University of Windsor

Scholarship at UWindsor

Electronic Theses and Dissertations

Theses, Dissertations, and Major Papers

1986

Depression and its relationship with self-focusing and selfactualization.

Mary Barbara. McMillan University of Windsor

Follow this and additional works at: https://scholar.uwindsor.ca/etd

Recommended Citation

McMillan, Mary Barbara., "Depression and its relationship with self-focusing and self-actualization." (1986). *Electronic Theses and Dissertations*. 1638.

https://scholar.uwindsor.ca/etd/1638

This online database contains the full-text of PhD dissertations and Masters' theses of University of Windsor students from 1954 forward. These documents are made available for personal study and research purposes only, in accordance with the Canadian Copyright Act and the Creative Commons license—CC BY-NC-ND (Attribution, Non-Commercial, No Derivative Works). Under this license, works must always be attributed to the copyright holder (original author), cannot be used for any commercial purposes, and may not be altered. Any other use would require the permission of the copyright holder. Students may inquire about withdrawing their dissertation and/or thesis from this database. For additional inquiries, please contact the repository administrator via email (scholarship@uwindsor.ca) or by telephone at 519-253-3000ext. 3208.



National Library of Canada

Bibliothèque nationale du Canada

Canadian Theses Service—

Services des thèses canadiennes

Ottawa, Canada K1A 0N4

CANADIAN THESES

THÈSES CANADIENNES

NOTICE

The quality of this microfiche is heavily dependent upon the quality of the original thesis submitted for microfilming. Every effort has been made to ensure the highest quality of reproduction possible.

If pages are missing, contact the university which granted the degree.

Some pages may have indistinct print especially if the originalpages were typed with a poor typewriter ribbon or if the university sent us an inferior photocopy,

Previously copyrighted materials (journal articles, published tests, etc.) are not filmed. 9

Reproduction in full or in part of this film is governed by the Canadian Copyright Act, R.S.C. 1970, c. C-30.

AVIS

La qualité de cette microfiche dépend grandement de la qualité de la thèse soumise au microfilmage. Nous avons tout fait pour assurer une qualité supérieure de reproduction.

S'il manque des pages, veuillez communiquer avec l'université qui a conféré le grade.

La qualité d'impression de certaines pages peut laisser à désirer, surtout si les pages originales ont été dactylographiées à l'aide d'un ruban usé ou si l'université nous a fait parvenir une photocopie de qualité inférieure.

Les documents qui font déjà l'objet d'un droit d'auteur (articles de revue, examens publiés, etc.) ne sont pas microfilmés.

La reproduction, même partielle, de ce microfilm est soumise à la Loi canadienne sur le droit d'auteur, SRC 1970, c. C-30.

THIS DISSERTATION
HAS BEEN MICROFILMED*
EXACTLY AS RECEIVED

LA THÈSE A ÉTÉ MICROFILMÉE TELLE QUE NOUS L'AVONS REÇUE

Canadä

DEPRESSION AND ITS RELATIONSHIP WITH SELF-POCUSING AND SELF-ACTUALIZATION

bу

C Mary Barbara McMillan

A thesis
presented to the University of Windscr
in partial fulfillment of the
thesis requirement for the degree of
Master of Arts
in
Psychology

Windsor, Ontario, 1986

(c) Mary Barbara McHillan, 1986

Permission has been granted to the National Library of Canada to microfilm this thesis and to lend or sell copies of the film.

The author (copyright owner) has reserved other publication rights, and neither the thesis nor extensive extracts from it may be printed or otherwise reproduced without his/her written permission.

L'autorisation a été accordée à la Bibliothèque nationale du Canada de microfilmer cette thèse et de prêter ou de vendre des exemplaires du film.

L'auteur (titulaire du droit d'auteur) se réserve les autres droits de publication; ni la thèse ni de longs extraits de celle-ci ne doivent être imprimés ou autrement reproduits sans son autorisation écrite.

ISBN 0-315-29313-6

c) Mary Barbara McMillan

DEDICATION

To my parents Noreen and John,
To my trothers Alan and Sandy,
And to my friends, Sharon and Tine.

ABSTRACT

The purpose of this study was to investigate the relationships between depression, self-focusing (a selfcentered view of life; and self-actualization. The Beck Depression Inventory, the Self Pocus Sentence Completion and the Fersonal Orientation Inventory were administered to 254 male and female subjects drawn from a university undergraduate population. Depression was highly negatively. correlated with self-actualization for both men and women. However, self-focusing was related to depression for women only: the relationship between self-focusing and degression for men was not significant. Both depressed mer and women were found to be <u>negative</u> self-focusers. The relationship Letween self-focusing and self-actualization was not significant for the men or women. A new depression, model was proposed which suggests that women who are low selfactualizers become self-focused as they attempt to meet their various needs. As they continue to focus on their unmet needs, they become depressed. The depression model for men suggests that a low sense of self-actualization leads ultimately to negative self-focusing and depression. Implications for therapy and for further research are also discussed.

ACK HOW LEDGE HE HTS

I would like to thank my Chairman Dr. Robert Fehr, and my Committee Members, Dr. Ged Namikas and Professor Morris Taylor for their encouragement, words of wisdom and practical guidance.

I would especially like to thank Derek Truscott for his invaluable assistance in helping me to decipher the computer printouts, Ann Dyer for scoring 1500 sentences for the inter-rater reliability, Pary Stewart and Diane Zanier for helping me through SYSFUB, Jacques Donders for preparing me for the defence, and Ted Vokes for his support and smile. I would also like to thank the subjects who participated in the study and the graduate students, who all at one time or another encouraged me. Finally, I would like to thank Jane Austen who helped me to maintain a sense of perspective and my sense of humour.

CONTRACS

ABSTR	ACT	iii
ACENC.	WLEDGERRETS	
ac nuc	WINDONESS	.`i⊽
		•
Chapt	<u>er</u>	<u>pa qe</u>
I.	INTRODUCTION	- 1
	Studies of Depression	- 1
	Theoretical Background	- 3
	Beck's Cognitive Schema: Theory and	
	The Learned Helplessness Model: Theory,	- ' '3
ι .	Support and Revision	-
•	Self-focusing and Degression: Theory,	- 7
		. 10
	Research and Support	. 13
-	Self-Actualization: Relationship with	• (3
	Depression and Self-Focusing	. 16
ŧ	Definitions and Assumptions	. 19
-	Hypotheses	20
		• 20
II.	HETHODOLOGY AND PROCEDURE	- 21
	Subjects	2.4
	Psychological Measures	2122
	The Beck Depression Inventory	. 22
	The Self Focus Sentence Completion (SFSC)	23
	Rater Reliability	- 24
	Personal Orientation Inventory (POI)	. 25
	Procedure	• 26
	Statistical Analyses of the Data	. 26
		• 20
III.	RESULTS	. 27
	(1) Hypothesis 1: Pocusing and Depression	
	Interactions	. 27
	(2) Hypothesis 1: Correlations Between	. 21
	Focusing and Depression	. 34
	Additional Analyses	. 34
	dypothesis 2: Depression and Self-	ر د •
	Actualization	_ 41
	Additional Analyses	. 41

Actualization Correlation Additional Analyses		• ну					f-Foc			Self	_		
Hypothesis 1: Pocusing and Depression Interactions (2) Hypothesis 1: Correlations Between Pocusing and Depression Hypothesis 2: Depression and Self- Actualization Hypothesis 3: Self-Focusing and Self- Actualization The New Depression Model Implications For Therapy Suggestions For Further Research Summary REFERENCES Appendix A. THE BECK DEPRESSION INVENTORY B. SELF FOCUS SENTENCE COMPLETION THE SELF FOCUS SENTENCE COMPLETION SCORING	•			Actua	lizat	ion C	orrel	ation	. , 	• '•			
Hypothesis 1: Focusing and Depression Interactions (2) Hypothesis 1: Correlations Between Pocusing and Depression Hypothesis 2: Depression and Self- Actualization Uypothesis 3: Self-Focusing and Self- Actualization The New Depression Model Implications For Therapy Suggestions For Further Research Submary Appendix A. The BECK DEPRESSION INVENTORY B. SELF FOCUS SENTENCE COMPLETION THE SELF FOCUS SENTENCE COMPLETION SCORING	٠.		- A dd	ition	al An	alyse	s	• •			7	• •	42
Hypothesis 1: Focusing and Depression Interactions (2) Hypothesis 1: Correlations Between Pocusing and Depression Hypothesis 2: Depression and Self- Actualization Uypothesis 3: Self-Focusing and Self- Actualization The New Depression Model Implications For Therapy Suggestions For Further Research Submary Appendix A. The BECK DEPRESSION INVENTORY B. SELF FOCUS SENTENCE COMPLETION THE SELF FOCUS SENTENCE COMPLETION SCORING	TV	NT SC II	SSTO		- N-34		٤ .	•			. ,	. **	
Interactions (2) Hypothesis 1: Correlations Between Pocusing and Depression Hypothesis 2: Depression and Self- Actualization Hypothesis 3: Self-Focusing and Self- Actualization The New Depression Model Implications For Therapy Suggestions For Further Research The BECK DEPRESSION INVENTORY B. SELF FOCUS SENTENCE COMPLETION THE SELF FOCUS SENTENCE COMPLETION SCORING		DISCO	2310	. -			• • •	• •		** •	•	• -	. 43
Interactions (2) Hypothesis 1: Correlations Between Pocusing and Depression Hypothesis 2: Depression and Self- Actualization Hypothesis 3: Self-Focusing and Self- Actualization The New Depression Model Implications For Therapy Suggestions For Further Research The BECK DEPRESSION INVENTORY B. SELF FOCUS SENTENCE COMPLETION THE SELF FOCUS SENTENCE COMPLETION SCORING		HV	coth	es is	1: Po	cusin	a and	Lebr	essio	л [%]	 (2	٠	
(2) Hypothesis 1: Correlations Between Pocusing and Depression 48 Hypothesis 2: Depression and Self- Actualization 49 Hypothesis 3: Self-Focusing and Self- Actualization 49 The New Depression Model 49 Implications For Therapy 54 Suggestions For Further Research 56 Suggestions For Further Research 56 Suggestions For Further Research 57 REFERENCES 59 Appendix 59 Appendix 59 Appendix 65 B. SELF FOCUS SENTENCE COMPLETION 71 C. THE SELF FOCUS SENTENCE COMPLETION 500RING										- 4	,,,		_ 43
Focusing and Depression 48 Hypothesis 2: Depression and Self- Actualization 49 Hypothesis 3: Self-Focusing and Self- Actualization 49 The New Depression Model 49 Implications For Therapy 54 Suggestions For Further Research 56 Summary 57 REFFEBENCES 59 Appendix Dage A. THE BECK DEPRESSION INVENTORY 65 B. SELF FOCUS SENTENCE COMPLETION 71 C. THE SELF FOCUS SENTENCE COMPLETION SCORING		! 2							Betwe	en	-	T T	
Hypothesis 2: Degression and Self- Actualization	•									_ ·			_ 48
Actualization Hypothesis 3: Self-Focusing and Self- Actualization The New Depression Model Implications for Therapy Suggestions For Further Research Summary Appendix Appendix B. SELF FOCUS SENTENCE COMPLETION THE SELF FOCUS SENTENCE COMPLETION SCORING		Нy							1f-		: - T	· -	
Actualization	•	·								\ <u>.</u>			4.9
The New Depression Model Implications for Therapy Suggestions For Further Research Summary Appendix The Beck Depression Inventory SELF FOCUS SENTENCE COMPLETION THE SELF FOCUS SENTENCE COMPLETION 5000000000000000000000000000000000000		Ну	roth	esis	3: Se	lf-Fo	cusin	g and	Self	_			
Implications for Therapy		_		Actua	lizat	ion		· •			-		. 49
Suggestions For Further Research										·		<u>.</u> .	4,9
Summary 57 REFERENCES 59 Appendix page A. THE BECK DEPRESSION INVENTORY 65 B. SELP FOCUS SENTENCE COMPLETION 71 C. THE SELP POCUS SENTENCE COMPLETION SCORING	•	ID	flic	ation	s for	Ther	ary -	• •					
Appendix A. THE BECK DEPRESSION INVENTORY B. SELP FOCUS SENTENCE COMPLETION THE SELP POCUS SENTENCE COMPLETION SCORING	•				FCE	Furth	er Re	searc	h	• •	•		
Appendix A. THE BECK DEPRESSION INVENTORY		Su	Bmar	ሃ • . `							•		- 57
Appendix A. THE BECK DEPRESSION INVENTORY		•.						`	. •• 3				
Appendix A. THE BECK DEPRESSION INVENTORY				1. Take	•		•						
A. THE BECK DEPRESSION INVENTORY	BEFEBE	BC ES	• •		• • •		• • •	• •			•		- 59
A. THE BECK DEPRESSION INVENTORY											·		
A. THE BECK DEPRESSION INVENTORY	•			<i>:</i>		•		•	•				
B. SELF FOCUS SENTENCE COMPLETION	<u>append</u>	1 X										,	page
B. SELF FOCUS SENTENCE COMPLETION	1 10	ה פוסית	DCT .	nénne	CCTAN	THE	NEW ODE		•		:	1830 5	
C. THE SELP FOCUS SENTENCE COMPLETION SCORING	Δ.	THE D	ECR	DEPED	92108	THAD	BIUKI		• • •	·	-	•	03
C. THE SELP FOCUS SENTENCE COMPLETION SCORING	ń	CPTP	POCH	C CPN	# P K C P	COMP	T KETA	N.					٠,
•	U •	2011	,rucu	מסי כ	TEBCE	COBE	PEITÓ		• • •	' - , -	•		. /
•	C. !	THR S	FLP	POCUS	SENT	RHCP	CORPT	ደ ጥ የብዛ	SCOR	TRC			
									JCUB	1 1 1 1			ָּי ער
						,	,	• •	: • •	• •	; •	• •	. / 3
D. THE PERSONAL ORIENTATION INVENTORY	D	THE P	BRSO	MAL O	RIENT	ATION	INVE	NTORY			_		. 75

¥.,,

.

