THE SHY Q, A MEASURE OF CHRONIC SHYNESS: ASSOCIATIONS WITH INTERPERSONAL MOTIVES AND INTERPERSONAL VALUES.

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Abstract: Research has shown that self-blame, private self-consciousness, shame, and resentment are core cognitive and affective components of clinically significant chronic shyness (Henderson and Zimbardo, 2001). We have developed a new scale to measure these various dimensions of chronic shyness and collected data on our shyness clinic sample, several college student samples and a sample of 3500 web site respondents. Chronbach's Alpha for six samples was between .92 and .93. Evidence for concurrent and discriminant validity is reported in terms of correlations with relevant sub-scales of the Inventory of Interpersonal Problems. (IIP). Other findings include correlations with sub-scales of Locke's Circumplex Scale of Interpersonal Values. The value of this new measure for research on chronic stress is elaborated within the framework of a social fitness model and previous research on interpersonal problems and attachment style.

Background

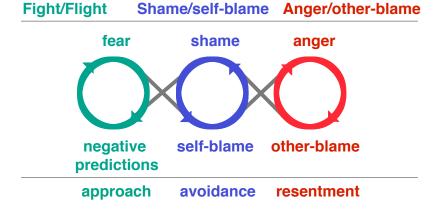
Social Fitness Model:

Just like physical fitness, Social Fitness (Henderson,1994) implies a state of physiological, behavioral, emotional and mental conditioning that results in adaptive functioning and a sense of well-being. It implies satisfying interpersonal relationships, adequate emotion regulation, the proactive pursuit of personal and professional goals, and an adaptive cognitive style. Social fitness addresses both needs for emotional connection (communion) and needs for agency (influence/control). As with an individual who desires physical fitness and thereby plays sport, works out, exercises, etc., a socially fit individual is involved in frequent social exercise through meeting new people, and maintaining and cultivating close relationships with others.

Reversal of the Self-Enhancement bias and Vicious Cycles:

Adaptive thinking patterns and emotion regulation are important components of social fitness. Shy individuals reverse the self-enhancement bias in social situations (Arkin, Appelman & Burger, 1980; Buss & Scheier, 1976.); they attribute responsibility of any social situation failure to themselves, and accredit success in social situations to factors that are external, situation-bound, temporary or uncontrollable.

Infinite Loops:

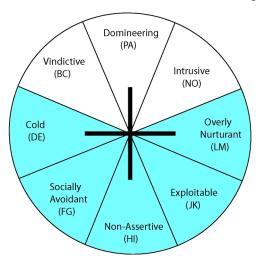


In the first cycle, as the shy individual approaches or anticipates a social situation, feelings of fear and negative predictions about the outcome of the social situation are prevalent. These feelings of fear and other negative cognitions increase the number of negative predictions about the social situation that in turn aggravate the already heightened level of fear. Avoiding the social situation may provide relief for the individual. However, feelings of shame and rumination take over and the shy individual then feels shame for fearing and avoiding the social situation and moves onto the second cycle where feelings of shame and self-blame abound. When one experiences shame, other individuals may appear contemptuous and potentially threatening. The shy individual therefore feels anger and resentment towards others and enters the third cycle. By blaming others the shy individual reduces his/her feelings of self-blame and shame. Therefore, other individuals are seen as needing to be more considerate, more supportive, more caring, etc. Negative emotions and negative cognitions influence each other in an escalating reciprocal pattern.

The IIP:

A self-report inventory, the Inventory of Interpersonal Problems (IIP) (Horowitz, Rosenburg, Baer, Ureno, & Villasenor, 1988) was designed to identify interpersonal sources of distress. The IIP identifies interpersonal problems along a two-dimensional space that is divided into eight equal sectors (octants). Subscales of the IIP describe these octants. (Horowitz, Rosenberg, Baer, Ureno, & Villasenor, 1988).

Clinically shy individuals report problems in the following highlighted octants:



Development of the Shy Q

One hundred items were developed from clinical observations, interpersonal theory and previous shyness surveys, and were given to an introductory psychology class and 3500 website respondents. The current 35-item version of the Shyness questionnaire produces a shyness quotient, ShyQ, that is indicative of how shy an individual is. The ShyQ addresses both interpersonal problems as well as the experience of those problems for the shy individual.

Please indicate, for each of the statements below, how characteristic the statement is of you, that is, how much it reflects what you typically think, feel and do.

