RESEARCH ARTICLE

The Fear of Intimacy and it's Relationship to Avoidant Personality Disorder

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ABSTRACT

Intimacy is an interactive relationship between two people that reflects how each interacts with the other and depends on self-disclosure and responsiveness to the other (Reis & Shaver, 1988, P.367-389). Intimate relationships are also defined as emotional relationships between individuals characterized by acceptance, mutual understanding, a sense of personal trust, and sensitivity to the other's needs (Sullivan, 1953). A study by Arnett (2001) indicated that intimate relationships develop during young adulthood and are more stable among married or unmarried individuals compared to those formed during adolescence, where identity formation and developing the ability for intimacy are the main tasks. The earlier stages of an individual's life and their relationship with their parents during childhood are the foundation for the growth and formation of their personality and its components, including the superego (Arnett, 2001, p. 133-143).


Thelen (1993) & Doi indicated that the reasons for fear of intimacy are a lack of trust in others and not seeking help from them, leading to the use of avoidance strategies in intimate relationships and communication (Emmons & Colby, 1995, P.947-959).

Thelen et al. (2000) observed that avoidance of intimacy is likely to be associated with or consistent with attachment theory and an individual's ability to form intimate relationships in adulthood (Thelen et al., 2000, P.223-240).

Fenigsten (1995) noted that individuals with avoidant personality disorder feel weak and unable to withstand high levels of humiliation and shame because they believe they are incompetent (Fenigsten, 1995, P.12-13).

INTRODUCTION

Intimate relationships are social relationships through which an individual feels confident and explores similarities and differences in thoughts, behaviours, and feelings, which helps in emotional and psychological growth (Al-Bahnasawy, 2020, p. 1234).

Many studies indicate that fear of intimacy is more harmful to the psychological health of females compared to males and causes depression in them.
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The Fear of Intimacy and it’s Relationship to Avoidant Personality


As for Radley (1993), he showed that women and men differ in their emotional expressions regarding feelings of intimacy. Women tend to view intimacy as feelings of love and physical or material closeness with a life partner. (Ridely, 1993, p. 243-253)

As for Gilligan (1982), he believes that men view intimacy and togetherness as activities and activities, and women view intimacy and togetherness as a state of being. (Gilligang 1982, p. 199-212)

Greenfield and Thelen (1997) found that fear of intimacy is negatively associated with emotional closeness, self-disclosure, sexual orientation, and relationship satisfaction among minorities. (Greenfield & Thelen, 1997, P.707-716). Fear of intimacy may carry with it a lot of pain and suffering, causing individuals to experience fear and anxiety about intimacy. This fear negatively impacts the health of the individual, the family, and society (Emmons & Colby, 1995, P.947-959).

Avoidant Personality Disorder (AVPD) is one of the most significant issues individual’s faces. The behavior of individuals with this disorder can lead to a continuous cycle of mistakes and turmoil, resulting in isolation and distancing from peers and coworkers (Ghanem, 2006, p.21). This, in turn, causes avoidant personalities not to receive acceptance signals, generating a constant feeling of social inadequacy, which is the core of this disorder. Since the social relationships of avoidant individuals limit intervention in this process, contributing to feelings of rejection, which the patient fears, avoidant individuals see themselves as incompetent regardless of whether the disorder persists or not. The disordered individual tends to blame others and lacks the necessary coping mechanisms to deal with stress and problems (X refer-e, 2000, p. 2).

Young adults suffer from this disorder, which begins in early adulthood. Individuals with the disorder face difficulties in interacting with others, and their self-image differs from how others perceive them. The behaviors associated with personality disorders are characterized by a significant degree of rigidity, which causes increased stress and psychological pressure (Clarkin et al., 2005, P. 386-397).

Eysenck mentions that every person has a degree and position on the dimension of (extraversion-introversion) as well as on the dimension of neuroticism. The avoidant person...

These two dimensions attract him, and he does not know his exact location. Tamara et al.’s study (Tamara, et.al, 2015) aimed to find out the relationship between childhood maltreatment and avoidant personality disorder, and the results concluded that there is a relationship between childhood maltreatment and symptoms of avoidant personality disorder. (Tamara, et. al, 2015, p. 101-116)

The current research aimed to identify:

1- Fear of intimacy among (married employees).
2- Avoidant personality disorder among (married employees).
3- Differences in fear of intimacy among (married employees) according to variables :
   A- Gender (males - females).
   B- Age (20-29) (30-39) (40-49) (59-50).
4- Differences in avoidant personality disorder among (employees/married couples).
   A- Gender (males - females).
   B- Age (20-29) (30-39) (40-49) (59-50).
5- The correlation between fear of intimacy and avoidant personality disorder.
6- The current research is limited to a sample of (employees/married couples) at the University of Baghdad for the academic year (2022-2023) for both genders (males - females).
Definition of terms:
First: Fear of Intimacy:
The fear of intimacy has been defined by a number of researchers, including:

1- (Hatfield,1984): A complex concept that exists in every person to some degree and arises due to fear of abandonment, loss of an individual, loss of control, attacks of anxiety, or fear of divulging information regarding a relationship with another individual that will cause him or her distress or distress.” (Hatfield, 1984, p.218-225).

2- (Descutner & Thelen, 1991): "The inhibited ability or energy of an individual due to anxiety about exchanging thoughts and feelings related to personal importance with another person of higher value.” (Descutner & Thelen, 1991, p. 219)

The researcher adopted the definition (Descutner & Thelen, 1991) in preparing the scale because she relied on its theoretical framework.

As for the procedural definition: it is the total score that the respondent obtains after answering the fear of intimacy scale prepared for this purpose.

Second: Avoidant personality disorder:


2- (Oakley & Potter, 1997): “A disorder characterized by social isolation, feelings of inadequacy, and an oversensitivity to rejection. It includes a clear desire for the individual to be in a situation that requires a lot of contact or affection in his or her relationships with other people. The individual experiences an intense need to avoid criticism and rejection, and strong feelings of inadequacy or inferiority.” (Oakley & Potter, 1997, p. 42-43).

