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# USE OF SHYNESS AS A SELF-HANDICAPPING DEVICE AS A FUNCTION OF ATTITUDES TOWARD SHYNESS

by

Anna M. Heiberger

A Thesis Submitted to the Faculty of the Graduate School

of Loyola University Chicago in Partial Fulfillment

of the Requirements for the Degree of

Master of Arts

January

1992

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ACKNOWLEDGMENTS

I would like to thank Dr. James Johnson for the assistance, support, and guidance that he gave me on this project. I would also like to thank Dr. Thomas Petzel for his time and input.

## VITA

The author, Anna M. Heiberger, is the daughter of John Heiberger and April Heiberger. She was born June 11, 1965, in Naperville, Illinois.

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# CHAPTER I

## INTRODUCTION

The main purpose of this study is to explore the relationship between attitudes toward shyness (social anxiety) and the likelihood that shyness may be used as a self protective excuse (self-handicapping device). Self-handicapping is a self-invoked impediment to performance in evaluative settings which provides an excuse for possible negative personal outcomes. Shyness may serve as such an excuse for an inability to cope with social situations. Shyness may be a reasonable self-handicapping strategy since it is acknowledged as affecting social performance and is often seen as an acceptable excuse to avoid stressful social encounters. It is hypothesized that those who view shyness positively will be more likely to use it as a self-handicapping strategy when there is a threat of evaluation, and they are unsure of their performance, than will those who view shyness more negatively. In many cases it may be more appealing to be labeled as shy in comparison to other labels such as unintelligent, unattractive, etc. Use of a positively evaluated trait allows people to preserve their

self-esteem. Shyness would appear to be a particularly viable and appealing excuse for anticipated possible failure when a person views shyness as a socially acceptable and perhaps even attractive trait. Hopefully a fuller picture of shyness which broadens the understanding of both the positive and negative sides to this trait will be derived from this research.

This research could lead to a further understanding of the many factors that contribute to the cause and maintenance of social anxiety. Thus, it could have useful implications in the planning of clinical interventions for shyness.

## CHAPTER II

## REVIEW OF THE RELATED LITERATURE

For many people, a feeling of uncertainty, apprehension, and awkwardness in interpersonal situations is a common problem. There are indications by surveys that nearly 90 percent of Americans report feeling shy occasionally, and 50 percent report that shyness is a significant problem for them (Zimbardo, 1977). The frequency of shyness varies from culture to culture, but no group has been found where fewer than 25 percent of people call themselves shy (Zimbardo, 1977).

Shyness is a rather hazy concept which is difficult to define since it means different things to different people and affects people in various ways. Briggs, Cheek, and Jones (1986) describe it as excessive and nervous attention to the self in social settings resulting in timid and often inappropriate overt behaviors as well as emotional and cognitive distress. Zimbardo (1977) refers to shyness as being afraid of people. In addition there is some confusion in the literature because social anxiety and shyness are many times used interchangeably. Shyness can be looked at in two ways: as the affective or cognitive experience

marked by apprehension and nervousness in interpersonal situations (Zimbardo, 1977), and as the behavioral aspect demonstrated by inhibition, reticence, and social avoidance (Pilkonis, 1977). An individual may or may not experience both components of shyness. In fact, the correlation between the affective and behavioral components of shyness is low to moderate (Leary, 1983). Leary (1986) defines shyness as an affective-behavioral syndrome characterized by social anxiety and interpersonal inhibition that results from the prospect or presence of interpersonal evaluation. Leary (1986) presents four possible and not necessarily mutually exclusive explanations of the relationship between social anxiety and behavior: 1) subjective anxiety is an aversive experience and serves as a punishment for social interaction; 2) self-preoccupation that exists in social anxiety interferes with responses; 3) social avoidance and/or inhibition is a self-presentational strategy; 4) social anxiety is preceded by inhibition. Either the component of anxiety or inhibition may elicit or strengthen the other in a devastating cycle.

However one defines shyness, it can be a mental handicap which is very debilitating and can result in much suffering. For example, shyness can play a role in many negative outcomes such as low self-esteem, sexual problems, pervasive loneliness, and a failure to act in assertive ways even when appropriate. Zimbardo (1977) suggests some

further consequences of being shy: it can make it difficult to meet people or make friends; it can prevent a person from asserting his or her rights, opinions, and values; also it can result in excessive self-preoccupation and self-consciousness. Negative affect such as depression and anxiety often accompanies shyness. Shyness can make it very difficult to think and communicate clearly which may decrease the perception of a person's positive strengths by others. Really, there are a whole range of ways that shyness can affect various individuals. These effects can range from an occasional feeling of awkwardness around certain people to bouts of anxiety which interfere and disrupt a person's life.

Pilkonis (1977) found that there are sex differences in shyness. Shy females are more likely than men to nod and smile, probably from a need to be pleasing. Shy men tend to withdraw and speak less. It is proposed that these gender differences derive from and reflect normative sex roles in society. In the same study, Pilkonis also found shy behavior as more apparent in unstructured, ambiguous situations than in structured settings.

Shyness or social anxiety can be considered either as a state or a trait. Individuals who often and intensely feel social anxiety would be considered to have the trait of social anxiety. Those occasionally experiencing less intense social anxiety would be said to experience a state

of social anxiety. The trait and state socially anxious seem to experience events differently. Highly socially anxious (i.e., trait-anxious) people seem more likely to be concerned with making favorable impressions on people but think they make unfavorable impressions no matter what they do (Leary, 1983). For those experiencing a state of social anxiety, this belief that favorable impressions cannot be made no matter what is done would not be true. The reactions would depend on situational factors and would be isolated to specific instances.

