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Dysfunctional Attitudes, Social Skill Deficits, and Loneliness Among College Students: The Process of Social Adjustment

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DYSFUNCTIONAL ATTITUDES, SOCIAL SKILLS DEFICITS, AND LONELINESS AMONG
COLLEGE STUDENTS: THE PROCESS OF SOCIAL ADJUSTMENT

by

Jeffrey Robert Wilbert

A Dissertation Submitted to the Faculty of the Graduate
School of Loyola University of Chicago in Partial
Fulfillment of the Requirements for the Degree of
Doctor of Philosophy

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VITA

The author, Jeffrey Robert Wilbert, is the son of Robert Clarence Wilbert and Joyce (Johnson) Wilbert. He was born on March 29, 1958, in Springfield, Ohio.

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CHAPTER I

INTRODUCTION

From the beginning of life, interpersonal relationships form the core of human existence and survival. Born utterly dependent, the infant swiftly learns that maintenance of close ties to others is essential to insure the gratification of basic physical needs for food, water, and safety. Once met, these physiological strivings give way to a more complex set of psychological needs which also find satisfaction in the social context. Other people confirm our self-concepts; they provide a sense of love, of belongingness, feelings of community and fulfillment which help give meaning and purpose to life. The absence of these crucial provisions of interpersonal intimacy unleashes the gnawing, often crippling pain and emptiness of rejection that we call "loneliness."

In contemporary society, there is much talk of the "epidemic" of loneliness. Brain (1976) writes, "...It is the strangest thing that in Western Christian society, founded on the love of God and the fellowship of mankind, loneliness has become one of the hallmarks" (p. 259). Few can deny the experience of loneliness at some point in their lives, and no stage of the life cycle brings immunity: "Knowing no limits of class, race, or age, loneliness is today a great leveler, a new American tradition" (Gordon, 1976, p. 16).

The societal barometers of pervasive loneliness abound. For example, popular magazines are replete with articles offering guidance on developing and maintaining gratifying friendships. Brief glances across the tables of contents of periodicals ranging from Cosmopolitan, Redbook, and Good Housekeeping through Psychology Today and New York Times Magazine reveal titles such as "Fixing a Broken Friendship," "Loneliness: More Common Than the Common Cold," "An Epidemic Called Loneliness," and "Alone: Yearning for Companionship in America." Another societal signal is the existence of alternate routes toward intimacy via computerized dating services and "lonely hearts" newspaper ads. Face to face courting apparently is so fraught with anxiety for some that the choice is made to express themselves in this written, indirect form. Finally, transient substitutions for intimacy have burgeoned of late in the form of "telephone sex" services, which promise intimate erotic fulfillment (ironically, with total anonymity ensured).

What forces act to create disruption in our relationships and a sense of isolation? One answer lies in the evidence that loneliness arises more often in certain developmental phases, especially at adolescence (Brennan, 1982). At this stage individuals deal with stressors including separation from parents, capricious physiological maturation, and the search for identity which is so intricately tied to reflected peer appraisals (Sullivan, 1953). Other life events such as the death of a spouse (Lopata, Heinemann, & Baum, 1982) can produce feelings of isolation. On the broader social level, loneliness is exacerbated by certain cultural values. For example, Slater (1970) describes a basic

conflict between American values of competition, uninvolvement, and independence, and basic human needs for community, engagement, and dependence on others.

Although these social factors are important in understanding loneliness, most of the psychological literature deals with a host of personal characteristics which lead to interpersonal problems. These include shyness, unassertiveness, and other communication problems which act as obstacles to the establishment of gratifying relationships. In addition, researchers have begun to focus on the importance of lonely individuals' characteristic ways of understanding themselves and their social worlds, which often involve negative, dysfunctional attitudes that engender maladaptive social behavior and emotional distress. However, it is wise to remember that "Mass loneliness is not just a problem that can be coped with by the particular individuals involved; it is an indication that things are drastically amiss on a societal level" (Gordon, 1976, p. 21).

Even though loneliness has become a pervasive social problem, research in this area is only in its infancy. The general goal of this project was to add to our understanding of the phenomenon of loneliness; specifically, to address the influence of cognitive factors. The focus of this investigation was the college population, because available assessment research shows that loneliness is quite prevalent among college students (Cutrona, 1982). Loneliness is not, however, a unitary phenomenon with identical causative factors and symptoms across individuals. Thus, in order to develop effective treatment approaches there is

a need for greater understanding of the specific personality variables associated with loneliness. This project explored in detail the role of cognitive factors (e.g., beliefs, attitudes) and social skills deficits in the causation and maintenance of loneliness in the college environment.

CHAPTER II

REVIEW OF RELATED LITERATURE

Loneliness can be defined as the absence or perceived absence of satisfying social relationships, accompanied by symptoms of psychological distress (Young, 1982). Although no specific set of symptoms for loneliness exists across individuals, the experience has been described generally as a "gnawing, chronic distress without redeeming features" (Weiss, 1973) which "renders people...emotionally paralyzed and helpless" (Fromm-Reichmann, 1959). Further, Sullivan (1953) describes loneliness as "the exceedingly unpleasant and driving experience connected with inadequate discharge of the need for human intimacy" (p. 290). Moreover, the experience of loneliness is exacerbated by a culture that tends to see isolation from others as an embarrassing sign of personal failure (Gordon, 1976).

Rubenstein and Shaver (1982) conducted a large scale study of the experience of loneliness by publishing a survey in the newspapers of several major cities across the country. A factor analysis of responses describing symptoms of loneliness resulted in four reliable factors: (a) Desperation (panicky, helpless, afraid, hopeless); (b) Depression (sad, empty, alienated); (c) Impatient Boredom (bored, uneasy, angry); and (d) Self-Deprecation (insecure, guilty, ashamed). Other research has also shown loneliness to be associated with depression (Russell,

1982); low self-esteem, shyness, introversion, lack of assertiveness (Russell, Peplau, & Cutrona, 1980); inhibited sociability (Horowitz & French, 1979); social anxiety (Jones, Freemon, & Goswick, 1981); susceptibility to physical illness (Lynch, 1976); and vulnerability to suicide (Wenz, 1977). Thus, loneliness is not only a painful condition, but a potentially lethal one as well.

Weiss (1973) posited two forms of loneliness, social isolation and emotional isolation. The former results from the absence of an engaging social network, which Weiss compared to the feelings of a small child whose friends have all gone away. The loneliness of emotional isolation, however, results from the absence of a close, emotional, intimate attachment and the provisions of such a relationship, whether or not the companionship of others is available. Thus, loneliness is not necessarily related to aloneness; one can be lonely in the midst of a Times Square New Year's Eve crowd or in a 50 year marriage, depending on the perceived nature of existing attachments. Moreover, aloneness can be viewed as a healing experience (Suedfeld, 1982). When alone, an individual has the opportunity to explore him/herself and to make sense of life while resting apart from the expectations and feedback of the cultural milieu (Larson, Csikszentmihalyi, & Graef, 1982). However, if one believes that his/her aloneness is a symptom of deficiencies in interpersonal relationships, solitude can be terrifying (Young, 1982).

Loneliness Among College Students

Although loneliness strikes at all segments of the population, college students appear to be especially vulnerable (Jones, 1982; Jones, et al., 1981; Russell, 1982) due to the multiple adaptive demands that arise in the transition to college living. A large proportion of new college students experience loneliness during their first weeks on campus, but some students, although vulnerable to feelings of isolation, possess adequate coping skills to create a more satisfying social life. Other students, however, cannot adjust positively without external intervention. Some insight into this process of social adjustment for college freshmen was offered by a longitudinal study (the UCLA New Student Study) reported by Cutrona (1982). A large sample of UCLA students was assessed for loneliness using the UCLA Loneliness Scale (Russell, et al., 1980) at three points: Two weeks, seven weeks, and seven months after arrival on campus. At the initial assessment, 75% of the new students in the study reported having experienced at least occasional loneliness since beginning school. Over 40% reported that their loneliness had been moderate to severe in intensity. At the seven month follow-up, only 25% of the students assessed reported having experienced loneliness in the preceding two weeks. Only 13.5% reported loneliness at all three assessments (termed the chronically lonely), and 52% were lonely at the initial but not the seven month screening (called the transiently lonely). Thus, the majority of students who initially experienced loneliness made an adequate social adjustment by the end of the first school year.

A crucial question for research is, how can the students who adjust positively be differentiated from those who remain lonely? The UCLA study gave some tentative answers to this question, but was incomplete because there was no initial administration of other personality measures besides the loneliness scale. This study did find that the major factors discriminating the chronically and transiently lonely students were attitudinal in nature (Cutrona, 1982). For example, students who overcame loneliness had more positive initial expectations regarding their ability to establish more satisfying relationships. In addition, the chronically lonely students were more likely to make internal and stable attributions for the causes of their loneliness (e.g., being too shy, fear of rejection, my personality, not knowing how to start a relationship), while the transiently lonely more often used situational attributions. Another attitudinal factor was the students' qualitative assessment of the satisfaction gained from relationships. Chronically and transiently lonely students did not differ in their reports of actual number of acquaintances (cf., Jones, 1981, 1982). However, the chronically lonely students were more dissatisfied with existing relationships, while the satisfaction ratings for the transiently lonely students significantly increased over the year. Indeed, subjective satisfaction ratings were better predictors of loneliness than any of the quantitative measures of social involvement that the study included. Whether the chronically lonely were less satisfied due to the objective nature of their relationships or their distorted subjective appraisal is unclear.