LIST OF TABLES

Table		page
1	One-Way Multivariate Analysis of Variance and	
	Analyses of Variance From Data of All Subjects Between Levels of Focusing and Depression	29
2	One-Way Multivariate Analysis of Variance and Analyses of Variance For Women Only Who	
	Scored 10 or Greater or 2 or Less on the EDI	31
3	One-Way Multivariate Analysis of Variance and Analyses of Variance For Both Men and Women	
	Who Scored Either, 10 or Greater or 2 or Less on the EDI	32
4	The Pearson Product-Ecment, Correlation	
	Coefficients Fcr EDI, Self-Pocusing and External-Focusing for Both Men and Womer	33
5	One-Way Multivariate Analysis of Variance and Analyses of Variance Por Both Hen and Women Who Scored Within the Extreme Groups on the BDI	<u>≤</u> 35
6	One-Way Multivariate Analysis of Variance and Analyses of Variance For Males Only Who Scored Within the Extreme Groups on the BDI	36.
.7	One-Way Multivariate Analysis of Variance and Analyses of Variance For Women Who Scored in the Extreme Groups on the BDI	38
3	Burns' BDI Depression Score Equivalency	_ 45

Chapter I

INTRODUCTION

The introductory chapter will consider the relevant literature in the areas of depression, self-focusing and self-actualization. Depression will be discussed in terms of two popular models: Beck's cognitive triad and Seligman's learned helplessness hypothesis. Particular attention will be addressed to the recent research, both in support of and in opposition to these popular models. Pinally, the theoretical position taken in this paper will be discussed, particularly in relation to the hypotheses.

STUDIES OF DEPRESSION

It is generally accepted that information is processed and interpreted according to one's own unique cognitive schemata. A cognitive schema may be defined as a "structure for screening, coding and evaluating the stimuli that impinge on the organism. It is a model by which the environment is broken down and organized into it's many psychologically relevant facets" (Beck, 1967, p. 283). Over the past ten years, one of the principle foci in the study of depression has been on two cognitive schemata: Beck's cognitive triad (Beck, 1967) and Seligman's learned

helplessness hypothesis (Seligman, 1975). The cognitive triad includes a negative view of the self, a negative view of the world (others) and a negative view with regard to the future (Beck, 1967). The learned helplessness model focuses more specifically on the feelings of helplessness: the depressed individual underestimates his or her control over the outcome of important events (Seligman, 1975).

There is support for the view that the cognitive distortions found in depressed individuals constitute a cognitive schema, a relatively stable system for viewing the world (Gotlib & McMann, 1984; Baves & Rush, 1984; Lewinsohn, Steinmetz, Larson & Franklin, 1984; Davis IV & Unruh, 1981; Hammen & Cochran, 1981; Kuiper & Derry, 1982). In the Gotlib & McCann [1984] study, subjects were asked to name the colour of words shown via a slide projector. These words were of manic, depressive or neutral content. They found that depressed subjects tock longer to name the colour of depressive content words than they did to process either of the other two word categories. Gotlib & McCann (1984) argue that degressed individuals have the negative cognitive schema "primed" to receive the depressive content, to attend to it more and to process it more fully: consequently, depressed subjects require extra time to name the colour of the depressive words.

THEORETICAL BACKGROUND

Beck's Cognitive Schema: Theory and Research

Beck (1967) maintains the view that depression is primarily a cognitive disorder brought about by stress: the negative affect, thought to be the hallmark of a depressive episode, appears at a later time, ence the negative thinking patterns have become more entrenched within the individual. Stress leads to the "hyperactivation" of here-to-fore latent rigid cognitive schemas in the depression prone individual. Once activated, these schemas "function" automatically and lead to the distorted, depressive perceptions (Beck, 1967).

This negative thinking pattern or cognitive schema has three major components: a negative view of the self, of the world and of the future. Beck (1967) has defined the negative view of self as a persistent regard for oneself as deficient, worthless, inadequate and undesirable. Events of an unpleasant nature are accepted as an indication of a "physical, mental or moral defect" in oneself, while events which are more pleasant and fulfilling are attributed solely to some external cause (Beck, 1967). The "negative view of self" may be translated more appropriately into a "rejection of the self".

The negative world view refers to the individual's interaction with the environment: each foray into the world is perceived as a defeat. Life appears to be riddled with obstacles and burdens to beam. The "cold shoulder" from the

world and the consequent inability to deal with it is then interpreted as yet another area of deficiency and inadequacy.

The negative view that the depressed individual has towards the future results from his or her anticipation that the present situation will not change appreciably in the future: all that one may look forward to is more of the same suffering and hardship.

Support for Beck's depressive cognitive schema may be found within three general areas of research: the presence of thought distortion, memory and recall inaccuracies and from evidence of impaired task performance. A plethora of researchers have found evidence of thought distortions in their depressed subjects. Eaves & Rush (1984) report that depressed individuals endorse more dysfunctional attitudes, are more likely to accept responsibility for negative events and have greater frequency of negative automatic thoughts than the control subjects. Krantz & Hammen (1979) developed a questionnaire to assess cognitive bias in depression using a broad spectrum of subject samples: college students, an outpatient group receiving therapy and an inpatient group. Regardless of the group assessed, the more depressed individuals produced higher cognitive distortion scores than the nondepressed control groups. Further support may be found for Beck's model as Krantz & Hammen (1979) have also found that individuals who have a tendency to distort their

perceptions also tend to be relatively more depressed than nondistorters. Wilkinson & Blackburn (1981) present results which indicate that their depressed patients consistently display cognitive distortions: they endorse feelings of hopelessness, blame themselves for negative events, attribute positive events to external sources and make negative, irrational responses. As well as confirming the positive relationship between degressed individuals and thought distortions, Weintraub, Segal & Beck (1974) support Beck's theoretical position that the negative schema is strongly related to depressed moods and therefore may be the prime mover behind depression. In a retrospective study, Barvey (1981) was also interested in how depressed and nondepressed female college students would differ in assigning causal attributions to life events. administered a questionnaire which asked subjects to list three important positive and negative events. The results support Beck's (1967) model, as the depressed subjects tend to blame themselves for the occurrence of the negative events more often than the nonderressed subjects. Vestre (1984) reports a positive correlation between level of depression and the degree of irrational thinking: the more intense the depressed mood, the higher the level of irrational thinking. Finally, Gotlib & McCann (1984) have teen able to demonstrate that derression is primarily a thought disorder and secondarily a mood disorder. They

first induced their subjects into a depressed, elated or neutral mood and then presented them with 150 words, each of varying emotional quality. The subjects were required to name the colour of each word presented. Unlike the true depressed individual, the depression induced individuals do not process the negative content words more deeply, as they do not possess the depressive cognitive schema.

Further support for a negative cognitive schema in depression may be found in the tendency for depressed individuals to recall events in a more negative fashion than they occurred in reality. In the Gotlib (1981) study, the researchers asked the subjects to "reward" or "runish" themselves according to how they felt they were performing. The depressed subjects recalled rewarding themselves on fewer occassions than did the control subjects, although they did not differ in terms of the actual number of reinforcements given. In a similar study, the subjects were arbitrarily reinforced or punished for various task oriented behaviours. Although all subjects were reinforced and punished according to the same schedule, depressed subjects underestimated the amount of reinforcement and cverestimated the amount of punishment, relative to the nonderressed subjects (Nelson & Craighead, 1977). In a more recent study, Gotlib (1983) reports that degressed subjects negatively distort their recall of a stranger's rating of their (the depressed subject(s) interpersonal skill.

According to the cognitive distortion model, depressed subjects should maintain a fairly high level of performance while viewing their skills to be inadequate. Friedman (1964) reports that, although the depressed subjects rated themselves more negatively on 82% of mood scale items (i.e., dull, slow, worried, frustrated), the nondepressed subjects outperformed the depressed subjects on only 4% of the performance tasks! Therefore, for certain cognitive, perceptual and motor tasks, depressed subjects are not as helpless, inefficient and unable to work hard as they might think.

To summarize, there is substantial evidence to show that depressed individuals do not perceive life in the same manner as nondepressed individuals do. Depressed people tend to interpret events in a negative way: they feel more hopeless, tend to blame themselves for negative events and fail to perceive events for what they are.

The Learned Helplessness Model: Theory. Support and Revision
The proponents of the learned helplessness view of
depression are in agreement with Beck regarding the
characteristics of a depressed individual. They differ
primarily with regard to the acquisition of the negative
cognitive schema. The learned helplessness hypothesis of
depression argues that the depressed individual has come to
expect that his or her voluntary responses will have no

appreciable effect on the goal object (Seligman, 1975). For example, if a depressed individual is in a bad marriage, he or she may cease in the struggle to obtain a divorce, as other attempts have only met with failure. Seligman (1975) has demonstrated a helplessness in dogs (and other animals) which he believes to be analogous to depression in human beings. If dogs are first given inescapable shock and then put in a shuttlehox where they are given the opportunity to escape the impending shock by jumping over a barrier, they fail in the majority of cases to learn to escape. Instead of trying to escape, the dogs tend to sit passively in the shuttlebox, simply enduring the shock.

The theory of learned helplessness claims that the "realization" that outcomes are uncontrollable leads to three deficits, motivational, cognitive and emotional (Abramson, Seligman & Teasdale, 1978). The motivational deficits the reluctance to initiate voluntary responses, is derived from the apparent noncontingency between responding and effect. A cognitive deficit results from this perceived noncontingency. When the individual is placed in a situation where his or her response could lead to favourable results, he or she experiences a great deal of difficulty in learning the new response. The individual's degressed spirits are thought to result from the perceived noncontingency between response and outcome.

Klein, Fencil-Morse & Seligman (1976) were able to produce a "learned helplessness effect" in nondepressed subjects by giving them unsolvable problems. When they were then given sclvable magrams to decipher, they showed the familiar depressive deficit- a marked inability to solve any of the anagrams.

Although Seligman's theory of learned helplessness has enjoyed some empirical support, it has since become apparent that the phenomenon of helplessness is somewhat more complex than first presented. The depressives view of his or her own helplessness to effect a response in a specific situation does not reflect on another individual's ability to be successful in that same situation. Depressed individuals believe in a personal helplessness, rather than a universal helplessness (Garber & Hollon, 1980). In fact, depressed subjects will often attribute control to others, even in situations where a noncontingency of response and effect occurs (Martin, Abramson δ Alloy, 1984). The reformulated learned helplessness hypothesis involves the same basic principles: the individual develops a profound feeling of helplessness when he cr she perceives a noncontingency between the response made and the effect (Abramson, Seligman & Teasdale, 1978; Alloy & Alramson, 1979; Abramson & Alloy, 1981). According to the modified hypothesis, once the noncontingency is perceived, the depressed individual will attribute his or her helplessness

to a cause, the cause by stable or unstable, glchal or specific, and internal or external forces. The revised learned helplessness model predicts that depressed subjects will attribute their helplessness to stable, glchal and internal causes. The nature of this assigned cause will in turn effect the form of or at least the expectation of future occurrences of helplessness, whether they be chronic or acute, broad or narrow (perception of helplessness for one specific response or several), and whether cr not selfesteem will be lowered (Atramson, Seligman & Teasdale,

Some support has been found for the reformulated learned helplessness hypothesis (Golin, Sweeney & Shaeffer, 1982; Harvey, 1981). Kammer (1983) informed both depressed and nondepressed female university students that they had ostensibly failed an important exam. The depressed students attributed their failure to global (I'm a failure), stable (I'll always be a failure) and internal (I'm not smart enough) factors, thus giving full support to the reformulated hypothesis.

Self-focusing and Depression: Theory, Research and Support
Beck implies, in his view of the cognitive schema, that
depressed individuals have a very narrow view of the world;
they may be said to be "focused". Within this narrow view,
depressive's are cognizant only of data which reinforce
their negative cognitive schema.

