

THE RELATIONSHIP OF FALSE SELF BEHAVIOR TO OBJECT RELATIONS,
ATTACHMENT, AND ADJUSTMENT

Christine Louise Buntrock Selby, B.A., M.S.

Dissertation Prepared for the Degree of
DOCTOR OF PHILOSOPHY

UNIVERSITY OF NORTH TEXAS

August 2000

APPROVED:

C. Edward Watkins, Major Professor
David Baker, Committee Member
Tim Lane, Committee Member
Martin Gieda, Committee Member
Ernest Harrell, Chair of the
Department of Psychology
C. Neal Tate, Dean of the Robert B.
Toulouse School of Graduate
Studies

Selby, Christine Louise Buntrock, The relationship of false self behavior to object relations, attachment, and adjustment. Doctor of Philosophy (Psychology), August 2000, 104 pp., 10 tables, references, 48 titles.

The focus of this investigation is to assess the relationship between false self behavior, object relations and attachment variables, and adjustment. Theory suggests that object relations and attachment are interrelated, and have been independently linked to psychological consequences. Theory also postulates a relationship between false self behavior and object relations theory. Given the interrelatedness of object relations and attachment theory it is possible that false self behavior may also be linked to attachment variables. While the relationship between object relations and false self behavior seems to have been established object relations theory and attachment theory have not been studied in tandem as related to false self behavior. In addition, this investigation will explore the relationship of adjustment variables to attachment and object relations variables. Undergraduate males and females will be solicited for participation, and will be asked to complete self-report questionnaires measuring false self

behavior, object relations, attachment, and adjustment. The primary research hypothesis is that less false self behavior will be related to mature object relations, secure attachment, and fewer symptoms.

ACKNOWLEDGMENTS

I would like to thank my major professor, Dr. C. Edward Watkins and my committee members, Drs. David Baker, Tim Lane, and Martin Gieda for their suggestions for and guidance of this document.

I would also like to thank Dr. Susan Harter for her help in working with the True Self Questionnaire.

Finally, I would like to thank my husband and colleague, Dr. Brian Selby. His technical comments and emotional support help me to not only prepare a good manuscript but also helped to make this a product of which I am very proud.

TABLE OF CONTENTS

	Page
LIST OF TABLES	iv
Chapter	
1. INTRODUCTION	1
Authenticity	
Object Relations Theory and the	
Development of the False Self	
Attachment Theory	
Object Relations and Attachment Theories	
Lack of Validation and False Self Behavior	
Rationale	
2. METHOD	37
Participants and procedure	
Instruments	
Bell Object Relations Inventory	
Adult Attachment Scale	
True Self Questionnaire	
Hopkins Symptom Checklist	
Design	
Hypotheses	
Analyses	
3. RESULTS	45
4. DISCUSSION	54
APPENDICES	69
REFERENCES	92

LIST OF TABLES

Tables	Page
1. Demographic Information	70
2. Means, standard deviations, and internal consistency estimates for the True Self Questionnaire, Bell Object Realtions Inventory, Adult Attachment Scale and Hopkins Symptom Checklist	71
3. Correlations between True Self Questionnarie and Bell Object Relations Inventory variables	72
4. Correlations between True Self Questionnarie and Adult Attachment Scale variables	73
5. Correlations between True Self Questionnarie and Hopkins Symptom Checklist variables	74
6. Correlations between Bell Object Relations Inventory and Adult Attachment Scale variables	75
7. Correlations, standardized canonical coefficients, canonical correlations for true self variables and object relations variables and their corresponding canonical variates	76
8. Correlations, standardized canonical coefficients, canonical correlations for true self variables and attachment variables and their corresponding canonical variates	77
9. Correlations, standardized canonical coefficients, canonical correlations for true self variables and psychological well being variables and their corresponding canonical variates	78

LIST OF TABLES (continued)

Tables	Page
10. Summary of regression equations of Total True Self scores on Adult Attachment Scale, Bell Object Relations Inventory and Hopkins Symptom Checklist subscales	79

CHAPTER I

INTRODUCTION

The purpose of this investigation is to explore the antecedents and consequences of inauthentic behavior. The nature of what constitutes authentic behavior has been extensively examined by seminal thinkers including Soren Kierkegaard, Carl Rogers, James Bugental, and Sidney Jourard. Although each have used different terminology and provided different descriptions about the importance of authenticity, all seem to concur that authenticity involves behaving in a way that is in accord with who one truly is. Rogers and Jourard took their understanding of authenticity a step further and involved the impact of the parent-child relationship. Much of the theoretical writings about the importance of this influence on the development of inauthenticity, or the "False Self", has come from object relations theory.

Donald Winnicott (1965) has been the primary object relations theorist regarding the development of the False self out of inadequate parenting. He noted that there exist two different types of mothers: "good-enough mothers" and "not good-enough mothers". These mothers are important in

the development of their infants' sense of self. Depending on the mother's ability to accurately identify and appropriately validate her infant's spontaneous expression of needs results in either the predominance of a "True Self" or a "False Self". When the False Self dominates it functions as a shield for the True Self. With this False Self in place the inadequately developed or negatively regarded True Self runs the risk of being exposed and destroyed. Winnicott (1965) acknowledged that the presence of False Self is a matter of degree and that "normal" individuals utilize their less developed False Selves as a way to adapt (i.e., it emerges in situations where it is important to be socially compliant).

Another line of theoretical inquiry that has examined the impact of parent-child relationships on the developing child has been attachment theory. Based on the work of John Bowlby (1973), Ainsworth (1979) delineated three attachment styles that differ in degree of trust and security in others: secure, anxious-resistant, and anxious-avoidant. Empirical investigations of attachment have yielded results suggesting that there are important cognitive and emotional consequences of the different attachment styles. Taken together, recent investigations provide converging evidence that individuals with secure attachments experience a more

positive view of themselves (Bartholomew & Horowitz, 1991; Collins & Read, 1990; Feeney & Noller, 1990; Mikulincer, 1995; Simpson, 1990) and others (Bartholomew & Horowitz, 1991; Collins & Read, 1990; Feeney & Noller, 1990), and the anxiously and avoidantly attached individuals hold a more negative view of themselves and others including lower self-worth and difficulty trusting others (Bartholomew & Horowitz, 1991; Collins & Read, 1990; Feeney & Noller, 1990; Simpson, 1990). Evidence about the impact of parent and peer attachment has revealed that parental attachment seems to have a stronger impact on individuals' self-esteem and life events than peer attachment (Greenberg, Siegel, & Leitch, 1983). Of importance to the present investigation is the idea that as individuals feel valued and accepted by others they tend to have more positive views of themselves, whereas the more rejected and invalidated people feel the more negatively they view themselves (Mikulincer, 1995). This ultimately leads to negative psychological experiences (e.g., depression and anxiety).

Although object relations and attachment theory have been regarded as interrelated areas (Beulow et al., 1996; Fishler et al., 1990), they can be regarded as conceptually distinct for the purposes of this investigation. Object relations theory postulates that as infants develop, they

internalize their experiences of others which evolve into cognitive representations about others. This understanding of object relations posits a global, trait-like view of interpersonal interactions. Attachment theory, on the other hand, represents a more state-like approach to others such that strong attachment can exist in some but not all relationships (Fishler et al., 1990). Theoretically, given this view of the differences between object relations and attachment theories, an individual can approach all "others" in a characteristic, trait-like way, but experience differential attachment bonds to a variety of people.

Very little empirical work has been done on the nature and consequences of having a False Self. Susan Harter and her colleagues (Harter, 1997; Harter, Marold, Whitesell, & Cobbs, 1996; Harter, Waters, & Whitesell, 1997b; Harter, Waters, Pettitt, Whitesell, Kofkin, & Jordan, 1997a) have conducted several rigorous investigations drawing important conclusions regarding the presence of False Self behavior. Harter and colleagues have demonstrated that individuals exhibiting higher levels of false self behavior also experience lower levels of self-esteem and are more likely to acknowledge depressive affect. In addition, they noted that among different relationships, individuals can manifest varying degrees of false self behavior depending on the

degree of support or validation felt in the relationship.

In summary, the quality of early relationships seems to be theoretically linked to false self behavior. The nature of one's object relations has been directly connected to the development of a False Self. Given the importance of early attachment bonds on one's development, it is likely that attachment style is also related to false self behavior. Both of these aspects of the parent-child relationships are herein theorized to be related to false self behavior and subsequently to psychological adjustment.

Authenticity

"A choice that confronts every one of us at every moment is this: Shall we permit our fellow men to know us as we now are, or shall we seek instead to remain an enigma, an uncertain quantity, wishing to be seen as something we are not?" (Jourard, 1964, p. iii).

Much has been written regarding the nature of authenticity and many have speculated about what it means to be an authentic human being. Philosophers Soren Kierkegaard and Martin Heidegger are often cited as early proponents of authenticity. Sahakian (1976) succinctly characterized Kierkegaard's understanding of authenticity as "the willingness to be oneself, standing 'transparently' before God" (pp. 62-63), and Heidegger's understanding as the

willingness "to be genuine, to make one's own (autonomous) choices, to avoid losing one's identity by blending in with the crowd" (p. 63). Contemporary thinkers including humanist, Carl Rogers (1961) and existentialist, James Bugental (1981), have devoted much attention to the idea of acting in agreement with who one truly is. Rogers wrote about the "organismic experience" and the importance of being "genuine" and "congruent" with that experience. Bugental regarded the quest for authenticity as an important focus for psychotherapy and defined the construct as the "degree to which one's being in the world is unqualifiedly in accord with the givenness of his own nature and of the world" (Bugental, 1981, pp. 31-32). Through these selected conceptualizations of authenticity it is evident that this construct involves having an understanding about who one truly is and having the willingness to act congruently in accordance with that understanding.

Sidney Jourard (1964) wrote extensively about the dilemma of acting authentically and acknowledged the price paid for exposing one's true self to others as well as the cost of keeping one's true self hidden. Jourard noted that inauthentic behavior protects us from criticism and rejection; however, he indicated that when we are not truly known by others we are misunderstood, we lose touch with our

true selves, and ultimately life itself loses meaning because others do not know who we are. When we do act authentically we not only expose ourselves to the possibilities of love and affection but also to the possibilities of hurt and rejection. Jourard wrote that the conditions in which authenticity is facilitated must include love and trust, and that acting authentically in any other type of environment exposes one's self to attack by others. It is possible that these conditions can be applied to the early parent-child relationship. In fact, Roger's (1961) also discussed the central role parental figures have in the development of authenticity. He wrote that conditional positive regard (i.e., expressing love only when certain expectations are met) of children by parental figures distorts the infant's natural expression of what feels good and leaves the developing child with feelings of fear and guilt. In other words, when not accepted as one is, the real or authentic self may be sacrificed in order to please these highly important others. Although Rogers gives an initial impression of the results of parenting on authenticity, much of the theoretical writings about the impact of the early parent-child relationship on the development of inauthenticity have come from object relations theory.

Object Relations Theory and the Development of the False

Self

Object relations theorists view human development not as comprising biological drives, as dictated by the Freudian tradition from which object relations grew, but as involving interpersonal relationships. Accordingly, our insatiable need to be in contact with others is fundamental and paramount to our existence.