Data from Cutrona (1982) also showed that the chronically and transiently lonely students did not differ on variables such as place of residence (on or off campus) nor in the self-help strategies employed to overcome loneliness (e.g., joining clubs, going to parties, striking up conversations). Thus, it appears that maintenance of loneliness may be largely a function of dysfunctional cognitive appraisal strategies, such as persistent negative attitudes toward the self and interpersonal world. As Jones (1982) writes, "The reasons for loneliness are not to be found so much in the objective characteristics of the lonely person's social milieu...as they are in the way in which lonely people perceive, evaluate, and respond to interpersonal reality" (p. 244).

The UCLA New Student Study took an initial step in differentiating the personal characteristics of the transiently and chronically lonely. However, there is clearly a need for better understanding of this distinction. Thus, the present project had as its primary goal the determination of the cognitive and behavioral characteristics which underly and distinguish transient and chronic loneliness in the college student. In this regard, social skills deficits and dysfunctional attitudes were investigated as two possible factors which contribute to maintenance of loneliness.

Social Skills Deficits in Loneliness

Many researchers maintain that lonely individuals lack the social skills that are needed to interact effectively with others. For example, loneliness has been shown to correlate with shyness, self-consciousness, and lack of assertiveness (Jones, et al., 1981); problems

with inhibited sociability, such as problems making friends, introducing oneself, and participating in groups (Horowitz & French, 1979); lowered social risk taking and less affiliative tendency (Russell, et al., 1980); less accuracy in encoding expressive nonverbal behaviors (Gerson & Perlman, 1979); and generation of fewer and less effective solutions to hypothetical interpersonal problems (Horowitz, French, & Anderson, 1982).

Other studies have shown that lonely individuals tend to violate norms for appropriate self-disclosure in relationships. For example, Chelune, Sultan, and Williams (1980) showed that greater loneliness was associated with lower total disclosure on a self-disclosure situations questionnaire, and that subjects whose level of disclosure was in accord with the normative pull of social situation cues were less lonely than those subjects whose disclosure levels deviated from the normative pattern (i.e., either too much or too little disclosure for the situations presented). In addition, Solano, Batten, and Parish (1982) showed that lonely subjects in an experimental dyadic interaction chose too-intimate self-disclosure topics with same sex partners and too-impersonal topics with opposite sex partners. This study also suggested that lonely subjects did not perceive a relative lack of intimacy in conversations, although their nonlonely partners did. Generally, it seems that lonely people have difficulty appropriately revealing personal information to others in new relationships and unstructured social situations (Chelune, et al., 1980).

In another study, Jones, Hobbs, and Hockenbury (1982) demonstrated

that lonely individuals were deficient in a specific class of conversational behaviors called "partner attention." These behaviors included partner references, topic continuations, questions, expressions of positive or negative affect, and expressions of agreement. In an attempt to demonstrate a causal link between deficient partner attention and loneliness, the researchers trained a group of lonely subjects to emit such behaviors. Results showed that trained lonely subjects became less lonely than those who did not receive the training. However, these results are equivocal, because the decrease in loneliness may have been due to the increased attention paid to the lonely subjects during the training. In addition, no follow-up assessment was done.

Thus, in general, social skills deficits appear play a role in the experience of loneliness. The role of social skills deficits in the maintenance of loneliness over time, however, has not been investigated. One question worthy of study is whether chronically lonely students would have more severe social skills deficits than the transiently lonely, whose skills may be sufficient to enable a more positive adjustment to college living.

Dysfunctional Attitudes in Loneliness

One current trend in the loneliness literature is the increasing attention being paid to the way in which lonely individuals perceive and evaluate their interpersonal worlds. Lonely individuals have been shown to hold not only a negative self-image, but also "a negative view of humanity and society" (Jones, et al., 1981, p. 40; Jones, 1982). For example, Jones, et al., (1981) showed that loneliness is correlated with

beliefs of personal powerlessness, that the world is "unjust," and generally that other people are untrustworthy. In addition, Jones, et al., (1982) hypothesized that one factor in lonely people's self-disclosure difficulties is a general expectation of interpersonal rejection. Jones et al. (1981) pointed out that the correlational nature of these data prevents causal inferences regarding loneliness and negative attitudes, but they concluded that "a negative view of others, once acquired, would tend to inhibit the emergence of close, satisfying interpersonal relationships" (p. 41).

Young (1982), a cognitive therapist in the tradition of Beck (Beck, Rush, Shaw, & Emery, 1979), has developed a cognitive intervention strategy for loneliness which emphasizes the role of a person's way of construing self and relationships in the creation of maladaptive social behavior and feelings of isolation. Through his work with lonely clients, Young has identified "loneliness clusters" of maladaptive beliefs and automatic thoughts relating to themes such as low social self-esteem, mistrust, and problems in finding intimate partners. In order to assess these types of beliefs, Young developed the Young Loneliness Diagnostic Scale (YLD; Young, 1981). In his initial work on the YLD, Young (1981) derived a factor structure for the measure based on data from 35 non-psychotic outpatients in psychotherapy. These factors were Fear of Social Rejection and Evaluation, Social Anxiety and Low Social Self-Esteem, Problems Finding Partners and Fear of Intimate Rejection, Fear of Being Controlled or Trapped in Relationship, and Discontent Being Alone. Factor analyses by Morelli (1984) and Wilbert and

Rupert (in press) largely confirmed the factor structure with college students, although some inconsistencies in factor loadings were noted. However, informal interviews conducted with a group of severely lonely college students (Wilbert & Rupert, in press) suggested that at present the YLD is not broad enough in scope to adequately assess the range of attitudes held by lonely individuals. For example, those interviews uncovered themes of cognitions not assessed by the YLD such as hostility toward others, hindrance of social life by academic responsibilities, and motivation for some kind of psychological help with relationships. Thus, the YLD is potentially very useful but is in need of further validation and factor analytic research.

A crucial factor in Young's (1982) intervention strategy is the differentiation of lonely clients in terms of chronicity, a distinction he feels has been overlooked by clinicians and researchers. As opposed to more transient forms of loneliness, Young (1982) suggested that "chronic loneliness probably involves long-term cognitive and behavioral deficits in relating to other people rather than a temporary response to a new environment" (p. 383). With this in mind, Young (1981) designed the Young Loneliness Chronicity Scale (YLC), which assesses the duration of various feelings associated with loneliness. The YLC was originally designed to differentiate short term and long term lonely clients, but its discriminatory power has yet to be tested against longitudinal follow-up of lonely subjects. Thus, again, the YLC has much potential as a research and clinical tool but has yet to receive adequate validation work.

Although researchers hint at the role of dysfunctional attitudes in loneliness, data are scarce which specifically address this issue. However, Wilbert and Rupert (in press) demonstrated a significant predictive relationship between measures of dysfunctional attitudes and loneliness even after level of depression had been statistically controlled. Those attitudes which were most strongly related to loneliness surrounded feelings of social inferiority, social anxiety, problems in finding a satisfying intimate partner, and fear of rejection in an intimate relationship.

The importance of assessing level of dysfunctional attitudes when implementing intervention strategies was demonstrated in a study by Hammen, Jacobs, Mayol, and Cochran (1980). These researchers showed that non-student adult clients with assertiveness deficits and high levels of dysfunctional attitudes as measured by the Dysfunctional Attitudes Scale (DAS; Weissman, 1980) did not respond well to traditional assertiveness training interventions when compared to low DAS clients. They concluded that high DAS clients pose a more formidable treatment challenge and may require a more intensive treatment strategy.

In summary, the significant relationship between dysfunctional attitudes and loneliness enriches the conceptualization of the disorder and has implications for interventions. For example, one could expect many lonely clients to not improve sufficiently if social skills training is the treatment of choice. It would also be expected that lonely students with high levels of dysfunctional attitudes would be more likely to show long term maintenance of loneliness.

Summary and Hypotheses

This study sought to further elucidate the major underlying psychological and behavioral dysfunctions of loneliness in an attempt to learn more about the differences between chronically and transiently lonely college students. Briefly, a battery of self-report measures of loneliness, social skills, dysfunctional cognitions, and general psychological adjustment was administered to a large pool of freshmen and transfer students at one to two weeks after their arrival on campus. At seven weeks into the semester, degree of loneliness was again assessed along with usage and effectiveness of various self-help strategies to combat loneliness. Data from these assessments were used to measure changes in loneliness over time, which enabled differentiation of the chronically, transiently, and non-lonely students. Differences in social skills and cognitions among these three groups were then examined. Specifically, the following hypotheses were tested.

1. In line with Young's (1981) theory, chronically lonely subjects will show the lowest level of general psychological adjustment.

2. Chronically lonely subjects will also show the most severe deficits in social skills.

3. In addition, chronically lonely subjects will show the highest levels of dysfunctional attitudes.

4. Transiently lonely subjects will display moderate levels of social skills deficits in comparison to the chronically and non-lonely subjects.

5. Transiently lonely subjects will show moderate levels of dys-

functional attitudes in relation to the chronically and non-lonely subjects.

