

DEVELOPMENT AND VALIDATION
OF MEASURES OF SELF- AND
OTHER-BLAMING PERSONALITY TENDENCIES

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Abstract

Conventional clinical wisdom maintains that people vary with respect to their tendencies to make self- and/or other-blame judgments in response to negative life events. The theories that have been developed to explain this variability, however, are currently limited by a number of theoretical and methodological difficulties. First, some inferential theories have minimized the influences of cross-situational consistencies in blaming judgments. Second, others have attended to this source of variability but have not developed adequate personality measures of blaming tendencies. Third, dynamic and interpersonal theories have implicitly assumed consistency of blame reactions but have not assessed these tendencies independent of other internally- or externally-directed hostile behaviour and affects.

In this dissertation a sanctioning theory of blame (Wollert, Heinrich, Wood, and Werner, 1983) is discussed as an alternative to social inference and dynamic/interpersonal theories. A model of the operation of sanctions of self- and other-blame following negative events is introduced. It is then argued that before this model can adequately be tested, measures of blaming tendencies must be developed.

Three studies are reported in which measures of blaming tendencies were developed and validated. In the first study, homogeneous scales of self- and other-blame were selected from pools of statements representing these domains. The items were included in the scales based on high correlation with their own domain and lack of correlation with other domains. In the second study, convergent and discriminant validity of the self- and other-blame scales were demonstrated by comparing the responses of a group of psychiatric patients to the ratings of their therapists. In the third study, applicants for admission to a professional school completed the blame scales, along with several other measures, prior to receiving notification of the outcome of their applications and immediately following this notification. Hypotheses were tested regarding the predictability of blame, causal attributions, hostility, and mood. Although some predictions of sanctioning theory regarding mood reactions were not met, further support for the validity of the self- and other-blame scales was obtained from this study.

The results of the three studies are discussed in the light of sanctioning theory. It is argued that the development of these self- and other-blame scales using psychometric methods provides a sound basis for future tests of the theory.

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Chapter 1

1.1 General Introduction

Philosophers and psychologists have long been interested in processes that lead people to assign blame to objects. Blame has been related to mood reactions (Wollert, Heinrich, Wood, and Werner, 1983), achievement motivation (Wollert and Rowley, 1987), marital distress (Fincham and Bradbury, 1987), victim derogation (Lerner and Miller, 1978), and reactions to crime (Janoff-Bulman, 1979). Furthermore, blaming personality patterns are thought to be related to the self-defeating interpersonal behaviour which occurs in several personality disorders (Millon, 1981) and to failure reactions (Mittelstaedt and Wollert, 1987). One reason that blame represents a valuable area of psychological inquiry, then, is because of its wide-ranging clinical relevance.

Although the concept of blame is complex, several generalizations about its meaning can be drawn out initially. First, blame implies an overt or covert judgment made by an observer. Second, this judgment is made about an object which can conceptually be distinguished from the observer. This distinction is clearest when one person

blames another. It is also relevant in cases of self-blame, when the self is both the agent and the object of blaming behaviour. A third generalization is that blame occurs in reference to an event or action. In this sense, one cannot generally blame without "blaming someone for something". This is not to imply, of course, that the objects or events being referred to are always appropriate for blame.

Blame, according to Webster's Third New International Dictionary (Meriam-Webster, Incorporated, 1981), means: " a) to express disapproval of; find fault with; b) to attribute responsibility to; make answerable; account for by placing culpability; c) to bring reproach upon; lower abase" (pp. 229). From this definition, it can be seen that in common usage, blame implies an expressed judgment of deservingness of punishment or reproach and that this judgment is related to the ascription of responsibility.

In the psychological literature, blame has been conceptualized from various perspectives. These formulations suggest that blaming involves inferential, behavioural, and affective components. It has been argued, for example, that blame assignment occurs following a "rational" analysis of causation and responsibility (Shaver, 1985). It has also been argued, however, that sanctions of blame are distinct from such analyses in that they involve

covert behaviours that are partially independent of inferential activity (Wollert et al, 1983; Mittelstaedt and Wollert, 1987). Still another perspective, implied in the writings of dynamic and interpersonal theorists (cf. Meissner, 1985; Kiesler, 1986), emphasizes the hostile connotations of blame.

While many have recognized the importance of blame, its complexity has led to definitional problems. Shaver and Drown (1986) have argued that despite the availability of evidence which suggests blame, causal attributions, and responsibility are best viewed as distinct processes, many researchers use these concepts interchangeably. This conceptual confusion has made it difficult to obtain consistent relationships between measures purporting to tap blame-like constructs and other psychological phenomena of interest like depression (Brewin, 1985).

Although some advances in understanding blame have been made, limitations such as these have inspired the curiosity of some researchers and encouraged the formulation of new theories. For example, the lack of consistent demonstrations of the operation of causal attributions in determining mood states, along with the observation that depressed people are in fact very critical of themselves led some researchers to hypothesize that self-blame may not

simply be, as Peterson, Schwartz and Seligman (1981) imply, a particular type of causal attribution (Wollert, et al 1983). Similarly, the finding of distinct factors which represent causal attributions and moral judgments (Harvey and Rule, 1978) led some theorists to speculate that the processes underlying these two forms of judgment are not identical (Fincham and Jaspars, 1980; Shaver, 1985). New perspectives that may be able to resolve some of the past conceptual difficulties are thus emerging (Wollert, 1987; Fincham and Bradbury, 1987).

To fully understand the antecedents and consequences of blame judgments, it is important to attend to "construct validity". If there is a response disposition which explains some of the variability in judgments of blame, for example, an adequate conceptual definition of this variable must be advanced and this definition operationalized. Conventions for construct validation require that measurements of blaming tendencies must then be shown to operate in convergence with similar constructs and independently of irrelevant constructs (Campbell and Fiske, 1959). Additional conventions for establishing criterion validity require that these measures predict the psychological and behavioural phenomena that they purport to assess (Nunnally, 1978). With respect to measures of self- or other-blaming tendencies, criterion validity means that

responses on these measures should predict individuals' judgments of blame across situations.

The focus of this dissertation is on the operationalization of blaming tendencies. In the remainder of the first chapter, the literature pertaining to blame as a psychological construct is reviewed. The review examines three kinds of theories-those that have operationalized blame as (1) an end point of inferential processing, (2) as an instance of hostile behaviour, and, (3) as a negative sanction which individuals overtly or covertly apply to themselves after personal failure or misfortune. A model of the operation of blaming sanctions following unpleasant events is presented and discussed. It is then argued that, although various advantages and disadvantages of these perspectives can be drawn at a conceptual level, empirical evaluations of blame as a personality variable are currently limited by the lack of measures. Finally, some general issues regarding the measurement of blaming tendencies are discussed.

The middle chapters describe three studies in which a measure of blaming tendencies was constructed and validated.

In the final chapter, the theoretical, methodological, and clinical implications of the results of these studies are discussed. In addition to providing evidence for the

psychometric adequacy of the blame measures, the results provide support for considering sanctioning style or blaming tendency as a personality construct.

1.2 Conceptions of blame

1.2.1 Inferential Theories of Blame

The two models which are reviewed here differ in that one, herein labelled the "person as scientist" perspective, is limited to causal analysis, while the other, labelled the "person as judge" perspective, specifies conditions for actor blameworthiness which go beyond causal attributions.

"Person as scientist" theories of blame. In this first inferential perspective, people are characterized as scientists engaged in the activity of establishing causal links between events and actors. The simplest form of these "attributional" blame theories is that attributing causality to an actor for a negative event constitutes blaming (Lerner and Miller, 1978; Janoff-Bulman and Frieze, 1983; Peterson et al, 1981). Focusing on blaming others, Lerner and Miller (1978) reviewed the evidence in favour of the "just world hypothesis" which states that individuals blame victims for their fate to preserve order in their perceptions of the world. The prototypical research demonstrating this phenomenon was carried out by Jones and

Aronson (1973) who used a simulated jury to examine the attributions observers made about the responsibility of victims for the occurrence of rape. Rape victims who were described as more respectable were seen as more at fault than others. This result was interpreted to show that any other perception subjects might have had (ie. that the rape happened randomly) threatened their belief in a just world.

While the just world hypothesis, per se, is not of central interest here, the process leading to victim derogation, which has been understood as a process of inferring conclusions from certain premises, is one popular perspective of blame. Lerner and Miller (1978) suggest the following conditions increase the probability of victim derogation: a) if the victim's suffering is due to his or her character, not behaviour; b) if the victim is of high status; c) if the victim's situation is somehow different than that of the observer's; or d) if the rules of the situation in question are unfair to the victim. According to this view of the blaming process, then, observers take into account information about an actor's behaviour, character, attractiveness, and the situation before inferring that the actor has caused his or her own fate.

While conceptions of blame towards others have called attention to the "rules" of social inference, studies of self-blame have called attention to the effects of this process. For example, a number of writers have argued that internal causal attributions for failure, which have been equated with self-blame, are predictive of depressive symptoms (Weiner, Heckenhausen, Meyer, and Cook, 1972; Weiner, Russell, and Lerman, 1979; Abramson, Seligman, and Teasdale, 1978; Rizley, 1978; Janoff-Bulman, 1979). The core of both Weiner's and Abramson et al's position is the assumption that individuals search for causal explanations when faced with life events. Self-blame occurs when they infer that negative events are self-caused. In the case of achievement behaviour, for example, failure on a test is thought to be caused by the attributor's skill deficit. Both theories emphasize internality and stability of causes. The difference between the two perspectives is that Weiner and his colleagues have emphasized the attributor's perceptions of control of events; Abramson et al have emphasized the perceived generality of the occurrence of the event as a determinant of more pervasive depressive symptoms.

Janoff-Bulman (1979) and Janoff-Bulman and Frieze (1983) combined components from several of these attributional theories in their distinction between

"behavioural" and "characterological" self-blame. Similar to Lerner and Miller's (1978) position, causal attributions for negative events are thought to arise from a need to make sense out of events. These writers also accepted that self-blame is an internal causal attribution for misfortune.

Janoff-Bulman believed that the consequences of inferring that the event was caused by one's behaviour, and thus under one's control, were less devastating than inferring the event was due to one's character, or uncontrollable. This work thus implied that people analyze misfortune with regard to its internal or external causes, subject it to analyses concerning the controllability of causes, and then arrive at an inference which influences self-esteem.

"Person as judge" theories of blame. This more elaborate version of the inferential model draws heavily on legal and philosophical understandings of causes and responsibility. Fincham and Jaspars (1980), for example, proposed the "entailment model" to account for the sequence of inferences that lead to blaming and punishment. Their model essentially asserts that judgments of responsibility determine punishment and these are only partially influenced by judgments of causality. That is, they suggest that, causal judgments are necessary but not sufficient for determination of punishment. Fincham and Jaspars

acknowledge that the model has not been tested adequately. They, in fact, consider that several other relationships between causality, responsibility, and punishment are plausible. For example, they cite work by Lloyd-Bostock (1979) which suggests that blaming may be influential in determining both responsibility and causal judgments.

Shaver's (1985) model for the "attribution" of blame is the most elaborate inferential perspective. At the core of this, also untested, model is the assumption that blameworthiness cannot be determined without the prior determination of causality and responsibility. At the beginning of the inferential sequence that leads to blame, the actor is inferred to represent the sole causal agent, the minimally sufficient subset of possible causes, or the insufficient but necessary cause of an unpleasant event. Following this analysis, an assessment of responsibility is carried out. Responsibility, according to Shaver, reaches beyond causal attribution in that all of the following conditions must be established: a) the actor cannot have been coerced into carrying out his or her role in the event; b) the actor must have had knowledge of consequences of the act; c) the actor intended to carry out the act or event; d) and the actor had appreciation of the moral principles relevant to the event (ie. he or she knew what was "right"). Shaver, though not others (cf. Fincham and Jaspars, 1980),

draws a distinction between responsibility and blame. Shaver's main argument in making this distinction is the availability of excuses which result in alleviation of blame but still maintain the actor's responsibility. The example he gives (Shaver and Drown, 1986) concerns the popular case of politicians who may be willing to accept responsibility for certain events but manage to escape being blamed. Overall, then, these models require even more elaborate inferential activity for the assignment of blame in that they suggest additional steps in the attribution sequence.

Most of the work in this legal model has been directed at understanding blaming of external objects. Shaver and Drown (1986), however, have pointed out that a similar argument about the distinction of causal attribution, responsibility, and blame applies to self-blame. In a critique of some literature that has invoked attributional theories as accounting for victims' reactions to crime and medical conditions, they argue that researchers often assess causal attributions as independent variables, but erroneously explain effects in terms of blame. A similar argument has been advanced by Brewin (1985) who states that the confusion between causal attributions and moral judgments may account for inconsistent results in cognitively-oriented etiological theories of depression.

Several studies have addressed the conceptual distinction between causal attributions and moral responsibility in the laboratory. Harvey and Rule (1978), for example, had subjects rate the protagonists' role on causal and moral dimensions after reading "accident" and "aggression" stories. Using factor analysis, they found distinct factors representing what others (cf. Shaver and Drown, 1986) have interpreted to be causality and moral responsibility.

In another study, Shultz, Schlieffer, and Altman (1981) had subjects rate the causal role, moral responsibility and deservingness of punishment of a protagonist with regard to a victim's death. In addition to asking for these ratings, however, they also introduced subjects to the distinction between causality and moral responsibility. Further manipulations included different information given to subjects regarding the necessity or sufficiency of the action in producing the victimization. As was the case with the Harvey and Rule (1978) findings, distinct judgments were obtained corresponding to causal and responsibility questions. Another relevant finding from their path analysis suggested that punishment was directly related to responsibility judgment but was only related to causal judgments through responsibility.

In conclusion, then, a number of theories have suggested that individuals arrive at a social judgment of blame by following certain inferential rules. These rules, in some "person as scientist" perspectives, are those required for determining the locus of causality, and in other perspectives, they also include inferences about the controllability of the causes. "Person as judge" perspectives, on the other hand, have implied that the determination of responsibility is a distinct process from that employed in inferring causality and controllability. These views suggest attribution of responsibility is a prerequisite for blameworthiness.

The measurement of inferences. Inferential operations have been understood by some to operate mainly in evaluation of each situation separately and they have been understood by others to operate as a response disposition or "inferential style". Assessment strategies, accordingly, have varied as a function of the relative importance researchers ascribe to the enduring and cross-situational qualities of inferences.

For those theorists who make no assumptions about the stability and consistency of blaming, blame is usually considered a dependent variable, occurring as a function of

experimental manipulations (Schultz et al, 1981; Nogami and Streufert, 1983; Shaw and Reitan, 1969) or as result of environmental events (Lerner and Miller, 1978). In studies following from these theories, blame is usually measured using a single rating scale asking the subject to rate how much the actor in a particular vignette is to blame for what happened. Similarly, blame has also been assessed in some research as an independent variable based on subjects' pretask perceptions of hypothetical vignettes (Weiner et al, 1972; Elig and Frieze, 1979; Russell, 1982).

The most psychometrically sophisticated measure of situational attributions, designed to assess causal attributions in accordance with the model proposed by Weiner et al (1979), has been introduced by Russell (1982). Russell's Causal Dimension Scale asks subjects to rate the attributions they make for success and failure situations along dimensions of locus, stability, and controllability of causes. Subjects respond to three items for each of the dimensions. Russell reported that the measure has shown acceptable internal consistency within dimensions and discrimination between dimensions. As well, Russell and McCauley (1986) provided some evidence for the scale's ability to discriminate between affective reactions that individuals predicted they would have in response to hypothetical situations.

One implication of this line of research is that the variance in blame judgments is mostly accounted for by inferential analysis by the perceiver using available information about the situation. There have been no attempts to partition person, situation, and person by situation variance among this group of studies. Equally as important, there are no provisions in these theories for reactions to situations in which information about causes, responsibility, and blame are not available to the perceiver. The blame judgments of individuals who are faced with ambiguity are thus not predictable.

A good example of this conceptual limitation is found in Shaver's (1985) writing. He explicitly states that his theory assumes that the processing is carried out by "the 'ideal' perceiver" (pp. 167). Going a step beyond this statement, it would seem that Shaver considers inferential biases and individual differences to be error variance. The risk of carrying out research in this way is that usually no attempts are made to analyze error variance, ultimately leading to incomplete specification of variables in inferential blame theories. Epstein and O'Brien (1985), in this context, argued forcefully that behaviour is too situationally specific to draw inferences about personality from one sample. At the same time, however, Shaver

acknowledged that work needs to be carried out assessing individual differences variance.

Other investigators have explicitly stated that such processes may be construed as the basis of personality style. Tendencies to explain events as a function of one's character versus behaviour (Janoff-Bulman, 1979) or as a function of internal versus external, stable versus unstable, and general versus specific causes (Peterson and Seligman, 1984) have been assessed. Idiosyncratic responses, called attributional styles, are thought to predispose individuals to certain affective consequences.

Several different measures have been used to operationalize attributional styles. Janoff-Bulman (1979) used a series of rating scales asking depressive and non-depressive subjects how much they would blame themselves and others for the occurrence of four hypothetical negative events. She also asked more detailed questions regarding only self-blame for each situation separately. She reported internal consistency for the composites of self-blame items (.62 to .74) but did not report any stability or validity coefficients for her measures.

A similar problem is evident with studies employing the Attributional Style Questionnaire (ASQ: Peterson, Semmel et

al, 1982). In this measure, respondents are asked to rate the locus, stability, and generality of causes for hypothetical events. Separate composites are computed for items corresponding to the three attributional dimensions. Following Janoff-Bulman's (1979) lead, Peterson et al (1981) also modified the questionnaire so that scores could be interpreted in terms of characterological blame.

The ASQ, however, has not been convincing as an operationalization of attributional styles. In the articles introducing the measure, no construct validity studies were reported (Peterson et al, 1982). Many other studies using the measure have assumed it was valid because of its relationship with measures of depressions (Sweeney, Anderson, and Bailey, 1986). Peterson and Seligman (1984) presented some evidence that depressive attributional styles, as assessed by the ASQ, were related to depressed subjects' statements regarding treatment, analyzed for causal content. While this work supported validity of composites of internal, stable, and global scales, validity for individual scales was equivocal.

Subsequent work designed specifically to assess construct validity of the individual scales suggested that the ASQ did not measure causal attributions in the manner intended by its authors. Cutrona, Russell, and Jones (1985)

and Mittelstaedt, Wollert, and Fischer, (1986) have shown that attributional theory does not provide an adequate factorial model for responses on the ASQ. Additionally, ASQ responses did not predict causal attributions that recent mothers made for distressful birthing experiences (Cutrona et al, 1985). Thus, although claims have been made about the importance of attributional style in understanding clinical phenomena (cf. Sweeney, et al, 1986), the lack of construct validity of the most common measure of this style still raises questions about the relevance of personality to causal attributions.

As a result of the lack of emphasis in operationalizing the concept of attribution styles, two general issues remain unclear about the role of inferences in explaining affect and behaviour. First, it is not clear from the research that inferences such as causal attributions are organized as response dispositions. Although the views of Peterson and Seligman (1984) and Janoff-Bulman (1979) suggest that inferential styles do operate, the undetermined validity of the measures that they have employed does not permit these conclusions. Second, theories regarding the causal role of strictly cognitive variables like attributional styles in determining affective reactions remain open to criticism given the present measurement instruments. Brewin (1985), in this context, pointed out that a requirement for

vulnerability tests of attributional styles and depression which is generally not met is the demonstration that individuals actually attribute the causes for negative events to internal, stable, global causes in a manner that is consistent with their idiosyncratic attributional style. Other criticisms include Zajonc's (1980) controversial paper questioning the primacy of inferences over affect, and Wollert's (1987) observation that mood changes of clients in psychotherapy are often not associated with inferential constructions.

1.2.2 Non-inferential Theories of Blame

In contrast to the conceptualizations discussed so far, some have considered the possibility that blame occurs independent of inferential activities. The non-inferential qualities of blaming are implicit in dynamic/interpersonal formulations of interpersonal hostility (Leary, 1957; Kiesler, 1986; McLemore and Benjamin, 1979, Gleser and Ihilevich, 1969). Others have proposed a theory of blame which is explicitly "non-inferential" (Wollert et al, 1983; Mittelstaedt and Wollert, 1987). The former theories have looked at blaming behaviour in the context of interpersonal relationships and will be reviewed first, followed by a review of the latter "sanctioning theory" which has focused

on the affective consequences of overt and covert blaming.

Dynamic/interpersonal conceptualizations of blame.

Introducing psychodynamic and interpersonal ideas about blaming essentially involves establishing that blame can be viewed as a prototypical hostile behaviour. Hostile behaviour, directed inward or outward, was understood by Anna Freud (1946) to represent a form of defensiveness. As such, psychoanalytic theorists have devised systems of classifying defenses which include "turning against self", "turning against objects", "projection", and "introjection" (see A. Freud, 1946; Haan, 1963; Gleser and Ihilevich, 1969; Meissner, 1985). With respect to interpersonal theory, virtually all systems for classifying interpersonal behaviours have found that hostile behaviours represent the extreme of one dimension of the interpersonal domain. This dimension has been labelled the "love-hate", "friendly-hostile" or the affiliative dimension. Such interpersonal circumplex models consider self-blaming behaviour to operate at the submissive extreme of another orthogonal dimension usually labelled the "dominant-submissive" dimension, or as one of a number of hostile acts which are internally directed (Leary, 1957; Benjamin, 1974).

Interpersonal theorists also assume that significant interpersonal behaviours go on at a covert level. Kiesler

(1986) states that the overt behavioural focus of interpersonal classification systems enhances their psychometric properties but that "...it is also clear that interpersonal diagnosis will remain incomplete and inadequate until it incorporates independent systematic assessments of the covert behavioural domain...which correlate with the various overt styles described by the 1982 Circle" (pg. 580). Thus, hostile behaviours may be carried out publicly or privately.

The relationship between blaming and hostility has not been addressed directly in the dynamic or interpersonal literature. It is no great leap, however, to conceive of blame in these terms. Blame fits well into Zillman's (1979) definition of hostile behaviour: "Any and every activity by which a person seeks to inflict harm other than bodily damage and physical pain upon a person who is motivated to avoid such infliction constitutes hostile behaviour" (pg. 33). Applying this definition to the general components of blame introduced earlier (see pp. 1-2), it can be argued that Zillman's notion of "...any and every activity..." encompasses overt and covert judgments. As well, the idea of "...inflicting harm...upon a person..." corresponds to the reproaching or punishing quality of judgments made of objects by observers when blaming these objects. What is absent from Zillman's definition of hostile behaviour, but

is usually implied with blame, is the reference to an event or action (i.e., blaming someone for something). It can be argued that many theorists consider hostile behaviour to be a more general category which subsumes blame. Thus, while blaming is not necessarily synonymous with hostility, it may be viewed as a subset of hostile responses.

The dimension of projection-introjection has been studied extensively by object relations theorists (e.g., Kernberg, 1970). Projection refers to externalization of need states and tensions while introjection refers to internalization of these states. For example, the mechanism of projection is thought to be operative when an individual reacts to impulses as though they had external origins. Introjection is operative when internal ambivalence about a love object is resolved by assuming characteristics of that object. Although these mechanisms are central to object relations theories of character development generally, it is in the theories of pathological ego and object relations development that projection and introjection are used as explanations of hostile affects and behaviour. In Kernberg's (1970) view, for example, severe character-disordered individuals tend to "split" objects into "good" or "bad" categories and then apply projection and/or introjection to reinforce the boundaries of these categories. Projection and introjection of good objects

results in idealization. Projection or introjection of bad objects result in harsh reproaches and punishment directed externally or internally, respectively.

Internally and externally-directed hostility also occurs in less pathological characters. In contrast to the more severe conditions where the lack of ego integration is thought to result in splitting, Kernberg implicates superego functions which operate in service of a relatively well-integrated ego, as leading to self- or other-punishment. For these disorders, the superego functions to maintain a stable self-concept and representation of external objects. These reproaches, which presumably may take the form of blame, are less likely to be gross distortions of reality than is the case with more severe character disorders. The relevant defenses of the superego include turning against objects, which reduces anxiety by transforming the object of threat into the initiator of threat, and turning against self which has the paradoxical effect of enhancing individuals' self-esteem because their suffering casts them in a more comfortable interpersonal position (Ihilevich and Gleser, 1986; Vaillant and Perry, 1985).

Similarly, interpersonal theorists have extensively discussed the role of anxiety in leading individuals to employ a maladaptively narrow range of interpersonal

behaviours (Leary, 1957; Kiesler, 1982). For example, a person's tendency to respond to a wide range of situations with blaming is understood by these theorists to be as a way of dealing with the anxiety associated with "being friendly in an unfriendly world". As well, self-blaming behaviour may be interpreted as a defense against the imagined consequences of being hostile or blaming toward others.

The most common ground among psychodynamic and interpersonal theorists regarding self- and other-blaming behaviours may be found in various descriptions of personality disorders (American Psychiatric Association, 1980). The DSM-III is not without its weakness, but one agreed upon strength is its attempts to classify personality disorders on the basis of operational criteria many of which are interpersonal behaviours (Widiger and Frances, 1985). Although DSM-III makes no explicit assumptions about the etiology of personality disorders, their presumed causes and consequences have been discussed by others (Millon, 1981, 1986; Vaillant and Perry, 1985). These descriptions of the clinical presentations of personality-disordered patients suggest the relevance of severe blaming tendencies in several diagnostic categories.

Other-blame is implied in the description of the paranoid personality. Mentioned in the criteria are the

"avoidance of accepting blame when warranted" and "readiness to counterattack when any threat is perceived". According to other descriptions of paranoid personality, blaming others is incorporated into a projective defensive style which serves to cover personal inadequacy (Vaillant and Perry, 1985). Under severe stress, paranoid individuals are vulnerable to developing elaborate delusional systems which support their accusations regarding the hostility of others (Millon, 1981). Blaming, however, is only one of many ways in which paranoid disorders manifest themselves.

Similarly, there are implications of perhaps more covert external blaming in clinical descriptions of the passive aggressive personality disorder. Millon (1981) describes the passive aggressive personality as vacillating in an intrapsychic struggle between hostile independence and passivity. Vaillant and Perry (1985) discuss the tendency of these individuals to be engaged in dependent relationships and at the same time consistently find fault with their partners. Restricting their descriptions to the DSM-III criteria for this personality disorder, both Millon and Vaillant and Perry indicate that passive aggressiveness also includes excessive self-blame or turning against self. It is interesting to note that in recent revisions of both Millon's system and of DSM-III there is a new delineation of personality disorders which distinguishes between passive-

aggressive and self-defeating personality (Millon, 1986; American Psychiatric Association, 1987). In terms of blaming behaviour, the former is more characteristic of external blaming and devaluing, while a central feature of the new criteria for the latter is self-blaming.

Self-blaming behaviour also appears in diagnostic descriptions of the dependent personality. These individuals see themselves as incompetent, inadequate, and are quick to doubt themselves and assume that others are more adequate (Vaillant and Perry, 1985). When problems arise, they assume personal blame to avoid the consequences of interpersonal loss that they anticipate will occur for any other stance (Millon, 1981).

Blaming, in the form of projective or introjective defenses occurs, though somewhat less centrally, in other personality disorders. For example, borderline patients characteristically vacillate from extreme externally punitive behaviour and attitudes to extreme self-punitive stances (Kernberg, 1970). In addition, hostile and aggressive outbursts, which presumably include blaming attitudes, occur in narcissistic and antisocial personality disorders (Millon, 1981).

Thus, extreme blaming behaviour, directed internally or externally, is considered a significant diagnostic marker in psychodynamically- and interpersonally-based personality classification systems. Blaming in and of itself does not constitute a pathognomic sign for any of the personality disorders, but it does seem central for several of them. To understand blame as part of these personality disorders, the concepts of pathological object relations, ego development and defense against the anxiety associated with a certain interpersonal stance have been invoked.

Given these views of the role of hostile and submissive behaviours, it is clear that the view of blaming adopted by dynamic and interpersonal theories differs from that proposed by the inferential theories discussed above. Rather than focusing on the perceiver's appraisal of the event which the actor is blamed for, dynamic and interpersonal theories assume that for some people, blaming will be the most probable response to a variety of situations, regardless of its appropriateness. The role of inferences in this formulation of blaming is not seen as influential because the persistence of blaming behaviour has to do with individuals' interpersonal history and not with evaluation of information about causes, responsibility and blame in each situation.

Measurement of hostile behaviour. Interpersonal theorists have placed a great deal of emphasis on measurement. Much of Leary's (1957) work, for example, involved classification of interpersonal behaviours as measured by adjective checklists. Based on the observed patterns of correlation of adjectives used to describe people, Leary hypothesized a circumplex structure of interpersonal behaviour having two underlying orthogonal and bipolar dimensions: friendly-hostile and dominant-submissive. The behaviours found in the two hostile quadrants of Leary's system (sadistic and distrustful personalities) include such terms as "punitiveness", "critical of others", "rebellion and disillusionment with others", all connotative of blaming behaviours. These descriptors also correspond with synonyms given in dictionary definitions of blame (Meriam-Webster, Inc, 1981). In Kiesler's (1986) taxonomy of interpersonal behaviours, blame-like concepts appear as behavioural referents for classifications which correspond to Leary's hostile quadrants. Referents for the "critical-punitive" category at mild level of intensity include "quick to find fault with others" and at the extreme level, "judges others harshly and severely". Leary's system also classifies behaviours for a "masochistic" personality which shows elements of self-blame. Some of the descriptors he employs include "self-abasement", "guilt", and "self-depreciation". None of the

referents in Kiesler's system are as clear exemplars of self-blame.

In another interpersonal behaviour classification system, the Structural Analysis of Social Behaviour (SASB; Benjamin, 1974; McLemore and Benjamin, 1979), blame is coded as one of the behavioural referents on the dimensions which correspond to Leary's hostile and submissive dimensions. Among interpersonal classification systems, the SASB corresponds most closely to the above conceptions of hostility-inward and outward in that it uses separate circumplexes to classify interpersonal behaviours that are directed externally (to others) and internally (to self). Thus, there is a corresponding behavioural referent for self-blame.

In contrast to the psychometric emphasis in interpersonal theory, psychodynamic theorists have, for the most part, validated their ideas about hostility and other defenses with clinical interviews and projective methods. While these methods are valuable for development of comprehensive theories which take into account many factors, they are limited with respect to reliability, thereby decreasing the validity of tests of specific hypotheses. These limitations have led some researchers to develop more structured tests of hostility-directed inward and/or outward

(Blatt, Quinlan, and D'Affliti, 1976; Foulds, 1965; Gottshalk, Gleser, and Springer, 1963; Gleser and Ihilevich, 1969). None of these measures, however, focus specifically on blaming attitudes or behaviour.

Overall, an examination of the specific behaviours that have been considered to be prototypical for hostility and submission strengthens the case that blame is considered a significant interpersonal behaviour. In general, the dynamic and interpersonal frameworks offer comprehensive models for understanding and classifying interpersonal behaviour. Empirically-validated measures have been developed such that hypotheses generated by these models can be tested. Unfortunately, however, the relationship between an interpersonal style such as hostility and a cognitive variable such as causal attributional style has not been addressed.

The difficulty in making the methodological transition from measuring blaming tendencies to measuring hostility can be illustrated using one psychometrically sophisticated measure of internally- and externally-directed hostility, the Defense Mechanisms Inventory (DMI: Gleser and Ihilevich, 1969). The two defensive styles that exemplify externally- and internally-directed hostility are measured by the

"turning against objects" and the "turning against self" scales, respectively.

In a recent compilation of studies addressing the psychometric properties of the DMI, Ihilevich and Gleser (1986) presented evidence for reliability and validity from a variety of perspectives. The measure has demonstrated consistently good reliability in terms of internal consistency and stability. As well, there is some evidence for the validity of its scales. The validity coefficients, however, are only presented in terms of the DMI's relationship to various measures of adjustment. The high correlation between the DMI turning against self scale and depression, a relationship also found with other measures of internally-directed hostility (Blatt et al, 1976; Foulds, 1965), is most likely due to substantial item overlap in measures of depression and internally-directed hostility. While the item overlap may reflect psychological reality with respect to the relationship of hostility-inward and depression, it also implies limits to the interpretations that can be made about the relationship of specific personality factors and depression.

In studies testing the relationship of the DMI scales to other similar constructs, conclusions about validity are less certain. For example, only some of the correlations

between the DMI's "turning against objects" scale and other measures of hostility reach high magnitudes. In addition, there are no studies reported examining the relationships of self- and other-blame to the DMI scales although there are references in the manual about the relevance of these variables to turning against self, turning against others, and projection. Thus although the link has been made in the psychodynamic and interpersonal literature between blaming and hostile tendencies, psychometric studies have not yet studied this relationship.

As a consequence of the lack of research regarding the relationship of blaming and hostility, some contradictory understandings of clinical phenomena have emerged and comparative tests of such contradictions have not been done.

Consider, for example, the difficulties of carrying out a test of the following juxtaposition of attributional and other theories of depression. Attribution theory (Abramson, Seligman, and Teasdale, 1978) predicts that individuals who tend to make external attributions for failure, considered by theorists to be synonymous with other-blame, are likely to be protected from self-esteem deficits. Interpersonal and dynamic theories, on the other hand, explain the plight of some paranoid, passive aggressive, borderline and antisocial individuals as a tendency to blame others for failure, leading to

interpersonal alienation and subsequent loss of self-esteem (Millon and Kotik, 1985). This blaming activity, which occurs concurrently with other hostile behaviour, may characterize a sub-group of depressives who have been identified as "angry depressives" by other researchers (Wollert, 1987; Grinker, Miller, Sabshin, Nunn, and Nunnally, 1961; Overall and Hollister, 1980). Without adequate measures, however, it is difficult to test how blame might actually operate differently for sub-groups of depressives and the relevance of the distinction of "angry" versus "non-angry" depressives may prematurely be discounted.