The researcher adopted the definition of avoidant personality disorder according to the fifth Diagnostic and Statistical Manual of the World Health Organization (DSM-5).

As for the procedural definition: the total score that the respondent obtains after answering the avoidant personality disorder scale prepared for this purpose.

Theoretical framework

Intimacy is a determinant of the quality of close relationships and overall psychological well-being in adulthood (Ries & Shaver, 1988, P362-389).

Intimacy can be considered a fluctuating and changing evolutionary process over time. It can be measured behaviorally or through self-report methods (Acitelli & Duck, 1987, P. 797-308). To understand the causes of fear of intimacy, Descutner and Thelen (1991) developed the Fear of Intimacy Scale to assess anxiety related to close relationships. High levels of fear of intimacy are associated with difficulty in understanding, discomfort, and unease in developing close relationships, resulting in short-lived relationships. Additionally, the risks of intimacy are linked to a lack of trust in others. Individuals with a fear of intimacy exhibit low-quality relationships, finding self-disclosure extremely difficult (Miller & Lefcourt, 1982; Reis, 1982). Failure to establish intimate relationships is related to deficiencies in social support (Reis & shaver, 1988, Taylor, 1991).
Reasons for fear of intimacy:
Hatfield (1984) was the first to discuss the concept of fear of intimacy and identified the main causes of this fear, which are:

1. Fear of abandonment: This means that a friend might abandon their friend, which may result from something that happened in childhood or due to the loss of a parent or close person.
2. Fear of rejection: This may be due to past suffering or encountering individuals who experienced rejection, leading to an unwillingness to face this wound.
3. Fear of exposure: This refers to the fear of revealing private information, such as childhood sexual abuse.
4. Fear of destructive impulses: This is when an individual, due to a sudden impulse, acts spontaneously without considering the consequences and without self-control.
5. Fear of angry attacks: This indicates a tendency in the individual to reveal information about their relationship with the other person.
6. Fear of losing individuality: This means the individual fears losing themselves.
7. Fear of control: This means the individual feels they cannot control their actions or thoughts, potentially putting others or themselves at risk. (Hatfield, 1984, P.212).

Theories of fear of intimacy:
First: Adult Attachment Theory by Bowlby et al: (Adult Attachment Theory, 1980)
John Bowlby was the first to introduce concepts from ethology, social ethics, information processing, psychoanalysis, and developmental psychology into a theory that explains how young children form working models of interpersonal relationships, which function defensively and developmentally (Bowlby, 1969; Bretherton, 1992).
Practically, working models are cognitive and emotional schemas that provide a model of the self and a model of others. Both models guide and direct the child’s behavior, thoughts, feelings, and expectations in resulting social interactions (Collins, 1996; Collins & Read, 1990; Hazan & Shaver, 1994).
Bowlby’s proposal that working models consist of beliefs and feelings about the self (Bartholomew & Horowitz, 1991, p. 244-266).
The binary classification by Bartholomew, which includes secure attachment and anxious attachment, is similar to Hazan and Shaver’s classification of secure and anxious attachment. A set of procedural analyses using these two measures reveals four different groups that match the classifications. Individuals with secure attachment in their romantic relationships are not afraid of being emotionally close to others, do not fear separation and abandonment, and are confident that others will be dependable and cooperative (Collins, 1996, P. 664-683).
Individuals with an anxious attachment style tend to be worried and preoccupied, describing their childhood attachment figures as inconsistently supportive. Those who exhibit anxious attachment levels and fear rejection from partners tend to be overly dependent on others. As adults, individuals with anxious attachment tend to struggle with self-esteem and self-assertion, displaying high levels of anxiety, depression, hopelessness, and hostility. Those with an avoidant attachment style tend to harbor negative attitudes toward others, viewing the world with expressions of distrust and negativity (Bartholomew, 1991, P. 224-226).

Theory (Descutner & Thelen, 1991):
Both Descutner and Thelen (1991) suggest that fear of intimacy is rooted in negative self and other attitudes arising from early negative relationships between the child and their caregiver. These negative attitudes resemble the internal working model proposed by attachment theorists (Vangelisty, 2015, P.296).
Descutner and Thelen (1991) elucidate the concept of fear of intimacy as an individual’s inability to establish close relationships with another person, which they deem important due to the fear of sharing thoughts and feelings with them (Descutner & Thelen, 1991, P.219).
One of the causes of fear of intimacy is the difficulty in recognizing and communicating with others, the inability to develop relationships between partners, and hesitation in disclosing one's inner emotional charges, which hinders the formation of social relationships (Thelen & Harmon, 2000, P. 223-240).

The construction of fear of intimacy focuses on psychological processes within the individual, while acknowledging that both the situation and the other person are significant factors in the individual's experience with intimacy (Perlman & Fehr, 1987, P.13-24).

The structure of fear of intimacy takes on three characteristics:
A- Content: The ability to communicate personal information.
B- Emotional Valence: It is represented by strong feelings about exchanging personal information.
H - Vulnerability: The individual's high appreciation of the other party.

Descutner & Thelens (1991) suggested that the coexistence of these three factors is necessary for the existence of intimate relationships, and the constructs of self-disclosure, loneliness, and social anxiety were relied upon in developing the fear of intimacy model. (Descutner & Thelen, 1991, p.25)

Avoidant personality disorders:
The concept of avoidant personality disorder:
The term "Avoidant Personality Disorder" first appeared in the third edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-III) in 1980. Its symptoms were later included in the fourth edition (DSM-IV). Avoidant Personality Disorder is classified within the third cluster of personality disorders alongside Dependent Personality Disorder and Obsessive-Compulsive Personality Disorder (APA, 2013, P. 673).