6. As suggested by Wilbert and Rupert (in press), lonely individuals will report more frequently an absence of a satisfying romantic relationship.

7. Chronically and transiently lonely subjects will not differ in their usage of various self-help strategies in the development of social relationships. However, transiently lonely subjects will show higher effectiveness ratings than will the chronically lonely.

Differences among chronicity groups in terms of specific clusters of dysfunctional attitudes and specific classes of social skills deficits were assessed as an exploratory endeavor. No specific hypotheses were advanced.

A secondary goal of this project was to provide further validity data on Young's (1981) YLD and YLC. Specifically, several new factors were designed to broaden the YLD, and it was expected that factor analysis would confirm this revised factor structure. In addition, it was expected that the YLC would show discriminatory power among chronicity groups.

CHAPTER III

METHOD

Subjects

At the beginning of the first semester, Introductory Psychology students at Loyola University of Chicago were asked to volunteer for a two session study of "the process of social adjustment to college living" in which the focus was on the problems and successes that students typically encountered in coming to a new university environment. A stipulation for eligibility was that students had to be in their first semester at Loyola. A group of 141 volunteers attended the initial session, and 120 (76 females, 44 males) of these returned for the second session seven weeks later. The ages of these 120 subjects ranged from 17 to 23, with a mean of 18.3.

Procedure

This study consisted of two testing sessions conducted during the first semester in mixed-sex groups. The first session was done in the first and second weeks after students' arrival on campus. In the initial session, the project was described to subjects as a study of new students' social adjustment to college living. The longitudinal nature of the project was explained, and subjects were asked about their willingness to return for follow-up assessment. Then an initial assessment battery of questionnaires (described below) was distributed and

explained. Subjects were encouraged to be honest with themselves and the investigator in filling out each questionnaire in view of the assurance of anonymity and confidentiality. In addition to these measures, a general information sheet was used (see Appendix A) which requested basic information on age, sex, race, religion, and marital status. In addition, data was obtained on the subject's number of close friends (i.e., "Someone with whom you interact regularly and who knows you very well"), and number of friends (i.e., "Someone you interact with on a fairly regular basis who you would not classify as a close friend"). Subjects were also asked about the existence and duration of any romantic relationships. Finally, separate ratings of satisfaction with romantic involvements and general social life (excluding romantic involvements) were requested, each on a seven point scale.

The second testing session took place at seven weeks into the semester, and 120 out of the original pool of 141 subjects returned for follow-up assessment. The Young Loneliness Scale (see below) was readministered. Data on number of friendships, existence of romantic attachments, and satisfaction with both romantic involvements and general social life were again requested. Subjects also filled out a Self-Help Questionnaire adapted from Rook and Peplau (1982; see Appendix B). Twenty three self-help strategies were listed (e.g., tried harder to be friendly to other people, took your mind off feeling lonely through some mental activity such as reading a novel). For each strategy a 5 point rating for both frequency of use and effectiveness was elicited. After completing these questionnaires, subjects were thanked

for their participation and any questions about the project were answered.

Initial Assessment Battery

Young Loneliness Scale (YLS; Young, 1982). The YLS is a recently developed 19 item measure of loneliness severity that yields scores which range from 19 to 57. Internal consistency of the YLS has been shown to be .92, and test-retest reliability at one week was .88 (Young, 1981). The YLS has been shown to correlate .74 with the Revised UCLA Loneliness Scale (Wilbert & Rupert, in press). The present YLS is a revision of a similar inventory (the Young Inventory or YI) which, according to Young (1981), is close enough in content and format to allow generalization of validity data from the YI to YLS. The YI has been shown to correlate .66 with self-reported level of loneliness in the past two months, .50 with self-reported level of loneliness the past two years, and -.42 with self-reported frequency of using specific coping skills to reduce loneliness (Primakoff, 1980). All these correlations were stronger than those between the UCLA Scale and the same indices. Thus, the YLS appears to have adequate reliability and validity for use as a research instrument.

Social Reaction Inventory (SRI; Curran, Corriveau, Monti, & Hagerman, 1980). The SRI is a 105 item scale considered to be one of the most global paper and pencil measures of social skills available. The scale is a revision of the Social Anxiety Inventory (Richardson & Tasto, 1976) and asks subjects to rate on a five point Likert scale the quality of their skill in handling each of 105 social situations. Test-retest

stability of the SRI was .71 and internal consistency was .99 (Curran, et al., 1980). The SRI has been shown to be a sensitive measure of changes in social skills as a result of social skills training (Monti, Curran, Corriveau, DeLancey, & Hagerman, 1980). The 105 situations fall into a seven factor structure: Disapproval or Criticism by Others, Social Assertiveness and Visibility, Confrontation and Anger Expression, Heterosexual Contact, Intimacy and Interpersonal Warmth, Conflict With or Rejection by Parents, and Interpersonal Loss. Total scores range from 105 to 525.

Dysfunctional Attitudes Scale Form A (DAS; Weissman, 1978). The DAS is a 40 item scale assessing degree of belief in various negative attitudes on a seven point scale (e.g., People will probably think less of me if I make a mistake). The DAS possesses both adequate test-retest reliability (.81) and high internal consistency (.88; Weissman, 1978). The DAS has been shown to correlate significantly with the Beck Depression Inventory (Beck, 1978) and two other measures of negative cognitions in a sample of college students (Dobson & Breiter, 1983). Its usefulness as a diagnostic instrument in a psychiatric population has also been established (Hamilton & Abramson, 1983). Total scores range from 40 to 280.

Young Loneliness Diagnostic Scale (YLD; Young, 1981). The YLD is a 28 item scale assessing social attitudes hypothesized to relate to loneliness using a five point scale. Morelli (1984) demonstrated the YLD's test-retest reliability at four weeks as .78 and its internal consistency as .89. The YLD also correlated .70 with the UCLA Scale and

-.17 with the Marlowe-Crowne Social Desirability Scale (Crowne & Marlowe, 1960) in this study. The factor structure of this measure has been largely confirmed by Morelli (1984) and Wilbert and Rupert (in press), and consists of attitudes summarized by Fear of Social Rejection and Evaluation, Problems Finding Partners and Fear of Intimate Rejection, Social Anxiety and Low Social Self-Esteem, Discontent Being Alone, and Fear of Being Controlled or Trapped in Relationship, although the latter two factors are less reliable. The present study sought to expand the factor structure of the YLD by adding items falling under Hostility Toward Others, Social Life Hindered by Academic Responsibilities, and Motivation for Treatment, which were developed following informal interviews with a group of severely lonely individuals (Wilbert & Rupert, in press). This revised inventory (henceforth referred to as the YLDR) contains 53 items (see Appendix C). Total scores range from 53 to 265.

Young Loneliness Chronicity Scale (YLC; Young, 1981). The YLC is a 19 item scale assessing the duration of symptoms of loneliness on a seven point scale ranging from "I haven't felt this way during the past two weeks" through "I've felt this way for most of my life." Young (1981) puts the internal consistency of the YLC at .91 and the one week test-retest reliability at .91, and also showed a correlation of .87 with the UCLA Loneliness Scale. Originally, the YLC was devised to differentiate chronic, short term, and non-lonely individuals but no data corroborating this self-report with longitudinal assessments of loneliness is available.

Ego Strength Scale (ESS; Barron, 1953). The ESS was designed specifically to predict the response of neurotic patients to individual psychotherapy. Sixty-eight items were identified empirically from 566 MMPI items by comparing the item response frequencies of 17 patients who were judged independently as clearly improved after six months of therapy with the response frequencies of 16 patients who were rated as unimproved after the same treatment duration. Barron (1953) concluded that the scale was useful in predicting personality change during therapy. The internal consistency has been set at .78 and the three month test-retest reliability was .72 (Barron, 1953). The ESS was used in the present study as an index of general psychological adjustment. Graham (1977) summarized research and concluded that high ESS subjects are "fairly well put together," while low ESS subjects are not well equipped to deal with daily stressors and typically have longstanding, severe maladjustment.

Chronicity Group Assignment

Using YLS scores at time one and time two, subjects who fit the criteria to be described were assigned to one of three groups: Chronically lonely, transiently lonely, or non-lonely. This assignment process was as follows. Both the first and second YLS score distributions were split into thirds, in which the middle range covered plus or minus .5 standard deviations from the mean. Scores greater than +.5 SD were considered highly lonely, and scores less than -.5 SD were deemed non-lonely. For the first YLS distribution the mean was 11.5 and standard deviation was 7.9, and the score ranges were 0-7, non-lonely; 8-15, mod-

erately lonely; and greater than 15, highly lonely. The second distribution's mean was 9.7 with standard deviation of 7.0, and the score ranges were 0-6, non-lonely; 7-13, moderately lonely; and greater than 13, highly lonely. If YLS scores at both times were in the highly lonely range, a subject was considered chronically lonely. Similarly, a subject with both YLS scores in the non-lonely range was classified as non-lonely. If a subject's YLS score at time two dropped at least one range (i.e., high to moderate or moderate to low), and if the subject's z-scored YLS scores differed by at least one, the subject was considered transiently lonely. This group is distinct from the other two due to the evidence of positive social adjustment indicated by a significant decrease in loneliness over time. The criteria resulted in a subject pool of 19 chronically lonely (10 males, 9 females), 11 transiently lonely (4 males, 7 females), and 29 non-lonely (6 males, 23 females).