I have argued that dynamic and interpersonal assessment instruments include content that might be considered synonymous with blame. This content, however, has not been teased out from the more general measures of hostility and therefore they may not offer optimal assessment of blame. Consequently, using the dynamic and interpersonal measures to tap blaming styles introduces an uninterpretable portion of irrelevant variance. In this sense, a specific act like blaming, which has been of central interest to some researchers, is lost in the comprehensiveness of the "grand" dynamic or interpersonal schemes.

Sanctioning theory of blame. A theory of blaming that addresses the limitations of the inferential and dynamic/interpersonal conceptions of blame has been articulated by Wollert and his students (Wollert et al, 1983; Mittelstaedt and Wollert, 1987; Wollert and Rowley, 1987). The central tenet of sanctioning theory is that individuals apply sanctions of credit and/or blame to objects in their perceptual field after positive and/or negative events. Negative sanctions, specifically, are overt or covert derogations or punitive statements which characterize relationships between perceivers and objects and which perceivers are likely to apply to the objects given certain conditions. These relationships exert influences on mood and subsequent cognition. Given a sequence of cognitive activity including perceptions, inferences, and sanctions, followed by a particular mood state, Wollert has argued that sanctions are most likely to affect mood states because they are the most integrated and forceful as potential influences of an individual's self-esteem. Sanctions are more integrated than inferences in the sense that they are less amenable to being changed in the face of contradictory information. They are more forceful in the sense that they are moral judgments rather than implications. In the case of negative sanctions, the judgments are thus inflexible and punitive evaluations of the actor.

An individual who characteristically blames others for failure is likely to suffer low mood indirectly because of the self-esteem deficits associated with interpersonal alienation, and directly because the action of blaming may itself be associatively linked to negative moods. Self-blame affects mood directly because of its harsh assault on self-esteem. Subsequent information processing would be expected to proceed consistent with the initial sanction of blame. This implies that inferences may initially suggest the appropriate objects for sanctioning, but it is also possible that inferences occur post hoc.

A useful distinction to be made here is the distinction between "hot" (emotionally-laden) and "cold" (inferential) cognitive activity (Abelson, 1963). Sanctions are considered in Wollert's theory to represent hot cognitions that involve attack or credit toward the object. Sanctions also conform to the definition of hostile behaviour introduced earlier (Zillman, 1979). Inferences, on the other hand, imply no such reference but rather are described as objective, non-emotional analyses (Shaver, 1985). Inferential processes such as causal attributions are remote in relation to the outputs and may therefore be less predictive of mood. Since causal attributions sometimes

imply the objects for sanctions, they are thought to have some link with mood, but this link may be weak.

Similar to some of the inferential theories discussed above, a distinction is made between causal attributions and blame in sanctioning theory. In certain situations for some individuals, blame judgments may be made in the manner described by the elaborated inferential perspectives (Shaver, 1985; Fincham and Jaspars, 1980). Blame judgments may at times follow an attributional analysis of cause and responsibility. As argued above, however, often the perceiver does not have enough information to make such judgments, and as interpersonal and dynamic theories have argued, some individuals are likely to make harsh judgments of themselves and others regardless of the available situational information. With respect to blame, then, sanctioning styles are hypothesized to operate in at least two different ways: a) people who are only mildly inclined to blame themselves or others will do so only under conditions of situational ambiguity with respect to blame, or; b) people who are strongly inclined to blame themselves or others will do so regardless of situational information and demands.

Sanctioning theory holds that blaming or crediting constitute central features of an individual's structuring

of relationships among objects. This structuring of relationships, like other personality developments, depends heavily on the interaction of a variety of developmental factors including temperament, cognitive development, and social learning and is hypothesized to represent a "response disposition" or basic personality style. That is, in sanctioning theory, predictions are formulated about an individual's likelihood of responding to a wide range of events with blame or credit. Predictions about an individual's actual blaming or crediting behaviour are based on initial observations of sanctioning behaviour on multiple occasions and across diverse situations. The strength of a blaming or negative sanctioning style determines the pervasiveness of the application of negative sanctions to oneself or to others after failure or misfortune.

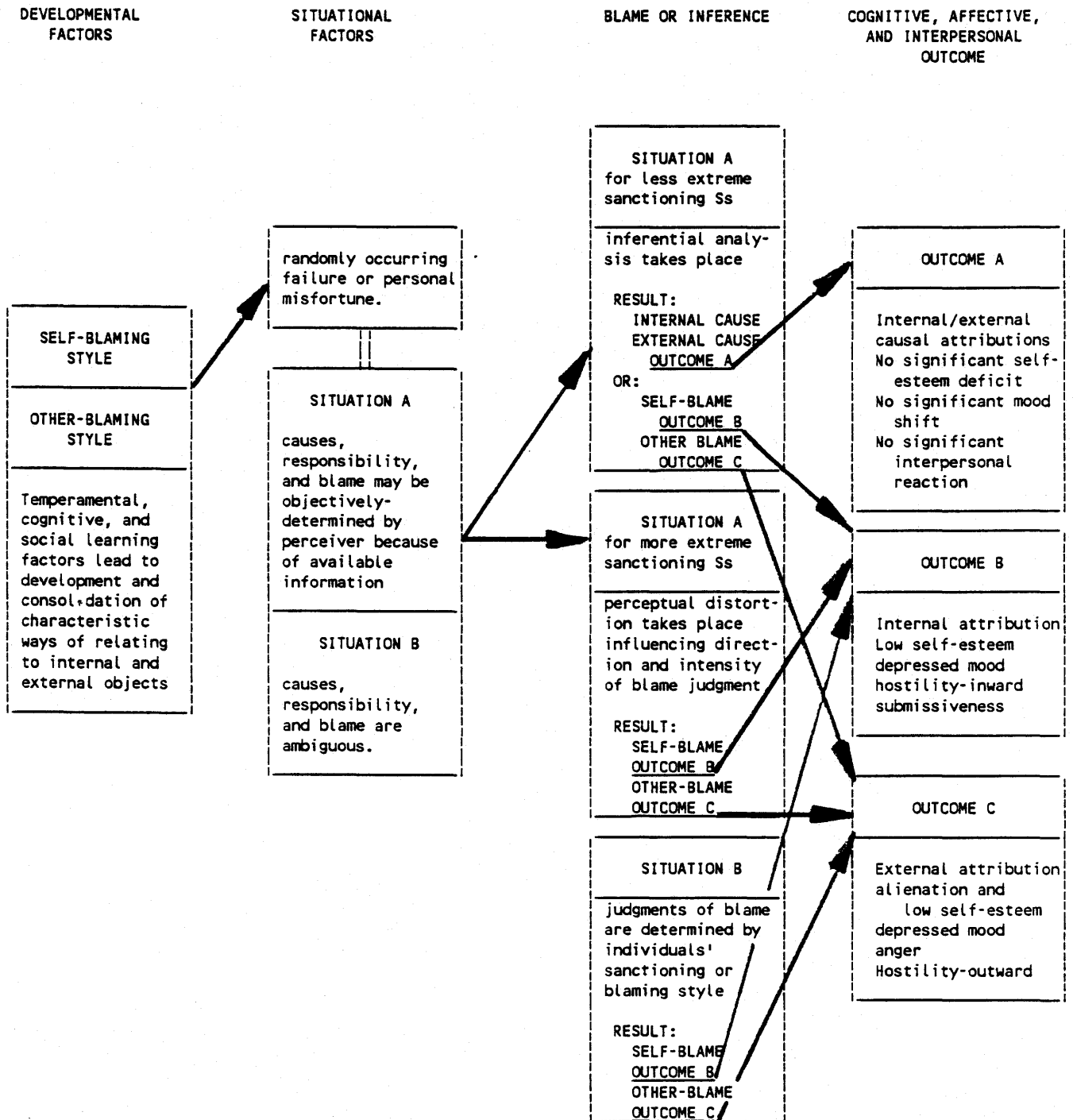
Figure 1-1 illustrates the operation of negative sanctioning styles leading to three different cognitive, affective, and interpersonal outcomes. In the extreme left column, the developmental factors which are hypothesized to lead individuals to relate to objects in a characteristic way are accounted for. In the next column, two failure situations are listed. In the Situation A, the perceiver has information available to assist him/her in making an attributional analysis. In Situation B, this information is not available. The third column describes the application

of sanctions that will follow from the interaction of personality and situational factors. For individuals with a less extreme blaming style, the attributional analysis will take place for Situation A, leading to a conclusion regarding the cause, without blame, of the unpleasant event or, if sufficient information is available, a self- or other-blame judgment. For individuals with extreme blaming tendencies, the attributional analysis is bypassed or distorted in Situation A, and a blame "verdict" is reached which is consistent with their negative sanctioning style. In Situation B, these styles will determine blame judgments for all individuals.

Some hypothesized cognitive, affective and interpersonal consequences of blaming judgments are represented in the fourth column of the model. In outcome A, which is the consequence of "no-blame" judgments, the sequence simply ends with a causal judgment with no concurrent affective or interpersonal consequences. Outcome B refers to hypothetical consequences of self-blame sanctions. As outlined above, individuals are likely to infer that they have caused the misfortune, they are likely to suffer loss of self-esteem, and are likely to be depressed and self-punitive. For Outcome C, the consequences of sanctions of other-blame are explanations of

Figure 1 - 1.

Model of the operation of blaming sanctions.



external causality for the event, interpersonal alienation, low self-esteem, anger at others, and depression.

A brief caveat regarding this model concerns the relative importance of inferential and non-inferential activity. As can be seen, causal inference may occur at two different stages in the sequence. The lack of prediction of mood by inferential activity was discussed earlier as a function of the remoteness of cognitive activity from mood states. According to the model, it may seem that causal inferences in the outcome stage are relatively temporally proximal to the outcome stage, and thus should be more strongly related to moods than are blame judgments. These causal inferences, however, are the explanations, perhaps even rationalizations, that individuals make about the unpleasant events but which are consistent with pre-cognitive blame-judgments made in the third stage. The causal inferences that individuals make about certain situations, like Situation A, lead to mood shifts only if they result in blame judgments.

The measurement of sanctions. Only some of the predictions of sanctioning theory have been tested thus far. In an initial study testing the comparative effects of sanctions and causal attributions on mood (Wollert et al,

1983) subjects rated the degree to which they would take credit or blame for task success or failure, respectively. Sanctions of blame, independent of causal attributions were related to mood shifts. A similar finding was reported in Wollert and Rowley's (1987) naturalistic study concerning the reactions of students to test failure. This study also used rating scales for assessing sanctions for specific situations.

These two studies supported hypotheses regarding the influence of sanctions on mood in specific situations and thereby addressed this aspect of sanctioning theory. There are other predictions of the theory, however, concerning the operation and effects of a stable and cross-situational style of sanctioning. Two studies that have invoked the concept of sanctioning styles have thus far been carried out. Mittelstaedt and Wollert (1987) used the DMI "turning against objects" and "turning against self" scales to operationalize sanctions on the basis of conceptual similarity of these measures to sanctions of blame. They found that both of the scales together accounted for an additional 23% of the variance in posttask mood after the effects of pretask mood were controlled, where subjects received failure feedback for their performance on laboratory tasks. For the reasons described above, namely, that it is difficult to separate the portion of variance due

to sanctioning from that due to other aspects of hostility directed externally and internally, the DMI scales may not provide the best operationalization of blame.

Interpretation of these results as confirmation of sanctioning theory thus remains tempered by measurement concerns.

Wollert (1986) compared the correlations of the Sanctioning Style Questionnaire (SSQ) and the ASQ with the Beck Depression Inventory (BDI: Beck, Ward, Mendelson, Mock, and Erbaugh, 1961). The SSQ asks subjects to report the probability, intensity, duration, revivification, current level, and comparative status of blaming and crediting themselves and others given the occurrence of misfortune and good fortune. The results of this study were promising, indicating again some advantages for sanctions of self-blame over causal attributions in the prediction of BDI scores and suggesting that the measure was tapping, to some extent, the substantive domain of interest. In addition, the high stability coefficients observed in test-retest administration of the SSQ supported the construct of sanctioning styles.

1.2.3 Integration and Conclusions Regarding Theories of Blame

Three different perspectives--inferential, dynamic/interpersonal, and sanctioning--and measures of blame used within these perspectives have been discussed. Inferential theories hypothesize that blame is a particular kind of causal inference made about situations. Inferential styles speak to the tendency of individuals to evaluate situations with a bias toward one kind of causal inferences (e.g. internal attributions for failure). Measurement in most of the studies has concerned evaluation of specific situations. Where concepts of "inferential styles" have been invoked, psychometrically valid measures have not been developed, limiting interpretations about the role of inferences in personality.

Psychodynamic and interpersonal theories have conceived of blame as an instance of hostile or submissive behaviour and functioning as part of individuals' defensive make-up. Accordingly, blaming as a feature of personality is likely to be observed in people whose interpersonal behaviour is dominated by these behaviours. Measures of blame, however, have not been developed from these theories.

Sanctioning theory maintains that blame characterizes the relationships that certain individuals engage in with internal and external objects. The theory suggests that

individuals are likely to strike out at objects with punitive sanctions that are consistent with idiosyncratic response dispositions. Because of the recency of the theory, measures of sanctioning style are still being developed. The advantage of adopting sanctioning theory as a way of understanding how people come to make blame judgments is that it takes into account conditions for which inferences are likely to operate and those for which personality or stylistic factors contribute. The model, presented in Figure 1 - 1, demonstrates sanctioning theory's potential for integrating several views of blame.

An integrative understanding of these three diverse conceptualizations of blame can be achieved further by adopting a phenomenological position with regard to subjects' response to blame items. It can be argued that measures from all three orientations may be tapping aspects of a common construct. Yet, there are clear conceptual distinctions to be made between causal attributions, defensive processes, and sanctions of blame. These distinctions are a function of the differing views of the antecedents and consequences of the judgments of self- or other-blame.

For example, inferential perspectives suggest that blame occurs as a function of a sequential analysis of

causes and responsibility concerning specific situations. Self-attributions concerning negative events are believed to result in lower mood, while external attribution for the same are believed to result in positive moods (Abramson et al, 1978; Weiner et al, 1979). The interpersonal perspective, on the other hand, specifies that patterns in blaming are independent of situational analysis and are more likely to be a function of a narrow repertoire of interpersonal behaviour centered around hostility. In the case of internally-directed hostility, the behaviour results in a reduction of anxiety associated with self-perceptions of dominance and in the case of externally-directed hostility, the behaviour results in reduction of the unpleasantness of being dominated by others. Moods are not considered to be direct consequences of the blaming behaviour, rather they occur concomitant with the behaviour to achieve desired interpersonal ends (Millon and Kotik, 1985; Coyne, 1976). Sanctioning theory suggests that what is important in blaming is the punitive quality of the relationship between the subject and the object of blame. Similar to the interpersonal position, blame judgments are considered to be partly determined by a particular personality style rather than solely by situational or inferential analysis. As well, this perspective suggests that, because of the harsh nature of the derogations,

negative mood will result from internally- and externally-directed sanctions.

As can be seen in this brief analysis, then, the three perspectives discussed here may have common ground in definitions of blame, but they diverge when considering etiology and consequences. The measurement of blaming personality tendencies is unresolved in all three perspectives. This inadequate operationalization has imposed limits on studying the etiological and consequential differences that distinguish inferential, interpersonal, and sanctioning theories. Furthermore, limitations of measurement have made comparative tests of the explanatory power of one theory of blame versus another virtually uninterpretable. Most critical is the difficulty of sorting out the relative importance of the contribution of more enduring personality sources of variability in blame judgments and the contribution of situational inferential analyses.

This dissertation is an examination of the relevant issues regarding the development of a measure of self- and other-blaming tendencies. The perspective that is adopted requires that the content of the measure be derived from theory (Loevinger, 1957). The theory base for the development of this measure is Wollert's sanctioning theory

because this has been the most explicit theory concerning blaming styles. Further development of assessment of sanctioning styles is a prerequisite to tests of aspects of the theory as outlined above. A measure of these styles is also considered important for studying the relationship of blaming personality tendencies to other interpersonal behaviour and emotional states.

1.3 Development of a measure of blame

The questions to be addressed with regard to measurement of sanctioning styles are: Can consistent overt and covert negative sanctioning be observed over time and across situations, reported adequately by people, and quantified on interval scales? Do measures of covert sanctions correspond to external behavioural referents in accordance with sanctioning theory? What are the relative contributions of personality and situational variables to actual blaming behaviour?

These questions form the bases of tests of sanctioning theory and must therefore be dealt with as a prerequisite to further theory development. Methods of structured test construction are available to address these issues empirically (Wiggins, 1973). Specifically, Wiggins (1973)

and Jackson (1967) recommended the use of Loevinger's (1957) "substantive" method of test construction. This method emphasizes both rational and empirical keying of test responses and has been the method of choice for development of the Personality Research Form (Jackson, 1967) and the Millon Clinical Multiaxial Inventory (Millon, 1977).

Loevinger's (1957) approach followed from her "naively realistic" argument that test responses are indicators of real traits and not only reflections of psychologists' constructions. In contrast to the position advocated by some of her contemporaries (cf. Cronbach and Meehl, 1955), she believed responses have some meaning in and of themselves. This position, however, does not minimize the importance of confirming substantive meaning by using external referents. The three specific components of test development which she recommended attention to, namely, substantive, structural and external considerations, were applied to a measure of blaming tendencies in the manner described in the following paragraphs.

The substantive content of a test is that variation in test response that can be attributed to the construct in question. This component of the test has been the main focus of rational development approaches. Wiggins (1973) suggested that substantive material may be derived from a

specific theory that encompasses the construct in question. The requirement concerning the content of the scale is met at the stage of item selection. Applied to the case of sanctioning theory, substantive considerations require that items chosen for scales of blaming tendencies be sampled from a variety of blaming expressions which people employ in different situations.

Structural considerations in Loevinger's method of test development involve theoretical statements of the way in which test responses relate to the construct in question. In other words, specification of the measurement model to be used is required. The arguments of Epstein and O'Brien (1985) apply to this particular issues. These authors stated that aggregates of behaviour increase the predictive power of traits. On the basis of this conception, the measurement model which was assumed with respect to sanctioning styles was a linear relationship between the hypothetical trait and actual behaviour aggregated across a variety of situations. So, for example, if individuals indicate they are likely to blame themselves in a variety of situations, they are assumed to be "high self-blaming" individuals, and if they indicate that they are likely to blame others in a variety of situations they are assumed to be high on the other-blaming trait.

A related aspect of the implied structure of a measure of sanctioning style is the way in which self- and other-blame are assumed to relate to each other. In the description of sanctioning theory, two separate styles were introduced; one was defined by a dimension of self-blaming tendencies, the other, a dimension of other-blaming tendencies. The hypothesized existence of two dimensions suggests that self- and other-blaming tendencies make independent contributions to responses on measures of these sanctioning styles. In terms of these responses, the fact that an individual would endorse a large number of self-blame items does not preclude the possibility that he or she might also endorse a large number of other-blame items. This independence of measures frees up the constraint imposed by a variety of measures of inferential styles (cf. Peterson, et al, 1982) which assume that individuals make either internal or external attributions.

The final consideration of Loevinger's model concerns the relationship of test behaviour to external referents. This relationship is usually thought of in terms of construct validation procedures. A systematic method for validation involves comparing the pattern of correlations between the measure of interest with theoretically discriminant and convergent measures (Campbell and Fiske, 1959).

In general, construct validation leads the investigator to an accurate interpretation of the meaning of test responses. Therefore, in addition to examining relationships between the test and theoretically meaningful external referents, one aspect of external validation involves separation of substantive from non-substantive test behaviour. Wiggins (1973) has noted that the most common forms of non-test behaviour that contribute to variance in test scores are acquiescent, socially desirable, and extreme response styles. Wiggins (1973) and Nunnally (1978) both noted that the volume of research that has been devoted to this topic attests to its importance in the development of structured tests. Thus, in order to grasp more fully the meaning of respondents' test behaviour, relationships with substantive and non-substantive external referents must be investigated and, where appropriate, controlled.

Another method of addressing validity of psychological tests, in this case, criterion validity, is with predictions of criteria in accordance with relevant theory (Nunnally, 1978). In the case of a measure of blaming styles, this validity assessment might involve testing predictions of sanctioning theory in a prospectively designed study. Of interest in such a study would be the degree to which individuals' actual blaming reactions conformed with the

their previously assessed tendency to respond to unpleasant situations with self- or other blame.

In summary, then, Loevinger's (1957) proposal regarding the development of structured tests applied to a measure of blame requires that items be derived from sanctioning theory, organized into scales corresponding to relevant constructs, and then validated against external referents like measures of similar constructs and actual blaming behaviour. The design, implementation, and analysis of the studies reported in the following chapters were guided by Loevinger's test construction model and by Jackson's (1967) application of that model.

In the first study, homogeneous scales of self- and other-blame were selected from pools of statements representing these domains. The items were included in the scales based on high correlation with their own domain and lack of correlation with other domains.

In the second study, the validity of the self- and other-blame scales was assessed by comparing the responses of a group of psychiatric patients to the ratings of their therapists. In addition to completing the self- and other-blame scales, patients completed several measures that were hypothesized to correlate with the blame scales, and several

that were hypothesized to be unrelated to sanctioning styles.

In the third study, applicants for admission to a professional school completed the blame scales, along with several other measures, prior to receiving notification of the outcome of their application and immediately following this notification. Hypotheses were tested regarding the predictability of blame, causal attributions, hostility, and mood.

Chapter 2 - Study I

2.1 Introduction and Overview

A major objective of the first study was to select a subset of items from a pool representing self- and other-blaming behaviour and attitudes as they occurred in a variety of situations. With a view towards subsequent studies of construct validity, it was considered crucial to select items which correlated highly with total scale scores and which were representative of commonly occurring blaming behaviour. Based on previous research of sanctioning styles (Wollert, 1987) and of other blame-like constructs (Ihilevich and Gleser, 1986; Wiggins, 1979), it was predicted that self-reports of self- and other-blaming attitudes and behaviour were vulnerable to being influenced by a tendency to present oneself in a socially desirable light. Jackson (1967), in his development of the Personality Research Form, assumed that the effects of social desirability on responding should be dealt with at the level of item selection. He advocated controlling for the effects of desirability by selecting those items, from a given pool of items, that are least related to external criterion measures of social desirability.

These ideas were applied to the construction of tests of blaming tendencies using a pool of 88 blame and 88 non-blame items. These items were administered to a large sample of university students. Using social desirability ratings which had been obtained for the non-blame items in a pilot study, two scales of social desirability were first constructed. One of these reflected culturally unfavourable content, the other seemed to reflect culturally favourable content. Items intended for the self- and other-blame scales were included in the initial item analyses if they did not correlate highly with either of these two scales. Subsequent analyses were then carried out to select items for homogeneous scales of self- and other-blame.

2.2 Method

2.2.1 Subjects

Two hundred and eighty-two undergraduate psychology students from the Universities of Saskatchewan and Regina participated in this study. The records from 11 of these participants, all of whom were from the same setting, were considered invalid because of the examiner's observation of excessive sharing of results and derogating of questionnaire items by the participants. An additional four records could not be included in the analysis because subjects had not completed enough of the items. This left 267 valid records

for data analyses (145 female, 115 male, 7 sex not given). The average age of those participating was 21.2 years ($SD=4.98$)

2.2.2 Materials

Items of Self- and Other-blame Scales. Forty-four self-blame, 44 other-blame, and 88 items which did not reflect blaming content were written by eight members of a research team who were familiar with sanctioning theory, with the concepts of self- and other-blame as described earlier, and with the writer's research proposal. Most of the members of the team were carrying out research involving blame and were thus well-read in the literature regarding this construct. Members of the team were asked to write statements in which the subject of the statement described his/her self- or other-blaming reaction in various situations or which expressed blaming or punitive attitudes toward self or others. The statements were edited once by the researcher and then returned to the team for final editing.

As part of a pilot study which examined forced-choice methods of assessment of blaming tendencies, the 176 items were administered to 49 psychology students (29 female, 20 male) with the request that each item be rated on a 7-point

scale for its desirability as a self-descriptor. Social desirability ratings, that is, ratings averaged across all of the 49 raters, were then calculated for each of the target and foil items. The 176 items, along with corresponding social desirability ratings, are shown in Appendix A.

In the present study, each of the items was presented individually with a 7-point Likert scale. The scales were designed such that respondents were to rate the degree to which they disagreed (1) or agreed (7) with each statement.

Marlowe-Crowne Social Desirability Scale (MCSD: Crowne and Marlowe, 1960). As shown in Appendix B, the MCSD is made up of 33 items, 18 of which represent culturally acceptable but improbable behaviours keyed in the "true" direction, and 15 of which are culturally unacceptable but probable behaviours keyed in the "false" direction. A number of studies have supported the psychometric adequacy of the MCSD, including reports of internal consistency and stability by its authors (Crowne and Marlowe, 1960) and strong positive correlations with measures of defensive denial and positive self-attribution (Ramanaiah, Schill and Leung, 1977).

2.2.3 Procedures

The pool of items which had been rated for social desirability (Appendix A) was administered to all subjects in group settings. The items were presented in booklets along with blank optical scanning forms. The items were introduced with the following instructions:

"On the following pages you will find a number of statements which describe different attitudes that people hold or ways that they might react to situations. We want you to carefully consider how well they fit as descriptions of your attitudes and behaviour. If you agree with a statement, indicate this by marking the appropriate category on the optical scanning sheet. So, for example, if you agree completely with the first statement, you would darken circle 'G' for item number one. If, on the other hand, you disagree completely with this statement, you darken circle 'A' for item number one. If your response falls between these two extremes, darken the option (from 'B' through 'F') which best reflects your view. All the items of this questionnaire follow this format.

Please rely on your knowledge about yourself to complete these items. When you have completed

everything, pass the answer sheet and the questionnaire in to the researcher. Thank you very much for your help in collecting this information."

A subset of 54 subjects completed the MCSD as well as the new blame and non-blame items. This group represented one class of students. Other subjects could not complete the MCSD because of time constraints in most of the administration sessions.

2.3 Results

2.3.1 Development of Social Desirability scales.

Because social desirability ratings were available for each of the new items, it was possible to construct scales of social desirability using the 88 non-blame items. The first analyses thus proceeded on the assumption that subjects' scores on linear composites of items with extreme social desirability rating values gave some indication of their tendency to present themselves in a socially favourable manner and/or their tendency to deny negative self-perceptions (Wiggins, 1962).

To examine the appropriateness of the assumption that social desirability formed a basis of response consistencies for the non-blame items that were rated by pilot subjects to be the most desirable and undesirable, exploratory factor analysis was

carried out on the 19 least and 19 most desirable items. The value of 19 was chosen as the cut-off point because items that fell in this range were a full social desirability rating value deviant from the mean. The factor analysis yielded an interpretable factor structure. Specifically, the first two rotated factors, accounting for almost 22% of the variance, corresponded approximately to the extremes of the social desirability values. That is, most items loading on the first factor were items with low values and most loading on the second factor had high values.

On the basis of this result, further internal consistency analyses were carried out, using two different scales of social desirability; the first made up of the 19 undesirable items and the second of the 19 desirable items. The coefficient alphas for these scales were .77 and .69 respectively. With some deletions and additions based on correlations of other non-blame items with these, the alphas were raised to .85 and .77 respectively, suggesting that subjects answered items within the scales similarly. An examination of the mean scores of subjects for desirable and undesirable composites revealed a significantly lower mean endorsement of undesirable items ($t(269)=18.86$, $p<.001$) thereby supporting the idea that the items with low social desirability ratings were also rated lower on the "agreement" scales. Correlations of these scales with the MCSD revealed that the 24-item "undesirability" (UNDES) scale was

unrelated ($r(52)=.02$, n.s.) to the MCSD while the 24-item "desirability" (DES) scale was modestly correlated ($r(52)=.38$, $p < .05$) with the MCSD.

Examination of the item content revealed that the items in the DES scale were in fact similar to those in the MCSD. On the other hand, the items in the UNDES scale were quite dissimilar to the two desirability scales. Appendix C shows that, while most of the UNDES items seem to reflect some sort of asocial or psychopathological behaviour, the MCSD and DES items seem to reflect "hypernormal" behaviour or attitudes. What is interesting about this content analysis is that in both scales no content themes beyond general pathology and hypernormality are evident. Based on these observations and based on correlations of DES with the MCSD, high scores on DES were interpreted to mean a tendency to endorse statements which cast the responder in a favourable light, and high scores on UNDES were interpreted to mean a tendency to deny socially unacceptable statements.

The difference in interpretation of these two scales may correspond to what some writers have referred to as the two components of social desirability (Millham, 1974; Ramanaiah, Schill, and Leung, 1977; Paulhus, 1984). Paulhus (1984), in reviewing the literature which supports this conception, suggested that one factor of social desirability, perhaps corresponding to the present UNDES, has been understood to be a

tendency to use self-deception in the face of personally threatening stimuli. Markers of this aspect of socially desirable responding are those items which subjects unconsciously find disagreeable as self-descriptions. The second factor, more closely correspondent to the present DES has been labelled, "impression-management", or the tendency to consciously present oneself highly favourable to others.

Given the present data, the link with the two-component model of social desirability is, of necessity, speculative, and will therefore have to be confirmed in subsequent research. The independence of the two present scales, however, as assessments of different sorts of responding is supported by the relatively low correlation ($r(269) = .18$ $p < .01$) between them.

2.3.2 Selection of items for self- and other-blame scales.

The first step toward selecting the best combination of items from the pool of self- and other-blame items was to eliminate items which correlated highly with either or both of the non-blame scales (DES and UNDES). In carrying out these initial eliminations, a correlation of .35 between blame items and non-blame scales was chosen as the upper limit because examining the correlation matrix of blame items and these scales led to the conclusion that this value would result in inclusion of many items. A relatively large item pool was considered

desirable for initial analyses. For the Self-Blame Scale (SBS), 27 items correlated less than .35 with the non-blame scales and for the Other-Blame Scale (OBS), 20 items met this requirement. Initial internal consistency estimates for these combinations of items were .83 for SBS and .75 for OBS.

These first estimates of internal consistency were considered adequate but inspection of the correlation matrix of DES, UNDES, and blame scales suggested the need for some adjustment of items within the content scales. Specifically, the high intercorrelations among the blame scales suggested a degree of item overlap. To correct for this dependency among the scales, a second set of deletions was carried out. Item-total correlations between each item and all four scales were computed and examined. Items which correlated higher with the total of other scales than with the total of their own scales were removed. Employing this strategy resulted in seven deletions for SBS and four for OBS, thereby leaving two 16-item scales for subsequent analyses. Final internal consistency estimates for these two scales reached .77 for SBS and .76 for OBS.

The mean social desirability rating values were computed for the SBS and OBS scales. There was a marginal difference between these values with OBS items tending to be rated somewhat lower, in terms of desirability, than SBS items ($t(14)=1.99$, $p<.06$, two-tailed). OBS items ranged in social desirability values from

2.02 ("friends who know me well would probably say I'm quick to blame others for bad things that happen") to 4.26 ("when I stand in line waiting for cashiers I think to myself: 'I wish this store would have a better way of handling customers'"). SBS items ranged in social desirability values from 2.56 ("if a job would be hard to find, I'd be quick to blame it on my personal qualities") to 4.80 ("when I know that I'm responsible for a failure, I blame myself"). Examination of the social desirability ratings across the total pool of blame items revealed an essentially flat distribution, a situation which Wiggins (1973) describes as an important step toward decreasing the influence of differential responding based on desirability.

2.3.3 Scale Intercorrelations and Descriptive Statistics

Correlation matrices, including the two blame scales, desirability scales, and the MCSD were then computed. As Table 2-1 shows, responses on the final blame scales are relatively independent of each other. The goal of independence from the effects of social desirability was partially achieved as suggested by the non-significant correlations between the blame scales and the MCSD and by the moderate correlations between DES and the blame scales. The high correlations of OBS and UNDES and the moderate correlation of SBS and UNDES suggests that the pattern of endorsement of OBS and SBS was related to the unfavourability of some of the self-statements.

Table 2 - 1.

Intercorrelations of blame scales and response style scales.

	1	2	3	4	5
1. SBS ^a					
2. OBS ^a	.15*				
3. DES ^a	.23**	.17**			
4. UNDES ^a	.34***	.64***	.18**		
5. MCSD ^b	-.10	-.21	.38	.02	

Note. The following abbreviations will be used on all tables:

SBS = Self-blame

OBS = Other-blame

DES = Desirability

UNDES = Undesirability

MCSD = Marlowe Crowne Social Desirability Scale.

^an = 267 for all correlations not involving MCSD.

^bn = 54 for all correlations involving MCSD.

*p<.05, **p<.01, ***p<.001, all two-tailed.

Means and standard deviations for the final scales are presented in Table 2-2. Consistent with results from studies using conceptually similar measures (Iheliivich and Gleser, 1986; Wollert, 1986) females scored higher than males on the measures of self-blame and lower on measures of other-blame.

2.3.4 Principal components analysis of the SBS and OBS scales.

A final analysis was carried out on these data assessing the match between the hypothesized factor structure and the observed correlation matrix of final blame items. To do this, a principal component solution was computed for two factors followed by orthogonal rotation of factors. The input correlation matrix included all SBS and OBS items. The choice of a principal component solution was guided by suggestions of some authors who prefer this method over factor analysis as a way of examining underlying dimensions of scales (Stevens, 1986; Tabachnick and Fidell, 1983). Similar analyses carried out using the method of principal axis factoring yielded virtually identical results.

Although several principal components with eigenvalues greater than 1.00 were extracted, examination of the variance accounted for by the extracted components revealed a clear discontinuity between the variance accounted for by the first two components and that explained by the others with eigenvalues

Table 2-2.

Sample characteristics - Psychometric variables across sex.