Avoidant Personality Disorder is defined as an anxiety disorder characterized by an individual's emotional anxiety towards others due to external threat (Al-Asadi, 2013, P. 244).

Criteria for avoidant personality disorder according to (A.P.A):
1. Avoids occupational or work activities that involve interpersonal contact due to fear of criticism or rejection.
2. Is unwilling to get involved with others unless certain of being liked.
3. Shows restraint within intimate relationships due to fear of shame or rejection.
4. Is preoccupied with being criticized or rejected in social situations.
5. Is inhibited in new personal ventures because of feelings of inadequacy.
6. Views self as socially inept, personally unappealing, or inferior to others.
7. Is unusually reluctant to take personal risks or to engage in any new activities because they may prove embarrassing. (APA, 2013, P. 672-673)

Avoidant Personality Disorder, according to the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) by the American Psychiatric Association, is defined as a pervasive pattern of social inhibition, feelings of inadequacy, and hypersensitivity to negative evaluation, beginning in early adulthood.

There are seven criteria established for diagnosing Avoidant Personality Disorder, and if an individual meets four or more of these criteria, they are classified as having Avoidant Personality Disorder (APA, 2013, P. 672).

CAUSES OF AVOIDANT PERSONALITY DISORDER
The causes of avoidant personality disorder have not been clearly identified, but they may be related to social, genetic, or psychological factors, and this disorder may be related to genetic factors related to mood (Okasha, 1999, p. 218).

The disorder has many causes, including:
1. Numerous studies have confirmed a relationship between early loss of love object and introversion and avoidance. (At-Tayyib, 1989, P.17)
2. Language disorder predisposes the child to avoid interaction and contact with others, leading to severe impairment in the child.
3. Notifying the child that they are subordinate to adults and imposing strict control over them.
4. Parental support for avoidant behavior in the child as politeness and modesty is one of the factors leading to the emergence of the problem.
5. The lack of a sense of security leads the child to lose trust in others and fear them.
6. Changes in habitat and residence lead to differences in traditions and customs and difficulty in establishing new relationships with others. (Al-Rawaji, 2000, P.20-24)

Theories of avoidant personality disorder:
First: Adler’s theory(1870-1931)
(Adler, 1911) proposed the concept of lifestyle, which refers to the individual’s unique way of interacting with the environment and meeting their needs. (Schultz, 1983, P.72)
Adler defined lifestyle as comprising social style, dominant style, taking style, and avoiding style. Avoidance refers to the individual’s attempts to avoid stressful situations or reduce emotional reactions through behavioral responses. (Ziegler & Hieller, 1980, P.24)
(Adler) believes that feelings of inferiority arise from a sense of incompleteness or inadequacy in any area of life. These feelings of inferiority may be exaggerated due to specific circumstances such as spoiling or neglecting a child, leading to the development of an inferiority complex or compensatory inferiority complex. (Lindzey, 1969, P.32-33)

Second: Karin Horney’s theory(1952-1885)
(Horney) refers to the primary concept in personality, which is basic anxiety, defining it as "a feeling of loneliness and complete helplessness that is hidden and prevalent in a hostile world." She also emphasizes the importance of cultural factors in shaping personality, as well as the role of interactions between parents and children in their early environment. She believes that there are three neurotic trends that individuals use as mechanisms to protect themselves from anxiety, leading individuals to three types of behavior:
1- Moving toward people: Characterized by a strong need for love, which is evident in everyone.
2- Moving against people (aggressive type): These individuals live in a world where, as they see it, everyone is hostile, and the one who is most cunning is the most fit to survive. They view a world where dominance, strength, toughness, and aggression are the greatest virtues.
3- Moving away from people (detached type): This type of individual tends towards isolation and avoiding establishing relationships of love, hate, or cooperation with others. They rely on their own abilities to develop their potential and skills.

Horney states that all neurotic or normal individuals experience the same types of conflicts between conflicting and conflicting methods, and the difference between a normal person and a neurotic person lies in the intensity of the conflict. (Schultz, 1983, P.102-107).

Adopting the criteria contained in the Diagnostic and Statistical Manual-5 (DSM-5, 2013):
The researcher adopted the diagnostic criteria outlined in the DSM-5 as the theoretical basis for her study for several reasons. One reason is that she did not find a previous theory that adequately presented or addressed avoidant personality disorder. Additionally, DSM-5 is the latest edition from the American Psychological Association, and it provides diagnostic aspects for each criterion, which assists in constructing the measurement tool. Therefore, adopting the diagnostic criteria from the DSM-5 served as the theoretical foundation for the researcher.

Research Methodology and Procedures
Firstly: Research Methodology:
The descriptive correlational method was applied, which focuses on revealing the relationships between variables and expressing them quantitatively through correlation coefficients (Stangor, 2011: P.10).

Secondly: Research Population:
The current research population consists of married male and female employees of the University of Baghdad for the years (2022-2023). This research population includes employees from (24) colleges. The total number of female employees is (1286), male employees are (1016), with a total of (2302) married employees.
Thirdly: Research Sample:
The researcher adopted a purposive sample (Non-Probability Sample) from (13) colleges. The sample size consisted of (400) employees, with (200) males and (200) females.

Fourthly: Research Instruments:
To achieve the objectives of the current research, the availability of two scales was required: the Fear of Intimacy Scale and the Avoidant Personality Disorder Scale.

The first instrument: Fear of Intimacy Scale (Fear of Intimacy Scale)
The researcher reviewed several foreign studies on this variable and adopted the scale developed by Descutner & Thelen (1991). The researcher relied on their definition of fear of intimacy and their theory. The scale consists of (35) items divided into two sections: Section (A) focuses on identifying feelings of fear of intimacy, while Section (B) assesses the individual’s experience and attitudes towards their previous emotional relationship.