Schlesinger (1954) was the first to use the term "focusing". He defined it as "not only the ability to take and maintain such a set for accuracy when it is appropriate to do so, but also an underlying preference for experiencing the world in a narrowed, discriminating way, even when the task does not demand such an approach" (Schlesinger, 1954). It is important to note here from this definition that it is implied that "focusers" are accurate in their views, although they may be narrow and restricted, and that it may not always be appropriate to be "focused" at all times (i.e., it could be considered to be rathological). Individuals who are non-focusers may therefore te considered to have a less restricted, more global approach to life, although accuracy in their perceptions may be sacrificed. A self -focuser them will have the same attributes as a focuser, with the additional characteristic of a focus on the self. For example, one may be said to "focus on the self" when one is focusing on his or her thoughts, feelings or behaviour, or when one is daydreaming (Fenigstein, Scheier & Buss, 1975).

Researchers have recently noticed the similar personality characteristics of self-focusers and depressed subjects. Smith & Greenberg (1981) summarized the similarities between depressed individuals and self-focusers: they found that both groups of subjects are more self-critical, exhibit greater negative affect, and have

heen more accurate with regard to the amount of control they believe they exhibit over environmental stimuli. (See also-Pryor, Gibbons, Wicklund, Fazio & Hood, 1977). Holzman (1957) found that focusers are more aware of their immediate surroundings, as are depressed individuals. Also, Duval & Wicklund (1973) discovered that if a subject's focus of attention is manipulated so that it is trained on the self, the subject is more likely to attribute causality of an event to himself than is a subject whose focus is more external. This could explain why depressed subjects typically attribute negative outcomes to themselves.

Smith & Greenberg (1981) measured the degree of relationship between depression, using the D 30, a 30 item factor analytically derived subscale from the Minnesota Multiphasic Personality Inventory (MMPI), and self-focusing, as assessed by the Self Consciousness Scale, consisting of such items as "I'm always trying to figure myself out" (Fenigstein, Scheier & Buss, 1975). The correlation between depression and self-focusing was found to be <u>r</u> = 28, not particularly large, but it is comparable to correlations found in the depression literature (Krantz & Hammen, 1979; Herndt, Kaiser & Van Aalst, 1982).

Ingram & Smith (1984) replicated the Smith & Greenberg (1981) findings, using a different measure of depression.

They used the Beck Depression Inventory (BDI) instead of the D 30, to detect mild depression in university students. In

the three separate samples that they tested, the Pearson Product-Moment Correlation Coefficients between the BDI and the Private Self-Consciousness Scale were $\underline{r} = .23$, $\underline{r} = .32$ and $\underline{r} = .28$. Again, the correlations are not very large, but they are consistent with the original research.

In the second stage of the Ingram & Smith (1984) study, their earlier findings were replicated, using the BDI and the Self Focus Sentence Completion (SFSC), developed by Exner (1973). They were interested in determining the relationship between mild depression and a more current assessment of the self-focused state. The results indicate that depressed subjects are significantly more self-focused than nondepressed subjects and that nondepressed subjects are significantly more externally focused than are depressed subjects.

Complications in Depression Research

Research now indicates a need for a broader perspective on depression. Neither Beck's cognitive triad nor Abramson, Seligman & Teasdale's (1978) reformulated learned helplessness hypothesis can fully account for the heterogeneity of the disorder. First, one of the most basic assumptions in both the Beck and the Abramson, Seligman & Teasdale models is that the negative cognitive schema is permanent, a personality trait. However, both Wilkinson & Blackburn (1981) and Hamilton & Abramson (1983) report that

the depressed subjects did not show any evidence of cognitive distortion after recovery. A second tasic assumption underlying both models is that depressed individuals' self perceptions will be unrealistically negative and abusive. Indeed the early research has found ample support (Beck, 1967; Eaves & Rush, 1984; Krantz & Hammen, 1979). Some of the more recent research however is finding that depressed individuals have very <u>realistic</u> selfperceptions. In fact, there is evidence to suggest that the nondepressed individuals are positively exaggerating their own personal skills: the perception of the depressed individual appears to be negative only in comparison with the grandiose/self-deception of the nondepressed individuals (Sackeim, 19/83; Alloy & Abramson, 1979; Hamilton & Abramson, 1983; Lewin sohn, Mischel, Chaplin & Barton, 1980; Gotlib & Robinson, /1982; Blumberg Hokanson, 1983; Martin, Abramson 8 'Alloy, 1984).

Although nondepressed persons may be entertaining deceptive self-perceptions, recent research by Tabachnik, Crocker & Alloy (1983) indicates that nondepressed subjects may be more accurate than depressed persons in their perceptions of others: for example, the probability of another subject succeeding in a particular task. Unfortunately, all of the recent research findings have not found this new perceptual pattern in depressed and nondepressed subjects. Depressed individuals have not been

consistently found to be realistic nor have the nondepressed subjects been found consistently to be unrealistic and self-glorifying (Bizley, 1972; Gotlit, 1983; Bryson, Doan & Pasquali, 1984). Finally, to further complicate this picture, Gotlib & Olson (1983) report that, regardless of an individual's emotional state, if one perceives cheself to be successful on an experimental task, one will accept the credit; if one perceives oneself to have failed, one will blame an external factor.

Although the recent results concerning the selfperception of depressed and nondepressed individuals are
confused and contradictory, two points may be derived from
this ambiguity. First, neither of the two major hypotheses,
Beck's nor Abramson, Seligman & Teasdale's (1978), can
account for these new findings. Their two main assumptions,
that depressed individuals have a permanent and negative
self-abusive cognitive schema, are invalidated by the most
recent research. Secondly, since the present
conceptualization of depression cannot account for the more
recent research findings, a broader perspective is necessary
in order to put this new information into a context.

SELF-ACTUALIZATION: BELATIONSHIP WITH DEPRESSION AND SELF-FOCUSING

Individuals who are considered to be self-actualizers likely possess a very different type of cognitive schema than has been discussed to this point. According to the theory, self-actualizers perceive input from the world with truer, keener eyes (Maslow, 1968). Since the self-actualized individual is free from cultural or peer pressure and is accepting of both self and others, the typical biases found in non self-actualizers (i.e., envy) are markedly absent. This more veridical view of the world in turn leads to concern and involvement in causes larger than the self, for example, world peace. (For a more comprehensive examination of self-actualization, please refer to Maslow 1968; Maslow 1970; Maslow 1971; Daniels 1982).

The contrast between depressed individuals and selfactualizers is quite sharp. Depressed individuals have been
found to be self-focusers; their cognitive schema or
organization of their world is through a very narrow focus
on the self, whereas self-actualizers perceive the world
through a more global perspective. As has already been
discussed, depressed individuals tend to be quite negative
in their self appraisals: at times this negativity may be
warranted, at others it is not. Self-actualizers, in
contrast, strive to see beyond the "ego", to be caught up in
a greater cause than self. Self-actualization and selffocusing may be conceptualized as representing either end of

Aschwach (1982) supports this view. Their results suggest that "people who experience a weak sense of actualization in their present existence have a notion of the future that is likely to be more vague, less structured and less coherently connected to the present" (Lombranz, Medini & Aschwach, 1982). It is quite common for depressed individuals also to have a dim view of the future: often the future is simply a continuation of the present, steeped in hopelessness (Beck, 1967).

very little of the research on self-actualization.has been considered in the context of depression. However, Berndt, Kaiser & Van Aalst (1982) did examine the relationship between depression and self-actualization in a sample of academically gifted adolescents. Although the correlations were fairly small, in general, it appears that nonself-actualizers are significantly more depressed than self-actualizers.

Ingram, Smith & Brehm (1983) suggest that individuals may possess a plurality of cognitive schemata. Crawford (1985) cautions researchers not to look too narrowly at one's field, but to try to view it from a number of perspectives. He stresses that "a human event, is determined by the simultaneous action of many factors at various levels" (Crawford, 1985). If one combines these apparently disparate statements together in relation to the

depression literature, it can lead one into proposing a possible link between depression, self-focusing and self-actualization. Self-actualization appears to be the antithesis of both depression and self-focusing. The latter depends upon the centrality of the ego: self-actualization seeks to minimize its presence. One could therefore expect that depressed individuals might be rather self-focused and not self-actualized. It may be that varying degrees of self-actualization determine the other cognitive schemata currently active within each individual. For example, if self-actualization is particularly low, the individual may be very depressed and self-focused. A linear model of depression is proposed: depression = a high score on self-focusing and a low score on self-actualization.

The purpose of this study is to examine the relationships among depression, self-focusing and self-actualization. As is mentioned above, a small but significant correlation between mild depression and self-focusing has been reported and Berndt, Kaiser & Van Aalst (1982) also found a small but significant correlation between mild depression and self-actualization. These relationships will be assessed through the use of three personality measures: the Beck Depression Inventory (BDI), the Self Focus Sentence Completion (SFSC) and the Personal Orientation Inventory (POI). Undergraduate students at the University of Windsor will be administered the EDI, the SFSC

and POI. It should be noted that this is a partial replication of the Ingram & Smith (1984) study.

DEFINITIONS AND ASSUMPTIONS

For the present study, depression has been defined as a state in which the individual feels hopeless and helpless to change the current state of affairs. Depression is a heterogeneous disorder, of varying degrees of severity and impairment. Generally, it is expected that the subjects will fall in the normal to mildly depressed range, according to the BDI.

self-focusing is defined as a state in which the individual perceives the world with specific reference to the self. These perceptions tend to be egocentric in nature, as the main emphasis in any interaction revolves around how the world impinges on the self, rather than how the world effects the world. The state of self-focusing may be measured according to a continuum, with either end representing a pathological condition. Individuals who can focus their attention on both themselves and the external world are thought to be healthy.

self-actualization may be defined as a continuous progression towards the realization of one's full potential: to be all one can be. Self-actualizers are considered to be very healthy individuals, who do not perceive the world only according to their own needs (self-focusers), but also according to the needs of the world.

A number of theoretical assumptions are being made within this study. It is assumed that depression, self-focusing and self-actualization can be measured, that these characteristics will be present in the subjects tested and that the selected tests of these characteristics, the BDI, SFSC and the FOI are valid measures of these concepts. Finally, it is assumed that the individual's subjective perception with regard to these characteristics, hears a strong relationship with objective reality.

HYPOTHESES

C.

The previous discussion leads to the following hypotheses.

- 1. Self-focusing will be related to depression and external-focusing will be related to nondepression. Further self-focusing will be significantly positively correlated with depression and external-focusing will be significantly negatively correlated with depression.
- 2. Depression will be significantly negatively correlated with self-actualization.
- 3. Self-focusing and self-actualization will be significantly negatively correlated.

Chapter II METHODOLOGY AND PROCEDURE

The purpose of this study is to examine the relationships among depression, self-focusing and self-actualization. goal of this chapter will be to discuss the methodology and the procedure used to test the experimental hypotheses.

SUBJECTS

The subjects for this study consisted of undergraduate students currently enrolled in psychology summer semester courses at the University of Windsor. Two hundred and eighty-six students participated in the study and data from 254 of these students were used. Data on 32 participants were discarded for various reasons, including insufficient knowledge of ⇒the English language and incomplete questionnaires. Of the 254 subjects, 176 are women and 82 are men. The mean age of the participants is 26 years, with a range between 19-65. Subjects were invited to participate in a personality study and they were told that they would be required to complete the three questionnaires. All students received one additional percentage point per hour of participation in the study.

PSICHOLOGICAL MEASURES

Three psychological instruments were administered to each subject: the Eeck Depression Inventory (BDI), the Self Focus Sentence Completion (SFSC) and the Personal Orientation Inventory (FOI).

The Beck Depression Inventory

3

The EDI is a measure of the state of depression rather than a measure of a depressive trait (Hammen, 1980). The BDI (revised) consists of 21 sets of 4 statements, each, assessing one specific dimension of depression (Eeck, 1967). The first statement in each set will theoretically be endorsed by a nondepressed individual. The statements progress in severity to the last statement, which will likely be endorsed by an individual tending toward a severe depression. (See Appendix A).

Beck (1967) used the split-half technique to obtain a measure of reliability. He reported that the Pearson Product-Moment Correlation Coefficient between the odd and even cases is <u>r</u> = .86. He also computed the concurrent validity of the BDI using clinical ratings. He used the concurrent validity of the BDI using clinical ratings. He used the Kruskal-Wallis One-Way Analysis of Variance by Banks, p < .001. More recent studies using college samples have also found the concurrent validity to be high. Bumberry, Oliver & McClure (1978) report that the concurrent validity between the EDI and psychiatric ratings is <u>r</u> = .77, p < .001.

Likewise, Hammen (1980) compared the BDI to the Hamilton Rating Scale for Depression and found r = 80, p < 001.