With regards to the development of the "self", object relations theorists concur that the development of self exists within the context of relationships and cannot exist or be conceived of outside of that context. The self that emerges out of infancy does not exist cognitively for the infant. At this age, the infant does not register an awareness of "baby" and "caregiver", rather the infant purely receives sensory information provided by the caregiver which is experienced as part of him/herself. The infant's developing brain does receive and process information about "me" and about "caregiver"; however, the brain has not sufficiently organized in order to properly categorize this differing information. Therefore, before cortical differentiation takes place, the infant takes in all information related to infant and caregiver as one: "mother and baby are merged" (Gomez, 1987, p. 76).

The mother's primary function is to provide a safe and

secure environment in which she functions to meet the infant's needs. And at this point in development, the infant is unaware of his own needs and unaware that these needs are distinguishable and separate from the needs of mother. In fact, the mother's response to the infant's expression of need is experienced by the infant in terms of pleasure (or displeasure). This feeling is associated with the bodily zone where the need is being fulfilled. This early experience allows the infant to internalize pleasure (or displeasure) and begin to associate it with the emerging self.

During this time, the mother's presence as pleasurable and soothing functions as a container or "skin" for the processing and organization of the infant's experiences. Without such a vessel the infant's experiences are meaningless and intrusive and eventually become compartmentalized rather than integrated. Integration of experiences leads to the establishment of a "me" which leaves all other elements as "not me". The infant is able to "e-merge" and experience self and mother as separate units. Dis-integration of experiences leads to the development of a "second skin" which is formed by the infant in an effort to do what his mother would have normally done during that point in development: protect the child (Tustin, 1972). This

second skin, however, is inadequate and incapable of sufficiently organizing new experiences. The result of an adequate organizational process is the construction and internalization of mental representations of self and other(s). With adequate development, these representations become more complex and separate. The cognitive representation of other or things outside of oneself are regarded as objects. These object representations continue to form throughout one's life; however, the early parent-child interaction forms patterns of expectations for how others are to be experienced and related to in the future.

With regard to the focus of this paper, the self is said to develop to the degree that the infant's True Self is validated by his or her mother. Invalidation of the True Self, results in the development of the inadequate second skin which ultimately leaves the individual disconnected from him/herself and others. Although many object relations theorist's allude to the "False Self" (e.g., mobilization of defenses to conceal what is really being experienced, Guntrip, 1969; alienation from the self, Horney, 1950; the development of a "second skin" to protect oneself, Tustin, 1972), Donald Winnicott (1965) wrote extensively about the development and consequences of the False Self.

Winnicott (1965) regarded the emergence of the self in the same manner depicted above. The infant experiences the mother and infant as one and cannot distinguish self from other. Winnicott noted that in order for a coherent non-compartmentalized sense of self to emerge, it is important that the infant feel as though whatever he or she needs or demands will be attended to. Winnicott called this "omnipotence".

Omnipotence in the infant is observed through spontaneous gestures that Winnicott (1965) identified as expressions of the infant's True Self; "[t]he spontaneous gesture is the True Self in action" (p. 148). These seminal gestures are body based and become the cornerstone of the developing self. As the infant spontaneously acts in response to his organismic needs he may experience frustration or satisfaction of these expressed needs. Insofar as the consequences of the infant's bodily experiences constitute a balance between frustration and satisfaction of needs, an adequate amount of positive associations between the body and the emerging self will be established. These links or associations form a foundation upon which the infant's later self will develop. Thus, the nature of the self (i.e., positive or negative sense of self) is highly dependent on the nature of these early

associations to one's body. With strong, positive links between self and body in place, the developing child has a solid foundation of self knowledge and comfort which enables him or her to deal more effectively with life's difficulties. It is out of this firm foundation that the True Self grows. As infants experience their environment as facilitative and validating, they associate these positive experiences with their bodies which are ultimately associated with their sense of who they are. Since up until that point whom the infant is has been accepted and validated, the True Self is allowed to emerge and flourish.

As infants continually experience need satisfaction (with an appropriate balance of frustration), they can begin to discover the separate existence of the environment and establish a sense of "me" and "not me". Infants eventually learn that there are objects in existence with which they have relationships. They also come to realize that these objects are outside of their direct control. Through this process, infants develop their object relationships.

However, in order for infants to recognize and accept that the "not me" objects are outside of their control, they must have first been allowed to develop a sense of importance.

Without this experience in place, the developing infant will behave in ways that manipulate others to get what he or she

wants or needs rather than relying on him or herself for the satisfaction of those needs. Thus, in order for adequate object relations to develop, infants must have had early childhood experiences that validate their natural bodily expressions. Winnicott recognized that the crucial factor in the development of adequate object relationships is the mother and her ability to provide a facilitative environment.

Winnicott (1965) made the distinction between "*a good-enough mother*" and "*not a good-enough mother*" (1965, p. 145, italics in original). The good-enough-mother is able to consistently and accurately interpret and fulfill the infant's omnipotent need expressions, and she is able to do so before frustration has been allowed to build. By responding in an expedient way, she verifies the infant's sense of well-being and validates the infant's True Self. Thus, the infant has an early sense (albeit unconscious) that "whatever I do, want, or need is okay, and therefore I am okay". In addition to validating the internal nature of the infant, good-enough mothers are able to reflect a positive and warm sense of self back to the infant by the way she appears to the infant. Thus, the infant learns about himself through behavioral interactions with the mother and through what he sees when looking at mother. These positive

interactions with mother allow infants to view their own selves and the world in a balanced way. The infants learn that when frustrating events occur, in addition to positive events, they have the capacity to handle such frustrations. Moreover, the infants learn that the core of their being, their True Self, is valid, pleasurable, and acceptable.

The mother that is not-good-enough is inadequate in responding to or accurately interpreting the infant's need gestures, which ultimately results in the invalidation of the infant's True Self and subsequent development of the False Self. The development of the False Self is fostered in an environment that lacks security and spontaneity. Since the infants' spontaneous expression of their True Self has been invalidated or ignored, they learn that their True Self is inadequate, bad, and unacceptable. Furthermore, with the mother's inability to respond adequately to the infant's natural expression of needs, the necessary association between the infant's early bodily experiences and their eventual satisfaction is threatened as is the positive association to the self. If associations between these early events and the self do exist, they may be based on feelings of distress and inadequacy rather than on satisfaction. Thus, infants do not connect their needs with satisfaction of those needs. When need satisfaction is not associated

with internal arousal or excitement, the infant does not have a positive base from which to draw. In the extreme the infant may become completely disconnected from any biological awareness and its relation to the self. This leaves the infant potentially divested of excitement and interest. Despite this lack of internal pleasure, the infant independently learns to derive pleasure from external experiences, primarily from emotional attachments to others.

Winnicott (1965) indicated that emotional attachments to others develop regardless of the nature of the early environment, and it to these relationships that the infant associates arousal, excitement, interest, and pleasure, rather than associating these experiences to his or her own body. Thus, infants learn that all things good are obtained through others, not through one's self. The perceived needs of others becomes the target of satisfaction for infants who are denied validation of instinctual needs. The infants *do* things to exploit their environment rather than simply *being* in their environment. Such infants develop into individuals who are concerned not with figuring out who they are and what they want, but are focused on figuring out what others want. Through this "compliance with external demands" (p. 147) the False Self develops in order to serve as a defense to protect the True Self. Since the True Self has not been

validated and consequently has not been allowed to develop and grow, the True Self is incomplete or perceived as being highly negative. Without protection from the False Self, the True Self runs the risk of ultimately being exploited and destroyed if it is revealed. The True Self, which is protected at all costs, is unavailable for spontaneous expression and is replaced by the False Self that has refined the ability to imitate and "play the right part". This replacement is an indicator of alienation from the True Self. As the infant continues to operate out of alienation from the True Self subsequent object relationships will develop on the basis of the False Self which renders these relationships inadequate and dissatisfying. Individuals operating out of the False Self have been described as being dependent on others, more perceptive than their peers, uncertain about their own powers of efficacy, and unsure about whether or not they will be rewarded or whether they will be allowed to be rewarded (Klein, 1987).

Winnicott (1965) acknowledged that degrees of False Self exist. In healthy individuals, the False Self is made manifest when the True Self is socially compliant thereby protecting itself from being exploited or annihilated. Exposure of the True Self in certain social situations risks the True Self being criticized or rejected. The compromise

of social compliance allows the "normal" individual to adapt; however, the True Self can transcend this social compliance when the issue at hand is significant to the True Self.

Many theoretical articles have been written explaining the influence of Winnicott's ideas about the False Self in relation to psychopathology (e.g., Coopersmith, 1997; Crewdson, 1996; Jacobson, 1988; Winnicott, 1990), and issues related to psychotherapy (e.g., Eckler & Hart, 1987; Weisberg, 1994; Yershalami, 1992). Empirical inquiries into consequences of the adequacy of object relations, in general, have demonstrated that there seems to be a liability associated with immature object relations. Lenhar and Rabiner (1995) reported that adolescents with mature object representations were higher on problem-solving skills and competency. Wool (1986) investigated object relations in women with breast cancer and reported that denial related to having breast cancer was linked to immature object relationship functioning. Finally, Vaillant (1974) reported that men reared in warm early childhood environments had less psychopathology and mature object relations. These findings indicate that the development of mature object relationships is linked to less negative psychological consequences.

Attachment Theory

According to Winnicott (1965), detachment from the True Self is linked to the earliest developmental stages and is therefore impacted by the quality of the relationship to one's earliest caretakers. Although, attachment to these figures is not addressed in explanations of the development of the True and False Selves, the nature of the early attachment relationship(s) has been examined theoretically and has been empirically demonstrated to be seminal in the development of the individual as well as in subsequent relationships with others. Both the object relations and attachment theories have as central constructs the importance of early relationships with parental (primary caregiving) figures, and both have been regarded as highly interrelated areas (Buelow, McClain, & McIntosh, 1996; Fishler et al., 1990). The conceptual differences between these two areas is noted in the next section.

Bowlby (1973) delineated two internalized cognitive models through which attachment in later life is affected. The first model consists of the individual's view of caregivers as positive or negative. According to this model the individual assesses the availability of the caregiver to provide support and protection. The second model consists of the individual's view of one's self having positive or

negative value, which in turn reflects the individual's belief about how positively or negatively others will view him/her. In combination, these models explain how each unique individual negotiates relationships in order to meet their relational needs. Bowlby (1973) further proposed that the manner in which we represent the self and others functions as a filter through which we view and interpret our experiences. Thus, our internal constructs of self and others influences our perceptions of our everyday experiences. Ainsworth and Bowlby (1989) suggested that these models stay with us throughout our development and continue to affect our relationships with others beyond the early parent-child relationship.

The quality of the attachment between the infant and caregiver has been postulated to result in one of three attachment styles (Ainsworth, 1979). The first pattern of attachment, the "secure" style, results in individuals being able to trust the attachment figure, to function independently, and to explore one's environment. Securely attached individuals are confident in the knowledge that their parental figures are available and responsive during particularly difficult times as they are responsive to their children's needs. The second type of attachment style called

"anxious-resistant", results from early parenting that is inconsistent: parental figures are available at some time and not at others. As a result, the child becomes anxious when separate from his parental figures and is highly uncertain about the safety of the world. The third style, "anxious-avoidant", results in individuals who distrust close relationships and have a strong need for independence from intimate relationships. Such an attachment style is the result of parenting that has been grossly inadequate. The parental figures have never been available to the developing child when he or she has needed them and may actively reject or criticize the child.