Response Alternatives and Scale Correction:
What is meant by correcting the scale is to assign a score to the response of the sample members to the items of the scale, and then to collect these scores to extract the total score for each individual. The alternatives set for estimating the response were (applies to always, applies to often, applies to sometimes, does not apply to never, does not apply to Rarely) when grading, weights (5, 4, 3, 2, 1) are given to paragraphs with the phenomenon, while paragraphs against the phenomenon are given weights (1, 2, 3, 4, 5) when grading.

Scale Instructions Preparation:
Respondents are required to mark one of the five alternatives for each scale item and answer them sincerely and objectively.

Items Validity:
The items of the Fear of Intimacy Scale were presented to a group of experts, numbering (13) experts, to judge their validity. The researcher relied on a percentage of (80%) or more to determine the validity of the items and considered the linguistic modifications suggested by some of the expert reviewers for the items.

Clarity of Paragraphs, Instructions, and Time Calculation:
The researcher applied the Fear of Intimacy Scale to the same sample, and it was found that the items were clear and understandable for the sample. The time required to answer the scale items ranged between (15-20) minutes.

Items Analysis:
The researcher utilized two methods to analyze the items of the Fear of Intimacy Scale:

A- Extreme Group Method:
Psychological scales require calculating the discriminatory power of their items. The purpose of this process is to exclude items that do not discriminate between individuals and retain items that discriminate between individuals. Therefore, Kelly recommended relying on a ratio of (27%) of individuals in both the extreme high and low groups and excluding a ratio of (46%) of the middle group and those individuals who obtained the lowest score in the same test. (Al-Zoubai and others, 1981, p. 89)

After conducting appropriate statistical methods, where the computed t-value served as an indicator to distinguish each item by comparing its value with the tabulated value (1.96) at a significance level of (0.05) and degrees of freedom (214), it was found that all items of the Fear of Intimacy Scale were significant except for item number. (10)

B- Internal Consistency Method (Item-Total Correlation):
Using the data that was adopted in the two extreme samples method, the Pearson correlation coefficient was calculated, and when testing the significance of the correlation values using (SPSS), the results showed that all correlation values are statistically significant, being higher than the tabular value of (0.098) at the (0.05) level. Freedom (398), and Table 1 shows this:
Psychometric properties of the scale:

Among the most important standard characteristics that specialists in psychological measurement have focused on are the characteristics of validity and reliability.

A- Validity of the scale: The fear of intimacy scale has several indicators of validity, which are:

1- Face Validity:
This type of honesty is represented by presenting the items of the scale, its alternatives, and its instructions to a group of specialized arbitrators, and all their observations were taken into account.

2- Construct Validity:
Anastasi (1976) defined construct validity as the degree to which a scale measures a theoretical construct or a specific trait (Anastasi, 1976, p. 151).

The researcher ensured the validity of the Fear of Intimacy Scale through the following methods:

A- Discriminatory Power of Scale Items: All items of the Fear of Intimacy Scale were found to be significant because the computed t-values were higher than the tabulated t-values, except for item .(10)

B- Item-Total Correlation: The correlation coefficients between each item and the total score were all statistically significant because they were higher than the tabulated correlation coefficient.

C- Construct Validity of the Fear of Intimacy Scale using the Method of Domain-to-Domain and Domain-to-Total Correlations:

The relationships between each domain of the Fear of Intimacy Scale and the other domains were extracted using correlation coefficients, and Table 2 illustrates this:

Table 1: Validity of the items of the fear of intimacy scale using the relationship of the item score to the total score.

<table>
<thead>
<tr>
<th>Paragraph</th>
<th>Indication</th>
<th>Correlation Value</th>
<th>Paragraph</th>
<th>Indication</th>
<th>Correlation Value</th>
</tr>
</thead>
<tbody>
<tr>
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<td>Function</td>
<td>0,30</td>
<td>19</td>
<td>function</td>
<td>0,31</td>
</tr>
<tr>
<td>2</td>
<td>Function</td>
<td>0,35</td>
<td>20</td>
<td>function</td>
<td>0,21</td>
</tr>
<tr>
<td>3</td>
<td>Function</td>
<td>0,52</td>
<td>21</td>
<td>function</td>
<td>0,18</td>
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<tr>
<td>4</td>
<td>Function</td>
<td>0,35</td>
<td>22</td>
<td>function</td>
<td>0,33</td>
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<td>Function</td>
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<td>6</td>
<td>Function</td>
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<td>24</td>
<td>function</td>
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<tr>
<td>7</td>
<td>Function</td>
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<td>25</td>
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<td>0,23</td>
</tr>
<tr>
<td>8</td>
<td>function</td>
<td>0,33</td>
<td>26</td>
<td>function</td>
<td>0,27</td>
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<tr>
<td>9</td>
<td>function</td>
<td>0,83</td>
<td>27</td>
<td>function</td>
<td>0,21</td>
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<tr>
<td>10</td>
<td>-</td>
<td>fell into discrimination</td>
<td>28</td>
<td>function</td>
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<tr>
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<td>14</td>
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<tr>
<td>15</td>
<td>Function</td>
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<td>0,25</td>
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<tr>
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<td>Function</td>
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<td>34</td>
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<tr>
<td>17</td>
<td>Function</td>
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<td>35</td>
<td>function</td>
<td>0,24</td>
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<tr>
<td>18</td>
<td>0,19</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
Table 2: Validity of the fear of intimacy scale using the domain and domain relationship method for the total score.

<table>
<thead>
<tr>
<th>The field</th>
<th>Feelings of fear of Intimacy</th>
<th>The individual's experience and attitudes towards his emotional relationships</th>
<th>Fear of Intimacy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feelings of fear of Intimacy</td>
<td>1</td>
<td>0,15</td>
<td>0,97</td>
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<tr>
<td>The individual's experience and attitudes towards his emotional relationships</td>
<td>-</td>
<td>1</td>
<td>0,38</td>
</tr>
</tbody>
</table>

D- Confirmatory factor analysis of the fear of intimacy scale:

Stewart (1981) believes that the goal of confirmatory factor analysis is to test the extent of conformity of a model derived from theory and to a set of data (Tigza, 2012, p. 116).