Although Beck (1967) factor analyzed the BDI and discovered 4 factors; vital depression, self-debasement, pessimism-suicide and indecision-inhibition, a more recent factor analysis by Golin & Hartz (1979) indicates that, for a mildly depressed college student population, the BDI yields only one factor, that of horelessness.

The Self Pocus Sentence Completion (SFSC)

The SPSC, also thought to be a state measure, was originally developed by Exner (1973) as a measure of egocertricity or narcissism. (See Appendix B). Essentially, the test consists of 30 items: each item is the stem of a sentence (i.e., I think...; I was happiest when... etc.). Each subject was requested to complete each of the sentence stems (i.e., I think best when I'm alone). These responses were then scored according to the self-focusing criteria established by Exner (1973): self-focus (S), self-focus negative (Sn), external world focus (E), external world focus-affective (Ea), ambivalent (A) and neutral responses (O). The scoring criteria for the SFSC may be found in Appendix C.

Exner (1973) completed many studies with regard to both the inter-rater reliability and the concurrent validity of the SFSC. In 3 separate studies, Exner used various groups

of raters: undergraduate students and secretarial staff, graduate students and Ph.D clinical psychologists. The reliability coefficients were quite high across the 3 groups and across the 6 scoring categories, ranging from \underline{r} = .68 to \underline{r} = .97, with the majority of the reliability coefficients falling in the \underline{r} = .97 range. Exner also obtained several measures of concurrent validity. In one study, SFSC scores were compared to the actual number of self-references made in a job interview and found to be significantly related, \underline{p} < .05.

Rater Reliability

Fifty of the 254 Self Focus Sentence Completion protocols were randomly selected and scored by an independent rater who was blind to both the hypotheses of the study and to actual sentence completion ratings by the author. The raters were considered by the author, to be in agreement when they both scored each sentence according to one of the following six categories: S (self-focus), E (externalfocus), A (ambivalent), N (neutral), Sn (self-focus negative), and Ea (externalfocus affective). Cverall, across 1500 sentences, the raters were in agreement on 99% of the sentences. Across the 6 scoring categories, percentage agreement is as follows: S 99.3%, E 99.6%, O 99%, A 100%, Sn 98.6%, and Ea 100%. As the percentage agreement scores indicate, there is virtually no discrepancy between the 2 independent raters.

Personal Orientation Inventory (POI)

The POI is a 150 item forced hoice personality test, designed to measure self-actualization (Shostron, 1964).

(See Appendix D). It may be scored along 14 dimensions; for example time incompetence (TC), inner direction (I) and self-actualizing value (SAV). Damm (1969) reports that the best overall measure of self-actualization on the POI is the raw score of the I scale. Therefore the I scale was used as the measure of self-actualization.

Shostrom (1966) reports that the test-retest reliability correlation coefficients, based on a testing interval of one week, are <u>r</u> = .71, <u>r</u> = .84 for the major scales Tc and I, respectively. The reliability correlation coefficients for the subscales range from <u>r</u> = .55 to <u>r</u> = .85. Shostrom (1966) also reports that concurrent validity correlation coefficients are significant for all scales at <u>p</u> < .01 or greater. Tosi & Lindamood (1975) have reviewed the relevent literature with regard to both the reliability and validity of the POI and conclude that it is an adequate research instrument. (For more details, please refer to the Tosi & Lindamood (1975) article).

PROCEDUR B

The subjects were tested in groups, either in their classrooms during class time or during a specifically arranged time. The 3 questionnaires required approximately an hour to complete. Each subject was given a packet containing the 3 questionnaires, counterbalanced for an order effect. The demographic data collected at the time of testing included the subject's age and sex. Anonymity for each subject was guaranteed and maintained. Interested subjects received a brief summary of the research findings at the conclusion of the study.

STATISTICAL ANALYSES OF THE DATA

The data were analyzed using One-Way Multivariate Analyses of Variance (MANOVA), Analyses of Variance (ANOVA), a Multiple Regression and Pearson Product-Moment Correlation Coefficients.

Chapter III

RESULTS

The purpose of this study is to examine the relationship between depression, self-focusing and self-actualization.

This chapter presents the results of the statistical analyses.

(1) HYPOTHESIS 1: FOCUSING AND DEPRESSION INTERACTIONS Hypothesis 1, that self-fccusing is related to depression and external-focusing is related to nondepression, originated from an earlier study by Ingram & Smith (1984). In particular, their results indicated a significant interaction between depression and SFSC categories (self, external, ambivalent and neutral focusing), (F (3,201) = 12.35, p <.001). Further, they reported that the depressed subjects made significantly more total self-focus responses than did the nonderressed subjects, (\pm (67)=4.48, p <.001), and that depressed subjects made significantly fewer external-focus statements, (\underline{t} (67)=5.27, \underline{p} <.001), than did nondepressed subjects. In the present study, the relationship between depression and self-focusing was examined from several angles. In particular, the data were grouped according to various BDI scoring criteria. Tables

1-3, 5-7 show the six variations on the "depressionfocusing" theme. These tables report both a One-Way
Multivariate Analysis of Variance (MANOVA) for the main
effect of focusing, and Analyses of Variance (ANOVA) for the
main effect for the four focusing categories (self,
external, ambivalent and neutral).

The first hypothesis was examined initially by considering all the data from 254 subjects. A significant main effect was found for focusing in general (\underline{F} (3,250)=3.20, \underline{p} =.02), as supported by Ingram & Smith (1984).

In order to further examine the focusing and depression relationship, the depression variable was further divided into four groups, to become the dependent variable.

These data were divided across 4 groups according to the EDI criteria: nondepressed (EDI 0-4), middle (5-9), mild depression (9-12), moderately-severely depressed (13-43). Table 1 indicates a significant main effect for selffocusing and depression, (\underline{F} (3,250)=3.20, \underline{p} =.02), and a main effect for neutral-focusing, (\underline{F} (3,250)=5.07, \underline{p} =.002).

The main effect for self-focusing was further examined. When the depression scores were divided into the four categories (nondepressed, middle, mild and moderately -severely depressed), as mentioned above, the middle depression group (the group between nondepressed and mildly

TABLE 1

One-Way Multivariate Analysis of Variance and Analyses of Variance From Data of All Subjects Between Levels of Focusing and Depression

Dependent Variable	Adjusted <u>SS</u>	_ <u>d£</u>	<u>F</u> .
Self-focusing	124.12	3,250	3. 20*
External-focusing	54-69	3,250	2.55
Ambivalent-focusing	2.60	3,250	- 60
Neutral-focusing	157.55	3,250	5.07*
Focusing		12,747	2. 15*

^{*}p<- 05

depressed) was the least self-focused (least squares mean = 13.87) while the remaining three groups all achieved approximately the same degree of self-focusing (nondepressed 15.56, mildly depressed 15.66 and moderately-severely depressed 15.85).

Also, the self-focused statements were further examined for their negative orientation (i.e., I am: not worthy of love). A main effect was found for negative self-focusing, (£ (3,250)=7.38, p <.0001). Generally, depressed women and men tend to think more negatively about themselves than do nondepressed women and men.

The main effect for neutral-focusing was also further examined, considering women and men separately. The main effect for neutral-focusing was significant for women (F (3,168)=4.33, p <.006) but not for men. The number of neutral statements made by the middle group (Least Squares Mean=7.7) was significantly larger than the nondegressed group (Least Squares Mean=5.35). Both the mildly depressed and moderately-severely depressed women scored within this range. The neutral-focusing main effect was not significant when data from males only were considered.

In a second variation on the focusing-depression theme, the Ingram & Smith (1984) BDI parameters were followed for females. To replicate their design, only 92 female subjects were used, who either scored 10 or greater (depressed group) or 2 or lower (nondepressed) on the BDI. Table 2 reports

findings of a One-Way MANOVA and reveals that the main effect for focusing was not significant (F (3,87) = 2.46, p = .0509). The Ingram & Smith (1984) study was not supported. When focusing was divided into the four categories (self, external, ambivalent and neutral), only the external focusing main effect was found to be significant, as Table 2 shows. Only this result supported Ingram & Smith's (1984) research. Following Ingram & Smith's design, but now including the male subjects in the data, the same results

were obtained. Table 3 shows this.

One-Way Multivariate Analysis of Variance and Analyses of Variance For Women Only Who Scored 10 or Greater or 2 or Less on the BDI

Adjusted	<u>ss</u> <u>df</u>	<u>F</u>
21_94	1,9	90 3.01
38.72	. 1,9	9_28*
.01	1,9	.24
1.52	1,9	00 -13
	3,8	31 2.46
	21_94 38_72 -01	38.72 1.9 .01 1.9

TABLE, 3

One-Way Multivariate Analysis of Variance and Analyses of Variance For Both Men and Women Who Scored Either 10 or Greater or 2 or Less on the BDI

Dependent Variable	Adjusted <u>SS</u>	<u>đ</u>	<u>F</u>
Self-focusing	21.94	1,137	1.57
External-focusing	38.73	1,137	5.44*
Ambivalent-focusing	-01	1,137	-01
Neutral-focusing	1.52	1,137	•13
Focusing		3,134	1.36
See the property of the second		•	

^{*}p<- 05

(2) HYPOTHESIS 1: CORRELATIONS BETWEEN FOCUSING AND DEPRESSION

Hypothesis 1 predicted significant correlations between depression and self-focusing and depression and external-focusing. Table 4 shows the Pearson Product-Moment Correlation Coefficients between BDI scores and Self-focusing and External-focusing scores, separately, for both men and women. The correlation between depression and self-focusing was not significant for women, ($\underline{r} = .13$, $\underline{p} = .08$), or for men, ($\underline{r} = .08$, $\underline{r} = .47$). External-focusing and the BDI were negatively correlated for women only ($\underline{r} = .17$, $\underline{p} = .02$). External-focusing was highly negatively correlated with self-focusing for both women ($\underline{r} = .54$, $\underline{p} = .0001$), and—men ($\underline{r} = .40$, $\underline{p} = .002$).

TABLE 4

The Pearson Product-Moment Correlation Coefficients For BDI, Self-Focusing and External-Pocusing in Both Men and Women

BDI	Self	External	
BOIL	.13	17*	*
Self		54*	
External MEN BDI	.05	,-	.
Self		40*	
External	•		. ,

*p<- 05

Additional Analyses

In order to examine the relationship between the four focusing categories and extreme depression scores, the data from subjects who either scored 20 or greater (depressed) or 1 or 0 (nondepressed) on the BDI, were used. Three separate analyses were run. The first analysis (Table 5), combined both males and females together: the second, (Table 6), male subjects only and the third, (Table 7), female subjects only. Table 5, a One-Way MANOVA, for both males and females, shows that the main effect for focusing was not significant, (F (4,134)=1.36, p=.12). An ANOVA for the main effect for external-focusing was also not significant (

 $\underline{\mathbf{F}}$ (1,52)=3.84), $\underline{\mathbf{p}}$ =.06), while the self-focusing main effect was significant ($\underline{\mathbf{F}}$ (1,52)=6.53, $\underline{\mathbf{p}}$ =.01).

An ANOVA on the negative self-focusing main effect was significant (F (1,52)=30.29, p <.0001). Depressed men and women, as a group, who scored 20 or greater on the EDI, exhibited more negative thoughts than did the nondepressed men and women.

In the second stage of the analysis of the extreme groups (according to the EDI scores), males only were considered. Table 6 reports that neither the MANOVA nor the ANOVA's were significant. The focusing main effect was not significant (\underline{F} (3,14)=.13, \underline{p} =.97). Likewise, both the self-focusing (\underline{F} (1,17)=.28, \underline{p} =.60), and the external-focusing main effects (\underline{F} (1,17)=.39, \underline{p} =.54) were not significant. Even though a significant main effect was not found for self-focusing in males, a main effect for negative self-focusing was found, (\underline{F} (1,17)=6.11, \underline{p} <.02). Depressed men endorsed more negative self-statements than nondepressed men. No significant correlations were found for self-focusing and external-focusing categories for males.

Finally, the third stage of the analyses of the extreme groups of BDI scores, used only female subjects. Table 7 reveals that the One-Way MANOVA for the main effect for focusing was significant (\underline{F} (3,30)=3.63, \underline{p} =.02). The ANOVA shows that the self-focusing main effect was

TABLE 5

One-Way Multivariate Analysis of Variance and Analyses of Variance For Both Men And Women Who Scored Within the Extreme Groups on the EDI

Dependent Variable	Adjusted	<u>ss</u>	<u>đ</u> <u>f</u>	<u>F</u>
Self-focusing	86 - 29		1,52	6.53*
External-focusing	24.99		1,52	3.84
Ambivalent-focusing	- 70		1,52	46
Neutral-focusing	15.81	• • •	1,52	1.51
Focusing	1.		3,49	1.91
	•			

^{*}p<-05

TABLE 6

One-Way Multivariate Analysis of Variance and Analyses of Variance For Males Only Who Scored Within the Extreme Groups on the BDI

Dependent Variable	Adjusted <u>SS</u>	<u>đ</u> £.	<u>F</u>
Self-focusing	5.98	. 1,17	- 28
External-focusing	1_74	1,17	-39
Ambivalent-focusing	_ 34	1, 17	21
Neutral-focusing	1.94	1,17	. 12
Focusing		3,14	_ 13

significant (\underline{F} (1,33)=13.00, \underline{p} =.001). The external-focusing main effect was not significant, (\underline{F} (1,33)=3.33, \underline{p} =.08).