CHAPTER IV

RESULTS

Factor Analysis of YLDR

In order to derive the factor structure of the expanded YLD, the YLDR was factor analyzed with all 120 cases using a varimax rotation to an orthogonal solution. Six factors with eigenvalues > 1 accounted for a total of 79.4% of variance (item factor loadings are presented in Appendix B). The first, which accounted for 43.6% of variance, was labelled Social Anxiety and Low Social Self-Esteem (14 items). Other factors identified, and the percentage of variance accounted for, were Problems Finding Partners and Fear of Intimate Rejection (13 items, 9.6%); Fear of Social Rejection and Evaluation (8 items, 6.1%); Social Life Hindered by Academics (5 items, 8.5%); Hostile Attitudes Towards Others (7 items, 6.6%); and Motivation for Treatment (3 items, 5.1%). The first three factors were present in Young's (1981) original structure, and the other three were consistent with the a priori structure designed for this study. Thus, even though the factor analysis was done on only 120 subjects, the consistency of the results with a priori structures supported using the factor scores in further analyses. There were three items (#10, 20, and 32) with no strong factor loading which were excluded from computation of the total YLDR score.

Validity of Young Loneliness Chronicity Scale

The discriminatory power of the YLC among chronicity groups was assessed by analyzing the total YLC score in a 3 (Chronicity Group) by 2 (Sex) analysis of variance. The main effect for chronicity group was significant, $F(2, 53) = 36.3$, $p < .001$, and Duncan's Multiple Range Test showed that all groups were significantly different ($p < .05$; see Table 1). The η^2 of .58 demonstrated the good discriminatory power of this measure. Thus, as predicted, the YLC's ability to assess loneliness chronicity was corroborated by longitudinal follow-up of loneliness.

Social Skills and Cognitions Among Chronically, Transiently, and Non-Lonely Subjects

Data analysis was aimed at defining the differences which existed among the chronic, transient, and non-lonely groups in terms of dysfunctional attitudes and social skills deficits. Thus, total scores for the YLDR, DAS, SRI, and ESS were analyzed in separate 3 (Chronicity Group) by 2 (Sex) analyses of variance, as were each of the factor scores for the YLDR and SRI. Each ANOVA was followed by Duncan's Multiple Range Test on the chronicity group means ($\alpha = .05$). An estimate of the relative strength of each dependent measure in differentiating among the three chronicity groups was given by the η^2 statistic. No sex differences were found in the analyses unless indicated, thus male and female data were pooled.

The results of the ANOVAs using the total scores for each questionnaire are summarized in Table 1. Significant main effects for

chronicity group were obtained on all measures: YLDR, $F(2, 53) = 36.4$, $p < .001$; DAS, $F(2, 53) = 14.2$, $p < .001$; SRI, $F(2, 53) = 11.8$, $p < .001$; and ESS, $F(2, 53) = 8.7$, $p < .01$. In general, as predicted, the chronically lonely subjects showed the severest level of coping skill deficits in terms of dysfunctional attitudes (YLDR and DAS), social skills (SRI), and general psychological adjustment (ESS). Inspection of the intergroup differences identified by the Duncan's tests showed that, as hypothesized, the transiently lonely subjects were differentiated from the chronically lonely subjects primarily by their overall level of dysfunctional attitudes, in that their scores on the YLDR were significantly lower than those of the chronically lonely, although higher than the non-lonely. In addition, their scores on the DAS were significantly lower than the chronically lonely, and did not differ from the non-lonely. Contrary to hypothesis, the overall social skills of the transiently and chronically lonely, as measured by the SRI, did not differ from each other and were significantly more impaired than those of the non-lonely. Overall, the η^2 statistics showed that the two measures of dysfunctional attitudes (YLDR and DAS) had the strongest discriminatory power among the groups.

The results of the ANOVAs using YLDR factor scores are summarized in Table 2. Each analysis showed a significant main effect for chronicity group: Social Anxiety and Low Social Self-Esteem, $F(2, 53) = 41.2$, $p < .001$; Problems Finding Partners and Fear of Intimate Rejection, $F(2, 53) = 21.4$, $p < .001$; Fear of Social Rejection and Evaluation, $F(2, 53) = 17.0$, $p < .001$; Motivation for Treatment, $F(2, 53) = 14.1$, $p < .001$.

TABLE 1
ANOVA Results Using Total Scale Scores

Scale	<u>Chronicity Group</u>			
	<u>Non-Lonely</u>	<u>Transient</u>	<u>Chronic</u>	
YLC	M 22.5 SD 5.6	46.1 20.7	64.3 21.8	eta ² = .58 F = 36.3** ^a NL < TL < CL ^b
YLDR	96.9 23.0	133.7 18.0	154.0 23.3	eta ² = .58 F = 36.4** NL < TL < CL
DAS	110.9 22.7	121.3 25.9	154.5 34.7	eta ² = .34 F = 14.2** NL = TL < CL
SRI	267.0 48.5	301.0 35.2	328.3 43.2	eta ² = .28 F = 11.8** NL < TL = CL
ESS	44.9 5.0	41.1 6.8	37.5 8.0	eta ² = .21 F = 8.7* CL < NL

^a All Fs have 2, 53 degrees of freedom.

^b Results of Duncan's Multiple Range Test (alpha = .05); NL = Non-lonely, TL = Transiently lonely, CL = Chronically Lonely.

* P < .01

** p < .001

.001; Hostile Attitudes Toward Others, $F(2, 53) = 4.4, p < .05$; and Social Life Hindered by Academic Responsibilities, $F(2, 53) = 3.3, p < .05$. As planned, an exploration of group differences in specific clusters of attitudes was attained by inspection of the results of Duncan's tests. In terms of these specific clusters of social attitudes, the transiently and chronically lonely subjects were quite similar. Both experienced difficulty finding acceptable intimate partners and experienced fears of rejection in an intimate relationship, significantly more so than non-lonely subjects. In addition, transiently and chronically lonely were both significantly higher than the non-lonely in terms of fears of opening up to others due to evaluation anxiety, being hostile regarding others' motivation and interpersonal behavior, feeling hindered in their social lives by academic responsibility, and in being motivated to seek some kind of counseling or psychotherapy to achieve more satisfying social relationships. However, one finding more in line with expectation was that the transiently lonely subjects were not as negative in their evaluation of their social selves as were the chronically lonely, although they were significantly more negative than the non-lonely. The η^2 of .61 showed that this factor was the best discriminator of chronicity groups.

The ANOVA results using the SRI factor scores (derived from the a priori structure) are summarized in Table 3. Significant main effects for chronicity group were again obtained for each factor score, and exploration of intergroup differences was given by Duncan's tests. Again, as predicted, the chronically lonely subjects showed the most

TABLE 2

ANOVA Results Using YLDR Factor Scores

<u>YLDR Factors</u>	<u>Chronicity Group</u>			
	<u>Non-Lonely</u>	<u>Transient</u>	<u>Chronic</u>	
Social anxiety & low social self-esteem	M 26.1 SD 7.1	35.2 9.1	48.5 8.7	eta ² = .61 F = 41.2** ^a NL < TL < CL ^b
Problems finding partners & fear of intimate rejection	23.8 7.8	37.0 9.8	40.6 9.0	eta ² = .48 F = 21.4** NL < TL = CL
Fear of social rejection & evaluation	17.8 5.0	23.5 3.8	25.8 4.9	eta ² = .38 F = 17.0** NL < TL = CL
Motivation for treatment	5.8 2.3	8.0 2.4	9.3 2.3	eta ² = .32 F = 14.1** NL < TL = CL
Hostile attitudes toward others	12.7 4.8	16.3 4.6	16.3 3.8	eta ² = .15 F = 4.4* NL < TL = CL
Social life hindered by academic responsibilities	10.8 4.3	13.8 3.0	13.4 3.5	eta ² = .12 F = 3.3* NL < TL = CL

^a All Fs have 2, 53 degrees of freedom.

^b Results of Duncan's Multiple Range Test (alpha = .05); NL = Non-lonely, TL = Transiently lonely, CL = Chronically lonely.

* p < .05

** p < .001

severe social skills deficits. They were significantly less skilled than non-lonely subjects in dealing with disapproval or rejection by others and accepting criticism, $F(2, 53) = 7.3, p < .01$, were less confident of their skills in heterosexual encounters, $F(2, 53) = 6.4, p < .01$, and dealt less effectively with instances of disruptions in relationships that led to feelings of loss, $F(2, 53) = 3.9, p < .05$. The transiently lonely subjects' scores fell in the midrange on most of these measures, although they rated their skills as being equally as weak as those of the chronically lonely in terms of social assertiveness and taking active roles in interpersonal situations, $F(2, 53) = 13.6, p < .001$, and in dealing with expression of anger and other social confrontations, $F(2, 53) = 5.4, p < .01$. Both of these findings were contrary to expectation. However, the transiently lonely were significantly more skilled than the chronically lonely and equal to the non-lonely in dealing with the expression and reception of warm, intimate feelings, $F(2, 53) = 9.5, p < .001$. Such a skill superiority for the transiently lonely could have had a strong influence on their positive social adjustment.