The idea of confirmatory factor analysis is based on testing the correspondence between the covariance matrix of the variables included in the analysis and the matrix actually analyzed by the hypothesized model that determines certain relationships between these variables. Figure (1) shows the confirmatory factor analysis diagram for the fear of intimacy scale.

![Confirmatory factor analysis chart for the fear of intimacy scale](image)

Table 3: Saturation values of the items on their factors and critical ratio values for the fear of intimacy scale

<table>
<thead>
<tr>
<th>Paragraph sequence in scale</th>
<th>The field</th>
<th>Estimate saturation values</th>
<th>Critical ratio values C.R.</th>
<th>Indication 0.05</th>
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<td>V1</td>
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<td>V2</td>
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<td>0,39</td>
<td>V2</td>
</tr>
<tr>
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<td>V3</td>
<td>Feelings of fear of Intimacy</td>
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<td>V3</td>
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<td>V4</td>
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<td>V4</td>
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<td>V5</td>
<td>Feelings of fear of Intimacy</td>
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<td>V5</td>
</tr>
<tr>
<td>6</td>
<td>V6</td>
<td>Feelings of fear of Intimacy</td>
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<td>V6</td>
</tr>
<tr>
<td></td>
<td>V7</td>
<td>Feelings of fear of Intimacy</td>
<td>0.21</td>
<td>V7</td>
</tr>
<tr>
<td>----</td>
<td>-----</td>
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<td>-----</td>
</tr>
<tr>
<td>8</td>
<td>V8</td>
<td>Feelings of fear of Intimacy</td>
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<td>V8</td>
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<tr>
<td>9</td>
<td>V9</td>
<td>Feelings of fear of Intimacy</td>
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<td>V9</td>
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<td>V11</td>
<td>Feelings of fear of Intimacy</td>
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<td>V11</td>
</tr>
<tr>
<td>11</td>
<td>V12</td>
<td>Feelings of fear of Intimacy</td>
<td>0.59</td>
<td>V12</td>
</tr>
<tr>
<td>12</td>
<td>V13</td>
<td>Feelings of fear of Intimacy</td>
<td>0.49</td>
<td>V13</td>
</tr>
<tr>
<td>13</td>
<td>V14</td>
<td>Feelings of fear of Intimacy</td>
<td>0.34</td>
<td>V14</td>
</tr>
<tr>
<td>14</td>
<td>V15</td>
<td>Feelings of fear of Intimacy</td>
<td>0.24</td>
<td>V15</td>
</tr>
<tr>
<td>15</td>
<td>V16</td>
<td>Feelings of fear of Intimacy</td>
<td>0.37</td>
<td>V16</td>
</tr>
<tr>
<td>16</td>
<td>V17</td>
<td>Feelings of fear of Intimacy</td>
<td>0.24</td>
<td>V17</td>
</tr>
<tr>
<td>17</td>
<td>V18</td>
<td>Feelings of fear of Intimacy</td>
<td>0.22</td>
<td>V18</td>
</tr>
<tr>
<td>18</td>
<td>V19</td>
<td>Feelings of fear of Intimacy</td>
<td>0.45</td>
<td>V19</td>
</tr>
<tr>
<td>19</td>
<td>V20</td>
<td>Feelings of fear of Intimacy</td>
<td>0.2</td>
<td>V20</td>
</tr>
<tr>
<td>20</td>
<td>V21</td>
<td>Feelings of fear of Intimacy</td>
<td>0.2</td>
<td>V21</td>
</tr>
<tr>
<td>21</td>
<td>V22</td>
<td>Feelings of fear of Intimacy</td>
<td>0.17</td>
<td>V22</td>
</tr>
<tr>
<td>22</td>
<td>V23</td>
<td>Feelings of fear of Intimacy</td>
<td>0.41</td>
<td>V23</td>
</tr>
<tr>
<td>23</td>
<td>V24</td>
<td>Feelings of fear of Intimacy</td>
<td>0.45</td>
<td>V24</td>
</tr>
<tr>
<td>24</td>
<td>V25</td>
<td>Feelings of fear of Intimacy</td>
<td>0.34</td>
<td>V25</td>
</tr>
<tr>
<td>25</td>
<td>V26</td>
<td>Feelings of fear of Intimacy</td>
<td>0.13</td>
<td>V26</td>
</tr>
<tr>
<td>26</td>
<td>V27</td>
<td>Feelings of fear of Intimacy</td>
<td>0.21</td>
<td>V27</td>
</tr>
<tr>
<td>27</td>
<td>V28</td>
<td>Feelings of fear of Intimacy</td>
<td>0.21</td>
<td>V28</td>
</tr>
<tr>
<td>28</td>
<td>V29</td>
<td>Feelings of fear of Intimacy</td>
<td>0.12</td>
<td>V29</td>
</tr>
<tr>
<td>29</td>
<td>V30</td>
<td>Feelings of fear of Intimacy</td>
<td>0.23</td>
<td>V30</td>
</tr>
<tr>
<td>30</td>
<td>V35</td>
<td>The individual's experience and attitudes towards his emotional relationships</td>
<td>0.45</td>
<td>V35</td>
</tr>
<tr>
<td>31</td>
<td>V34</td>
<td>The individual's experience and attitudes towards his emotional relationships</td>
<td>0.34</td>
<td>V34</td>
</tr>
<tr>
<td>32</td>
<td>V33</td>
<td>The individual's experience and attitudes towards his emotional relationships</td>
<td>0.55</td>
<td>V33</td>
</tr>
<tr>
<td>33</td>
<td>V32</td>
<td>The individual's experience and attitudes towards his emotional relationships</td>
<td>0.23</td>
<td>V32</td>
</tr>
</tbody>
</table>
Scale stability indicators: (Scale Reliability)

Reliability means accuracy and consistency in the items of the scale in measuring what it was designed for. (Abu Hatab, 1987, p. 158)

To extract stability, it is used.