An ANOVA performed on the negative self-focusing main effect, for females only, was significant (\underline{F} (1,33)=28.66, \underline{p} =.001). In particular, depressed female subjects entertained more negative self-focused thoughts than did the nondepressed female subjects.

TABLE 7

One-Way Multivariate Analysis of Variance and Analyses of Variance For Women Only Who Scored in the Extreme Groups on the BDI

Dependent Variable	Adjusted <u>s</u>	<u>df</u>	<u>F</u>
Self-focusing	88.96	1,33	13.00*
External-focusing-	20.68	1,33	3.33
Ambivalent-focusing	-37	1,33	- 25
Neutral-focusing	20.13	1,33	4-27*
Focusing		3,30	3.63*

^{*}p<- 05

HYPOTHESIS 2: DEPRESSION AND SELF-ACTUALIZATION

In order to test the second hypothesis that depression is significantly negatively correlated with self-actualization, pearson Product-Moment Correlation Coefficients were computed using all 254 subjects. As predicted, there was a moderate negative correlation between depression and self-actualization (\underline{r} =-.43, \underline{r} =.0001): as one's level of depression increases, one's degree of self-actualization decreases. Further, the correlation between self-actualization and depression for males only, was (\underline{r} =-.47, \underline{r} = .001), and for females, (\underline{r} =-.41, \underline{r} = .001).

Additional Analyses

In his work on Self-Actualization, Abraham Maslew (1968), (1970), (1971) concluded that there was a positive correlation between age and self-actualization. He believed that older individuals were more likely to be more self-actualized. The present data indicate that there was a significant age effect with depression (\underline{r} =-.16, \underline{p} =.01), self-focusing (\underline{r} =-.21, \underline{r} =.0006) and self-actualization (\underline{r} =.24, \underline{p} =.0001). In an effort to determine whether the high negative correlation between depression and self-actualization was primarily due to an age effect, a Step-wise Multiple Regression was computed. Even with the age effects partialled out, the main effect for self-actualization was significant (\underline{r} (3,250)=49.93, \underline{p} =.0001), \underline{r}^2 =.19.

BYPOTHESIS 3: THE SELF-FOCUSING AND SELF-ACTUALIZATION CORRELATION

The third hypothesis, that self-focusing and self-actualization are significantly negatively correlated was not supported (\underline{r} =-.06, \underline{p} =.31).

Additional Analyses

The self-focusing and self-actualization correlation was not significant when female subjects only were considered, (\underline{r} =-.11, \underline{p} =.17), and when the parameters were restricted further to female subjects, BDI=20 or greater, cr 1 or 0, (\underline{r} =-.10, \underline{p} =.17).

Chapter IV

The purpose of this study was to examine the relationships among depression, self-focusing and self-actualization. The goal of this chapter is to discuss the results and to consider the implications for further study.

HYPOTHESIS 1: FOCUSING AND DEPRESSION INTERACTIONS

The first hypothesis, that self-focusing is significantly related to depression and external-focusing is significantly related to nondepression, has found some support. Table 1 shows the first examination of hypothesis 1 using the entire subject sample of 254 subjects. A significant main effect for self-focusing was found. However, the main effect for external-focusing was not significant. Table 2 shows the results from the Ingram 8 Smith (1984) replication using female subjects only and the main effect for self-focusing was not significant. However, the significant main effect for external-focusing supported the first hypothesis. Table 3 reveals that when the data from both males and females were considered, the same results were reported as in Table

The results presented to this point show some support. for hypothesis 1: significant main effects for both self-focusing and external-focusing have been demonstrated. These main effects are not consistently found across all subgroups, however.

Three of the analyses examined in the "additional analyses" section, used data only from subjects who scored at either of the extreme ends on the BDI scale (depressed= BDI of 20-43, nondepressed= BDI of 1 or 0). Tatle 5 reveals the results of the data from all of the men and women who had extreme BDI scores. In this variation, the main effect for self-focusing was significant. Table 6 shows that when male subjects are considered separately, there are no significant main effects for focusing. In other words, the scores of the females determined the significance of the main effects. Table 7, which shows results for female subjects only, and indicates that the self-focusing main effect is significant, supports this conclusion.

To summarize, there is some support for hypothesis 1; self-focusing and external-focusing have been found to be related to depression. But, these relationships were determined primarily by gender.

Two of the significant main effects for self-focusing were further examined. Using the extreme depression groups, and women only, the depressed group was found to be significantly more self-focused than the nondepressed group. This result also supports hypothesis 1.

The significant main effect for self-focusing was also further examined for all 254 subjects by assigning them to one of the four depression groups: nondepressed (BDI=1-4), middle (BDI=5-7), mildly depressed (BDI=8-12), and moderately-severely depressed (BDI=13-43). It was hypothesized (1) that the nondepressed group would be the least self-focused and that the moderately-severely depressed group would be the most self-focused. However, the results revealed that the middle depression grown was the least self-focused and the other three depression groups [non, mild and moderately-severely], achieved approximately the same level of self-focusing. This result was not predicted and is difficult to explain within the theoretical background given thus far. However, in conjunction with another piece of information, this finding may be explained. The middle group (BDI=5-7) was found to be the least selffocused. Also, a main effect was found for neutralfocusing. When this finding was further examined, it was found that the neutral-focusing main effect was significant for women only. Since this middle group of women were the most likely to endorse neutral statements and the least likely to endorse self-focusing statements, they may be actively denying their feelings.

Perhaps the clearest finding related to hypothesis 1 is that males and females differ with regard to the significance of the main effects of focusing. Terressed

male subjects are not self-focusers and nondepressed male subjects are not external-focusers. Conversely, when only female subjects are considered, depressed females are self-focused and nondepressed female subjects are externally-focused.

with regard to negative self-focusing, significant main effects were found for both men and women, although generally, depressed men were not found to be self-focusers. That is, when given a neutral sentence to complete, both depressed males and females are more likely to complete the sentence in a self derogating manner than are nondepressed men and women.

appears to be significant only for women, one question that must be considered is this: why is the self-focusing main effect not as clear in the Ingram & Smith (1984) replication as it is in the original study? One possible arswer is the difference between the two subject samples. This study included a greater range of depression scores at the high end of the scale (10 or greater) than the Ingram & Smith (1984) study. From a pool of 642 potential introductory psychology students, 69 women (or approximately 1 out of 9) were chosen by Ingram & Smith (1984) who met either of the two depression level criteria (either 10 or greater or 2 or lower on the BDI). The total sample size for the present study was 254, 172 females, 82 males. Of the 176 females,

92 fell within the above mentioned parameters; over one half of the women who participated in this study fell within the Ingram & Smith (1984) criteria for the depressed or nondepressed group! Therefore, the present subject sample appears to contain more depressed individuals than the original sample. In other words, the mean depression score (BDI=8.1) in this study approaches the criterion score (BDI=10) in the Ingram & Smith (1984) depressed group. Verbal reports of the summer school subjects seemed to support this observation.

Further, Ingram & Smith (1984) used a rather low BDI score to define depression. This can be shown by considering Burn's BDI Depression Score Equivalencies as shown in Table 8. Burns (1980), a student of Beck's, provides a somewhat different BDI scoring scale than Ingram & Smith (1984).

TABLE 8

Burns' BDI Depression Score Equivalency

Total Score	Levels of Depression
1-10	<pre>-ups and downs are considered normal</pre>
11-16	-mild mood disturbance
17-20	-borderline clinical depression
21-30	-moderate depression
31-40	-severe depression
over-40	<pre>-extreme depression</pre>
	· -

What Ingram & Smith (1984) consider to be depressed (BDI=10), Burns (1980) considers to be 'normal'. The upper depression range in the present study is 20-43, within Burns' "borderline clinical depression-extreme depression" ranges. Therefore, generally the composition of our subject sample appears to include more extreme depressed scores than the Ingram & Smith (1984) sample.

(2) <u>BYPOTRESIS</u> 1: <u>CORRELATIONS</u> <u>BETWEEN POCUSING AND DEPRESSION</u>

Hypothesis 1 also predicted significant correlations between both self-focusing and external-focusing and depression.

The self-focusing and depression correlation for women was not significant. The negative correlation between external-focusing and depression was significant however:

nondepressed women are more externally-focused than are depressed women. Indeed, external-focusing plays a significant role in nondepressed women. Thus this aspect of hypothesis 1 was supported.

HYPOTHESIS 2: DEPRESSION AND SELF-ACTUALIZATION

Theoretically, one would expect self-actualized people to be relatively free of self-concern. Therefore, hypothesis 2 predicted a negative correlation between depression and self-actualization for the entire sample. This hypothesis was supported by the significant negative correlation between depression and self-actualization. Depressed

individuals are not as self-actualized as nondegressed individuals. Further, when the genders were separated, the negative correlation between degression and self-actualization was slightly higher for men than for women.

This finding will be discussed below.

Age was found to be negatively correlated with both depression and self-actualization. When age was partialled out from the interaction, the relationship between depression and self-actualization was still significant.

EXPOTHESIS 3: SELF-FOCUSING AND SELF-ACTUALIZATION

On the assumption that depression and self-focusing are related, it was hypothesized (3) that self-focusing and self-actualization would be negatively correlated. This hypothesis was not supported. We would have to say that the

relationship with the measure of self-actualization.

self-focusing aspect of depression has no direct

THE NEW DEPRESSION MODEL

The hypothesized depression model, relating both selffocusing and self-actualization together has only been
partially validated. It had been hypothesized that
depression would be related to self-focusing and negatively
correlated with self-actualization. There was some evidence
to support this aspect of the model. For female subjects,
there was a significant main effect for self-focusing and a

significant negative correlation between depression and self-actualization. For the male subjects, there were no significant main effects for self-focusing or any type of focusing, except for negative self-focusing. Depressed males, like females, were less self-actualized than their nondepressed counterparts.

A second part of the model proposed that selfactualization and self-focusing would be negatively
correlated. Indeed it was hypothesized that a high selffocusing score would be a necessary component of a low selfactualization score. This did not occur however. The
proposed relationship between self-focusing and selfactualization was not significant for either male or female
subjects.

The hypothesized model of depression has received some support from the results presented here. This depression model, however, appears to apply to females only. Males do not become self-focused when depressed. However, they do become negatively self-focused when depressed. With regard to the depression model for females, it is clear that it cannot be linear in nature, as was predicted. Depression was found to be related to both self-focusing and self-actualization, but self-focusing and self-actualization were not related. Therefore, the model is likely norlinear.

Given that the depression model for females has some validity, how does it relate to the popular depression

theories (Beck's Cognitive Model and Abramson, Seligman and Teasdale's Revised Learned Helplessness Hypothesis)? A necessary component in both Beck's and Abramson, Seligman & Teasdale's theories, is the negative cognitive schema. It is suggested here that self-actualizers may indeed have a different cognitive schema, and perceive the world differently than do nonself-actualizers. There is evidence presented here to suggest that nonself-actualized females tend to be more depressed. The more severely depressed females also are more self-focused.

Both Beck and Abramson, Seligman & Teasdale also stress the permanence of the cognitive schema. However, as has already been discussed, Wilkinson & Blackburn (1981) and Hamilton & Abramson (1983) did not find any evidence of a depressive cognitive schema once the depression had lifted. The presence of the transient negative cognitive schema may be explained using the new self-actualization, self-focusing and depression model for women. A nonself-actualizer, by definition, does not focus her attention outwardly towards the world, but inwardly towards herself, towards her own needs. As she focuses more and more on her needs, and her inability to meet them, she becomes negative about herself and develops a negative cognitive schema. If these needs are not met, the individual's focus is increased on these needs, in an attempt to get the desired response. This is called self-focusing. The thwarted needs may then lead to

depression. Theoretically, once the depressed individual has some of her needs met, and therefore can begin to be more self-actualized, the depression will lift. The cognitive schema is not a permanent cognitive trait, but a consequence of a depressive focus.

Although there is no evidence to suggest that a low level of self-actualization precedes depression, rather than follows it, it is hypothesized here that this is indeed the course of events.

The second assumption made by Beck and Abramson,

Seligman & Teasdale, is that degressed individuals perceive
themselves in a negative way. However, their perception
with regard to themselves has been found to be accurate. As
this new model hypothesizes, women are self-focused and have
an accurate perception of reality. They only appear to be
negative because they focus on needs which are not being
met. This does not imply that they are unrealistic however.
Similarly, nondepressed individuals are thought to distort
their reality positively: an alternative explanation is that
their focus of attention is trained on positive events which
serve to meet their needs. Their focus is on the positive,
therefore they perceive the world in a highly positive way.

