Depression in Men and Women: Relative Rank, Interpersonal Dependency, and Risk-Taking

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The Social Rank Theory of depression (Price, Sloman, Gardner, Gilbert & Rohde, 1994) conceptualizes depression as a response to recognition that defeat will occur. This response reduces the risk of injury or death and further loss of valued resources, thus serving an important adaptive function. In the current study, men ($N = 63$) and women ($N = 154$) aged 18-35 completed an online questionnaire assessing depression, anxiety, social comparison, interpersonal dependency, and risk taking. Consistent with Social Rank Theory, depression levels were associated with a self-reported fall in social rank and a desire for a rise in rank. Furthermore, interpersonal dependency predicted depression for both men and women after controlling for anxiety and relative rank change and depression levels predicted a reduced willingness to engage in risky behavior.

**Keywords:** depression, social rank, interpersonal dependency; risk taking
Introduction

In several species, individuals compete for resources and social rank (Moosa & Ud-Dean, 2011). Ritualistic agonistic encounters often determine the winners and losers of these competitions and form the basis for relationships in the wider social hierarchy (Kaufmann, 1983). Accurate assessment of current social position (Fournier, 2009), assisted through social comparisons with others (Buunk, & Brenninkmeijer, 2000), allows individuals to predict the threat posed by potential competitors and the likelihood of success or defeat. Whilst the importance of the physical ability to retain resources (Resource Holding Potential, Parker, 1974) may have decreased during evolutionary history, prestige and the attributes valued by society (Social Attention Holding Potential, Gilbert, 1992) continue to provide access to valued resources (Gilbert, 1997). Therefore human competition extends beyond physical resource control, with individuals competing to be viewed as attractive and competent (Gilbert, 1992, 1997).

The Social Rank Theory of depression or Social Competition Hypothesis (Price, Sloman, Gardner, Gilbert & Rohde, 1994) conceptualizes depression as a response to recognition that defeat will occur during social competition. This behavioral response reduces the risk of injury or death and further loss of valued resources, serving an important adaptive function. The response was originally termed the yielding subroutine of ritual agonistic behavior (Price, 1967) and later renamed the Involuntary Subordinate Strategy (Price et al., 1994) or the Involuntary Defeat Strategy (Sloman, 2000). It is argued that the submissive depressive state inhibits aggressive behavior towards rivals signaling that the individual is unable to compete and no longer a threat, promotes acceptance of the new position and reduces the likelihood of injury (Allan & Gilbert, 1997; Gilbert, 2000; Price, et al., 1994; Sloman, Price, Gilbert & Gardner, 1994). In this context, submission also facilitates group stability and cohesion (Gilbert, 1989). The current study investigates the relationship between social rank and depression, whether the need for social or emotional support from others (interpersonal dependency) contributes to the depressive response. The study further investigates the relationship between depression and risk-taking which may also serve an adaptive function.

If the submissive behavior is effective (i.e. terminates competition) then the strategy should be ‘switched off’. However, in the event that the individual does not come to terms with their social position, feels trapped, or does not receive support from others, some individuals are
unable to ‘switch off’ the yielding behavior and the strategy remains active (Gilbert, 2001). Therefore depression can be conceptualized as the maladaptive consequence of prolonged use of short term adaptive defense mechanisms. The hypothesis is consistent with the physical, psychological and behavioral aspects of depression (Sloman et al., 1994). In particular, those with depression view themselves as defeated and inferior to others (Beck, Rush, Shaw & Emery, 1979; Gilbert, Gilbert & Irons, 2004). In addition, depressive symptomology is related to social rank (Troop & Baker, 2008; Sturman & Mongrain, 2005) and life events involving a loss of status (Farmer, & McGuffin, 2003; Gilbert & Allen, 1998). The association between depressive behavior, rank and submission is evident in a range of species (Lorenz, 1963; Price, 1989; Price & Sloman, 1987).