Alpha-Cronbach Method: (Alpha-Cronbach Method)

The stability of the Fear of Intimacy Scale was verified using the Cronbach method, based on the data of the total sample of (400) male and female employees (married) from the colleges of the University of Baghdad. The reliability coefficient with this method reached (0.69) after deleting paragraph No .(10)

Statistical indicators:

Parametric Statistical methods were used to analyze the statistical research data, and Table (4) shows this:

Table 4: Descriptive statistical characteristics of the research sample on the fear of intimacy scale

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Its value</th>
<th>Indicator</th>
<th>Its value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean</td>
<td>91,51</td>
<td>Skewness sprain</td>
<td>0,10</td>
</tr>
<tr>
<td>Median</td>
<td>92</td>
<td>Kurtosis</td>
<td>0,04</td>
</tr>
<tr>
<td>Mode</td>
<td>90</td>
<td>Minimum score</td>
<td>42</td>
</tr>
<tr>
<td>Standard Deviation</td>
<td>14,45</td>
<td>Maximum degree</td>
<td>140</td>
</tr>
</tbody>
</table>

Moderate distribution of the measurement sample on the fear of intimacy scale:

It is noteworthy that the statistical indicators of the fear of intimacy scale are consistent with the statistical indicators of the moderate distribution, and Figure 2 shows this:
Figure 2: Chart for the items of the Fear of Intimacy Scale

The second tool: Avoidant Personality Disorders Scale:

Description of the scale:
The researcher adopted the scale developed by Al-Jubouri (2019) and the definition of Avoidant Personality Disorder according to the classification of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5-TR) by the World Health Organization. The criteria outlined in the DSM-5-TR for the year 2022 were also adopted. The scale consists of 49 items distributed across seven domains, which include:

1. Avoidance of social and professional activities.
2. Unwillingness to engage with others unless assured of being liked.
3. Displays restraint or reservation in intimate relationships.
4. Preoccupied with being criticized.
5. Reluctance in new relationship situations.
6. Perceives oneself as socially incompetent.
7. Unusually opposed to taking personal risks.

The response options used were (Yes, No), where a score of (1) is assigned for "Yes" responses, and a score of (0) is assigned for "No" responses.

Validity of paragraphs:
The avoidant personality disorder scale items were presented to a group of (13) arbitrators with expertise in the field of psychology, and some items were modified. Two methods were used to analyze the paragraphs:

A- The two extreme group's method:
The scores of the upper and lower groups were extracted, and Table 9 shows this:

B- Using the relationship of the item score to the total score of the avoidant personality Disorder scale:
The Point-Basic correlation coefficient was calculated between the score of each item and the total score of the avoidant personality disorder scale. After conducting appropriate statistical methods, it was found that all paragraphs are significant except paragraph (14, 16) which is not statistically significant.

Table 5: Validity of the avoidant personality disorder scale items using the method of relating the item score to the total score

<table>
<thead>
<tr>
<th>Paragraph</th>
<th>Value</th>
<th>Indication</th>
<th>Paragraph</th>
<th>Value</th>
<th>Indication</th>
<th>Paragraph</th>
<th>Value</th>
<th>Indication</th>
<th>Paragraph</th>
<th>Value</th>
<th>Indication</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>0.36</td>
<td>function</td>
<td>14</td>
<td>0.35</td>
<td>function</td>
<td>27</td>
<td>0.44</td>
<td>function</td>
<td>40</td>
<td>0.31</td>
<td>function</td>
</tr>
<tr>
<td>2</td>
<td>0.22</td>
<td>function</td>
<td>15</td>
<td>0.34</td>
<td>function</td>
<td>28</td>
<td>0.42</td>
<td>function</td>
<td>41</td>
<td>0.35</td>
<td>function</td>
</tr>
<tr>
<td>3</td>
<td>0.56</td>
<td>function</td>
<td>16</td>
<td></td>
<td>I fell into discrimination</td>
<td>29</td>
<td>0.32</td>
<td>function</td>
<td>42</td>
<td>0.41</td>
<td>function</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>fell into discrimination</td>
<td>17</td>
<td>0.33</td>
<td>function</td>
<td>30</td>
<td>0.40</td>
<td>function</td>
<td>43</td>
<td>0.30</td>
<td>function</td>
</tr>
</tbody>
</table>
Psychometric properties of the scale:

A- Scale Validity:

1-Face Validity:
Face validity of the scale was assessed by presenting the Avoidant Personality Disorder scale to a group of experts, and all their observations were considered.

2- Construct Validity:
The researcher ensured the construct validity through the following:
Firstly, retaining the distinctive items of the Avoidant Personality Disorder scale, where it was found that all items were distinctive except for items 4 and 16.
Secondly, examining the correlation of each item with the total score of the scale, which served as an indicator of internal consistency by retaining statistically significant items.
Thirdly, assessing the relationship between each domain and the total score of the Avoidant Personality Disorder scale. Table 6 illustrates this relationship.

Table 6: Application of the avoidant personality disorder scale using the domain-to-domain relationship method and the domain-to-total score.