- 1.Not at all characteristic 2.Somewhat 3.Moderately 4.Very 5.Extremely characteristic
- 1___I am afraid of looking foolish in social situations.
- 2 I often feel insecure in social situations.
- Other people appear to have more fun in social situations that I do.
- 4 If someone rejects me I assume that I have done something wrong.
- It is hard for me to approach people who are having a conversation.
- 6 I feel lonely a good deal of the time.
- 7 I tend to be more critical of other people than I appear to be.
- 8 It is hard for me to say "no" to unreasonable requests.
- 9 I do more than my share on projects because I can't say no.
- 10 I find it easy to ask for what I want from other people.
- 11 I do not let others know I am frustrated or angry.
- 12 I find it hard to ask someone for a date.
- 13 It is hard for me to express my feelings to others.
- 14 I tend to be suspicious of other people's intentions towards me.
- 15 I am bothered when others make demands on me.
- 16 It is easy for me to sit back in a group discussion and observe rather than participate.
- 17_I find myself being unable to enter new social situations without feeling rejection or not being noticed.
- 18 I worry about being a burden on others.
- 19 Personal questions from others make me feel anxious.
- 20 I let others take advantage of me.
- 21 I judge myself negatively when I think others have negative reactions to me.
- 22_I try to figure out what is expected in a given situation and then act that way.
- 23 I feel embarrassed when I look or seem different from other people.
- 24 I am disappointed in myself.
- 25 I blame myself when things do not go the way I want them to.
- 26 I sometimes feel ashamed after social situations.
- 27 I am usually aware of my feelings, even if I do not know what prompted them.
- 28 I am frequently concerned about others approval.
- 29 I like taking risks in social situations.
- 30 If someone is critical of me I am likely to assume that they are having a bad day.
- 31 If I let people know too much about me they will gossip about me.
- 32 I think it is important to please others.
- 33 People feel superior when someone is socially anxious.
- 34__I spend a lot of time thinking about my social performance after I spend time with people.
- 35 I am satisfied with my level of social support.

	Mean	Standard
		Deviation
Website respondents	3.6	.6
Stanford University Psychology students	2.5	.6
Shyness Clinic sample	3.6	.56

Reliability of Shy Q:

Internal Consistency: Cronbach's Alpha for six samples between .92 and .93. Test-Retest reliability: (N=31) correlation of .87 (Test-retest 2 weeks apart)

Convergent validity of Shy Q with other clinic scales:

	Correlation	N	p
BFNE (Brief Fear of	.77	36	.000
Negative Evaluation)			
STAXI Anger in:	.60	40	.000
EOS (Estimation of	.73	40	.000
Others)*see appendix A			
EAS (Fearfulness)	.52	40	.001
Coopersmith S.Esteem	67	39	.000
PFQ (Trait Shame)	.75	40	.000
PRSC (Inner focus)	.55	40	.000
BDI	.56	40	.000
HSP (Highly Sensitive)	.49	40	.001
Tosca Shame	.80	36	.000
RCBS	.74	39	.000

Of the clients sampled, 94% meet criteria for generalized social phobia and 70% meet criteria for Avoidant Personality Disorder as diagnosed by the Millon.

Age range: 19-65 years (mean = 35.4)

Gender: 62% = male

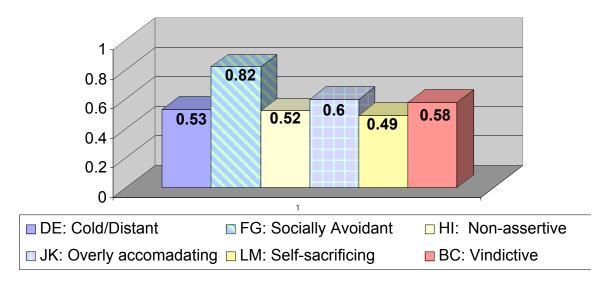
38% = female

Convergent and Discriminant validity:

Revised Cheek and Buss Scale (RCBS; Melchior & Cheek, 1990): Correlation in a college sample between .6 and .67

IIP(Horowitz, Rosenburg, Baer, Ureno, & Villasenor, 1988):

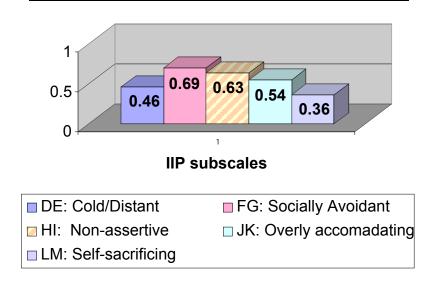
ShyQ correlations with IIP scales: Clinic Sample



Discriminant validity:

In the clinic sample, the Shy Q is NOT associated with being domineering/controlling (PA), or with being intrusive/needy (NO).

