

## PARANOIA AND JOB SATISFACTION

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### Abstract

*The present study investigated the relationship between paranoia and job satisfaction. Paranoia is defined as suspiciousness and the feeling of being threatened even if there is no proof of real threat. Paranoia is a concept that is often ignored in researches in Pakistan and rarely explored in context of any concept related to occupational life. After a detailed literature review, it was hypothesized that paranoia would be negatively correlated to job satisfaction. The sample of the present research consisted of 154 professionals (77 male, 77 female) from different work settings. Paranoia was measured with the Feingstein Paranoia Scale Urdu version<sup>1</sup> (FPSU) and job satisfaction was measured by the Generic Job Satisfaction Scale<sup>2</sup> (GJSS). Statistical analysis through Pearson Product Moment Correlation indicates that there is a strong negative correlation between paranoia and job satisfaction. Recommendations for employers and policy makers, avenues of future researches are discussed.*

**Keywords:** Paranoia; job satisfaction; correlational study; Pearson Product Moment

### Introduction

Sarason<sup>3</sup> explained job satisfaction as the feelings and attitudes that one has towards his job. It is a constellation of attitudes about job. It is how workers experience about different facets of their job. It is the feeling of achievement that is there in a job for an employee. It is the level of satisfaction one has for his/her employment. According to Cowen<sup>4</sup>, it is the combination of psychological, physiological, and environmental circumstances that force a person truly to say, "I am satisfied with my job". Job satisfaction is now considered a very important aspect of a person's mental life as one spends a one third of his day (on an average) in the workplace. If this satisfaction is

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<sup>1</sup> Farhan Kamrani and Uzma Ali, "Urdu Translation and Adaptation of Fenigstein Paranoia Scale". International Journal of Business and Social Science, 2 no 16 (2011): 228-237.

<sup>2</sup> Scott Macdonald and Peter MacIntyre, "The Generic Job Satisfaction Scale", Employee Assistance Quarterly 13, no. 2 (1997): 1-16, doi:10.1300/j022v13n02\_01.

<sup>3</sup> Seymour Sarason, "Barometers Of Change: Individual, Educational, And Social Transformation", Choice Reviews Online 34, no. 03 (1996): 34-1516-34-1516, doi:10.5860/choice.34-1516..

<sup>4</sup> Emory L. Cowen, "In Pursuit Of Wellness.", American Psychologist 46, no. 4 (1991): 404-408, doi:10.1037/0003-066x.46.4.404.

achieved than, overall wellbeing and satisfaction with life increases. Job satisfaction is all about an individual's feeling about the environment of his/her job like job security, pay, organization culture etc.

It is dependent on a number of factors and modern organizations apply many techniques to enhance job satisfaction to increase the productivity of the employees. These measures include recreational facilities at the work place. Conferences and workshops in other countries and monetary incentives and awards and gifts on better performance of employees and in many modern organizations the conflicts between employees are also resolved very vigorously by organization but observation indicates that many times these measures are futile and job satisfaction remains low that results in low levels of employee productivity. Many times incentives and rewards fail miserably in increasing job satisfaction because the modern institutions are more inclined to look at things through a sociological prism rather than a psychological one. And this sociological prism is focused on society rather than individual. Certain very important psychological traits and states that are a hurdle in job satisfaction are missed in these measures. The whole phenomena of occupational life is at times reduced to either some very collectivist sociological theory or a behaviorist approach which has no consideration of the internal factors of a human life. The researchers of this study attempt to look at the phenomena from an angle that attempts to understand society from individual rather than individual from society.

This study attempts to analyze "paranoia" as one of those factors that might also be playing some role in job satisfaction/dissatisfaction. But what exactly is paranoia and how it might be playing some role in job dissatisfaction is described below.