Duval & Wicklund (1973) support the view referred to above, that a positive or negative self-orientation is directly related to one's focus of attention, namely fulfilled or unfulfilled needs. "To the extent that a

person focuses attention upon one object or area of the environment to the exclusion of other areas, he will tend to attribute causality for any event to that object or area! (Wicklund & Duval, 1973):

The depression model for male subjects cannot be derived satisfactorily from the present data. Although the correlation between depression and self-actualization is high, ($\underline{r} = -.47$, $\underline{p} = .001$), this relationship accounts for only 22% of the variance. It is clear that other factors are influencing depression, but they are as yet unspecified.

Initially, the proposed depression model for males follows the one outlined for females. It is suggested here that a low sense of self-actualization or an inability to meet one's tasic needs is the catalyst for depression. Although, self-focusing is not a viable component in this model, it is important to note that depressed men are negatively self-focused. It is beyond the power of this study to determine how a low sense of self-actualization is related to negative self-focusing.

The subsequent factors which intervene between low self-actualization and depression can only be conjectured at present. However, a low sense of self-esteem may follow from a low sense of self-actualization and further mediate the depression.

A second factor which may be involved in the depression model for males is anxiety. Remming (1968), discovered that

as males become more self-actualized, their anxiety level also increases. The anxiety level does not increase indefinitely, but at some point of greater self-actualization, the anxiety level decreases.

As anxiety is a known correlate of depression (Gotlib, 1984), the anxiety factor may also explain the slightly higher negative correlation between self-actualization and depression for males. In fact, anxiety may mediate the relationship between self-actualization and depression. As was mentioned above, the anxiety level for males initially increases then decreases as one approaches self-actualization. For females, however, the anxiety level initially decreases, and then increases as they approach self-actualization. As both males and females achieved average self-actualization scores in this study, males would likely be feeling fairly anxious and females relatively less anxious at this time. Therefore, the higher level of anxiety may have contributed to the higher correlation for males between depression and self-actualization.

IMPLICATIONS FOR THERAPY

Since it was necessary to generate two depression models, one for males and one for females, the implications for therapy will be dealt with separately. The implications for the treatment for female clients will be discussed first.

Although a woman's level of depression cannot be predicted

these two variables contribute somewhat to one's understanding of the various dimensions of depression. If this new model has some validity, it will be necessary for the therapist to focus his or her attention on helping the client to meet her thwarted needs. When these needs are met, the depressed individual will begin to turn her orientation more towards the external world. A self-actualized woman is not a depressed woman.

The depression model for males is even less clear than it is for females. However, a low sense of self-actualization is proposed to be the initiating factor. The subsequent factors which contribute to the depression are unknown, although it is known that depressed males are negatively self-focused. The client may experience a decrease in the severity of the depression as he is encouraged to meet some of these thwarted needs. As these needs are met, he will be free to meet the task of self-actualization. An increase in the male client's level of anxiety should be expected, as he begins to meet some of these needs, and becomes more self-actualized. The anxiety will need to be dealt with effectively if he is to become more self-actualized.

SUGGESTIONS FOR FURTHER RESEARCH

The depression model for women, at present has two unrelated members, self-focusing and self-actualization. Therefore, further research is required to determine the other factors contributing to depression and their relationships with self-focusing and self-actualization. For example, a poor sense of self-esteem has long been linked to depression (Pachman & Foy, 1978). How then does low self-esteem relate to self-focusing and self-actualization? The depression model for men at present has only one significant member: self-actualization. What are the other factors? Is self-esteem one of them?

This research was conducted on a university sample.

The next step in developing these depression models involves the use of a clinical sample of depressed individuals. Do the relationships within these depression models still exist?

Finally, a word of caution. A number of researchers, particularly Mendels, Weinstein & Cochrane (1972) warn that their research indicates that with self-report measures, including the BDI, it is difficult to distinguish between the effect of depression and the effect of anxiety. Anxiety and depression and anxiety and self-actualization appear to be highly correlated. Therefore, it will be necessary to tease out the effect of anxiety from both depression and self-actualization, in order to determine the relationship

between depression and self-actualization. Once the effect of anxiety has been removed, is there still a high' correlation between these two variables? To remedy such situations as this, Gotlib (1984) asserts that depression research ought to include a psychopathology control group to insure that the results attributed to depression are not related to a more general form of psychopathology (i.e., anxiety).

SUMBARY

The present study was unable to replicate the Ingram & Smith (1984) results fully, although external-focusing was related to depression for female subjects. When extreme scores at either end of the BDI continuum were considered, selffocusing was found to be significantly positively correlated with depression. As predicted, depressed women were low self-actualizers. However, self-focusing and selfactualization were unrelated. It was proposed that the new model of depression for women was in some respect nonlinear and that depression follows from both a low sense of selfactualization and a negative form of self-focusing. Ingram & Smith (1984) results were not replicated for the male subjects. Depression was not found to be related to self-focusing, but under the right conditions, it was related to negative self-focusing. Depression was highly negatively correlated to self-actualization. The new

depression models are clearly incomplete, with only a few components sketched in. Further research is needed to complete the models.

BEFERENCES

- Abramson, L.Y., Seligman, M.E.P., & Teasdale, J.D. [1978].
 Learned helplessness in humans: Critique and reformulation. <u>Journal of Abnormal Psychology</u>, 87, 49-74.
- Abramson, L. Y. & Alloy, L. E. (1981). Depression, nondepression and cognitive illusion: Reply to Schwartz.

 <u>Journal of Experimental Psychology: General, 110, 436-447.</u>
- Alloy, L. B. & Abramson, L. Y. (1979). Judgment of contingency in depressed and nondepressed students: Sadder but wiser? <u>Journal of Experimental Psychology: General</u>, 108, 441-485.
- Beck, A. T. (1967). <u>Depression: Clinical, Experimental and Theoretical Aspects.</u> New York: Harper & Row.
- Beck, A. T. (1978). BDI Revised. Philadelphia: Centre of Cognitive Therapy.
- Berndt, D. J., Kaiser, C. F. & Van Malst, F. (1982).

 Depression and self-actualization in gifted adolescents.

 <u>Journal of Clinical Psychology</u>, 38, 142-150.
- Blumberg, S. R. & Bokanson, J. E. (1983). The effects of another person's response style on interpersonal behaviour in depression. <u>Journal of Abnormal Psychology</u>, 92, 196-209.
- Brysch, S. E., Doan, B. D. & Pasquali, P. (1984). Sadder but wiser: A failure to demonstrate that mood influences judgments of control. <u>Canadian Journal of Behavioural Science</u>, 16, 107-119.
- Bumberry, W., Oliver, J. M. & McClure, J. N. (1978).
 Validation of the Beck Depression Inventory in a
 university population using psychiatric estimate as the
 criterion. <u>Journal of Consulting Psychology</u>, 46,
 150-155.
- Burns, D. (1980). <u>Feeling Good: The New Mood Therapy</u>. New York: Signet Books.

- Crawford, M. F. (1985). Psychology, technology and professional service. <u>American Psychologist</u>, 40, 415-422.
- Damm, V. J. (1969). Overall measures of seff-actualization derived from the Personal Orientation Inventory.

 <u>Educational and Psychological Measurement</u>, 29, 977-981.
- Daniels, M. D. (1982). The development of the concept of self-actualization in the writings of Abraham Maslow.

 <u>Current Fsychological Reviews</u>, 2, 61-76.
- Davis IV, H. & Unruh, W. R. (1981). The development of the self-schema in adult depression. <u>Journal of Abnormal Psychology</u>, 90, 125-1334
- Depue, R. A. & Monroe, S. M. (1978). Learned helplessness in the perspective of the depressive disorders; Conceptual and definitional issues. <u>Journal of Abnormal Psychology</u>, 87, 3-20.
- Duval, S. & Wicklund, R. A. (1973). Effects of objective self-awareness on attribution of causality. <u>Journal of Experimental Social Psychology</u>, 9, 17-31.
- Eaves, G. & Rush, J. A. (1984). Cognitive patterns in symptomatic and remitted unipolar major depression.

 <u>Journal of Abnormal Psychology</u>, 93, 31-40.
- Exner, J. E. (1973). The Self Focus Sentence Completion: A study of egocentricity. <u>Journal of Personality</u>
 <u>Assessment</u>, <u>37</u>, 437-455.
- Fenigstein, A., Scheier, A. & Buss, H. (1975). Public and private self-consciousness: Assessment and theory.

 <u>Journal of Consulting and Clinical Psychology</u>, 43, 522-527.
- Friedman, A. S. (1964) Minimal effects of severe depression on cognitive functioning. <u>Journal of Abnormal and Social Psychology</u>, 69, 237-243.
- Garber, J. 8 Hollon, S. D. (1980). Universal versus personal helplessness in depression: Belief in uncontrollability or incompetence? <u>Journal of Abnormal Psychology</u>, 89, 56-66.
- Golin, S., Sweeney, P. D. & Shaeffer, E. (1981). The causality of causal attributions in depression: A crosslagged panel correlational analysis. <u>Journal of Abnormal Psychology</u>, 40, 14-22.

- Gotlib, I. H. (1981). Self-reinforcement and recall:
 Differential deficits in depressed and nonderressed
 psychiatric inpatients. Journal of Abnormal Psychology,
 90, 521-530.
- Gotlib, I. H. & Robinson, L. A. (1982). Responses to depressed individuals: Discrepancies between self-report and observer-rated behaviour. <u>Journal of Abrormal Psychology</u>, 91, 231-240.
- Gotlib, I. H. (1983). Perception and recall of interpersonal feedback: Negative hias in depression. Cognitive Therapy and Research, 7, 399-412.
- Gotlib, I. H. & Olson, J. H. (1983). Depression, psychopathology and self-serving attributions. <u>British Journal of Clinical Psychology</u>, 22, 309-310.
- Gotlib, I. H. & McCann, C. D. (1984). Construct accessibility and depression: An examination of cognitive and affective factors. <u>Journal of Personality and Social Psychology</u>, 47, 427-439.
- Gotlib, I. H. (1984) Depression and general psychopathology in university students. <u>Journal of Abnormal Psychology</u>, 93, 19-30.
- Hamilton, E. W. & Abramson, L. A. (1983). Cognitive patterns and major depressive disorder: A longitudinal study in a hospital setting. <u>Journal of Abncrmal Psychology</u>, 92, 173-184.
- Hammen, C. L. (1980). Depression in college students:
 Beyond the Beck Depression Inventory. <u>Journal of</u>
 Consulting and <u>Clinical Psychology</u>, 48, 126-128.
- Hammen, C. L. & Cochran, S. D. (1981). Cognitive correlates of life stress and depression in college students.

 <u>Journal of Abnormal Psychology</u>, 90, 23-27.
- Harvey, D. M. (1981). Depression and attributional style: Interpretations of important personal events. <u>Journal of Atnormal Psychology</u>, 90, 134-142.
- Holzman, P. S. (1957). Focussing: A style of reality contact. The American Psychologist, 12, 388.
- Ingram, R. I., Smith, T. W. & Brehm, S. S. (1983).

 Depression and information processing: Self-schemata and the encoding of self-referent information. <u>Journal of Personality and Social Psychology</u>, 45, 412-420.

- Ingram, R. E. & Smith, T. W. (1984). Depression and internal versus external focus of attention. Cognitive Therapy and Research, &, 139-152.
- Kammer, D. (1983). Depression, attributional style and failure generalization. <u>Cognitive Therapy and Research</u>, 7, 413-424.
- Klein, D. C., Fencil-Morse, E. & Seligman, M. E. P. (1976).

 Learned helplessness, depression and the attribution of failure. <u>Journal of Personality and Social Esychology</u>,

 33, 508-516.
- Krantz, S. & Hammen, C. [1979]. Assessment of cognitive bias in depression. <u>Journal of Atnormal Psychology</u>, 88, 611-619.
- Kuiper, N. A. & Derry, P. A. (1982). Depressed and nondepressed content self-reference in mild, depressives. <u>Journal of Personality</u>, <u>50</u>, 67-80.
- Lewinsohn, P. M., Mischel, W., Chaplin, W., & Barton, R. (1980). Social competence and depression: The role of illusory self-perceptions. <u>Journal of Abnormal Psychology</u>, 89, 203-212.
- Lewinsohn, P. M., Steinmetz, J. I., Larson, D. E., & Franklin, J. (1981). Depression-related cognitions: Antecedent or consequence? <u>Journal of Abnormal Psychology</u>, 90, 213-219.
- Lombranz, J., Medini, G., & Aschwach, R. (1982). Realism as a cognitive indicator of self-actualization in temporality. The Journal of Psychology, 110, 53-62.
- Martin, D. J., Abramson, L. Y., & Alloy, L. B. (1984).
 Illusion of control for self and others in degreesed and nondepressed college students. <u>Journal of Personality and Social Psychology</u>, 46, 125-136.
- Mendels, J., Weinstein, N. & Cochrane, C. (1972). The relationship between depression and anxiety. Archives of General Psychiatry, 27, 649-653.
- Nelson, R. E. & Craighead, W. E., (1977). Selective recallof positive and negative feedback, self-control behaviours, and depression. Journal of Abnormal Psychology, 86, 379-388.
- Maslow, A. H. (1968). <u>Toward a Psychology of Being</u> (2nd edition). Toronto: D. Van Nostrand.
- Maslow, A. H. (1970). <u>Motivation and Personality</u> (2nd edition). New York: Harper & Row.