These attachment styles have been demonstrated to be relatively stable and endure into adulthood (Bowlby, 1988; Hazan & Shaver, 1987). Bowlby regarded these attachment styles as initially precarious, but continually gaining strength as the developing child continues to have contact with parental figures. In fact, he noted that over time these styles become more organized, rigid, and highly resistant to change.

Empirical investigations of attachment have yielded results that suggest that there are important cognitive and emotional consequences of different attachment styles.

Simpson (1990), reported that attachment style is linked to the cognitive schemas individuals have about themselves and others. He indicated that securely attached individuals seem to regard others as trustworthy and reliable people who generally have one's best interests at heart. Anxiously attached individuals were reported as experiencing others as generally unreliable and regarded themselves as not being appreciated or understood by others. Finally, those who develop an avoidant attachment style had the tendency to regard others as unreliable and themselves as highly skeptical of and removed from others. Thus, one's attachment style seems to not only reflect the nature of one's relationship with parental figures, but subsequently affects the perception of others with whom one has relationships. This seems to reflect the durability of the effects of early parent-child attachment.

The continued effects of attachment to parents beyond the childhood years has been demonstrated in a number of investigations including studies of transition to junior high school (Papini & Roggman, 1992), career maturity (Kenny, 1990), and social support from parents during the college years (Kenny, 1987). The relationship between perceived attachment to parents and psychological well-being has likewise received much empirical attention.

Greenberg, Siegel, and Leitch (1983) investigated the relationship between adolescents' attachments to their peers and parents, and well-being. They predicted that parental attachment would be a much stronger predictor of well-being than attachment to peers. Participants, aged 12 to 19 years, were administered an inventory of attachment and several inventories designed to assess well-being. Greenberg et al. demonstrated that the quality of attachment to parents and peers were both predictive of self-esteem and positive and negative life events; however, the effects for parental attachment were stronger. Furthermore, they reported that high quality parental attachment, but not high quality peer attachment, served as a buffer against the effects of negative life events on self-concept. In other words, good attachment to parents (but not to peers) helps adolescents to continue to think more positively about themselves despite bad circumstances. These results suggest that, although attachment to both peers and parents can partially explain adolescents' well-being, parental attachment seems to play a more important role.

In their investigation of the relationship between attachment variables and adjustment to college, Lapsley, Rice, and Fitzgerald (1990) sampled freshmen, juniors, and seniors. They administered measures of attachment and

adjustment to college. Adjustment to college incorporated the following aspects of adjustment: academic, social, personal-emotional, and goal commitment. Hierarchical multiple regression analyses, revealed that parental and peer attachment only partially predicted adjustment to college for freshmen: parental attachment, but not peer attachment, predicted academic adjustment, and peer attachment, but not parental, attachment predicted personal-emotional adjustment. However, prediction of adjustment was much more pervasive for upperclassmen. Parental attachment significantly predicted all four aspects of adjustment, and peer attachment improved the prediction for all aspects except academic adjustment. The results reported by Lapsley et al. provide further evidence of the effect that attachment continues to have in adolescent and young adult life.

Other investigations of the importance of attachment in adulthood have demonstrated that attachment style seems to influence emotional experiences. Hazan and Shaver (1987) described romantic love as an attachment process and found that three attachment styles (see Ainsworth, 1979) predict differential emotional experiences in their relationships. Hazan and Shaver reported that secure participants characterized their relationships as happy, friendly, and

trusting. Avoidantly attached participants reportedly experienced jealousy, emotional lability, and fear of intimacy. Anxiously attached individuals experienced relationships as obsessive, emotionally labile, and intensely sexual and jealous.

With regard to perceptions of the self, Collins and Read (1990) examined the relationship between attachment style and self-perception. They demonstrated that adult participants held differing beliefs about themselves depending on the style of attachment they reported. Securely attached individuals generally felt more positively about themselves and had greater feelings of self-worth and confidence socially than those with the other two attachment styles. Participants characterized as being anxiously or avoidantly attached demonstrated more negative views of themselves, and they tended to have lower feelings of self-worth and social confidence.

Other investigations have examined the consequences of attachment style on views of self and others and provide converging evidence that individuals with secure attachments experience a more positive view of themselves (Bartholomew & Horowitz, 1991; Feeney & Noller, 1990; Mikulincer, 1995) and others (Bartholomew & Horowitz, 1991; Feeney & Noller, 1990), and the anxiously and avoidantly attached individuals

hold a more negative view of themselves and others, including lower self-worth and difficulty trusting others (Bartholomew & Horowitz, 1991; Feeney & Noller, 1990).

Perceived attachment to both parental figures and peers seems to have an important influence on a variety of factors, including emotional well-being, self-worth, and view of others. Thus, there are important psychological and cognitive consequences of having one attachment style or another to parents and peers. Thus, the nature of the relationship to parents and peers has important consequences for well-being. Of importance to the present investigation, however, is the apparent support given to Bowlby's (1973) notion that attachment experiences influence and shape individuals' self-images (Mikulincer, 1995). As people feel valued and accepted by others, they tend to have more positive views of themselves; whereas the more rejected and invalidated people feel, the more negatively they view themselves. This ultimately leads to negative psychological experiences (e.g., depression and anxiety).

Object Relations and Attachment Theories

As noted above, object relations and attachment theory have been regarded as interrelated areas that share a common interest in the impact of the early parent-child relationship on the development of the child (Beulow et al.,

1996; Fishler et al., 1990). Beulow et al. noted that secure attachments are forged out of mature object relations representations, and that mature object representations cannot develop without adequate attachment processes. These similar fields are, however, distinguishable.

Object relations theory postulates that as infants develop they internalize their experiences of others. These introjects evolve into cognitive representations about others which greatly impact how others are approached and responded to in the future. Therefore, mature object representations would theoretically allow the individual to approach others in a relatively positive, spontaneous way, whereas immature object representations would result in an approach that focuses on manipulating others in order to get one's needs met. This understanding of object relations posits a global, trait-like view of interpersonal interactions. Attachment theory, on the other hand, represents a more state-like approach to others. "[A]ttachment bonds are present in some, but not all, relationships" (Fishler et al., 1990, p. 501). Thus, as empirical investigations of attachment theory have demonstrated (see "Attachment Theory" above), individuals can experience secure attachment to some, but anxious attachment to others.

Given this view of the differences between object relations and attachment theories, an individual can theoretically approach all "others" in a characteristic, trait-like way, but experience differential attachment bonds to a variety of people. Thus, for the purposes of this investigation object relations and attachment theory will be regarded as separate variables; the former representing an underlying disposition towards others, and the latter a more malleable construct.

Lack of Validation and False Self Behavior

The phenomenon of a self that is inauthentic or "false" has received little empirical attention (Harter, Marold, Whitesell, & Cobbs, 1996). Previous studies that have been conducted have examined the nature of authentic experiences in relation to Machiavellian attitudes and communication style (Hermanowicz, 1982), and dimensions of a personality style reflecting the characteristics of Mahatma Gahndi (Hasan & Khan, 1983). Rahilly (1993) took a less traditional approach and examined the experience of authenticity phenomenologically. She identified several "constituents of authentic experience", and suggested that the quest for authenticity involves being aware of one's sensory and visceral experiences and "asserting our freedom

to choose to live authentic, meaningful lives" (p. 70). Susan Harter and colleagues (Harter, 1997; Harter, Marold, Whitesell, & Cobbs, 1996; Harter, Waters, Pettitt, Whitesell, Kofkin, & Jordan, 1997a; Harter, Waters, & Whitesell, 1997b) have more rigorously theorized about and examined the nature and consequences of inauthentic or false self behavior. They have provided some useful insights into the potentially negative outcomes of false self behavior.

Harter and colleagues first encountered the importance of false self behavior in their investigation of the many different "selves" that individuals exhibit during adolescence (Harter & Monsour, 1992). While inquiring about the different "role-related selves" in which adolescents engage, many participants were concerned with which self was an expression of their true self or which was the "real me". Harter et al. (1996) defined false self behavior as "the extent to which one is acting in ways that do not reflect one's true self as a person or the 'real me'" (p. 360). By contrast, Harter et al. quoted adolescents' characterizations of their "true selves" as being "'the real me inside'... 'what I really think and feel'... behaving the way *I* want to behave and not how someone else wants me to be'" (p. 360, italics in original).

Harter and colleagues (Harter, 1997; Harter et al., 1997) have drawn some important conclusions about false self behavior based on their empirical investigations of the phenomenon. Their focus has primarily been on adolescents' experiences (Harter, 1997; Harter et al., 1996; Harter et al., 1997b); however, they have extended their inquiries to adult expressions of false self behavior (Harter, 1997; Harter et al., 1997a). Harter and colleagues found that individuals who exhibited higher levels of false self behavior also experienced lower levels of self-esteem and were more likely to acknowledge depressive affect. In addition, they noted that among different relationships individuals manifested varying degrees of false self behavior depending on the degree of support or validation present in the relationship.

Harter et al. (1997a) examined adolescents' false self behavior in their relationships with parents and peers. They were interested in identifying factors that fit into a predictive model of false self behavior as well as examining adolescents' motivations for engaging in false self behavior. Based on previous work (Harter, Marold, & Whitesell, 1992), they identified parental and peer support as being an important factor in self related processes. They predicted and demonstrated that adolescents who did not

receive high levels of support (also referred to as "approval") from parents and/or peers would be more likely to engage in false self behavior in order to gain approval. In addition to the level of support, they demonstrated that the quality of the support, which reflected the conditionality ("conditional" vs. "unconditional") of the support, was also found to be linked to false self behavior. To complete the model, "hope" about obtaining future support was entered as a mediating variable. Harter et al. (1992) utilized structural equation modeling to test the accuracy of their model and found that the level and quality of support significantly predicted false self behavior when mediated by hope about obtaining future support. These results suggest that adolescents who receive a low level of support that is conditional and who have little hope about obtaining future support are more likely to engage in false self behaviors than their counterparts. This model held up for relationships with both parents and peers.

Regarding motivations for engaging in false self behavior, Harter et al. (1996) drew from three different literatures (clinical, social, and developmental) which they concluded would lead to varying degrees of negative outcome. Harter et al. (1996) cited Winnicott's construction of the False Self as representing the clinical literature and noted

that it is the alienation from one's true self, the self that was not accepted and validated by caregivers, that leads one to engage in false self behavior. False self behavior exhibited in order to impress important others was identified as a second type of motivation based on the social psychological literature. The third motivation, whereby adolescents try out different roles that may or may not reflect one's true self, was drawn from the developmental literature. Based on these motivations, Harter et al. (1996) made predictions about the consequences of engaging in false self behavior.