	Females	Males	Total ^a
	<u>n</u> =145	<u>n</u> =115	<u>n</u> =267
Variable-----			
SBS	67.43 (13.3)	61.29 (13.4)*	64.42 (13.8)
OBS	51.67 (11.1)	56.43 (13.1)*	53.92 (12.6)
DES	97.05 (14.8)	96.37 (19.5)	96.78 (17.0)
UNDES	63.51 (18.0)	69.97 (19.3)*	66.30 (18.9)

* $p < .01$, two-tailed.

^aTotal sample size does not agree with total of male and female samples because of the absence of sex data for 7 subjects.

greater than 1.00. The first component accounted for 12.8% of the variance and the second for 9.5%. The next most influential component accounted for only 5.1% of the variance in responses.

Examination of the matrix of item loadings after rotation of the first two principal components revealed a pattern similar to that implicitly hypothesized for self- and other-blame. Table 2-3 shows that the items which correlate above .25 with the first principal component are all items from the SBS scale, while those correlating above .25 with the second principal component are found in the OBS scale. Only one exception to this pattern was observed with item "...One of the first thoughts to occur to me when I see people who are down and out is: 'I didn't deserve this good life that I have". This item correlated .24 with the first component, self-blame; and correlated less than .15 (the minimum loading specified in the analysis) with the second component.

2.4 Discussion

The purpose of this study was to select the most homogeneous group of self- and other-blame items from a pool of self-statements which were written to reflect cross-situational blaming attitudes and reactions. With attention to Jackson's (1967) concerns regarding effects of non-substantive response tendencies, an additional goal of the study was to control for social desirability at the level of item selection, that is, by

Table 2 - 3.

Loadings of blame items on first two rotated principal components.

Item	I	II
Friends who know me well would probably say I'm quick to blame myself for bad things that happen.	.653	
When looking for the reasons for bad things that happen to me, I tend to punish myself.	.604	
There's usually a good reason to blame myself when bad things happen.	.558	.157
When I know that I'm responsible for a failure or misfortune, I blame myself.	.534	
If I get caught speeding I'm likely to harshly criticize myself for being so dumb.	.524	
If I'm not happy, it's because I 'm not performing well.	.520	
If a job would be hard to find, I'd be quick to blame it on my personal qualities.	.473	
If I were a nicer person I'd get along better with my friends and family.	.457	.156
When I fail or do poorly on a test I'm likely to wonder about my abilities.	.454	
If I was physically attacked, I would curse myself for putting myself in danger.	.439	
When I stand in long line waiting for a cashier I'd probably be thinking: "This is certainly poor timing on my part".	.414	
People who know me best consider me to be quite critical of myself.	.394	
It's my own fault that I'm not better at making choices during times of stress.	.372	
If I am late for an appointment it is usually because I have planned my time poorly.	.357	
If I don't like my job its because I'm not making the most of it.	.325	
One of the first thoughts to occur to me when I see people who are down and out is: "I didn't deserve this good life that I have".	.244	
(continued on next page)		

(Table 2 - 3, continued)

If my boss got fired, I would be thinking: "It serves him/her right".		.538
I'd be able to get my work done if other people wouldn't bother me.		.526
It burns me up at times to think of the misery others have put me through.		.525
When I stand in line waiting for cashiers I think to myself: "I wish this store would have a better way of handling customers".		.503
When family conflicts arise, someone else is to blame 75% of the time.		.490
When I'm not happy, its often because others are giving me a rough time.	-.160	.488
If a waitress spilled coffee on my new clothes, I'd want to let her know she'd been careless.		.472
When I know someone is responsible for a failure or mistake, I blame them.		.458
Friends who know me well would probably say that I'm quick to blame others for bad things that happen.		.448
Sometimes I get so frustrated with other peoples' shortcomings that I feel like giving them a good knock on the head.	.163	.443
In a traffic jam I often think: "I wish people wouldn't get in my way when I'm in a hurry".	.223	.432
If I don't do well on an exam, I'm likely to feel the instructor taught the course poorly.		.426
People who have psychological problems have no one to blame but themselves.		.383
If I were to get physically attacked, I would curse the police for not providing better protection to citizens.	.154	.373
If a job would be hard to find, I'd blame the people who run the economy.	.209	.372
If I got caught speeding I would be sure that it was because police officers give tickets to meet daily quotas.		.364

Note. This table includes all loadings greater than .15.

^a_n = 267.

choosing only items which showed minimal correlation with measures of social desirability.

With respect to the first goal of the study, through internal consistency, correlational, and principal components analyses, relatively homogeneous scales of self- and other-blame items were constructed. The internal consistency estimates were within the range of values that are typically considered to be adequate for research purposes (Nunnally, 1978). The low correlation between the two scales suggests that two independent constructs are being measured by the scales. Finally, the two factor structure permits the conclusion that two homogeneous content domains --self- and other-blame-- are measured by the scales. Blaming attitudes and behaviour from a wide variety of situations are sampled in the scales. Blame statements involving family, work, school, and other activities of daily living are represented in each scale. Although many situations are sampled, it is possible that these situations are most applicable to university-educated populations, given that this was the context in which the items were written and selected.

It should be noted that the case for generalizability of these results is significantly weakened because the internal consistency, correlational, and principal components analyses were all performed on the same data set.

Because the analyses are not independent of one another, there is a bias in favour of the reported results. In other words, the item selection was conducted in such way as to predict the observed factor analytic results. For this reason, the items representing the SBS and OBS scales must be viewed as hypothesized domains. It is the challenge of future studies to cross-validate these findings with replications of the internal consistencies and factorial structure observed in this study. It is also the work of subsequent studies to validate the assertion that the domains being tapped are in fact self- and other-blaming tendencies. Cross validation of the blame scales and predictive validity evidence will be reported in Study III.

Although the internal consistencies of the blame scales are adequate for further research on the scales, the pattern of correlations in Table 2-1 suggests that the goal of controlling for social desirability at the level of item-selection was only partially achieved. The correlation of the blame scales with MCSD are all small but those with UNDES and DES are moderate to large. Several explanations may account for these unanticipated findings.

To begin, it is noteworthy that none of the correlations between the four new scales that were constructed fell below .15. For example, the correlation between UNDES and DES reached .18, even though these

measures were based on empirically-derived orthogonal factors. The correlation among blaming and non-blaming content scales may partly be due to the fact that all of these measures were obtained using the same questionnaire. The scales may thus share a proportion of "method variance" (Wiggins, 1973) resulting in a correlation among these scales regardless of their content.

A second explanation has to do with the "social desirability" concept itself. Given the high correlation of UNDES and OBS, one might be led to assume that the content of these two scales is so similar that they are redundant. Inspection of the content of items within the scales, however, argues against this conclusion. For example, none of the UNDES items deal directly with blaming others for failure, while nearly all of the OBS items deal with blame. What the scales have in common, however, is the fact that most of the statements deal with behaviours and attitudes that many people would consider to be undesirable as self-descriptions. Thus, respondents seemed to have reacted similarly to the negative content in both scales. The question that remains, given that subjects responded similarly to UNDES and OBS is, whether undesirability distorts responses to the blame content such that subjects attended only to the undesirability and disregarded the content component.

This question raises a familiar issue, similar to Block's (1965) criticism of Edwards' (1957) interpretation of the MMPI as a measure primarily of social desirability. Block criticized Edwards' view by asserting that most pathology is considered to be negative by society but that this does not have to imply that subjects respond only to this aspect of questionnaires of pathology. Rather, they may consider a pathological trait as self-descriptive and at the same time undesirable or personally threatening. He and others (e.g. McCrae and Costa, 1983) have argued that confounding between content scales and social desirability should not be assumed without reference to external correlates. The issue of possible confounding of blame scales and UNDES remains an open empirical question which should be addressed in subsequent research.

In a similar argument, Paulhus (1984) suggested that much may be lost by removing items that load on "self-deception", a factor similar to the present UNDES. In contrast, however, he generally recommends excluding items that pull for conscious "impression management", a construct that is similar to what may be tapped in the DES scale. According to Paulhus, it is this aspect of social desirability which is more damaging in clouding the interpretation of personality measures. The relatively low correlations between the blame scales and DES suggest that

this component of social desirability is reasonably well controlled in the blame scales.

In the end, the effectiveness of reducing social desirability must be assessed by not only considering the relationship of the blame scales with social desirability measures, but also their relationships to constructs that are similar in content and to other external criterion measures. Internally consistent scales have been developed but their adequacy as assessments of personality variables needs to be demonstrated in validation studies. Two such validation studies are reported in the following chapters.

Chapter 3 - Study II

3.1 Introduction and Overview

The first purpose of this study was to assess the validity of the blame scales using a variety of hypothesized convergent and discriminant measures. A more general, second objective was to examine further the validity of self- and other-blaming tendencies as psychological constructs. The degree to which a variety of measures of the same construct correlate with each other and not with measures of dissimilar constructs is evidence for validity, not only for a specific measure, but also for the construct itself (Campbell and Fiske, 1959).

A number of out-patients from psychiatric facilities completed the blame scales, the Sanctioning Style Questionnaire (SSQ: Wollert, 1986), the Defense Mechanisms Inventory (DMI: Gleser and Ihelivich, 1969), the Understanding Scale from the Personality Research Form (PRF-UND: Jackson, 1967), the desirability scale from Study I, and the Marlowe-Crowne Social Desirability Scale (MCSD: Crowne and Marlowe, 1964). In addition, therapists of each participating patient completed the SBS, OBS and SSQ scales using his or her knowledge of the patient.

The study was designed to be analyzed using Campbell and Fiske's (1959) multitrait-multimethod (MTMM) matrix. The value of this approach lies in its stringent requirement of the demonstration of convergent and discriminant validity; that is, the MTMM method requires that measures that are hypothesized to be related should be correlated, while those that are hypothesized to be unrelated should be uncorrelated. In addition, by focusing on convergent and discriminant validities for different methods of assessment it is possible to separate sources of variation in measures which are a function of the substantive content from those that are due to the method of assessment.

Self- and other-blame were each assessed with three measures: the blame scales, the SSQ, and the DMI scales. Two of these measures were employed using two different methods: clinician- and self-report. Two discriminant constructs were also assessed: DES, which was assessed by clinician and self-report, and PRF-UND which was assessed only in the self-report method.

Four criteria for assessing convergent and discriminant validity, proposed by Campbell and Fiske (1959), guided analyses of the data:

- 1) The convergent validity coefficients, that is, correlations of similar constructs (monotrait) using similar methods (monomethod), should be statistically significant and sufficiently different from zero to warrant further examination. Significant positive correlations were expected among all self-and clinician-report measures of self-blame or hostility directed inward. Similarly, significant positive correlations were expected among self- and clinician-report measures of other-blame and hostility directed outward. All of these correlations represent convergent validities of the blame scales.
- 2) The convergent validities should be higher than the correlations between different traits (heterotrait) assessed by different methods (heteromethod). Mono-method correlations among self-blame measures and among other-blame measures (ie. convergent validities) were expected to be higher than correlations of these measures with the clinician version of DES.

3) The convergent validities should be higher than correlations between different traits assessed by the same method.

Convergent validities of self- and other-blame measures were expected to be higher than correlations of self- and other-blame with DES and PRF-UND.

4) The pattern of correlations between different traits should be similar for each of the different methods. The pattern of correlations among the SBS and the OBS, and SSQ blame scales was expected to be similar for the self-report and clinician-report method.

3.2 Method

3.2.1 Subjects

A total of 55 practicing or training psychologists across 10 mental health clinics in Saskatchewan were invited to participate and to enlist the participation of two to four of their clients. A letter describing the project was sent to each clinician. One month after the initial request had been sent out, a follow-up card was sent to those who

had not yet responded to the initial request. Descriptions of the project were also sent to psychology department heads along with a form requesting local consent for the projects.

Two of the ten clinics did not provide consent, one because of its primarily child focus, and the other, because the department was expected to lose its psychologists within a few weeks of the researcher's request. This eliminated 7(13%) of the clinicians who had been invited to participate. Twenty clinicians (36%) declined participation, and 11(20%) failed to respond after receiving the reminder card. Remaining were 17(31%) clinicians who agreed to ask two to four of their clients to participate in the study. These clinicians were sent four packages of materials which included written requests for participation from the patients. Reminder notes were sent to clinicians who did not return materials within one month of receiving them. Of the group who received the materials 11 did not send any completed questionnaires. In the end, 6 of the original 55(11%) invited clinicians participated by asking a total of 16 patients to participate in the study.

Because a sample of 16 was considered too small for meaningful analyses, additional subjects were recruited in the out-patient psychiatric department of Kitchener-Waterloo hospital in Ontario. After approval had been received from

the hospital's research committee, a memorandum describing the project and requesting that therapists invite two to four of their clients to participate was sent to 12 therapists of the adult and adolescent service teams. One therapist declined participation and two failed to respond to the request, leaving nine therapists who agreed to invite clients to participate. The same packages of materials that the Saskatchewan clinicians had received were given to the Ontario clinicians. Six therapists participated with a total of 11 of their patients.

In total, then, 27 patients and 12 clinicians participated in the study. The clinician sample represents 21% of those who had been asked to participate. A breakdown of descriptive variables regarding the patient sample is given in Table 3-1. Table 3-2 summarizes the DSM-III diagnostic information provided on the patients by their clinicians. Table 3-3 provides some descriptive information about the participating therapists.

3.2.2 Materials

Self- and Other-blame Scales (SBS, OBS). The SBS and the OBS as described in Study I were employed in this study. The format of the scales that was utilized in this study is shown in Appendix D.

Table 3-1

Patient sample characteristics - demographic variables.

	Number of Patients %	Mean (<u>SD</u>)
	<u>n=27</u>	
<hr/>		
1. Sex		
Female	18	67.7
Male	9	33.3
2. Marital status		
single	7	25.9
married	9	33.3
separated	11	40.7
3. Highest level of education		
elementary	2	7.4
high school	8	37.0
university/college	17	63.0
4. Occupation		
unemployed	2	7.4
labour/skilled/clerical	12	44.4
business/management	3	11.1
professional	4	14.8
student	6	22.2
5. Age		32.7(9.0)
6. Number of therapy sessions		26.8(19.5)

Table 3-2.

Patient sample characteristics - DSM-III diagnostic information.

	Number of Patients	%
	n=27	
DSM-III Axis I		
Major depression or dysthymia	6	22.2
Marital problem	4	14.8
Eating disorder	4	14.8
Adjustment disorder with mixed emotional factors	2	7.4
Anxiety disorder	3	11.1
Bipolar disorder	1	3.7
Psychological factors affecting physical condition	1	3.7
Diagnosis not given	6	22.3

(continued on next page)

(Table 3-2 continued)

DSM-III Axis II

Borderline	4	14.8
Dependent	3	11.1
Avoidant	3	11.1
Narcissistic	1	3.7
Schizoid	1	3.7
Paranoid	1	3.7
Compulsive	1	3.7
Mixed	1	3.7
Diagnosis not given	12	44.4

Note. DSM-III = Diagnostic and Statistical Manual of Mental Disorders (American Psychiatric Association, 1980)

Table 3-3.

Clinician sample characteristics.

	Number of			
	Clinicians	%	% of cases ^a	Mean(<u>SD</u>)
	<u>n</u> =12			
<hr/>				
1. Professional degree				
MA - Psychology	4	33.3	29.6	
Ph.D. - Psychology	4	33.3	40.7	
MSW - Social Work	2	16.7	18.5	
BA - Psychology	1	8.3	3.7	
Registered Nurse	1	8.3	7.4	
2. Years of clinical practice				7.14(4.7)

^abased on total number of cases in the study (n = 27).

Sanctioning Style Questionnaire (SSQ: Wollert, 1986).

The Self-blame (SSQ-SB) and Other-blame (SSQ-OB) scales of the Sanctioning Style Questionnaire are each comprised of six statements which ask respondents to rate the extent to which they react to failure and misfortune by blaming and criticizing themselves and/or by blaming and criticizing external objects (Appendix E). Respondents to these SSQ scales rate the probability, intensity, duration, frequency of revivification, current level and comparative standing of their blaming reaction.

Wollert (1986) reported several analyses which suggest the SSQ has good internal consistency and structural integrity. First, coefficient alpha reached .84 for the SSQ-SB scale and .78 for the SSQ-OB. Second, a factor analysis of all SSQ items, which included comparable measures for self- and other-affirmation showed that the self- and other-blame scales together, accounted for 31% of the variance in responses with items loading exactly according to predictions regarding the scales. Finally, Wollert reported three-week test-retest coefficients with 120 subjects for the four SSQ scales ranging from .65 to .73.

To date, there have been several validity studies carried out using the SSQ. Wollert (1986) correlated the SSQ scales with scales from the Attributional Style Questionnaire (ASQ: Peterson, Semmel, et al, 1982) and with the Beck Depression Inventory (BDI: Beck, Ward, Mendelson, Mock, and Erbaugh, 1961). In accordance with predictions regarding the interrelation of self-blame and causal attributions, the SSQ-SB was consistently positively correlated with all of the ASQ scales. Furthermore, consistent with predictions of Wollert's sanctioning theory of depression, correlations between a linear combination of the SSQ-SB and SSQ-OB scales and the BDI ranged from .34 to .58 across four samples (all significant at $p < .05$).

Another validity study of the SSQ was carried out by Mittelstaedt and Wollert (1987). In this work, the SSQ blame scales were administered together with the Defense Mechanisms Inventory (DMI: Gleser and Ihilevich, 1969). The results showed significant convergent correlations between SSQ scales and corresponding DMI scales.

In addition, to the psychometric qualities of the SSQ, it should be noted that the value of using this measure in this study was considered to be its face validity with respect to the variables being studied.

Defense Mechanisms Inventory (DMI: Gleser and Ihelivich, 1969). Two scales, the Turning Against Other (TAO) and the Turning Against Self (TAS) scales of the Defense Mechanisms Inventory were employed in the study. These scales, displayed along with the other DMI scales in Appendix E, essentially measure outwardly- and inwardly-directed hostility by asking respondents to read through ten stories and select their preferred responses from a range of options. In addition to the hostile content of the items in the TAO and TAS scales, there are a number of items which strongly imply blaming tendencies. Because the format of each DMI item requires respondents to choose their most and least likely response from five possibilities, the complete data set had to be administered. The analyses , however, only included DMI scales that were relevant to the design of this study.

A third scale of the DMI which might be considered relevant to the study of blaming tendencies is the "projection" scale. Examination of the definition of projection assumed by this scale and of the item content of the scale revealed an incompatibility between this use of the term and "projection of blame". More specifically, the DMI defines projection as the "...the attribution of negative intent or characteristics to others, without unequivocal evidence" (Ihilevich and Gleser, 1986, pp. 25).

Although this definition has some relevance to other-blame, examination of the item content reveals that more blame items are found in the TAO scale than in the projection scale. It should be noted, nonetheless that the two scales are typically highly intercorrelated and thus selection of one over the other would likely not lead to different interpretations.

Past studies of the DMI have attested to its psychometric adequacy and its appropriateness for the present study. Ihelivich and Gleser (1986) report internal consistency coefficients of .80 and .70, respectively, and stability coefficients of .82 and .72, respectively, for the TAO and TAS scales. A variety of studies suggesting convergent validity of the scales have also been compiled in the manual for the DMI. A consistent pattern that has emerged is that TAO correlates moderately with measures of hostility and TAS is related with measures of depression and low-self-esteem (Ihelivich and Gleser, 1986). Finally, an unpublished study by Mittelstaedt and Wollert (1987) found some positive correlations between the DMI and several rating scales asking subjects direct questions about their blaming tendencies.

Personality Research Form - Understanding Scale (PRF-UND: Jackson, 1967). The Understanding scale of the

Personality Research Form (Appendix G) is a 16-item scale which Jackson (1967) states measures the degree to which a person "...wants to understand many areas of knowledge, values the synthesis of ideas, verifiable generalization, logical thought, particularly when directed at satisfying intellectual curiosity" (pp. 7). No relationship between the PRF-UND and blaming scales was expected; it was included to investigate the discriminant validity of the SBS and the OBS. The PRF-UND scale is reported to have favourable psychometric characteristics (Jackson, 1967).

The Desirability Scale (DES). This scale, as described in Study I, was also included as a discriminant measure. It was not expected to correlate with the blame scales because of the small correlations observed in previous studies. This was the only discriminant measure which was administered in clinician- and self-report format. Because of the item format similarity, it was administered as part of the same questionnaire as the blame scales (Appendix E).

Marlowe-Crowne Social Desirability Scale (MCSD: Crowne and Marlowe, 1960). The Marlowe-Crowne Social Desirability Scale, as described in Study I was also included in the battery of tests which subjects in this study received.

3.2.3 Procedures

Each clinician who agreed to participate received a package which included four sets of materials to be completed by clients, four sets of materials to be completed by clinicians, general instructions for the study, debriefing forms, and an interpretive outline for the DMI. Each set of materials for the clients included copies of the blame scales, SSQ, DMI, MCSD, DES, PRF-UND, and a form requesting some general demographic information. Also included in the client set was a two-page introduction to the study and a consent form. Each set of clinician materials included copies of the blame scales, SSQ, DES, and a form requesting diagnostic and treatment duration information about the client, and information about the nature and duration of the clinician's professional status. Copies of the clinician instruction sheet, introduction for clients, consent form, client demographic form, clinician information form are displayed in Appendix H.

The general instruction sheet outlined the procedure that clinicians were to follow once they had received the materials. In brief, clinicians were asked to select two to four of their clients whom they thought would be willing to participate and who met the following inclusion criteria:

- a) clients whom the clinician had seen in a mental health context at least eight times;
- b) clients who, in the clinician's judgment, were able to complete self-report paper and pencil tests independently;
- c) clients who were at least 18 years of age or older;
- d) a preference for a balance of male and female clients was expressed.

The selected clients were to be approached by the clinician, given a set of materials, and asked to read through the introduction in the package. The introduction for clients specified that clients, if participating, were to complete the materials and the consent form and then to return these to their clinicians. If not participating, clients were simply to return the set of materials to the clinicians.

Once the clinicians had an indication which clients were participating, they were to complete the materials in the clinician set. While the instructions that clients used to fill out the questionnaires were standard for completing self-report measures, the clinicians received these instructions for the blame scales and DES;

"On the following pages you will find a number of statements which describe different attitudes that people hold or ways that they might react to situations. We want you to carefully consider how well they fit as descriptions of your client's attitudes and behaviour. In other words, we want you to consider how you think he or she might answer the items. So for example, if you think your client would agree with the first statement, you circle "7" for item number one. If, on the other hand, you feel he or she would disagree with the statement, you would circle "1" for item one. If your estimation falls between these two extremes, circle the option (from 2 through 6) which best reflects your view";

and these instructions for the SSQ;

"The following questions again concern reactions that people might have to failure or misfortune. Please consider the typical reactions of this client and circle the number which corresponds to your estimate of

how they are likely to handle these kinds of events".

Upon completion of both clinician and client materials, clinicians were asked to give clients copies of the debriefing form, also displayed in Appendix H, and to return the completed materials to the researcher. If materials were not returned within one month, a reminder note was sent, or, in the case of local participants, a reminder telephone call was made. Clinicians who were interested in having some feedback about their clients' test responses, were given DMI T-score profiles along with an interpretive summary. In the case of the Ontario sample, the report was given to interested clinicians in feedback sessions. At no time during the study was there direct contact between volunteering clients and the researcher.

3.3 Results

3.3.1 Preliminary Analyses

Means and standard deviations were computed for all of relevant variables within sex and sample (Saskatchewan vs. Ontario) groupings. The means were compared using independent sample t-tests. Because of the number of comparisons, and the lack of hypotheses regarding

differences, a conservative alpha level of .01 was used to indicate significant differences. As Table 3-4 shows, there were no differences across samples on any of the client or clinician measures. Subsequent analyses were therefore carried out on the combined group.

With respect to sex differences, Table 3-5 shows that, on most of the measures used in this study, sex differences were negligible. The only differences that were significant were differences in the way clinicians rated self-blaming tendencies of their clients. Females were rated as being more self-blaming on the clinician versions of the SBS ($t(25)=4.64$, $p<.001$) and the SSQ-SB scale ($t(25)=3.05$, $p<.01$). It should be noted, however, that while the other comparisons across sex on blame and hostility variables failed to reach significance, the pattern of means were all in the direction suggested by sex differences reported in other studies (Study I; Wollert, 1986; Ihilevich and Gleser, 1986).

The lack of significant sex differences on the self-report measures suggested that combining males and females would not significantly distort the results, in particular with respect to correlational analyses. Two cautionary notes should be observed, however, at this time. First,

Table 3-4

Descriptive statistics by location of sample.

	Saskatchewan ^a	Ontario ^b	Total ^c
Patient measures-----			
SBS	72.87(15.2)	69.45(19.3)	71.48(16.7)
OBS	52.75(16.9)	46.45(11.4)	50.18(15.0)
DES	91.75(17.8)	91.63(14.7)	91.70(16.3)
SSQ-SB	33.43(11.7)	36.91(7.4)	34.85(10.2)
SSQ-OB	21.68(12.3)	20.27(12.2)	21.11(12.1)
DMI-TAS ^d	42.17(11.0)	47.45(8.8)	44.69(10.2)
DMI-TAO ^d	36.67(13.2)	35.00(11.6)	35.87(12.2)
PRF-UND	7.87(3.2)	7.18(3.37)	7.59(3.2)
MCSD	13.13(7.0)	15.72(6.6)	14.19(6.8)
Number of sessions	23.9(15.1)	32.00(25.7)	26.80(19.5)
Clinician measures-----			
CSBS	75.87(13.1)	77.82(12.8)	76.67(12.7)
COBS	60.12(14.6)	60.91(15.6)	60.44(14.7)
CDES	82.13(15.8)	80.82(14.4)	81.59(14.9)
CSSQ-SB	33.25(9.8)	34.73(9.3)	33.85(9.4)
CSSQ-OB	26.06(11.7)	26.82(10.7)	26.37(11.1)

Note: The following abbreviations will be used for all tables throughout this report: SSQ-SB = Sanctioning Style Questionnaire Self-blame; SSQ-OB = Sanctioning Style Questionnaire Other-blame; DMI-TAS = Turning Against Self; DMI-TAO = Defense Mechanisms Turning Against Objects; PRF-UND = Personality Research Form Understanding Scale. The "C" in front of known acronyms denotes the clinician version of these measures.

^a \bar{n} = 16. ^b \bar{n} = 11. ^c \bar{n} = 27. ^dFor DMI variables, \bar{n} = 12 in the Saskatchewan sample and \bar{n} = 23 in total.

Table 3-5.

Descriptive statistics by sex.

	Females ^a	Males ^b
Patient measures-----		
SBS	74.77(17.3)	64.89(14.0)
OBS	48.83(15.7)	52.89(14.1)
DES	88.44(14.5)	98.22(18.6)
SSQ-SB	38.39(8.26)	27.28(10.3)*
SSQ-OB	23.11(13.4)	17.11(8.1)
DMI-TAS ^c	46.56(10.0)	40.43(9.8)
DMI-TAO ^c	33.69(12.7)	40.85(9.9)
PRF-UND	7.67(3.7)	7.44(2.2)
MCSD	15.17(6.5)	12.22(7.3)
Number of sessions	27.56(21.6)	25.56(16.1)
Clinician measures-----		
CSBS	82.11(11.4)	65.78(6.8)**
COBS	56.61(14.9)	68.11(11.5)*
CDES	80.00(13.4)	84.78(18.1)
CSSQ-SB	37.28 (8.1)	27.00(8.3)**
CSSQ-OB	23.94(11.4)	31.22(9.35)

^a \bar{n} = 18. ^b \bar{n} = 9.^cFor DMI variables only, \bar{n} = 17 for females and \bar{n} = 6 for males.* $p < .05$. ** $p < .01$.

because differences between males and females are typically found on these variables, the lack of such differences in this study suggests these samples may not be representative and that results may not be widely generalizable.

Second, if there are true differences between the groups which are not reflected in these comparisons, it is likely that some correlation coefficients may be inflated and should thus not be accepted as absolute measures of association between measures (i.e., as in "validity coefficient"). A larger sample would be required to make such interpretations. This issue, however, should not severely limit the analyses as the most important analyses in this study are the comparisons between correlations of convergent and discriminant measures.

Table 3-6 presents correlations of all study variables with the MCSD. A consistently high degree of relationship between the MCSD and the blame and hostility measures is evident. Self-blame, as reported by patients and clinicians, was positively related to a tendency to endorse socially desirable items; other-blame, again as reported by patients and clinicians, was negatively related to social desirability. This finding might be interpreted to suggest that, in this sample, self-blaming responses were viewed much more favourably than other-blaming responses. The only blame scale which seemed to be only minimally affected by social desirability was the SSQ-SB scale.

Table 3-6

Correlations with the Marlowe-Crowne Social Desirability Scale.

	MCSD ^a
SBS	.40
OBS	-.54
DES	.27
SSQ-SB	.17
SSQ-OB	-.53
DMI-TAS	.52
DMI-TAO ^b	-.75
CSBS ^b	.54
COBS	-.36
CDES	.30
CSSQ-SB	.36
CSSQ-OB	-.41
PRF-UND	.15

Note. Correlations greater than the absolute value of .38 are significant $p < .05$, two-tailed for pairs not involving DMI variables. A value of .41 is required for two-tailed significance for pairs involving DMI variables.

^a \bar{n} = 27.

^b \bar{n} = 23.

The final preliminary analysis was a visual inspection of frequency distributions of the study variables. The number of sessions that clients had been seen by their therapist was the only variable with an obviously skewed (positively) distribution. Most of the clients in this study had had 13-20 sessions while only 7 clients had more than 30 sessions. Data on this variable were transformed using a square root transformation (Nunnally, 1978).

3.3.2 Intercorrelations of blame scales.

The correlation matrix presented in Table 3-7 shows that out of the 24 correlations between self- and other-blame measures 13 were significant and negative ranging from $r(25) = -.32, p = .05$ to $r(25) = -.66, p < .001$, both one-tailed. An additional 10 were not significantly correlated, while one correlation, between the SSQ-SB and the SSQ-OB scales was significantly positive $r(25) = .35, p < .05$. Closer inspection of the table reveals that there was a tendency toward bipolar responding, in particular with correlations involving the new blame scales and DMI scales. That is, subjects in this sample, more so than in Study I, endorsed either self-blame or other-blame responses. With the SSQ, on the other hand, the positive correlation

Table 3-7.

Multitrait-multimethod correlation matrix.^{ab}

	1	2	3	4	5	6	7	8	9	10	11	12
1. SBS												
2. OBS	-.35											
3. SSQ-SB	<u>.39</u>	.03										
4. SSQ-OB	-.20	<u>.72</u>	.35									
5. DMI-TAS	<u>.51</u>	-.51	<u>.54</u>	-.14								
6. DMI-TAO	-.66	<u>.50</u>	-.43	<u>.46</u>	-.58							
7. DES	.30	-.17	-.13	-.49	.02	-.31						
8. PRF-UND	.09	-.24	-.15	-.14	-.07	-.39	.21					
9. CSBS	<u>.32</u>	-.41	<u>.41</u>	-.09	<u>.32</u>	-.43	-.19	.16				
10. COBS	-.34	<u>.41</u>	-.10	<u>.26</u>	-.26	<u>.37</u>	-.22	-.26	-.58			
11. CSSQ-SB	<u>.03</u>	-.35	<u>.47</u>	-.02	<u>.38</u>	-.15	-.29	.08	<u>.72</u>	-.41		
12. CSSQ-OB	-.60	<u>.40</u>	-.12	<u>.37</u>	-.39	<u>.50</u>	-.40	-.02	-.47	<u>.78</u>	-.16	
13. CDES	.07	-.21	-.10	-.41	.07	-.19	<u>.59</u>	-.10	.14	-.41	.09	-.38

Note. Underlined coefficients are convergent validities. For correlations with pairs not involving DMI variables $r = .31$ is significant at $p < .05$, one-tailed; where convergent and discriminant correlations with DMI variables are being considered, $r = .34$ is significant at $p < .05$, one-tailed.

^a $n = 27$ for all correlations except those involving DMI variables.

^b $n = 23$ for correlation involving DMI variables.

suggests that high scores on self-blame tended to occur with high scores on other-blame.

3.3.3 Convergent and Discriminant Correlations

Before proceeding with an examination of the multitrait-multimethod matrix (MTMM), a word should be said about the nature of such analyses. In their original paper, Campbell and Fiske (1959) stopped short of suggesting strategies for analyzing MTMM matrices. As Marsh and Hocevar (1983) point out, the criteria that different researchers have used to assess the relative size of correlations has varied consistently. To deal with this issue, Marsh and Hocevar (1983) carried out a series of analyses comparing the most common analytic strategy, simple comparisons of the magnitude of difference among correlations, with confirmatory factor analysis. They concluded that the results of the visual inspection analysis compared favourably with the factor analytic results and that the popular analytic strategy was adequate for preliminary validity work.

Ideally, the present correlation matrix should be analyzed using confirmatory factor analytic methods with separate factors for each of the hypothesized traits and each of the assessment methods. Because of the small sample

size, however, results from such an analyses would be meaningless (Nunnally, 1978). For this reason, comparisons were based simply on the magnitude of the correlations. The conclusions of the study must therefore be treated as preliminary indications of the convergent and discriminant validity of the blame scales. Although the primary focus of this study was the validity of the new blame scales, results are presented for the SBS, OBS, and the SSQ blame scales.

Table 3-7, presented earlier, summarizes the correlations of the SBS, OBS, and the SSQ blame scales with hypothesized convergent and discriminant measures. Because relationships in this study were hypothesized, significance of these correlations is evaluated using one-tailed tests.