Relationship Patterns

A descriptive account of the process of social adjustment was obtained by using data on both romantic and social life satisfaction ratings and number of friends and close friends in separate 3 (Chronicity Group) by 2 (Sex) ANOVAs at both the first and second assessments, followed by Duncan's Multiple Range Tests among group means. These results are summarized in Table 4. There were no differences among the

TABLE 3
ANOVA Results Using SRI Factor Scores

<u>SRI Factors</u>	<u>Chronicity Group</u>			
	<u>Non-Lonely</u>	<u>Transient</u>	<u>Chronic</u>	
Social assertiveness & visibility	M 60.1 SD 11.9	70.2 10.3	79.1 13.5	eta ² = .34 F = 13.6*** ^a NL < TL = CL ^b
Intimacy & interpersonal warmth	24.8 6.9	27.6 5.4	34.1 6.2	eta ² = .30 F = 9.5*** NL = TL < CL
Disapproval or criticism by others	68.3 12.5	73.3 10.6	80.7 12.0	eta ² = .18 F = 7.3** NL < CL
Confrontation & anger expression	40.0 9.8	47.0 9.2	47.1 8.3	eta ² = .14 F = 5.4** NL < TL = CL
Heterosexual contact	21.1 6.2	22.6 9.5	27.5 7.3	eta ² = .14 F = 6.4** NL < CL
Conflict or rejection by parents	29.7 6.2	35.2 5.9	33.3 6.2	eta ² = .12 F = 3.9* NL < TL
Interpersonal loss	22.9 5.4	25.1 3.1	26.5 4.6	eta ² = .10 F = 3.9* NL < CL

^a All Fs have 2, 53 degrees of freedom.

^b Results of Duncan's Multiple Range Test (alpha = .05); NL = Non-lonely, TL = Transiently lonely, CL = Chronically lonely.

* p < .05

** p < .01

*** p < .001

groups in terms of number of close friends at time one, $F(2, 53) = 1.4$, ns, or time two, $F(2, 53) = 3.0$, ns, although there was a slight trend toward an increase in number of close friends for both the transiently and non-lonely subjects. In terms of number of friends, groups were not significantly different at time one, $F(2, 53) < 1$, ns, but at time two the chronically lonely had significantly fewer friends than the non-lonely, $F(2, 53) = 3.7$, $p < .05$. Both the transiently and non-lonely subjects appeared to increase their friendship circles, while the chronically lonely tended to lose friends over time. In regard to satisfaction ratings, at time one both the transiently and chronically lonely subjects were significantly less satisfied with both romantic, $F(2, 53) = 6.8$, $p < .01$, and social relationships, $F(2, 53) = 13.6$, $p < .001$. However, at time two the transiently lonely subjects' positive adjustment was reflected in their enhanced satisfaction ratings as shown in the main effects for both romantic life, $F(2, 53) = 7.7$, $p < .01$, and social life, $F(2, 53) = 17.0$, $p < .001$, and in the Duncan's tests which showed that they were equally as satisfied as the non-lonely and significantly more satisfied than the chronically lonely.

An indication of the importance of a romantic involvement in feelings of loneliness was obtained by creating four groups based on romantic involvement data at the first and second assessments: Subjects consistently involved (17 males, 32 females), subjects consistently uninvolved (15 males, 34 females), subjects who found a partner (8 males, 5 females), and subjects who lost a partner (4 males, 4 females). These four groups broken down by sex formed the structure for a 4

TABLE 4

ANOVA Results Using Friendship and Satisfaction Data

<u>Rating</u>	<u>Chronicity Group</u>				
	<u>Non-Lonely</u>	<u>Transient</u>	<u>Chronic</u>		
		<u>First Assessment</u>			
Number of close friends	M 4.4 SD 2.7	3.1 1.6	4.3 3.5	F = 1.4 ns ^a	
Number of friends	18.6 15.3	13.5 16.2	10.4 7.2	F < 1 ns	
Social life satisfaction	6.1 1.0	4.9 1.8	4.2 1.3	F = 13.6 *** ^b NL > TL = CL ^b	
Romantic life satisfaction	5.4 1.8	3.3 1.8	3.5 2.2	F = 6.8** NL > TL = CL	
		<u>Second Assessment</u>			
Number of close friends	5.8 3.9	4.3 2.0	3.4 1.7	F = 3.0 ns	
Number of friends	18.3 13.0	16.2 28.2	8.1 5.5	F = 3.7* NL > CL	
Social life satisfaction	6.2 1.0	5.5 1.4	4.3 1.1	F = 17.0*** NL = TL > CL	
Romantic life satisfaction	5.4 1.6	4.5 1.8	3.1 1.9	F = 7.7** NL = TL > CL	

^a All Fs have 2, 53 degrees of freedom.

^b Results of Duncan's Multiple Range Test (alpha = .05); NL = Non-lonely, TL = Transiently lonely, CL = Chronically lonely.

* p < .05

** p < .01

*** p < .001

(Group) by 2 (Sex) ANOVA using YLS score at time two as the dependent measure. There was a significant main effect for chronicity group, $F(3, 111) = 2.7, p < .05$, and Duncan's Multiple Range Test ($\alpha = .05$) showed that, as expected, those who lost a partner ($M = 14.0$) were significantly more lonely than those who found a partner ($M = 7.2$). The means for those consistently involved and consistently uninvolved were 8.6 and 11.0, respectively. Thus, as predicted, the presence or absence of a romantic relationship was a significant factor in loneliness among college students.

Self-Help Strategies

Assessment of usage and effectiveness of self-help strategies among chronicity groups was obtained via analyses using the Self-Help Questionnaire. In order to arrive at a summary structure for the 23 item questionnaire, factor analysis using all 120 cases was conducted on the frequency ratings using a varimax rotation to an orthogonal solution. Three factors with eigenvalues > 1 accounted for a total of 82.2% of variance. These were labelled Challenging Negative Attitudes (6 items, 51.6%; e.g., told yourself that most people are lonely at one time or another), Accentuation of Positive Behaviors and Characteristics (9 items, 18.1%; e.g., did something you are very good at such as schoolwork, athletics, etc.), and Distracting Activities (6 items, 12.5%; e.g., took your mind off feeling lonely by deliberately thinking about other things). The frequency ratings for items were summed under the appropriate factor to form an overall factor frequency rating. Each of the three frequency factor scores was analyzed in a 3 (Chronicity

Group) by 2 (Sex) ANOVA, with follow-up Duncan's Multiple Range Tests ($\alpha = .05$). Because no effectiveness rating could be given on a strategy rated as "never used," a large amount of missing data resulted. Thus, no analyses on the effectiveness rating factor scores could be carried out and there was no way to test hypothesis #7.

For Challenging Negative Attitudes, there was a significant main effect for chronicity group, $F(2, 53) = 6.9, p < .01$, indicating that chronically lonely subjects used these strategies more often than non-lonely subjects (M_s : Chronic = 19.3, transient = 18.4, non-lonely = 14.8). Females ($M = 17.6$) also used these strategies significantly more often than males ($M = 15.7$), $F(1, 53) = 5.6, p < .05$. There was no significant effect for chronicity group using Accentuation of Positive Behaviors and Characteristics, $F(2, 53) < 1, ns$, although, again, females ($M = 29.6$) used these strategies significantly more often than did males ($M = 25.3$), $F(1, 53) = 6.1, p < .05$. Finally, using Distracting Activities, there was a significant chronicity group effect, $F(2, 53) = 14.6, p < .001$, with both the transiently and chronically lonely ($M_s = 16.9$ and 19.0, respectively) being significantly higher in usage frequency than the non-lonely ($M = 13.2$). Females were again higher in usage frequency ($M = 16.1$) than were males ($M = 15.0$), $F(1, 53) = 6.4, p < .05$. Thus, in terms of overall frequency of self-help strategy usage, chronically lonely subjects did not appear to remain lonely because of lack of effort in coping, in that they did not use self-help strategies any less frequently than did the transiently lonely.

CHAPTER V

DISCUSSION

This study adds to the understanding of the phenomenon of loneliness among college students by demonstrating the differences and similarities among chronic, transient, and non-lonely subjects in terms of dysfunctional attitudes, social skills deficits, and general psychological well-being. As predicted, the chronically lonely subjects showed the most severe deficits in ability to relate effectively with others, in their appraisal of themselves and their social world, and in general psychological adjustment. Transiently lonely subjects were similar to the chronically lonely at the beginning of the school year in having fears of intimate rejection and difficulty finding intimate partners, fears of social evaluation, feelings of hostility toward others, difficulty maintaining an active social life in light of academic pressures, and a higher level of motivation for treatment, as compared to non-lonely subjects. Transiently lonely subjects also showed some social skills deficits similar to those of the chronically lonely, such as in social assertiveness and social confrontations.

As expected, the variables which most clearly differentiated the transiently and chronically lonely subjects at the beginning of the school year were the measures of general dysfunctional attitudes. On the YLDR and DAS, the transiently lonely were significantly less dys-

functional than the chronically lonely. Specifically, transiently lonely subjects were less negative than the chronically lonely in their evaluations of their social selves and their desirability to others. This lower level of negative appraisal strategies, coupled with the transiently lonely subjects' greater skill in the expression and reception of interpersonal intimacy (as measured by the SRI), seem to have enabled these subjects to effect a positive social adjustment, even though their level of dysfunction rendered them vulnerable to feelings of isolation at the beginning of the school year. These findings are in accord with those of Cutrona (1982) who found that attitudinal variables were the most powerful predictors of positive adjustment in the freshman year.