Several factors may increase the risk of depression. In particular, higher levels of interpersonal dependency (i.e. the need for social and emotional support from others) and sociotropy (particularly the need to please others) increase the likelihood of depression and negative mood (Besser & Priel, 2011; Gilbert, Allan & Trent, 1995; Loas, Verrier, Gayant, & Guelfi, 1998). The greater interpersonal dependency of women (Sananthara, Gardner, Prescott, & Kendler, 2003) and relative autonomy of men (McBride & Bagby, 2006) may in part contribute to the greater prevalence of depression amongst women. This difference in prevalence (Nesse, 2000) occurs cross culturally (Murakumi, 2002) and remains when controlling potential measurement bias (Van de Velde, Bracke, Levacue & Mevleman, 2010). The current study investigates the influence of interpersonal dependency on depression levels.

Depression also influences the willingness to engage in risky behavior. However, the relationship between depression and risk taking may differ for men and women. Men tend to respond to depression, stress and low mood with increased competition and risk taking (Angst, et al., 2002; Lighthall, Mather, & Gorlick, 2009), whilst similar behavior performed by women may be more likely to incur ostracism from the social group and threaten the social support received (Benenson, Hodgson, Heath & Welck, 2008). This is consistent with the greater male willingness to take risks in a range of contexts (Pawlowski, Rajinder, & Dunbar, 2008; Wang, Kruger, & Wilke, 2009; Zuckerman & Kuhlman, 2009). The current study investigates the influence of depression on risk taking separately for men and women.

The current study investigates the relationships between depression and self-reported social rank change in men and women, with particular emphasis on interpersonal dependency
and risk taking. We hypothesize that: (1) Depressed men and women will have experienced a fall in social rank, reflected by a self-reported decrease from previous to current rank, and desire a higher social rank than currently held; (2) Interpersonal dependency will (after controlling for anxiety and relative rank change) predict depression levels; (3) Depression will predict an increased willingness to engage in risk behavior for men and a reduced willingness to engage in risky behavior for women.

Method

Participants

Men and women aged 18-35 years were recruited online via social networking sites and research websites. Participants reporting grief were omitted from the sample due to shared symptomology with depression (Weisfeld & Wendorf, 2000). The final sample included 63 men (M_{age} = 23.52, SD = 4.44) and 154 women (M_{age} = 23.77, SD = 4.76). All men and the majority (93.5%) of women were White British. Participants were most likely to be single (men: 57.1%; women: 35.1%), followed by dating (men: 20.6%; women: 29.9%), cohabiting (men: 15.9%; women: 21.4%) and married (men: 6.3%; women: 13.6%) at the time of the study. The majority of male (82.5%) and female (81.8%) participants were heterosexual.

Measures

Questionnaires assessing depression, anxiety, social comparison, interpersonal dependency and risk taking were completed online.

Depression was measured using the CES-D (Radloff, 1977). Participants respond to 20 items relating to how often they have experienced a range of symptoms such as low mood and sleep disturbance during the previous week (0 = rarely or none of the time to 3 = most or all of the time). Anxiety was measured using the DASS-21 (Lovibond & Lovibond, 1995) subscale containing 7 items measuring symptoms of anxiety experienced in the previous week such as feelings of inappropriate fear (0 = did not apply to me at all to 3 = applied to me very much or most of the time). The depression (α = .94) and anxiety (α = .83) scales each demonstrated acceptable reliability.

The original Social Comparison Scale (Allen & Gilbert, 1995) was adapted to include current, previous and desired social comparisons. Specific timeframes were not specified and participants responded to ‘currently’ ‘used to’ and ‘would like to’ feel scales. Participants responded to 33 bipolar constructs (11 constructs per timeframe) on a 10 point scale and the
current (α = .94), previous (α = .92) and desired (α = .84) scales each demonstrated acceptable reliability. Relative rank change (current rank minus previous rank) and desired rise in rank (desired rank minus current rank) were then calculated.