*Like hysteria the term paranoia has become one of the words that passed from the dictionary of psychology to everyday language. Common people use this term to describe a state of delusion in which a person suspects that others are secretly trying to harm him or her. It is commonly used to describe someone who is skeptical in the way he view the world. The word paranoia becomes popular in the last two decades. It is defined as a persistent distrust of other people<sup>5,6</sup>. It has some other recurrent features that include disagreements, hostile, aloofness, reaction to slights or criticism, stubbornness, and rigidly held maladaptive beliefs of others' intents<sup>7</sup>. Psychologists like Freud and Jung stressed a psychodynamic approach oriented towards psychological etiology. About Freud's approach towards Paranoia a researcher notes:*

In Freud's well-known case history of the jurist Daniel Paul Schreber he was less interested in the diagnosis of paranoia than he was in underlying psychological mechanisms responsible for the condition. Freud retrospectively

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<sup>5</sup> W. John Livesley, "The DSM-IV Personality Disorders"( New York: Guilford Press, 1995.)

<sup>6</sup>Henry Adams and Patricia Sutker, Comprehensive Handbook of Psychopathology, 3<sup>rd</sup> ed. (New York: Kluwer Academic Publishers, 2001)

<sup>7</sup> Diagnostic and Statistical Manual of Mental Disorders (Washington, D.C.: American Psychiatric Association, 2000)

psychoanalyzed Schreber whom he had never met, maintaining that Schreber's paranoia was caused by a conflict over repressed homosexual wishes<sup>8</sup>.

Freud took interest in paranoia since his early psychological writing but his major contribution regarding this disorder came in 1911. He analyzed Dr. Jur. Deniel Paul Schreber's (1842-1911) book "Memoirs of a Nerve Patient"<sup>9</sup>. Schreber wrote his book after the onset of his second illness and took a considerable attention of psychologists of its time.

Freud never met Schreber and he investigated this pathology and its underline causes by the subjective written book of the patient. Freud justified this method of investigation of paranoia in following words:

Since paranoics cannot be compelled to overcome their internal resistances, and since in any case they only say what they chose to say, it follows that this is precisely a disorder in which a written report or a printed case history can take the place of personal acquaintance with the patient.<sup>10</sup>

According to Freud this makes justifiable the analytic interpretations of a case history by a person suffering from paranoia or for what Freud used the term of dementia paranoid. Schreber's first illness began in 1884 and he was completely recovered by the end of 1885. During this period he spent 6 months at the psychiatric clinic of the University of Leipzig. He took treatment form Professor Flechsig. He was recovered from his illness and resumed his carrier. At the end of 1893 he suffered form a new set of symptoms. He suffered from a number of symptoms that included, delusion that he has a mission to redeem the world and to restore mankind their lost state of bliss and that for this purpose he must be transformed into a women and it is based on the order of things. There were also certain persecutory delusions that mainly centered on his physicians Dr. Flechsig and Dr. Weber.

According to Freud paranoia is caused by the outburst of latent passive homosexual desires. In this context Freud notes "The exciting cause of his illness, then, was an outburst of homosexual libido was probably from the very first his doctor, Flechsig; and his struggles against the libidinal impulse produced the conflict which gave rise to the symptoms"<sup>11</sup>.

According to Freud, "The familiar principle forms of paranoia can all be represented as contradictions of a single proposition: I (a man) love him (a man)"<sup>12</sup> this formula is rejected by certain new formulations.

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<sup>8</sup> Ian Dowbiggin, "Delusional Diagnosis? The History of Paranoia as a Disease Concept in the Modern Era", *History of Psychiatry* 11, No. 41 (2000): 037-69, doi:10.1177/0957154x0001104103.