The demonstrated importance of attitudinal dysfunction in loneliness suggests that conceptualization of loneliness from a social skills perspective, as some have suggested (Jones, et al., 1982), is insufficient. Although it is not the present study's goal to argue a moot chicken-or-egg position on the primacy of dysfunctional attitudes over social skills deficits in the causation and maintenance of loneliness, it is clear that theoretical accounts of loneliness must incorporate the cognitive factor to adequately explain the phenomenon. Lonely individuals, especially longer-term lonely, are plagued by a variety of negative attitudes about themselves and their social worlds. Mistrust of others, expectations of rejection, negative self-identity, and perfectionistic expectations all coalesce and result in social behavior that is ineffective in bringing about satisfying relationships. For example, the

chronically lonely individual typically has difficulty opening up to others and appropriately disclosing personal information; thus there is no deepening of relationships that can engender the satisfying state of knowing and being known on an intimate level. Negative appraisals of self and others by lonely individuals can also lead to self-confirming feedback from others. That is, if a lonely person behaves in accordance with skewed constructs and irrational fears and withdraws from social contact, others will respond in kind and will brand the lonely person as one who is unlikable. Thus, the problem of loneliness is very complex, and in order to understand it the influence of one's world view must be considered.

Because of the role of cognitive factors in the causation and maintenance of loneliness, intervention strategies for loneliness should consider incorporation of cognitive techniques to combat ingrained negative perceptual patterns. Moreover, the present data emphasize the importance of differentiating lonely clients in terms of chronicity and, as such, support a cognitive intervention approach such as Young's (1982). Clearly, long-term loneliness is a recalcitrant clinical problem, and will require a more intensive treatment approach. Numerous treatment failures with chronically lonely clients can be predicted if social skills training alone is implemented, given the high level of dysfunctional attitudes present in such clients (cf., Hammen, et al., 1980). However, transiently lonely clients might be adequately served by less intensive strategies such as supportive group therapy or social skills training.

The severity of dysfunction shown by the chronically lonely individuals leads to speculation regarding the developmental factors that would lead to such pervasive disruption in interpersonal relationships. Perhaps the chronically lonely possess personality weaknesses related to early childhood traumas such as parental rejection, abandonment, or abuse. Emotional traumas at this life stage generally lead to long-standing deficits in self-concept and self-esteem. The presence of early injuries fostered by environmental forces in the history of chronically lonely clients would help explain the resistance to intervention shown by such persons (Young, 1982). On the other hand, it could be suggested that transiently lonely subjects were exposed to a largely supportive childhood environment but met developmental crises later in life in the form, for example, of experiences of intimate rejection at adolescence. Such a developmental process might lead to fears of intimate rejection and lowered self-esteem, but these symptoms would not be as deeply entrenched in the personality structure as would similar symptoms in the chronically lonely and, therefore, would be more amenable to treatment. These questions regarding childhood factors in the development of adult loneliness could be addressed in future research.

The present data show that, as hypothesized, one of the most significant factors in loneliness among college students is the absence of a romantic relationship. At this stage of life the establishment of an intimate romantic tie with at least one other person is crucial to identity formation and psychological well-being. According to Erikson (1963), inability to develop such a relationship at this age will lead

to feelings of isolation and will hinder psychological development in subsequent adult phases. The present data also suggest that the strong fears of being rejected by a potential intimate partner which are held by lonely individuals play a role in preventing romantic relationships from being established. Both the transiently and chronically lonely subjects showed such fears at the beginning of the semester, which include an overconcern with past romantic failures and a reluctance to take such risks again. Thus, for many lonely individuals a cycle of avoidance of true intimacy is engendered and maintained.

It is important not to neglect environmental factors in the conceptualization of loneliness. For some individuals, especially minority group members, loneliness can arise not from personal inadequacies but simply from a lack of potential intimate partners in the social context. However, college students share a common social environment regardless of place of residence, i.e., in the present study no differences in loneliness were found between commuters and campus residents. It is, then, a tribute to the power of dysfunctional attitudes that an individual could be chronically lonely in an environment that, objectively, is replete with opportunities for intimate exchange.

The lack of a difference in self-help strategy usage frequency between the chronically and transiently lonely is a curious finding. It is not clear whether chronically lonely subjects distorted the extent to which they attempted coping behaviors or whether they did indeed attempt numerous strategies without success. In the latter case, it would be interesting to determine why self-help strategies were ineffective for

the chronic subjects. It is possible that a high level of dysfunctional attitudes in some way interferes with self-directed coping efforts, leading to demoralization and perpetuation of isolation.

This study supports the usefulness of the YLDR and YLC in assessment of loneliness. The present study largely confirmed the a priori factor structure for the YLDR and expanded the scope of the inventory by adding three new factors. Using the broadened YLDR, an indication of particular clusters of dysfunctional social attitudes held by individuals can be obtained. Additional investigations are needed to determine the degree to which such an inventory can aid in planning and implementing interventions. In addition, the YLC appears to be a simple way of differentiating subjects in terms of loneliness chronicity. Although it is not a substitute for longitudinal assessment in research on loneliness, the YLC can give an estimate of the level of dysfunction of a lonely subject or client by measuring the duration of distress. However, its high level of correlation with measures of loneliness severity (e.g., .87 with the UCLA Loneliness Scale) engenders concern about its redundancy if used with established loneliness measures. On the other hand, perhaps the YLC is a more valid method of assessing the severity of loneliness due to the incorporation of the chronicity factor in its design. Further research using both the YLDR and the YLC is needed to clarify these important issues.

This study possesses a weakness in its reliance on self-report measures alone. For example, it is difficult to assess the differential importance of social skills deficits and dysfunctional attitudes in

loneliness using this data, because self-report of social skills is distorted by factors such as mood and self-image. Another study in this vein might benefit from a more objective, behavioral assessment of social skills (cf., Chelune, et al., 1978; Jones, et al., 1982). An additional weakness of this study is the relatively small number of subjects which fit the chronicity group criteria. Only 59 of 120 subjects were ultimately used in data analysis. However, strong levels of significance were obtained, which supports the conclusions drawn even though the sample was small.

Several directions for future research can be suggested. First, the need exists for better understanding of what factors bring about intransigent dissatisfaction with relationships among chronically lonely individuals. Perhaps some intensive assessment of daily interactions of lonely and non-lonely subjects could be helpful. A methodology for such a study has been established by McAdams, Healy, & Krause (in press) using "Friendship Episodes" questionnaires, which ask for detailed information about specific daily interactions. Second, another study might include an assessment of change in dysfunctional attitudes over time in the process of adjustment. One could expect that a decrease in loneliness would be paralleled by a decrease in dysfunctional attitudes. Finally, treatment outcome data is needed, especially to address the effects of loneliness chronicity on response to intervention.

In conclusion, this study adds to the understanding of loneliness by demonstrating the significant role of dysfunctional attitudes in maintenance of loneliness in the college environment. It emphasizes the

importance of an individual's characteristic mode of construing self and social world in dealing with the establishment and sustenance of satisfying interpersonal relationships.

REFERENCES

- Barron, F. (1953) An ego-strength scale which predicts response to psychotherapy. Journal of Consulting Psychology, 17, 327-333.
- Beck, A. T. (1978) Depression inventory. Philadelphia: Center for Cognitive Therapy.
- Beck, A. T., Rush, A. J., Shaw, B. F., & Emery, G. (1979) Cognitive therapy of depression. New York: Guilford.
- Brain, R. (1976) Friends and lovers. New York: Basic Books.
- Brennan, T. (1982) Loneliness at adolescence. In L. A. Peplau & D. Perlman (Eds.), Loneliness: A sourcebook of current theory, research, and therapy. New York: Wiley.
- Chelune, G. J., Sultan, F. E., & Williams, C. L. (1980) Loneliness, self-disclosure, and interpersonal effectiveness. Journal of Counseling Psychology, 27, 462-468.
- Crowne, D. P., & Marlowe, D. (1960) A new scale of social desirability independent of psychopathology. Journal of Consulting Psychology, 24, 349-354.
- Curran, J. P., Corriveau, D. P., Monti, P. M., & Hagerman, S. B. (1980) Self-report measurement of social skill and social anxiety in a psychiatric population. Behavior Modification, 4, 493-512.
- Cutrona, C. E. (1982) Transition to college: Loneliness and the process of social adjustment. In L. A. Peplau & D. Perlman (Eds.), Loneliness: A sourcebook of current theory, research, and therapy. New York: Wiley.
- Dobson, K. S., & Breiter, H. J. (1983) Cognitive assessment of depression: Reliability and validity of three measures. Journal of Abnormal Psychology, 92, 107-109.
- Erikson, E. H. (1963) Childhood and society. New York: Norton.
- Fromm-Reichmann, F. (1959) Loneliness. Psychiatry, 22, 1-15.
- Gerson, A. C., & Perlman, D. (1979) Loneliness and expressive communication. Journal of Abnormal Psychology, 88, 258-261.