The Interpersonal Dependency Inventory (Hirschfeld, Klerman, Gough, Barrett & Chodoff, 1977) contains 48 items measuring emotional reliance on others (18 items), lack of social confidence (16 items) and an assertion of autonomy (14 items) each rated on a 4 point scale (1 = not characteristic of me to 4 = very characteristic of me). Consistent with Nuns and Loas (2005) interpersonal dependency was calculated as emotional reliance and lack of social confidence minus assertion of autonomy. Reliabilities of the emotional reliance, lack of social confidence and assertion of autonomy scales were α = .84, α = .56 and α = .78 respectively. Overall reliability of the Interpersonal Dependency Inventory was α = .81. The Domain Specific Risk Taking (Adult) Scale (Blais & Weber, 2006) measured willingness to engage in social, financial, recreational, ethical and health risks. Participants rated the likelihood of engaging in each activity on a 7 point scale (1 = extremely unlikely to 7 = extremely likely). Reliabilities for social, financial, recreational, ethical and health risk taking were α = .63, α = .76, α = .81, α = .72 and α = .60 respectively.

Results

Depression and social rank

Depression levels were significantly correlated with a self-reported fall in social rank i.e. current minus previous rank (r = -.47, p < .001; r = -.57, p < .001) and desired rise in rank i.e. desired rank minus current rank (r = .64, p < .001; r = .66, p < .001) for men and women respectively. Therefore, consistent with hypothesis 1, higher depression levels were associated with a fall in social rank and a desire for a rise in social rank.

Depression, anxiety, relative rank change and interpersonal dependency

Hierarchical stepwise regressions were performed (separately for men and women) to investigate hypothesis 2. Depression and anxiety are often comorbid therefore anxiety was entered at step 1 as a control variable. Anxiety was a significant predictor explaining 36% and 48% of the variance in depression in men (β = .60, t = 5.84, p < .01) and women (β = .69, t = 11.85, p < .01) respectively. Relative rank change was entered at step 2, predicting 11% of depression variance for both men (β = .35, t = -3.59, p < .01) and women (β = -.36, t = -6.50, p < .001). At step 3 interpersonal dependency was entered, emerging as a significant predictor of
depression in men ($\beta = .21$, $t = 2.17$, $p < .05$) and women ($\beta = .23$, $t = 4.30$, $p < .001$), explaining 4% of further depression variance for both sexes. These data are shown in Tables 1 and 2. Therefore, anxiety, a fall in relative social rank and interpersonal dependency predict depression in both men and women.

**Table 1. Summary of Step-Wise Regression Analysis for Variables Predicting Depression in Men**

<table>
<thead>
<tr>
<th>Variable</th>
<th>$\beta$</th>
<th>$t$</th>
<th>$p$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anxiety</td>
<td>.60</td>
<td>5.84</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Step 2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anxiety</td>
<td>.51</td>
<td>5.29</td>
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<tr>
<td>Relative Rank Change</td>
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<td>-3.59</td>
<td>.001</td>
</tr>
<tr>
<td>Step 3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anxiety</td>
<td>.44</td>
<td>4.41</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Relative Rank Change</td>
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<td>-3.44</td>
<td>.001</td>
</tr>
<tr>
<td>Interpersonal Dependency</td>
<td>.21</td>
<td>2.17</td>
<td>.03</td>
</tr>
</tbody>
</table>

**Table 2. Summary of Step-Wise Regression Analysis for Variables Predicting Depression in Women**

<table>
<thead>
<tr>
<th>Variable</th>
<th>$\beta$</th>
<th>$t$</th>
<th>$p$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anxiety</td>
<td>.69</td>
<td>11.85</td>
<td>&lt;.001</td>
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<tr>
<td>Step 2</td>
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<td></td>
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<tr>
<td>Anxiety</td>
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<tr>
<td>Relative Rank Change</td>
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<tr>
<td>Step 3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<tr>
<td>Relative Rank Change</td>
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<td>&lt;.001</td>
</tr>
<tr>
<td>Interpersonal Dependency</td>
<td>.23</td>
<td>4.30</td>
<td>&lt;.001</td>
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</table>
**Depression and risk taking**

Regressions were conducted (separately for men and women) to investigate the impact of depression levels on willingness to engage in risky behavior (hypothesis 3). Depression predicted willingness to engage in recreational risks for both men ($\beta = -.26, t = -2.12, p<.05$) and women ($\beta = -.19, t = -2.41, p<.05$). Men and women with higher levels of depression were less willing to engage in recreational risks. Depression did not predict willingness to engage in social ($\beta = -.10, t = -.79, p>.05; \beta = .14, t = -1.70, p>.05$), financial ($\beta = .07, t = .53, p>.05; \beta = -.16, t = -2.01, p>.05$), health risks ($\beta = .04, t = .31, p>.05; \beta = .10, t = 1.26, p>.05$) or ethical risks ($\beta = .05, t = .41, p>.05; \beta = .13, t = 1.57, p>.05$) for men or women respectively. Although the reduced willingness of women with higher levels of depression to engage in risky behavior was consistent with initial predictions, the similar finding for male participants was inconsistent with the original hypothesis.

**Discussion**

The current study investigated the relationships between depression and social rank in men and women, with particular emphasis on reactions to a loss of social status, reliance on interpersonal relationships and risk taking. Higher depression levels were associated a self-reported fall in social rank and a greater desire for a rise in rank. These findings are consistent with hypothesis 1, the Social Rank Theory of Depression and the assertion that depression is a response to defeat (Price, et al, 1994).

As predicted by hypothesis 2, interpersonal dependency predicted depression levels (after controlling for anxiety and relative rank change) in both men and women. These findings are consistent with previous research indicating that higher level of interpersonal dependency increases the likelihood of depression (Loas, et al., 1998; McBride & Bagby, 2006). Consistent with hypothesis 3, women with higher levels of depression were less willing to engage in recreational risky behavior. Contrary to original predictions, men displayed a similar pattern and did not increase their risky behavior as previously reported (Angst, et al., 2002). The findings suggest that when depressed, withdrawal from risky activities may be adaptive for both men and women. Further research investigating responses to depressed mood and specific risk types is advised.

The current study was limited by reliance on self-report cross sectional data. Though self-reports are frequently used within depression research, concordance between clinical and self-
report depression scales may vary between depression phases (Senra & Polaino, 1993). Consequently some symptoms may be more accurately assessed through self-report or clinician ratings (Cuijpers, Li, Hofmann, & Andersson, 2010) and future research employing both self-report and clinician ratings is recommended. Likewise, self-reported data such as perceptions of current and previous social rank may be influenced by current mood and longitudinal research should be conducted.

Furthermore, the present study was limited to a British sample. Future research should consider differences between individualist and collectivist cultures (Hofstede, 1980), with regard to competition, responses to likely defeat, interpersonal relationships and risk taking. Research indicating that culture shapes responses to dominant or subordinate stimuli (Freeman, Rule, Adams & Ambady, 2009) and sensitivity to social events (Tafarodi & Smith, 2001) highlight the importance of caution when generalizing findings to other cultures. Researchers should therefore consider the moderating role of culture (Abu-Kaf & Priel, 2008) and factors such as personality which may influence responses to loss of social rank and risk of depression (Verkerk, Denollet, Van Heck, Can Son & Pop, 2005).

To conclude, depression is associated with a self-reported fall in relative rank position and a desire for a rise in social rank. Interpersonal dependency predicts depression levels after controlling for anxiety and relative rank change. Depression levels predicted willingness to engage in recreational risky behavior. These findings have important implications for therapeutic interventions (Sloman, 2008; Sloman, et al., 1994). Furthermore, wider understanding of the adaptive nature of depression may serve to reduce the stigma associated with the condition (Peluso & Blay, 2009).

References