<sup>9</sup> Sigmund Freud, James Strachey and Anna Freud, *The Case of Schreber; Papers on Technique and Other Works* (London: Vintage, 2001), p.9

<sup>10</sup> *Ibid.*

<sup>11</sup> *Ibid.*

<sup>12</sup> *Ibid*

One formulation can be, “I do not love him- I hate him”<sup>13</sup> this is an internal perception or an unconscious feeling it is also threatening for ego as it contains the element of hate in it and ego does not want to own it therefore at the conscious level (through the use of ego defense mechanism projection) it appears “I do not love him- I hate him because he persecutes me”.<sup>14</sup>

Freud gives another formulation that gives raise to the erotomanic delusion, “I do not love him- I love her”.<sup>15</sup> It is furthered by the defense mechanism of projection into its final form “I observe that she loves me” and “I do not love him- I love her, because she loves me”.<sup>16</sup> According to Freud the basic formulation is contradicted in another way in the delusion of jealousy “It is not I who love the man- she loves him”<sup>17</sup> or in women “It is not I who love the women- he loves them”.<sup>18</sup>

Another way in which the basic formulation is rejected is “I do not love at all, I do not love any one”<sup>19</sup>. It further becomes “I love only myself”<sup>20</sup> and is manifested in the form of delusion of Grandeur or Megalomania.

To Freud Paranoia is an attempt at reconstruction that is directed to protect the person from severe problems.

Two separate theories explain the role of self-esteem in paranoia. First model, characterizes Paranoia as a defensive reaction that serves to maintain high levels of explicit self-esteem to mask low underlying feelings of self-worth. This model is referred as is referred as “Paranoia as defense model”<sup>21</sup> <sup>22</sup>. Persecutory delusions guard against low self-esteem and the sadness related emotion found in depression<sup>23</sup>.

According to the second model people with paranoia, either paranoia is the cause of low self-esteem in people who suffer from them because of the negative nature of most paranoid thoughts or as a result of having low self-esteem experience paranoid thoughts. According to a number of researchers paranoia is a direct reflection of low explicit and implicit self-esteem<sup>24,25,26</sup>.

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<sup>13</sup> *Ibid*

<sup>14</sup> *Ibid*

<sup>15</sup> *Ibid*

<sup>16</sup> *Ibid*

<sup>17</sup> *Ibid.*

<sup>18</sup> *Ibid*

<sup>19</sup> *Ibid*

<sup>20</sup> *Ibid*

<sup>21</sup>Richard P. Bentall, Peter Kinderman and Sue Kaney, "The Self, Attributional Processes and Abnormal Beliefs: Towards A Model of Persecutory Delusions", *Behaviour Research and Therapy* 32, no. 3 (1994): 331-341, doi:10.1016/0005-7967(94)90131-7.

<sup>22</sup> William W. Meissner, "The Schizophrenic and the Paranoid Process", *Schizophrenia Bulletin* 7, no. 4 (1981): 611-631, doi:10.1093/schbul/7.4.611.

<sup>23</sup> Daniel Freeman, "Suspicious Minds: The Psychology of Persecutory Delusions", *Clinical Psychology Review* 27, no. 4 (2007): 425-457, doi:10.1016/j.cpr.2006.10.004.

<sup>24</sup>Daniel Freeman et al., "The London-East Anglia Randomized Controlled Trial of Cognitive-Behaviour Therapy for Psychosis IV: Self-Esteem and Persecutory Delusions", *British Journal of Clinical Psychology* 37, no. 4 (1998): 415-430, doi:10.1111/j.2044-8260.1998.tb01399.x.

Cicero<sup>27</sup> notes “One possible explanation is that self-esteem only causes paranoia in people with specific personality traits such as low agreeableness or high neuroticism.”

Two studies have found low implicit and low explicit self-esteem associated with schizophrenia<sup>28</sup> and persecutory delusions<sup>29</sup>.

Another cause of paranoia is conceptualized as the excessive self-focused attention in which the individual erroneously thinks that others are thinking negatively about him or planning against him.<sup>30,31</sup> Public self-consciousness has been shown consistently to be associated with Paranoia.<sup>32</sup>

According to Fenigstein<sup>33</sup> the tendency to engage in paranoid inferences is heightened by self-consciousness. Another study also reports<sup>34</sup> that private self-consciousness is a predictor of paranoia. According to Fenigstein and Vanable<sup>35</sup> heightened self-consciousness can be demonstrated in paranoid personalities. This view was initially given by Kraepelin<sup>36</sup>.