- Gordon, S. (1976) Lonely in America. New York: Simon & Schuster.
- Graham, J. R. (1977) The MMPI: A practical guide. New York: Oxford University Press.
- Hamilton, E. W., & Abramson, L. Y. (1983) Cognitive patterns and major depressive disorder: A longitudinal study in a hospital setting. Journal of Abnormal Psychology, 92, 173-184.
- Hammen, C. L., Jacobs, M., Mayol, A., & Cochran, S. D. (1980) Dysfunctional cognitions and the effectiveness of skills training and cognitive-behavioral assertion training. Journal of Consulting and Clinical Psychology, 48, 685-695.
- Horowitz, L. M., & French, R. de S. (1979) Interpersonal problems of people who describe themselves as lonely. Journal of Consulting and Clinical Psychology, 47, 762-764.
- Horowitz, L. M., French, R. de S., & Anderson, C. A. (1982) The prototype of a lonely person. In L. A. Peplau & D. Perlman (Eds.), Loneliness: A sourcebook of current theory, research, and therapy. New York: Wiley.
- Jones, W. H. Loneliness and social behavior. (1982) In L. A. Peplau & D. Perlman (Eds.), Loneliness: A sourcebook of current theory, research, and therapy. New York: Wiley.
- Jones, W. H., Freeman, J. E., & Goswick, R. A. (1981) The persistence of loneliness: Self and other determinants. Journal of Personality, 49, 27-48.
- Jones, W. H., Hobbs, S. A., & Hockenbury, D. (1982) Loneliness and social skill deficits. Journal of Personality and Social Psychology, 42, 682-689.
- Larson, R., Csikszentmihalyi, M., & Graef, R. (1982) Time alone in daily experience: Loneliness or renewal? In L. A. Peplau & D. Perlman (Eds.), Loneliness: A sourcebook of current theory, research, and therapy. New York: Wiley.
- Lopata, H. Z., Heinemann, G. D., & Baum, J. (1982) Loneliness: Antecedents and coping strategies in the lives of widows. In L. A. Peplau & D. Perlman (Eds.), Loneliness: A sourcebook of current theory, research, and therapy. New York: Wiley.
- Lynch, J. J. (1976) The broken heart: The medical consequences of loneliness in America. New York: Basic Books.

- McAdams, D. P., Healy, S., & Krause, S. (in press) Social motives and patterns of friendship. Journal of Personality and Social Psychology.
- Monti, P. M., Curran, J. P., Corriveau, D. P., DeLancey, A. L., & Hagerman, S. M. (1980) Effects of social skills training groups and sensitivity training groups with psychiatric patients. Journal of Consulting and Clinical Psychology, 48, 241-248.
- Morelli, R. (1984) Construct validation of a new measure of loneliness. Unpublished doctoral dissertation, Philadelphia, Pennsylvania.
- Primakoff, L. (1980) Patterns of living alone: A cognitive-behavioral ethology. Unpublished doctoral dissertation, University of Texas, Austin, Texas.
- Richardson, F. C., & Tasto, D. L. (1976) Development and factor analysis of a social anxiety inventory. Behavior Therapy, 7, 453-462.
- Rook, K. S., & Peplau, L. A. (1982) Perspectives on helping the lonely. In L. A. Peplau & D. Perlman (Eds.), Loneliness: A sourcebook of current theory, research, and therapy. New York: Wiley.
- Rubenstein, C. M., & Shaver, P. (1982) The experience of loneliness. In L. A. Peplau & D. Perlman (Eds.), Loneliness: A sourcebook of current theory, research, and therapy. New York: Wiley.
- Russell, D. (1982) The measurement of loneliness. In L. A. Peplau & D. Perlman (Eds.), Loneliness: A sourcebook of current theory, research, and therapy. New York: Wiley.
- Russell, D., Peplau, L. A., & Cutrona, C. E. (1980) The revised UCLA Loneliness Scale: Concurrent and discriminant validity evidence. Journal of Personality and Social Psychology, 39, 472-480.
- Slater, P. (1970) The pursuit of loneliness: American culture at the breaking point. Boston: Beacon Press.
- Solano, C. H., Batten, P. G., & Parish, E. A. (1982) Loneliness and patterns of self-disclosure. Journal of Personality and Social Psychology, 43, 524-531.
- Suedfeld, P. (1982) Aloneness as a healing experience. In L. A. Peplau & D. Perlman (Eds.), Loneliness: A sourcebook of current theory, research, and therapy. New York: Wiley.
- Sullivan, H. S. (1953) The interpersonal theory of psychiatry. New York: Norton.

- Weiss, R. S. (1973) Loneliness: The experience of emotional and social isolation. Cambridge, Mass.: MIT Press.
- Weissman, A. N. (1980) Assessing depressogenic attitudes: A validation study. Paper presented at the 51st Annual Meeting of the Eastern Psychological Association, Hartford, Ct.
- Wenz, F. V. (1977) Seasonal suicide attempts and forms of loneliness. Psychological Reports, 40, 807-810.
- Wilbert, J. R., & Rupert, P. A. (in press) Dysfunctional attitudes, depression, and loneliness among college students. Cognitive Therapy and Research.
- Young, J. E. (1982) Loneliness, depression, and cognitive therapy: Theory and application. In L. A. Peplau & D. Perlman (Eds.), Loneliness: A sourcebook of current theory, research, and therapy. New York: Wiley.
- Young, J. E. (1981) Young loneliness inventories. Unpublished manuscript, University of Pennsylvania.

APPENDIX A

GENERAL INFORMATION QUESTIONNAIRE

1. Date of Birth_____ Where were you born?_____
2. Sex: _____Male _____Female
3. Race: _____White _____Black _____Hispanic _____Oriental
_____American Indian _____Other (Specify_____)
4. Religion: _____Catholic _____Protestant _____Jewish _____None
_____Other (Specify_____)

How active are you in this religion?

1 2 3 4 5 6 7

Not at all

Very much

5. Marital status: _____Single _____Married _____Divorced
_____Widowed _____Remarried _____Separated
6. Parents' marital status: _____Married _____Divorced
_____Separated _____One deceased _____Both Deceased
7. Indicate your living arrangement:
_____On campus dormitory or apartment
_____Off campus apartment
_____Off campus with parents
_____Other (Specify_____)
8. If you are unmarried, how many dates have you had with a member of
the opposite sex in the past two months?_____
9. Are you presently romantically involved with anyone?_____Yes_____No
If yes, how long has this relationship existed?_____
10. How many very close friends do you have? (That is, someone with

whom you interact regularly and who knows you very well)_____

11. How many additional people so you know whom you would classify as a friend? (That is, someone you interact with on a fairly regular basis who you would not classify as a close friend)_____

12. How many additional people do you know who you would classify as a casual acquaintance? (That is, someone you interact with infrequently and know well enough to speak to when you run into them)_____

13. How satisfied are you presently with your romantic involvement(s)?

1 2 3 4 5 6 7

Not at all

Very much

14. How satisfied are you with your social life in general (friendships, personal relationships), excluding romantic involvements?

1 2 3 4 5 6 7

Not at all

Very much

APPENDIX B

ITEM FACTOR LOADINGS FOR YLDR

<u>Item</u>	<u>Factor1</u>	<u>Factor2</u>	<u>Factor3</u>	<u>Factor4</u>	<u>Factor5</u>	<u>Factor6</u>
1	35	03	15	13	06	04
2	45	49	00	04	-07	02
3	60	14	04	19	08	07
4	22	12	07	69	21	-11
5	31	62	03	02	22	01
6	51	16	05	03	17	29
7	26	34	-04	13	06	52
8	04	06	-04	02	43	15
9	30	37	12	08	-02	-02
10	-03	-03	-07	-02	-04	-02
11	14	07	06	06	03	05
12	19	13	-01	78	16	13
13	24	61	-11	-02	13	-02
14	57	22	02	04	08	09
15	32	15	07	05	-10	54
16	07	03	01	08	52	03
17	14	54	00	14	22	05
18	66	06	16	11	06	12
19	07	37	12	01	16	14
20	20	00	15	16	07	15
21	00	15	19	59	11	06
22	12	54	23	11	10	29

<u>Item</u>	<u>Factor1</u>	<u>Factor2</u>	<u>Factor3</u>	<u>Factor4</u>	<u>Factor5</u>	<u>Factor6</u>
23	76	06	03	15	03	15
24	31	23	30	16	10	06
25	00	19	11	08	53	04
26	54	05	-01	04	32	08
27	13	23	-02	01	21	18
28	71	06	10	09	-05	03
29	41	32	21	14	09	-28
30	08	52	00	09	10	14
31	26	08	-02	56	24	14
32	03	09	06	03	-03	09
33	-20	-01	-03	01	-07	-01
34	41	12	32	04	05	47
35	23	-01	44	16	25	31
36	17	06	33	11	08	33
37	23	15	54	11	07	01
38	02	46	21	-03	17	24
39	-08	04	15	17	73	-12
40	48	18	46	10	-03	04
41	03	29	32	14	21	33
42	11	06	18	71	00	00
43	19	18	06	31	61	00
44	23	19	28	00	35	-01

<u>Item</u>	<u>Factor1</u>	<u>Factor2</u>	<u>Factor3</u>	<u>Factor4</u>	<u>Factor5</u>	<u>Factor6</u>
45	32	40	09	12	04	06
46	70	23	16	16	07	02
47	28	-06	-05	15	36	08
48	56	06	19	17	12	20
49	12	22	09	07	48	07
50	36	29	37	11	06	-26
51	13	06	56	12	18	07
52	06	67	19	26	07	-06
53	38	38	11	05	06	09

Note: Decimal points have been omitted.