- Maslow, A. H. (1971). The Farther Reaches of Human Nature.

 Markham, Ont: Penguin Fooks.
- Pachman, J. S. & Foy, D. W. (1978). A correlational investigation of anxiety, self-esteem and degression: New findings with behavioural measures of assertiveness.

 Journal of Behaviour Therapy and Experimental Psychiatry, 9, 97-101.
- Pryor, J. B., Gibbons, F. X., Wicklund, R. A., Fazio, R. H., & Hood, R. (1977). Self-focused attention and self-report validity. <u>Journal of Personality</u>, 45, 513-527.
- Remming, E. C. (1967). The development of a measure of self-actualization. Unpublished master's thesis, University of Windsor, Windsor, ONT.
- Rizley, R. [1978]. Depression and distortion in the attribution of causality. <u>Journal of Abnormal</u>

 <u>Psychology</u>, <u>87</u>, 32-48.
- Sackeim, H. A. (1983). Self-deception, self-esteem, and depression: The adaptive value of lying to oneself. In Joseph H. Masling (ed.). Empirical Studies of Psychoanalytical Theories. New Jersey: Erlbaum.
- Schlesinger, H. H. (1954). Cognitive attitudes in relation to susceptibility to interference. <u>Journal of Personality</u>, 22, 354-374.
- Shostrom, B. (1964). An inventory for the measurement of self-actualization. Educational and Psychological Measurements, 24, 207-218.
- Shostrom, E. [1966). <u>Manual for The Personal Orientation</u>
 <u>Inventory</u>. San Diego: Educational and Industrial Testing
 Services.
- Smith, T. & Greenberg, J. (1981). Depression and selffocused attention. Motivation and Emotion, E, 323-331.
- Tabachnik, N., Crocker, J., & Alloy, L. B. (1983).

 Depression, social comparison, and the false-consensus effect. <u>Journal of Personality and Social Psychology</u>, 45, 688-699.
- Vestre, N. D. (1984). Irrational beliefs and self-reported depressed mood. <u>Journal of Abnormal Psychology</u>, 93, 239-241.
- Weintraub, E., Segal, R., & Beck, A. T. (1974). An investigation of cognition and affect in the depressive experiences of normal men. <u>Journal of Consulting and Clinical Psychology</u>, 42, 911.

- Wilkinson, I. M. & Blackburn, I. M. (1981). Cognitive style in depressed and recovered depressed patients. <u>British</u>
 <u>Journal of Clinical Psychology</u>, 20, 283-292.
- Tosi, D. J. & Lindamcod, C. A. (1975). The measurement of self-actualization: A critical review of the Personal Orientation Inventory. <u>Journal of Personality Assessment</u>, 39, 215-223.

* Appendix A

THE BECK DEPRESSION INVENTORY

On this questionnaire are groups of statements. Please read the entire group of statements of each category. Then pick out the one statement in that, group which best describes the way you feel today, that is right now. Circle the number beside the statement you have chosen. If several statements in the group seen to apply equally well, circle each one.

Be sure to read all the statements in each group before making your choice.

1.

- a) I do not feel sad.
- b) I feel blue or sad.
- c). I am blue or sad all the time and I can't snap out of it.
 - d) I am so sad or unhappy that I can't stand it.

2_

- a) I am not particularly discouraged about the future.
- b) I feel discouraged about the future.
- c) I feel that I have nothing to look forward to.
- d) I feel that the future is hopeless and that things cannot improve.

- a) I do not feel like a failure.
- b) I feel I have failed more than the average person.
- c) As I look back on my life all I can see is a lct of failures
- d) I feel I am a complete failure as a person.

4_

- a) I get as much satisfaction out of things as I used to.
- b) I don't/enjoy things the way I used tc.
- c) I don't get real satisfaction out of anything anymore.
- d) I am dissatisfied with everything.

5.

- a) I don't feel particularly guilty.
- b) I feel guilty a good part of the time.
- c) I feel quite guilty most of the time.
- d) I feel guilty all of the time.

6.

- a) I don't feel I am being punished.
- b) I feel I may be runished.
- c) I expect to be runished.
- d) I feel I am being punished.

- a) I don't feel disappointed in myself.
- b) I am disappointed in myself.

- c) I am disgusted with myself.
- d) I hate myself.

- a) I don't feel I am any worse than anybody else.
- b) I am very critical of myself for my weaknesses or mistakes.
- c) I blame myself all the time for my faults.
 - d). I tlame myself for everything bad that happens.

9.

- a) I don't have any thoughts of killing myself.
- b) I have thoughts of harming myself but I would not carry them out.
- c) I would like to kill myself.
- d) I would kill myself if I had the chance.

10

- a) I don't cry anymore than usual.
- b) I cry more now than I used to.
- c) I cry all the time now.
- d) I used to be able to cry, but now I can't even though I want to.

1.1.

- a) I am no more irritated now than I ever am.
- b) I get annoyed or irritated more easily than I used to.
- c) I feel irritated all the time.

d) I don't get irritated at all by the thing's that used to irritate me.

12.

- a) I have not lost interest in other people.
- b) I am less interested in other people row than I used to be.
- c) I have lost most of my interest in other people.
- d) I have lost all my interest in other reople.

13.

- a) I make decisions about as well as I ever could.
- b) I put off making decisions more than I used to.
- c) I have greater difficulty in making decisions than before.
- d) I can't make decisions at all anymore.

14.

- a) I don't feel I look any worse than I used to.
- b) I am worried that I am looking old or unattractive.
- c) I feel there are permanent changes in my appearance that make me look unattractive.
- d) I believe that I look ugly.

- a) I can work about as well as before.
- b) It takes extra effort to get started at doing something.
- c) I have to push myself very hard to do anything.

d) I can't do any work at all.

16.

- a) I can sleep as well as usual.
- b) I don't sleep as well as I used to-
- c) I wake up 1-2 hours earlier than usual and find it hard to get tack to sleep.
- d) I wake up several hours earlier than I used to and cannot get back to sleep.

17.

- a) I don't get any more tired than usual.
- b) I get tired more easily than I used to
- c) I get tired from doing almost anything.
- d) I am too tired to do anything.

18.

- a) My appetite is no worse than usual.
- b) My appetite is not as good as it used to be.
- c) My appetite is much worse now.
- d)- I have no appetite at all anymore.

19.

- a) I haven't lost much weight, if any, lately.
- b) I have lost more than 5 pounds.
- c) I have lost more than 15 pounds.
- d) I have lost more than 20 pounds.

20-

a) I am no more worried about my health than usual.

- b) I am worried about physical problems such as aches and pains or upset stomach, or constitution.
- c) I am very worried about physical problems and it's hard to think of much else.
- d) I am so worried about my physical problems, I cannot think about anyhing else.

- a) I have not noticed any recent change in myinterest in sex.
- b) I am less interested in sex than I used to be.
- c) I am much less interested in sex now.
- d) I have lost interest in sex completely.

Appendix B SELF FOCUS SENTENCE COMPLETION

Please read each sentence stem and then complete the sentence according to what you are feeling and thinking now.

- 1. I think:
- 2. I was happiest when:
- 3. It's fun to daydream about:
- 4. My father:
- 5. If only I could:
- 6. It's hardest for me:
- 7. I'wish:
- 8. As a child I:
- 9. I am:
- 10. I'm at my best:
- 11. Others:
- 12. When I look in the mirror:
- 13. If only I would:
- 14. At least I'm not:
- 15. My sex life:
- 16. It upsets me when:
- 17. The thing I like best about myself:
- 18. Priends:
- 19. I would like most to be photographed:

- 20. I guess I'm:
- 21. My mother:
- 22. I wonder:
- 23. The worst thing about me:
- 24. I always wanted: .
- 25. I try hardest to please:
- 26. Someday I:
- 27. My appearance:
- 28. My parents:
- 29. If I had my way:
- 30. I like:

Appendix

THE SELF FOCUS SENTENCE COMPLETION SCORING CRITERIA (EXHER, 1973)

- (S) Self-Focus Responses The S score represents the response which clearly focuses on the self with little or no regard for the external world. (Sn)

 Self-Focus Negative Responses When the self-focus answer is negative in content as in, I am: "the worst person in the world", the subscript 'n' is added to the S score.
- 2. (E) External World Fecus Responses The E score
 represents the response which clearly manifests
 concern with real things or people. (Ea) External
 World Focus-Affective When the E response is
 distinctly affective as in, My father "is an absolute bastard", the subscript 'a'is added to the E score.
- 3. (A) Ambivalent Responses The A score represents the response which clearly contains both S and E statements, either of which could be scored separately.
- 4. (O) Neutral Responses The O score represents any response which does not meet the criteria to be scored S. E. or A. The neutral category includes any responses where doubt exists about the scoring of S. or E.

Representative Scoring Samples

1. I think:

- a) S: best when I'm alone; I am creative; therefore
 I am.
- b) Sn: I am very nervous; I'm unhappy; I will die.
- c) Ea: people are fun; about teaching children; about my children.
- d) A: of what to do about myself and my family.
- e) 0: scmetimes; when I'm awake; when I think about it.

2. I was harriest when:

- a) S: I was alone; I succeeded; I was well; I was loved.
- b) Sn: I went crazy; I was unhappy.
- c) E: I was with Sharon; I was home; my children graduated.
- d) Ea: we went on our honeymoon; I told her I loved.
- e) A: I became an adult and had friends.
- f) 0: school was out; the sun was shining; I was outside.

Appendix D THE PERSONAL ORIENTATION INVENTORY

1.

- a) I am bound by the principle of fairness:
- b) I am not absolutely bound by the principle of fairness.

2 -

- a) When a friend does me a favour, I feel that I must return it.
- b) when a friend does me a favour, I do not feel that
 I must return it.

3.

- a) I feel I must always tell the truth.
- b) I do not always tell the truth.

ti.

- a) No matter how hard I try; my feelings are often hurt.
- b) If I manage the situation right, I can avoid being hurt.

5.

a) I feel that I must strive for perfection in everything I undertake.

b) I do not feel that I must strive for rerfection in everything that I undertake.

6.

- a) I often make my decisions spontaneously.
- b) I seldem make my decisions spentaneously.

7.

- a) I am afraid to be myself.
- b) I am not afraid to be myself.

8.

- a) I feel obligated when a stranger does me a favour.
- b) I do not feel obligated when a stranger does me a , favour.

9.

- a) I feel that I have a right to expect cthers to do what I want of them.
- b) I do not feel that I have a right to expect others to do what I want of them.

10.

- a) I live by values which are in agreement with others.
- b) I live by values which are primarily based on my own feelings.

- a) I am concerned with self-improvement at all times.
- b) I am not concerned with self-improvement at all times.

12-

- a) I feel guilty when I am selfish.
 - b) I don't feel guilty when I am selfish.

13.

- a) I have no objection to getting angry.
- b) Anger is something I try to avoid.

14.

- a) For me, anything is possible if I believe in myself.
 - b) I have a lot of natural limitations even though I believe in myself.

15.

- a) I put others interests before my own.
- b) I do not put others interests before my cun.

16.

- a) I sometimes feel embarrassed by compliments.
- b) I am not embarrassed by compliments.

17.

- a) I believe it is important to understand others as they are.
- b) I believe it is important to understand why others are as they are.

18_

a) I can put off until tomorrow what I ought to do today.

b) I don't put off until tomorrow what I cught to do today.

19.

- a) I can give without requiring the other person to appreciate what I give.
- b) I have a right to expect the other person to appreciate what I give.

20-

- a) My moral values are dictated by society.
- b) My moral values are self-determined.

21.

- a), I do what others expect of me.
- b) I feel free to not do what others expect of me.

22.

- a) I accept my weaknesses.
- b) I don't accept my weaknesses.

23.

- a) In order to grow emotionally, it is necessary to know why I act as I do.
- b) In order to grow emotionally, it is not necessary to know why I act as I do.

24-

- a) Sometimes I am cross when I am not feeling well.
- b) I am hardly ever cross.

25.

a) It is necessary that others approve of what I do.

b) It is not always necessary that others approve of what I do.

26.

- a) I am afraid of making mistakes.
 - b) I am not afraid of making mistakes.

27.

- a) I trust the decisions I make spontaneously.
- b) I do not trust the decisions I make spontaneously.

28.