All of these above stated features are observed in the troublemakers in the occupational settings. And observation reveals that dissatisfaction breeds dissatisfaction and the environment of occupational setting might become dissatisfying for everyone working in that particular setting. A person who has a paranoid tendency is willing to interpret the environment as critical and skeptic towards him. This, if seen in the context of occupational setting is very dangerous a trend of perception.

As the term paranoia comes from the lexicon of clinical psychology the reader might argue that job setting is free form people suffering from serious psychological disorders

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<sup>25</sup>P. A. GARETY et al., "A Cognitive Model of the Positive Symptoms of Psychosis", *Psychological Medicine* 31, no. 2 (2001): 189-195, doi:10.1017/s0033291701003312.

<sup>26</sup>David Cicero. "Does Ego Threat Increase Paranoia?" n.d. <https://doi.org/10.32469/10355/5019>.

<sup>27</sup> *Ibid.*

<sup>28</sup>Matthew R. McKay, R Langdon, and M Coltheart. "The Defensive Function of Persecutory Delusions: an Investigation Using the Implicit Association Test." *Acta Neuropsychiatrica* 18, no. 6 (2006): 261–62. <https://doi.org/10.1017/s0924270800030568>.

<sup>29</sup>Steffen Moritz, Ronny Werner, and Gernot Von Collani. "The Inferiority Complex in Paranoia Readdressed: A Study with the Implicit Association Test." *Cognitive Neuropsychiatry* 11, no. 4 (2006): 402–15. <https://doi.org/10.1080/13546800444000263>.

<sup>30</sup>Allan Fenigstein, and Peter A. Vanable. "Paranoia and Self-Consciousness." *Journal of Personality and Social Psychology* 62, no. 1 (1992): 129–38. <https://doi.org/10.1037//0022-3514.62.1.129>.

<sup>31</sup>Anthony Greenwald, Debbie E. McGhee, and Jordan L. K. Schwartz. "Measuring Individual Differences in Implicit Cognition: The Implicit Association Test." *Journal of Personality and Social Psychology* 74, no. 6 (1998): 1464–80. <https://doi.org/10.1037//0022-3514.74.6.1464>.

<sup>32</sup>Dennis R Combs. "The Role of Subclinical Paranoia on Social Perception and Behavior." *Schizophrenia Research* 69, no. 1 (January 2004): 93–104. [https://doi.org/10.1016/s0920-9964\(03\)00051-3](https://doi.org/10.1016/s0920-9964(03)00051-3).

<sup>33</sup>Allan Fenigstein. "Self-Consciousness and the Overperception of Self as a Target." *Journal of Personality and Social Psychology* 47, no. 4 (1984): 860–70. <https://doi.org/10.1037//0022-3514.47.4.860>.

<sup>34</sup>Alison J Blackshaw., Peter Kinderman, Dougal J. Hare, and Chris Hatton. "Theory of Mind, Causal Attribution and Paranoia in Asperger Syndrome." *Autism* 5, no. 2 (2001): 147–63. <https://doi.org/10.1177/1362361301005002005>.

<sup>35</sup>Allan Fenigstein, *Op.cit.*

<sup>36</sup>Emil Kraepelin "Lectures on Clinical Psychiatry." *The American Journal of the Medical Sciences* 149, no. 5 (1915): 753. <https://doi.org/10.1097/0000441-191505000-00025>.