With respect to convergent validities of the SBS, OBS, and SSQ blame scales among themselves and with the DMI scales, the pattern of correlations is generally consistent with the predicted pattern. All six of the expected convergent relationships among self- and other-blame measures within the self-report method, were positive and significant ranging from $r(25) = .39$ ($p < .05$) to $r(25) = .72$ ($p < .001$). The two convergent correlations within the clinician-report method were also positive and significant ($r's(25) = .72$ and $.78$, $p < .001$). The convergent correlations across method, that is, correlations of self- and other-

blame self-report with clinician-report measures of the same constructs, tended to be somewhat smaller, but were also mostly significant and positive ranging from $r(27) = .03$ (n.s.) to $r(27) = .59$ ($p < .01$). Both of the two convergent correlations which were predicted to be significant but which failed to reach the significance criteria occurred across methods. Overall, 19 of the 21 (90%) hypothesized convergent correlations were significant at $p < .05$ suggesting that Campbell and Fiske's (1959) first criterion was met reasonably well by the present data.

The second criterion involved comparisons between convergent validities and correlations of the target variables and hetero-method discriminant constructs. The analysis regarding this criterion was restricted to convergent validities involving the self-report versions of the SBS, OBS, and SSQ blame scales because this version, and not the clinician version, was the primary subject of the validity study. Table 3-8 summarizes the comparisons that were made. Overall, in 13 of 16 (81%) comparisons, the convergent validity value was greater, in absolute terms, than the correlation with the discriminant construct. This held true for 7 of the 8 comparisons with the SBS, OBS, scales and for 6 of the 8 comparisons involving the SSQ scales. The second criterion was therefore reasonably well met by the matrix of correlations for these variables.

Table 3-8.

Summary of comparisons regarding Criterion 2 - Difference between convergent validities and correlations with heteromethod-heterotraits.

	Comparison	Values	Difference of Absolute Value
I -	<u>SBS</u> , <u>OBS</u>	-----	-----
1.	<u>SBS/SSQ-SB</u> with <u>SBS/CDES</u>	.39, .07	.32
2.	<u>SBS/DMI-TAS</u> with <u>SBS/CDES</u>	.51, .07	.44
3.	<u>SBS/CSBS</u> with <u>SBS/CDES</u>	.32, .07	.25
4.	<u>SBS/CSSQ-SB</u> with <u>SBS/CDES</u>	.03, .07	-.04
5.	<u>OBS/SSQ-OB</u> with <u>OBS/CDES</u>	.72, -.21	.51
6.	<u>OBS/DMI-TAO</u> with <u>OBS/CDES</u>	.50, -.21	.29
7.	<u>OBS/COBS</u> with <u>OBS/CDES</u>	.41, -.21	.20
8.	<u>OBS/CSSQ-OB</u> with <u>OBS/CDES</u>	.40, -.21	.19

(continued on next page)

(Table 3-8, continued)

II - <u>SSQ</u> -----		
9. <u>SSQ-SB/SBS</u> with <u>SSQ-SB/CDES</u>	.39,-.10	.29
10. <u>SSQ-SB/DMI-TAS</u> with <u>SSQ-SB/CDES</u>	.54,-.10	.44
11. <u>SSQ-SB/CSSQ-SB</u> with <u>SSQ-SB/CDES</u>	.47,-.10	.37
12. <u>SSQ-SB/CSBS</u> with <u>SSQ-SB/CDES</u>	.41,-.10	.31
13. <u>SSQ-OB/OBS</u> with <u>SSQ-OB/CDES</u>	.72,-.41	.31
14. <u>SSQ-OB/DMI-TAO</u> with <u>SSQ-OB/CDES</u>	.46,-.41	.06
15. <u>SSQ-OB/CSSQ-OB</u> with <u>SSQ-OB/CDES</u>	.37,-.41	-.04
16. <u>SSQ-OB/COBS</u> with <u>SSQ-OB/CDES</u>	.26,-.41	-.15

Note. With each comparison in this table, the correlation of the first pair of variables is hypothesized to be larger, in terms of absolute value, than that of the second pair.

Evaluation of the correlation matrix against the third of Campbell and Fiske's criteria was also carried out using only the correlations which involved the self-report blame measures. In this case, the convergent validities were compared first with correlations of blame variables and DES and then with the correlations of blame variables and PRF-UND. Table 3-9 summarizes the results of these comparisons.

Overall, the convergent correlations were greater, in terms of absolute value, than the discriminant ones in 27 of the 32 comparisons (84%). Fourteen of the 16 SBS and OBS validity coefficients were greater than the discriminant correlations and 13 of the 16 SSQ validity coefficients were greater than their corresponding discriminant correlations. The differences ranged from $-.27$ to $.55$, with a mean difference of $.20$ ($SD=.20$) for the SBS and OBS comparisons and from $-.23$ to $.58$, with a mean difference of $.21$ ($SD=.21$) for the comparisons involving the SSQ validity coefficients. These results, once again, meet the criteria for convergent and discriminant validity reasonably well.

The fourth criterion requires similarity in the pattern of correlation between the two methods. To evaluate the correlation matrix against this criterion, the analysis was restricted to those measures which were used in both methods.

Table 3-9.

Summary of comparisons regarding Criterion 3 - Difference between convergent validities and correlations with monomethod-heterotraits.

Comparison	Values	Difference of Absolute Value
I - <u>SBS</u> , <u>OBS</u> -----		
1. <u>SBS/SSQ-SB</u> with <u>SBS/DES</u>	.39, .30	.09
2. <u>SBS/DMI-TAS</u> with <u>SBS/DES</u>	.51, .30	.31
3. <u>SBS/CSBS</u> with <u>SBS/DES</u>	.32, .30	.02
4. <u>SBS/CSSQ-SB</u> with <u>SBS/DES</u>	.03, .30	-.27
5. <u>OBS/SSQ-OB</u> with <u>OBS/DES</u>	.72, -.17	.55
6. <u>OBS/DMI-TAO</u> with <u>OBS/DES</u>	.50, -.17	.33
7. <u>OBS/COBS</u> with <u>OBS/DES</u>	.41, -.17	.24
8. <u>OBS/CSSQ-OB</u> with <u>OBS/DES</u>	.40, -.17	.23
9. <u>SBS/SSQ-SB</u> with <u>SBS/PRF-UND</u>	.39, .09	.30
10. <u>SBS/DMI-TAS</u> with <u>SBS/PRF-UND</u>	.51, .09	.42
11. <u>SBS/CSBS</u> with <u>SBS/PRF-UND</u>	.32, .09	.23
12. <u>SBS/CSSQ-SB</u> with <u>SBS/PRF-UND</u>	.03, .09	-.06
13. <u>OBS/SSQ-OB</u> with <u>OBS/PRF-UND</u>	.72, -.24	.48
14. <u>OBS/DMI-TAO</u> with <u>OBS/PRF-UND</u>	.50, -.24	.26
15. <u>OBS/COBS</u> with <u>OBS/PRF-UND</u>	.41, -.24	.17
16. <u>OBS/CSSQ-OB</u> with <u>OBS/PRF-UND</u>	.40, -.24	.16

(continued on next page)

(Table 3-9, continued)

II - <u>SSQ</u> -----		
17. <u>SSQ-SB/SBS</u> with <u>SSQ-SB/DES</u>	.39,-.13	.26
18. <u>SSQ-SB/DMI-TAS</u> with <u>SSQ-SB/DES</u>	.54,-.13	.41
19. <u>SSQ-SB/CSSQ-SB</u> with <u>SSQ-SB/DES</u>	.47,-.13	.34
20. <u>SSQ-SB/CSBS</u> with <u>SSQ-SB/DES</u>	.41,-.13	.28
21. <u>SSQ-OB/OBS</u> with <u>SSQ-OB/DES</u>	.72,-.49	.23
22. <u>SSQ-OB/DMI-TAO</u> with <u>SSQ-OB/DES</u>	.46,-.49	-.03
23. <u>SSQ-OB/CSSQ-OB</u> with <u>SSQ-OB/DES</u>	.37,-.49	-.12
24. <u>SSQ-OB/COBS</u> with <u>SSQ-OB/DES</u>	.26,-.49	-.23
25. <u>SSQ-SB/SBS</u> with <u>SSQ-SB/PRF-UND</u>	.39,-.15	.24
26. <u>SSQ-SB/DMI-TAS</u> with <u>SSQ-SB/PRF-UND</u>	.54,-.15	.39
27. <u>SSQ-SB/CSSQ-SB</u> with <u>SSQ-SB/PRF-UND</u>	.47,-.15	.32
28. <u>SSQ-SB/CSBS</u> with <u>SSQ-SB/PRF-UND</u>	.41,-.15	.26
29. <u>SSQ-OB/OBS</u> with <u>SSQ-OB/PRF-UND</u>	.72,-.14	.58
30. <u>SSQ-OB/DMI-TAO</u> with <u>SSQ-OB/PRF-UND</u>	.46,-.14	.32
31. <u>SSQ-OB/CSSQ-OB</u> with <u>SSQ-OB/PRF-UND</u>	.37,-.14	.23
32. <u>SSQ-OB/COBS</u> with <u>SSQ-OB/PRF-UND</u>	.26,-.14	.12

Note. With each comparison in this table, the correlation of the first pair of variables is hypothesized to be larger, in terms of absolute value, than that of the second pair.

The critical comparisons, summarized in Table 3-10, are thus between the ten intercorrelations of SBS, OBS and the SSQ variables and their corresponding intercorrelations among the CSBS, COBS and CSSQ variables. Similarity in the pattern was defined in terms of the significance and direction of the correlations.

As Table 3-10 shows, both correlations were significant and in the same direction in four of the ten comparisons. Both correlations were non-significant in two additional comparisons. In four of the comparisons, only one of the correlations was significant. Overall, then, the pattern of correlations matched in 6 of the 10 comparisons. This finding also supports the convergent/discriminant validity of the SBS, OBS, and SSQ blame scales, although not as strongly as in tests of some of the other criteria.

3.3.4 Partial Correlations

To account for the variation in SBS, OBS, and SSQ scores that might have been due to differences in the number of sessions of psychotherapy that clients had had, partial correlation coefficients were computed between the self-report and clinician-report versions of the SBS, OBS, and SSQ, using number of sessions as a control variable. It was thought that the number of sessions would have the clearest effect on the clinicians'

Table 3-10.Evaluation of Criterion 4 - Comparisons of the pattern of
intercorrelations across methods

	Self-report	Clinician-report

1. <u>SBS/OBS</u> with <u>CSBS/COBS</u>		-.35*, -.58*
2. <u>SBS/DES</u> with <u>CSBS/CDES</u>		.30, .14
3. <u>OBS/DES</u> with <u>COBS/CDES</u>		-.17, -.41*
4. <u>SSQ-SB/SSQ-OB</u> with <u>CSSQ-SB/CSSQ-OB</u>		.35*, -.16
5. <u>SBS/SSQ-SB</u> with <u>CSBS/CSSQ-SB</u>		.39*, .72*
6. <u>SBS/SSQ-OB</u> with <u>CSBS/CSSQ-OB</u>		-.20, -.47*
7. <u>OBS/SSQ-SB</u> with <u>COBS/CSSQ-SB</u>		.03, -.41*
8. <u>OBS/SSQ-OB</u> with <u>COBS/CSSQ-OB</u>		.72*, .78*
9. <u>DES/SSQ-OB</u> with <u>CDES/CSSQ-OB</u>		-.49*, -.38*
10. <u>DES/SSQ-SB</u> with <u>CDES/CSSQ-SB</u>		-.13, .09

Note. An agreement regarding the pattern of correlations occurs when both correlations are significant and in the same direction or when neither correlation is significant. SBS/OBS and SSQ variables only are used in this analysis because these were the only two measures used across both methods.

* $p < .05$, one-tailed.

knowledge of their clients and might influence the CSBS, COBS, and CSSQ scale scores. The resulting correlation matrix, presented in Table 3-11, was quite similar to the matrix of zero-order correlations, with the only notable gain being in the correlation of the self- and clinician-report of SBS. In general, the results of this analysis suggest that number of sessions did not have a great influence on clinicians' assessment of their patients on the SBS, OBS, and SSQ scales.

3.4 Discussion

Jackson (1967) called the MTMM matrix the "acid test" of the validity of psychological tests. Not only are hypotheses of convergent correlations with similar constructs taken into account, but also hypotheses regarding discriminant correlations. In addition, the MTMM examines the extent to which relationships among scores may be influenced by the method of assessment.

In this study, a number of psychological constructs were assessed using two different methods. For the first method, self- and other-blame were assessed using three different self-report measures. Self-blame measures were hypothesized to converge as were other-blame measures. Two other constructs, one of social desirability and the other a

Table 3-11

Partial correlations between clinician and self-report measures controlling for number of sessions.^a

	SBS	OBS	DES	SSQ-SB	SSQ-OB
1. CSBS	<u>.37</u>	-.42	-.17	<u>.43</u>	-.08
2. COBS	-.42	<u>.39</u>	-.25	-.11	<u>.22</u>
3. CDES	.04	-.24	<u>.59</u>	-.11	-.42
4. CSSQ-SB	<u>.06</u>	-.34	-.29	<u>.48</u>	-.02
5. CSSQ-OB	-.67	<u>.39</u>	-.42	-.13	<u>.37</u>

Note. Bolded and underlined coefficients represent convergent validities. Correlations larger than the absolute value of .33 are significant at $p < .05$, one-tailed.

^a $n = 27$.

measure of intellectual curiosity, were also assessed using the self-report format. These two constructs were hypothesized to be independent of self- and other-blame constructs. Two of the blame measures and one of the discriminant measures were also assessed using a second method, which consisted of clinicians' estimation of their clients' responses on these methods.

In general, the results support the convergent/discriminant validity of both the SBS OBS, and the SSQ. With the exception of two correlations, all of the predicted convergent correlations were positive and significant. This finding, while by itself incomplete as evidence of the validity of the measures, suggests that further validity work is warranted. Similarly, the general pattern of higher correlations among convergent measures than among discriminant measures suggests promise in subsequent validity work with these measures.

Several unpredicted results of this study also warrant comment. First, preliminary results indicated that, in this sample there was generally a high degree of association between the blame measures and the MCSQ. This was unpredicted, particularly for the SBS and OBS because the test development strategies had been designed to avoid high correlations with social desirability. The result is even

more perplexing in that correlations of most of the blame measures with the DES scale are typically lower than blame/MCSD correlations. Furthermore, even though the MSCD was correlated with DES in Study I, the two measures were not significantly correlated in this study.

Taken together, all of this suggests that the relationship between blame and social desirability may be specific to this sample. This interpretation is partially supported by a comparison of the correlations of the DMI variables and MCSD obtained in this sample to those reported in four different samples by Ihelivich and Gleser (1986). In the present study, TAS was correlated .52 and TAO, -.75 with MCSD. In Ihelivich and Gleser's report, the median correlation of TAS with MCSD was -.07 for males and .15 for females, and the median correlation of TAO with MCSD was -.30 for males and -.35 for females. While these correlations are not directly comparable because of sample size differences, the rather large differences, particular for the TAS/MCSD correlations, suggest some differences in the operation of social desirability across samples.

The question of how this relationship between social desirability and blame affected these results must be addressed. Do the high correlations between MCSD and the

blame variables weaken the conclusions regarding convergent/discriminant validity?

One set of findings in the study which addressed this issue is the correlations between clinician reports and the MCSD. These correlations, like those with the self-report blame measures, indicate a significant relationship between social desirability scores and clinician estimates of patients' responses. However, the MCSD concerns clients' tendencies to present themselves favourably on questionnaires by endorsing socially-favourable traits and by denying unfavourable traits. High correlations of measures with the MCSD are typically interpreted to mean that the social desirability trait is determining responses (Crowne and Marlowe, 1960). This interpretation, however, may not apply as straightforwardly to the correlation of clinician reports and the MCSD. Although some clinicians may have presented their clients favourably, the enterprise of psychotherapy usually requires that assessment of clients, such as those that were asked for in this study, be made in an objective fashion. It is therefore somewhat difficult to argue that therapists would be motivated to present their clients in a socially favourably light. Thus, the interpretation of the association of MCSD and blame variables as indicative of the operation of social desirability "response set" is called into question and the

interpretation of the MTMM matrix as support for the convergent/discriminant validity of the SBS, OBS, and SSQ blame scales may not be seriously threatened.

It is, nonetheless, difficult to interpret of the meaning of the blame/MCSD correlation. As mentioned earlier, the degree to which the social desirability of items undermines construct validity is a matter of great debate (Block, 1965; Wiggins, 1973). More recent discussions have converged on the conclusion that psychopathology will, by definition, be related to the values of the culture in which it occurs (McCrae and Costa, 1983; Paulhus, 1984). Removal of variability in measures that is due to the desirability construct may result in removal of important substantive information. Regardless of the interpretation of the blame/social desirability correlation in this study, caution should be used when comparing these results to other studies for at least two reasons; 1) because other studies do not show as strong a relationship between social desirability and blame-like constructs; and 2) because the sample was small in this study.

A second issue that needs to be addressed is the negative relationship between self- and other-blame that was observed in this study. Although no predictions about these

correlations were made in the MTMM analysis, the implicit assumption regarding these two constructs is that they are relatively independent. The test development strategy for the SBS and OBS, in fact, attempted to minimize the correlation of these scales by selecting only items which correlated higher with their own scale than they did with other scales. In Study I, SBS and OBS were minimally positively related. Previous studies of the SSQ also show a small positive correlation. The DMI-TAS and TAO scales are typically moderately negatively correlated. Thus, the results were similar to those predicted by past research with the SSQ and the DMI scales. The pattern of this study, however, suggests a tendency toward bipolar responding on the SBS and the OBS. That is, subjects who tended to score high on self-blame scales tended to score low on other-blame scales and vice versa. Further research with other samples will have to assess the generalizability of this finding.

A final issue that needs to be addressed is also related to the generalizability of these findings. There are several indications, noted above, that this might not have been a representative sample of psychiatric patients. The size of the sample, itself, creates sampling limitations in that it reduces the likelihood of covering the range of psychiatric difficulties presented by the out-patient

population. As well, the method of selection of subjects may have biased test scores in certain ways. It is likely, for example, that clinicians asked only those patients whom they would expect to complete the measures. Compliance to the request for participation implies a certain relationship between therapists and clients which might have excluded more hostile out-patients. A better strategy would have been to have all subjects complete the measures as part of an initial assessment battery and then have clinicians make their ratings as psychotherapy progresses.

Once again, these sampling limitations speak to the generalizability of the results. As is the case with much of psychological research, they should not be taken in isolation as evidence for the validity of the measures in question.

Chapter 4 - Study III

4.1 Introduction and Overview

This study was designed to test the predictive validity of the SBS and the OBS. This form of validity requires that a measure be adequate in its prediction of the psychological phenomena that it purports to measure (Wiggins, 1973; Anastasi, 1988; Nunnally, 1978). With respect to the validity of the SBS and the OBS, the measures should predict blaming reactions of individuals in accordance with sanctioning theory.

According to sanctioning theory, as outlined above, certain situations are likely to lead individuals to apply sanctions of blame to themselves or others in accordance with their idiosyncratic sanctioning style. One such situation which many undergraduate university students experience yearly is rejection of their applications to professional school. These rejections are quite common because of the small ratio of spaces to applicants in professional schools. According to estimates provided to the researcher by admission directors of five different professional schools (Medicine, Veterinary Medicine, Dentistry, Optometry, Social Work) the percentage of

rejection often ranges from 80 to 85% of the applicants. Although I know of no studies that document the psychological effects of these rejections, anecdotal evidence from the admissions directors suggests that many applicants experience negative reactions to rejection from a professional school. The reactions vary from anger and depression, to harsh self- and/or other-blaming. It is also apparently not uncommon for students to engage in appeals that implicate the application processes as having been unfair to them in some way. Reactions which are as public as this are perhaps the most dramatic. Equally as significant, however, are the less visible emotional reactions which many unsuccessful applicants presumably experience. In general, then, the variability of these reactions suggests that the process of professional school application is an appropriate context for the study of blaming.

Another characteristic of the application procedure which makes it suitable for studying blaming tendencies is its ambiguity. Students typically do not receive specific feedback regarding their application and thus rarely are they certain about the determinants of success or failure in their application.

This study involved a sample of applicants to a Master of Social Work programme. All applicants were invited to participate in the study and those who agreed to participate completed the SBS, OBS, SSQ, Causal Dimension Scale (CDS: Russell, 1982), Center for Epidemiological Studies Depression scale (CES-D; Radloff, 1977), and a questionnaire regarding their application prior to receiving feedback about the outcome of their application. After receiving notification of the outcome of the application they completed the CDS, the CES-D, an item asking subjects whom they blamed or credited for the outcome, and a series of open-ended questions regarding their reactions to the outcome of the application. The open-ended questions were analyzed for internally- and externally-directed hostile content.

The following predictions, which were based on the model presented in Figure 1-1, concerning the interrelationship of blaming tendencies, causal attributions, and depression, were tested in this study:

- 1) that the SBS and OBS would predict the blaming reactions of applicants who were not accepted into the program;
- 2) that the SBS and OBS account for more variation in post-outcome internal

attribution (CDS) scores than pre-outcome internal attribution scores (CDS);

3) that the SBS and OBS predict hostility directed inward and hostility directed outward reactions of applicants.

4) that the SBS and the OBS self- and other-blame scales predict depressive reactions, particularly for those who were not accepted in the programme.

4.2 Method

4.2.1 Subjects

Requests for participation, questionnaires, and consent forms were sent to the applicants for 1988 admission to Wilfrid Laurier University's Master of Social Work (MSW) programme. The materials were sent by the Faculty of Social Work along with a note from the admissions director explaining the independence of the research project from the admissions procedures and ensuring confidentiality.

Two hundred and twenty-six (80%) of the applicants were female and 56 (20%) were male. One hundred and seventeen (41.5%) of the 282 applicants returned completed questionnaires. Of these, 97 (82.9%) respondents were female

and 20(17.1%), male. The average age of these participants was 27.0(SD=5.57) with a range of 21 to 46.

Of the 117 who participated in the first phase of the study, 6 subjects did not complete consent forms and/or address requests indicating their preference to drop out of the study at that stage. Thus, materials for the second phase, which were sent out after admissions decisions had been communicated to subjects, were sent to the remaining 111 subjects who had consented to participate. Seventy-six(68.5%) applicants returned completed materials for the second phase of the study. Sixty-six(86.8%) of this group were female and 10(13.4%) were male. The average age of the sample who completed both the first and second set of materials was 27.31(SD=5.61) with a range of 21 to 46.

Table 4-1 provides a breakdown of the outcome status of the sample. Inspection of the table reveals a tendency for Phase II attrition of subjects who were not accepted into the programme. To test this, the 2 X 4 (level of participation X outcome) contingency table was tested for dependency. The χ^2 , with Yate's (1934) correction for low frequency cells was non-significant ($\chi^2(3, N=103)=6.02$, $p=.11$) suggesting that attrition may not significantly be related to outcome status.

Table 4 - 1.

Frequencies of outcomes by level of participation.

		Outcome			
		Accepted	Rejected	Alternative ^a	Withdrew Total
Participation					
Phase I and II	33	28	11	4	76
Phase I only	10	20	2	3	35

Note. $\chi^2 (3) = 6.02$ $p=.11$

^aThe "alternative" group was combined with the "rejected" group to make up the "unsuccessful" group in subsequent analyses.

The ratio of women to men was larger in the unsuccessful group than in the successful group (27 females:6 males versus 35 females:4 males).

The group of subjects who completed both phases of the study, and on whose responses most of the hypotheses were tested, constituted 26.9% percent of the total applicants to the university's MSW programme in 1988.

4.2.2 Materials

Self-Blame Scale (SBS) and Other-Blame Scale (OBS).

The SBS and the OBS as described in the previous two studies were used in this study. Although no hypotheses were tested regarding the Desirability Scale (DES) in this study, the items were included with the other SBS and the OBS items to diversify the content of the items.

Sanctioning Style Questionnaire (SSQ: Wollert, 1986).

The SSQ, as described in Study II, was included.

Causal Dimension Scale (CDS: Russell, 1982). The CDS is a nine-item measure of causal perceptions regarding specific events following Weiner's (Weiner, Russell, and Lerman, 1979) theory; dimensions of locus, stability, and controllability of causes are measured. Respondents list

possible causes for the event in question, and they then rate causes on each of the three causal dimensions. Although hypotheses in this study concerned the causal locus dimension, all three dimensions were administered to maintain standard administration conditions.

Russell (1982) reported reasonably good psychometric data for the CDS. Internal consistency estimates were .87, .84, and .73, respectively, for the locus, stability, and controllability subscales. A three-factor structure, corresponding to the scale's hypothesized dimensions, explained a substantial amount of variance in test scores. He also presented evidence that the subscales differentiated causal attributions that students made in semantic differential tasks. The CDS, as employed in this study, is presented in Appendix I.

Center for Epidemiological Studies Depression Scale (CES-D: Radloff, 1977). The CES-D is a 20-item self-report inventory which combines items from a number of other depression measures. It was selected because it was developed as a measure of symptomatology in the general population and considered to be useful for non-psychiatric settings (Shaw, Vallis, and McCabe, 1985). Another advantage of the CES-D is that it assesses mood symptoms other than self-blame. Other popular self-report measures

of depression, in contrast, tend to assess self-blame as symptom (i.e. Beck, et al, 1961). This distinction was considered important because the study was designed to test hypothesis about the predictability of depressed mood from blaming tendencies. Internal consistency coefficients for the CES-D in various samples have ranged from .77 to .92, a six-month stability of .54 has been reported, and moderate correlations with other self-report measures of depression and clinician ratings have been reported. (Shaw et al, 1985). The CES-D is presented in Appendix J.

Standardized grade point average (GPA). An index of applicants' GPA standing relative to all others applying was provided by the Faculty of Social Work. This index was developed by the Faculty to standardize the wide variety of grade systems that are represented on the transcripts of applicants from many universities. Following the transformation, each application receives a value from "1" to "12" which represents his or her average grade. The lowest value in the scheme represents a "D-" and the highest is an "A+".

Faculty ratings. This index was a rating of each applicant made by one, two, or three members of the Faculty of Social Work. After examining all of the materials submitted by an applicant, the faculty member rates the

application on a seven-point scale where "1" indicates "do not admit" and "7" indicates "superior candidate". The application is rated by more than one faculty member when there is uncertainty expressed about the rating.

Written verbal content measures - I: situationally-specific blame rankings. To assess subjects' assignment of blame and credit specific to the situation being studied, an item was included in the second phase of the study that asked subjects to "...list and rank order the circumstances, individuals, or groups of people whom you believe deserve credit or blame for the outcome of your applications". Responses were coded into a numerical index which took into account the object of blame or credit as well as the rank position of the statement. The highest ranking was assigned a weight which was equal to the total number of blame or credit statements given. Each subsequent ranking received an incrementally lower weight such that the lowest ranking was always equal to one. The weighted rankings were summed separately for self- and other-blame or credit and then divided by the total number of statements given. Resulting values were thought to reflect the proportion of weighted situational blame/credit rankings that were directed toward self- or others. They ranged from zero to one, where a value of zero indicated an other-blame reaction and a value of one, a self-blame reaction.

Written verbal content measures - II: open-ended questions regarding reactions to the application process. A series of open-ended questions, some of which were composed by the researcher and some of which were provided by the Faculty of Social Work, was included in the second phase of the study. In general, the questions asked subjects to comment on their experience of fairness throughout the application process and gave them opportunities to affirm or criticize themselves or the admission committee. Responses to the questions, which are listed in Appendix L, were coded for hostile and affirmative content using an adaptation of Gottshalk and Glesers's (1969) scoring system for analysis of verbal material. Gottshalk and Gleser's (1969) method of content analysis is applicable to verbal material in spoken or written form. The response were first divided into thought units. For example, the following transcription represents the division for coding of a response to a question about the strengths and weaknesses of the applications procedure:

"process was too slanted toward academics/even before applying I was aware that few people from _____ seem to meet the criteria/as a result I did not think my chances were good/had I had the opportunity I am confident I would have sold myself/decisions were communicated in a reasonable time frame/and communicated quickly".

Next, these units were coded in terms of type of

communication (i.e. hostility-directed-inward or hostility-directed-outward) and intensity of the communication. The coded values were summed to form separate scale for hostility-in (HI) and hostility-out (HO). The summed values were then divided by the total amount of verbal output. Because of the positive skewness encountered in the initial samples on which this method was tested, Gottshalk and Gleser recommended use of a square root transformation on the summed scores.

Gottshalk, Gleser, and Springer (1963) reported that trained coders typically achieved interrater reliabilities above .80 for the two scales being used here. Viney (1983), in summarizing the validity studies which have examined Gottshalk and Gleser's method, presented evidence of correspondence between the HI scale and measures of depression and moderate correlations between the HO scale and measures of hostility.

Two adaptations of this content analytic system were employed in this study. First, a two-point intensity rating, rather than the three-point rating suggested by Gottshalk and Gleser was used. This modification was made because it was considered unlikely that references to hostility as direct and violent as those required for a "3" coding would appear in the responses to this questionnaire.

A second adaptation was the addition of corresponding "affirmation" scales. Thus in addition to the HI and HO scales, scales were developed for self-affirmative content (SA) and for other-affirmative content (OA). The coding criteria for each of these four scales is presented in Appendix K.

Reliability of the content-analytic system was examined by having an independent rater analyze a random sample of approximately one third of the Phase II protocols. An equal number of successful and unsuccessful cases were used for the reliability check. The rater was a senior Ph.D. student in clinical psychology who had three years of experience in content analysis using a different system. The system and its adaptations to this study were first explained to him. Next, five practice protocols were scored together with the researcher. Following this training, the researcher and the rater scored 28 protocols independently.

The results of the reliability check were first analyzed on a scale by scale basis. Interrater correlations for the four scales ranged from .81 to .93 suggesting good agreement between two raters at the scale level. Because of the failure of a correlation coefficient to take into account additive biases that one or the other rater shows in scoring (Bartko and Carpenter, 1976), a second interrater

reliability coefficient was computed using Cohen's (1960) kappa. This index of interrater agreement reflects the chance-corrected proportion of agreement between two judges on assignment to nominal categories. Kappa for agreement between the two raters on the categories and intensity of hostile and affirmative content reached .87 attesting further to the reliability of the adaptation of Gottschalk and Gleser's content analytic system used in this study.

4.2.3 Procedures

Phase I. In the first phase of the study, subjects received a package which consisted of an introductory letter, a consent form, a demographic questionnaire, the SBS and the OBS scales, the blame scales of the SSQ, the CDS, and the CES-D. The letter, shown in Appendix L, described the research as concerning "...the way in which people differ in their reactions to life events" where "...the life event being studied is application to a graduate programme". It then went on to describe what was required for participation. The letter also assured its readers of the confidentiality of the data and independence of the study from the admission committee's task of selecting applicants. Applicants were informed that a summary of the results would be available following analyses of the data. The consent form, also displayed in Appendix L, reaffirmed

this commitment to confidentiality. Applicants were asked to indicate their willingness to participate by signing the consent form, completing the questionnaires and providing their mailing address.

On the demographic form, subjects were asked to provide some basic demographic information as well as some information about their history of applications to graduate school. There was also the following item; "in the light of your career aspirations and in light of other opportunities, how personally important do you consider the current application to the WLU MSW programme to be". The rating was made on a 9 point scale where "1" was "not at all important" and "9" was "very important".

As mentioned earlier, all of these materials were mailed by staff of Wilfrid Laurier University's Faculty of Social Work to ensure confidentiality. Applicants entered the study only after they volunteered their name and address and signed the consent form. Approximately one month after the first mail-out, a reminder card, informing applicants that the researcher "... would still appreciate receiving your responses", was again sent to all applicants.

Phase II. One week after confirmation from the Admissions director's office that all decisions had been

sent to applicants, the materials for the second phase of the study were sent to those applicants who had indicated their willingness to participate. This set of materials included a personalized instruction letter, questions asking subjects about the status of their graduate school applications, questions asking for reactions to the process and outcome of their MSW applications, the CDS, and the CES-D. All of these materials, other than the standardized questionnaires, are presented in Appendix L.

Approximately one month after Phase II materials had been sent out, a reminder card was mailed to those subjects who had not replied. A summary of the results of the study was sent to subjects who participated.

After all study materials had been returned, the list of names of participants was submitted to the Faculty of Social Work with a request for standardized GPA, faculty ratings, and decision regarding admission for each subject. These data were drawn from the files by a research assistant to ensure independence from any aspect of selection.

4.3 Results

4.3.1 Sample Characteristics

Unfortunately there were few data available on which to compare subjects who volunteered for the study with those who had chosen not to participate. Two comparisons were possible, however. First, as noted above, the sex composition of this sample was virtually identical to that in the group of non-participants. Second, a comparison of the standardized grade point average revealed that participants in the study had higher GPA's than non-participants ($t(301)=2.56$, $p<.001$, two-tailed). Thus the study sample overrepresents those applicants with higher GPA's.

In Table 4-2 subjects differing in their level of participation in the study are compared on demographic and test variables. The subjects who dropped out of the study after Phase I were compared with those who completed both phases. The only comparison that was marginally significant was that regarding the number of graduate school applications made by applicants ($t(109)=1.94$, $p=.056$, two-tailed). The marginality of this finding, combined with the reduced statistical power given the number of comparisons, limits its interpretability. Attrition, then, was not

Table 4-2.

Sample characteristics by level of participation

	Phase I only N=41	Phase I and II N=76	TOTAL N=117
Demographic-----			
Age	26.53(5.7)	27.30(5.6)	27.0(5.6)
% Female	79.0	86.8	82.9
No. of applications (present year)	2.62(2.4)	1.76(2.0)*	2.06(2.2)
Standardized GPA	7.92(1.4)	8.10(1.3)	8.05(1.3)
Faculty Ratings	4.33(1.4)	4.64(1.4)	4.53(1.4)
Psychometric-----			
SBS	61.72(13.7)	62.23(13.2)	62.06(13.3)
OBS	46.45(9.1)	44.31(11.75)	45.04(10.9)
SSQ-SB	25.67(8.4)	25.54(9.7)	25.59(9.2)
SSQ-OB	17.25(7.9)	16.42(6.7)	17.70(7.1)
CDS-LOCUS ^a	20.25(4.2)	19.75(4.4)	19.91(4.3)
CDS-STABILITY ^a	13.72(5.7)	13.67(6.8)	13.69(6.4)
CDS-CONTROL ^a	21.28(4.3)	20.69(4.7)	20.89(4.6)
CES-D	9.89(9.4)	11.54(10.6)	10.99(10.2)
DES	90.15(13.3)	91.74(14.7)	91.19(14.2)

Note. Means (and standard deviations) are presented, except for the % female row.