In addition to all of the negative attributes associated with shyness, there is also a positive side. Gough and Thorne (1986) found that both positive and negative personality and behavioral characteristics are endorsed as indicative of shyness. It seems as though a mixture of desirable and undesirable self-views of shyness pulls for a similar mix in the perceptions of those who know the shy person well. In fact some even consider shyness as part of a chosen, preferred life style. According to Zimbardo (1977), between 10 and 20 percent of all those who are shy like being so. This seems to fit with the idea that there are different forms of shyness, some marked by anxiety, fear, and timidity while others emphasize qualities such as self-control, tact, and discretion (Gough & Thorne, 1986). The positive side of shyness seems to be present in these latter forms. Adjectives with favorable connotations

such as "reserved," "cautious," "modest," "unassuming," and "mild" seem to be attributed by many to shyness (Gough & Thorne, 1986; Zimbardo, 1977). Shyness may make people seem discrete and introspective, and they are believed to be less likely to hurt or intimidate others. They also are less likely to be labeled as obnoxious or pretentious. Thus, there appear to be admirable traits associated with shyness.

Gough and Thorne (1986) measured the inner or self-view of the shy person and the reactions of others to shy persons and then related these two measures. It was found that the method by which the attitudes of others toward shyness is measured is crucial. If the measurement is based on fears, anxiety, and doubts of personal worth, observers tend to attribute qualities of weakness, timidity, and lack of energy to shy persons. However if self-descriptions stress more positive characteristics such as patience, forbearance, and self-control, shy persons will be seen as having some favorable qualities such as modesty, self-restraint, taciturnity, and caution. There is a possibility that undesirable qualities usually attributed to shyness may come partially from a negative bias in the assessment of shyness. Shy individuals seem to be perceived and described differently by other people, depending on the associations the other people have had with the shy person. In a first encounter, observers are more influenced by shyness and its behavioral manifestations than by underlying qualities and

subtle differences among shy persons. Shy people seem justified in their worries that they will be less liked on initial meetings than less shy or nonshy individuals and that their favorable qualities may be undervalued.

In order to deal with the negative aspects of shyness, a variety of theoretical approaches have been used to explain the cause of social anxiety as well as to help people overcome it. According to the social skills deficit approach, the shy person is assumed to lack the behavioral skills necessary to cope with social situations (Curran, 1977). Studies show that skills training procedures produce improvement in reported discomfort and skill in nonassertive individuals (Eisler, Hersen, & Miller, 1974) and heterosexually anxious college males (Twentyman & McFall, 1975). These behavioral training programs that emphasize social skills training have been shown to be somewhat effective for reducing social anxiety.

Another approach comes from cognitive theory. This view of social anxiety suggests that maladaptive cognitions are related to feelings of shyness. Shy people's anxiety seems not to come so much from lack of social skills as from their own self-evaluations and thoughts during social interactions (Rehm & Marston, 1968). Research investigating the cognitions of socially anxious people shows that they assume others are evaluative and critical of them. This, however, is not the case with less socially anxious people.

Also, socially anxious people seem to have less confidence in their ability to make good impressions on others in interpersonal settings than do those low in social anxiety. It also seems that socially anxious individuals do not believe that others are making a more favorable impression than they are. Thus socially anxious people seem to see everyone as making poor impressions on others (Leary & Schlenker, 1981). Research has also indicated that socially anxious individuals are self-defeating in their causal attributions concerning both positive and negative outcomes (Teglasi & Hoffman, 1982). Arkin, Appleman, and Burger (1980) found support for the notion that socially anxious individuals tend to make stable, internal attributions for social failures and to attribute social success to external factors. This seems the opposite of the self-serving bias seen in most people where more responsibility is attributed to themselves for positive than negative outcomes. Also, Asendorpf (1987) noted a relationship between social anxiety and concern about poor performance and anticipation of loss or harm to self-esteem.

Incorporating components of both the social skills deficit and cognitive approaches, Schlenker and Leary (1982) developed their self-presentational model of social anxiety. Basically, this model proposes that social anxiety arises when people are motivated to make a good impression on an audience but doubt their ability to do so. In general,

people have outcome expectancies of the probability that their self-presentational goals will be attained. These expectancies are influenced by many factors including the nature of the situation, pertinent audience, and the individual's perceived skills, attributes, and resources. It is proposed that negative affect and withdrawal will occur if one is unable to create the desired impression on the audience. When withdrawal is not possible, the person is trapped in the assessment process. People will then try to use less preferred but more viable alternative self-presentational goals which have higher outcome expectancies. An effort is made to find a feasible alternative explanation for self-presentational difficulties which does not involve important personal dimensions. In this way, they can maintain belief in their social ability and maintain self-esteem.

The use of the opposite of the self serving bias by socially anxious individuals, as mentioned earlier, could be explained as a possible strategy for impression management. For example, if a social situation turns out to be a failure, the individual takes the initiative in criticizing himself or herself and in doing so takes the initiative away from others. In this way the person takes control of the blame. On the other hand, if a social situation is successful, the person will make an external attribution for it because, if credit is taken for the success, other people

may expect the same in future interactions. This reversal of the self-serving bias thus functions in a self protective fashion by lessening the threat to a person's self-presentational goals in the present and future (Schlenker & Leary, 1982).

People who anticipate future self-presentational problems often offer explanations for such difficulties in advance. When more attractive alternative explanations for self-presentational problems are unavailable, the social performance is relevant to a personally important dimension, and uncertainty exists about their standing on the dimension, people are likely to use self-handicapping strategies. In these situations, an individual often attempts to render the causal structure of the situation as ambiguous. The use of self-handicapping often involves the acquisition of impediments to successful performance. Research has shown a diverse group of tactics which can be used in a self-handicapping way.

Jones and Berglas (1978; Berglas & Jones, 1978) were the first to suggest and show self-handicapping tactics and are responsible for naming the process. Self-handicapping is a self-invoked impediment to performance in an evaluative setting. In other words, it is a tendency for an individual to use a self imposed handicap to increase the chance of failure in a situation where the person is concerned about failing even without the handicap. This gives the person an

excuse for a potentially negative outcome or failure (Snyder & Smith, 1986). A more complete definition of self-handicapping is as

> "...a process wherein a person, in response to an anticipated loss of self-esteem resulting from the possibility of inadequate performance in a domain where performance clearly implicates ability or competence, adopts characteristics or behaviors that superficially constitute admission of a problem, weakness, or deficit, but assist the individual in 1)controlling attributions (made by oneself or others) concerning performance so as to discount the self-relevant implications of poor performance, 2)avoiding the threatening evaluative situation entirely, or 3)maintaining existing environmental conditions that maximize positive self-relevant feedback and minimize negative self-relevant feedback." (Snyder & Smith, 1982, p.107).