<table>
<thead>
<tr>
<th>The field</th>
<th>Avoid social activities</th>
<th>Not wanting to share with others</th>
<th>Reservation from intimate relationships</th>
<th>Preoccupation with being criticized</th>
<th>Not enjoying new situations</th>
<th>Feeling of social inadequacy</th>
<th>Opposition to engaging in activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Avoid social activities</td>
<td>1</td>
<td>0.47</td>
<td>0.45</td>
<td>0.53</td>
<td>0.52</td>
<td>0.41</td>
<td>0.39</td>
</tr>
<tr>
<td>Not wanting to share with others</td>
<td>--</td>
<td>1</td>
<td>0.45</td>
<td>0.49</td>
<td>0.50</td>
<td>0.43</td>
<td>0.30</td>
</tr>
<tr>
<td>Reservation from intimate relationships</td>
<td>--</td>
<td>--</td>
<td>1</td>
<td>0.46</td>
<td>0.37</td>
<td>0.34</td>
<td>0.34</td>
</tr>
</tbody>
</table>
Statistical characteristics of the avoidant personality disorder scale:
The statistical indicators for the scale were obtained using (SPSS), and are shown in Table(7)

Table 7: Descriptive statistical characteristics of the research sample on the avoidant personality disorder scale

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Value</th>
<th>Indicator</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Mean</td>
<td>23,25</td>
<td>5 Skewness sprain</td>
<td>0,18</td>
</tr>
<tr>
<td>2 Median</td>
<td>24</td>
<td>6 Kurtosis</td>
<td>0,02</td>
</tr>
<tr>
<td>3 Mode</td>
<td>25</td>
<td>7 Minimum score</td>
<td>0</td>
</tr>
<tr>
<td>4 Standard Deviation Std.Dev</td>
<td>8,25</td>
<td>8 Maximum degree</td>
<td>47</td>
</tr>
</tbody>
</table>

Indicators of the avoidant personality disorder scale:
The researcher verified the reliability of the Avoidant Personality Disorders Scale using the Keuder-Richardson 20 method, based on data from the total sample. The reliability coefficient using this method reached (0.86) after excluding items (16-4)

Moderate distribution of the avoidant personality disorder scale:
When observing the indicators that are consistent with the statistical indicators and are close to the moderate distribution, Figure 3 shows the graph of the avoidant personality disorder scale.

Figure 3: Chart for scale of disturbance of the Avoidant personality

RESEARCH RESULTS
The first objective: Measure the level of fear of intimacy among married employees:
To achieve this goal, the Fear of Intimacy Scale was applied to the research sample of (400) married employees, and then the raw scores obtained were converted into T scores. Table (8) shows this:

Table(8)

T-scores (modified standard) and their corresponding raw scores for the research sample members on the Fear of Intimacy scale

It is clear from the result of Table (9) that the percentage of individuals who have a high fear of intimacy (17.75%) out of the total research sample is less than those who have a low level (19%).

This result can be explained according to the theory adopted (Descutner & Thelen, 1991), which states that individuals who have a high level of fear of intimate relationships suffer from weak social relationships, lack of optimism, and are dissatisfied with their current social relationships. (Descutner & Thelen, 1991, P. 25).

Second objective: Measure the level of avoidant personality disorder among married employees:

To achieve this goal, the avoidant personality disorder scale was applied to the research sample of (400) married employees, and the raw scores obtained were converted into T scores. Table (9) shows this:

Table 8: T-scores (modified standard) and corresponding raw scores for individuals in the research sample on the avoidant personality disorder scale

<table>
<thead>
<tr>
<th>Sample</th>
<th>SMA</th>
<th>standard deviation</th>
<th>Level of fear of Intimacy</th>
<th>T grade</th>
<th>Corresponding raw grades</th>
<th>Number of individual</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>400</td>
<td>91.51</td>
<td>14.45</td>
<td>High</td>
<td>60 or more</td>
<td>140-106</td>
<td>71</td>
<td>17.75%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Middle</td>
<td>40-60</td>
<td>105-78</td>
<td>253</td>
<td>63.25%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Weak</td>
<td>40 or less</td>
<td>77-42</td>
<td>76</td>
<td>19%</td>
</tr>
</tbody>
</table>

The results from Table 8 indicate that the percentage of individuals with a high level of Avoidant Personality Disorder, at approximately 15% of the total research sample, is almost equal to the percentage of those with a low level, at 15.5%. According to the diagnostic criteria for Avoidant Personality Disorder outlined by the American Psychological Association (A.P.A), individuals affected by this disorder tend to avoid work-related activities due to fear of criticism. They also avoid forming new friendships unless they are certain they will be admired and accepted without facing criticism. Furthermore, they perceive themselves as inferior to others.

Third objective: Identify the relationship between fear of intimacy and avoidant personality disorder among married employees:

To achieve this goal, the Pearson correlation coefficient was used to calculate the correlation coefficient between the total scores obtained by the sample members on the fear of intimacy scale and avoidant personality disorder. The results showed that there is a statistically significant direct correlation between fear of intimacy and avoidant personality disorder, and the table (9) explains that:

Table 9: The relationship between fear of intimacy and avoidant personality disorder
The Fear of Intimacy and its Relationship to Avoidant Personality

<table>
<thead>
<tr>
<th>The two variables</th>
<th>Sample</th>
<th>Pearson correlation coefficient</th>
<th>Tabular value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fear of Intimacy and avoidant personality disorder</td>
<td>400</td>
<td>0.13</td>
<td>0.098</td>
</tr>
</tbody>
</table>

Fourth objective: Identify the significance of the difference in fear of intimacy according to the variables (a- gender, b- age).

A- The difference in fear of intimacy according to the gender variable (males, females):

To achieve this goal, a t-test was used for two independent samples to identify differences in fear of intimacy according to the gender variable (males, females). Table 10 shows this:

<table>
<thead>
<tr>
<th>The sample</th>
<th>Sex</th>
<th>The number</th>
<th>SMA</th>
<th>standard deviation</th>
<th>Calculated T-value</th>
<th>Tabular T-value</th>
<th>indication</th>
</tr>
</thead>
<tbody>
<tr>
<td>400</td>
<td>Males</td>
<td>200</td>
<td>93.75</td>
<td>13.11</td>
<td>3.13</td>
<td>1.96</td>
<td>function</td>
</tr>
<tr>
<td></td>
<td>Females</td>
<td>200</td>
<td>89.27</td>
<td>15.39</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The table 10 shows that there is a difference in fear of intimacy based on the gender variable, favoring males. This is because the calculated t-value is higher than the critical t-value of (1.96) at a significant level of (0.05) and degrees of freedom (398).