The following abbreviations are used for this table and all subsequent tables: CDS = Causal Dimension Scale; CES-D = Center for Epidemiological Studies Depression Scale.

^aSample sizes differ for CDS scales; Phase I, $n = 32$; Phase I and II, $n = 67$, Total $n = 99$.

* $p < .06$.

Table 4-3.

Sample characteristics - Psychometric variables across sex.

Variable-----	Females	Males
	n=97	n=19
SBS	61.70(13.5)	64.42(12.5)
OBS	45.56(11.4)	42.32(8.3)
SSQ-SB	25.86(9.5)	24.00(8.3)
SSQ-OB	17.03(7.2)	14.53(6.6)
CDS-LOCUS ^a	19.95(4.3)	19.86(4.7)
CDS-STABILITY ^a	13.58(6.7)	14.64(5.1)
CDS-CONTROL ^a	20.81(4.5)	21.57(4.9)
CES-D	11.02(10.3)	11.05(9.9)
DES	90.85(13.5)	94.00(17.3)

Note: Female-male totals do not agree with text because one subject did not provide gender information.

^aFor CDS variables \bar{n} = 84 for females and \bar{n} = 15 for males.

related to any of the demographic or psychometric variables.

Table 4-3 breaks the sample down by sex for the purposes of comparisons on the variables to be studied. As can be seen, there are no sex differences on any of these variables. This result justified combining the sex groups for subsequent analyses. A comparison of the means on SBS and the OBS scales with those from Study I shows that subjects in this group scored higher on SBS and DES, and they scored lower on the OBS scales (all p 's $< .001$).

4.3.2 Psychometric analysis

Because the reliability and structural validity of the SBS and the OBS has only been reported in Study I for the data set on which the items were selected, it is important to replicate these analyses on other samples. Internal consistency estimates and a principal components analysis were computed for the SBS and OBS items on this sample of applicants.

Coefficient alpha reached .82 for the SBS and .76 for the OBS. This replicates the findings of Study I, further supporting the internal consistency of these scales.

The principal components analysis, part of which is tabled in Table 4-4, also essentially replicated the

Table 4-4.Loadings for blame items on first two rotated principal components.*

Items	I	II
Friends who know me well would probably say I'm quick to blame myself for bad things that happen.	.746	
When looking for the reasons for bad things that happen to me, I tend to punish myself.	.706	.289
People who know me best consider me to be quite critical of myself.	.650	
If I'm not happy, its because I'm not performing well.	.562	.172
If I get caught speeding I'm likely to harshly criticize myself for being so dumb.	.540	-.174
If I was physically attacked, I would curse myself for putting myself in danger.	.515	.192
If a job would be hard to find, I'd be quick to blame it on my personal qualities.	.500	.347
One of the first thoughts to occur to me when I see people who are down and out is: "I didn't deserve this good life that I have".	.498	
When I fail or do poorly on a test I'm likely to wonder about my abilities.	.461	
It's my own fault that I'm not better at making choices during times of stress.	.434	-.178
There's usually a good reason to blame myself when bad things happen.	.430	
If I am late for an appointment it is usually because I have planned my time poorly.	.416	-.189
People who have psychological problems have no one to blame but themselves.	.398	.153
If I don't like my job its because I'm not making the most of it.	.382	
When I stand in long line waiting for a cashier I'd probably be thinking: "This is certainly poor timing on my part".	.368	
When I know that I'm responsible for a failure or misfortune, I blame myself.	.345	

(continued on next page)

(Table 4-4, continued)

If I don't do well on an exam, I'm likely to feel the instructor taught the course poorly.		.590
When I'm not happy, its often because others are giving me a rough time.		.556
Sometimes I get so frustrated with other peoples' shortcomings that I feel like giving them a good knock on the head.	.170	.543
When family conflicts arise, someone else is to blame most of the time.	.187	.540
If a job would be hard to find, I'd blame the people who run the economy.		.524
It burns me up at times to think of the misery others have put me through.	.256	.496
Friends who know me well would probably say that I'm quick to blame others for bad things that happen.		.481
When I stand in line waiting for cashiers I think to myself: "I wish this store would have a better way of handling customers".	.162	.466
If I were to get physically attacked, I would curse the police for not providing better protection to citizens.		.454
If my boss got fired, I would be thinking: "It serves him/her right".		.430
I'd be able to get my work done if other people wouldn't bother me.		.414
If I got caught speeding I would be sure that it was because police officers give tickets to meet daily quotas.		.411
If I were a nicer person I'd get along better with my friends and family.	.362	.389
When I know someone is responsible for a failure or mistake, I blame them.		.370
If a waitress spilled coffee on my new clothes, I'd want to let her know she'd been careless.	.246	.365
In a traffic jam I often think: "I wish people wouldn't get in my way when I'm in a hurry".		.358

Note. This table includes all loadings greater than .15.

^a_n = 117.

findings of Study I. The two first factors, which corresponded well to the hypothesized structure, accounted for 27% of the variance in the scores. Inspection of the table reveals only two inconsistencies in this pattern. The item, "...people who have psychological problems have no one to blame but themselves", which correlates .40 with the self-blame factor in this study, loaded on the other-blame factor in Study I. Similarly, the item "...if I were a better person I'd get along better with my friends and family" which correlates .39 with the other-blame factor in this study, loaded on the self-blame factor in Study I. In both of these cases, however, there was some correlation of the item with its own scale, particularly in the latter of these two cases. The cross loadings nonetheless indicate that the SBS and OBS may be more correlated in this sample than in Study I.

4.3.3 Concurrent correlations

In preparation for the correlational analyses, the data were examined for outliers and for skewness. Using the criteria of three standard deviations distance from the mean (Tabachnick and Fidell, 1983), no outliers were identified. The frequency distributions were examined for the SBS, OBS, SSQ, CDS, and CES-D with no indications of serious skewness.

A correlation matrix was computed for all of the test variables administered in Phase I (see Table 4-5). As expected from the principal components analysis, the SBS and

Table 4-5.

Concurrent correlations for Phase I variables^a.

	1.	2.	3.	4.	5.	6.	7.	8.
<hr/>								
1. SBS								
2. OBS	.29							
3. DES	-.09	-.03						
4. SSQ-SB	.65	.32	-.20					
5. SSQ-OB	.10	.40	-.24	.28				
6. CDS-LOCUS	-.01	-.17	.15	-.09	-.29			
7. CDS-STABILITY	.06	.00	.07	.03	-.02	.19		
8. CDS-CONTROL	.00	.11	.11	-.01	-.03	.43	.17	
9. CES-D	.32	.11	-.07	.40	.02	-.16	-.02	-.18

Note. Correlations not involving CDS scales are significant at $p < .05$, one-tailed, if they exceed the absolute value of .15. Correlations involving CDS scales are significant if they exceed the absolute value of .16.

^a $n = 117$ for all variables except CDS variables for which $n = 99$.

OBS were positively correlated. This result underscores the necessity of using partialling methods to assess the independent effects of each of the blame scales.

The significant and positive correlation of the SBS and the OBS with their corresponding SSQ scales replicates the findings of Study II, adding further evidence for concurrent validity of these two measures. In addition, the lack of correlation between these scales and DES supports the discriminant validity of the scales and their relative independence from a social desirability response set.

Other significant correlations that emerged and that generally support a sanctioning model of blame were the positive correlations between both the SBS and the SSQ-SB scales and the CES-D. These correlations suggest that subjects who scored high on the self-blame scales were more depressed than others. Although no correlation was observed between OBS and depression, this does not necessarily counter the sanctioning model in that this relationship is more likely to be observed predictively (Mittelstaedt and Wollert, 1987).

The only correlations involving the CDS scales which reached significance were those between internality scale of the CDS and other-blaming tendencies as assessed by both the OBS and SSQ-OB. Consistent with the content of these

scales, the relationship is negative, meaning that subjects who tended to blame others for failure and misfortune also tended to make external attributions when predicting their perceptions of the causes of the outcome.

Following the logic of this finding, it is curious that no correlation was found between the self-blame scales and the internality scale of the CDS. This result is no doubt partly due to the combination of a positive correlation among self- and other blame scales and a perfect negative relationship between internal and external attributions on the CDS. This incompatibility, itself, limits the possibility of observing a relationship between both self- and other-blame and the CDS scales.

The instructions and responses to the CDS suggested another possible explanation for this result. Specifically, the CDS asks subjects to list possible causes of the outcome and rate them on causal dimensions. During Phase I, however, subjects did not know what the outcome would be. It is unknown whether or not they were responding to the possibility of rejection. The blame scales, on the other hand, assume a negative outcome. Unfortunately, the meaning of the correlations involving Phase I CDS scores is uncertain. Based on these findings, it was considered inappropriate to employ these scores in subsequent analyses.

4.3.4 Comparisons across outcome groups

Subjects were sorted into groups of those who were accepted, rejected and who were placed on a waiting list. The records of four subjects who had sent in Phase II data, but who had withdrawn their applications prior to an admission decision, could not be used in further analyses. Because the waiting list group was too small for meaningful analyses, the applicants were included in a combined group of "rejected" and "alternative" applicants. Remaining, then, were data from 39 "unsuccessful" applicants and 33 "successful" applicants (see Table 4-1).

The first analysis was a comparison of successful and unsuccessful applicants on the measures that were to be used in subsequent hypothesis testing. Table 4-6 summarizes these comparisons, first with Phase I variables (independent variables and covariates) and second, with Phase II variables (dependent variables). Situational blame and credit rankings are not listed in the table, even though they are analyzed as dependent variables in subsequent regression equations. These two variables are not equatable across the groups because it was assumed that subjects in the successful group were making ratings of credit, while those in the unsuccessful group made ratings of blame.

Table 4-6.

Descriptive statistics for pre- and post-outcome variables across outcome groups.

	Successful n=33	Unsuccessful n=39
Pre-outcome-----		
SBS	62.39(14.7)	61.41(12.3)
OBS	42.30(11.1)	45.89(12.1)
SSQ-SB	26.21(12.2)	25.18(7.7)
SSQ-OB	16.03(6.2)	16.51(6.7)
CES-D	12.67(12.9)	10.90(8.8)
Post-outcome-----		
CDS-LOCUS	21.00(4.3)	16.08(5.1)*
CDS-STABILITY	16.77(6.5)	9.90(4.9)*
CDS-CONTROL	22.42(4.8)	17.67(5.4)*
HOSTILITY-IN	.212(.09)	.311(.11)*
HOSTILITY-OUT	.355(.16)	.528(.13)*
SELF-AFFIRMATION	.351(.11)	.340(.09)
OTHER-AFFIRMATION	.604(.17)	.465(.15)*
CES-D	8.89(11.6)	10.74(8.1)

Note. Because of skewness in the distribution of hostility and affirmation variables, the values presented in this table represent medians.

*p<.01, two-tailed.

As the table shows, there were no differences between the two groups on any of the independent variables and covariates suggesting that membership in either of the groups was unrelated to any of the Phase I variables.

There were significant differences between outcome groups on all of the Phase II variables except for self-affirmation and CES-D. These differences remained significant using a more stringent alpha level of $p < .005$ following the Bonferroni procedure (Cohen and Cohen, 1983) to account for the number of comparisons. With respect to the CDS scales, the differences suggest that subjects who were unsuccessful tended to make more external, unstable, and uncontrollable attributions regarding the outcome than their successful counterparts. With respect to the content analytic scales, the differences indicate that unsuccessful applicants were more hostile toward themselves and others and less affirmative toward others than successful candidates in their responses to the open-ended questions.

Taken together, these results suggest that unsuccessful applicants did experience some significant negative cognitive and emotional reactions to the rejection of their applications. The questions addressed in the subsequent analyses deal with differences within the groups which might be related to self- and other-blaming tendencies.

4.3.5 Hypothesis Tests

Hypothesis tests were conducted on four different sets of dependent variables: situationally-specific blaming reactions, the CDS-LOCUS scale, content-analyzed hostility measures and the CES-D. The predictor variables in all cases were the SBS and the OBS. The analytic strategy differed depending on the nature of the available data. With the first two hypothesis tests, zero- order and semi-partial correlational analyses were computed within the two outcome groups. The zero-order correlation tested the simple correlation of the predictor and criterion variables. The semi-partial correlation was used to assess the effects of the predictor blame variable on the criterion controlling for the effects of the blame variable not being tested. Regression equations were not used in these analyses because both dependent variables were bipolar, with each of their polar extremes representing a construct that was hypothesized to be assessed by a blame scale. For example, with the blame rankings, high scores indicated self-blame and low scores indicated other-blame. Given this characteristic of these criterion variables, more of which will be discussed later, it was impossible to state a priori which of the blame variables should enter a hierarchical equation first, and equally difficult to interpret post hoc why one variable entered a stepwise equation before the other.

Hierarchical regression analyses, however, were employed for tests involving the dependent measures of hostility and depression. With all of these hypothesis tests, predictions regarding main effects and interactions guided the order of variable entry. The conventional significance level of $p < .05$ was adopted for most hypothesis tests. Following Pedhazur (1982), however, more liberalized alpha levels were used for testing interactions within the overall regression equation because of the increased likelihood of Type II errors with this test. Follow-up tests of the difference of regression coefficients again used the conventional significance level.

1. Prediction of blaming reactions. To test the hypothesis that the SBS and the OBS predicted reactions of subjects to failure, zero-order and semi-partial correlations were computed for SBS and OBS. As Table 4-7 shows, both variables were negatively correlated with blame rankings that unsuccessful subjects gave (r 's (30) = $-.31$ and $-.42$, $p < .05$ and $p < .01$, one-tailed, respectively). This result suggests that high scores on both the SBS and the OBS were associated with other-blaming reactions. The semi-partial correlations, however, suggest that once the variance associated with other-blame is partialled from the SBS scores, it is no longer predictive of blaming reactions

Table 4-7.

Within outcome group zero order and semi-partial correlations between SBS/OBS and post-outcome situationally-specific blame/credit rankings and causal attributions of locus.

	Blame/Credit	CDS-LOCUS

Unsuccessful ^a -----		
SBS	-.31* (-.16)	.09 (.24)
OBS	-.42**(-.32*)	-.36* (-.43**)
Successful ^b -----		
SBS	-.29 (-.37*)	-.37* (-.34*)
OBS	.23 (.32)	-.15 (.05)

Note. Weighted rankings scores were evaluated on a dimension where low scores were other-blame or credit and high scores indicated self-blame or credit. Rankings were assumed to be about blame in the unsuccessful group and about credit in the successful group. CDS-LOCUS scores were evaluated on a dimension where low indicated external and high indicated internal causal attributions. Semi-partial correlation coefficients, controlling for the blame scale not being tested against the criteria, are parenthesized.

^a $n = 32$ for blame/credit correlations and $n = 39$ for CDS correlations. ^b $n = 32$ for blame credit correlations and $n = 31$ for CDS correlations.

* $p < .05$, one-tailed for unsuccessful candidates and $p < .05$, two-tailed for successful candidates. ** $p < .01$, one-tailed for unsuccessful group and $p < .01$, two-tailed for the successful group.

(semi-partial $r(30) = -.16$, ns) while OBS remains significantly predictive of blaming reactions even when the variance associated with self-blame is partialled (semi-partial $r(30) = -.32$, $p < .05$, one-tailed).

Table 4-7 also shows the same analyses for successful applicants. Although no hypotheses were formed about the relationship of SBS and the OBS variables to credit, the analysis was considered valuable as a further explication of the operation of blame in personality. Two-tailed significance tests were used because of the absence of hypotheses. The table shows that neither of the zero-order predictions of credit reactions was significant, but that partialled SBS was significantly negatively related to credit ($r(30) = -.37$, $p < .05$, two-tailed) suggesting that self-blaming subjects tended to give credit to others rather than to themselves after the success experience. Although the relationship of partialled OBS scores and credit was only marginally significant ($r(30) = .32$, $p = .08$, two-tailed), further tests of the hypothesis that other-blaming subjects tend to credit themselves more than others for success may be warranted.

Overall, tests of this first set of hypotheses lend some support to the validity of the SBS and the OBS. As predicted, the OBS scale predicted blaming reactions of

subjects. Although there were no significant relationships between self-blame and blaming reactions to rejection in this sample, there was indication that SBS tapped a construct usually thought of to be related to blame, namely credit. The results pointed to a tendency for self-blaming subjects not to congratulate or credit themselves after succeeding in the application.

2. Prediction of causal attributions of locus. To test the hypothesis that the SBS and the OBS scales predicted the causal attributions of locus that subjects made for failing in the application, zero-order and semi-partial correlations were computed between SBS and OBS and the CDS-LOCUS scale. Although the original hypothesis concerned the prediction of post-outcome attributions by the SBS and the OBS after the prediction of pre-outcome attributions was accounted for, the analysis was limited to simple prediction of causal attributions from the SBS and the OBS scales because of the difficulty interpreting pre-outcome CDS scores. The analysis was restricted to causal attributions of locus because this dimension is most often thought of as being related to blame.

The results, summarized in Table 4-7 are similar to those presented for the blame rankings. OBS was significantly negatively related to post-outcome causal

attributions, both before and after partialling of SBS variance ($r(37) = -.36$, $p < .05$, one-tailed; semi-partial $r(37) = -.43$, $p < .01$, one-tailed), indicating that individuals who scored high on the pre-outcome other-blame measures tended to make more external attributions for the causes of failing than subjects who scored lower on this measure. The SBS did not predict causal attributions for failure.

An additional analysis examined the relationship between the SBS and the OBS variables and causal attributions of locus for success. As Table 4-7 shows, SBS only was significantly related to these perceptions of the causes of the outcome ($r(29) = -.37$, $p < .05$, two-tailed; semi-partial $r(29) = -.34$, $p = .06$, two-tailed). The negative valence of these correlations indicates that self-blaming subjects were more likely than others to make external causal attributions for their success.

Overall, these results once again provide partial support for the validity of the blame measures. The prediction of causal attributions for failure by the OBS was confirmed. The SBS, while not predicting reactions for failure, was significantly related to reactions to success. Specifically, self-blaming subjects attributed the causes of their success to others.

3. Prediction of hostility. The third set of hypothesis tests concerned the hostile content that respondents gave in their responses to open-ended questions regarding their reactions to the application process. To test the hypotheses that self-blame would predict hostility-inward (HI), and that other-blame would predict hostility-outward (HO), hierarchical regression equations were computed separately predicting responses on HI and HO, respectively. In each case, the overall regression equation was examined first followed by examination of components of significant interactions. The blame measure being tested entered the equation after the effects of the measure not being tested were accounted for. Thus, in the case of predictions of HI, other-blame measures entered first, and self-blame entered second. With equations involving HO, self-blame entered first and other-blame second. The main effects due to outcome condition entered the equations third followed by outcome X SBS or OBS interactions.

The results for HI reactions are presented in Table 4-8. The overall regression equation accounted for a significant proportion of the HI variability ($F(5, 66)=4.71$, $p<.001$). As the table shows, the main effect for outcome was highly significant, confirming the large difference in

Table 4-8.

Overall hierarchical regression analyses with hostility-inward as dependent variable.

Variables	Multiple R	R ²	beta	r	F change
		(increment)	(at entry)	(zero order)	
OBS	.059	.004	-.059	-.059	.24
SBS	.737	.002	.047	.023	.14
OUTCOME	.477	.222	.477	.450*	19.54**
OB X OUTCOME	.488	.011			.97
SB X OUTCOME	.513	.025			2.19*

Note. All remaining tables are based on overall $n = 72$, with two outcome groups, unsuccessful $n = 39$ and successful $n = 33$. Beta coefficients and zero-order correlations for interaction terms are not tabled because they are difficult to interpret as individual components of the regression analysis (Cohen and Cohen, 1983). For interpretation of effects observed for outcome, see Table 4 -5 above.

** $p < .001$. * $p = .14$.

HI reactions between outcome groups. Using liberalized criteria for testing interactions suggested by Pedhazur(1982), the interaction of SBS and outcome was significant. A t-test of the differences of regression coefficients, however, revealed only marginal difference in the relationship of SBS and HI across groups ($t(70)=-1.47$, $p=.07$, one-tailed). The negative value of t in this test suggests that, contrary to predictions, the relationship of SBS and HI tended to be stronger in the successful group than in the unsuccessful group. Thus there was a tendency for self-blamers in the successful group to be more internally hostile than their counterparts in the unsuccessful group.

The results for HO reactions are presented in Table 4-9. The regression again accounted for a significant proportion of the variance in the dependent variable ($F(5, 66)=5.51$, $p<.001$). There was also a highly significant main effect for outcome, confirming differences between the groups with respect to hostile content. The zero-order correlation of OBS and the dependent variable was significant ($r(70)=.198$, $p<.05$, one-tailed), suggesting a tendency for other-blaming subjects to be more hostile in their responding to the open-ended questions. This relationship, however, did not emerge as a significant main

Table 4-9.

Overall hierarchical regression analyses with hostility-outward
as dependent variable.

Variables	Multiple R	R ²	b	r	F change
		(increment)	(at entry)	(zero order)	
<hr/>					
SBS	.087	.008	.087	.087	.53
OBS	.199	.032	.190	.198*	2.31
OUTCOME	.527	.238	.496	.508**	22.41**
SB X OUTCOME	.532	.005			.97
OB X OUTCOME	.543	.011			1.06

*p<.05, one-tailed. **p<.001

effect in the regression equation after partialling of SBS. No other main effects or interactions were significant.

The predictive effects of the blame variables on affirmation were tested on an exploratory basis, since no hypotheses had been made about this relationship. Separate regression equations were computed predicting the proportion of self- and other-affirming (SA and OA) responses. Because affirmation was considered to be the bipolar opposite of hostility, predictions regarding variance accounted for by the blame variables remained the same as those for hostility, with the only difference in prediction being the direction of the relationship. Self-blame was expected to predict the lack of SA content, and other blame, the lack of OA content. In view of these predictions the regression equations for self- and other-affirmation were the same as those for the hostility variables.

Table 4-10 summarizes the results of the regression analyses for SA. The regression did not account for a significant proportion of variance in the dependent variable suggesting that the set of blame variables was not related to subjects' tendency to respond with self-affirming statements ($F < 1.00$). This finding is further underscored by the lack of significant correlations between any of the independent variables and the dependent variables.

Table 4-10.

Overall hierarchical regression analyses with self-affirmation as dependent variable.

Variables	Multiple R	R ²	b	r	F change
		(increment)	(at entry)	(zero order)	
OBS	.091	.008	.091	.091	.59
SBS	.125	.007	.090	.111	.51
OUTCOME	.138	.004	-.060	-.052	.24
OB X OUTCOME	.213	.026			1.85
SB X OUTCOME	.242	.013			.90

The results for OA are summarized in Table 4-11. The regression accounted for a significant proportion of the variance in the dependent variable ($F(5, 66) = 3.84, p < .01$). There was a highly significant main effect for outcome, confirming that a difference existed in the proportion of OA statements made across outcome groups. The interaction of self-blame and outcome reached the significance criteria in both equations suggesting some differences across groups in the relationship of self-blame and OA. The interaction was further examined with a t-test of the difference of regression coefficients for OA on SBS. A two-tailed test was used for this analysis because there were no hypotheses about the direction of this relationship. The t-test was marginally significant for the difference of regression coefficients involving SBS ($t(70) = 1.84, p < .07$, two-tailed).

Inspection of the regression equations in these analyses indicated that this result was a reflection of the tendency for self-blaming subjects who had succeeded to be affirmative toward others.

Overall, the results of the analyses of hostile and affirmative content in subjects' responses to open-ended questions tended not to support the hypothesized relationships between the blame variables and hostility/affirmation. Only one of the results partially supported a prediction, namely, the weak, but significant

Table 4-11.

Overall hierarchical regression analyses with other-affirmation
as dependent variable.

Variables	Multiple R	R ²	b	r	F change
			(increment)	(at entry)	(zero order)
<hr/>					
SBS	.006	.000	.006	.006	.00
OBS	.090	.008	-.095	-.083	.56
OUTCOME	.403	.154	-.399	-.402**	12.49**
SB X OUTCOME	.451	.041			3.46*
OB X OUTCOME	.475	.022			1.91

* $p < .07$. ** $p < .001$

zero-order correlation between OBS and HO. The predictions regarding the blame variables and affirmation were also not supported. A finding contrary to the hypotheses was that self-blaming subjects in the successful group tended to be more self-critical than their unsuccessful counterparts. An unpredicted difference in the relationship between self-blame and OA was observed which suggested that self-blaming subjects tended to be affirmative toward others after succeeding in the application.

4. Prediction of depressive reactions. The final set of hypotheses concerned the relationship of the blame variables to depression. Following Wollert's sanctioning theory, it was hypothesized that both self- and other-blame would predict depressive reactions following failure. To test these hypotheses about depression, a hierarchical regression equation examined the predictive value of the SBS and the OBS. Because of the known test-retest correlation of the CES-D, a relationship between pre- and post-outcome CES-D was expected. The hypotheses, thus, were about depressive effects above and beyond those which could be accounted for by the Phase I depression. In the equation, pre-outcome CES-D was entered first, as a covariate. Self-blame was entered next because it was considered to be more directly related to depression (Mittelstaedt and Wollert, 1987). Other-blame entered the equation third. Effects due

to outcome or group membership were assessed fourth followed by the interactions of self- and other-blame with outcome.

The results of this regression analysis are summarized in Table 4-12. The amount of variance accounted for by the regression was significant ($F(6, 65)=4.07, p<.01$). Examination of the table, however, reveals that the significant regression is due mostly to a highly significant relationship between the covariate, pre-outcome CES-D, and the dependent variable ($F(1, 68)=18.87, p<.001$). No other main effects or interactions reached significance, suggesting that, in this sample, self- or other-blaming personality did not have much of a direct effect on depressive mood reactions.

Another result of this analysis should be noted. There was a significant zero-order correlation between SBS and post-outcome CES-D ($r(70)=.34, p <.05$, one-tailed) and a marginal correlation between OBS and CES-D ($r(70)=.18, p=.06$, one-tailed). This pattern of correlations, combined with the results of the multiple regression, suggest that the blame variables did not significantly predict post-outcome depression because of their correlation with pre-outcome CES-D.

Table 4-12.

Overall hierarchical regression analyses with CES-D as dependent variable.

Variables	Multiple R	R ²	b	r	F change
	(increment)		(at entry)	(zero order)	
PRE-OUTCOME CES-D	.461	.212	.461	.461**	18.87**
SBS	.485	.023	.170	.338*	2.10
OBS	.492	.006	.085	.184	.58
OUTCOME	.507	.015	.124	.095	1.33
SB X OUTCOME	.519	.013			1.17
OB X OUTCOME	.523	.003			.29

*p<.01, one-tailed. **p<.001

4.4 Discussion

The purpose of this study was to examine the predictive validity of the SBS and the OBS blame scales using a variety of dependent variables hypothesized to be related to self- and other-blame in a sample of graduate school applicants. It was expected that blaming predispositions would predict blaming patterns of unsuccessful subjects, causal attributions that subjects made for failing in the application, proportion of hostile content in their responses to open-ended questions and depressive mood reactions. The results of tests of these hypotheses provided only partial support for the predictive validity of the scales. The OBS, in particular, predicted blaming reactions and causal attributions that unsuccessful subjects made for their outcome. In addition, this measure was positively related to a measure of hostile content in responses to open-ended questions about the application procedure. Some support for the validity of the measures was also found in the significant and marginally significant positive zero-order correlations between both self- and other-blame and post-outcome CES-D. The weight of these results must be tempered, however, by the lack of a significant relationship between self- or other-blame and depressive reactions when pre-outcome mood variance was accounted for.

Several other unpredicted findings emerged that also support the validity of both SBS and the OBS. These results concerned the crediting and affirming reactions of successful applicants. Credit and affirmation are often viewed as being related to blame and hostility (Wollert, 1986). With respect to credit, there was a tendency for subjects who scored high on self-blame to give themselves less credit for successful outcome than lower scorers. Other-blaming subjects were also less likely than lower scorers to give credit to others following success. With respect to causal attributions, high scorers on the SBS tended to make more external attributions for their success in the application than others. In the analysis of affirmation, self-blaming subjects who succeeded were somewhat more likely than others to be affirmative toward others in describing their reactions to the application process.

While all of these results support the validity of the blame measures, the lack of significance in many of the predicted relationships must be addressed. It is particularly puzzling that none of the hypothesized predictive relationships involving SBS were observed. Given the consistency of this result, that is, the fact that self-blame did not predict self-blaming reactions, causal

attributions or hostility-inward of unsuccessful subjects, it may be tempting to conclude that the scale is simply not psychometrically valid. Alternatively, it might be concluded that the results of this study are evidence against a cross-situational personality conception of blaming behaviour.

Several issues regarding the make-up of this sample, however, mitigate against these premature conclusions. For one, the meaning of the failure for the unsuccessful subjects in the context of all other graduate school applications must be considered. Supplementary analysis of the available data concerning subjects' success in other competitions, indicated that nearly half (48.7%) of the unsuccessful applicants were entertaining offers at other graduate schools. The effects of rejection of one application were possibly minimized by their success elsewhere.

In addition to the possible mediating effect of other acceptances, there was some evidence to suggest that a number of unsuccessful subjects used a variety of coping strategies to buffer the effects of failure in the application. Although it is difficult to understand conclusively the meaning of success or failure for these subjects, responses to one of the open-ended questionnaires

may shed some light on this issue. In a supplementary analysis, responses to the item which asked subjects to state their feelings about the outcome were examined for indications of coping strategies which were thought to mediate the experience of failure. The data for unsuccessful applicants were split based on the absence or presence of at least one coping response to the "feeling" item. The statements of subjects who were hypothesized to be "copers" are displayed in Table 4-13.

Nineteen (49%) of the 39 unsuccessful subjects used a variety of strategies to deal with the failure. Examination of these statements revealed that some subjects felt relieved simply to have an answer and be able to pursue other plans, some were pleased to have a decision not to continue school in the next year, some seemed prepared by their own expectations, and some seemed to employ more classically-defined defensive strategies like intellectualization or denial. These strategies are diverse in terms of their content, yet they all may share the common function of changing the meaning of the failure in a way that avoids negative affect.

To examine the hypothesis that these strategies mediated affect associated with failure, t-tests comparing unsuccessful subjects who used coping strategies with those

Table 4-13.

Responses of selected unsuccessful subjects to an open-ended question regarding feelings about the outcome.

Subject	Statements
009	"everything has a reason and my life was richer for it; it's their loss."
016	"it's OK, I've had other offers; I still feel I have a lot to offer; do not feel less about myself due to this outcome."
027	"indifferent; not surprised; relieved to have an answer."
036	"not surprised; confident to re-apply to the MSW program next year; happy to hear the final outcome."
042	"comfortable; content; hopeful."
049	"I feel fine as I changed my course of interest after the application process began."
051	"I was expecting it; no surprise; not too disappointed; probably no hope to get in again."
054	"disappointed; relieved; I need a break from school; determined."
062	"disappointed; yet relieved; curious as to what the determining factor in the decision was."
076	"devastated; disappointed; at the same time relieved; it gives me some time over the next year to pursue my interests and have more options."
077	"not surprised; disappointed; gives me incentive for next time."
078	"disappointed; angry; relieved."
079	"expected."
082	"disappointed; resigned; c'est la vie."
090	"can't win them all; better chance next year; if I was meant to attend the MSW program this year, I would have been accepted, there are other plans for me."

(continued on next page)

(Table 4-13, continued)

- 092 "on hold; confused; waiting in anticipation."
- 093 "disappointed; irked; a little relieved to have some time off."
- 102 "I was disappointed; and surprised; as other universities had accepted me and WLU didn't."
- 110 "Vaguely disappointed; rejected; but basically indifferent; had already accepted an offer from (another university) one month earlier; I would have felt extremely disappointed and rejected if I hadn't been accepted elsewhere."
-

Note. These responses were selected on the basis of there being at least one "coping" statement among the whole set given to the item. The exact wording of the item on which the responses are based was "list three words or phrases which best describe how you feel about the outcome of the application."

who did not use these strategies on pre- and post-outcome depression and on SBS scores were computed. The prediction was supported in that the only comparison of these that was significant was for the post-outcome CES-D on which coping applicants scored significantly lower than the applicants who gave no coping responses on the item regarding feelings about outcome ($t(37)=1.99$, $p<.05$, one-tailed). With no differences on pre-outcome depression or on SBS it seems reasonable to suggest that subjects' standing on these variables did not account for their membership in the coping or non-coping group. Thus, there is some reason to believe that at least half of the subjects experienced less depression following rejection because of buffering effects of various coping strategies and that this "buffering" action occurred independent of blame or pre-outcome depression.

A related issue concerns the proportion of subjects in the unsuccessful group who did not return questionnaires. Because of limited data, comments regarding this group remain speculative. It is possible, however, that the attrition may have been due to particularly severe reactions to failure. The loss of data regarding such reactions would restrict the variability in the sample, thereby limiting the correlation of pre- and post-outcome measures. That there was a restriction of variability in the unsuccessful group

is further confirmed by the lower standard deviation of this group than the successful group on SBS, SSQ, and CES-D (see Table 4-6). This interpretation is also supported by the lack of a group difference on the post-outcome CES-D and a lack of difference between the pre- and post-outcome depression levels of unsuccessful candidates. Based on anecdotal evidence from admissions directors, differences across outcome groups would be expected on this measure as would differences from pre- to post-outcome for unsuccessful applicants. It is possible that the depression measure that was employed in the study was not sensitive enough to pick subtle mood differences that subjects experienced. Inspection of items of the CES-D shows that many of its items represent classical depressive symptoms in addition to mood symptoms. Perhaps the application outcome was sufficient to produce mood differences like those assessed by simple mood measures but not sufficient to produce other depression symptoms tapped by the CES-D.