Self-handicapping behaviors represent strategic attempts to create performance situations where post-performance attributions are made in a self-serving way. The principles of augmentation and discounting seem to be at play here. Discounting involves attributing a failure to some circumstance rather than to low ability. Augmentation is attributing a success to high ability because the success occurred in spite of an impediment. An impediment created by self-handicapping allows the individual to have a convenient excuse ready in case of failure. With a handicap, the individual avoids the possible negative aspects of a performance by taking control of the causal attributions for failure. If failure does occur, it can be attributed to the handicap, in which case the person's lack of ability is discounted as a possible cause. However, if

success results, the implications for the person's level of ability are augmented (Kelly, 1971) because they happen in spite of the obstacle. Self-handicapping may be appealing to many because it creates a no-loss situation for a person's self-esteem.

Actually this notion of self-handicapping strongly resembles Adler's theoretical formulations made earlier in the century. Adler saw symptomatic behavior as a "safeguarding mechanism", meaning a protective strategy in service of the self (DeGree & Snyder, 1985). The symptom gives an excuse, alibi, or extenuating circumstance which protects the esteem of the person. Thus, the need for self-handicapping should occur only when there is an impending threat to a person's self-esteem. Arkin (1981) has identified a "protective self-presentation style" which involves behavior that is derived to avoid social disapproval.

Individuals appear to differ in their use of self-handicapping strategies (Strube, 1986). In particular it has been suggested that males and females may differ in their self-handicapping tendencies. Jones and Rhodewalt (1982) (cited in Strube, 1986) developed the Self-Handicapping Scale (SHS) in order to identify those individuals most and least likely to use self-handicapping strategies. Several studies have found evidence that differences on the SHS are predictive of the use of self-

handicapping strategies. Baumeister and Kahn (1982) (cited in Strube, 1986) found that obese people who score highly on the SHS tend to use their weight as a self-handicap whereas those who have low scores do not. Rhodewalt (1984) found that professional golfers and collegiate swimmers who were high in self-handicapping held back on practice efforts more than low self-handicappers when the future competitions posed a threat to self-esteem. Strube and Roemmele (1985) showed that people low in self-esteem and high in self-handicapping tendencies were especially likely to choose tasks that were not predictive of failure. Strube (1986) found some gender differences using the SHS. Males were more likely to use self-handicapping than females following experimental manipulations. Among males, high self-handicappers reported more extenuating circumstances for performance after they took an exam than did low self-handicappers. In particular, the high self-handicappers endorsed those extenuating circumstances which discounted failure and augmented success. This placed their self-esteem in the most favorable light possible.

Strube (1986) found that the tendency to self-handicap was positively related to public self-consciousness and social anxiety. This could mean that a heightened view of oneself as a social object or anxiousness about the evaluation of others are related to self-reported tendencies to self-handicap. Self-handicapping is not related to

private self-consciousness, so acute awareness of a person's own behavior and attitudes is not related to strategic self-presentation (Strube, 1986). It was discovered that those high in self-handicapping are also lower on extraversion but higher on other-directedness. These traits of high self-handicappers sound similar to some traits of socially anxious individuals. Also, Strube (1986) suggested that self-handicapping is not used solely for self-presentational purposes, and that it seems to be related to low self-regard. This suggestion is consistent with research that considers self-handicapping as necessary only when there is doubt about the possibility of successful performance.

Arkin and Baumgardner (1985) proposed a broader definition of self-handicapping strategies than those definitions considered thus far. They suggested that self-handicaps may be acquired, as in the case of alcohol consumption, or claimed, as with the exaggerated report of physical symptoms. Also, self-handicaps may be internal, for example as in the withdrawal of effort, or external, as with the choice of a performance setting in which the individual is not likely to be evaluated.

Current studies have investigated this idea of the self-protective function of symptomatic behavior. For example, Berglas and Jones (1978) first demonstrated a self-protective function of behavior by showing the self-handicapping effect of drug usage. In this study,

undergraduate students were led to believe that they had done well on an analogies task. Half the subjects had been given relatively easy problems and seemed to think of their performance as due to high ability on these types of tasks. The other half had impossible problems and thought their performance was from lucky guessing and thus thought they would not do well on future problems. Subjects then were requested to choose either a drug that supposedly interfered with intellectual performance or one that enhanced intellectual performance on a task. Only subjects who had gotten a sense of noncontingent success on unsolvable problems chose the performance-inhibiting drug. Thus, the authors held that this drug choice showed a self-handicapping strategy that allowed external attribution for the expected failure on the next trial of the intellectual task.

Kolditz and Arkin (1982) replicated the procedures of Berglas and Jones (1978) but added a condition where the drug choice was made anonymously. In the anonymous condition, the subjects were told that no one would know whether they had chosen the performance enhancing or performance inhibiting drug, including the experimenter. This drug choice was made before the subjects orally answered questions related to analogies. No preference was shown for the performance inhibiting drug by those who had experienced noncontingent success earlier and who were in

the anonymous drug choice condition. Thus the self-handicapping effect disappeared in this condition. This seems to support the idea that the choice to reduce own's control and responsibility for a task comes from concern over what other people will think. In line with this interpretation, Baumgardner and Brownlee (1987) showed that people high in social anxiety, who were more concerned about the evaluation of other people, were more likely to perform poorly on an initial task and thus lower expectations for their future performance than were those low in social anxiety. In this study, subjects high in social anxiety and subjects low in social anxiety were led to believe that an interviewer had either high or low expectations for their performance based on a pretest of analogies. Highly anxious subjects who were led to believe that their initial performance would result in higher expectations showed a worse initial performance compared to those low in social anxiety. It appears that some people, who doubt their ability to perform, may fail strategically at the start of social interactions as a way to create lower, safer standards.

It seems that self-handicapping behavior may be motivated by the wish to avoid admission of one's own weakness to oneself as well as concern for a person's public image. Quattrone and Tversky (1984) demonstrated people's tendency to use self-deception to prevent seeing themselves

in a bad light. When using self-handicapping strategies, people may be avoiding control, at least in part, in order to avoid finding out something about themselves in the case of failure.