ShyQ correlations with IIP scales: Student Sample



Discriminant validity:

In the student sample, the Shy Q is NOT associated with being domineering/controlling (PA), vindictive/self-centered (BC), or with being intrusive/needy (NO).

Locke's Circumplex Scale of Interpersonal Values (CSIV; Locke, 2000):

Correlations found with:

Putting others' needs first (.53) Avoiding social humiliation (.42) Avoiding anger (.39) Feeling connected to others (.22)

Discriminant validity:

No correlations found with: Valuing forcefulness, Having the upper hand, Seeking revenge, or Having an impact.

Attachment Style and Shyness

Interpersonal problems often reflect a conflict between an individual's desire to express a behavior and the individual's feared consequence of expressing that behavior. These conflicts stem from the individual's interpersonal learning history that is in part, demonstrated by the individual's attachment history and attachment style (Horowitz, Rosenberg, & Bartholomew, 1993).

Attachment theory (Bowlby, 1973) proposed that mental representations of the self and others are formed through interactions with attachment figures that organize the individual's affect, cognitions and behavior in close relationships.

According to Bartholomew (1990; Batholomew & Horowitz, 1991) individuals have two classes of mental representations that affect their interpersonal behavior. One mental representation is the individual's generalized impression of others; the other representation illustrates the individual's image of the self. A 2 by 2 matrix crossing the image of others with the image of the self produces four prototypic styles of Attachment (Bartholomew, 1990). These resulting styles of attachment are Secure, Preoccupied, Fearful and Dismissing. The Fearful person has both a negative image of the self and others, and, according to this model, should display hostility towards other individuals and have a deficient sense of autonomy. When related to interpersonal problems, problems of fearful people are primarily reflected in problems of hostile submissiveness (Bartholomew & Horowitz, 1991.) As noticed, many shy individuals report interpersonal problems in the DE, and FG octants of the circumplex that reflect hostile submissiveness. Many may also report problems in the HI, and JK octants of the circumplex demonstrating submissive and preoccupied attachment styles.

Interestingly, individuals differing in attachment style differ in their memories of attachment-related episodes ("trust-related memories"; Mikulincer, 1998.) Insecurely attached individuals should recall more negative and less positive relationship episodes than their securely attached counterparts (Collins & Read, 1994). Thus, although the shy person may desire to connect with another individual, if his/her "trust-related memories" are more negative, the shy person may enter the social situation feeling suspicious, afraid, and less confident that the social interaction will be rewarding. A conflict between the shy individual's desire to express a behavior and the feared consequence of expressing that behavior is evident.

The shy individual therefore becomes alienated from the self through the shame state (see Infinite Loops) and may also become alienated from others (as indicated by negative thoughts about others; Henderson & Horowitz,1998) who could potentially be a source of comfort, support and connection that the shy individual seeks. This interpersonal conflict is apparent in the correlations between the Shy Q and the IIP where, for both student and clinic samples, individuals report problems of being cold/distant, socially inhibited, non-assertive, overly accommodating, and too self-sacrificing.

Discussion

Validity for the Shy Q quotient has been established through correlational studies with interpersonal measures such as the IIP and the CSIV.

The Shy Q addresses both interpersonal problems and experience of those problems for the shy individual.

Future research:

- Continued data collection on the Shy Q
- Observation of particular behaviors in the shy population related to specific interpersonal orientations
- Examination of the effects of cultural influences and how different cultural orientations relate to interpersonal styles

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Appendix A:	
Estimations of Others Scale (EOS):	
To what extent do you relate to each of these statements? Please make a rating on a 7 point score from 1 (not at all) to 4 (moderately) to 7 (very much).	ale
 People are more powerful than I am and will take advantage of me. If I'm not watchful and careful people will take advantage of me. I must not let people know too much about me because they will misuse the information. If I let people know too much about me they will say hurtful things to me, or talk about me behind my back to others. People do not care about me. People are indifferent to my feelings and don't want to know about me. People will be rejecting and hurtful if I let them close to me. If people see my discomfort they will feel contempt for me. People do not relate to my problems. People do not identify with me when I am uncomfortable. When people see my discomfort they feel superior. People will make fun of me and ridicule me 	