Still, the lack of differences between groups may be due to attrition of a sub-group of subjects who had the most depressive reactions. Once again, the representativeness of the sample of unsuccessful applicants as a "failure" group is questioned. Indeed, it may be the case that the attrition of extreme scores may have resulted in the over-representation of so-called copers in the unsuccessful

group. The net effect of the uncertainty regarding the degree to which the unsuccessful group experienced their lack of success as failure is incomplete testing of the hypotheses regarding predictability of blaming reactions.

A final issue with regard to the lack of significant relationship between the blame measures and failure reactions concerns the complexity of the construct. Relatively straightforward predictions were made regarding blaming, attributions, hostility, depression. Only some of these predictions were met. It is interesting to note, that, in many cases, where predictions regarding subjects' self-blaming were not met, the self-blame measures predicted opposite reactions of successful candidates. For example, SBS significantly predicted subjects' tendency to give credit or affirmation to others after success. While this pattern of behaviour was not considered as part of the concept of self-blame, the findings in this study raise the possibility that blaming personality tendencies also influence behaviour in successful situations. Those with self-blaming tendencies may be unable to give themselves credit or affirmation for succeeding, and persons who show other blaming tendencies may find it difficult to give others credit or affirmation after their success. These possibilities, while only addressed superficially here, merit future research attention.

Chapter 5 - General Discussion

5.1 Review of Objectives and Findings

Conventional "clinical wisdom" maintains that people vary in the intensity and amount of blame they direct to themselves and others after failing or experiencing misfortune. They also presumably vary in the generality of their blaming reactions; for some, any experience of failure may be a cue for self- or other-blame, while for others, blaming behaviour is cued only by certain discriminative stimuli.

The degree to which individuals suffer indirect or direct emotional consequences of persistently holding themselves or others responsible for failure is a further topic of interest. The lack of reliable and valid personality measures of blaming tendencies has imposed limits on the research. More specifically, although some research has linked blaming personality tendencies to depression, conclusions remain uncertain because of difficulties in operationalization of blaming tendencies.

The objectives of this research, in review, were to; a) develop item pools that represent cross-situational exemplars of self- and other-blaming attitudes and

reactions; b) minimize the influence of socially desirable responding at the item level by selecting only those items which correlated minimally with tests of social desirability; c) test for homogeneity of content (internal consistency) of the resulting blaming scales; d) test the structural integrity of the scales by assessing the degree to which the items correlate with the principal components of the self- and other-blame scales; e) test the validity of the scales using a variety of mono- and hetero-method convergent and discriminant measures; and f) test the validity of the blame scales in predicting real-life blaming reactions, causal attributions, hostile responses, and depressive symptoms. The success of the research with respect to these objectives is reviewed in the following brief summary.

The Self- and Other-blame Scales (SBS and OBS, respectively) were selected from an item pool which was hypothesized to represent self- and other-blaming tendencies. In three different samples, the items from both scales showed low correlation with a composite of items that had been rated by pilot subjects as being highly socially desirable. Correlations with the Marlowe-Crowne Social Desirability Scale (MCSD), however, were moderately high in the second sample suggesting there may have been a positive

relationship of social desirability with SBS and a negative one with OBS.

In two independent samples, the SBS and the OBS scales were found to have adequate internal consistency, they represented the first two components in a principal components analysis and their composites were only moderately correlated. These findings were interpreted to provide some evidence for homogeneity of content and structural integrity of the SBS and the OBS scales. It is interesting to note, however, that in the small sample of clinical subjects, the SBS and OBS scales were negatively correlated. This relationship between self- and other-blaming personality tendencies might have been, to some extent, sample-dependent. In college students, for example, self- and other-blaming tendencies may occur concurrently, while, in psychiatric patients there may be more polarization of these tendencies.

The SBS and the OBS composites contain a mixture of items regarding causal attributions, blaming statements directed internally or externally, and expressions of criticism toward self or others. Given this mixture of content, the scales appear to represent broad definitions of the construct which includes theoretical contributions from

social inference, psychodynamic, interpersonal, and sanctioning theory.

Based on data from two independent samples in Study II and III, concurrent validity of the SBS and the OBS with other similar measures was judged to be adequate. In both of these studies, the self- and other-blame scales were significantly positively correlated with the corresponding blame scales of the Sanctioning Style Questionnaire (SSQ). In Study II, the SBS and the OBS were significantly related with corresponding scales from the Defense Mechanisms Inventory (DMI).

Some preliminary evidence for convergent/discriminant validity of the SBS and the OBS, as assessed by self- and clinician- report, was found in Study II. Conclusions from Study II, however, must remain preliminary because of sampling limitations. In addition to the small size of the sample, the lack of sex differences on variables which usually discriminate males and females suggested that the results might not generalize to other samples. Notwithstanding these limitations, the matrix of convergent and discriminant correlations conformed relatively well to the criteria for validity introduced by Campbell and Fiske (1959). Future research using a multi-trait multi-method correlation matrix with the SBS, OBS and SSQ scales in large

samples should employ confirmatory factor analysis to further examine the convergent and discriminant validity of these blame scales.

Results from Study III provided partial support for predictive validity of the SBS and the OBS. In particular, predictions involving OBS were promising. Blaming reactions and internal attributions of subjects who were unsuccessful in a graduate school application were related to OBS scores.

The results suggested that high scores on OBS were associated with a tendency to blame others and to make more external attributions for lack of success in the application. There was also a weaker tendency for other-blaming subjects to direct hostility externally, regardless of outcome.

The predictions regarding self-blaming reactions, causal attributions, and hostility-inward from SBS were not confirmed in Study III. In addition, although significant concurrent and predictive zero-order correlations were found between SBS and depression, the self-blame measure did not account for variance in depression after the effects of pre-outcome depression were statistically controlled. While these findings might suggest the invalidity of this assessment of self-blaming personality tendencies, another explanation might equally well account for the absence of a

relationship between self-blame and depressive symptoms in Study III. The speculation was made that there might have been an over-representation of unsuccessful applicants who did not suffer negative effects of being rejected from graduate school. This speculation was based on the observation of a large attrition rate of unsuccessful subjects in the second phase of the study and on supplementary analyses which indicated that over half of the subjects in the unsuccessful group used various psychological coping strategies to buffer against negative personal implications of the failure, thereby minimizing the operation of any self-esteem damaging cognitions like self-blame.

Some significant relationships between SBS and OBS and reactions to success in the application pointed to further directions in understanding the blaming process. SBS was negatively related to self-crediting reactions, causal attributions for success, and positively related to other-affirmation. That is, self-blaming applicants who were admitted to graduate school tended not to give themselves credit for succeeding, to attribute their success to external causes, and to affirm others after their own success. Because these relationships were not hypothesized, their significance as components of self- and other-blaming

personalities will need to be established in subsequent research.

5.2 Theoretical Significance of the Findings

These studies have also provided some support for the sanctioning theory of blame (Wollert, 1986; Wollert, et al, 1983). To summarize, sanctioning theory asserts that the direction, valence, and intensity of individuals' sanctioning of external and internal objects is influential in determining their reactions to life events. More specifically, individuals whose relationships with external objects are characterized by negative sanctions are likely to blame others and make external causal attributions for failure and misfortune. Similarly, individuals who tend to sanction themselves negatively are predicted to blame themselves and make internal attributions following failure. Wollert further suggested that self-blame leads directly to depression because of its undermining of self-esteem, and that other-blame leads indirectly to depression because of the interpersonal alienation associated with blaming others.

Support for sanctioning theory was found in several of the results of these studies. First, the development of internally consistent measures of self- and other-blame scales which represent sanctioning behaviour across

situations supports the idea that individuals establish characteristic relationships with their object-world. The items, which were found to be highly intercorrelated, represent a variety of exemplars of negative sanctioning self-statements including, causal attribution, criticism, judgment of responsibility and direct judgments of blame. Having items as diverse as these included in the SBS and the OBS results in a broader conception of blame than implied in measures of attributional styles (Peterson et al, 1982) and in a narrower conception than seen in measures of interpersonal hostility (Gleser and Ihilevich, 1969; Kiesler, 1982). In the former measure, blame is conceptualized only in terms of causal attributions. This interpretation of blaming judgments has been criticized on conceptual (Shaver and Drown, 1986; Brewin and Antaki, 1987) and empirical grounds (Wollert, et al, 1983; Harvey and Rule, 1978). In the latter measures, blame judgments are considered to be only one of many hostile behaviours. This conceptualization, it has been argued, results in some loss of precision in the prediction of specific blaming behaviour.

Second, the significant concurrent relationships among various measures of blame (SBS, OBS, SSQ scales, DMI scales) lends further support to the constructs which are central to the theory (Cronbach and Meehl, 1955). The construct

validity of blaming tendencies is supported further by the total pattern of correlations among convergent and discriminant measures.

Third, the prediction of blaming reactions and causal attribution by the OBS scale supports the idea that reactions to situations are influenced by dispositions to respond with negative sanctions. The OBS, which was administered in Phase I of Study III, was correlated with unsuccessful applicants' response on a Phase II item which asked them to rank order whom they blamed for their negative outcome. An assumption in much of the literature on social inference is that most of the variance in judgments of blame is explained by the qualities of the situation (Shaver, 1985; Fincham and Jaspars, 1980; Lerner and Miller, 1978). This assumption does not take into account the possibility that perceptual and information processing about these situations may be influenced by response dispositions, which in turn may be a function of previous developmental factors. The present findings suggest that these factors are relevant and should be included in the emerging theories of blame (Fincham and Bradbury, 1987; Shaver, 1985).

Fincham and Bradbury (1987) recently demonstrated the utility of considering cognitive bias as a variable in their model of blaming in close relationships. This variable,

though labelled in cognitive terminology, is probably quite similar to blaming predispositions as discussed here.

Similarly, Shaver (1985), in a theoretical presentation of antecedents of blame judgments acknowledged that his theory did not account for the potentially influential source of variation in blame which is associated with response dispositions.

Fourth, although the direction of causality is ambiguous from these studies, the concurrent and predictive correlations between self-blame and depression are consistent with the predictions of sanctioning theory. The ambiguity regarding causality remains, however, because in the stringent test in Study III of the prospective hypothesis of self-blame and depression, pre-outcome depression proved to be the only predictor of post-outcome depression. The degree to which the initial depression levels of subjects were affected by negative self-sanctions is not known. In addition, there was some evidence that a number of subjects in this sample did not respond to the failure with increased self-blame, internal attribution, or hostility-directed inward.

The results of the research suggest some more development in the theory is warranted regarding the interaction of blaming tendencies and characteristic coping

or defensive strategies which mediate emotional consequences. It was previously argued that coping strategies like those demonstrated by some of the Study III subjects may occur for some individuals in response to self-esteem cognitions like self-blame. If this is the case, characteristic coping styles might operate independent of blaming tendencies such that some individuals never allow themselves to experience negative effects of blaming themselves or others. In terms of sanctioning processes, the theory might be developed to allow that individuals acknowledge their blaming tendencies in situations when their self-esteem is not threatened (i.e., when completing a questionnaire like the SBS) but then defend against these tendencies when faced with a "real-life" threat. In terms of Figure 1-1 (p. 36), coping or defensive strategies would presumably operate somewhere between the blaming or inferential operations (column 3) and the cognitive, affective and interpersonal outcomes (column 4).

Although some explanations for the lack of prediction of self-blaming reactions have already been advanced, another issue, more theoretical in nature, may now be considered. It should be noted that the manner in which blame was assessed in the SBS and the OBS was somewhat at variance with its usual operationalization. The most common assessment of blame involves rating scales on which

self-blame or internal attribution is verbally anchored on one extreme and other-blame or external attribution, on the other extreme (Peterson et al, 1982; Russell, 1982). In contrast, the blame scales introduced in these studies were developed following the assumption from sanctioning theory that self- and other-blaming tendencies each contribute independent sources of variability to subsequent judgments of blame. From a psychometric standpoint, a correlation approaching zero between two independent constructs is ideal.

The assumption of independence of self- and other-blaming tendencies requires that after a series of negative outcomes, there must be at least four alternatives; 1) subjects blame themselves consistently; 2) they blame someone or something else consistently 3) they blame themselves and others consistently; 4) they blame no one consistently. This variability is not captured in bipolar scales of blame and causal attribution that are typically employed in research and that were employed in the Study III because these scales assume that if a subject is not blaming him or herself, he or she is blaming someone or something else. The options of no-blame or intense self- and other-blame is not offered. In this sense, there was a mismatch in the theory underlying the SBS and OBS and the theory

underlying the situationally-specific blame ratings of Study III and the CDS.

This theoretical difference is relevant to the lack of prediction by the SBS scale because the possibility of predicting both self- and other-blaming responses with the SBS and the OBS scales is severely limited if the criterion responses are bipolar scales. By definition, if there is a significant correlation of one of the SBS and the OBS scales with a bipolar blame judgment, the likelihood of there being a significant correlation of the other scale with the blame judgment is greatly reduced. Given that other-blame was found to be related to judgments of blame and causal attributions for failure, and that self-blame was not related to these failure reactions, the independence of these constructs is confirmed. What is unknown and clearly relevant to this line of discussion, is whether or not these results would have been similar if independent assessments of self- and other-blame judgments post-outcome would have been undertaken. A study examining this issue would add significantly to the understanding of blame. In such a study, blaming judgments might be assessed with separate items for self- and other-blame questions (i.e., "how much do you blame yourself for the outcome?" and "how much do you blame others for the outcome?").

On a related theme, a word should be said about the theoretical implications of the different pattern of correlations among self-and other-blame scales which emerged in different populations. Specifically, it was found that in both undergraduate university populations, the two constructs, as assessed by SBS, OBS and SSQ scales, were moderately positively correlated. This correlation might be interpreted to represent a proportion of method variance that exists in the measures. That is, self- and other-blaming tendencies are positively related because they are assessed using a likert scale for rating items.

The dramatically different pattern in the clinical sample, however, where significant negative correlations of self- and other-blame were found, raises the possibility that the relationship of these two constructs may actually be sample-dependent. Sample-specific results are interpretively problematic for the SBS and the OBS, but this particular result may also suggest some sensitivity to real differences between these two populations. For example, in the case of the student population, self- and other-blaming, or the absence of these tendencies, may occur simultaneously, while in the outpatient sample, subjects might have been more inclined to describe their behaviour as either typically self-blaming or other-blaming. Whether or not this polarization of responses is a function of being

psychologically distressed or of the initial effects of psychotherapy is unknown from the data of this study. The difference in the pattern of correlations, nonetheless, constitutes another important direction for sanctioning theory research.

The relationship between SBS and the causal attributions and affirmation of successful subjects suggests some value in a further direction in theorizing regarding this construct. Much has been written about what self-blaming individuals are likely to do when faced with failure and misfortune. Very little, however, is said about how they are likely to react when facing success. One acknowledgement of such a difference is in Abramson, Seligman, and Teasdale's (1978) reformulation of the learned helplessness theory, in which they hypothesize that the tendency to attribute the causes of success to external, unstable, and specific causes is part of depressogenic attributional style. Similarly, research has also been carried comparing attributional responses of women versus those of men. Frieze, Whitley, Hanusa, and McHugh (1982), for example, introduce the "self-derogatory" model, in which women are seen as more likely than men to attribute the causes of success to external sources. These attributional patterns occur as a function of differential socialization for gender roles with respect to success and failure

experiences. Although the research support for Frieze et al's position has been mixed (e.g., Martin and Nivens, 1987), the self-derogatory attributional model may apply to the present findings in that the sample of Study III was clearly overrepresented by women. The present findings suggest that further work with the SBS and the OBS scales examining the issue of reactions to success would be valuable.

Another issue which this study began to address concerned the relationship of hostility and blame. These two variables, intensely studied in separate research areas, have rarely been studied together. Although the predictive relationship between OBS and hostile content was weak, relatively strong correlations emerged with concurrent administrations of both the SBS and the OBS and the SSQ with the DMI "turning against self" and "turning against objects" scales which are hypothesized to be measures of hostility (Gleser and Ihilevich, 1969). These findings, even if not interpreted as direct support for the relationship of blaming tendencies and hostility, may encourage further rapproachment between these areas of personality study.

5.3 Methodological Implications

The methods employed in these studies deserve some attention. To begin, the studies represent an initial attempt to integrate several theories of blame with the methods and concerns of personality test development. The theories of blame that were considered emerge from distinct historical traditions: social inference theories from the social psychological laboratory; psychodynamic theories from the clinical consulting room; and interpersonal theories from social psychiatry, anthropology and the behaviourist movement. Personality test development methods come out of still another historical tradition, namely, the testing movement. Because of these distinct traditions and their resulting areas of emphasis, rapproachment has been negligible, particularly in the development of so-called "cognitive" constructs. Each of these distinct areas of study provides valuable contributions to the understanding of how and why people display invariances in blaming reactions. The results of the studies, and the questions for further study that they raise, attest to the value of adopting a psychometric approach to studying blame in personality.

In Study I, the effects of social desirability were controlled to some extent by following Jackson's (1967)

method. Items were selected for the scales based on their relatively low correlation with measures which were thought to reflect tendency to respond to socially favourable self-descriptions and tendency to deny socially unfavourable self-descriptions. The results regarding the success of the method were variable across samples and methods of assessment of social desirability. In Study I, the correlations of the blame scales with the MCSD were non-significant. The correlations of the blame scales with an Undesirability scale, a composite of items representing socially unfavourable self-descriptions, were positive for SBS and OBS. According to some writers, this relationship will be virtually impossible to eliminate in assessment of traits that are not considered societly acceptable (McCrae and Costa, 1983). These same authors argue, however, that because of the inherent undesirability of such traits, and the lack of consciousness in their rejection as self-descriptions, effects of this non-content variable do not distort responses as seriously as the tendency to consciously manage one's impression with questionnaire responses.

In Study II using a clinical sample, moderate correlations between the MCSD and the blame scales were observed. The meaning of these correlations is more difficult to interpret because the same pattern of

correlations was observed between clinician versions of the SBS and the OBS scales and the MCSD. The possibility can not be completely discounted, however, that these results suggest the operation of social desirability in this sample.

Social desirability has only recently come to be recognized as influential in studies concerning attribution and blame. Brewin and Antaki (1987), in a discussion of the ways in which the meaning of causal attributions can vary, point out that blame and attribution are usually public events and are thus subject to self-presentational biases. They go on to provide examples of how self-blame may be used to gain positive interpersonal responses from others (e.g., rewards for modesty, minimization of performance expectations) and how external attribution for failure is often used to defend against self-esteem injury (i.e., a self-serving bias). The difference in the mean social desirability values for SBS and OBS items was in the direction predicted by Brewin and Antaki's analysis. In addition, where correlations between blame and the MCSD were observed, the pattern that emerged was also in the direction suggested by Brewin and Antaki, namely, with social desirability being positively correlated with self-blame and negatively correlated with other-blame. These results support the suggestion that the meanings of attribution and

blame statements need to be more carefully considered by researchers.

Perhaps the most that can be said for now regarding the effects of social desirability on the SBS and the OBS is that using Jackson's (1967) method of reducing these effects at the item level should increase the validity of the SBS and the OBS scales. The generality of this claim needs to be examined in other studies with diverse samples and various assessments of social desirability. In addition, because the social desirability construct was proposed as a threat to the validity of psychological tests (Edwards, 1957), its distortion of the meaning of test scores can partially be determined by the lack of criterion and predictive validity of tests. Thus, the degree to which the SBS and the OBS are shown to be valid in predicting blaming tendencies will confirm the success of controlling for social desirability.

An additional component of Jackson's method guided initial development of the SBS and the OBS. The assumption was made that self- and other blaming tendencies represented independent psychological constructs. Consistent with this assumption, items were chosen only if they correlated higher with their scale score than they did with the other SBS and the OBS scale scores. Evidence of the relative success of

this approach was found in the consistency of factorial structure across similar samples.

Two methodological innovations were introduced in the validity studies. First, using both patient and clinician versions of two different measures provided a novel approach to dealing with multi-method assessment of constructs. Clinician ratings are valuable because psychotherapists presumably have a relatively objective view of the patient.

Some improvements in this method can be suggested. Specifically, it would be better to have patients complete the measures prior to beginning therapy, so that responses would not be influenced by knowledge that the therapist is completing a parallel form and so that a more representative sample of patients might be obtained. Parallel forms might also be used in a validity study with non-psychiatric populations where one rater knows the other quite well (i.e., spouses or roommates).

A second innovation, introduced in Study III, was the use of a less obtrusive measure of hostility. The content analytic system of Gottshalk and Gleser(1969), adapted for the present study, provided a reliable assessment of four categories of verbal content that subjects gave in open-ended responses. The method of content analysis, as applied to the present study, discriminated between successful and

unsuccessful candidates in three of the four categories of content, two of which were also related to the blame measures. Although the method is typically used with limited samples of conversation (Viney, 1983), these results support its value in analyzing other forms of verbal data.

Several methodological limitations of the studies should also be addressed. First, as already mentioned in several places, the results of these studies are limited in generalizability because of sampling constraints. The validity of the SBS and the OBS and the theoretical issues broached in this research must be addressed in research using a variety of populations. Relevant categories for comparisons across populations would include males versus females and university students versus general population versus clinic population. Other valuable comparisons on SBS and the OBS dimensions could occur within the clinic population. For example, the relationship of SBS and the OBS scores to reliably assessed diagnostic categories would provide an important contribution to the study of blaming personality tendencies.

In addition to representativeness of samples, large sample studies are also needed using the SBS and the OBS scales. Because only one quarter of the variance was accounted for in both principal components analyses, there

is the possibility of multi-dimensionality within the hypothesized scales. With larger samples, exploratory factor analyses assessing the dimensionality within the SBS and OBS scales could be carried out. With larger sample validity studies, similar studies to the clinical study reported here could be analyzed using technical advances in confirmatory factor analysis (Marsh and Hocevar, 1983). As well, with larger and more representative samples of subjects who experience failures, more powerful tests of sanctioning theory could be carried out, leading to more confident conclusions regarding the interactive effects of blaming personality tendencies, failure experiences, and coping.

Because of the theoretical importance of investigating the independence of sanctions and attributions, it was unfortunate that hypotheses regarding the comparative prediction of SBS and the OBS and CDS scales could not be tested in Study III. Unfortunately, the measures differed in the valence of events that were being rated, as evident in the pre-outcome correlation matrix. In the SBS and the OBS, the events are generally negative, while with the pre-outcome CDS, the valence of the event was unknown to subjects, thereby making the two measures incompatible. To correct this problem, it might be useful to specify the causes on the CDS hypothetically such that subjects are

forced to predict what their attributions would likely be for failure or success.

Finally, as discussed above, there was some ambiguity regarding prediction of self-blaming and crediting judgments introduced by the absence of an independent assessment for self-blame and credit in the post-outcome phase of Study III. Future studies using the SBS and the OBS scales to predict blame judgments should assess situational blame by asking separate questions about how much respondents are blaming themselves and how much they blame others for the negative events being studied.

5.4 Clinical Significance

An important step toward integrating attributional research with clinical concerns occurred with Abramson, Seligman, and Teasdale's (1978) reformulation of the learned helplessness model of depression. Since then, there has been a great deal of research attempting to establish relationships between attributional constructs and various clinical phenomena. Some would say the transition of attribution research from the laboratory to the clinic has been successful (Peterson and Seligman, 1984; Sweeney, Anderson, and Bailey, 1986), while others are not so

sanguine about the applications of attribution theory to clinical issues (Wollert, 1987; Brewin and Antaki, 1987).

Whatever the ultimate fate of attributional constructs in the explanation of clinical phenomena it is clear that some progress is being made in the refinement of clinical applications. In particular, there seems to have been some doubt cast on the assumption that causal explanations are primary and direct causes of mood changes (Brewin, 1985; Coyne and Gotlib, 1983). There have also been questions about the degree to which attributional theories account for the kinds of blaming that occur in psychotherapy sessions (Wollert, 1987). Prompted by such questions other constructs such as blame that are related to causal attribution, but that are more easily linked to clinical experience have been developed (Wollert, 1987; Fincham and Bradbury, 1987).

These studies follow a line of research which seeks to improve on the initial applications of attributional theories to clinical issues by developing an assessment measure of blaming tendencies which goes beyond a strictly cognitive conception. The conception of sanctioning styles or blaming tendencies advanced herein is based on clinical observations of the co-occurrence of blaming behaviour, depressed affect, and hostility directed toward internal and

external objects. This conception of blaming has been observed in the clinical diagnosis and description of DSM-III-R personality disorders (American Psychiatric Association, 1987). For some of these personality disorders, self- and other-blaming tendencies are central markers of the category, while for other personality disorders, blaming is peripheral (Millon, 1981; Millon and Kotik, 1985; Vaillant and Perry, 1985). For example, other-blaming occurs centrally in paranoid and passive-aggressive personality disorder. It may occur in borderline, narcissistic and antisocial patients. Self-blaming occurs centrally in the self-defeating and dependent personality disorders and is sometimes observed in borderline patients.

If blaming behaviours and attitudes are already included in comprehensive systems of classification, what clinical advantage is there to studying these tendencies in isolation? First, because much more knowledge remains to be established about the present diagnostic categories (Widiger and Frances, 1985) there is a need for basic research on personality disorders. The study of blaming tendencies may reveal important dimensions within existing diagnostic frameworks. It may be that blaming judgments have diverse developmental origins and functions in different personality disorders. For example, self-blame may function as an unconsciously-deployed interpersonal

maneuver for some individuals, and it may be an expression of self-loathing and low self-esteem for other individuals. Similarly, extreme other-blame may be part of a delusional frameworks of some patients, but it may function as a defense against low self-esteem for others.

Second, there may be therapeutic benefits for patients in understanding distinctions regarding blaming tendencies. Therapists may use the emerging framework of blame research as a way to help patients understand some of their emotional and interpersonal problems. Patients might explore the objects of blame in their lives, their reliance on persistent styles of blaming, the distinction between "responsibility" and "blame" for unpleasant events, the consequences of their taking or giving responsibility versus blaming themselves or others, and their failure to blame themselves or important others when this is adaptive.

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Appendix A**Complete Item Pool with social desirability ratings**

Complete item pool with social desirability (SD) ratings

Item	SD value
1. My parents did an excellent job in preparing me for life's challenges.	5.47
2. It's not unusual for me to be influenced strongly by authorities about my career plans.	3.52
3. When friends or family make a mistake I make sure to let them know how much better I could have done.	1.78
4. With the state of the world today, I'll never get ahead.	2.35
5. There's no such thing as accidents in my life: I'm usually responsible.	3.39
6. It's my own fault that I'm not better at making choices during times of stress.	3.46
7. If I would have taken my early schooling more seriously, I'd be much further ahead.	4.27
8. If I don't like my job I try to be extra pleasant so nobody will know.	4.06
9. It burns me up at times to think of the misery others have put me through.	2.49
10. In recalling the most serious disappointments of my life, I have more regrets than I care to discuss.	2.76
11. Poor people aren't different from anyone else.	5.10
12. If I don't do well on an exam, I'm likely to feel the instructor taught the course poorly.	3.04
13. When I know someone is responsible for a failure or mistake, I blame them.	3.12
14. When things get tense at home I try to make everyone laugh and forget about it.	4.94
15. If I got caught speeding I would be sure that it was because police officers give tickets to meet daily quotas.	3.14

16. If my boss got fired, I would be thinking: "It serves him/her right". 2.74
17. It bothers me a lot that life isn't as simple as it should be. 3.37
18. If people don't like me, thats they're problem. 4.14
19. When I'm not happy, its often because others are giving me a rough time. 3.08
20. If my boss got fired I would probably wonder if my own neck was on the line. 3.90
21. When I know that I'm responsible for a failure or misfortune, I let myself off the hook. 2.63
22. If I were to get physically attacked, I would curse the police for not providing better protection to citizens. 3.12
23. Because life is hard, I'll probably never amount to much. 2.02
24. People who know me best consider me to be quite critical of myself. 3.51
25. If I don't like my job it is probably because my employer isn't giving me the things I need to do good work. 2.88
26. When I think about how many people are disturbed, I become so distressed that I don't know what to do. 2.80
27. The world is basically a fair place but I don't have the stuff to succeed. 2.02
28. Friends who know me well would probably say that I'm quick to blame others for bad things that happen. 2.02
29. If I were a nicer person I would get walked on more by my friends and family. 2.08
30. It serves me right if I get taken advantage of. 2.42
31. Most students definitely need to learn how to study better. 4.84

32. No matter how many of my misfortunes I'm responsible for, I always focus on the good side of myself. 5.29
33. If I was physically attacked, I would probably "lie down and take it". 1.94
34. Sometimes I get so frustrated with other peoples' shortcomings that I feel like giving them a good knock on the head. 2.59
35. There's rarely a good reason to blame myself for bad things that happen to me. 3.29
36. When I do poorly on an exam I usually accept that it proves I didn't work hard enough. 4.94
37. More often than not, I'm at fault for mistakes. 3.65
38. When something is uncomfortable at a party, I might have the impulse to run and hide. 2.29
39. If a job would be hard to find, it would give me a good excuse to relax and collect unemployment for a while. 2.29
40. It is useless to try to correct personal shortcomings that one has had for a long time. 2.04
41. I'd be able to do my work if I weren't so distractable. 3.16
42. When I look back at my life, I can recall many times where my own weakness has prevented me from getting what I really wanted. 3.59
43. Sometimes I don't care if anybody likes me. 2.94
44. I'd be able to get my work done if I weren't so disorganized and lazy. 3.27
45. Being taken advantage of once in a while builds one's character. 3.49
46. I try to be "fashionably" late for appointments because it puts me in control. 2.14

47. If a waitress spilled coffee on my new clothes I'd criticize myself for being careless. 1.94
48. Because most of the people I've worked with have been responsible and competent, I look forward to each day at my job. 5.49
49. There's usually a good reason to blame some other person or thing for the bad things that happen to me. 2.16
50. When I fail or do poorly on a test I'm likely to wonder about my abilities. 3.82
51. If I'm not happy, I make sure everybody knows it. 1.84
52. I am reluctant to tell people about things that go wrong in my life because they will know its my fault. 3.14
53. I am better than most people at figuring out the reasons that bad things happen. 3.76
54. If my friends and family were more understanding, we'd get along better. 3.10
55. In a traffic jam I'm likely to think: "Why did I leave home so late?" 4.47
56. When I stand in line waiting for cashiers I'm likely to be unfriendly. 2.33
57. If I get caught speeding, I'm likely to try and change the officer's mind by complimenting him/her on the on the efficient work he/she is doing. 3.65
58. When I am late for an appointment it's usually the fault of people who hold me up. 2.65
59. If a waitress spilled coffee on my new clothes I'd quietly walk out of the restaurant. 3.43
60. When I don't get as much done as I wanted to in a day it's often because others are disorganized and lazy. 2.14
61. When I'm late for an appointment I spend a lot of time and energy trying to think of what to say. 3.39

62. When things get tense at home its often because someone else has messed up. 2.59
63. In a traffic jam my thoughts would be: "I can't handle being closed in". 2.70
64. In times of stress I tend to present a good impression so others will think everything's going great. 4.55
65. Because of the kind of person I am, I have been taken advantage of more times than I can count. 2.29
66. When family conflicts involve me, I take about 75% of the blame. 2.82
67. If my friends and family were more understanding, they'd wonder about me. 2.98
68. When I do poorly on an exam I often think that the instructor had it in for me. 2.38
69. Many misfortunes I've experienced have been accidents. 4.22
70. If my boss got fired I would also quit. 2.94
71. It makes me feel good to see that other people have shortcomings. 2.98
72. If a job would be hard to find, I'd be quick to blame it on my personal qualities. 2.57
73. I've never done a job I didn't like. 4.65
74. When I do poorly on an exam I check around to see how everyone else did in comparison to me. 4.04
75. In a traffic jam I often think: "I wish people wouldn't get in my way when I'm in a hurry". 3.22
76. When I make mistakes I usually say to myself: "That's just the way I am". 3.33
77. People don't like me because I'm a bit better than most at many things. 2.14
78. In the real world it's okay to take advantage of people. 1.76

79. One of the first thoughts to occur to me when I see people who are down and out is: "I didn't deserve this good life that I have". 3.92
80. When I make an embarrassing mistake I give myself a good lecture on what I've done wrong. 4.10
81. When family conflicts arise, someone else is to blame 75% of the time. 2.59
82. When looking for the reasons for bad things that happen to me, I tend to punish myself. 2.90
83. When I stand in long line waiting for a cashier I'd probably be thinking: "This is certainly poor timing on my part". 3.94
84. If I were more responsible and competent, I wouldn't have as much difficulty doing my job. 3.45
85. When I get taken advantage of I'm likely to think: "I wish people weren't so damn crooked". 3.60
86. I am reluctant to tell people about things that go wrong in my life because they will laugh at me. 3.35
87. When looking back at my life, I can recall many times where others have prevented me from getting what I want. 2.71
88. When I feel uncomfortable at a party I'm more likely than most people to think there is something wrong with me. 2.47
89. With the state of the world today, I believe I will become highly successful. 5.18
90. People who know me best consider me to be too concerned about what others think. 3.31
91. I'd be able to get my work done if other people wouldn't bother me. 2.82
92. When I'm not happy, I try hard to act like everything is okay. 4.10