- a) My feelings of self-worth depend on how much I accomplish.
- b) My feelings of self-worth do not depend on how much I accomplish.

29.

- a) I fear failure.
- b) I don't fear failure.

30-

- a) My moral values are determined, for the most part, by the thoughts, feelings and decisions of others.
- b) My moral values are not determined, for the most part, by the thoughts, feelings and decisions of others.

31.

a) It is possible to live life in terms of what I want to do.

b) It is not possible to live life in terms of what I

32.

- a) I can cope with the ups and downs of life.
- b) I cannot cope with the ups and downs of life.

33.

- a) I believe in saying what I feel in dealing with others.
- b) I do not believe in saying what I feel in dealing with others.

34.

- a) Children should realize that they do not have the same rights and privileges as adults.
- b) It is not important to make an issue of rights and privileges.

35.

- a) I can "stick my neck out" in my relations with others.
- b) I avoid "sticking my neck out" in my relations with others.

36.

- a) I believe the pursuit of self-interest is opposed to interest in others.
 - b) I believe the pursuit of self-interest is not \opposed to interest in others.

⊕

- a) I find that I have rejected many of the moral values that I was taught.
- b) I have not rejected any of the moral values I was taught.

38.

- a) I live in terms of my wants, likes, dislikes and values.
- b) I do not live in terms of my wants, likes, dislikes and values.

39.

- a) I trust my ability to size up a situation.
- b) I do not trust my ability to size up a situation.
 - a) I believe I have an innate capacity to cope with life.
 - b) I do not believe I have an innate capacity to cope with life.

41_

- a) I must justify my actions in the pursuit of my own interests.
- b) I need not justify my actions in the pursuit of my own interests.

42

- a) I am bothered by fears of being inadequate.
- b) I am not bothered by fears of being iradequate.

- a) I believe that man is essentially good and can be trusted.
- b) I believe that man is essentially evil and cannot be trusted.

- a) I live by the rules and standards of society.
- b) I do not always need to live by the rules and standards of society.

45-

- a) I am bound by my duties and obligations to others.
- b) I am not bound by my duties and obligations to others.

46.

- a) Reasons are needed to justify my feelings.
- b) Reasons are not needed to justify my feelings.

47.

- a) There are times when just being silent is the best way I can express my feelings.
- b) I find it difficult to express my feelings by just being silent.

48.

- a) I often feel it necessary to defend my past actions.
- b) I do not feel it necessary to defend my past actions.

i o

- a) I like everyone I know.
- b) I do not like everyone I know.

- a) Criticism threatens my self-esteem.
- b) Criticism does not threaten my self-esteem.

51.

- a) I believe that knowledge of what is right makes people act right.
- b) I do not believe that knowledge of what is right, necessarily makes reople act right.

52.

- a) I am afraid to be angry at those I love.
- b) I feel free to be angry at those I love.

· 53.

- a) By tasic responsibility is to be aware of my own needs.
- b) My basic responsibility is to be aware of others*
 needs.

54.

- a) Impressing others is most important.
- b) Expressing myself is most important.

55.

- a) To feel right, I need always to please others.
- b) I can feel right without always having to please others.

56-

- a) I will risk a friendship in order to say cr do what I believe is right.
- b) I will not risk a friendship just to say or do what is right.

57:

- a) I feel bound to keep the promises I make.
- b) I do not always feel bound to keep the promises I make.

•58.

- a) I must avoid sorrow at all costs:
- b) It is not necessary for me to avoid scrrow.

59.

- a) I strive always to predict what will happen in the future.
- b) I do not feel it necessary always to rredict what will happen in the future.

60.

- a) It is important that others accept my point of view.
- b) It is not necessary for others to accept my point of view.

- a) I only feel free to express warm feelings to my friends.
- b) I feel free to express both warm and hostile feelings to my friends.

- a) There are many times when it is more important to express feelings than to carefully evaluate the situation.
- b) There are very few times when it is more important to express feelings that to carefully evaluate the situation.

63.

- a) I welcome criticism as an opportunity for growth.
- b) I do not welcome criticism as an opportunity for growth.

64.

- a) Appearances are all-important.
- b) Appearances are not terribly important.

65.

- a) I hardly ever gcssip.
- b) I gossip a little at times.

- a) I feel free to reveal my weaknesses among friends.
- b) I do not feel free to reveal my weaknesses among friends.
- a) I should always assume responsibility for other people's feelings.
- b) I need not always assume responsibility for other people's feelings.

- a) I feel free to be myself and hear the consequences.
- b) I do not feel free to be myself and bear the consequences.

- a) I already know all I need to know about my feelings.
- b) As life goes on, I continue to know more and more about my feelings.

70...

- a) I hesitate to show my weaknesses among strangers.
- b) I do not hesitate to show my weaknessess among strangers.

71-

- a) I will continue to grow only by setting my sights on a high-level, socially approved goal.
- b) I will continue to grow best by being myself.

72-

73_

- a) I accept inconsistencies within myself.
- b) I cannot accept inconsistencies within myself.

a) Man is naturally cooperative.

b) Man is naturally antagonistic.

74.

a) I don't mind laughing at a dirty joke.

b) I hardly ever laugh at a dirty joke.

75.

- a) Happiness is a ty-product in human relationships.
- b) Happiness is an end in human relationships.

76.

- a) I only feel free to show friendly feelings to strangers.
- b) I feel free to show both friendly and unfriendly feelings to strangers.

77.

- a). I try to be sincere but'I sometimes fail.
- b) I try to be sincere and I am sincere.

78.

- a) Self-interest is natural:
- b) Self-interest is unnatural.

79.

- a) A neutral party can measure a happy relationship by observation.
- b) A neutral party cannot measure a happy relationship by observation.

80.

- a) For me, work and play are the same.
- b) For me, work and play are opposites.

81

a) Two people will get along best if each concentrates on pleasing the other. b) Two people can get along best if each person feels free to express himself.

82.

- a) I have feelings of resentment about things that are past.
- b) I do not have feelings of resentment about things that are past.

83.

- a) I like only masculine men and feminine women.
- b) I like men and women who show masculirity as wellas femininity.

84.

- a) I actively attempt to avoid embarrassment whenever.

 I can.
- b) I do not actively attempt to avoid embarrassment.

85.

- a) I blame my parents for a lct of my trcubles.
- b) I do not blame my parents for my troubles-

86.

- a) I feel that a person should be silly only at the right time and place.
- b) I can be silly when I feel like it.

87.

- a) People should always repent their wrongdoings.
- b) People need not always repent their wrongdoings.

- a) I worry about the future.
- b) I do not worry about the future.

- a) Kindness and ruthlessness must be opposites.
- b) Kindness and ruthlessness need not be opposites.
 - a) I prefer to save good things for future use.
 - b) I prefer to use good things now.

91.

- a) P∈orle should always control their anger.
- b) People should express honestly-felt arger.

92.

- a) The truly spiritual man is sometimes sensual.
- b) The truly spiritual man is never sensual.

93. 74

- a) I am able to express my feelings even when they sometimes result in undesirable consequences.
- b) I am unable to express my feelings if they are likely to result in undesirable consequences.

94.

- a) I am often ashamed of some of the emotions that I feel bubbling up withir me.
- b) I do not feel ashamed of my emotions.

95.

a) I have had mysterious ecstatic experiences.

b) I have never had systerious or ecstatic experiences.

96.

- a) I am orthodoxly religious.
- b) I am not orthodoxly religious.

97.

- a) I am completely free of guilt.
- b) I am not free of guilt:

98.

- a). I have a problem in fusing sex and love.
- b) I have no problem in fusing sex and leve-

99.

- a) I enjoy detachment and privacy.
- b) I do not enjoy detachment and privacy.

100.

- a) I feel dedicated to my work.
 - b) I do not feel dedicated to my work.

401.

- a) I can express affection regardless of whether it is returned.
- b) I cannot express affection unless I am sure it will be returned.

- a) Living for the future is as important as living for the moment.
- b) Only living for the moment is important.

- a) It is better to be yourself.
- b) It is better to be popular.

104_

- a) Wishing and imagining can be bad.
- b) Wishing and imagining are always good.

105-

- 'a) I spend more time preparing to live.
- b) I spend more time actually living.

106.

- a) I am loved because I give love.
- b) I am loved because I am lovable.

107.

- a) When I really love myself, everybody will love me.
 - b) When I really love myself, there will still be those who won't love se.

108.

- a) I can let other people control me.
- b) I can let other people control me if I am sure they will not continue to control me.

109.

- a) As they are, people sometimes annoy me.
- b) As they are, people do not annoy me.

110.

a) Living for the future gives my life its primary meaning.

b) Only when living for the future ties into living for the present does my life have mearing.

111.

- a) I follow diligently the motto, "Don't waste your time".
- b) I do not feel bound by the motto, "Dor't waste your time".

1,12.

- a) What I have been in the past dictates the kind of person I will be.
- b) What I have been in the past does not necessarily dictate the kind of person I will be.

113.

- .a) It is important to me how I live in the here and now.
 - b) It is of little importance to me how I live in the here and now.

1:14.

- ·a) I have had an experience where life seemed just perfect.
 - b) I have never had an experience where life seemed just perfect.

115.

a) Evil is the result of frustration in trying to be good.

b) Evil is an intrinsic part of human nature which fights good.

116.

- a) A person can completely change his essential nature.
- b) A person can never change his essent al nature.117.
 - a) I am afraid to be tender.
 - b) I am not afraid to be tender.

118.

- a) I am assertive and affirming.
- b) I am not assertive and affirming.

119.

- a) Women should be trusting and yielding.
- b) Women should not be trusting and yielding.

120.

- a) I see myself as others see me.
- b) I do not see myself as others see me.

121.

- a) It is a good idea to think about your greatest potential.
- b) A person who thinks about his greatest potential gets conceited.

122-

- a) Men should be assertive and affirming.
- b) Men should not be assertive and affirming.

- a) I am able to risk being myself.
- b) I am not able to risk being myself.

124.

- a) I feel the need to be doing something significant all of the time.
- b) I do not feel the need to be doing something significant all of the time.

125.

- a) I suffer from memories.
- b) I do not suffer from memories.

126.

- a) Men and women must be both yielding and assertive.
- b) Men and women must not be both yielding and assertive.

127.

- a) I like to participate actively in intense discussions.
- b) I do not like to participate actively in intense discussions.

128.

- a) I am self-sufficient.
- b) I am not self-sufficient.

129-

a) I like to withdraw from others for extended periods of time.

b) I do not like to withdraw from others for extended periods of time.

130.

- a) I always play fair.
- b) Sometimes I cheat a little.

131.

- a) Sometimes I feel so angry I want to destroy or hurt others.
- b) I never feel so andry that I want to destroy or hurt others.

132.

- a) Lifeel certain and secure in my relationships with others.
- b) I feel uncertain and insecure in my relationships with others.

.133.

- a) I like to withdraw temporarily from others.
- b) I do not like to withdraw temporarily from others.
 - a) I can accept my mistakes.
 - b) I cannot accept my mistakes.

- a) I find some reorle who are stupid and uninteresting.
- b) I never find any people who are stupid and uninteresting.

- a) I regret my past.
- b) I do not regret my past.

137.

- a) Being myself is helpful to others.
 - b) Just being myself is not helpful to others.

138.

- a) I have had moments of intense happiness when I felt like I was experiencing a kind of ecstasy or bliss.
- b) I have not had moments of intense happiness when I felt like I was experiencing a kind of bliss.

#.39.

- a) People have an instinct for evil.
- b) People do not have an instinct for evil.

140.

- a) For me, the future usually seems hopeful.
- b) For me, the future often seems hopeless.

141_

- a) People are both good and evil.
- b) People are not both good and evil-

142.

- a) My past is a stepping stone for the future.
- b) My past is a handicap to my future.

143.

a) "Killing time" is a problem for me.

b) "Killing time" is not a problem for me.

- a) For me, past, present and future is ir meaningful continuity.
- b) For me, the present is an island, unrelated to the past and the future.

145.

- a) My hope for the future depends on having friends.
- b) My hope for the future does not depend on having friends.

146.

- a) I can like people without having to approve of them.
- b) I cannot like people unless I also approve of them.

147-

- a) People are basically good.
- b) People are not tasically good.

148-

- a) Honesty is always the best policy.
- b) There are times when honesty is not the best policy.

149.

a) I can feel comfortable with less than a perfect performance.

b). I feel uncomfortable with anything less than a perfect performance.

- a) I can overcome any obstacles as long as I believe in myself.
- b) I cannot overcome every obstacle if I believe in myself.

VITA AUCTORIS

Mary was born in Calgary, Alterta in 1958, to John and Noreen McMillan. The family moved to Scarborough, Chtario in 1961. Mary began school in 1965; she attended high school at Sir Wilfrid Laurier Collegiate Institute from 1972-1977, university at the University of Tororto's Scarborough Campus from 1978-1982, and has been at the University of Windsor from 1983 to the present time. She defended her Easter's Thesis in December, 1985.