Harter et al. (1996) supported the prediction that adolescents who were motivated to engage in false self behavior due to a devaluation of the true self would report greater levels of false self behavior and greater maladaptive behavior/negative outcomes (i.e., low self-esteem, depressed affect, and general hopelessness about the future) than those exhibiting false self behavior out of the other two motivations. Adolescents who reported that their false self behavior merely reflected their experimentation with different roles reported less false self behavior and greater positive adjustment/outcomes than those exhibiting false self behavior out of the other two motivations. Finally, adolescents who endorsed the motive of engaging in

false self behavior to gain approval of others, fell in between these two extremes in terms of false self behavior and outcome. The findings of this investigation pointed to the presence of negative psychological consequences when false self behavior was exhibited.

Harter and colleagues (Harter, Waters, Pettitt, Whitesell, & Kofkin, 1997b) have also examined false self behavior in adults. Their focus was on adults' false self behavior in their relationships with heterosexual partners. They were interested in how perceived validation (i.e., whether the partner takes the other seriously and listens to them) and authentic-self behavior (i.e., "[the] ability to express what is experienced as the 'real me' with one's partner", p. 152) were related to style of romantic relationships. Harter et al. (1997) delineated three different relationship styles: self-focused autonomy, other-focused connection, and mutuality. The respondents were asked to report the relationship style of their respective partners (i.e., is the partner more self-focused, other-focused, or balanced between the two). Thus, both partners were not assessed in this investigation which may be a limitation of the study.

The results of the investigation revealed that adults in relationships comprised of a balance between autonomy and

connection (the mutuality style) yielded more positive outcomes than the other two styles. Harter et al. (1997) also reported that women who were in relationships with self-focused men reported less validation from their partners and less authentic-self behavior. Therefore, results suggested that in mutual relationships individuals experienced more validation from their partners which facilitated greater authentic-self behavior within the relationship, indicating that the more supportive and accepting the partner, the more one's expression of one's true self is facilitated. Although the psychological consequences of level of validation and authentic behavior in relationship pairings was not addressed, Harter et al. (1997) suggested that their path-analytic model (Harter et al., 1996), which encompassed validation as being predictive of self-esteem and depressed affect, would likely demonstrate similar results in this forum.

In aggregate, the results of these investigations suggest that engaging in differing levels of false self behavior can have potentially negative psychological consequences. Although Harter and colleagues do not directly assess the etiology of false self behavior, they have examined both parental and peer influence on false self behavior and have demonstrated that validation of the real

self is paramount to one's ability or willingness to expose one's true self. The focus of this experience, however, has been on level of validation felt currently, as opposed to validation experienced in the past. The current investigation will extend this focus to include past experiences of acceptance or validation via degree of mature representation of objects and attachment.

Rationale

The theoretical literature on object relations theory has suggested that early parent-child relationships are highly influential in the infants' subsequent development of the False Self, which is thought to reflect a lack of authenticity. The empirical literature on the formation of object relations, in general, has demonstrated that there are negative consequences associated with inadequate object relations; however, these investigations have not linked the development of object relations with the presence of the False Self. Empirical work that has been conducted on false self behavior has alluded to the importance of the facilitative environment (i.e., invalidation leads to false self behavior) (Harter and colleagues); however, the link to early object relations has not been established. In addition, these investigations have primarily focused on

validation of children in peer and parental relationships and have given little attention to adult populations. These investigations have however addressed false self behavior and the nature of current relationships which is where false self behavior interfaces with conceptualizations of attachment. Attachment literature has consistently demonstrated positive and negative psychological consequences of having one attachment style or another.

It has been established in the theoretical literature that inadequate object relations can result in the "False Self", and false self behavior has been linked to the nature of current relationships (attachment). Both object relations and attachment style seem to contribute to positive or negative outcome. Given these indirect links it is expected that there will be a relationship between false self behavior, object relations, attachment style, and adjustment. Thus an important reason to conduct this investigation is due to the fact that this collection of variables has not been examined in aggregate. In addition, the population of interest will be college students, which is in keeping with the developmental thrust of counseling psychology.

The purpose of this investigation is to explore the relationship between those variables, and to provide an answer to the following three questions: Are early parent child relationships related to later false self behavior in young adults? Is false self behavior related to the ability to form quality attachments with others? Is false self behavior related to the degree of depression, anxiety, and anger experienced? By addressing these questions it is hoped that new information will be provided regarding the impact of early parent-child relationships on the development of the false self, whether the false self persists into adulthood, and what consequences exist for young adults who exhibit false self behavior. Issues related to counseling with such individuals behavior will also be addressed through discussion of the results of this investigation.

CHAPTER II

METHOD

Participants and Procedure

Participants in this investigation will be students attending the University of North Texas. Participants will include 200 male and female undergraduate students ages 18-24. Data will be collected during the Spring and Summer terms of 1998. Participation in this investigation will be voluntary and participants will be given extra credit for involvement. Participants will be asked to participate in an investigation examining perceptions about self and others. Approval to conduct this investigation will be obtained from the Institutional Review Board at the University of North Texas. Participants will be administered a packet of paper-and-pencil questionnaires. Each packet will contain a letter of introduction with instructions, an Informed Consent form (see Appendix), and the instruments described below. To insure confidentiality, participants will be asked not to provide any identifying information.

Instruments

True Self Questionnaire (TSQ). The TSQ (Harter, Marold et al., 1996) was developed to assess true and false self

behavior in adolescents. This measure has subsequently been used with adult populations (Harter, Waters, Pettitt, Whitesell, Kofkin, & Jordan, 1997). The TSQ is a 12 item inventory. Each item contains two statements to which respondents indicate which of the two statements is either "really true of me" or "sort of true of me". Items assess true or false self behavior in a variety of relationships including friends, and parents. The questionnaire yields a Total True Self score as well as three subscale scores: True Self around Father, True Self around Mother, and True Self around Friends. Higher scores on the overall score as well as the subscale scores reflect a greater degree of true self, whereas lower scores reflect a greater degree of false self.

Harter, Marold, Whitesell, and Cobbs (1996) reported that the internal consistency reliabilities were high and ranged from .88 to .90. S. Harter (personal communication, March 15, 1999) indicated that the measure would not have been used unless the internal consistency reliability was at least .80 for a given subscale. Harter, Waters, and Whitesell (1997) reported that convergent validity and construct validity have been assessed in relation to "voice" (i.e., expression of one's self). Voice was assessed through a questionnaire format similar to the True Self Questionnaire. Respondents were asked to identify which of

two statements [e.g., "Some people usually don't say what's on their mind to (particular persons) BUT Other people do say what's on their mind to (particular persons)] was either "Really true for me" or "Sort of true for me." Internal consistency reliabilities for the Voice scale ranged from .82 to .91. Harter et al. (1997) reported that voice was significantly related to the TSQ, and that approximately 75% of respondents indicated that lack of voice constituted false self behavior.

Bell Object Relations Inventory (BORI). The BORI (Bell, Billington, & Becker, 1986), which is a part of the Bell Object Relations-Reality Testing Inventory (BORRTI), is a self-report measure designed to assess dimensions of object relations. The BORI is a 45 item inventory that has been standardized on both clinical and nonclinical populations. Four subscales have been identified through factor analyses: Alienation (ALN), Insecure Attachment (IA), Egocentricity (EGO), and Social Incompetence (SI) where higher scores reflect functional deficits. Average scores for college age students are 53 (ALN), 51 (IA), 51 (EGO), and 51 (SI). Higher scores on the Alienation subscale reflect a basic lack of trust, inability to be close to others, and hopelessness about being able to sustain a satisfactory level of intimacy. The Insecure Attachment subscale is theorized to reflect "painfulness of

interpersonal relations" (Bell et al., 1986, p.738) where higher scores may have feelings of rejection. The Egocentricity subscale was noted to identify three general attitudes toward relationship including mistrusting the motivations of others, the existence of other only in relation to oneself, and manipulation of others to get what one wants. Finally, higher scores on the Social Incompetence subscale are suggested to reflect shyness, nervousness, absence of close relationships, and uncertainty about how to interact with others. Bell et al. (1986) reported that the inventory and its subscales do not yield evidence of gender, age, or social desirability bias.

In support of the reliability and validity of the Object Relations scale, Bell et al. (1986) reported a high degree of discriminant validity in terms of being able to discriminate previously identified clinical populations, and concurrent validity in terms of its high correlation with other measure of psychopathology. Bell et al. reported internal consistency estimates for the four Object Relations subscales as ranging from .78 to .90 by calculating Coefficient alphas and Spearman Brown split-half reliabilities.

Although one of the subscales is identified as "Insecure Attachment", Lyddon, Bradford, and Nelson (1993)

noted that the BORI "[does] not conform to the attachment pattern schemata identified by either Ainsworth (1979) or Bowlby (1977)" (p.393). Thus, the BORI is considered to assess elements of the parent-child relationship independent of the attachment measure.

Adult Attachment Scale (AAS). The AAS (Collins & Read, 1990) is a self-report measure that was designed to measure aspects of attachment based on Hazan and Shaver's (1987) categorical measure. The AAS, standardized on an undergraduate population, consists of 18 items which participants respond to on a scale ranging from 1 to 5 with anchors of "not at all characteristic" to "very characteristic". There are three dimensions of the AAS which are suggested to reflect adult attachment styles delineated by Ainsworth (1979): Depend, Close, and Anxiety. The Depend dimension is theorized to indicate level of trust in others and expectation that others will be available when needed. The Close dimension reflects the extent to which individuals are comfortable with feelings of closeness and intimacy. Finally, the Anxiety dimension reflects anxiety in relationships including fear of being abandoned and not being loved.

Internal consistency of the subscales indicated coefficient alphas ranging from .69 to .75 and the subscale

interrcorrelation was reported as moderate to weak. Test-retest reliability for each scale ranged from .52 to .71. The overall validity of the scale was reflected in its ability to discriminate between attachment styles as originally delineated by Ainsworth (1979). Scores on the Close and Depend subscales separated avoidantly attached individuals from the securely and anxiously attached individuals, and scores of the Anxiety subscale differentiated the anxiously attached from the securely and avoidantly attached individuals.

Hopkins Symptom Checklist (HSC). The HSC (Derogatis, Lipman, Rickels, Uhlenhuth, & Covi, 1974) is a self-report inventory that was designed to assess a variety of psychological symptoms which was standardized on neurotic depressives and heterogeneous outpatients. The scale has 58 items to which participants indicate how often certain symptoms have been experienced in the last two weeks including the present day. The depression, anger, and anxiety subscales will be used. The scale that respondents use for each item ranges from 1 to 4 with anchors of "not at all" and "extremely". The HSC was standardized on outpatients (i.e., anxious neurotics and depressive neurotics) and "normals" (i.e., random sample of households in Oakland California). Internal consistency estimates

(Cronbach's alpha) ranged from .84 to .86 for the subscales and were based on comparisons between neurotic depressives and heterogeneous outpatients.

Design

The variables in this investigation are the object relations variables (Alienation, Insecure Attachment, Egocentricity, and Social Incompetence), attachment variables (Depend, Close, and Anxiety), degree of false self behavior, and level of psychological symptoms. The relationships between these variables will be analyzed by employing canonical correlation.

Hypotheses

Hypothesis 1. Participants who score higher on the TSQ, as opposed to those who score lower, will report a higher degree of basic trust, and a lower degree of painful interpersonal relationships, of manipulation of others to get what they want, and of uncertainty about how to interact with others as measured by the BORI.