Jones and Berglas (1978) propose that both excessive alcohol use and underachievement may be symptoms of the same protective strategy. Both the problem drinker and the underachiever may be afraid of receiving a clear message that they are incompetent. The active use of a self-handicapping device such as alcohol can serve as an excuse for marginal performance without implying incompetence. The self-handicapper is afraid that failure will point to incompetence. Thus, these persons will settle for confounded performance feedback. Self-handicappers, such as the underachiever and the problem drinker, are willing to forego success in order to protect the idea that they have the ability to be successful (Jones & Berglas, 1978).

The concept of self-handicapping was investigated in other areas by various researchers. Smith, Snyder, and Handelsman (1982) reported that students high in test anxiety tend to report their anxiety symptoms in a strategic fashion so as to lessen the implications of possible upcoming poor performance. Test-anxious subjects reported more anxiety when it could be used as a viable excuse for poor performance on an evaluative task than when such anxiety was precluded as a possible excuse. Thus, test

anxiety symptoms seemed to have served a self-protective function. Smith, Snyder, and Perkins (1983) found that hypochondriacal females report illness and symptoms in a strategic way so as to stress the reporting in an evaluative situation in which poor health can be used as an excuse for poor performance. In this situation, the reporting of health problems was greater than in either an evaluative situation where poor health could not be used as an excuse or a nonevaluative setting.

Social anxiety symptoms also appear to be used as a self-handicapping device. In a study by Snyder, Smith, Augelli, and Ingram (1985), shy men reported more symptoms of social anxiety in an evaluative setting in which shyness could serve as an excuse for poor performance than in an evaluative setting in which shyness was precluded as an excuse or than in a nonevaluative setting.

## Statement of the Problem

It has been shown that the social anxiety symptoms of shyness have been used in a self-serving manner as a self-handicapping strategy, at least by some men, despite the fact that social anxiety is in general viewed as a socially undesirable trait (Leary, 1983). Self-handicapping is supposed to help avert loss of self-esteem, not lead to it as would appear to be the consequence of using negative traits for self-handicaps. However some sense may be made of this given that people view shyness in different ways,

some in a less pejorative light than others. It is proposed that shyness is a more appealing excuse to those who focus more on the positive attributes of shyness than those who view it negatively. This makes sense in light of the idea that, in general, people want to present themselves in the best possible fashion. Self-handicapping can involve potential costs to the user's identity since many handicaps have negative connotations (Schlenker & Leary, 1982). It would follow, then, that the use of social anxiety as a self-handicapping strategy would be much less threatening if shyness were viewed as more of a positive trait than if it were viewed as a negative trait. In fact, shyness could be an attractive alternative explanation for anticipated failure.

The present research examined the possibility that attitudes toward shyness (social anxiety) affect the likelihood of using shyness as a self-handicapping device when shyness is a feasible explanation for possible poor performance in a socially evaluative situation. Thus, it was predicted that individuals who viewed shyness in a relatively positive manner would, to a greater degree, report shyness in a strategic manner in response to a social evaluative threat than those individuals who rated shyness more negatively. In particular, it was hypothesized that 1) In the evaluative setting where shyness is a possible excuse, those with a more positive attitude toward

shyness would report more social anxiety symptoms than those with a less positive attitude toward shyness; 2) those with a more positive view of shyness in the evaluative setting where shyness is a possible excuse would report greater symptoms of social anxiety than those with more positive attitudes toward shyness in the evaluative condition where shyness was precluded as an excuse; 3) those with a more positive attitude toward shyness in the evaluative setting where shyness is a possible excuse would report more social anxiety symptoms than those with positive views toward shyness in the nonevaluative control setting.

# CHAPTER III

# METHOD

## Design Overview

Subjects were involved in two sessions which were structured so they would seem to be unrelated to one another. In the first session, all subjects received the same packet of paper and pencil measures and instructions which included a Semantic Differential, to determine attitudes toward shyness, and the true-false form of the Social Anxiety and Distress Scale (SADS). The second session occurred two weeks later when subjects were randomly assigned to one of three experimental conditions based on the instructions in the packet they received. One-third of the packets contained instructions designed to create an expectation of evaluation of one's performance and in which shyness was suggested as a possible excuse for performance; one-third of the packets contained instructions designed to create an expectation of evaluation of one's performance and in which shyness was precluded as an excuse for performance; and one-third contained nonevaluative instructions. These packets contained a "Social Intelligence Test" as the performance measure and a revised form of the SADS.

Subjects

Eighty eight undergraduate psychology students participated in the study. All were volunteer subjects recruited from undergraduate psychology courses at Loyola University of Chicago. They received extra credit toward their grade in the psychology class for participating. Data were analyzed on fifty two female and eighteen male subjects; ten subjects returned incomplete questionnaires, and seven subjects were dropped in order to achieve matching of groups on this measure.

Instruments

Three questionnaires were used in the study. One is a 23 item Semantic Differential (Osgood, Suci, & Tannenbaum, 1957) rating the concept of a "shy person". The Semantic Differential consists of a 15-item evaluation scale (valuable-worthless, reputable-disreputable, honest-dishonest, brave-cowardly, healthy-sick, meaningful-meaningless, clean-dirty, altruistic-egotistic, grateful-ungrateful, unselfish-selfish, innocent-guilty, fair-unfair, good-awful, moral-immoral, and nice-awful); a 4-item potency scale (dominant-submissive, strong-weak, tenacious-yielding, and hard-soft); a 3-item activity scale (fast-slow, dynamic-static, and active-passive); and a 1-item masculinity-femininity scale. The evaluation scale was the only scale of interest in the study, as it was used to determine how positively or negatively each subject viewed the trait of

shyness. The ordinal position of each pair of words and the polar position of the two terms of each item were randomly determined.