so it would be inappropriate to assume that paranoia might play some role in the job dissatisfaction in a workplace. This argument is not close to reality as not all institutions screen for psychological disorders before employment. Secondly it would be wrong to assume that subclinical levels of features of psychological disorders do not exist in non-clinical population. According to Shapiro<sup>37</sup> (p.54), “It would be a mistake to assume that paranoid conditions are inwardly psychotic or near psychotic”. Ideas of persecutory nature do occur in nonclinical population but this phenomenon is not often studied. According to the results of a research conducted in Sweden by Forsell and Henderson<sup>38</sup>, 6% of a sample of older adults had paranoid ideation. A research by Verdoux et al<sup>39</sup> about delusional ideation in French primary care attenders (with no psychiatric or psychological disorders) revealed that 25% had thoughts about being persecuted and 10% felt that they were conspired against. The above stated researches are an evidence that that persecutory thoughts exists in nonclinical population. As paranoia is no alien condition to the so called “normal” population, and may have serious implication in the job, current study seeks to build an empirical understanding into this phenomena and attempts to know the predictive relationship between these two important variables (i.e. paranoia and job satisfaction). It is hypothesized that there would be a negative correlation between job satisfaction and paranoia i.e. the greater the paranoia, the lesser the job satisfaction.

## Methodology

### Sample

A total 154 individuals (77 male and 77 female) were selected from different work settings through purposive sampling. The age range of the sample was form 20 to 64 years (Mean age= 34.03 years). The sample was of education level above intermediate (i.e. 12<sup>th</sup> grade), belonging to varied professions (i.e. banking, teaching, government services, engineering etc.) from lower-middle to upper socio economic class. The study was conducted in Karachi- Pakistan.

## Measures

### The Generic Job Satisfaction Scale

This scale is a measure of job satisfaction developed by Macdonald and MacIntyre<sup>40</sup>. It focuses on the employee's feelings or reactions towards aspects of their jobs. Each item has 5-point Likert response categories from strongly agree to strongly disagree. Strong reliability and validity are reported in the original study<sup>41</sup>.

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<sup>37</sup> David Shapiro. “Neurotic Styles” *British Journal of Psychiatry* 113, no. 501 (1967): 925–25. <https://doi.org/10.1192/bjp.113.501.925>.

<sup>38</sup> Yvonne Forsell, and A. Scott Henderson. “Epidemiology of Paranoid Symptoms in an Elderly Population.” *British Journal of Psychiatry* 172, no. 5 (1998): 429–32. <https://doi.org/10.1192/bjp.172.5.429>.

<sup>39</sup> Helene Verdoux, S. Maurice-Tison, B. Gay, J. Van Os, R. Salamon, and M. L. Bourgeois. “A Survey of Delusional Ideation in Primary-Care Patients.” *Psychological Medicine* 28, no. 1 (1998): 127–34. <https://doi.org/10.1017/s0033291797005667>.

<sup>40</sup> Scott Macdonald and Peter MacIntyre. *Op.cit.*

<sup>41</sup> *Ibid.*

### **Fenigstein Paranoia Scale Urdu Version**

The scale consists of 20 items and it measures sub-clinical paranoid ideation, a type of thinking which is characterized by stable tendencies in attributing malevolence to others and external control. The queries are answered on a 5 point Likert scale from 1 to 5 where 1 implies “not at all” and 5 implies “extremely applicable”. Strong reliability and validity and temporal stability are reported in the adaptation study<sup>42</sup>.

### **Procedure**

The purposively sampled participants were approached and asked for consent for participation in this research. If they agreed to participate they were given the instructions to fill the research questionnaires and demographic sheet. After their participation they were briefed about the variables of research and thanked for their time and efforts.

### **Scoring and Statistical Analysis**

Scoring of paranoia and job satisfaction was done according to the standard scoring system given along with the scales. Statistical analysis was conducted using the Statistical Package for Social Sciences (SPSS)<sup>43</sup>. Pearson product moment correlation was calculated for the given variables.

### **Ethical Considerations**

The participants were provided with the opportunity to stop participating in the research at any time. They were assured that they have complete right to withdraw their data even at the end of research and the data obtained from the participants will be kept confidential and will be utilized only for research purpose.

### **Results**

N=154 (77 Male, 77 Female)

	Job satisfaction	Sig.
Paranoia	-.282*	.05

\* Correlation is significant at the 0.01 level (two tailed).