Hypothesis 2. Participants who score higher on the TSQ, as opposed to those who score lower, will report a higher degree of feeling close to others and of feeling as if they can depend on others, and a lower degree of anxiety about their relationship to others as measured by the AAS.

Hypothesis 3. Participants who score higher on the TSQ, as opposed to those who score lower, will have lower scores on depression, anxiety and anger as measured by the HSC.

Analyses

In order to assess the viability of the research hypotheses, the canonical correlation procedure will be utilized. Canonical correlation is a multivariate technique that analyzes the relationships between two or more predictor variables and two or more dependent variables. This procedure yields "roots" which are canonical variates composed of a linear combination of a set of variables. The relative weighting of each variable is assessed by interpreting the standardized canonical coefficients. The first canonical root is the highest possible correlation.

In addition to these analyses, bivariate linear regression equations will be performed with total true self scores and each subscale of the attachment, object relations, and psychological well-being variables.

CHAPTER III

RESULTS

Description of the Sample

The demographic characteristics of those who participated in this investigation are presented in Table 1. One hundred and twenty-three college-aged women and 77 college-aged men between the ages of 18 and 25 participated in this investigation. The current sample was comprised of fairly equal portions of 19, 20, 21, 22, 23, and 24 year olds (14%, 19%, 17%, 16%, 12%, and 19%, respectively). A smaller portion of the sample was represented by 18 year olds (4%). Seventy-five and one half percent of the sample were upper level students (seniors 54% and juniors 22%), with lower level students representing 25% of the sample (sophomores 14% and first years 10.5%).

A majority of the participants was Caucasian (76%), with other ethnic groups representing 24% of the sample (African American 9%, Hispanic 8%, Asian American 4% and Other 3%). In terms of marital status, the majority of respondents indicated that they had never married or lived with a significant other (75%), 25% indicated that they were

married or living with a significant other, 1% were divorced, and none indicated that they had been widowed.

Descriptive Statistics for Measures

Variables used in this investigation included True Self Questionnaire subscales, Bell Object Relations Inventory subscales, Adult Attachment Scale subscales, and Hopkins Symptom Checklist subscales. Means, standard deviations, and internal consistency estimates are presented in Table 2. Results for the True Self Questionnaire are similar to previous investigations (Harter et al., 1996; Harter, Waters, Pettitt, Whitesell, & Kofkin, 1997). Due to the small number of items in each subscale the True Self Questionnaire was assessed for internal consistency. Results for the measure and its subscales were good (See Table 2). Results for the Bell Object Relations and Reality Testing Inventory are similar to those previously found with college age students (Bell et al., 1986). Results for the Adult Attachment scale were similar to earlier studies (Collins & Read, 1990; Selby, 1999) and internal consistency estimates were good. Results for the Hopkins Symptom Checklist are similar to those found in past investigations (Selby, 1999; Simonsen, 1998) and internal consistency estimates were good.

Correlations between true self and object relations variables are presented in Table 3. Significant correlations were found for all variables of interest. True Self-Father was negatively related to Alienation, Egocentricity, and Insecure Attachment on the object relations inventory. True Self-Mother was negatively related to Egocentricity within the object relations variables. True Self-Friends and Total True Self scores were negatively related to Alienation, Egocentricity, Insecure Attachment, and Social Incompetence within the object relations variables.

Table 4 displays the correlations between true self and attachment variables. Significant correlations were found for all variables of interest. True Self-Father, -Mother, and Total True Self scores were negatively related to Anxious and positively related to Close and Depend within the attachment variables. True Self-Friends was negatively related to Anxious and positively related to Close within the attachment variables.

Correlations between true self and psychological well-being variables are presented in Table 5. Significant correlations were found for most of the variables of interest. True Self around one's Father was negatively related to Depression and Anger. True Self around one's Friends was negatively related to Depression. Total True

Self scores were negatively related to Anxiety, Depression, and Anger. True Self around one's mother was not found to be significantly related to any of the psychological well-being variables.

Correlations between object relations and attachment variables are Table 6. Significant correlations were found for all of the the subscales.

Principal Analyses

The research questions of interest in this investigation included assessing the relationship of true self to object relations, attachment, and psychological well-being. Three hypotheses were postulated regarding these relationships. It was hypothesized that true self would be related to object relations such that higher levels of true self would be related to higher basic trust, and lower degrees of painful interpersonal relationships, manipulation of others to get what they want and uncertainty about how to interact with others. In addition, it was hypothesized that true self would be related to attachment such that higher levels of true self would be related to higher degrees of feeling close to others, feeling as if they can depend on others, and a lower degree of anxiety about relationships to others. Finally, it was hypothesized that true self would be related to psychological well-being

such that higher levels of true self would be related to lower degrees of anxiety, depression and anger. To address these questions a canonical correlation procedure was performed. Each hypothesis was addressed independently by performing separate canonical correlation procedures. True self subscales were considered the independent variables and object relations, attachment, and psychological well-being made up the dependent variables. The importance was determined for each canonical root if the overall canonical correlation was significant. An interpretive cutoff score of .30 was used to assess reporting. In addition, the canonical correlation was squared to assess the amount of variance in one variate that was predicted from its paired variate.

The first canonical correlation procedure was performed with object relations variables. The results, presented in Table 7, indicate that one canonical root was statistically significant [$.38$, $F(4, 195)=3.21$, $p<001$]. The squared canonical correlation indicates that 15% of the variance in one variate could be explained by its paired variate. The standardized canonical coefficients indicate that True Self-Friends was the most highly weighted of the True Self variables and Alienation was the most highly weighted of the Object Relations variables. Within this canonical variate all three of the True Self variables were correlated with

all four of the object relations variables. This canonical variate suggests that participants who reported higher levels of True Self-Friends (.95), -Father (.51), and -Mother (.39) had the tendency to report lower levels of Alienation (-.91), Insecure Attachment (-.71), Egocentricity (-.69), and Social Incompetence (-.60) on the measure of object relations. These results are consistent with the hypotheses of this investigation.

The second canonical correlation procedure was conducted with the Attachment variables. The findings (Table 8) indicate that one canonical root was statistically significant [$.37$, $F(3,196)=3.78$, $p<.001$]. The squared canonical correlation indicates that 14% of the variance in one variate could be explained by its paired variate. The standardized canonical coefficients indicate that True Self-Friends was the most highly weighted of the True Self variables and Close was the most highly weighted of the Attachment variables. Within this canonical variate all three of the true self variables were correlated with the three attachment variables. The canonical variates suggest that those who reported lower levels of True Self-Friends (-.78), -Father (-.71), and -Mother (-.68) had the tendency to report higher Anxious (.75), and lower Close (-.92) and Depend (-.60) on the measure of Attachment. These findings

were in the expected direction given the hypotheses of the investigation.

The third canonical correlation procedure was conducted with psychological well-being variables. The findings (Table 9) indicated that one canonical root was significant [.27, $F(3,196)=2.14$, $p<.05$]. The squared canonical correlation indicates that 7% of the variance in one variate could be explained by its paired variate. The standardized canonical coefficients indicated that True Self-Father was the most highly weighted of the True Self variables and Anger was the most highly weighted of the Psychological Well-Being variables. Within this canonical variate True Self-Friends and -Father were correlated with all three of the psychological well-being variables. The canonical variate suggests that those who reported lower levels of True Self around one's Friends (-.76) and one's Father (-.73) also had the tendency to report higher levels of Anger (.85), Depression (.94), and Anxiety (.56). These findings were in the expected direction given the hypotheses of the investigation.

Additional Analyses

Due to the fact that the True Self Questionnaire had not been previously established as a reliable measure for use with college students and due to the fact that each

subscale consists of relatively few items, bivariate linear regression analyses were performed with Total True Self scores in order to evaluate the proposed hypotheses. Total True Self scores were entered in order to predict each of the subscales for the object relations, attachment, and psychological well-being variables.

Total True Self scores were found to be a significant predictor of all of the subscales (See Table 10). Moreover, the results were in the expected direction and thereby support the proposed hypotheses. Total True Self scores significantly predicted the Anxious ($\beta = -.28$, $p < .001$), Close ($\beta = .32$, $p < .001$), and Depend ($\beta = .23$, $p < .01$) subscales of the Adult Attachment Scale. These results indicate that greater Total True Self scores predict lower Anxious scores, and greater Close and Depend scores on the Adult Attachment Scale.

Total True Self scores also significantly predicted the Alienation ($\beta = -.26$, $p < .001$), Egocentricity ($\beta = -.24$, $p < .001$), Insecure Attachment ($\beta = -.24$, $p < .001$), and Social Incompetence ($\beta = -.15$, $p < .05$) subscales of the Bell Object Relations Inventory. These results reveal that greater Total True Self scores predict lower Alienation, Egocentricity, Insecure Attachment, and Social Isolation scores on the Bell Object Relations Inventory.

Finally, Total True Self scores significantly predicted the Anxiety (beta=-.16, $p < .05$), Depression (beta=-.23, $p < .01$), and Anger (beta=-.15, $p < .05$) subscales of the Hopkins Symptom Checklist. The results indicate that greater Total True Self scores predict lower scores on the Anxiety, Depression, and Anger subscales of the Hopkins Symptom Checklist.

CHAPTER IV

DISCUSSION

The purpose of this investigation was to examine the relationship between true self behavior and object relations, attachment, and psychological well-being variables. The first hypothesis postulated that participants who reported higher levels of true self behavior would also report lower levels of alienation from others, insecure attachment, egocentricity, and social incompetence. The results of the current investigation support this hypothesis. Individuals who reported higher levels of true self behavior around parents and friends had the tendency to report lower levels of alienation, insecure attachment, egocentricity, and social incompetence. In addition, greater total true self behavior was predictive of lower levels of alienation, insecure attachment, egocentricity, and social incompetence.

The second hypothesis was that those who reported higher levels of true self would also report higher levels of feeling close with others and being able to depend on others, and lower levels of anxiety about the availability of others. The results of the current investigation offer

support for this hypothesis. Participants who reported lower levels of true self behavior around parents and friends also reported lower levels of being close to others and being able to depend on others, and higher levels of anxiety about the availability of others. Thus, these results are in the expected direction given the current hypothesis. In addition, Total True Self behavior was demonstrated to be a predictor of higher levels of being close to others and being able to depend on others, and lower levels of anxiety about the availability of others. This finding supports the above hypothesis.

The final hypothesis predicted that those who reported higher levels of true self behavior would also report lower levels of anxiety, depression, and anger. The results of the current investigation offer partial support for this hypothesis. Participants who reported lower levels of true self behavior around their friends and around their father had the tendency to report higher levels of anxiety, depression, and anger. The relationship between true self behavior around one's mother and the psychological well-being variables was not significant, but it was in a direction consistent with the relationship between the above variables. Thus, these results offer partial support for the current hypothesis. Greater Total True Self scores, however,

were found to be a predictor of lower levels of anxiety, depression, and anger which directly supports the above hypothesis.

The current hypotheses were predominantly supported by the results of this investigation; however, the relationship between true self behavior and psychological well-being was mixed. True self behavior around one's mother did not emerge as a significant variable in this relationship.