Another questionnaire employed was the Social Avoidance and Distress Scale (SADS) (Watson & Friend, 1969). It is a 28-item paper-and-pencil self-report measure, commonly used to evaluate a person's level of social anxiety, it consists of statements which a person endorses as either true or false. Statements are worded both positively and negatively. These responses assess the degree of distress, discomfort, fear, or anxiety that is experienced in social situations as well as the deliberate avoidance of such situations. The SADS is a widely used research measure of social anxiety. The SADS has been found to have adequate internal consistency and test-retest reliability (Watson & Friend, 1969). The SADS also has been demonstrated to have strong criterion and construct validity; Watson and Friend (1969) found the scale predicted social avoidant behavior and social distress and significantly correlated with generalized trait anxiety.

A modified form of the SADS was also used. A 4-point Likert scale was substituted for the true-false response format. This format was used both to mask the relationship of this measure to the SADS that the subjects completed in the first session, and to obtain a more sensitive measure of social anxiety.

Finally, the third measure used was a 15-item task, labeled as a social intelligence questionnaire (See Appendix A). The items are taken from a 30 question social intelligence test from the George Washington University Series (Moss, Hunt, Onwake, & Woodward, 1955). Each item is a scenario of some social situation. Three possible courses of action are suggested as responses to the social situation and one must be chosen by the subject as the most appropriate action. In the original test, there are four possible answers. In order to make the task difficult, the correct answer was deleted from half of the questions and one of the incorrect answers from the other half. This particular test was chosen because the answer is never an obvious choice, even with the correct answer present. Thus the task is so constructed to make it difficult or impossible for the subject to conclude that he or she has been particularly accurate in completing the task.

Procedure

The experiment involved two sessions. In the first session, a packet was given to each student who was interested in participating. A brief set of oral instructions were given. Students were told to complete the questionnaires in the packet privately and in one sitting. The first sheet in the envelope was a form of informed consent, which they considered and signed if they wished to take part in the research. This is the only place in which

the subject's name appeared. On all other sheets, a code number appeared. In counterbalanced order, depending on the envelope, were the SADS (true/false format), and the Semantic Differential for "shy person" as well as for three other constructs. The other constructs ("outgoing person", "yourself", and "ideal self"), besides "shy person", were included for masking purposes. Subjects were asked to return the completed questionnaires within a week.

Two weeks later, the second session of the experiment was administered during class time. Once again, a packet was given to each student wishing to participate. Subjects were not informed that this was part of the same experiment as the first part; in fact they were led to believe that this was totally unrelated to the first experiment. Once again the first sheet was the informed consent which they could consider and sign if they wished to participate. There were three different types of packets, each representing a different condition. The assignment of the subject to one of the three conditions was random depending which packet they received. The three conditions varied according to the set of written instructions and included the evaluative condition with shyness as no effect, the evaluative condition with shyness as a possible excuse, and the nonevaluative or control condition.

Following the informed consent sheet in the packets, the next sheet was either the evaluative or nonevaluative

instructions, giving the reasons for the experiment. The evaluative instructions were intended to set up a condition of social evaluative threat. Subjects in the two evaluative conditions were told that they were participating in a project designed to establish local norms for a widely used test of "social intelligence". Subjects also were told in these instructions that they were taking a two-part test to measure their social intelligence and would later receive feedback. The first half of the test was described as a paper-and-pencil test, and the second half as an "individual role-play test". The exact text of the evaluative instructions follows:

> You are participating in a project designed to develop local norms for a widely used test of "social intelligence". Social intelligence is the ability to accurately perceive and interpret the social behavior of others and the ability to act in the socially appropriate and effective manner. You will be taking a two-part test to measure your social intelligence and you will later receive feedback about your performance. The first half of the test is a paper-and-pencil test and the second half of the test is an individual role-play test. Within a week you will be contacted by the experimenter to set up the role play. The role play will require you to act out a social situation with the experimenter in front of a group. The experimenter and a group of raters will rate your behavior along several dimensions related to social intelligence. You will later receive feedback about your performance on both parts of the test.

The nonevaluative instructions parallel the evaluative instructions but with minimal social-evaluative threat. Subjects were told that they would be participating in the

pilot testing of some materials to be used in a study of social perception. Intelligence or feedback was not mentioned in order to minimize the threat. The nonevaluative instructions follow:

> You will be participating in the pilot testing of some materials to be used in a study of social perception. You will be asked to fill out a two part questionnaire about some social situations.

Next, everyone completed the 15-item ambiguous task labeled as a social intelligence questionnaire. After this, there was a page including one of the three shyness effect instructions. Subjects in the "shyness has no effect" condition received the following instructions that precluded the availability of shyness as a self-handicap:

> That concludes Part One. I'd like you to answer a few more questions. One of the advantages of this social intelligence test, as compared to other tests of social intelligence, is that it is not in any way affected by how shy a person is. Unlike many tests of social intelligence, this test is designed in such a way that regardless of how shy you are, your score is an accurate measure of your social intelligence. In other words, although an individual may feel himself or herself to be shy, this test is still an accurate reflection of social IQ. Much data collected by the test have demonstrated this fact. To add further support documenting this finding with local norms, we are asking individuals to fill out a questionnaire about shyness.

Subjects in the "shyness as a possible excuse" condition received the following instructions that made shyness available as a possible self-handicap:

> That concludes Part One. I'd like you to answer a few more questions. One of the disadvantages of this social intelligence test (as well as some others) is that it is sensitive to a person's level of shyness. That is, sometimes on these tests, a shy person will look less socially intelligent than he or she in fact is. Consequently, the next test that you will take is a measure of shyness. This test will help us to determine the degree to which low scores on the social intelligence test represent true scores versus scores that represent a bias of the test to discriminate against shy people.

Finally subjects in the nonevaluative control condition were simply told the following:

> This concludes Part One. Before we begin Part Two, I would like you to answer a few more questions.

Subjects in all conditions then completed the SADS modified with the 4-point Likert scale response format. This allowed for reporting of finer degrees of social anxiety.

The experimental session was completed when subjects finished the SADS modification and handed in their packets. At this time, they were given a short, written summary of the experiment and questions were answered. A brief verbal debriefing was also delivered. Any questions were answered, and subjects were then thanked and excused from the experiment.

# CHAPTER IV

## RESULTS

Both categorical and correlational analyses were performed on the data. First the categorical analyses will be described. Initially, subjects were divided into two groups in terms of their attitude toward shyness. This was done by performing a median split based on the Semantic Differential scores of shyness. All scores below the median (median=81.65) were designated as low scores and those above the median were considered as high scores.