### **Discussion**

Current study attempted to investigate the predictive relationship of paranoia with job satisfaction. It was hypothesized that paranoia would be negatively correlated with job satisfaction. Results are consistent with the hypothesis. Therefore the research hypothesis is accepted. As this study was not experimental so the cause and effect

<sup>42</sup> Farhan Kamrani and Uzma Ali, *Op.cit.*

<sup>43</sup> SPSS Inc. “SPSS for Windows” Rel. 10.0.0. (1999) Chicago: SPSS Inc.

relationship cannot be established between these two variables and there might be some mediating variables that may be playing some part in this phenomena but what is clear from this study is that job satisfaction is something that is unlikely to exist if there is a higher level of paranoia and similarly higher level of job satisfaction would mean lesser degree of paranoia.

This finding is consistent with the dispositional theory if we connect it with the dynamics of paranoia. The dispositional theory's core self-evaluation model proposed by Judge, Locke and Durham<sup>44</sup> states that there are 4 core evaluations for one's disposition towards job satisfaction i.e. neuroticism, locus of control, self-efficacy and self-esteem. Paranoia guard against low self-esteem<sup>45</sup>. Cicero<sup>46</sup> (p.3-4) notes "[low] self-esteem only causes paranoia in people with specific personality traits such as low agreeableness or high neuroticism." In terms of locus of control paranoids are more likely to attribute negative events to external causes and positive events to internal causes than general population.<sup>47,48</sup>

The above paragraph outlines the theoretical links between the 3 aspects of 4 core evaluations or disposition towards jobs satisfaction. It can be said that high neuroticism and low self-esteem will lead towards paranoia (and it is also the cause of low job satisfaction). As mentioned that people with paranoia are also prone to attribute negative things to environment that will lead towards dissatisfaction with environment. If this is generalized towards job environment, dissatisfaction with job environment will create low job satisfaction.

It is relevant to note here that Rack<sup>49</sup> gives two propositions that he suggested to be considered regarding the phenomenon of paranoia; (1) oppression makes people paranoid (2) a person who complains about oppression is in danger of being labeled as paranoid. As in occupational setting there are forms of injustice prevalent so feelings of injustice and lesser forms of oppression may be working in a way to increase paranoia and these feelings may be playing their role in the lower levels of job satisfaction.

Combs et al<sup>50</sup> reports that perceived racism predicts cultural mistrust and nonclinical paranoia in African Americans. Hitch and Rack<sup>51</sup> reported that Polish immigrants were

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<sup>44</sup> Timothy A. Judge, Edwin A. Locke, Cathy C. Durham, and Avraham N. Kluger. "Dispositional Effects on Job and Life Satisfaction: The Role of Core Evaluations." *Journal of Applied Psychology* 83, no. 1 (1998): 17–34. <https://doi.org/10.1037/0021-9010.83.1.17>.

<sup>45</sup> Danial Freeman. & Garety, P. A. Paranoia: The Psychology of Persecutory Delusions. (Hove: Psychology Press, 2004).

<sup>46</sup> David Cicero. *Op.cit*.

<sup>47</sup> Peter Kinderman, Sue Kaney, Stephen Morley, and Richard P. Bentall. "Paranoia and the Defensive Attributional Style: Deluded and Depressed Patients' Attributions about Their Own Attributions." *British Journal of Medical Psychology* 65, no. 4 (1992): 371–83. <https://doi.org/10.1111/j.2044-8341.1992.tb01718.x>.

<sup>48</sup> Danial Freeman and P. A. Garety *Op.cit*

<sup>49</sup> L. Ratna. "Race, Culture, and Mental Disorder. By Philip H. Rack London: Tavistock. 1982. p.305, *British Journal of Psychiatry* 146, no. 2 (1985): 219–19. <https://doi.org/10.1017/s0007125000120720>.

<sup>50</sup> David Cicero. *Op.cit*.