93. I have rarely taken a course that was taught poorly. 4.69
94. In recalling the most serious disappointments of my life, I am struck by my own stupidity. 2.76
95. When I fail or do poorly on a test, its usually because others are out to get me. 1.74
96. If only my teachers had been better, I'd be much further ahead. 2.69
97. There are many people around who are not much use to society because they are lazy. 2.65
98. If I were to get physically attacked I would probably lose my cool and make it worse for myself. 3.25
99. When I know something else is going on I find it hard to work. 3.67
100. It's my parents' fault that I can't cope with stress. 2.08
101. When I fail or do poorly on a test I don't feel like continuing the course. 2.90
102. No matter how many misfortunes I've suffered, I always see the bright side of things. 5.82
103. People who have problems are victims of the pressures imposed by those of us who are less troubled. 3.02
104. People who know me best consider me to be quite critical of others. 2.45
105. There is no such thing as an accident; someone is always responsible. 2.74
106. When things get tense at home its often because I've messed up. 2.80
107. If a waitress spilled coffee on my new clothes, I'd want to let her know she'd been careless. 3.69
108. Friends who know me well probably say I'm not the best at handling stress. 2.92

109. There's never a good reason to blame some other person or thing for bad things that happen to me. 4.53
110. My school instructors were all quite acceptable. 5.08
111. More often than not, other people are at fault for mistakes that look like they could be mine. 2.71
112. When I know someone is responsible for a failure or mistake, it gives me a quiet kind of satisfaction. 2.25
113. Looking back and analyzing my life is a useless exercise because it doesn't make things much better now. 3.27
114. It's my own fault that I'm not prepared for some of life's challenges. 3.59
115. I tell people about things that go wrong in my life to let them know it's not my fault. 2.29
116. If I got caught speeding I would probably fantasize about wrecking the police officer's car. 2.49
117. The world may or may not be fair--as far as I'm concerned it doesn't matter. 3.51
118. It bothers me a lot that my own weaknesses have stood in the way of my accomplishing important goals. 3.63
119. If I was physically attacked, I would curse myself for putting myself in danger. 3.02
120. When I don't get as much done as I wanted to in a day, I don't give it a second thought. 3.16
121. When family conflicts arise, I'm the first to back down. 3.08
122. Being taken advantage of is something one easily comes to terms with after a while. 2.41
123. When family conflicts involve me, I usually don't talk for days. 1.86

124. Its not unusual for me to blame the authorities for the way my career plans are going. 2.39
125. When I do poorly on an exam I often tell my friends and family that I performed better than my actual score. 2.00
126. It burns me up at times to think of the misery I put myself through. 3.16
127. When I make an embarrassing mistake I just sweep it under the rug and pretend it never happened. 3.25
128. When I stand in line waiting for cashiers I think to myself: "I wish this store would have a better way of handling customers". 4.25
129. If a waitress spilled coffee on my new clothes I would be so shocked that I'd laugh. 3.49
130. If a job were hard to find, I'd try hard to ignore all the bad things this might mean about me. 4.33
131. If I get caught speeding I'm likely to harshly criticize myself for being so dumb. 3.82
132. People who have psychological problems have no one to blame but themselves. 2.22
133. One of the first thoughts to occur to me when I see people who are down and out is: "I wish I wouldn't have to be reminded of the poverty in this world". 2.12
134. In a traffic jam I panic because I feel I could lose control. 2.35
135. There's usually a good reason to blame myself when bad things happen. 2.94
136. Poor people don't try hard enough to get ahead. 2.20
137. When I fail or do poorly on a test I'm likely to think: "I'll show them all!" 4.14
138. When trying to figure out the reasons for the bad things that happen to me, I get confused. 3.18

139. When I stand in a long line I'm likely to strike up a meaningless conversation with other people. 4.25
140. When my friends or family make an embarrassing mistake I let them know it's their own fault. 2.31
141. When I get taken advantage of I'm likely to think: "Oh well, that's mine for today". 3.25
142. Sometimes I get so frustrated with my shortcomings that I feel like giving myself a good knock on the head. 3.61
143. When I know that I'm responsible for a failure or misfortune, I blame myself. 4.80
144. When looking back at my life, it all seems confusing and distressing. 2.37
145. It bothers me a lot that others have often stood in the way of my accomplishing important goals. 2.98
146. It bothers me a lot that life continues to be very complicated. 3.35
147. When I feel uncomfortable at a party I like to sit back and watch everybody else. 4.25
148. If my boss got fired, I'd feel partly responsible. 3.16
149. People who know me best consider me to be too preoccupied with work to enjoy life fully. 3.20
150. In recalling the most serious disappointments in my life, I find it easy to see where others did something wrong. 2.76
151. Friends who know me well would probably say I'm quick to blame myself for bad things that happen. 3.31
152. I'd be able to get my work done if I could settle down more easily. 4.25
153. Sometimes I can hardly blame people for not liking me. 2.65

154. If other people were more responsible and competent, I wouldn't have as much difficulty doing my job. 2.76
155. In recalling the most serious disappointments of my life, I am struck by my strength in coping. 5.20
156. If I were a nicer person I'd get along better with my friends and family. 4.22
157. The school system has prepared me for more than I would have ever imagined. 4.92
158. Its my parents' fault that I don't know many things I should about life. 2.35
159. The prevalence of stress problems are signs of society's decline. 3.94
160. Because of the kind of person I am, I doubt I'll ever amount to much. 1.69
161. In times of stress, I perform better than most. 5.35
162. Because of the way the world is, I have been taken advantage of more times than I can count. 2.14
163. I avoid jobs that require too much responsibility. 1.92
164. When things get tense at home I just shut up and try to forget about it. 2.84
165. There's never any good reason to blame someone for accidents. 4.53
166. If a job would be hard to find, I'd blame the people who run the economy. 3.08
167. If I don't do well on a test, I usually can find flaws in my way of preparing. 5.08
168. When people make mistakes, I usually say to myself; "That's just the way they are". 4.49
169. I tend to punish others when looking for the reasons that bad things happen to me. 2.00

170. I find it almost impossible to criticize my parents for any problems I've run up against. 4.76
171. I am late for an appointment it is usually because I have planned my time poorly. 4.71
172. I tell people about things that go wrong in my life to get sympathy. 2.18
173. When things are uncomfortable at a party, it's because most others aren't very socially skilled. 2.35
174. If I don't like my job its because I'm not making the most of it. 4.27
175. If I'm not happy, its because I'm not performing well. 4.00
176. Friends who know me well would probably say I'm too easygoing for my own good. 4.06

Appendix B**Marlowe Crowne Social Desirability Scale**

Marlowe Crowne Social Desirability Scale

Instructions:

Listed below are a number of statements concerning attitudes and traits. Read each item and decide whether the statement is true or false as it pertains to you personally. Indicate your response by circling 'T' or 'F'.

- T F : 1. Before voting I thoroughly investigate the qualifications of all candidates.
- T F : 2. I never hesitate to go out of my way to help someone in trouble.
- T F : 3. It is sometimes hard for me to go on with my work if I am not encouraged.
- T F : 4. I have never intensely disliked anyone.
- T F : 5. On occasion I have had doubts about my ability to succeed in life.
- T F : 6. I sometimes feel resentful when I don't get my way.
- T F : 7. I am always careful about my manner of dress.
- T F : 8. My table manners at home are as good as when I eat out in a restaurant.
- T F : 9. If I could get into a movie without paying and be sure I was not seen I would probably do it.
- T F : 10. On a few occasions, I have given up doing something because I thought too little of my own ability.
- T F : 11. I like to gossip at times.
- T F : 12. There have been times when I felt like rebelling against people in authority even though I knew they were right.
- T F : 13. No matter who I'm talking to, I'm always a good listener.
- T F : 14. I can remember "playing sick" to get out of doing something.
- T F : 15. There have been occasions when I took advantage of someone.
- T F : 16. I am always willing to admit it when I make a mistake.
- T F : 17. I always try to practice what I preach.
- T F : 18. I don't find it particularly difficult to get along with loud-mouthed obnoxious people.
- T F : 19. I sometimes try to get even rather than forgive and forget.
- T F : 20. When I don't know something I don't mind at all admitting it.
- T F : 21. I am always courteous, even to people who are disagreeable.
- T F : 22. At times I have really insisted on having things my own way.
- T F : 23. There have been occasions when I felt like smashing things.
- T F : 24. I would never think of letting someone else be punished for my wrongdoings.
- T F : 25. I never resent being asked to return a favour.
- T F : 26. I have never been irked when people expressed ideas very different from my own.
- T F : 27. I never make a long trip without checking the safety of my car.
- T F : 28. There have been times when I was quite jealous of the good fortune of others.
- T F : 29. I have almost never felt the urge to tell someone off.
- T F : 30. I am sometimes irritated by people who ask favours of me.
- T F : 31. I have never felt I was punished without cause.
- T F : 32. I sometimes think when people have a misfortune they only got what they deserved.
- T F : 33. I have never deliberately said something that hurt someone's feelings.

Appendix C
Desirability and Undesirability Scales

IAR - Positive desirability/impression management items

1. My parents did an excellent job in preparing me for life's challenges.
14. When things get tense at home I try to make everyone laugh and forget about it.
32. No matter how many of my misfortunes I'm responsible for, I always focus on the good side of myself.
48. Because most of the people I've worked with have been responsible and competent, I look forward to each day at my job.
64. In times of stress I tend to present a good impression so others will think everything's going great.
73. I've never done a job I didn't like.
89. With the state of the world today, I believe I will become highly successful.
92. When I'm not happy, I try hard to act like everything is okay.
93. I have rarely taken a course that was taught poorly.
102. No matter how many misfortunes I've suffered, I always see the bright side of things.
109. There's never a good reason to blame some other person or thing for bad things that happen to me.
110. My school instructors were all quite acceptable.
117. The world may or may not be fair--as far as I'm concerned it doesn't matter.
120. When I don't get as much done as I wanted to in a day, I don't give it a second thought.
127. When I make an embarrassing mistake I just sweep it under the rug and pretend it never happened.
130. If a job were hard to find, I'd try hard to ignore all the bad things this might mean about me.
137. When I fail or do poorly on a test I'm likely to think:
"I'll show them all!"
147. When I feel uncomfortable at a party I like to sit back and watch everybody else.

157. The school system has prepared me for more than I would have ever imagined.

161. In times of stress, I perform better than most.

164. When things get tense at home I just shut up and try to forget about it.

165. There's never any good reason to blame someone for accidents.

170. I find it almost impossible to criticize my parents for any problems I've run up against.

176. Friends who know me well would probably say I'm too easygoing for my own good.

IAR - negative desirability/self-deception items.

3. When friends or family make a mistake I make sure to let them know how much better I could have done.
10. In recalling the most serious disappointments of my life, I have more regrets than I care to discuss.
23. Because life is hard, I'll probably never amount to much.
29. If I were a nicer person I would get walked on more by my friends and family.
33. If I was physically attacked, I would probably "lie down and take it".
38. When something is uncomfortable at a party, I might have the impulse to run and hide.
39. If a job would be hard to find, it would give me a good excuse to relax and collect unemployment for a while.
40. It is useless to try to correct personal shortcomings that one has had for a long time.
46. I try to be "fashionably" late for appointments because it puts me in control.
51. If I'm not happy, I make sure everybody knows it.
56. When I stand in line waiting for cashiers I'm likely to be unfriendly.
67. If my friends and family were more understanding, they'd wonder about me.
71. It makes me feel good to see that other people have shortcomings.
77. People don't like me because I'm a bit better than most at many things.
78. In the real world it's okay to take advantage of people.
101. When I fail or do poorly on a test I don't feel like continuing the course.
112. When I know someone is responsible for a failure or mistake, it gives me a quiet kind of satisfaction.
123. When family conflicts involve me, I usually don't talk for days.

125. When I do poorly on an exam I often tell my friends and family that I performed better than my actual score.

133. One of the first thoughts to occur to me when I see people who are down and out is: "I wish I wouldn't have to be reminded of the poverty in this world".

134. In a traffic jam I panic because I feel I could lose control.

144. When looking back at my life, it all seems confusing and distressing.

163. I avoid jobs that require too much responsibility.

172. I tell people about things that go wrong in my life to get sympathy.

Appendix D**Questionnaire Format of Self- and Other-Blame Scales
(with Desirability Items included)**

INVENTORY OF ATTITUDES AND REACTIONS

Instructions:

Below you will find a number of statements which describe different attitudes that people hold or ways that they might react to situations. We want you to carefully consider how well they fit as descriptions of your attitudes and behaviour. If you agree with a statement, indicate this by circling the appropriate number on the rating scale beside the items. So for example, if you agree completely with the first statement:

Disagree Completely Agree Completely

My parents did an excellent job of preparing me for life's challenges 1 2 3 4 5 6 7

you would circle "7" for item number one. If, on the other hand you disagreed completely with this statement you would circle "1" for item number one. If your response falls between these two extremes, circle the option (from 2 through 6) which best reflects your view. All the items in this questionnaire follow this format.

	Disagree Completely	Agree Completely
1. My parents did an excellent job in preparing me for life's challenges.	1	2 3 4 5 6 7
2. It's my own fault that I'm not better at making choices during times of stress.	1	2 3 4 5 6 7
3. It burns me up at times to think of the misery others have put me through.	1	2 3 4 5 6 7
4. When I know someone is responsible for a failure or mistake, I blame them.	1	2 3 4 5 6 7
5. When things get tense at home I try to make everyone laugh and forget about it.	1	2 3 4 5 6 7
6. If I got caught speeding I would be sure that it was because police officers give tickets to meet daily quotas.	1	2 3 4 5 6 7
7. When I'm not happy, its often because others are giving me a rough time.	1	2 3 4 5 6 7
8. People who know me best consider me to be quite critical of myself.	1	2 3 4 5 6 7
9. No matter how many of my misfortunes I'm responsible for, I always focus on the good side of myself.	1	2 3 4 5 6 7
10. Sometimes I get so frustrated with other peoples' shortcomings that I feel like giving them a good knock on the head.	1	2 3 4 5 6 7
11. Because most of the people I've worked with have been responsible and competent, I look forward to each day at my job.	1	2 3 4 5 6 7
12. When I fail or do poorly on a test I'm likely to wonder about my abilities.	1	2 3 4 5 6 7
13. If I don't do well on an exam, I'm likely to feel the instructor taught the course poorly.	1	2 3 4 5 6 7
14. In times of stress I tend to present a good impression so others will think everything's going great.	1	2 3 4 5 6 7
15. If a job would be hard to find, I'd be quick to blame it on my personal qualities.	1	2 3 4 5 6 7
16. I've never done a job I didn't like.	1	2 3 4 5 6 7
17. In a traffic jam I often think: "I wish people wouldn't get in my way when I'm in a hurry".	1	2 3 4 5 6 7
18. One of the first thoughts to occur to me when I see people who are down and out is: "I didn't deserve this good life that I have".	1	2 3 4 5 6 7
19. When family conflicts arise, someone else is to blame most of the time.	1	2 3 4 5 6 7
20. When looking for the reasons for bad things that happen to me, I tend to punish myself.	1	2 3 4 5 6 7
21. When I stand in long line waiting for a cashier I'd probably be thinking: "This is certainly poor timing on my part".	1	2 3 4 5 6 7
22. With the state of the world today, I believe I will become highly successful.	1	2 3 4 5 6 7
23. I'd be able to get my work done if other people wouldn't bother me.	1	2 3 4 5 6 7
24. If my boss got fired, I would be thinking: "It serves him/her right".	1	2 3 4 5 6 7

	He/She would Disagree							He/She would Agree						
25. When I'm not happy, I try hard to act like everything is okay.	1	2	3	4	5	6	7							
26. I have rarely taken a course that was taught poorly.	1	2	3	4	5	6	7							
27. No matter how many misfortunes I've suffered, I always see the bright side of things.	1	2	3	4	5	6	7							
28. Friends who know me well would probably say I'm quick to blame myself for bad things that happen.	1	2	3	4	5	6	7							
29. If a waitress spilled coffee on my new clothes, I'd want to let her know she'd been careless.	1	2	3	4	5	6	7							
30. There's never a good reason to blame some other person or thing for bad things that happen to me.	1	2	3	4	5	6	7							
31. My school instructors were all quite acceptable.	1	2	3	4	5	6	7							
32. The world may or may not be fair--as far as I'm concerned it doesn't matter.	1	2	3	4	5	6	7							
33. If I was physically attacked, I would curse myself for putting myself in danger.	1	2	3	4	5	6	7							
34. When I don't get as much done as I wanted to in a day, I don't give it a second thought.	1	2	3	4	5	6	7							
35. Friends who know me well would probably say that I'm quick to blame others for bad things that happen.	1	2	3	4	5	6	7							
36. When I make an embarrassing mistake I just sweep it under the rug and pretend it never happened.	1	2	3	4	5	6	7							
37. When I stand in line waiting for cashiers I think to myself: "I wish this store would have a better way of handling customers".	1	2	3	4	5	6	7							
38. If a job were hard to find, I'd try hard to ignore all the bad things this might mean about me.	1	2	3	4	5	6	7							
39. If I get caught speeding I'm likely to harshly criticize myself for being so dumb.	1	2	3	4	5	6	7							
40. People who have psychological problems have no one to blame but themselves.	1	2	3	4	5	6	7							
41. There's usually a good reason to blame myself when bad things happen.	1	2	3	4	5	6	7							
42. When I fail or do poorly on a test I'm likely to think: "I'll show them all!"	1	2	3	4	5	6	7							
43. When I feel uncomfortable at a party I like to sit back and watch everybody else.	1	2	3	4	5	6	7							
44. When I know that I'm responsible for a failure or misfortune, I blame myself.	1	2	3	4	5	6	7							
45. If I were a nicer person I'd get along better with my friends and family.	1	2	3	4	5	6	7							
46. The school system has prepared me for more than I would have ever imagined.	1	2	3	4	5	6	7							
47. If I were to get physically attacked, I would curse the police for not providing better protection to citizens.	1	2	3	4	5	6	7							
48. In times of stress, I perform better than most.	1	2	3	4	5	6	7							
49. When things get tense at home I just shut up and try to forget about it.	1	2	3	4	5	6	7							
50. There's never any good reason to blame someone for accidents.	1	2	3	4	5	6	7							
51. If a job would be hard to find, I'd blame the people who run the economy.	1	2	3	4	5	6	7							
52. I find it almost impossible to criticize my parents for any problems I've run up against.	1	2	3	4	5	6	7							
53. If I am late for an appointment it is usually because I have planned my time poorly.	1	2	3	4	5	6	7							
54. If I don't like my job its because I'm not making the most of it.	1	2	3	4	5	6	7							
55. If I'm not happy, its because I'm not performing well.	1	2	3	4	5	6	7							
56. Friends who know me well would probably say I'm too easygoing for my own good.	1	2	3	4	5	6	7							

Appendix E
Sanctioning Style Questionnaire

SANCTIONING STYLE QUESTIONNAIRE

Instructions:

The following questions again concern reactions that people might have to failure or misfortune. Please consider the typical reactions of this client and circle the number which corresponds to your estimate of how he or she is likely to handle these kinds of events.

1. How likely is he/she to become at least a little critical and blaming towards him/herself when failing at something, facing a disappointment or experiencing a misfortune?
very unlikely 0 1 2 3 4 5 6 7 8 very likely
2. How much anger, criticism, and blame does he/she usually direct towards him/herself when failing at something, facing a disappointment or experiencing a misfortune?
none at all 0 1 2 3 4 5 6 7 8 a great deal
3. How long after the occurrence of a failure, disappointment or misfortune does he/she continue to be a little angry, critical or blaming towards him/herself?
a short time 0 1 2 3 4 5 6 7 8 a long time
4. How often does he/she think back on failures, disappointment or misfortune to the point that he/she re-experiences some anger, criticism and blame towards him/herself over these events?
never 0 1 2 3 4 5 6 7 8 very often.
5. How angry, critical and blaming is he/she now towards him/herself over a failure, disappointment or misfortune?
not at all self-blaming 0 1 2 3 4 5 6 7 8 extremely self-blaming
6. How do his/her reactions to him/herself over failure, disappointment or misfortune compare to the reactions of others to themselves?
is less self-blaming and critical 0 1 2 3 4 5 6 7 8 is more self-blaming and critical
7. How likely is he/she to become at least a little critical in his/her own mind towards other people and things outside him/herself when failing at something, facing a disappointment, or experiencing a misfortune?
very unlikely 0 1 2 3 4 5 6 7 8 very likely
8. How much anger, criticism, and blame does he/she experience in his/her own mind towards other people and things outside him/herself when failing at something, facing a disappointment or experiencing a misfortune?
none at all 0 1 2 3 4 5 6 7 8 a great deal
9. How long after the occurrence of a failure, disappointment or misfortune does he/she continue to be at least a little bit angry, critical or blaming towards people and things outside him/herself?
a short time 0 1 2 3 4 5 6 7 8 a long time
10. How often does he/she think back on failures, disappointment or misfortune to the point that he/she re-experiences some anger, criticism and blame towards other people and things outside him/herself about these events?
never 0 1 2 3 4 5 6 7 8 very often.
11. How angry, blaming or critical is he/she in his/her own mind now towards other people and things outside him/herself in light of a failure, disappointment or misfortune?
not at all angry or blaming 0 1 2 3 4 5 6 7 8 extremely angry or blaming
12. How do his/her reactions toward other people and things outside him/herself over failure, disappointment or misfortune compare to the reactions of others?
is less blaming and critical 0 1 2 3 4 5 6 7 8 is more blaming and critical

Appendix F
Defense Mechanisms Inventory

INSTRUCTIONS FOR DMI

On each of the following pages is a short story. Following each story are four questions. Each question has five possible answers. The four questions inquire about five kinds of reactions to the story: actual behaviour, impulsive behaviour (in fantasy), thought, and feelings. Of the four, it is actual behaviour which is outwardly expressed: the other three take place in the privacy one's mind. Please take a look at the first story now.

What we want you to do is to select the one answer to each question which you think is most representative of how you would react. Then, circle the number corresponding to your answer. Next, select the one answer for each question which you think is least representative of how you would react. For this answer, underline the corresponding number. For example, let us assume that out of the five possible answers to a question (e.g. numbers 1, 2, 3, 4, 5), answer number 3 is the one you consider most representative of the way you would react and answer 1 is the least representative. In this case you would circle the number "3" and underline the number "1".

Read all the five answers following the question before you make your choices. As you can see, there will be a number of items that will have no responses to them.

There are no right or wrong answers here; the only thing that should guide your selections is your own knowledge of yourself. Allow your mind to imagine for a moment that the event described in the story is really happening to you, even though you may never have experienced such an event. When you select your answers, remember we are not asking which answer you like the most or like least, but rather the answers which would most and least represent the way you would act and feel in these situations.

Please work as quickly as possible. Feel free to ask any questions you may have. Be sure to note that the booklet is printed on both sides of the page. Also, note that the last two stories are different for men and women. There are instructions to advise you when you get there.

You are waiting for the bus at the edge of the road. The streets are wet and muddy after the previous night's rain. A car sweeps through a puddle in front of you, splashing your clothing with mud.

CIRCLE NUMBER BESIDE YOUR MOST LIKELY RESPONSE TO EACH QUESTION.
UNDERLINE NUMBER BESIDE YOUR LEAST LIKELY RESPONSE TO EACH QUESTION.

What would your ACTUAL reaction be?

1. I would note the car's license number so that I could track down that careless driver.
2. I'd wipe myself off with a smile.
3. I'd yell curses after the driver!
4. I would scold myself for not having at least worn a raincoat.
5. I'd shrug it off; after all things like that are unavoidable.

What would you IMPULSIVELY (in fantasy) want to do?

6. Wipe that driver's face in the mud.
7. Report that incompetent driver to the police.
8. Kick myself for standing too close to the edge of the road.
9. Let the driver know that I don't really mind.
10. Inform that driver that bystanders also have rights.

What THOUGHT might occur to you?

11. Why do I always get myself into things like this?
12. To hell with that driver!
13. I'm sure that basically that driver is a nice fellow.
14. One can expect something like this to happen on wet days.
15. I wonder if that driver splashed me on purpose.

How would you FEEL and why?

16. Satisfied; after all it could have been worse.
17. Depressed, because of my bad luck.
18. Resigned, for you've got to take things as they come.
19. Resentment, because the driver was so thoughtless and inconsiderate.
20. Furious, that that driver got me dirty.

In the army you hold a post of responsibility for the smooth operation of an important department which is constantly under great pressure to meet deadlines. Because things haven't been running as smoothly as they should lately, despite your initiative and resourcefulness, you have planned some changes in personnel for the near future.

Before you do so, however, your superior officer arrives unexpectedly, asks some brusque questions about the work of the department and then tells you that you are relieved of your post and your assistant is assigned to take your place.

CIRCLE NUMBER BESIDE YOUR MOST LIKELY RESPONSE TO EACH QUESTION.
UNDERLINE NUMBER BESIDE YOUR LEAST LIKELY RESPONSE TO EACH QUESTION.

What would your ACTUAL reaction be?

- 21. I'd accept my dismissal gracefully, since my superior is only doing his job.
- 22. I'd blame my superior for having made up his mind against me even before the visit.
- 23. I'd be thankful for having been relieved of such a tough job.
- 24. I'd look for an opportunity to undercut my assistant.
- 25. I'd blame myself for not being competent enough.

What would you IMPULSIVELY (in fantasy) want to do?

- 26. Congratulate my assistant on the promotion.
- 27. Expose the probable plot between my superior and my assistant to get rid of me.
- 28. Tell my superior to go to hell.
- 29. I'd like to kill myself for not having made the necessary changes sooner.
- 30. I'd like to quit, but one can't do that in the army.

What THOUGHT might occur to you?

- 31. I wish I could come face to face with my superior in a dark alley.
- 32. In the army it is essential to have the right person in the right job.
- 33. There is no doubt that this was just an excuse to get rid of me.
- 34. I'm really lucky that I only lost my job and not my rank as well.
- 35. How could I be so dumb as to let things slide?

How would you FEEL and why?

- 36. Resentful, because he had it in for me.
- 37. Angry, at my assistant for getting my job.
- 38. Pleased that nothing worse had happened.
- 39. Upset that I am a failure.
- 40. Resigned; after all one must be satisfied with having done the best one can.

You are living with your aunt and uncle, who are helping to put you through college. They have been taking care of you since your parents were killed in an automobile accident when you were in your early teens. On a night that you have a late date with your "steady," there is a heavy storm outside. Your aunt and uncle insist that you call and cancel your date because of the weather and the late hour. You are about to disregard their wishes and go out the door when your uncle says in a commanding tone of voice, "Your aunt and I have said that you can't go, and that is that."

CIRCLE NUMBER BESIDE YOUR MOST LIKELY RESPONSE TO EACH QUESTION.
UNDERLINE NUMBER BESIDE YOUR LEAST LIKELY RESPONSE TO EACH QUESTION.

What would your ACTUAL reaction be?

41. I would do as my uncle said because he has always wanted what was best for me.
42. I'd tell them, "I always knew you didn't want me to grow up."
43. I would cancel my date, since one must keep peace in the family.
44. I'd tell them it was none of their business and go out anyway.
45. I'd agree to remain at home and apologize for having upset them.

What would you IMPULSIVELY (in fantasy) want to do?

46. Knock my head against the wall.
47. Tell them to stop ruining my life.
48. Thank them for being so concerned with my welfare.
49. Leave, slamming the door in their faces.
50. Keep my engagement, rain or shine.

What THOUGHT might occur to you?

51. Why don't they shut up and let me alone?
52. They never have really cared about me.
53. They are so good to me, I should follow their advice without question.
54. You can't take without giving something in return.
55. It's all my own fault for planning such a late date.

How would you FEEL and why?

56. Annoyed, that they think I am a baby.
57. Miserable, because there is nothing much I can do.
58. Grateful for their concern.
59. Resigned; after all, you can't get your own way every time.
60. Furious, because they interfere with my private affairs.

At your job you want to impress upon your foreman the fact that you are more skilled than your fellow workers. You are eagerly awaiting an opportunity to prove yourself.

One day a new machine is brought into the factory. The foreman calls all the workers together and asks whether anyone knows how to operate it. You sense the chance you have been waiting for, so you tell the foreman that you have worked with a similar machine and would like a chance to try your hand at this one. He refuses, saying, "Sorry, we can't take a chance," and calls a veteran worker to come over and try to get the machine started.

No sooner has the veteran worker pulled the starter, than sparks begin to fly and the machine grinds to a halt. At this point the foreman calls and asks you if you still want a chance to try and start the machine.

CIRCLE NUMBER BESIDE YOUR MOST LIKELY RESPONSE TO EACH QUESTION.
UNDERLINE NUMBER BESIDE YOUR LEAST LIKELY RESPONSE TO EACH QUESTION.

What would your ACTUAL reaction be?

81. I'd say that I doubt if I could do it either.
82. I'd tell my fellow workers that the foreman wants to hold me responsible for the machine's crack-up.
83. I'd tell the foreman that I appreciated being given the chance.
84. I'd decline, cursing the foreman under my breath.
85. I'd tell the foreman that I would try because one must never back down from a challenge.

What would you IMPULSIVELY (in fantasy) want to do?

86. Tell that foreman that he'll not make me the scapegoat for a broken machine.
87. Thank the foreman for not letting me try it first.
88. Tell the foreman that he should try to start the broken machine himself.
89. Point out to the foreman that experience doesn't guarantee success.
90. Kick myself for talking myself into an unbearable situation.

What THOUGHT might occur to you?

91. That foreman is really a pretty decent guy.
92. Damn him and his blasted machine.
93. This foreman is out to get me.
94. Machines are not always reliable.
95. How could I be so stupid as to even think of operating that machine.

How would you FEEL and why?

96. Indifferent, because when one's abilities are not appreciated one's enthusiasm is lost.
97. Angry that I was asked to do an impossible job.
98. Glad that I didn't wreck the machine.
99. Annoyed that I was purposely put on the spot.
100. Disgusted with myself because I risked making a fool out of myself

Driving through town in the late afternoon, you arrive at one of the busiest intersections. Although the light has changed in your favor, you see that pedestrians are not obeying the "wait" sign and are blocking your path. You attempt to complete your turn with due caution before the light turns against you, as the law requires. As you complete the turn, a traffic policeman orders you over to the side and charges you with violating the pedestrians' right-of-way. You explain that you had taken the only possible course of action, but the policeman proceeds to give you a ticket nevertheless.

CIRCLE NUMBER BESIDE YOUR MOST LIKELY RESPONSE TO EACH QUESTION.
UNDERLINE NUMBER BESIDE YOUR LEAST LIKELY RESPONSE TO EACH QUESTION.

What would your ACTUAL reaction be?

- 121. I'd blame myself for having been careless.
- 122. I'd go to court and bring counter charges against the policeman.
- 123. I'd ask the policeman why he has such a grudge against drivers.
- 124. I'd try to cooperate with the policeman, who, after all, is a good guy.
- 125. I'd take the ticket without question, since the policeman was just doing his duty.

What would you IMPULSIVELY (in fantasy) want to do?

- 126. Tell the policeman he can't use his position to push me around.
- 127. Kick myself for not having waited for the next green light.
- 128. Thank the policeman for saving me from a possible accident.
- 129. Stand up for my rights as a matter of principle.
- 130. Slam the door in his face and drive off.

What THOUGHT might occur to you?

- 131. He's doing the right thing, actually I ought to thank him for teaching me an important lesson.
- 132. Each man must carry out his job as he sees it.
- 113. This guy ought to go back to pounding a beat.
- 134. How could I be so stupid!
- 135. I bet he gets a kick out of giving tickets to people.

How would you FEEL and why?

- 136. Boiling anger, because he's making trouble for me.
- 137. Resentment, because he's picking on me.
- 138. Ashamed, because I was negligent.
- 139. Indifferent, after all, this sort of thing happens all the time.
- 140. Relieved, because I'd been prevented from getting into worse trouble.

On your way to catch a train, you are hurrying through a narrow street lined with tall buildings. Suddenly a piece of masonry comes crashing down from a roof where repairmen are working. A piece of brick bounces off the sidewalk, bruising your leg.

CIRCLE NUMBER BESIDE YOUR MOST LIKELY RESPONSE TO EACH QUESTION.
UNDERLINE NUMBER BESIDE YOUR LEAST LIKELY RESPONSE TO EACH QUESTION.

What would your ACTUAL reaction be?

- 101. I'd tell them I ought to sue them.
- 102. I'd curse myself for having such bad luck.
- 103. I'd hurry on, for one should not permit oneself to be diverted from one's plans.
- 104. I'd continue on my way, grateful that nothing worse had happened.
- 105. I'd try to discover who these irresponsible people are.

What would you IMPULSIVELY (in fantasy) want to do?

- 106. Remind the repairmen of their obligation to public safety.
- 107. Assure those men that nothing serious had happened.
- 108. Give them a piece of my mind.
- 109. Kick myself for not having watched where I was going.
- 110. See to it that those careless workers pay for their negligence.

What THOUGHT might occur to you?

- 111. Those repairmen don't know how to do their job right.
- 112. I'm lucky that I wasn't seriously hurt.
- 113. Damn those men!
- 114. Why do these things always happen to me?
- 115. One can't be too careful these days.

How would you FEEL and why?

- 116. Angry, because I was hurt.
- 117. Furious, because I was almost killed by their negligence.
- 118. Calm, for one must practice self-control.
- 119. Upset by my bad luck.
- 120. Thankful that I'd gotten away with no more than a scratch.

You return home after spending two years in the army. At the time you joined, you had had a choice between enlistment and a position in your father's business. You preferred the army despite parental advice. Now that you are home again, you find that your range of opportunity hasn't widened appreciably. You can either join your father's business or get a job as an untrained worker. You would like to open a coffee shop, but you lack the capital necessary to carry out such an enterprise. After a great deal of hesitation, you decide to ask your father to put up the money. After listening to your proposal, he reminds you that he had wanted you to take a job with his firm instead of joining the army. Then he tells you, "I'm not prepared to throw away my hard-earned money on your crazy schemes. It's time you started helping me in my business."