Preliminary analyses were run to see if the subjects were pre-experimentally matched on attitudes to shyness, as derived from the Semantic Differential, and on shyness itself. Two one-way analyses of variances (ANOVAs) were done, one comparing low Semantic Differential scores for the three instructional groups and one comparing high Semantic Differential scores for the three groups. The three groups did not differ significantly on the low Semantic Differential scores, $F$ (2, 35)= .158, $p$= .855. However the three groups did differ significantly when considering the high Semantic Differential scores, $F$ (2,36)= 8.81, $p$= .001. Thus the three experimental groups were not pre-

experimentally matched on high Semantic Differential scores, reflecting differences on positive attitudes toward shyness. This seemed to be due to several extreme high scores on the Semantic Differential in the evaluative-shyness effect group. When two low scores were dropped from both the evaluative-shyness no effect group and the nonevaluative group and when the three highest scores were dropped from the evaluative-shyness group, the results of the ANOVA became nonsignificant, $F= (2,29)= 2.12$, $p=.138$. The means and standard deviations of scores on the Semantic Differential, by experimental and attitude group, are listed in Table 1.

A one-way ANOVA was performed contrasting the three groups on the first SADS administered. This was to determine if subjects were pre-experimentally matched on shyness. This analysis was nonsignificant, showing the three groups were pre-experimentally matched on shyness, $F$ $(2,71)= 1.57$, $p=.216$.

A 3 X 2 (Experimental Condition X Level of attitude toward shyness) was performed on the data summarized in Table 2. First, it was predicted that those subjects with more positive attitudes toward shyness (those in the high score group on the Semantic Differential) would report a significantly higher degree of social anxiety than those with a less positive view of shyness (those in the low score group on the Semantic Differential), in the condition where

Table 1

Means and Standard Deviations of Scores on the Semantic Differential and Modified SADS by Experimental Condition/ Attitude Group

| | Condition 1* | | Condition 2 | | Condition 3 | |
|---|---|---|---|---|---|---|
| | Low (n=15) | High (n=10) | Low (n=10) | High (n=10) | Low (n=13) | High (n=12) |
| Semantic Differential | | | | | | |
| Mean | 69.53 | 86.80 | 67.90 | 90.90 | 67.76 | 88.58 |
| Standard Deviation | 9.28 | 3.33 | 9.87 | 5.24 | 8.49 | 4.58 |
| SADS | | | | | | |
| Mean | 52.33 | 55.20 | 51.00 | 63.40 | 54.15 | 54.75 |
| Standard Deviation | 10.74 | 11.28 | 4.11 | 20.73 | 17.80 | 11.06 |

* Condition 1 is the evaluative condition in which shyness was precluded as an excuse. Condition 2 is the evaluative condition in which shyness was a possible excuse. Condition 3 is the nonevaluative (control) condition.

.e 2

ns and Standard Deviations of Modified SADS Scores as a Function

ttitudes towards Shyness and Experimental Instructions.

| | Experimental Instructions | | |
|---|---|---|---|
| | Evaluative Shyness As Excuse | Evaluative Shyness No Excuse | Nonevaluative |
| Semantic erential | | | |
| M | 51.00 | 52.33 | 54.15 |
| SD | 4.11 | 10.74 | 17.80 |
| . Semantic erential | | | |
| M | 63.40 | 55.20 | 54.75 |
| SD | 20.73 | 11.28 | 11.06 |

shyness was a possible excuse for performance. Secondly, it was predicted that those with a more positive view of shyness in the evaluative setting where shyness is a possible excuse would report a significantly higher degree of social anxiety than those with a more positive attitude toward shyness in the evaluative condition where shyness is precluded as an excuse. Thirdly, those with a more positive attitude toward shyness in the evaluative condition where shyness is a possible excuse would report a significantly higher degree of social anxiety symptoms than those with positive views toward shyness in the nonevaluative control setting. It would be thus expected that there would be a statistically significant interaction between experimental group and level of attitude toward shyness. Results of the present study failed to detect significant differences in level of social anxiety among experimental groups as a function of level of attitude toward shyness, as reported on the Semantic Differential. There were no significant main effects or interactions found (See Table 3). Thus, the categorical analyses did not provide support for the experimental hypotheses.

In addition, to the categorical analyses, the data were subjected to a correlational analysis using Pearson product-moment correlation coefficients. A correlation between the Semantic Differential and the modified version of the SADS was derived for each of the three experimental

Table 3

Three by Two Analysis of Variance (Instructional Group by Level of Semantic Differential)

| Source | df | MS | F | p |
|---|---|---|---|---|
| Instructional Group | 2 | 111.658 | .488 | .616 |
| Semantic Differential (High/Low) | 1 | 877.198 | 3.834 | .055 |
| Group X Semantic Differntial | 2 | 276.442 | 1.208 | .306 |
| Error | 62 | 228.807 | | |

manipulation groups. These correlations coefficients represent the degree of relationship between attitudes toward shyness and degree of social anxiety reported within each experimental group. In the nonevaluative, control condition there was no significant correlation between these two factors (r= -.025, df= 23, p=NS). In the evaluative condition in which shyness was a possible excuse, there was a significant positive correlation between attitude toward shyness and amount of reported social anxiety (r= .487, df=25, $p<.01$). Finally in the case of the evaluative condition in which shyness was precluded as an excuse, there was a nonsignificant positive correlation (r= .326, df=23, p=NS) between the two variables (See Table 4). These results would support the hypothesis that subjects would use shyness as a self protective excuse when this was offered as a possibility. When there was no threat of evaluation, the relationship between social anxiety symptoms reported and attitude toward shyness was nonexistent.