Object Relations Variables

Object relations theory suggests that the development of a sense of self does not occur in isolation, rather its development is dependent on the relationships we have with others. Furthermore, the earliest relationships that we have (i.e., relationships with parental figures) are paramount in the development of an adequate sense of self. Inadequate parenting can lead to a self that is disintegrated and "false" (Guntrip, 1969; Horney, 1950; Tustin, 1972; Winnicott, 1965). This "false self" can then lead to the development of relationships that are based on being who one perceives others want one to be rather than being authentic and "true" to who one is (Winnicott, 1965). Empirical evidence for a link between the quality of one's object relations and the presence of a "false self" is scarce. Harter et al. (1996) demonstrated that a sense of alienation

from one's true self due to a lack of validation and acceptance by one's caregivers could be a motivator for the development of a false self. The current investigation extends previous research by seeking to establish the existence of a relationship between object relations and true self behavior.

The current investigation yielded results suggesting that participants who reported having healthy object relations also reported engaging in true self behavior (i.e., felt as though they could be themselves) around a variety of individuals. Individuals who reported engaging in true self behavior around their father, mother, and friends also reported being able to trust others, to feel close to others and to be optimistic about sustaining a satisfactory level of intimacy, to have positive and accepting relationships with others, to trust the motivations of others and lack of manipulation, and to lack feelings of shyness or nervousness around others and of uncertainty about how to interact with others. In addition, individuals who reported high total true self behavior also reported feeling the same way about others.

The current findings are in line with established object relations theory. Winnicott (1965) indicated that inadequate parenting can lead to the construction of a self

that is incomplete and unable to get its needs met without manipulating others. Thus, the ability to be who one truly is when around important others is related to the establishment of satisfactory early relationships. According to theory, individuals who were accepted and validated as infants were brought up in environments that allowed their true self to develop unabashedly, which results in more authentic behavior in later life. The individuals in the current investigation, having reported such experiences, may not have needed to psychologically protect themselves by developing a self that has the need to manipulate in order to get one's needs met or to be what others expected of them in order to be accepted. They were able to act authentically when around others who are important to them.

The current results are also consistent with empirical findings that suggested a lack of acceptance can motivate some individuals to develop a "false self" (Harter et al., 1996), which serves to protect the individual from rejection of one's true self. Harter et al. demonstrated that adolescents who expressed that they devalued their true self (i.e., their true self was not validated by caregivers) were more likely to engage in false self behavior as compared to those who were simply trying out new roles or trying to impress others. This past research suggests that the

participants in the current investigation were also motivated to engage in false self behavior due to an alienation from one's true self resulting from a lack of acceptance and validation of who they truly were.

Attachment Variables

Established attachment theory and supporting research suggest that the emotional connection that individuals have with others is important in terms of the degree of satisfaction that individuals experience in their respective relationships. The degree to which individuals have the inability to establish satisfying relationships has been linked to cognitive and emotional consequences (Simpson, 1990). Other researchers have demonstrated that the type of attachment one has with a romantic partner in adulthood influences the emotions experienced in the relationship (Hazan & Shaver, 1987). Moreover, a link has been established between attachment and self-perception such that those who have healthy attachments to others seemed to experience a greater degree of positive self-regard (Bartholomew & Horowitz, 1991; Collins & Read, 1990; Feeney & Noller, 1990; Mikulincer, 1995) and those who have less healthy attachment to others experience a greater degree of negative self-regard (Bartholomew & Horowitz, 1991; Collins

& Read, 1990; Feeney & Noller, 1990). Thus, it appears that as individuals feel important to and accepted by others, they tend to have a more positive view of themselves. The current investigation extended these findings related to one's sense of self by examining the relationship between attachment and the degree to which individuals could be themselves, or act in accordance with their true self, around their parents and peers.

It was expected, in the current investigation, that those who reported higher degrees of true self behavior would also report having more healthy attachment to others. Thus, the degree to which individuals could be themselves around others would be related to the degree to which they felt close to others, felt as though they could depend on others, and felt a lack of anxiety in relationships with others. The results of this investigation indicate that those who reported a predominance of false self behavior (i.e., did not feel as though they could be themselves) around others also reported a tendency to have less healthy attachment to others. Individuals who reported engaging in false self behavior around their father, mother and friends, also reported that they did not trust others nor expect that others would be there for them when needed, that they did

not feel comfortable with closeness and intimacy, and that they experienced anxiety in relationships that is related to fear of abandonment and not being loved by others. In addition, overall levels of true self behavior (i.e., feeling like one can be one's self around others) were found to be predictive of being able to trust others and expect that others will be there when needed, of feeling comfortable with closeness and intimacy, and of not feeling anxious about being abandoned or being loved by others. This is consistent with past attachment research that a positive view of one's self is linked to feeling important to and accepted by others in their present relationships (Bartholomew & Horowitz, 1991; Collins & Read, 1990; Feeney & Noller, 1990; Mikulincer, 1995).

The current findings suggest that when one's current relationships are unsatisfying and unsafe and when one does not feel comfortable in these relationships that one will also exhibit behaviors that do not reflect who one truly is. Again, this false self likely serves to protect the individual from rejection or attack of who one truly is (i.e., true self) by those in these unsatisfying and unsafe relationships. This suggests that an overall ability to be one's self around others is related to feeling like one is involved in relationships that are satisfying and safe.

These safe relationships then foster an atmosphere that is supportive of being authentic and genuine.

Psychological Well-Being Variables

Theory on the false self (Winnicott, 1965) suggests that the presence of projecting one's self in this way can have negative psychological consequences including less satisfying relationships with others. Research identifying false self behavior as a potential liability in relationships with important others has demonstrated that lower levels of self-esteem and depressive affect were associated with false self behavior (Harter, 1997). This research, however, was conducted with adolescents. Harter, Waters, Pettitt, Whitesell, Kofkin, & Jordin (1997a) suggested that such findings would also be found in adult populations but did not pursue that line of inquiry in their investigation with adults. The current investigation extends this research by examining the relationship between true self behavior in adults and three dimensions of psychological well-being: anger, anxiety, and depression. It was hypothesized that individuals who reported higher levels of true self behavior around parents and friends would also report lower levels of anger, anxiety, and depression. This hypothesis was partially supported. The results indicated that individuals who reported feeling like they could not be

themselves around their father and friends also reported higher levels of anxiety, depression, and anger. This is consistent with previous research conducted with adolescents (Harter, 1997); however, the failure to find a relationship between these affective variables and feeling like one could not be oneself around one's mother warrants additional attention.

This finding is especially intriguing since the relationship considered to be paramount in the development of a false or true self, according to object relationships theorists (e.g., Winnicott, 1965), is one's relationship with one's mother. The finding indicates that there was a pattern of participants who reported experiencing negative affect while experiencing false self behavior around their father and friends but not around their mother. So, despite the fact that participants feel like they can be who they truly are around their mothers, they still report high levels of psychological distress because they feel as though they cannot be who they truly are around their father and their friends. It is possible, that the ability to be one's self around one or more of these other relationships (i.e., father and/or friends) is more important in terms of psychological well-being than the ability to be one's self around one's mother. It is also possible, that the

participants' relationships with their mothers is highly important with respect to true self behavior and psychological well-being, but this relationship is simply "out-numbered." The greater the number of relationships around whom one feels as though they cannot be one's self has more of an impact psychologically than one developmentally important relationship.

An additional finding that may support this potential explanation was the finding that total true self behavior (true self behavior considered in its entirety rather than being broken down by relationship) was found to be predictive of lower levels of anxiety, depression, and anger. Thus, the breadth of one's true (or false) self behavior seems to be important in terms of psychological well-being. The more people around whom one is able to be one's self the more likely one would also experience less anger, anxiety and depression. Likewise, the greater the number of people around whom one feels one cannot be one's self seems to be linked to greater feelings of anxiety, anger, and depression.

Limitations

The limitations of this investigation include the inclusion of only college-age participants from only one institution. In addition the current participants represent

a group that experiences developmental issues specific to this population. Thus, the findings of this investigation may be partially a function of the types of developmental tasks that are experienced by college age students as opposed to individuals of similar age who are not in college, or to non-traditional college students. These factors limit the generalizability of these findings to other age groups, other locations, and others of similar age who may not be in college. Thus, although the results offer some glimpse into the true self and other aspects of development related to this construct, the current results can only be attributed to and interpreted in terms of the current sample of participants. In addition, the use of the True Self Questionnaire warrants a limitation to consider. This is a relatively new instrument that has been used in limited research which primarily consisted of adolescent participants. This instrument had not previously been used with a college student population. In addition, the subscales of the measure consisted of relatively few items per subscale. Thus, although the statistics performed on the measure and its subscales suggest that it is a reliable measure of true self behavior, the results should still be interpreted with caution. Finally, due to the correlational

nature of this investigation, cause and effect relationships between the variables of interest were not established.

Implications and Future Research

This seems to have been a promising area of inquiry, as the current findings suggest that false self behavior around parents and peers is related to inadequate early childhood relationships, unsatisfying current relationships, and negative affective experiences. This has some potential implications for psychotherapists working with college age students.

College students have historically been thought to be engaging in a process of self-exploration (Erikson, 1968). The finding that some college students seem to have developed a "false self" may indicate that childhood relationships with one's parents may have been troublesome. This suggests that the nature of such past relationships may warrant therapeutic attention prior to or in conjunction with clients' presenting problems. In addition, since false self behavior seems to be related to the quality of current relationships a therapeutic focus on the establishment of more genuine and honest interactions with these important others may be necessary. Finally, the ability to be one's self around important others seems to be related to feeling psychologically well. Thus, an important area of exploration

in therapy for individuals reporting distressing negative affect may be centered in clients' ability to be one's self.

Although the current investigation seems to offer some promising findings in the area of false self behavior and has begun to explicate the relationship between false self behavior, early childhood relationships, current relationships, and affective experiences, additional research is necessary. Investigations conducted with the purpose of replication will help to further delineate and/or (dis)confirm the relationship(s) between these variables. However, since this investigation only sampled college students, it would be beneficial to examine the nature of the relationship between these variables in a general adult population. Such an investigation would widen the generalizability of the findings. Examining causal relationships that may exist between these variables would serve to further explicate the nature of the relationships. It would be interesting to examine whether inadequate object relations leads to false self behavior which then leads to unsatisfying current relationships ultimately leading to negative affective experiences. Establishing such a relationship may help psychotherapists understand and assist clients who enter therapy with difficulties with interpersonal relationships.

Finally, given the surprising result that a group of participants reported experiencing negative affect and also reported experiencing false self behavior around their father and friends but not around their mother, it may be important to examine the relationship of all of the current variables separately in terms of each relationship: father, mother, and friends. In addition, it may be helpful to include other important relationships (e.g., dating partners, friends that are same gender, friends that are opposite gender) in order to examine whether or not it is the breadth of the true (or false) self behavior that is important in terms of psychological well-being. Such an investigation may help to further explain the antecedents and consequences of false self behavior.