Factor Structure:

- I. Social Anxiety and Low Social Self-Esteem
#1, 3, 6, 14, 18, 23, 24, 26, 28, 29, 33, 40, 46, 48
- II. Problems Finding Partners and Fear of Intimate Rejection
#2, 5, 9, 13, 17, 19, 22, 27, 30, 38, 45, 52, 53
- III. Fear of Social Rejection and Evaluation
#11, 35, 36, 37, 41, 44, 50, 51
- IV. Social Life Hindered By Academic Responsibilities
#4, 12, 21, 31, 42
- V. Hostile Attitudes Towards Others
#8, 16, 25, 39, 43, 47, 49
- VI. Motivation for Treatment
#7, 15, 34

APPENDIX C

SELF-HELP QUESTIONNAIRE

Loneliness can be defined as distress over a lack of satisfying interpersonal relationships. We know from research that many college students feel lonely, especially at the beginning of a new school year. We are interested in finding out what students usually do to cope with loneliness. Listed below are a variety of strategies that students might use to make themselves feel less lonely. For each strategy, we would like for you to (1) rate how often (if at all) you have used this strategy this semester, and (2) rate how effective this strategy has been for you this semester in dealing with feelings of loneliness. If you are one of the few students who has rarely felt lonely, please use this questionnaire to report on what strategies you feel have helped keep you happy with your interpersonal relationships.

For the rating of how often you have used each strategy, use this scale: 1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Often, 5 = Very Frequently.

For the effectiveness rating for each strategy, use this scale: 1 = Not at all effective, 2 = Slightly effective, 3 = Moderately effective, 4 = Very effective, 5 = Almost always effective. For a strategy that you have never used, skip the effectiveness rating.

For each strategy, place one number for the "how often" rating in the first blank, and one number for the "effectiveness" rating in the second blank.

- | How
Often? | How
Effective? | |
|---------------|-------------------|---|
| _____ | _____ | 1. Tried harder to be friendly to other people (such as making an effort to talk to people in your classes, etc.) |
| _____ | _____ | 2. Thought about things you could do to overcome your loneliness |
| _____ | _____ | 3. Took your mind off feeling lonely through some mental activity (such as reading a novel, watching TV, going to a movie, etc.) |
| _____ | _____ | 4. Reminded yourself that you actually do have good relationships |
| _____ | _____ | 5. Worked particularly hard to succeed at some activity (such as studying extra hard for an exam, pushing yourself on some skill, etc.) |

- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
- _____ _____
6. Tried to figure out why you were lonely
 7. Did something helpful for someone else (such as helping a classmate with homework, volunteering, etc.)
 8. Thought about good qualities that you possess (such as being warm, intelligent, sensitive, etc.)
 9. Did something you are very good at (schoolwork, athletics, artwork, etc.)
 10. Told yourself that your loneliness would not last forever, that things would get better
 11. Took your mind off feeling lonely through some physical activity (e.g., jogging, shopping, washing the car, etc.)
 12. Thought about things you can do extremely well
 13. Tried to find new ways to meet people (such as joining a club, moving into a dorm, going to a dance, etc.)
 14. Told yourself that most people are lonely at one time or another
 15. Did something to make yourself more physically attractive (such as went on a diet, bought new clothes, changed hairstyle, etc.)
 16. Took your mind off feeling lonely by deliberately thinking about other things
 17. Did something to improve your social skills (such as learning to dance, learning to be more assertive, etc.)
 18. Told yourself that you were overreacting, that you shouldn't be so upset
 19. Talked to a friend or relative about ways to overcome your loneliness

- _____ _____ 20. Thought about the possible benefits of your experience of loneliness (such as telling yourself that you were learning to be more self-reliant, that you would grow from the experience, etc.)
- _____ _____ 21. Took your mind off feeling lonely by using drugs or alcohol
- _____ _____ 22. Changed your goals for social relationships (such as telling yourself that it is not that important to be popular, that at this point in your life it's all right not to have a boyfriend or girlfriend, etc.)
- _____ _____ 23. Talked to a counselor or therapist about ways to overcome your loneliness
-

Factor Structure:

- I. Challenging Negative Attitudes
#4, 6, 10, 14, 20
- II. Accentuation of Positive Behaviors and Characteristics
#1, 5, 7, 8, 9, 12, 13, 15, 17
- III. Distracting Activities
#2, 3, 11, 16, 21, 22

APPENDIX D

YOUNG LONELINESS DIAGNOSTIC SCALE - REVISED

Please indicate how strongly you believe each of the statements below using this scale:

1 = Disagree Strongly

2 = Tend to Disagree

3 = Neutral, Uncertain

4 = Tend to Agree

5 = Agree Strongly

Place one of these numbers on the line to the left of each statement.

____ 1. Other people would reject me if they knew my weaknesses.

____ 2. I'm having a very difficult time finding ways and places to meet potential partners.

____ 3. I'm much more shy than average.

____ 4. The amount of schoolwork I have forces me to be antisocial.

____ 5. Much of the time the quality of my relationships does not meet my expectations.

____ 6. There are deficits in my basic personality that keep me from making and keeping friendships.

____ 7. If there was counseling available to help me improve my relationships, I'd eagerly take part in it.

____ 8. Most people aren't worth the time I spend talking to them.

____ 9. I have difficulty telling partners about problems in the relationship because I am afraid of how they will react.

- ____ 10. I enjoy the time I spend alone.
- ____ 11. If other people knew my private thoughts and feelings, they either would not understand me or would respect me less.
- ____ 12. I have to spend so much time studying that I have little time left over to enjoy friends.
- ____ 13. My needs are not adequately met in most of my relationships.
- ____ 14. I can only blame myself for my poor social life.
- ____ 15. I've often thought about seeking help to improve my ability to relate with other people.
- ____ 16. Most people are mean and nasty beneath their outward appearances.
- ____ 17. The men/women I want to become intimately involved with almost always end up hurting me or rejecting me.
- ____ 18. I'm very nervous around other people.
- ____ 19. I often reach a point in relationships when I feel trapped and have to end it.
- ____ 20. I feel sad when I'm alone.
- ____ 21. If I were able to study less and still get good grades, I'd have a more satisfying social life.
- ____ 22. I've been looking for that one ideal relationship for some time now.
- ____ 23. I just don't know how to make friends very well.
- ____ 24. There are things I would change about myself if I knew how.
- ____ 25. Most people will use you for their own benefit if you let them.
- ____ 26. Other people don't seem to like me.

- ___ 27. Someone I was very close to rejected me and I keep thinking about it.
- ___ 28. I'm more dull and boring to be with than most people.
- ___ 29. I would much rather keep personal things to myself, because other people wouldn't understand.
- ___ 30. I often wonder whether the independence I have to give up in an intimate relationship is worth it.
- ___ 31. It's hard to make friends because my classes are so demanding.
- ___ 32. I guess I expect a lot from my friends.
- ___ 33. I'm as desirable to the opposite sex as most people.
- ___ 34. I think I could really benefit from some type of counseling or psychotherapy.
- ___ 35. I don't let my guard down around others because they will take advantage of my weaknesses.
- ___ 36. I can't seem to cope with problems as well when I'm alone.
- ___ 37. I'm very self-conscious about how I'm coming across when I'm with people I don't know very well.
- ___ 38. I'm reluctant to get involved with someone because I don't want to be hurt again.
- ___ 39. You have to be careful because many people have a big cruel streak in them.
- ___ 40. I worry that I will embarrass myself around other people.
- ___ 41. I fall apart when intimate partners criticize me or get angry with me.
- ___ 42. Right now, I don't like how much of my social life I have to

give up because of schoolwork.

____ 43. Most of my acquaintances do a lot of things I'd rather they didn't.

____ 44. I have difficulty trusting other people enough to get close to them.

____ 45. Based on my past experience I'm afraid that I'd screw up almost any intimate relationship.

____ 46. Knowing that I can't make friends easily really gets me down.

____ 47. Most of the people I come in contact with aren't very friendly.

____ 48. I wish I could learn how to make friends as easily as some people do.

____ 49. I tend to be nasty to other people because they are usually nasty to me.

____ 50. I have a fear of discussing private thoughts and feelings with other people.

____ 51. When I meet new people, I often feel they are evaluating me while we're talking.

____ 52. I can never seem to get what I want once I'm involved in intimate relationships.

____ 53. My life has little meaning now because I don't have a special person to share it with.

Factor Structure:

I. Social Anxiety and Low Social Self-Esteem

#1, 3, 6, 14, 18, 23, 24, 26, 28, 29, 33, 40, 46, 48

- II. Problems Finding Partners and Fear of Intimate Rejection
#2, 5, 9, 13, 17, 19, 22, 27, 30, 38, 45, 52, 53
- III. Fear of Social Rejection and Evaluation
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- IV. Social Life Hindered By Academic Responsibilities
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- V. Hostile Attitudes Towards Others
#8, 16, 25, 39, 43, 47, 49
- VI. Motivation for Treatment
#7, 15, 34

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The dissertation is therefore accepted in partial fulfillment of the requirements for the degree Doctor of Philosophy.

June 27, 1985

Date

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