However, to accept this support unequivocally, it is necessary to determine if there is a significant difference between the positive correlations found between the two factors in the two evaluative conditions. No significant difference was found between the correlation coefficient for the evaluative condition in which shyness is precluded as an excuse and the correlation coefficient for the evaluative condition in which shyness was a possible excuse (Z obs= -

Table 4

Correlation between Attitude toward Shyness (reflected in Semantic Differential score) and the Degree of Social Anxiety Reported (reflected in Modified SADS score)

| | Condition 1 | Condition 2 | Condition 3 |
|---|---|---|---|
| $r$ | .326 | .487 | -.025 |
| N | 25 | 27 | 25 |
| $p$ | NS | $<.01$ | NS |

.675). This indicates the the two conditions do not differ significantly in the magnitude of relationship between attitude toward shyness and amount of social anxiety reported. Thus, there is no support for the hypothesis that those in the evaluative condition in which shyness was offered as possible excuse who endorse more positive attitudes toward shyness would report more symptoms of social anxiety than those in the evaluative condition in which shyness was precluded as an excuse. Also there was not a significant difference between the correlation coefficient in the evaluative, shyness as an excuse condition and the correlation coefficient in the nonevaluative condition.

In sum, the results of both the categorical and correlational analyses failed to support any of the following hypotheses: (1) those subjects with more positive attitudes toward shyness would report more social anxiety than those with less positive attitudes toward shyness; (2) those with a more positive view of shyness in the evaluative situation where shyness is a possible excuse would report more social anxiety than those with a more positive attitude in the condition where shyness is precluded as an excuse; (3) those with more positive shyness attitudes in the evaluative, shyness excuse condition would report more social anxiety than those with positive views in the nonevaluative, control situation.

## CHAPTER V

## DISCUSSION

The results of this study failed to support the hypotheses of the study. There were no significant difference between experimental manipulation groups on amount of social anxiety as a function of attitudes toward shyness. There was no support for the hypothesis that those with more positive views toward shyness would be more likely to report social anxiety as a self-handicap when given the opportunity than those with more negative attitudes toward the trait of shyness. Those within the high Semantic Differential group, reflecting more positive views toward shyness, did not report any greater social anxiety symptoms than those in the low Semantic Differential group, reflecting more negative attitudes toward shyness. Thus, it does not appear that those with positive views of shyness were any more likely to use shyness as a self-handicapping strategy than those with the more negative views. In addition, subjects in the evaluative experimental condition, where shyness was a possible excuse, did not report a significantly greater degree of social anxiety than those in the nonevaluative condition, when collapsed across the two

levels of attitude toward shyness. Also subjects in the evaluative experimental condition in which shyness was a possible excuse did not report a significantly greater amount of social anxiety than those in the evaluative condition where shyness was precluded as an excuse, when collapsed across the two levels of attitudes toward shyness.

There are several possible reasons why this study failed to yield significant results. First of all, the number of subjects was small, especially after subjects were dropped due to incomplete data or extreme scores on the Semantic Differential. Thus, the number of subjects per experimental group condition was small. Statistically a much larger difference between groups is needed to obtain significance if a small number of subjects is involved. Therefore if the number of subjects involved in this study was greater, a smaller difference between groups would be needed for statistical significance. Perhaps different results would be obtained if a larger number of subjects were used.

Another possibility for the present study's findings is that the subjects of this study were primarily female. Of the data analyzed, only 25 percent was yielded by males. Research has demonstrated gender differences in the causes and manifestations of social anxiety (Pilkonis, 1977). Pilkonis (1977) found shy men to be more avoidant or withdrawn when in a threatening evaluative setting. Women,

however, were found to be more passively pleasing and accommodating by nodding and smiling. Also, previous studies have found sex differences in preference for self-handicapping. Stube (1986) found sex differences in the use of self-handicapping, with men being more likely than women to use self-handicapping strategies. Snyder, Smith, Augelli, and Ingram (1985) reported sex differences in the strategic use of shyness. They found that socially anxious men reported more social anxiety in an evaluative situation where shyness could serve as an excuse for poor performance than in a nonevaluative situation or than in an evaluative setting where shyness was not a possible excuse. However this did not hold true for female subjects. Snyder et al. (1985) suggest that socially anxious women tend to exhibit skill deficits but not low self-evaluation. Since the threat of negative evaluation leads to self-handicapping, women may not show as much use of self-handicapping strategies. Neither high or low socially anxious women showed a tendency toward the strategic use of shyness. Women's attitudes toward shyness may not affect their use of it as a self-handicap since they may be unlikely to use such a strategy, in general, regardless of attitude.

Another important issue is that all subjects were undergraduate students. Different results might have been obtained with a different population sample. Undergraduate students may endorse attitudes toward shyness that are more

homogeneous than a random sample of the general population. Thus there may have been less of a difference between those in the group with more positive attitudes toward shyness and those in the group with less positive attitudes toward shyness than in the larger population. This results in the comparison of two attitude groups which in reality may not have been so different. Also undergraduate students may differ in their use of self-handicapping from other samples of the population. They may have other self-handicaps on which they depend when confronted with potential threats to their self-esteem It would likely be useful to conduct further research with a different, more diverse sample of the population and to look at demographic variables such as age, ethnic group, and racial group in order to see if any patterns emerge.

It is also possible that the experimental manipulation did not pose a great enough evaluative threat. Since self-handicapping is a response to threat, this is an important factor. Perhaps the evaluative threat of the Social Intelligence Test and anticipation of a role play were not strong enough to threaten loss of self-esteem. Also the Social Intelligence Test may have been too ambiguous for subjects to assess how they performed. This is possible, though the evaluative threat manipulation of the study was similar to that used by Snyder et al. (1985). Snyder et al. (1985) found that the threat manipulation of a social

intelligence test and anticipated role play were effective since subjects in the two evaluative threat conditions reported more state anxiety than did subjects in the nonevaluative control condition.

Another explanation for the results of the study is that the price for failure on this test may not have been perceived as great. Arkin (1981) identified a "protective self-presentation" which is characterized by behavior to avoid social disapproval. Self-handicapping could be one such kind of behavior. Arkin (1981) suggested that there is more concern over the possibility of disapproval and use of self-handicapping when the possibility of failure is high and the price for failure is substantial. Also some people were found to be more concerned about social evaluation than others (Arkin, 1981). In these cases the cost for failure did not have to be so high for the use of self-handicapping devices. In the present study, it is possible that the possibility of failure did not seem high to the subjects. The study attempted to make the social intelligence test difficult and to make people feel uncertain of their performance by removing the correct responses from the test. Even if the possibility of failure did seem substantial in the evaluative threat conditions, the cost for failure may not have appeared high enough to subjects. Subjects may not have been concerned enough to employ shyness as a self-handicapping device.

Possibly subjects did not see performance on the experimental tasks as relevant to personally important dimensions, and thus there was not enough threat to self-esteem. Performance on the tasks might not have been seen as reflecting ability or competence. Thus without a personally relevant threat to self-esteem, there would have been little need for subjects to employ self-handicapping strategies. Future research would be useful if it used a evaluative threat that might seem more relevant to subjects. For example, instead of an anticipated role play, the subjects could be told they would be observed at some college social function and rated on their skills and interactions.

Schlenker and Leary (1982) discuss how self-handicapping strategies are employed when more attractive alternative explanations for self-presentational problems are not available, yet the social performance is relevant to a personally important dimension and uncertainty exists about status on this dimension. In the present study, even if performance seemed relevant and the evaluative threat produced uncertainty about performance, subjects may have had more attractive alternative explanations available to them. Subjects may have discounted the importance of the social intelligence test and upcoming role play or seen them as irrelevant.

In sum, there are several possible explanations for

the failure of this study to find support for a relationship between people's attitudes toward shyness and the likelihood they will use it as a self-handicapping device. This failure could reflect problems in the procedure of the study or in the subjects used. It is also possible that attitude towards shyness is not a relevant factor in determining if shyness will be employed as a self-handicap. Future research could resolve this issue. It would be useful for further studies to explore this issue by using different subject populations and perhaps different procedures and instruments.

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# APPENDIX

## SOCIAL INTELLIGENCE QUESTIONNAIRE

CODE ________

Directions: Three answers are suggested for each of the following questions. Select the proper answer to the question from the three suggested and write the letter preceding the one you select on the proper answer line at the right.

1. You have been appointed to a position with a large firm. The best way to establish friendly and pleasant relations with your business associates would be to: A) Avoid noticing and correcting the errors they make. B) Always speak well of them to the boss. C) Ask to be allowed to do tasks which you can do better than they can. _____

2. You have an employee who is very efficient but he is continually complaining about the work he has to do. You have noticed that his complaints have a bad effect on the other employees. It would be best to: A) Request the other employees to try to overlook his faults. B) Find out why he has that attitude and try to make an adjustment. C) Let him do most of the planning for his work. _____

3. A man sixty years of age who has been a faithful employee in your business for twenty-five years complained that his work was too heavy. It would be best to: A) Tell him to go back to work or you'll fire him. B) Dismiss him and get a younger man in his place. C) Give him a raise in salary so he won't object to the hard work. _____

4. A business associate who has no authority over you tells you dictatorially to do a thing quite differently from the way you had intended. Which would you do? A) Ignore his directions and do it your own way. B) Tell him that it is none of his business, and that you intend to do your own work your own way. C) Tell him to do the job himself. ____

5. You are visiting a close friend who has been ill for a long time. It would be best to: A) Tell her about what a number of mutual friends are doing. B) Discuss her illness. C) Impress upon her how sorry you are that she is ill. ____

6. A man who has been a traveling salesman for fifteen years decides, under pressure from his family, that he will

of his company. You would expect him to: A) Like the office work because it is restful. B) Seek a position with another firm. C) Be very inefficient in his office work. _____

7. A man invites a woman to go out on a date with him to the movies. On approaching the theater he discovers he has left his wallet at home. It would be best to: A) Try to get tickets on credit by offering to leave his watch as security. B) Try to find some friend from whom he can borrow money. C) Find some plausible excuse and go home to get his money. _____

8. Suppose you have had some experience in selling in a store and have just obtained a new job in a large store. The best way to establish relations with other employees in the department would be to: A) Allow them to make most of the sales for a few days while you observe their methods. B) Try to institute the methods which you have found helpful in your other job. C) Adjust yourself to conditions and accept helpful advice from your fellow employees. _____

9. You wish to ask a favor of an acquaintance whom you do not know very well. The best way to ask him would be to: A) Try to impress upon him that he is the one who will benefit. B) Tell him how greatly he can help you if he does it. C) Offer to do something for him in return. _____

10. Suppose you live in a suburb ten miles from the city. You promise to take a neighbor home in your automobile at 4 o'clock. After he has waited for you from 3 to 4 o'clock you find that you will be detained in the city until 5:30. It would be best to: A) Offer a taxicab for your neighbor. B) Ask him to wait until 5:30. C) Offer to let him drive your car home or get someone else to drive it. _____

11. You are an executive and two of your employees do not get along together. Both are efficient people. It would be best to: A) Give them something to work on together in which both are interested. B) Try to impress upon them the harm they are doing themselves. C) Keep both but give them different things to work on. _____

12. An acquaintance is conversing with you about his hobby. The conversation bores you. It would be best to: A) Listen with a polite but bored attention. B) Listen with faked interest. C) Look at your watch impatiently. _____

13. Assume you are a teacher of a third grade and while going to school after the first snow of the winter some of your pupils throw snowballs at you. From the standpoint of

good school management you should: A) Punish them then and there for not treating you with the proper respect. B) Report them to their parents. C) Take it as a joke and say nothing about it. _____

14. A fellow employee loafs on the job so that you must do more than your share of the work. The best way to keep pleasant relations is to: A) Courteously inform the other person that he or she must do his or her share of the work or you will tell the boss. B) Do as much work as you can efficiently and say nothing about the other employee. C) Do your share of the work and leave the rest undone if the other worker does not do it. _____

15. You meet an older person on the street, who is a slight acquaintance, whose eyes show evidence of crying. It would be best to: A) Ask the person why they are sad. B) Appear not to notice the distress. C) Appear not to see her at all. _____

APPROVAL SHEET

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The final copies have been examined by the director of the thesis and the signature which appears below verifies the fact that any necessary changes have been incorporated and that the thesis is now given final approval by the Committee with reference to content and form.

The thesis is therefore accepted in partial fulfillment of the requirements for the degree of Master of Arts in Clinical Psychology.

2-12-91

Date

Director's Signature