CIRCLE NUMBER BESIDE YOUR MOST LIKELY RESPONSE TO EACH QUESTION.
UNDERLINE NUMBER BESIDE YOUR LEAST LIKELY RESPONSE TO EACH QUESTION.

What would your ACTUAL reaction be?

- 141. I'd accept his offer since everyone depends on everyone else in this world.
- 142. I would admit to him that I guess I am a bad risk.
- 143. I'd tell him off in no uncertain terms.
- 144. I'd tell him that I'd always suspected that he had a grudge against me.
- 145. I'd thank him for holding a job open for me all these years.

What would you IMPULSIVELY (in fantasy) want to do?

- 146. Go to work for him and make him happy.
- 147. Give up trying and end it all.
- 148. Take my father's offer since offers like that don't grow on trees.
- 149. Let him know what a miser everyone thinks he is.
- 150. Tell him that I wouldn't work for him if he were the last man on earth.

What THOUGHT might occur to you?

- 151. He'll get what's coming to him one day.
- 152. Family considerations can't enter into business decisions.
- 153. Why was I so stupid as to bring the subject up.
- 154. I must admit that my father is acting for my own good.
- 155. This proves what I've suspected all along, that my father has never believed in me.

How would you FEEL and why?

- 156. Angry, because he doesn't want me to succeed on my own.
- 157. Grateful for his offer of a job with a future.
- 158. Resentful that he is sabotaging my future.
- 159. Resigned, since you can't have everything your own way all the time.
- 160. Hopeless, because I couldn't get my father's approval.

You and an old school friend are competing for a newly vacated executive position in the firm where you work. Although both your chances seem about equal, your friend has had more opportunity to show resourcefulness in critical situations. Recently, however, you have successfully pushed through some excellent deals. In spite of this, the board of directors decides to promote your friend rather than you.

CIRCLE NUMBER BESIDE YOUR MOST LIKELY RESPONSE TO EACH QUESTION.
UNDERLINE NUMBER BESIDE YOUR LEAST LIKELY RESPONSE TO EACH QUESTION

What would your ACTUAL reaction be?

- 181. I'd try to find out which director "blackballed" me.
- 182. I'd continue to do my duty as a responsible person must.
- 183. I'd accept the outcome as proof that I'm not executive material.
- 184. I'd protest the decision of the board most vehemently.
- 185. I'd congratulate my friend on the promotion.

What would you IMPULSIVELY (in fantasy) want to do?

- 186. Ask the board to reconsider, since a mistake would be detrimental to the company.
- 187. Kick myself for having aspired to a job for which I wasn't qualified.
- 188. Show the board how biased they've been in their unjust treatment of me.
- 189. Help my friend make a success at the new job.
- 190. Break the neck of each and every member of the board of directors.

What THOUGHT might occur to you?

- 191. I guess I just don't have what it takes.
- 192. I probably wouldn't enjoy an executive position as much as the one I have now.
- 193. There certainly is something fishy about the board's decision.
- 194. One must take a blow such as this in one's stride.
- 195. Damn that board of directors.

How would you FEEL and why?

- 196. Happy that I still have the job I am used to.
- 197. Upset because my inadequacy was made public.
- 198. Furious at the directors because of their treatment of me.
- 199. Resigned, for that's the way it goes in the business world.
- 200. Angry, because I have been the victim of an unjust decision.

You are extremely eager to do well in sports, but of all those at which you have tried your hand, only in basketball have you been able to achieve a measure of success. However, until now, whenever you have applied for membership in a team or sports club, although the judges have appeared impressed with your initial performance, their final decision has always been the same--they tell you that you've just missed making the grade.

One afternoon your car breaks down and you are forced to take a bus home during the rush hour. As you stand in the crowded bus, you hear your wife's voice. She is seated together with the manager of the team to which you have just applied. You overhear the manager tell her, "Your husband has a nice style of play, we're thinking of asking him to join our club." Then you hear your wife laugh and reply, "Take it from me, he hasn't got what it takes in the long run."

CIRCLE NUMBER BESIDE YOUR MOST LIKELY RESPONSE TO EACH QUESTION.
UNDERLINE NUMBER BESIDE YOUR LEAST LIKELY RESPONSE TO EACH QUESTION.

What would your ACTUAL reaction be?

61. I'd tell her off when we got home.
62. I would greet her affectionately as usual, when I arrived home, because I know she really appreciates me.
63. I'd be quiet and withdrawn for the rest of the evening, not mentioning what I had overheard.
64. I'd take it in my stride, for women's talk is never taken seriously.
65. I'd tell her that I wasn't surprised by what I'd overheard because I had always thought she was two-faced.

What would you IMPULSIVELY (in fantasy) want to do?

66. Tell my wife that I overheard her and was proud of her frankness.
67. Break her neck.
68. Tell her that men expect loyalty from their wives.
69. Let her know that I'd always suspected her of talking behind my back.
70. Stop off somewhere so I wouldn't have to face her.

What THOUGHT might occur to you?

71. I bet she talks about me that way to everybody.
72. What could I have done that makes her feel this way about me?
73. I'm sure she's only kidding.
74. One shouldn't be bothered by such talk.
75. She needs to be taught a lesson.

How would you FEEL and why?

76. Worthless, because I'd realize what a failure I was as a husband.
77. Furious at her for speaking about me that way.
78. Unconcerned, because women are like that.
79. Outraged, because her gossip has probably contributed to most of my past failures.
80. Serene, because I know the manager will realize that she doesn't know what she is talking about.

One afternoon while you and a close friend are cramming for exams, your girl friend drops by unexpectedly. Although you and she have been going steady for over a year, you have not been able to see much of each other lately; therefore you are very happy she has come. You invite her in and introduce her to your friend and the three of you spend a pleasant hour together. A few days later you ring her up and invite her to go out on the town to celebrate the end of exam week, but she tells you that she has come down with a bad cold and thinks that it is best for her not to leave the house. After dinner you feel sort of let down and decide to go to the movies by yourself. Coming out of the movie theater, you come upon your pal arm-in-arm with your girl friend.

CIRCLE NUMBER BESIDE YOUR MOST LIKELY RESPONSE TO EACH QUESTION.
UNDERLINE NUMBER BESIDE YOUR LEAST LIKELY RESPONSE TO EACH QUESTION.

What would your ACTUAL reaction be?

- 161. I'd tell my girl she could have told me it was over instead of cheating behind my back.
- 162. I'd greet them politely as a civilized person should.
- 163. I'd make sure they both knew I wanted nothing more to do with them.
- 164. I'd tell them that I am delighted that they have become friends.
- 165. I'd duck out of sight to avoid facing them.

What would you IMPULSIVELY (in fantasy) want to do?

- 166. Go home and sulk.
- 167. Knock him down and grab the girl away.
- 168. Show them that I really don't mind their being together.
- 169. Ask him if stealing is the only way he knows of getting a woman.
- 170. Indicate that it takes more than one battle to win a war.

What THOUGHT might occur to you?

- 171. This wouldn't have happened if I had been more attentive to her.
- 172. All's fair in love and war.
- 173. They certainly are a pair of double-crossers.
- 174. I hope they get what they deserve.
- 175. I was getting tired of her, anyhow.

How would you FEEL and why?

- 176. Relieved that I was free again.
- 177. Upset, because I shouldn't have been so trusting.
- 178. Resigned, because you've got to take life as it comes.
- 179. Disgusted, because of their dishonesty.
- 180. Furious at them because of what happened.

One afternoon while you and your best friend are cramming for exams, your boyfriend drops in unexpectedly. Although you and he have been going steady for over a year, you have not been able to see much of each other lately; therefore you are very happy he has come. You invite him in for a cup of coffee and introduce him to your girl friend. When you ring up to invite him to your house for dinner to celebrate the end of exam week, he tells you that he has come down with a bad cold and thinks that it is best for him not to leave the house. After dinner you feel sort of let down but you decide to join your parents who are going to the movies. Coming out of the movie theater with your parents, you come upon your boyfriend arm-in-arm with your best friend.

CIRCLE NUMBER BESIDE YOUR MOST LIKELY RESPONSE TO EACH QUESTION.
UNDERLINE NUMBER BESIDE YOUR LEAST LIKELY RESPONSE TO EACH QUESTION.

What would your ACTUAL reaction be?

- 161. I'd ignore them since I'm sure they'd try to pretend that they didn't see me.
- 162. I'd greet them politely as a civilized person should.
- 163. I'd curse them under my breath.
- 164. I'd tell them that I am delighted that they have become friends.
- 165. I'd go home and have a good cry.

What would you IMPULSIVELY (in fantasy) want to do?

- 166. Hide somewhere in order to avoid facing them.
- 167. To slap his face.
- 168. Show them that I am perfectly happy that they are together.
- 169. Ask her if stealing is the only way she knows of getting a man.
- 170. Indicate that I know that all's fair in love and war.

What THOUGHT might occur to you?

- 171. Naturally he likes her; she's so much prettier than I am.
- 172. Self-interest can cause the best of friends to be disloyal.
- 173. They certainly are a pair of double-crossers.
- 174. I hope they get what they deserve.
- 175. They really do make a handsome couple.

How would you FEEL and why?

- 176. Pleased that they get along so well.
- 177. Upset, because I shouldn't have been so trusting.
- 178. Resigned, because you've got to take life as it comes.
- 179. Enraged, because of their dishonesty.
- 180. Furious at them because of what happened.

You are spending your vacation visiting an old friend who has found an exciting new job in another town and has gone to live there. She invites you to go with her to a dance given that weekend at the community clubhouse.

Shortly after you arrive, she accepts an invitation to dance, leaving you with a group of strangers to whom you have barely been introduced. They talk with you, but for some reason no one asks you to dance. Your friend, on the other hand, seems to be very popular that evening; she looks as if she is having a wonderful time. As she dances past, she calls out to you, "Why aren't you dancing?"

CIRCLE NUMBER BESIDE YOUR MOST LIKELY RESPONSE TO EACH QUESTION.
UNDERLINE NUMBER BESIDE YOUR LEAST LIKELY RESPONSE TO EACH QUESTION.

What would your ACTUAL reaction be?

- 61. I'd say sarcastically, "I'm not dancing because I'd rather watch you."
- 62. I'd tell her that I really didn't feel like dancing.
- 63. I'd go to the powder room to see what's wrong with me.
- 64. I'd tell her that it's easier to become acquainted through conversation than it is by dancing.
- 65. I'd get up and leave because she apparently wants to embarrass me.

What would you IMPULSIVELY (in fantasy) want to do?

- 66. Assure her that I am perfectly content and happy so she won't worry.
- 67. I'd like to slap her face.
- 68. Point out that one cannot expect to be the belle of the ball one's first evening in a strange place.
- 69. Tell her that I know now what sort of a "friend" she really is.
- 70. I'd like to sink into the floor and disappear.

What THOUGHT might occur to you?

- 71. She has it in for me.
- 72. I should never have come here in the first place.
- 73. I'm glad my friend is enjoying herself.
- 74. Experiences like this one can't be avoided at a party where you don't know the crowd.
- 75. I'll make her regret her behavior.

How would you FEEL and why?

- 76. Upset, because I was so unsuccessful.
- 77. Furious at her for embarrassing me.
- 78. Resigned, because this is a situation every newcomer must endure.
- 79. Angry at being entrapped by her like that.
- 80. Grateful, for having had such a pleasant evening.

Appendix G**Personality Research Form - Understanding Scale**

- Personality Research Form - Understanding Scale.

a. "True"-keyed items

- 1) I like to read several books on one topic at the same time.
- 2) I am more at home in an intellectual discussion than in a discussion of sports.
- 3) I like magazines offering thoughtful discussions of politics and art.
- 4) I think I would enjoy studying most of my life so I could learn as many things as possible.
- 5) I do almost as much reading on my own as I did for classes when I was in school.
- 6) I would enjoy being a scientist who is studying the effects of the sun on our earth.
- 7) I have great curiosity about a great many things.
- 8) When I was a child, I read almost every book in my house and often went to the library.

b. "False"-keyed items.

- 9) There are many activities that I prefer to reading.
- 10) I would rather work in business than in science.
- 11) I tend to shy away from intellectual discussions.
- 12) Serious books are of little use to me.
- 13) I really don't know what is involved in any of the latest cultural developments.
- 14) I seldom read extensively on any one subject.
- 15) I would rather build something with my hands than try to develop scientific theories.
- 16) Studying the history of ideas has no appeal for me.

Appendix H**Study 2 supporting documents**

INTRODUCTION AND DESCRIPTION OF THE STUDY

My name is Walter Mittelstaedt and I am a doctoral student in the University of Saskatchewan's clinical psychology programme doing my predoctoral internship at Kitchener-Waterloo Hospital Psychiatric Services. In addition to my doing the internship, Dr. Richard Wollert and I are carrying out research which examines the way in which people differ in their reactions to life events.

As part of this line of study, we have been developing a test which measures peoples' tendency to react to negative events with self- or other-blame. Before we can be sure that the test measures what it is designed to measure, however, it will be important to compare its results with the results of other similar tests. As well, it is important to find out whether a person's test scores are similar to reports given by someone who knows that person well.

To further study these issues, I am asking a number of clients from KW Hospital's Psychiatric Services Department to complete the test of reactions to life events along with tests of similar psychological traits. At the same time that these tests are being completed I am asking therapists to complete the same test using their knowledge of the clients. For each item, the therapist will use his or her familiarity with the client to estimate that person's response.

I am asking therapists to present this study to their clients and I would like to ask you to consider volunteering. The questionnaires ask some questions about your attitudes and typical reactions. Your name will not appear on any of the materials except the consent form which will be kept in your clinic file. All communication with me regarding the study will be through your therapist. Your responses will therefore be totally anonymous. The information will be used mainly for research purposes. If your therapist would consider it to be useful for your treatment, results from tests in this package which have previously been clinically-validated tests may be communicated to him/her.

You may examine the materials in this package before deciding if you'll participate. If you decide to participate please notify your therapist as soon as you can. Then, please complete the consent form and follow the instructions for each questionnaire in the package. Please note that you may withdraw your participation at any point during the study.

If you decide not to participate, please return this package to your therapist.

Thank you very much for taking the time to read this description.

Walter Mittelstaedt, M.A.

CONSENT FORM (to be kept in client's hospital file)

I have read the description of the study to be carried out by Walter Mittelstaedt of the University of Saskatchewan (temporarily at the Kitchener-Waterloo Hospital Psychiatric Services Department) and I agree to participate.

I understand that I will be asked to complete a number of questionnaires which will ask questions about my attitudes and typical reactions to life events.

I understand that a therapist, [_____ (name of therapist)] from the Kitchener-Waterloo Hospital Psychiatric Services, will complete some of these questionnaires using his/her knowledge about me.

I understand that this material is to be used for research purposes, that my name or any other identifying information will not be included with any of my responses, that my therapist may receive a limited report of results of clinically-validated tests, and that the test results will not become part of my permanent Kitchener Waterloo Hospital Psychiatric Services file.

I am aware that the results of this study may be published in professional journals but that publication will only present group averages.

I also understand that I may voluntarily withdraw from this study at any time.

(signed)

(date)

(place)

INSTRUCTIONS FOR CLINICIANS

Please read these instructions thoroughly before giving materials to clients.

- 1) Enclosed in this envelope you should find the following materials:
 - a) four "client packages" with identification numbers handwritten on the top right hand corner of the envelope;
 - b) four "clinician packages" with identification numbers which match those of the client packages handwritten on the top right hand corner of the envelope;
 - c) a return envelope;
 - d) extra copies of the description and debriefing forms (for the clinician's reference);
 - e) debriefing sheets;
 - f) Defense Mechanism Inventory scale descriptions.
- 2) As the introductory letter stated, you are asked to invite two to four clients whom you know well to participate in the study. The following guidelines may help you in deciding whom to suggest the study to:
 - a) clients with whom you've had contact in a mental health context at least 8 times;
 - b) clients who, in your judgement, are able to complete self-report paper and pencil tests independently;
 - c) a balance of male and female clients would be preferable;
 - d) clients who are at least eighteen years or older.
- 3) A description of the study is included in each client package. All you need to do is to give the package to clients and ask them to read through the "INTRODUCTION AND DESCRIPTION OF THE STUDY". I have also included a copy of this form in your package so that you may read and discuss it with the client if he or she wishes this. In general, all the information needed to do the study is in this form but if questions arise at this stage I would be happy to answer them. There is no deception involved. If a particular client shows a great deal of reservation in his or her questioning of the study, I would suggest that the therapist discourage his or her participation.

Clients who are interested in participating have been requested in their instructions to inform the participating therapist. Those who choose not to participate are requested to return the package to the therapist.

As you hand out the client packages, be sure to record the identification number of the client in your personal records such that you will be able to match ID numbers between therapist and client materials.

- 1) Once the client has informed you that he or she is participating, you can complete the materials in the therapist packages. Instructions for the materials are included with each measure in the envelope. Give all your responses on the questionnaire forms.
- 2) When the client returns his or her package, remove the completed consent form and place the remainder of the package in the return envelope. The consent form should be added to the client's ongoing clinic file. Next, give the client a copy of the debriefing form titled "MORE EXPLANATION ABOUT THE STUDY". This form essentially re-iterates what is stated in the initial description. Finally, when material from all of your participating clients has been collected, return the materials to me.
- 3) In their instructions, I have asked the clients to try to complete the materials within two weeks of receiving them. I would like to complete this study by the end of May, 1988. I would expect many of the materials will be returned before then but I basically leave the scheduling, within this general time-frame, to individual clinicians.
- 4) In the consent form, I have indicated to clients that their therapists may request a limited report of results on tests included in the study which have been clinically-validated. I have enclosed, in this package, a brief description of the scales of the Defense Mechanisms Inventory, a test which has been used extensively in clinical populations and which is also a part of my study. The scale descriptions may help to inform your decision of whether or not you would find such information to be useful. If, after reading the DMI description, you decide that the interpretation of a particular client's results on this test would be of some use in his/her treatment, please indicate this when returning the completed materials. I will then contact you to discuss this further.
- 5) Once you have received all materials back from your clients, and when you have completed your portion of the study, please return all study materials to me (in Health Psychology until April 30/88; CFC from May to August).

MORE EXPLANATION ABOUT THE STUDY

As I mentioned in the description of the study, I am developing a measure of people's reactions to negative life events. I am particularly interested in "blaming styles". That is, I am interested in finding out if there are consistent differences in people with respect to whom they blame for failure and misfortune. Some people, I believe, are most likely to blame themselves in these situations while others may be most likely to blame others. Others yet may have no strong inclination to blame at all.

Three of the questionnaires in particular asked about these kinds of reactions. The first of these--the "Inventory of Attitudes and Reactions"--takes the approach of asking respondents to rate their agreement with certain attitudes and ways of dealing with situations. This is the new test which I am developing. The second questionnaire which asks about blaming tendencies is the "Sanctioning Style Questionnaire". This test, developed by Dr. Richard Wollert asks respondents to rate how they respond to general failure, disappointment, and misfortune. The third questionnaire deals with blaming tendencies by asking respondents to select their most likely reaction to various situations from a group of typical responses.

When I have received all the responses on these tests I will carry out analyses which will tell me whether people who score high, for example, on the Inventory of Attitudes and Reactions also score high on the other tests. As is standard practice with personality research, I have also included some other tests in the package which are not related to blame. These two measures, both part of the "Personal Reaction and Interest Inventory", are included to ensure that the test of blaming styles is more than a simple measure of "test-taking" behaviour. I expect that scores on these measures will have little or no relation to scores on the blame tests.

Another analysis which I will carry out with the information collected in this study will use the scores given by you and those given by your therapist. I will compare these two sources of information to see if your therapist's responses agree with your own. This part of the study will tell me if the kinds of items I'm using in my test of blaming styles reflect attitudes and behaviours that people can readily report about themselves. It may be, for example, that some of the items I've chosen ask people to report about behaviours that they don't notice in themselves but that others who know them well could report on. Items that are difficult in this way would have to be deleted in future versions of the test.

2....

(turn over)

In future work, I plan to carry out studies which deal with the long and short term effects of self- or other-blaming behaviour. For example, I may be interested in asking questions like "what sort of moods do self- and/or other-blamers experience" or, "how does blaming affect social relationships". These, I feel are important questions but they cannot be addressed without the important steps involved in developing reasonable measures of these personality tendencies. That is why I greatly appreciate your helping out in this study. Without the contribution of people like yourself, the work of psychological research would be greatly hindered. Once again, thank you very much.

Walter Mittelstaedt, M.A.
Department of Psychology
University of Saskatchewan
Saskatoon, Sask.
S7N 0W0

Information Sheet - Clients

ID Number 2007

1. SEX: Male Female
2. AGE: _____
3. MARITAL STATUS: a. single
 b. married
 c. divorced/separated
4. FIRST LANGUAGE: _____
5. HIGHEST LEVEL OF EDUCATION: a. elementary school
 b. high school
 c. university or college
 d. other _____
6. OCCUPATION _____
7. Please estimate the total amount of time that you have received services from a mental health professional (ie. psychiatrist, social worker, psychiatric nurse, psychologist).

 _____ months _____ years

GENERAL INTRODUCTION

In this package you should find four different questionnaires:

- 1) The Inventory of Attitudes and Reactions
- 2) The Personal Reaction and Interest Inventory
- 3) Sanctioning Style Questionnaire
- 4) The DMI

Specific instructions for completing these can be found at the beginning of each questionnaire. Please give all your answers on the test form itself. We recommend that you don't spend too much time on any one item since your first response is usually the best one. Also, if possible, please complete the materials within two weeks of receiving them.

When you are finished, return all materials, along with the completed "Consent Form" to the therapist who gave them to you originally. Thank you very much for your participation.

Walter Mittelstaedt, M.A.
Department of Psychology
University of Saskatchewan
Saskatoon, Saskatchewan.
S7N 0W0

Information Sheet - Clinicians

1. NAME: _____
2. DEGREE OR DIPLOMA: a. M.A.
b. MSW.
c. Ph.D.
d. RN
e. other _____ (please specify)

3. YEARS OF CLINICAL PRACTICE: 2

Please give the following information about this client.

Identification Number 2004

1. In a few words, describe the presenting problem for this therapeutic contact.

-
2. How long have you been seeing this client for therapy?

_____ sessions over _____ months.

3. Compared to most clients you see for therapy, how well do you know this person?

0 1 2 3 4 5 6 7 8

Don't know
him/her very
well.

Know him/her
very well.

4. Please indicate the DSM-III Axis I and Axis III or ICD-9 diagnoses that has been used to describe this client. If no diagnosis has been given please use your information about the person to give Axis I and Axis II classifications.

Axis I _____

Axis II _____

ICD-9 (if applicable) _____

Additional comments regarding diagnosis?

Appendix I
Causal Dimension Scale

Causal Dimension Scale

Please indicate what you consider to be the cause(s) of the outcome of this application:

Instructions: Think about the cause(s) you have written above. The items below concern your impressions or opinions of this cause or causes of your outcome. Circle one number for each of the following scales.

. Is the cause(s) something that:

reflects an aspect 9 8 7 6 5 4 3 2 1 Reflects an aspect
of yourself of the situation

. Is the cause(s):

Controllable by 9 8 7 6 5 4 3 2 1 Uncontrollable by
you or other people you or other
people

. Is the cause(s) something that is:

Permanent 9 8 7 6 5 4 3 2 1 Temporary

. Is the cause(s) something:

Intended by 9 8 7 6 5 4 3 2 1 Unintended by
you or other people you or other
people

. Is the cause(s) something that is:

Outside of you 9 8 7 6 5 4 3 2 1 Inside of you

. Is the cause(s) something that is:

Variable 9 8 7 6 5 4 3 2 1 Stable over time
over time

. Is the cause(s):

Something 9 8 7 6 5 4 3 2 1 Something about
about you others

. Is the cause(s) something that is:

Changeable 9 8 7 6 5 4 3 2 1 Unchanging

. Is the cause(s) something for which:

No one is 9 8 7 6 5 4 3 2 1 Someone is
responsible responsible

Appendix J**Center for Epidemiological Studies Depression Scale**

Centre for Epidemiological Studies Depression Scale

Instructions:

Below are a list of ways you might have felt or behaved. Please indicate how often you have felt this way during the last week. Use these responses to indicate how you feel:

- (1) Rarely or none of the time (less than 1 day)
- (2) Some or a little of the time (1-2 days)
- (3) Occasionally or a moderate amount of time (3-4 days)
- (4) Most or all of the time (5-7 days)

-
-
1. I was bothered by things that usually don't bother me..... _____
 2. I did not feel like eating: my appetite was poor..... _____
 3. I felt I could not shake off the blues even with help from my family and friends..... _____
 4. I felt I was just as good as other people..... _____
 5. I had trouble keeping my mind on what I was doing..... _____
 6. I felt depressed..... _____
 7. I felt everything I did was an effort..... _____
 8. I felt hopeful about the future..... _____
 9. I thought my life had been a failure..... _____
 10. I felt fearful..... _____
 11. My sleep was restless..... _____
 12. I was happy..... _____
 13. I talked less than usual..... _____
 14. I felt lonely..... _____
 15. People were unfriendly..... _____
 16. I enjoyed life..... _____
 17. I had crying spells..... _____
 18. I felt sad..... _____
 19. I felt that people really disliked me..... _____
 20. I could not get going..... _____

Appendix K**Content analytic coding system**

Content Analytic system

HOSTILITY OUTWARD

I-Overt

weights

- 2 self adversely criticizing or depreciating others in a vague or mild manner
- 1 self adversely criticizing, depreciating, expressing anger or dislike of subhuman, inanimate objects, places, situations
- 1 self using hostile words, cursing, mention of anger or rage without referent

II-Covert

- 2 others criticizing or depreciating other individuals in a vague or mild manner
- 1 others adversely criticizing, depreciating, expressing anger or dislike of subhuman, inanimate objects, places, situations
- 1 denial of anger, dislike, hatred, cruelty and intent to harm

HOSTILITY DIRECTED INWARD

- 2 self adversely criticizing, depreciating self, references to regretting, being sorry or ashamed for what one says or does; references to self mistaken or in error
- 2 references to feelings of deprivations, disappointment, lonesomeness
- 1 references to feeling disappointed in self; unable to meet expectations of self or others
- 1 denial of anger, dislike, hatred, blame, destructive impulses from self to self
- 1 references to feeling painfully driven or obliged to meet one's own expectations and standards

AFFIRMATION OUTWARD

2 self affirming, congratulating, expressing positive regard or affiliation toward other human beings in a vague or mild manner

1 self affirming, congratulating, expressing positive or affiliation toward subhuman, inanimate objects, places, situations

1 self using words expressing feelings of pleasure, contentment, satisfaction regarding others without referents

AFFIRMATION INWARD

2 self affirming, congratulating, expressing positive regard toward or positive evaluation of self in a vague or mild manner

1 self using words expressing feelings of pleasure, contentment, satisfaction regarding self without referents

Appendix L**Study 3 supporting documents**

Consent Form

Having read the description of the study to be carried out by Walter Mittelstaedt of the University of Saskatchewan, I agree to participate. I understand that I will be asked to complete a number of questionnaires which ask questions about my attitudes and typical reactions to life events and which ask for some of my opinions about the application procedure for the MSW programme at the Wilfrid Laurier University's Faculty of Social Work. I am aware that some of these materials will be completed before a final decision is made about my application and some will be completed after a decision has been communicated to me. I understand that this material is to be used for research purposes only and that my individual responses will not be available to the Faculty of Social Work nor will the Faculty know the extent of my participation. I am aware that nothing about the study will affect my application in any way.

I consent to releasing a limited amount of information from my application file (academic and interview ratings) to be used for the study, after a final decision about my application has been made. It is my understanding that identifying information will be removed from all study materials upon completion of data collection.

I am aware that the information obtained in this study may be published in professional journals but that publication will not reveal the identity of any participants. I also understand that I may voluntarily withdraw from this study at any time.

(Date)

(Signature)

For mailing purposes, please complete:

Name: _____

Mailing Address: _____

Introductory letter

Dear WLU MSW Applicant:

I am a doctoral student in clinical psychology at the University of Saskatchewan in Saskatoon. I am currently completing a clinical internship at the Kitchener-Waterloo Hospital. While here, I am also collecting data for my dissertation research.

The purpose of this letter is to ask for your participation in a research project that I'm conducting in conjunction with the admissions procedures for Wilfrid Laurier's Master of Social Work programme. Having quite recently been an applicant to similar graduate programmes myself, I understand the sensitivity of this request. I would appreciate it greatly if you would read the remainder of this letter describing the study and then carefully consider whether or not you'd feel comfortable participating.

In general, my research concerns the ways in which people differ in their reactions to life events. In the case of this study, the life event being studied is application to a graduate programme. Participation in the study involves your completing the set of questionnaires enclosed in this package and sending them in to me within two weeks. Completing the consent form with your name and address on it indicates to me that you are willing to complete the second set of questionnaires which will be sent out around the middle of June (after the decisions regarding applications have been communicated to applicants). The second package includes some of the same measures that are enclosed, with the addition of a questionnaire asking for your reactions to various aspects of the application procedure. Following analysis of the data obtained in the study, I will send copies of a summary of the findings, and how these fit into other work, to all participants.

It is important to underscore two issues concerning the confidentiality of the data that I'm collecting. First, none of the raw data that I'm collecting will ever be available to the WLU Faculty of Social Work and none of the materials that you send in as part of your application will be available to me. Whether you are or are not participating will also be unknown to the Faculty of Social Work. Second, the raw data will be kept separate from the consent forms such that individual data points cannot be connected to names. Upon completion of the study, I will request summary ratings concerning the standing of your application from the Faculty of Social Work. These data will be kept anonymous with the use of numbered codes.

Please take some time to review the remainder of the materials in this package. If after doing so, you wish to participate, please complete the consent form and the materials and send them to me within two weeks. If, on the other hand, you don't feel comfortable with the study, you will indicate this by not returning the materials.

For now, I'll say thank you for reading the letter. I trust you will seriously consider participating in the study.

Phase I information

GENERAL INFORMATION

1. Sex: Male Female
2. Date of Birth: _____
3. Years of University completed: _____
4. Degrees completed: _____
5. Number of other professional or graduate schools applied for this year: _____
6. Number of previous VLU Master of Social Work applications; admitted: _____, not admitted: _____
7. Number of years, previous to 1987/88, in which professional or graduate schools applications, other than VLU Social Work, were successful: _____, unsuccessful: _____
8. In the light of your career aspirations and in light of other opportunities, how personally important do you consider the current application to the VLU MSW programme to be?
Not at all important 1 2 3 4 5 6 7 8 9 very important

=====

Phase II information

WILFRID LAURIER MASTER OF SOCIAL WORK APPLICATION STUDY - PHASE II

Please answer the following questions. Feel free to use additional pages for Part II questions, if necessary.

I - Information about Applicant's status

1. Today's date: _____
2. When did you receive the most recent notification regarding the status of your WLU MSW application?
(approx. date) _____
3. What is the status of your WLU MSW application? (circle one) a) accepted into the programme; b) not accepted into the programme; c) accepted as an alternate candidate; d) other (please specify) _____
4. Have you received offers or are you being considered as an alternate candidate for any other graduate schools? ____
(if your answer to this is "yes", please continue with the next item, if "no", proceed to item 7)
5. Other than the WLU MSW programme, how many offers did you receive? ____ or, how many waiting lists are you on? ____
6. In terms of your personal preference, where does the WLU MSW programme rank compared to the highest ranking programme that you received an offer for or were accepted as an alternative candidate?
(circle one); a) ranks above; b) ranks below; c) ranks the same.
7. Were you interviewed for the WLU MSW application? ____ If yes, where were interviewed? (city) _____

II - Perceptions of the Application Process

1. Based on your perceptions of the treatment of your application, evaluate the procedure used to select applicants for the WLU MSW programme. (ie. what are its strengths, weaknesses)
2. Compared to other things you have applied for, did you feel the assessment of your application with respect to the following was fair?
 - a) your academic standing (please elaborate)
 - b) other qualifications which you brought to the application (please elaborate)
 - c) your interview (if applicable - please elaborate).

3. If it were possible, what would you change about;

a) your application?

b) the admission committee's approach to selecting applicants?

4. In your view, which of 3a or 3b needs changing more? (circle one) a) my application; b) the committee's approach; c) neither.

5. In considering the separate contributions of the admissions committee and you, to the outcome of your application, what do you think is a fair assignment of credit or blame?
(circle one - ie. if committee deserves 50% credit/blame and you deserve 50%, select option "e")

the admission committee		myself or my application
a) 10% credit/blame	-	90% credit/blame
b) 20% credit/blame	-	80% credit/blame
c) 30% credit/blame	-	70% credit/blame
d) 40% credit/blame	-	60% credit/blame
e) 50% credit/blame	-	50% credit/blame
f) 60% credit/blame	-	40% credit/blame
g) 70% credit/blame	-	30% credit/blame
h) 80% credit/blame	-	20% credit/blame
i) 90% credit/blame	-	10% credit/blame

6. Please list and rank order the circumstances, individuals, or groups people whom you believe deserve credit or blame for the outcome of your application.

7. List three words or phrases which best describe how you feel about the outcome of the application.

8. Please add any additional comments that you think might be relevant for the study.



Founded 1911

Faculty of Social Work

Wilfrid Laurier University

Waterloo, Ontario, Canada N2L 3C5. Telephone (519) 884-1971

1. Were the directions on applying clear and understandable?

2. How did you first hear about the M.S.W. program at WLU?

<input type="checkbox"/> from an instructor	<input type="checkbox"/> from a friend
<input type="checkbox"/> from a social worker	<input type="checkbox"/> from a brochure or poster
<input type="checkbox"/> from an alumni	<input type="checkbox"/> other

3. Did the application package contain enough information for you to make a decision about applying to this program? If not, please tell us what additional material would have been helpful.

Additional comments:
