bezvoljnosti, beznadja i bespomoćnosti, neretko uz usporenost, iscrpljenost, razdražljivost i probleme koncentracije i pažnje.

Ono što je zajedničko i za jedne i za druge crte jeste psihološka vulnerabilnost, odnosno ranjivost, koja podrazumeva preosetljivost i smanjenu otpornost na različite podražaje koji prete da ugroze stanje psihološke ravnoteže, pa se prisustvo ovih crta može smatrati značajnim preduslovom za razvoj simptoma anksioznosti i depresije (3,5,11). Upravo bi zato bilo poželjno rano identifikovati pojedince sa ovim tendencijama (moguće tokom školovanja) i osmisliti tretmane za prevenciju poremećaja.

Iako se ove crte ličnosti formiraju tokom ranog razvoja, značajno je obratiti pažnju na uticaj pojedinih demografskih karakteristika na njihovu izraženost. Naši rezultati ukazuju da su ove crte izraženije kod žena, kod ispitanika nižeg obrazovnog statusa i lošijeg socio-ekonomskog stanja. Činjenica da su kod žena izraženije anksiozne i depresivne crte mogu se donekle objasniti kulturološkim obrascima crnogorskog društva, gde je emocionalna ekspresija neuobičajena i neočekivana od muškaraca, pa će oni, čak i ako poseduju ove crte, biti manje skloni da ih pokažu. Sa druge strane, jasno je da niži obrazovni nivo i lošiji materijalni status mogu uticati na kvalitet života pojedinca, te bi to moglo biti obrazloženje veće izraženosti anksioznih i depresivnih crta kod ovih ispitanika.

Kod ispitanika koji su nezaposleni, jače je bila izražena crta anksioznosti nego kod zaposlenih. Takođe, anksiozne crte značajno su izraženije kod mlađih ispitanika nego kod starijih, što je u skladu sa rezultatima istraživanja Varme i saradnika, gde su mlađi ispitanici pokazivali značajno veće nivo anksioznosti, deprimiranosti i distresa nakon izbijanja pandemije COVID 19 nego što je to bio slučaj sa starijim ispitanicima (10). Jedno od mogućih objašnjenja ovog fenomena može da bude to što su mlađi ispitanici otvoreniji za izražavanje svojih emocionalnih stanja u situaciji ispitivanja, ali su neophodna dalja istraživanja koja bi ovu problematiku detaljno ispitala.

Kada znamo da postoje crte ličnosti koje predstavljaju predispozicije za razvoj određenih simptoma i poremećaja, kao što je to slučaj sa crtama merenim u ovom istraživanju, posebno kada znamo da se u značajnom broju slučajeva te crte javljaju zajedno, onda možemo osmisliti programe prevencije i podrške kod osoba kod kojih se rano detektuju ove crte, kako bi se sprečilo da potekoće u funkcionisanju prerastu u anksioznost ili depresiju.

Zaključak

Crte ličnosti koje predstavljaju predispoziciju za razvoj simptoma anksioznosti i depresivnosti su značajno više ispoljene kod žena, osoba sa nižim stepenom obrazovanja i lošijeg socio-ekonomskog stanja. Kod mlađih ispitanika i onih koji su nezaposleni, značajno je jače izražena crta anksioznosti u odnosu na starije i zaposlene ispitanike, ali se nije pokazalo da starost i radni status utiču na ispoljenost depresivnih crta ličnosti. Nije pronađen značajan uticaj bračnog statusa i zaposlenosti na ispoljenost crta ličnosti merenih u ovom istraživanju. Uočena je značajna visoka pozitivna korelacija između crta anksioznosti i crta depresivne ličnosti, što može doprineti osmišljavanju adekvatnih preventivnih programa za očuvanje mentalnog zdravlja kod rizičnih kategorija osoba.

Table 2. Descriptive statistics on the anxiety scale (AT29) and depression scale (DP)

Skale	Min	Max	\bar{x}	SD	Skewness	Kurtosis
AT29	2	114	49.40	25.49	0.23±0.13	-0.86±0.26
DL	0	101	38.48	18.37	0.41±0.13	-0.16±0.26

\bar{x} -mean; SD-standard deviation.

to numerous results, anxious and depressive traits are considered to be predisposing factors for the development of neurotic symptoms (3,5,8). Anxiety as a personality trait is a tendency to respond with the state anxiety when danger is anticipated, no matter whether it is real or not (10). State anxiety is a consciously perceived state of fear and worry, which is subjective and can be provoked by some outer or inner stimuli, which are perceived as a threat or danger. Depressive personality traits include pessimism, passive behavior, self-criticism, self-reproach, worry, preoccupation with negative events, feeling of inadequacy and shortcomings and these traits are relatively constant personality traits. Depressive state can have different course and duration, and it is characterized by the feeling of intensive sorrow, fatigue, irritability and problems with concentration and attention.

What is common for both trait anxiety and depressive personality traits is psychological vulnerability, that is, high sensitivity and lowered resistance to different stimuli, which threaten to endanger the state of psychological balance, and therefore, the presence of these traits is deemed to be a significant precondition for the development of symptoms of anxiety and depression (3,5,11). Therefore, it is important to identify persons with such tendencies early (possibly during schooling) and work on the treatments for the prevention of these disorders.

Although these personality traits are formed during early development, it is important to pay attention to the influence of certain demographic characteristics on their distinctiveness. The results of our study point to the fact that these traits are more pronounced in women, respondents with lower educational status and poorer socio-economic status. The fact that anxiety-related traits and depressive traits are more pronounced in women may be explained, to some extent, by cultural patterns of Montenegrin society, where emotional expression is unusual and not expected

from men, and even if they have these traits, they do not tend to show them. On the other hand, it is clear that lower educational status and poorer material status may influence the quality of life, and therefore, this might be the explanation of higher distinctiveness of these traits in these respondents.

In respondents, who are unemployed, trait anxiety was more pronounced than in employed respondents. Also, anxiety-related traits are significantly more pronounced in younger respondents than in older ones, which is in accordance with the results of Varma and associates, where younger respondents showed significantly higher levels of anxiety, depression and distress after the onset of COVID-19 pandemic in comparison to older respondents (10). One of the possible explanations of this phenomenon may be that younger respondents are more open to express their emotional state in the examination situation, but further research is needed to examine this issue in detail.

Having in mind the fact that some personality traits may be the predisposition for the development of certain symptoms and disorders, as in the case of traits measured in this study, especially when we know that they may appear simultaneously in a significant number of people, we can create programs of prevention and support when these traits are detected early, in order to prevent these problems from developing into anxiety or depression.

Conclusion

Personality traits, which are the predisposition for the development of symptoms of anxiety and depression are significantly more pronounced in women, people with lower educational status and poorer socio-economic status. In younger and unemployed respondents, trait anxiety is significantly more pronounced than in older and employed respondents, but age and employment

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status were not shown to influence depressive personality traits. The influence of marital status and employment on personality traits measured in this study was not significant. The positive correlation between trait anxiety and depressive personality traits was significantly high, which may contribute to the creation of adequate prevention programs for the maintenance of mental health in risk categories.

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