APPENDIX A

TABLES

Table 1

Demographic Information

Variables	n	%
Gender		
Female	123	61.5
Male	77	38.5
Age		
18	8	4.0
19	28	14.0
20	37	18.5
21	34	17.0
22	32	16.0
23	24	12.0
24	37	18.5
Ethnicity		
African American	18	9.0
Asian	8	4.0
Caucasian	152	76.0
Hispanic	15	7.5
Other	5	3.0
Education		
First Year	21	10.5
Sophomore	28	14.0
Junior	44	22.0
Senior	107	53.5
Relationship Status		
Never Married/Never Lived With Significant Other	149	74.5
Currently Married/Living With Significant Other	49	24.5
Divorced	1	0.5
Widowed	0	0.0

Table 2

Means, standard deviations, and internal consistency estimates for True Self Questionnaire, Bell Object Relations Inventory, Adult Attachment Scale and Hopkins Symptom Checklist

Scale	<u>M</u>	<u>SD</u>	alpha
True Self Questionnaire			
Father	2.82	.96	.92
Mother	3.18	.86	.88
Friends	3.42	.69	.86
Total	3.14	.63	.85
Bell Object Relations Inventory			
ALN	51.67	9.97	*
IA	51.99	9.93	*
EGO	50.83	9.88	*
SI	49.43	10.36	*
Adult Attachment Scale			
Close	21.72	4.67	.77
Depend	18.45	4.99	.80
Anxious	16.24	6.10	.87
Hopkins Symptom Checklist			
Anxiety	10.61	3.98	.85
Depression	18.45	6.14	.87
Anger	12.71	4.19	.81

Note. N=200. ALN=Alienation; IA=Insecure Attachment; EGO=Egocentricity; SI=Social Incompetence.

*Internal consistency estimates were unavailable for these subscales.

Table 3

Correlations between True Self variables and Object Relations variables

	Father	Mother	Friends	Total	ALN	IA	EGO	SI
Father	1.0							
Mother	.51**	1.0						
Friends	.21**	.27**	1.0					
Total	.81**	.81**	.59**	1.0				
ALN	-.17*	-.12	-.33**	-.26**	1.0			
IA	-.20**	-.12	-.24**	-.24**	.45**	1.0		
EGO	-.18*	-.14*	-.24**	-.25**	.46**	.58**	1.0	
SI	-.03	-.09	-.25**	-.14*	.43**	.42**	.17*	1.0

Note. N=200. ALN=Alienation; IA=Insecure Attachment; EGO=Egocentricity; SI=Social Incompetence.

* $p < .05$; ** $p < .001$

Table 4

Correlations between True Self variables and Attachment variables

	Father	Mother	Friends	Total	Close	Depend	Anxious
Father	1.0						
Mother	.51**	1.0					
Friends	.21**	.27**	1.0				
Total	.81**	.81**	.59**	1.0			
Close	.21**	.22**	.29**	.32**	1.0		
Depend	.22**	.16*	.13	.23**	.50**	1.0	
Anxious	-.24**	-.19**	-.18*	-.28**	-.43**	-.48**	1.0

Note. N=200

* $p < .05$; ** $p < .001$

Table 5

Correlations between True Self variables and Hopkins Symptom Checklist variables

	Father	Mother	Friends	Total	Anxiety	Depress	Anger
Father	1.0						
Mother	.51**	1.0					
Friends	.21**	.27**	1.0				
Total	.81**	.81**	.59**	1.0			
Anxiety	-.13	-.10	-.12	-.15*	1.0		
Depress	-.20**	-.11	-.20**	-.22**	.71**	1.0	
Anger	-.16*	.02	-.12	-.15*	.59**	.67**	1.0

Note. N=200

*p < .05; **p < .001

Table 6

Correlations between Object Relations variables and Attachment variables

	ALN	IA	EGO	SI	Close	Depend	Anxious
ALN	1.0						
IA	.43**	1.0					
EGO	.46**	.58**	1.0				
SI	.43**	.42**	.17*	1.0			
Close	-.54**	-.26**	-.32**	-.33**	1.0		
Depend	-.41**	-.31**	-.35**	-.15*	.50**	1.0	
Anxious	.50**	-.59**	.44**	.44**	-.43**	-.48**	1.0

Note. N=200. ALN=Alienation; IA=Insecure Attachment; EGO=Egocentricity; SI=Social Incompetence.

*p < .05; **p < .001

Table 7

Correlations, Standardized Canonical Coefficients, Canonical Correlations for true self variables and object relations variables and their corresponding canonical variates

	<u>Canonical Variate</u>	
	Correlation	Coefficient
True Self Variables		
Father	.51	.34
Mother	.39	-.02
Friends	.95	.88
Object Relations Variables		
ALN	-.91	-.61
IA	-.71	-.20
EGO	-.69	-.26
SI	-.60	-.21
Canonical Correlation		.38*
Squared Canonical Correlation		.15

Note. ALN=Alienation; IA=Insecure Attachment; EGO=Egocentricity; SI=Social Incompetence

* $p < .001$

Table 8

Correlations, Standardized Canonical Coefficients, Canonical Correlations for true self variables and attachment variables and their corresponding canonical variates

	<u>Canonical Variate</u>	
	Correlation	Coefficient
True Self Variables		
Father	-.72	-.45
Mother	-.68	-.29
Friends	-.78	-.62
Attachment Variables		
Close	-.92	-.72
Depend	-.60	-.04
Anxious	.75	.42
Canonical Correlation		.37*
Squared Canonical Correlation		.14

* $p < .001$

Table 9
Correlations, Standardized Canonical Coefficients, Canonical
Correlations for true self variables and psychological well-
being variables and their corresponding canonical variates

	<u>Canonical Variate</u>	
	Correlation	Coefficient
True Self Variables		
Father	-.73	-.75
Friends	-.76	-.70
Mother	.31	
Psychological Well-Being		
Anxiety	.56	-.35
Depression	.94	.85
Anger	.85	.46
Canonical Correlation		.27*
Squared Canonical Correlation		.07

* $p < .05$

Table 10

Summary of Regression Equations of Total True Self Scores on Adult Attachment Scale, Bell Object Relations Inventory and Hopkins Symptom Checklist Subscales

	Total R^2	Adjusted R^2	beta	t
AAS Subscales				
Close	.10	.10	.32	4.72**
Anxious	.08	.07	-.28	-4.12**
Depend	.05	.05	.23	3.33*
BORI Subscales				
ALN	.07	.06	-.26	-3.82**
IA	.06	.05	-.24	-3.51**
EGO	.06	.05	-.24	-3.47**
SI	.02	.02	-.15	-2.13*
HSC Subscales				
Anxiety	.02	.02	-.16	-2.22*
Depression	.05	.05	-.23	-3.25*
Anger	.02	.02	-.15	-2.09*

Note. AAS=Adult Attachment Scale; BORI=Bell Object Relations Inventory; ALN=Alienation; IA=Insecure Attachment; EGO=Egocentricity; SI=Social Incompetence; HSC=Hopkins Symptom Checklist.

* $p < .05$; ** $p < .001$

APPENDIX B
INFORMED CONSENT FORM

INFORMED CONSENT

This study is exploring perceptions of the self and interpersonal relationships. It is hoped that the results will increase our understanding of young adult development and relationships. Participation will involve completing questionnaires that will take approximately one hour of your time. If you choose to participate in this study your answers will be kept confidential. There will be no risks or discomforts involved in the study. You may withdraw from the study at any time if you choose to do so. Participation is voluntary, and if applicable, participants can receive 2 extra credit points in psychology classes. Completion of the research packet is necessary to earn extra credit.

The questionnaires each contain instructions which are self explanatory. It is very important that you answer every question. Please be completely honest. Your answers are entirely confidential and will be useful only if they accurately describe you.

To receive a summary of the results of this study send your request and a self-addressed stamped envelope to Christine Selby, M.S. at the Psychology Department. You can also reach me at #565-2671 if you have any questions. This project has been reviewed and approved by the Institutional Review Board Human Subjects Committee.

If you are willing to participate please fill out and sign this page and the next identical page. Tear off the top form for your own records. The second form will be separated from your questionnaires upon receipt.

Thank you for your participation.

Christine L. B. Selby, M.S.
Counseling Psychology Program
Psychology Department
University of North Texas

Name (print)

Signature

Date _____

APPENDIX C
QUESTIONNAIRES

DEMOGRAPHIC INFORMATION

INSTRUCTIONS: On the line to the left of each statement, place the number that corresponds to the answer that best describes you. Please respond to all items.

1. _____ Sex 2. _____ Age 3. _____ Race

- 1. male
- 2. female

- 1. White
- 2. Black
- 3. Hispanic
- 4. Asian
- 5. Other

4. _____ Education 5. _____ Marital Status

- 1. First year
- 2. Sophomore
- 3. Junior
- 4. Senior

- 1. Never Married/Never Lived with Significant Other
- 2. Married/Living with Significant Other
- 3. Divorced
- 4. Widowed

6. _____ How many significant *positive* relationships have you had in the past?

- 1. One to three
- 2. Four to six
- 3. Seven to ten
- 4. More than ten

7. _____ How many significant *negative* relationships have you had in the past?

- 1. One to three
- 2. Four to six
- 3. Seven to ten
- 4. More than ten

TRUE SELF QUESTIONNAIRE

Below are several pairs of statements. For each pair, first decide which of the two statements is most like you. Then indicate if this description is only "sort of true" or "really true". Place an "X" on the line to indicate your response.

Really True for me	Sort of True for me	Really True for me
--------------------------	---------------------------	--------------------------

1. Some people often feel that
the way they act around their
mother is "not the real me."

BUT

Other people feel that the
way they act around their
mother is the "real me."

2. Some people often feel that
the way they act around their
friends is "not the real me."

BUT

Other people feel that the
way they act around their
friends is the "real me."

3. Some people often feel that
the way they act around their
father is "not the real me."

BUT

Other people feel that the
way they act around their
father is the "real me."

4. Some people know who they
really are inside as a person.

BUT

Other people sometimes have
trouble knowing who they

5. Some people feel that they
can be their "true self"
around their mother.

BUT

Other people feel that they
can't be their "true self"
around their mother.

6. Some people feel that they
can be their "true self"
around their friends.

BUT

Other people feel that they
can't be their "true self"
around their friends.

7. Some people feel that they
can be their "true self"
around their father.

BUT

Other people feel that they
can't be their "true self"
around their father.

8. Some people have a good
sense of what their "true self"
is like.

BUT

Other people often aren't
sure of what their "true
self" is like.

9. Some people can be who they
really feel they are as a person
around their mother.

BUT

Other people have a hard
time being the true person
they are around their
mother.

10. Some people can be who they
really feel they are as a person
around their friends.

BUT

Other people have a hard
time being the true person
that are around their
friends.

11. Some people can be who they
really feel they are as a person
around their father.

BUT

Other people have a hard
time being the true person
they are around their
friends.

12. Some people often feel like
they don't know who the
"real me" is.

BUT

Other people do feel like
they know who the "real me"
is.

Please read each of the following statements and rate the extent to which it describes you and your feelings about close relationships. Think about all your close relationships, past and present, and respond in terms of how you generally feel in these relationships. If you have never been in a romantic relationship, answer in terms of how you think you would feel. Please use the scale below and indicate the degree to which each statement characterizes you by placing a number between 1 and 5 in the space provided to the right of each statement.

1-----2-----3-----4-----5

Not at all
characteristic of me

Very
characteristic of me

- (7) 1) I find it relatively easy to get close to others. _____
- 2) I find it difficult to allow myself to depend on others. _____
- 3) In relationships, I often worry that my partner does not really love me. _____
- 4) I find that others are reluctant to get as close as I would like. _____
- 5) I am comfortable depending on others. _____
- 6) I do not worry about someone getting close to me. _____
- 7) I find that people are never there when you need them. _____
- 8) I am somewhat uncomfortable being close to others. _____
- 9) In relationships, I often worry that my partner will not want to stay with me. _____
- 10) When I show my feelings for others I'm always afraid they will not feel the same about me. _____
- 11) I often wonder whether my partner really cares about me. _____
- 12) I am comfortable developing close relationships with others. _____

- 13) I am nervous when anyone gets too close._____
- (20) 14) I know that people will be there when I need them._____
- (21) 15) I want to get close to people but I worry about being hurt by them._____
- 16) I find it difficult to trust others completely. _____
- 17) Often, partners want me to be closer than I feel comfortable being._____
- (24) 18) I am not sure that I can always depend on others to be there when I need them._____

Below is a list of problems and complaints that people sometimes have. Please read each one carefully. After you have done so, please rate how much that problem has bothered or distressed you DURING THE PAST TWO WEEKS INCLUDING TODAY. To make your rating, use the scale shown in the example. Place that number in the open space to the left of the problem. Do not skip any items, and print your answer number clearly.

Example: How much were you distressed by:

 3 Backaches

Ratings: 1. not at all
 2. a little bit
 3. quite a bit
 4. extremely

If you feel that "backaches" have been bothering you quite a bit during that past 2 weeks, you would record your response "3" as shown.

DURING THE PAST 2 WEEKS, INCLUDING TODAY, HOW MUCH WERE YOU BOTHERED BY:

- (7) 1. _____ headaches
 2. _____ nervousness or shakiness inside
 3. _____ being unable to get rid of bad thoughts or ideas
 4. _____ faintness or dizziness
 5. _____ Loss of sexual interest or pleasure
 6. _____ Feeling critical of others
 7. _____ Bad dreams
 8. _____ Difficulty in speaking when you are excited
 9. _____ Trouble remembering things
 10. _____ Worried about sloppiness or carelessness
 11. _____ Feeling easily annoyed or irritated
 12. _____ Pains in the heart or chest
 13. _____ Itching
 14. _____ Feeling low in energy or slowed down
 15. _____ Thoughts of ending your life
 16. _____ Sweating
 17. _____ Trembling
 18. _____ Feeling confused
 19. _____ Poor appetite
 20. _____ Crying easily
 21. _____ Feeling shy or uneasy with the opposite sex

- (28) 22. ___ A feeling of being trapped or caught
- (29) 23. ___ Suddenly scared for no reason
24. ___ Temper outbursts you could not control
25. ___ Constipation
26. ___ Blaming yourself for things
27. ___ Pains in the lower part of your back
28. ___ Feeling blocked or stymied in getting things done
29. ___ Feeling lonely
30. ___ Feeling blue
31. ___ Worrying or stewing about things
32. ___ Feeling no interest in things
33. ___ Feeling fearful
34. ___ Your feelings being easily hurt
35. ___ Having to ask others what you should do
36. ___ Feeling others do not understand you or are
unsympathetic
37. ___ Feeling that people are unfriendly or dislike you
38. ___ Having to do things very slowly in order to be sure
you are doing them right
39. ___ Heart pounding or racing
40. ___ Nausea or upset stomach
41. ___ Feeling inferior to others
42. ___ Soreness of your muscles
43. ___ Loose bowel movements
44. ___ Difficulty in falling asleep or staying asleep
45. ___ Having to check and double check what you do
46. ___ Difficulty making decisions
47. ___ Wanting to be alone
48. ___ Trouble getting your breath
49. ___ Hot or cold spells
50. ___ Having to avoid certain places or activities because
they frighten you
51. ___ Your mind going blank
52. ___ Numbness or tingling in parts of your body
53. ___ A lump in your throat
54. ___ Feeling hopeless about the future

55. _____ Trouble concentrating
- (62) 56. _____ Weakness in parts of your body
57. _____ Feeling tense or keyed up
- (64) 58. _____ Heavy feelings in your arms and legs

REFERENCES

- Ainsworth, M. D. (1979). Infant-mother attachment. American Psychologist, 34, 932-937.
- Bartholomew, K., & Horowitz, L. M. (1991). Attachment styles among young adults: A test of a four-category model. Journal of Personality and Social Psychology, 61, 226-244.
- Bayne, R. (1977). What does self mean in the term 'self-actualization'? Bulletin of the British Psychological Society, 30, 213-214.
- Bowlby, J. (1973). Attachment and loss: Vol 2. Separation-anxiety and anger. New York: Basic Books.
- Bowlby, J. (1988). Developmental psychiatry comes of age. American Journal of Psychiatry, 145, 1-10.
- Buelow, G., McClain, M., & McIntosh, I. (1996). A new measure for an important construct: The attachment and object relations inventory. Journal of Personality Assessment, 66, 604-623.
- Collins, N. L., & Read, S. J. (1990). Adult attachment, working models, and relationship quality in dating couples. Journal of Personality and Social Psychology, 58, 644-663.
- Cowles, M., Darling, M., & Skanes, A. (1992). Some characteristics of the simulated self. Personal and Individual Differences, 13, 501-510.
- Crewsdon, F. (1996). The false self as explored in a long-term psychoanalysis. Journal of the American Academy of Psychoanalysis, 24, 29-43.
- Eckler, H., & Anton, H. (1987). True and false self in the development of the psychotherapist. Psychotherapy, 24, 683-692.

Erikson, E. H. (1968). Identity: Youth and crisis. New York: W. W. Norton & Company, Inc.

Feeney, J. A., & Noller, P. (1990). Attachment style as a predictor of adult romantic relationships. Journal of Personality and Social Psychology, 58, 281-291.

Fishler, P. H., Sperling, M. B., & Carr, A. C. (1990). Assessment of adult relatedness: A review of empirical findings from object relations and attachment theories. Journal of Personality Assessment, 55, 499-520.

Gomez, L. (1997). An introduction to object relations. New York: New York University Press.

Greenberg, M. T., Siegel, J. M., & Leitch, C. J. (1983). The nature and importance of attachment relationships to parents and peers during adolescence. Journal of Youth and Adolescence, 12, 373-386.

Guntrip, H. (1969). Schizoid phenomena, object relations and the self. London: Hogarth.

Harter, S. (1997). The personal self in social context: Barriers to authenticity. In R. D. Ashmore & L. Jussim (Eds.), Self and identity: Fundamental issues (pp. 81-105). New York: Oxford University Press.

Harter, S. Marold, D. B., & Whitesell, N. R. (1992). Model of psychosocial risk factors leading to suicidal ideation in young adolescents. Development and Psychopathology, 4, 167-188.

Harter, S. Marold, D. B., Whitesell, N. R., & Cobbs, G. (1996). A model of the effects of perceived parent and peer support on adolescent false self behavior. Child Development, 67, 360-374.

Harter, S., Waters, P. L., Pettitt, L. M., Whitesell, N., Kofkin, J., & Jordan, J. (1997). Autonomy and connectedness as dimensions of relationship styles in men and women. Journal of Social and Personal Relationships, 14, 147-164.

Harter, S., Waters, P. L., & Whitesell, N. R. (1997). Lack of voice as a manifestation of false self-behavior among adolescents: The school setting as a stage upon which the drama of authenticity is enacted. Educational Psychologist, 32, 153-173.

Hasan, Q., & Khan, S. R. (1983). Dimension of Gandian (nonviolent) personality. Journal of Psychology Researches, 27, 100-106.

Hazan, C., & Shaver, P. (1987). Romantic love conceptualized as an attachment process. Journal of Personality and Social Psychology, 52, 511-524.

Hermanowicz, U. (1982). Effect of "authenticity" and Machiavellian attitudes on communication styles. Polish Psychological Bulletin, 13, 45-51.

Horney, K. (1950). Neurosis and Human Growth. New York: W. W. Norton.

Jourard, S. M. (1964). The transparent self: Self-disclosure and well-being. New York: D. Van Nostrand Company, Inc.

Kenny, M. E. (1987). The extent and function of parental attachment among first-year college students. Journal of Youth and Adolescence, 16, 17-29.

Kenny, M. E. (1990). College seniors' perceptions of parental attachments: The value and stability of family ties. Journal of College Student Development, 31, 39-46.

Klein, J. (1987). Our need for others and its roots in infancy. New York: Tavistock Publications.

Lapsley, D. K., Rice, K. G., & Fitzgerald, D. P. (1990). Adolescent attachment, identity, and adjustment to college: Implications for the continuity of adaptation hypothesis. Journal of Counseling and Development, 68, 561-565.

Lenhart, L. A., & Rabiner, D. L. (1995). An integrative approach to the study of social competence in adolescence. Development and Psychopathology, 7, 543-561.

Lyddon, W. J., Bradford, E., & Nelson, J. P. (1993). Assessing adolescent and adult attachment: A review of current self-report measures. Journal of Counseling and Development, 71, 390-395.

Mikulincer, M. (1995). Attachment style and the mental representation of the self. Journal of Personality and Social Psychology, 69, 1203-1215.

Mueller, J. H., & Grove, T. R. (1991). Trait actualization and self-reference effects. Bulletin of the Psychonomic Society, 29, 13-16.

Markus, H., & Nurius, P. (1986). Possible selves. American Psychologist, 41, 954-969.

Papini, D. R., & Roggman, L. A. (1992). Adolescent perceived attachment to parents in relationship to competence, depression, and anxiety: A longitudinal study. Journal of Early Adolescence, 12, 420-440.

Rahilly, D. (1993). A phenomenological analysis of authentic experience. Journal of Humanistic Psychology, 33, 49-71.

Rogers, C. (1961). On becoming a person. Boston: Houghton and Mifflin.

Sahakian, W. S. (1976). Philosophical psychotherapy: An existential approach. Journal of Individual Psychology, 32, 62-68.

Selby, B. W. (1999). The relation of attachment, adjustment and narcissism to masculine gender role conflict. Unpublished doctoral dissertation, University of North Texas.

Simonsen, G. (1998). Masculine role conflict in gay men: Mediation of psychological well-being and help-seeking

behaviors. Unpublished doctoral dissertation, University of North Texas.

Tustin, F. (1972). Autism and childhood psychosis. London: Hogarth.

Valliant, G. E. (1974). Natural history of male psychology health: II. Some antecedents of healthy adult adjustment. Archives of General Psychiatry, 31, 15-22.

Weisberg, I. (1994). The facilitating or inhibiting environment, maternal and psychoanalytic: D. W. Winnicott. International Journal of Communicative Psychoanalysis and Psychotherapy, 9, 113-119.

Winnicott, C. (1990). Fear of Breakdown: A clinical example. International Journal of Psycho-Analysis, 61, 351-357.

Winnicott, D. W. (1965). The maturational processes and the facilitating environment. New York: International Universities Press, Inc.

Wool, M. S. (1986). Extreme denial in breast cancer patients and capacity for object relations. Psychotherapy and Psychosomatics, 46, 196-204.

Yerushalmi, H. (1992). Psychoanalytic supervision and the need to be alone. Psychotherapy, 29, 262-268.