<sup>51</sup> Hitch, P. J., and P. H. Rack. "Mental Illness among Polish and Russian Refugees in Bradford." *British Journal of Psychiatry* 137, no. 3 (1980): 206–11. <https://doi.org/10.1192/bjp.137.3.206>.

found more paranoid than the Pakistani immigrants. On the basis of this finding he further notes:

it is wrong to draw any firm conclusions from this, but it is noteworthy that Pakistanis are more discriminated against and victimized than Poles, so if paranoia were a simple response to persecution one would expect the difference between two groups to be the other way round<sup>52</sup>.

### **Conclusion**

The current study investigated an important aspect of the thought patterns related to paranoia and their impacts on the occupational life. Job satisfaction is a state of wellbeing- an opposite of any pathological or anxiety provoking thought. Current study has provided strong empirical evidence to this predictive relationship.

Insight of human behavior and thought is one of the vital aims of the behavioral science. As a scientific endeavor this study has brought many new insights to field of psychology as it investigated the prevalence of the dimensionally less severe form of Paranoia in a sample drawn from professionals ranging from various professions along with job satisfaction. This study is first of its sort in Pakistan. Future researcher can utilize these findings to enhance the understanding of this correlation as well as investigate the mediations and or other factors related to this phenomena and to conduct studies for cross cultural comparisons on this topic is of interest to the researcher.

It is also relevant to note here that job satisfaction is rarely a priority in government and other old/traditional occupational setups and this creates a very great void in the overall job satisfaction in the society as well as a general level of job dissatisfaction and an overall dissatisfaction with life in the working class.

For the organizations this study brings a new insight into the psychological aspects of job satisfaction. Paranoia is often ignored when it comes to researches related to constructs related to occupational psychology. But as human psychology is very complex and no one formula can be successful in understanding or judging it so conceding the psychological factors before devising strategies to increase job satisfaction. An effective strategy might be utilizing measures of paranoia before recruitment and selection of employees. Psychologists can be employed in organizations for guidance/counseling and psychotherapy of employees who have higher levels of paranoia.

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<sup>52</sup> L Ratna. *Op.cit.*

## Bibliography

Adams, Henry and Patricia Sutker, *Comprehensive Handbook Of Psychopathology*, 3rd ed. (New York: Kluwer Academic Publishers, 2001.)

Blackshaw, Alison J., Peter Kinderman, Dougal J. Hare, and Chris Hatton. "Theory of Mind, Causal Attribution and Paranoia in Asperger Syndrome." *Autism* 5, no. 2 (2001): 147–63. <https://doi.org/10.1177/1362361301005002005>.

Cicero, David. "Does Ego Threat Increase Paranoia?," n.d. <https://doi.org/10.32469/10355/5019>.

Combs, D. "The Role of Subclinical Paranoia on Social Perception and Behavior." *Schizophrenia Research* 69, no. 1 (January 2004): 93–104. [https://doi.org/10.1016/s0920-9964\(03\)00051-3](https://doi.org/10.1016/s0920-9964(03)00051-3).

Cowen, Emory L., "In Pursuit Of Wellness.", *American Psychologist* 46, no. 4 (1991): 404-408, doi:10.1037/0003-066x.46.4.404.

*Diagnostic and Statistical Manual of Mental Disorders* Washington, D.C.: American Psychiatric Association, 2000.

Dowbiggin, Ian "Delusional Diagnosis? The History Of Paranoia As A Disease Concept In The Modern Era", *History Of Psychiatry* 11, no. 41 (2000): 037-69, doi:10.1177/0957154x0001104103.

Freeman, Daniel "Suspicious Minds: The Psychology Of Persecutory Delusions", *Clinical Psychology Review* 27, no. 4 (2007): 425-457, doi:10.1016/j.cpr.2006.10.004.

Freeman, Daniel et al., "The London-East Anglia Randomized Controlled Trial of Cognitive-Behaviour Therapy for Psychosis IV: Self-Esteem And Persecutory Delusions", *British Journal Of Clinical Psychology* 37, no. 4 (1998): 415-430, doi:10.1111/j.2044-8260.1998.tb01399.x.

Freud, Sigmund, James Strachey and Anna Freud, *The Case Of Schreber ; Papers On Technique And Other Works*( London: Vintage, 2001.)