According to the theory proposed by Descutner and Thelen (1991), the reasons for fear of intimacy include difficulty in identification and communication with others, as well as the inability to develop close relationships between individuals.

Fifth objective: Identify the significance of the difference in avoidant personality disorder according to the variables (a- gender, b- age).

A- The difference in avoidant personality disorder according to the gender variable (males, females):

To achieve this goal, a t-test was used for two independent samples to identify differences in avoidant personality disorder according to the gender variable (males, females). Table 11 shows this:

<table>
<thead>
<tr>
<th>The sample</th>
<th>Sex</th>
<th>The number</th>
<th>SMA</th>
<th>standard deviation</th>
<th>Calculated T-value</th>
<th>Tabular T-value</th>
<th>Statistical significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>400</td>
<td>Males</td>
<td>200</td>
<td>23.31</td>
<td>7.53</td>
<td>0.14</td>
<td>1.96</td>
<td>Not a sign</td>
</tr>
<tr>
<td></td>
<td>Females</td>
<td>200</td>
<td>23.20</td>
<td>8.93</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

It is clear from Table 11 that there is no difference in avoidant personality disorder according to the gender variable because the calculated T-value is less than the tabulated T-value of (1.96) at the level of (0.05) and the degree of freedom (398).
It was mentioned in the guide of the American Psychiatric and Psychological Association (A.P.A), which indicated in its fifth statistical guide that there is an equal difference between males and females in avoidant personality disorder.

**B- The difference in avoidant personality disorder according to the variable (age):**

To achieve this goal, a one-way analysis of variance was used to identify differences in avoidant personality disorder according to the variable of age. Table 12 shows this:

**Table 12: Arithmetic means and standard deviations for the avoidant personality disorder scale according to the variable age.**

<table>
<thead>
<tr>
<th>Age</th>
<th>The number</th>
<th>SMA</th>
<th>Standard deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>20-29 years old</td>
<td>50</td>
<td>21</td>
<td>7,30</td>
</tr>
<tr>
<td>30-39 years old</td>
<td>146</td>
<td>21,79</td>
<td>8,92</td>
</tr>
<tr>
<td>40-49 years old</td>
<td>135</td>
<td>24,13</td>
<td>7,06</td>
</tr>
<tr>
<td>50-59 years old</td>
<td>69</td>
<td>26,26</td>
<td>8,60</td>
</tr>
<tr>
<td>Total</td>
<td>400</td>
<td>23,25</td>
<td>8,25</td>
</tr>
</tbody>
</table>

**Table 13: One-way analysis of variance to reveal the significance of differences in avoidant personality disorder according to the variable age.**

<table>
<thead>
<tr>
<th>Source of variance s.of v</th>
<th>Sum of squares s.of s</th>
<th>Degree of freedom B.F</th>
<th>Mean squares M.S</th>
<th>F value F</th>
<th>Statistical significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between groups</td>
<td>1296,75</td>
<td>3</td>
<td>432,058</td>
<td>6,62</td>
<td>D</td>
</tr>
<tr>
<td>Within groups</td>
<td>25855,322</td>
<td>396</td>
<td>65,291</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>2751,498</td>
<td>399</td>
<td>-----</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The above result indicates that there is a statistically significant difference in avoidant personality disorder according to the age variable, as the calculated F value was (6.62), which is less than the tabulated F value of (2.60) at the level of (0.05) and the degree of freedom (3, 396).

To determine the differences in avoidant personality disorder according to different age levels, the Scheffe test was used for post-hoc comparisons, and Table 14 shows this:

**Table 14: Values of differences between means and Schiffé critical values to identify differences in avoidant personality disorder according to different age levels.**

<table>
<thead>
<tr>
<th>Comparisons</th>
<th>Number</th>
<th>Arithmetic average number</th>
<th>The difference between the two averages</th>
<th>Critical Sheva value</th>
<th>Statistical significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>29-20 years old</td>
<td>50</td>
<td>21</td>
<td>0,79</td>
<td>3,70</td>
<td>Not significant at 0.05</td>
</tr>
<tr>
<td>30-39 years old</td>
<td>146</td>
<td>21,79</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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<table>
<thead>
<tr>
<th>Age Group</th>
<th>Mean Score</th>
<th>SD</th>
<th>T</th>
<th>p value</th>
<th>Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>29-20 years old</td>
<td>21</td>
<td>21</td>
<td>3.13</td>
<td>3.74</td>
<td>Not significant at 0.05</td>
</tr>
<tr>
<td>49-40 years old</td>
<td>24.13</td>
<td>5.26</td>
<td>2.69</td>
<td>4.19</td>
<td>D at 0.05 in favor of 50-59 years</td>
</tr>
<tr>
<td>39-30 years old</td>
<td>21.79</td>
<td>2.34</td>
<td>2.69</td>
<td>3.30</td>
<td>D at 0.05 in favor of 50-59 years</td>
</tr>
<tr>
<td>59-49 years old</td>
<td>26.26</td>
<td>4.47</td>
<td>2.13</td>
<td>3.34</td>
<td>Not significant at 0.05</td>
</tr>
</tbody>
</table>

The result is explained according to the criteria for the disorder. The disorder is diagnosed at the age of twenty, and therefore the disorder can appear in the same way in younger and older adults.

**RECOMMENDATIONS**

1. Designing counseling programs to provide psychological support and actively contribute to the community in strengthening social bonds and clarifying the reasons for fear of intimacy, while working to minimize them.
2. Inviting the Ministry of Labor and Social Affairs to organize awareness courses for those preparing for marriage to clarify the importance of intimacy between spouses.

**REFERENCES**

- Al-Bahnsawi, Ahmed Kamal (2020): Fear of Intimacy as a Mediator between Anxiety and Friendship, Journal of Humanities and Social Sciences, Faculty of Arts, pp. 1234.
A.P. A (2013). Diagnostic and Statistical Manual of Mental Disorders ed