Fenigstein, Allan. "Self-Consciousness and the Overperception of Self as a Target." *Journal of Personality and Social Psychology* 47, no. 4 (1984): 860–70. <https://doi.org/10.1037//0022-3514.47.4.860>.

Forsell, Yvonne, and A. Scott Henderson. "Epidemiology of Paranoid Symptoms in an Elderly Population." *British Journal of Psychiatry* 172, no. 5 (1998): 429–32. <https://doi.org/10.1192/bjp.172.5.429>.

Kraepelin, Emil. "Lectures on Clinical Psychiatry." *The American Journal of the Medical Sciences* 149, no. 5 (1915): 753. <https://doi.org/10.1097/00000441-191505000-00025>.

Kamrani, Farhan and Uzma Ali, "Urdu Translation and Adaptation of Fenigstein Paranoia Scale". *International Journal of Business and Social Science*, 2 no 16 (2011): 228-237.

Macdonald, Scott and Peter MacIntyre. "The Generic Job Satisfaction Scale." *Employee Assistance Quarterly* 13, no. 2 (1997): 1–16. [https://doi.org/10.1300/j022v13n02\\_01](https://doi.org/10.1300/j022v13n02_01).

Mckay, R, R Langdon, and M Coltheart. "The Defensive Function of Persecutory Delusions: an Investigation Using the Implicit Association Test." *Acta Neuropsychiatrica* 18, no. 6 (2006): 261–62. <https://doi.org/10.1017/s0924270800030568>.

Moritz, Steffen, Ronny Werner, and Gernot Von Collani. "The Inferiority Complex in Paranoia Readdressed: A Study with the Implicit Association Test." *Cognitive Neuropsychiatry* 11, no. 4 (2006): 402–15. <https://doi.org/10.1080/13546800444000263>.

Ratna, L. "Race, Culture, and Mental Disorder. By Philip H. Rack London: Tavistock. 1982. Pp 305. " *British Journal of Psychiatry* 146, no. 2 (1985): 219–19. <https://doi.org/10.1017/s0007125000120720>.

Richard P. Bentall, Peter Kinderman and Sue Kaney, "The Self, Attributional Processes And Abnormal Beliefs: Towards A Model Of Persecutory Delusions", *Behaviour Research And Therapy* 32, no. 3 (1994): 331-341, doi:10.1016/0005-7967(94)90131-7.

Sarason, Seymour "Barometers Of Change: Individual, Educational, And Social Transformation", *Choice Reviews Online* 34, no. 03 (1996): 34-1516-34-1516, doi:10.5860/choice.34-1516..

W. J Livesley, *The DSM-IV Personality Disorders* (New York: Guilford Press, 1995).

Meissner, W. W. "The Schizophrenic and the Paranoid Process", *Schizophrenia Bulletin* 7, no. 4 (1981): 611-631, doi:10.1093/schbul/7.4.611.

Garety, P. A. et al., "A Cognitive Model Of The Positive Symptoms Of Psychosis", *Psychological Medicine* 31, no. 2 (2001): 189-195, doi:10.1017/s0033291701003312.

Greenwald, Anthony G., Debbie E. McGhee, and Jordan L. K. Schwartz. "Measuring Individual Differences in Implicit Cognition: The Implicit Association Test." *Journal of Personality and Social Psychology* 74, no. 6 (1998): 1464–80. <https://doi.org/10.1037//0022-3514.74.6.1464>.

Shapiro, David. "Neurotic Styles." *British Journal of Psychiatry* 113, no. 501 (1967): 925–25. <https://doi.org/10.1192/bjp.113.501.925>.

Verdoux, H., S. Maurice-Tison, B. Gay, J. Van Os, R. Salamon, and M. L. Bourgeois. "A Survey of Delusional Ideation in Primary-Care Patients." *Psychological Medicine* 28, no. 1 (1998): 127–34. <https://doi.org/10.1017/s0033291797005667>.