

PREDICTORS OF SHYNESS AMONG UNIVERSITY STUDENTS: TESTING A
SELF-PRESENTATIONAL MODEL

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ABSTRACT

PREDICTORS OF SHYNESS AMONG UNIVERSITY STUDENTS: TESTING A SELF-PRESENTATIONAL MODEL

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The present study investigated self-presentational predictors of shyness among university students via a mediational causal model, in which socially-prescribed perfectionism, perceived social skills, and perceived parental attitudes were proposed to interact with fear of negative evaluation and self-esteem to predict shyness. The sample consisted of 497 undergraduate students (287 females, 210 males) selected from Middle East Technical University by stratified random sampling. Brief Fear of Negative Evaluation Scale, Revised Cheek and Buss Shyness Scale, Socially-Prescribed Perfectionism Scale, Rosenberg Self-Esteem Scale, Social Skills Inventory-Short, and Parental Attitude Scale were used in data collection. Pilot studies were conducted for assessing the reliability and validity of Brief Fear of Negative Evaluation Scale, Revised Cheek and Buss Shyness Scale, and Social Skills Inventory-Short. Path analysis was utilized to test the causal model.

The results revealed that shyness was positively predicted from fear of negative evaluation and socially-prescribed perfectionism; and negatively from self-esteem and perceived social skills. Fear of negative evaluation was predicted positively from socially-prescribed perfectionism and perceived strictness/supervision from parents, and negatively from self-esteem; whereas self-esteem was predicted positively from perceived social skills, perceived parental psychological autonomy and acceptance/involvement, and negatively from socially-prescribed perfectionism.

These findings suggested that fear of negative evaluation partially mediated the relationship between shyness and socially-prescribed perfectionism; between shyness and perceived parental strictness/supervision; and between shyness and self-esteem. In addition, self-esteem partially mediated the association of shyness with socially-prescribed perfectionism; with perceived social skills; with parental acceptance/involvement; and with parental psychological autonomy. Findings are discussed within the self-presentational framework of shyness.

Keywords: Self-Presentation, Shyness, Fear of Negative Evaluation, Social Anxiety

ÖZ

ÜNİVERSİTE ÖĞRENCİLERİNDE UTANGAÇLIĞIN YORDAYICILARI: BİR BENLİK SUNUMU MODELİNİN İNCELENMESİ

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Bu araştırmada, üniversite öğrencilerinde utangaçlığın benlik sunumu yordayıcıları, başkalarınınca belirlenen mükemmeliyetçilik, algılanan sosyal beceriler ve algılanan anne-baba tutumlarının olumsuz değerlendirilme korkusu ve benlik saygısı ile etkileşerek utangaçlığı ne ölçüde yordadığının incelendiği nedensel bir model kullanılarak test edilmiştir. Araştırmanın örneklemini Orta Doğu Teknik Üniversitesi'nden tabakalı seçkisiz örnekleme yöntemi ile seçilmiş 497 (287 kız ve 210 erkek) lisans öğrenci oluşturmuştur. Veri toplama işleminde Olumsuz Değerlendirilme Korkusu Ölçeği Kısa Formu, Cheek ve Buss Utangaçlık Ölçeği, Başkalarınınca Belirlenen Mükemmeliyetçilik Ölçeği, Rosenberg Benlik Saygısı Ölçeği, Sosyal Beceri Envanteri Kısa Formu ve Anne-Baba Tutum Ölçeği kullanılmıştır. Olumsuz Değerlendirilme Korkusu Ölçeği Kısa Formu, Cheek ve Buss Utangaçlık Ölçeği ve Sosyal Beceri Envanteri Kısa Formu'nun geçerlik ve güvenirlikleri için pilot uygulamalar yapılmıştır. Verilerin analizinde, nedensel modeli test etmek üzere yol (path) analizi kullanılmıştır.

Sonuçlar, olumsuz değerlendirilme korkusunun ve başkalarınınca belirlenen mükemmeliyetçiliğin utangaçlığı olumlu; benlik saygısının ve algılanan sosyal becerilerin ise olumsuz yönde yordadığını göstermiştir. Başkalarınınca belirlenen mükemmeliyetçilik ve algılanan anne-baba kontrol/denetim, olumsuz değerlendirilme korkusunu olumlu yönde; benlik saygısı ise olumsuz yönde

yordamıştır. Benlik saygısının, algılanan sosyal beceri ve algılanan anne-baba psikolojik özerklik ve kabul/ilgiden olumlu; başkalarınca belirlenen mükemmeliyetçilikten olumsuz yönde etkilendiği bulunmuştur.

Bu sonuçlar, olumsuz değerlendirilme korkusunun, utangaçlık ile başkalarınca belirlenen mükemmeliyetçilik arasında; utangaçlık ile algılanan anne-baba kontrol/denetim arasında; ve utangaçlık ile benlik saygısı arasında bir ara değişken olduğunu göstermektedir. Ayrıca benlik saygısının utangaçlık ile başkalarınca belirlenen mükemmeliyetçilik; utangaçlık ile algılanan sosyal beceriler; utangaçlık ile anne-baba psikolojik özerklik; ve utangaçlık ile anne-baba kabul/ilgi arasında bir ara değişken olduğu bulunmuştur. Bulgular, utangaçlığa benlik sunumu yaklaşımı çerçevesinde tartışılmıştır.

Anahtar Sözcükler: Benlik Sunumu, Utangaçlık, Olumsuz Değerlendirilme Korkusu, Sosyal Kaygı

To My Brother, Serdar

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CHAPTER I

INTRODUCTION

A shy man no doubt dreads the notice of strangers, but can hardly be said to be afraid of them; he may be as bold as a hero in a battle, yet have no self-confidence about trifles in the presence of strangers.

Darwin (1955, p. 330)

For every single phase of history, and regardless of culture, one thing that has been cited as a distinguishing characteristic of human beings is their existence in the world as social creatures. This unique human feature has brought the necessity for people to interact and establish relationships with others, urging them to refuse solitary (Barash, 1977; Baumeister & Tice, 1990; Bowlby, 1969). Living and making contact with other individuals, or in other words the sense of belongingness, has been perceived as a powerful drive for each human being to maintain a satisfactory life (Baumeister & Leary, 1995).

Social life consists of a diverse range of encounters with other people, such as social interactions which are mostly regarded as rewarding and satisfying experiences (Goffman, 1959; Schlenker, 1980; 1984). Although it is inevitable for an individual to live among other people, for some, it is not always an easy task to be part of a social group, to build up bonds, to communicate effectively with others, and to establish and maintain strong interpersonal relationships. Some people have real difficulty and hard time in relating to others which in turn leads to discomfort in social encounters (Gilbert & Trower, 2001; McCroskey, 1977; Zimbardo, 1977). They may, for instance, feel nervous or anxious on dates, in talking to authority figures, in giving speeches in public, or in job interviews. The uneasiness is sometimes so little that it does not bother the person much; however, at other times,

the person may be so anxious and feel inhibited that he/she may be in trouble which to some degree may limit the ability of the individual to function normally (Hartman & Cleland, 1990; Leary & Kowalski, 1995; Zimbardo, 1977).

Numerous terms have been used to refer to the experience of apprehension and anxiety in social situations, including dating anxiety, speech anxiety, social anxiety, shyness, embarrassment, social phobia, shame, social inhibition, reticence, communication apprehension, introversion, stage-fright, and audience anxiety (Leary & Kowalski, 1993; Leitenberg, 1990; Van Dam-Baggen & Kraaimaat, 1999). Although these terms are not synonymous with one another, feeling of discomfort in social occasions and the accompanying anxiety resulting from the presence of interpersonal evaluation is the common experience of all. This study focused on shyness, a subgroup of a more general construct of social anxiety (Buss, 1980; Schlenker & Leary, 1982). Given that shyness is a form of social anxiety and that both constructs possess a plenty of characteristics in common such as wariness, timidity, and psychological discomfort (Leary, 1986), social anxiety literature and the theoretical models of social anxiety were also used in understanding and making certain inferences about shyness throughout the study.

1.1. Historical Context of Shyness Research

Shyness is virtually an unavoidable emotion, given that it is directly related to many aspects of human nature (Izard, 1972). Like many other emotions, shyness is learned in social relationships, and experienced mostly in connection to others (Asendorpf, 1990; Gilbert, 1989). Undoubtedly, shyness is a familiar concept and experience for many of us. In fact, it is so inherent part of human life that almost everyone reported experiencing a period of shyness at certain times in his/her life, though the level of experience shows variations from one person to the other (Carducci, 1999; Zimbardo, 1989).

Despite its familiarity, however, recognition of shyness is not that easy which even detained researchers to systematically study the construct. Jones, Cheek, and Briggs

(1986, p. 2) stated that “perhaps shyness – like the shy person – is easy to ignore because manifestations are quiet and unobtrusive”. It is not until 1970s, especially after the publication of a popular book by Zimbardo (1977), that researchers became increasingly interested in the origins and nature of shyness. In his book, Zimbardo reported the results of a cross-cultural study, named Stanford Shyness Project, and attracted attention to the high prevalence of shyness, as well as the remarkable negative consequences of this phenomenon. The findings were striking: more than 80 % of those surveyed reported being shy at some point in their lives; and over 40 % considered themselves presently shy. In addition, individuals reported that the experience of shyness was unpleasant and to be avoided if possible. Earlier, Zimbardo, Pilkonis, and Norwood (1974) found that 99 % of the surveyed young adults experienced shyness; and 82 % had been dispositionally shy at some point in their lives. The findings were not restricted to Western populations, but there was also evidence for the cross-cultural validity of shyness, in that the proportion of shy people in different countries ranged from 66 % to 92 % of respondents. For many years following Zimbardo’s pioneering studies, other studies (e.g., Carducci & Clark, 1993; Carducci & Zimbardo, 1995; Henderson & Zimbardo, 2001; Pilkonis, 1977a; 1977b) not only validated the sheer number of individuals suffering from shyness, but also displayed the dramatic increase in the percentage of individuals experiencing it.

The studies of shyness within theoretical frameworks after 1970s have contributed a lot to the understanding of the concept in a more systematic fashion, mainly after the findings pointing out its high prevalence were obtained. Several empirical investigations by researchers and psychologists (e.g., Arkin, Appelman, & Burger, 1980; Asendorpf, 1987; 1989; Buss, 1980; Cheek & Buss, 1981; Crozier, 1979; Jones & Russell, 1982; Leary, 1983a; 1983b) have focused on the etiology, measurement, behavioral characteristics, social impact, and treatment alternatives for shyness. In addition, with those research attempts, great advances were achieved toward understanding how and why experience of shyness has made such a large impact on many individuals’ lives.

Given that shyness has plenty of influences on the lives of human beings, and because of the substantial number of individuals living with the unpleasant consequences of this experience, researchers have attempted to search for the causes of it. The attempts to explain the factors contributing to shyness have mainly focused on identifying whether shyness is a result of parenting behaviors (Bruch & Cheek, 1995; Klonsky, Dutton, & Liebel, 1990), biology and temperament (Kagan, Reznick, & Snidman, 1988; Plomin & Daniels, 1986), conditioning (Lang & Lazovik, 1963; Wolpe, 1958), skill deficits (Curran, 1977), or cognitions (Clark & Arkowitz, 1975; Watson, & Friend, 1969).

A notable recent theoretical trend has been the recognition of cognitive processes in understanding some features of personality (Beck, Emery, & Greenberg, 1985; Ellis, 1962). Consistent with these theoretical views which posit that cognitions, or what people think about, and in which they evaluate themselves play an important role in shyness and related anxious behaviors, received empirical support as well (Cheek & Melchior, 1990; Clark & Arkowitz, 1975; Hartman, 1983; 1984; Lucock & Salkovskis, 1988; Pozo, Carver, Wellens, & Scheier, 1991; Rapee & Heimberg, 1997). Besides, contemporary developments in shyness research have led researchers to conceptualize shyness in a social context (e.g., Cheek & Buss, 1981; Cheek & Melchior, 1990; Crozier, 1982; Crozier & Alden, 2001; Henderson & Zimbardo, 2001; Schlenker & Leary, 1982) rather than regarding it solely a personal and private experience. These contemporary researchers initially adopted a tendency to contemplate the self as a construct that is oriented toward other people. In a similar line with the self, shyness was also proposed to be related to other individuals, which offered the notion that shyness occurs mostly in public. This argument suggested the need to treat shyness as a social phenomenon, and considered it as being not only about inner emotions, but also involving the dimension that is visible to other people as well (Asendorpf, 1990; Miller, 2001).

The emergence and recognition of study of shyness in the last three decades, especially within the aforementioned recent theoretical frameworks, allowed researchers to capture the fundamental role of an interactionist approach that focuses

not only on dispositional factors but also situational factors, as well as individuals' cognitive representations of situations. Thus, researchers studying the construct of shyness tended to adopt the belief that much could be benefited by exploring its psychological, social, and cognitive dimensions and conceptions.

1.2. Nature of Shyness

1.2.1 Conceptualization of Shyness

The word “shyness” lacks a clear-cut and consensual definition, given that it covers a multitude of meanings. Disagreements among researchers and theorists on the definitions of shyness mostly center around, deciding how to conceptualize it in relation to other forms of social anxiety, and which typical reactions constitute the core characteristics that identify a shy person. The controversy about shyness is believed to arise partly from the popularity of the concept, and its being a lay term rather than emerging from a research framework (Crozier, 1990; Crozier & Alden, 2001; Harris, 1984; Jones, Briggs, & Smith, 1986). Harris (1984) asserted that it may not be appropriate to offer definitions for shyness at all, because offering definitions would create conceptual confusion. Crozier (1990) also stated that shyness is a complex phenomenon; therefore careful attention should be paid to the use of terminology.

Shyness has been conceptualized and defined in a number of ways, mostly being regarded as belonging to a particular category. One such category views shyness as a subjective experience which is exhibited as nervousness and apprehension in interpersonal encounters (Buss, 1980; Leary & Schlenker, 1981; Zimbardo, 1977). Buss (1980, p. 124), for instance, defined shyness as “an inhibition of expected social behavior, together with feelings of tension and awkwardness”. This line of definitions can be said to regard shyness as a social phenomenon, and a form of social anxiety.

Some researchers (McCroskey & Beatty, 1986; Pilkonis, 1977b) used definitions of shyness in which it is reflected solely as behavioral reactions such as inhibition, reticence, or social avoidance. According to Pilkonis (1977b), shyness is a tendency to avoid social interactions and to fail to participate appropriately in them. Conceiving shyness this way does not take the affective aspects into consideration. Jones et al. (1986, p. 629), in a broader fashion, conceptualized shyness as an emotional state, and defined it as “the discomfort and inhibition in the presence of others”. In an attempt to include both physiological and behavioral aspects of the construct, Cheek, Carpentieri, Smith, Rierdan, and Koff (1986, p. 105) offered this definition: “the tendency to be tense, worried, and awkward during social interactions with strangers, casual acquaintances and persons in position of authority”. With these definitions, however, it is difficult to distinguish shyness from other behaviors, such as social anxiety.

Leary (1986, p. 30) proposed that shyness is totally a social phenomenon, and that it should be defined in terms of both social anxiety and inhibition. He, thus, defined shyness as “an affective-behavioral syndrome characterized by social anxiety and interpersonal inhibition which results from the prospect or presence of others of interpersonal evaluation”. This definition asserts that shyness involves both affective and behavioral features, and that all instances of shyness involve anxiety. Defined in this way, shyness may be regarded as subjective social anxiety paired with behavioral inhibition. Part of the reason why many researchers found it useful to introduce the concept of social anxiety is because the social difficulties of people are mostly related to social-evaluative anxiety (Schlenker & Leary, 1982; Watson & Friend, 1969).

Besides the efforts to provide definitions, there have also been attempts among researchers to identify types of shyness which help distinguish certain characteristics of shy people. For instance, Buss (1980; 1986b) suggested that there are two types of shyness: fearful and self-conscious. The former is experienced early in life, and involves a genetic component in the form of great emotional reactivity. It can also be termed as “stranger anxiety”, because the infant tends to withdraw from his or her

mother's arms when threatened. Emotional reactivity usually leads the shy child to be more susceptible to negative social conditioning, and to display fear and inhibition around others. Buss (1980) asserted that fearful shyness disappears as children mature and as coping mechanisms develop. It is a more primitive form of shyness that can also be seen in other mammals.

The other type of shyness that Buss identified, namely self-conscious shyness, is an extreme sense of self-awareness about one's reactions. These shy people are extremely aware of and concerned about themselves as social objects, and they are uncomfortable in interpersonal situations where public aspects of the self are evaluated. This social self develops by the time the child is four or five years of age (Buss, Iscoe, & Buss, 1979); and parental evaluation plays a significant role in the development of self-conscious shyness, since being evaluated negatively makes the child associate the interpersonal events with negative outcomes. Most of the studies investigating the relationship of the two types of shyness with social anxiety found that self-conscious shyness rather than fearful shyness is strongly associated with social anxiety (e.g., Cheek & Buss, 1981; Mueller & Thompson, 1984), and that samples of young adults are very likely to include self-conscious shy individuals who are continuously aware of themselves as social objects and fear others' evaluations (Buss, 1986b).

Another conceptualization of shyness has been offered by Pilkonis (1977a) who grouped shy people as either privately or publicly shy. According to this categorization, privately shy people focus on internal events such as subjective discomfort, physiological arousal, and fear of negative evaluation. Publicly shy people, on the other hand, regard their behavioral deficiencies as more critical aspects of their shyness. For example, privately shy people perform more comfortably when presenting their speeches than publicly shy people. Privately shy individuals also tend to be more self-conscious than publicly shy ones; whereas the ones in public group regard shyness as more of a problem and a form of social anxiety.

Shyness has also been discussed and conceptualized in relation to or under different but similar and related constructs. One of these constructs is embarrassment. Although shyness is oftentimes accepted as synonymous with embarrassment, there is considerable evidence that these constructs are distinct and that they involve different components, though share common features as well. While Crozier (1990, p. 3) speculated that “shyness may be embarrassability”, Buss (1986a, p. 41) defined embarrassment as “the extreme endpoint of shyness”. However, Schlenker and Leary (1982) suggested that embarrassment should be differentiated from other social anxieties such as shyness. A study by Miller (1995) supported this assertion and revealed that embarrassment and shyness do differ, because the former stems from the cognitive judgment of other’s evaluation, whereas in the latter, there is a fear of failure in a particular social situation.

Another confounding concept is audience anxiety. Buss (1980) asserted that audience anxiety is the social anxiety that occurs while speaking in front of a passive group of people. Although audience anxiety and shyness measures do correlate, the two constructs are conceptually distinct. In contrast to audience anxiety, shyness involves contingent social interactions in which the individual must continually monitor and respond to input and feedback from other people (Schlenker & Leary, 1982). Audience anxiety, on the other hand, occurs in interactions in which people are performing preplanned material.

The relationship between shyness and sociability has also long been examined, and research revealed that there is a moderate negative association between these two constructs (Buss, 1980; Cheek & Buss, 1981; Zimbardo, 1977). Cheek and Buss (1981, p. 330) defined sociability as “a tendency to affiliate with others and to prefer being with others to remaining alone”. Their factor analytic study yielded two distinct factors; while a replication study (Schmidt & Fox, 1995) also found that these two constructs are distinguishable, suggesting that shyness is different from low sociability.

Introversion is another personality dimension which has created confusion among personality researchers with regard to the nature of shyness. An early work by Eysenck and Eysenck (as cited in Briggs, 1985) showed that introversion in social situations does not necessarily indicate anxiety and fear. This implies that shyness has qualities of introversion; but that these two constructs are separate (Crozier, 1979). Briggs (1988) also investigated the place of shyness as a construct in the introversion and neuroticism dimension, and found that shyness measures correlated moderately and about equally with introversion and neuroticism. Briggs concluded that shyness is not equivalent to the constructs of introversion and neuroticism, which are higher order constructs; and that it occupies a different level in the hierarchy of traits. Thus, in a hierarchical model of personality, shyness can best be represented as a primary factor situated between and contributing to introversion and neuroticism.

Zimbardo (1977), similarly, suggested that shy people can be considered as being somewhere along a continuum. At one end of this continuum are those who are 'largely introverts', preferring privacy and solitude to being with others. People in the middle range of the shyness continuum are 'generally shy', because they lack social skills, and/or they simply lack confidence in themselves. At the far end of the continuum are the 'chronically shy' whose fear of people knows no bounds and who experience extreme sense of worry when expected to perform something in front of people.

There is no doubt that the most controversial issue in terms of conceptualization of shyness is its relationship with social anxiety. The literature provides evidence for the fact that shyness and social anxiety do overlap, and that there are instances where they can be used interchangeably. Anderson and Harvey (1988) even asserted that these two constructs are indistinguishable. Oftentimes shyness is conceptualized as a form or subgroup of social anxiety (Buss, 1980; Leary, 1986), or as part of a continuum of social anxiety (Trower, Gilbert, & Sherling, 1990).

Leary (1991) proposed that shyness involves social anxiety that is aroused by the prospect or presence of interpersonal evaluation, and that all instances of shyness involve anxiety. He believed that there is a relationship between anxiety and inhibition in shyness; however, it is not clear how anxiety and behavior relate to each other. Leary also referred all popular scales of shyness and social anxiety as measures for social anxiousness. These scales correlate either moderately or highly with each other; thus, in certain research contexts any of these scales can be used. For instance, Shyness Scale (Cheek & Buss, 1981) – a popular scale for assessing dispositional shyness - and Social Avoidance and Distress Scale (Watson & Friend, 1969), which is a widely used measure of social anxiety, consist of similar items (e.g., “I feel tense when I am with people I don’t know well” and “I am usually nervous with people unless I know them well”, respectively), supporting the aforementioned overlap.

Social phobia is a construct which is distinguished from shyness and social anxiety in that social phobia is a clinical disorder cited in Diagnostic and Statistical Manual of Mental Disorders, and is defined as “a marked and persistent fear of one or more social situations in which the person is exposed to unfamiliar people or to possible scrutiny by others” (DSM-IV; American Psychiatric Association, 1994, p. 411). Trower et al. (1990) suggested that social anxiety may be viewed as a general term which subsumes shyness and social phobia, and can be viewed along a continuum of severity where social phobia is the most severe experience, and shyness represents experiences that would not warrant a classification order. Although shyness shares similar components with social phobia such as fear of negative evaluation, interference with functioning and maladaptive thinking patterns, and inhibition, social phobia is more of a clinical conceptualization of the problem, following a chronic course, and having a more pervasive functional impairment (Turner, Beidel, & Townsley, 1990).

In sum, the literature suggests that although shyness has similarities with various constructs, it is a separate construct that can be distinguished from others such as introversion, embarrassability, sociability, and social phobia. However, it is evident

from the conceptualization of shyness that it shares many aspects of social anxiety, and thus be considered as type of social anxiousness.

1.2.2 The Response Components of Shyness

Despite the debate about the precise definition of shyness, one issue that is relatively less controversial is related with shy people's typical reactions that are exhibited during social encounters (Cheek & Melchior, 1990). Given that shyness is a social phenomenon, in the presence of specific situational features, shy individual is likely to experience social discomfort and social dysfunction in the form of negative thoughts and anxiety. These components frequently elicit avoidance reactions as a means of eliminating the distress accompanying social interactions. As Jones et al. (1986) pointed out, shy people experience global feelings of tension, self-consciousness, inhibition, and worry about being evaluated by others.

Responses of shy individuals may be best described by using the three-component model of reactions that they possess (Cheek & Melchior, 1990; Cheek & Watson, 1989). The model proposes that shyness involves affective, behavioral, and cognitive response components, though not every shy individual exhibits all three of them. Studies (e.g., Buss, 1980; Cheek & Briggs, 1990; Cheek & Watson, 1989) have confirmed the existence of these domains, as well as their interrelationships.

First, in terms of affective responses, the shy individual typically experiences global feelings of emotional arousal, dread of social interaction, and specific physiological complaints such as upset stomach, pounding heart, sweating, and blushing. The affective manifestations of shyness can range from mild arousal to intense anxiety, both creating a sense of avoidance (Buss, 1980; Cheek & Briggs, 1990; Cheek & Melchior, 1990).

Second, as behavioral concomitants, shyness usually involves behavioral inhibition and withdrawal. The shy individual frequently utilizes avoidance and withdrawal as a coping strategy (Beidel & Turner, 1998; Buss, 1980; Watson & Friend, 1969). For

instance, shy people exhibit awkward body language and gaze aversion, and manifest a variety of nervous behaviors when faced with proactive stimuli (Cheek & Melchior, 1990). In addition, they often lack initiative, rarely express feelings, seldom make requests and refuse anything (van der Molen, 1990).

Lastly, shyness comprises various cognitive aspects such as fear of negative evaluation, self-consciousness, underestimation of level of social skills, having difficulty discerning what kind of impression one is making on others, and a tendency to evaluate oneself negatively (Arkin, Lake, & Baumgardner, 1986; Clark & Arkowitz, 1975; Schlenker & Leary, 1982). In general, the shy individual generates irrational beliefs, and inaccurate attributions of his/her performance, which consequently serve to increase the anxiety responses (Fatis, 1983; Goldfried & Sobocinski, 1975).

The literature provides some support for shy individual's behavioral inhibition which is a result of emotional arousal and cognitive processes. For example, researchers have shown that shy individuals will try hard to escape from stressful interpersonal situations (Curran, Little, & Gilbert, 1978; Pilkonis, 1977b). Although there is a behavioral aspect of shyness, it should be noted that some studies have found distinctions between shyness and avoidance such that only a very small percentage of shy subjects engaged in avoidance behaviors (Cheek & Watson, 1989; Leary, Atherton, Hill, & Hur, 1986).

Nevertheless, shy individuals may not exhibit all three components but instead may exclusively exhibit one or more components. In general, these three components act together to form a typical interpersonal tendency toward anxiety, negative thinking, and behavioral awkwardness (Dill & Anderson, 1999). Shyness is a complex phenomenon, thus, it is recommended not to reduce it to only one of the dimensions (Crozier & Alden, 2001). Individual differences also suggest that shy individuals vary in the emphasis they place on these dimensions of their experience (Cheek & Watson, 1989; Pilkonis, 1977a).

1.2.3 Situational Variables of Shyness

Research indicated that some activities, people, or circumstances play a fundamental role in making individuals shy. In other words, when and how much a person feels shy is likely to be triggered by some contextual variables (Zimbardo, 1977). For instance, Buss (1980) asserted that shyness is mostly elicited by three situational variables: (a) novelty such as unfamiliar physical surrounds or meeting a new person; (b) presence of others such as authority figures or strangers; and/or c) actions of others such as being stared at. Holt, Heimberg, Hope, and Liebowitz (1992) maintained that there are four situational domains of social anxiety: (a) formal speaking and interaction such as giving a speech in front of an audience; (b) informal speaking and interaction such as going to a party; (c) assertive interaction such as speaking to authority figures; and lastly, (d) behavior observation which may include working or eating while being watched.

Zimbardo (1977) surveyed college students and asked them to rate situations for their shyness-evoking potential. Majority of students responded that being focus of attention in a large group made them feel shy. In addition, speaking with authority figures, making introductions, and relating with the opposite sex were among the most distressing events. The study also revealed that shyness states are mostly evoked when an individual is being judged by others for competence and personal ability.

Being in close proximity with others (Carducci & Webber, 1979), and ambiguous situations in which expectations from the person is not precise (Buss, 1980; Schlenker & Leary, 1982; Zimbardo, 1977) have also been cited as factors which evoke shyness in individuals. Pilkonis (1977a) found support for the role of ambiguity in eliciting shyness and reported that shyness is less of a problem in situations where task demands and role requirements were clearer than in ambiguous situations. Watson and Cheek (1986) similarly showed that the most difficult situation that elicited shyness in females was exposure to a stranger in an unstructured situation.

College environment also offers specific situations that elicit the experience of shyness in students. The university is an unfamiliar social setting where students meet strangers and have to act in large groups of people (Russell, Cutrona, & Jones, 1986). In addition, students are confronted with social-evaluative instances where they are evaluated mostly for attractiveness and competence (Schlenker & Leary, 1982). In general, participating in seminars, being in groups of people, meeting new people, attending interviews, and speaking to lectures are among the most provoking situational variables in terms of shyness for the university students (Asendorpf, 2000; Crozier, 2004).

In conclusion, it has been proposed by many researchers (e.g., Buss, 1980; Crozier, 1982; Schlenker & Leary, 1982) that evaluative situations are more likely to evoke shyness than non-evaluative ones in that most of the situational variables that are likely to trigger the experience of shyness either involve evaluative situations, or the ones that lead to promote concerns over performance and evaluation such as novelty and unfamiliarity.

1.2.4 Consequences of Shyness

Shyness or social anxiety have usually been contemplated as if they are maladaptive constructs, and that they are indicators of psychopathology. Although shyness shares similar features with social phobia (Beidel & Turner, 1998), which is considered a disorder, there are adaptive characteristics of shyness in many ways, implying that shyness may not be a pathological state (Leary & Kowalski, 1995). Shyness can lead to positive interpersonal experiences (Reddy, 2001) such that it alerts individuals to threats to their social relationships and inhibit ongoing behavior to prevent further social damage (Leary & Buckley, 2000), thus, helping to maintain people's contacts with others while reducing the likelihood of disapproval (Shepperd & Arkin, 1990). In fact, feelings of shyness are actually regarded within the bounds of normal emotional functioning. Schouten (in van der Molen, 1990) proposed that "shyness is a phenomenon so universally human that we can easily say: someone who has never

been shy or someone who, under certain circumstances, does not run the risk of becoming so is an abnormal person”.

Izard and Hyson (1986) asserted that some kind of wariness regarding strangers and unpredictable situations has indeed an adaptive value. Shyness may be helpful in facilitating group living given that it inhibits individual behavior that is socially unacceptable. Shy people were also found to be modest, self-controlled, serious, and tactful; and to be rarely argumentative, bossy, or overbearing (Gough & Thorne, 1986). Ziller and Rorer (1985) argued that rather than seeing shyness as a ‘people phobia’, it may be seen as a pattern of lesser orientation to people which may provide individuals with the opportunity to establish personal boundaries and privacy.

The adaptive features of shyness are consistent with the notions that situational shyness is a normal aspect of human development and everyday adult life (Cheek & Melchior, 1990), and is a reasonable response to certain situations (Leary & Kowalski, 1995). However, for some people, shyness is experienced in many encounters, and it hinders everyday functioning of these individuals by resulting in major disruptions in many areas of their lives (Leitenberg, 1990). A considerable amount of people who are shy regard this experience as a personal problem, and see it as an undesirable personality trait, despite the aforementioned positive features (Harris, 1984). Lazarus (1982b), for instance, reported that among the individuals who were found to be shy, 47 % stated they would like to become less shy. Similarly, Pilkonis (1977b) showed that from 41% of shy individuals questioned, 24 % stated that they would be willing to seek some help to become less anxious in social situations.

Shy individuals are characteristically uncomfortable in social and evaluative situations. This kind of a difficulty occurs especially in the form of disengagement, and increases vulnerability to problems such as behavioral inhibition (Cheek & Buss, 1981; Pilkonis, 1977b); loneliness (Cheek & Busch, 1981; Ishiyama, 1984; Moore & Schultz, 1983); and depression (Alfano, Joiner, Perry, & Metalsky, 1994; Dill & Anderson, 1999; Izard & Hyson, 1986). Although research on the negative

consequences of shyness has focused mostly on the relationship between shyness and difficulties in social interaction, shyness is related not only to lack of fulfillment in social areas, but also in various other areas as well, mostly in personal, emotional, and occupational ones (Bruch, Rivet, Heimberg, & Levin, 1997; Cheek & Melchior, 1990; Phillips & Bruch, 1988).

The tendency to avoid situations that create anxiety results in decreased social interactions and limits interpersonal relationships. The avoidance behavior, acting as a negative reinforcer, certainly provides immediate reduction of anxiety (Leary & Kowalski, 1995). However, nearly half of the surveyed individuals reported that they experienced observable behavioral dysfunction when approaching, or engaging in social interaction (Cheek & Melchior, 1990; Ishiyama, 1984). These behavioral consequences may be manifested in the form of decreased eye-contact, downward gaze, comparatively less speech, longer pauses, less self-disclosure, a reluctance to become involved in conversation, and a deficit in social skills (Borkovec, Stone, O'Brien, & Kaloupek, 1974; Bruch, Gorsky, Collins, & Berger, 1989; Buss, 1986a; Cheek & Buss, 1981; DePaulo, Epstein, & LeMay, 1990; Glasgow & Arkowitz, 1975).

Although avoidance and withdrawal behaviors have the potential to reduce anxiety and to provide temporary relief on the part of the individual, they actually restrict available opportunities to develop social contacts. For instance, shy individuals have been found to lack many interpersonal rewards or functions that relationships afford (Jones & Carpenter, 1986), and to have smaller and less satisfying social and intimate relationships (Prisbell, 1997). Pilkonis (1977b) found that shy people, as compared to less shy, had difficulty with the opposite sex interaction, were less willing to initiate and structure conversations, talked less frequently, and allowed a greater number of silences to develop during heterosocial interactions. Shy people have also been reported to be less likely to take advantage of social situations, and to date less than non-shys (Henderson, Zimbardo, & Carducci, 1999; Jones et al., 1986). Additionally, shy people have relatively smaller non-kin networks, and within

these networks they typically have fewer interactions of an intimate nature with each individual (Montgomery, Haemmerlie, & Edwards, 1991).

The studies in relation to the effects of shyness in career related issues indicated that shy individuals prefer non-interpersonal oriented career fields, limit seeking information about career choice, are more undecided in career choices, and are less motivated to engage in assertive interview behaviors (Phillips & Bruch, 1988; Reznick, Fauble, & Osipow, 1970). In a longitudinal study, Caspi, Bem, and Elder (1989) found that male subjects who were categorized as shy children 30 years ago, engaged in career at a much later time in their lives than the non-shys.

Shyness is also related to several aspects of wellness impairment. Page (1990a), for instance, reported that shy adolescents were less physically active, less likely to exercise, more hopeless, and more likely to maintain tendencies toward an eating disorder. They were also more likely to perceive their bodies as too fat and unattractive, and to be dissatisfied with their weight. Moreover, shyness was found to be an important risk factor in drug abuse among adolescent males (Page, 1990b). Schmidt and Fox (1995) additionally found that shy people reported greater prevalence of psychosomatic problems such as allergies than their less shy counterparts.

The consequences of shyness may be troubling for university students in particular. Shyness interferes with the main social task of students such that shy university students were found to have difficulties in initiating peer relationships of all kinds, including close, supportive, and loving ones, which consequently lead to other psychosocial problems such as loneliness (Asendorpf, 2000; Lesure-Lester, 2001), and that shy students usually talk less than non-shy students during most interactions with classmates (Zimbardo, 1989). For the college student, shyness also interferes with successful identity development, in that personalities of shy college students may portray identity diffusion and poor identity achievement (Hamer & Bruch, 1994).

In spite of all these negative consequences, Leary and Buckley (2000) pointed out that nothing in the literature suggested that shy people are disliked, but that the development of relationships is negatively influenced by the behaviors of shy people, and as compared to less shy individuals, their behaviors limit the desired social acceptance.

1.3 Gender Differences in Shyness

Unlike other anxieties, which have been consistently reported to be more common among women (Kagan, 2001), the data with regard to gender differences in shyness and social anxiety show inconsistencies. In terms of shyness, gender ratios have generally been reported as equal in normative samples of shy college and high school students (Caprara, Steca, Cervone, & Artisticco, 2003; Cheek & Busch, 1981; Hopko, Stowell, Jones, Armento, & Cheek, 2005; Jackson, Towson, & Narduzzi, 1997; Miller, 1995; Page 1990a; Zimbardo, 1986). However, Henderson and Zimbardo (2001) reported that among people seeking treatment for severe shyness in their Shyness Clinic, 60 % were males and 40 % were females. Hermann and Betz (2004) also found that males experienced more shyness than females. Inconsistent findings are also evidenced for non-Western samples in that while some studies found that men are more socially anxious than women (Takahashi, 1989), others showed that males and females experience similar levels of shyness (Matsushima & Shiomi, 2001; Zimbardo, 1989).

Although there is not many considerable gender differences in reported shyness, men have been reported to have typically learned tactics for concealing their shyness because it is considered as a feminine trait in most countries (Henderson et al., 1999). It has been noted that not the prevalence but the consequences or costs of the experience of shyness differs for men and women. Burgess, Rubin, Cheah, and Nelson (2001) indicated that long-term outcomes of shyness may differ for boys and girls in that boys' shyness may be accompanied by greater psychological costs, such as a postponing marriage and career, than those of girls.

The data provided by the studies in relation to gender differences in shyness is inconclusive given the inconsistent findings (Leary & Kowalski, 1995). However, the inconsistency is generally attributed to the different socialization processes for men and women (Burgess et al., 2001; Deaux & Major, 1987). In other words, whether men and women experience more social anxiety depend on the responses and skills required in a particular social setting.

1.4 Theoretical Models of Shyness

Research in the area of shyness and social anxiety has proposed a number of different models to account for the etiology of shyness, that is, the development of and mechanisms that contribute to this phenomenon. For instance, some researchers have treated shyness as a dimension of personality, some as a learned behavior, while others as a deficit in social skills, or as a result of cognitions. The most popular theoretical explanations of shyness, namely Personality Trait Approach, Social Skills Deficit Approach, Behavioral Approaches, and Cognitive Approaches, are summarized in this section.

1.4.1 Personality Trait Approach

Personality traits, in contrast to emotional states, are seen as relatively enduring characteristics that predispose a person to respond in a consistent manner to environmental stimuli (Spielberger, 1972). Some theorists (Briggs, 1988; Buss, 1980; Cheek & Briggs, 1990; Crozier, 1979) have postulated that shyness may be regarded as a major trait, implying a propensity to respond with heightened anxiety, anxious preoccupation, reticence, and feelings of discomfort and awkwardness in the presence of others. In fact, shyness has been considered as one of the most heritable dimensions of temperament throughout the lifespan (Plomin & Daniels, 1986). According to the model, for some individuals, shyness may be an inherited or biologically determined predisposition that becomes manifest by early childhood. As a support for this view, studies (Buss & Plomin, 1975; Plomin & Rowe, 1979)

showed that social inhibition has a genetic component, and a predisposition is transmitted for anxiousness.

Several theorists (e.g., Briggs, 1988; Buss, 1980) agreed with the view that heredity plays an important role in the development of shyness traits, and that social fears, which are constant over time, frequently appear in a child's first year of life. As a support of the trait perspective of shyness, researchers (Asendorpf, 1989; Buss, 1986a) contended that inherited and learned origins of childhood shyness create lasting problems in social interaction. Dispositionally shy people are known to experience physical tension, worry, and behavioral inhibition more frequently, more intensely, and in a wider range of situations than do people who do not label themselves as being shy (Cheek, Melchior, & Carpentieri, 1986). These individuals also perceive various situations as being less intimate and more evaluative than those who are not shy (Smith & Sarason, 1975).

According to the theorists who regard shyness as a personality trait, part of the support for this approach comes from the belief that this perspective helps to explain why combinations of various treatment strategies for overcoming shyness are often more effective than any one approach that focuses only on a single level (e.g., Alden & Cappe, 1986). However, Cheek and Briggs (1990) concluded that no single-level approach to shyness would succeed itself, but more integrated models would be more useful in understanding shyness.

1.4.2 Social Skills Deficit Approach

Social skills deficit approach suggests that shyness is experienced in social situations due to a lack of or having a repertoire of inadequate social skills (Curran, 1977; Stravyski & Greenberg, 1989). Individuals who are socially deficient tend to respond inappropriately to others, communicate ineffectively, and display undesirable mannerisms (Leary, 1983a). The model maintains that when the person consistently responds in a socially undesirable way, then he/she is likely to experience anxiety in many encounters (Curran, 1977).

Clark and Arkowitz (1975) found that individuals low in social anxiety were more positive in their evaluation of their own social performance. In another study (Arkowitz, Lichtenstein, McGovern, & Hines, 1975) it was revealed that individuals who had high social anxiety were generally less socially skilled than people who were less socially anxious. As support of this model, a number of studies (Arkowitz et al., 1975; Borkovec et al., 1974) demonstrated that compared to low anxious people, socially anxious individuals speak less in conversations, communicate less with their partners, and use their body language more frequently.

There are skills training models used by therapists that have been found to be effective in treating shyness (e.g., Bellack & Hersen, 1979; Curran, 1977). These practitioners either use a response acquisition approach in which they help clients gain a repertoire of socially skilled responses by teaching them new social responses; or use a response practice model by which the client who has adequate social skills learns how to respond in a skillful manner (Christiansen & Arkowitz, 1974; Leary, 1983a). The outcomes of the studies examining the effect of these training programs provide some support for the explanations of the social skills deficit model of shyness.

Despite the abovementioned evidences for the notion that people experience social anxiety due to lack of social skills, it is not clear whether the differences between socially anxious and non-anxious individuals are exactly a result of social skill differences or not. In other words, these studies have failed to isolate specific behavioral differences between socially anxious and non-anxious people (Schlenker & Leary, 1982). Leary (1983a) asserted that behavioral inhibition, withdrawal from social situations, or low level of participation in social situations, are not actually indicators of having poor social skills. It seems that socially anxious and shy people are generally regarded by other individuals as less socially skilled than less anxious people. However, the precise nature of these social skills has not been determined. It may not be just an objective lack of social skills that determines social anxiety experienced, but people's beliefs about their own social behaviors (Leary, 1983a). This view has been supported by a study (DePaulo et al., 1990) where the withdrawal

of socially anxious people from situations was explained more by their fear of being negatively evaluated than their deficits in social skills, because when no evaluation expectation was involved, the behaviors of anxious people were the same as the non-anxious ones.

1.4.3 Behavioral Approaches

A variety of behaviorally oriented theoretical perspectives on social anxiety have been provided since 1960s (Barlow, 1988; Beidel & Turner, 1998; Marks, 1969; Rachman, 1977). Although recent models, which use early conditioning theories as bases, have expanded into new dimensions such as integrating cognitive theories, the early behaviorists studying social anxiety focused only on conditioning (e.g., Rachman, 1976). It was believed by these theorists (Erwin, 1978; Marks, 1969; Rachman, 1977) that people learn to behave in ways that are positively rewarded, and that if the action brings negative outcomes, the individual gives up behaving in that way. Similarly, shyness/social anxiety is the result of repeated exposures to negative or unpleasant experiences in social situations such as being humiliated and embarrassed in front of other people. These aversive experiences cause a person to experience anxiety in similar social settings. Shyness is, thus, seen as a learned phobic reaction to social events (Marks, 1969; Wolpe, 1958).

Zimbardo (1989) summarized the possible reasons of shyness in terms of conditioning as; (a) a prior history of negative experiences with people in certain situations; (b) not learning the appropriate social skills; (c) expectation of performing poorly and thus becoming constantly anxious about one's performance; and (d) learning to label oneself as shy or socially anxious.

A comprehensive behavioral model of social anxiety has been offered by Beidel and Turner (1998). They identified psychological factors as one broad class of contributors to social anxiety. More specifically, direct conditioning, observational learning, and information transfer components have been determined in which

information transfer accounts for instances of social anxiety that appear to be verbally transmitted, and it is seen as a part of language-based learning.

Some evidence for the viability of the behavioral models comes from the treatment of anxiety and shyness where it is assumed that any response that was classically conditioned is potentially unconditionable through the same general process operating in reverse. The deconditioning may be achieved through pairing the aversive stimuli with factors that elicit more positive responses (Wolpe, 1958; 1973). The treatment strategies for alleviating shyness include variations of systematic desensitization to eliminate the typical cycle of social anxiety and avoidance, and to decrease the level of arousal. A study by Paul (1966) for instance, revealed that subjects receiving systematic desensitization showed the greatest decrease in public speaking anxiety compared to subjects receiving insight-oriented therapy or taking placebo pills. There are also other studies (Bandura, 1969; Curran & Gilbert, 1975) showing that behaviorally oriented treatment methods are effective in reducing the anxiety experienced in social situations.

Although behavioral approaches of social anxiety have been found to be useful in understanding and treating shyness, there has not been much theoretical guidance provided about the situations in which these treatments do work and what to do in cases in which they do not work (McNeil, Lejuez, & Sorrell, 2001). In addition, simply the conditioning models themselves are incomplete in explaining why individuals might have a series of aversive experiences in social interactions (Halford & Foddy, 1982). For example, the efficiency of treatment models such as systematic desensitization in reducing social anxiety does not confirm that the person's anxiety was initially conditioned (Marzillier, Lambert, & Kellett, 1976). Schwartz and Gottman (1976) found that many unassertive subjects behaved assertively on occasions, but they had little or no benefit. The models also fail to explain why some individuals develop social anxiety and others do not in similar situations with similar experiences.

Since 1970s it has been documented that behavioral explanations solely are not sufficient enough to account for the case of social anxiety and related constructs such as shyness. In general, purely behavioral theories are often dismissed because they traditionally have focused on simple instances of conditioning and have ignored the role of cognitions (Anderson, Hawkins, & Scotti, 1997). Certain cognitive processes which mediate the conditioned responses are highly influential in explaining how automatic responses are produced (Bandura, 1969; Kanter & Goldfried, 1979; Rapee & Heimberg, 1997).

1.4.4 Cognitive Approaches

Given that research on the nature and treatment of shyness in relation to the above-mentioned models have been incomplete and showed inconsistencies in terms of explaining shyness, researchers have shifted toward a closer look at the cognitive tenets of shy people. A variety of cognitive models have been utilized in order to account for the development and maintenance of shyness, which emphasize the role of cognitions and maladaptive responses in eliciting this experience (e.g., Beidel, Turner, & Dancu, 1985; Clark & Arkowitz, 1975; Clark & Wells, 1995; Rapee & Heimberg, 1997; Schlenker & Leary, 1982; Watson & Friend, 1969). Basic models included in this approach are Beck's cognitive model (Beck et.al., 1985), self-efficacy theory (Bandura, 1986), self-evaluation model (Clark & Arkowitz, 1975), cognitive-behavioral model (Rapee & Heimberg, 1997) and self-presentational model (Schlenker & Leary, 1982).

Beck (1985) proposed that the problem for socially anxious people is related to their strong approval/disapproval schemas. In other words, they believe that they must obtain approval from others but at the same time strongly believe that they will receive disapproval or criticism. Socially anxious people constantly overestimate the probability of negative consequences, and as a result they worry about the outcomes of their actions. Similarly, Bandura (1986) asserted that in social situations people engage in appraisals of the situation to determine its potential outcome and response requirements; and also an appraisal of the self with regard to degrees of competency

in handling the social encounter. For the socially anxious person, the potential outcome that he or she is concerned about is the evaluation of self by other individuals.

According to self-evaluation model, it is the perception of personal inadequacies and the conviction that others will be able to perform positively, along with an underestimation of one's own performance that determines social anxiety (Clark & Arkowitz, 1975). It is assumed that socially anxious individuals may have an adequate repertoire of social skills, and their performance may even reflect these skills; however, their own evaluation of their performance is more unforgiving than their non-socially anxious counterparts (Clark & Wells, 1995).

The cognitive-behavioral model proposes that a mental representation of appearance and behavior is formed and compared to the perceived threat in the social environment (Rapee & Heimberg, 1997). Socially anxious people think that others are likely to evaluate them negatively while they attach importance to being evaluated positively. The model focuses primarily upon ways in which the individual processes information and interacts with the world so that social anxiety is maintained (Turk, Lerner, Heimberg, & Rapee, 2001).

Lastly, self-presentational model assumes that shyness arises when a person is motivated to make a particular impression on others in an interpersonal situation but at the same time doubts his/her ability to do so. Socially anxious people are highly concerned with the impressions they are making on others (Schlenker & Leary, 1982). Since the present study is based on this theoretical model, it will be examined in more detail fashion in the next section where theoretical framework of the study is explained.

One of the strong evidences in support of these models is that interventions designed to change specific cognitions that lead to anxiety are often successful in reducing social anxiety and shyness. Various kinds of cognitive therapies aimed at changing negative self-evaluations, irrational beliefs, maladaptive perfectionist attitudes, self-

efficacy, or fear of negative evaluations have been found to be effective in decreasing anxiety and avoidance (Clark & Arkowitz, 1975; DiGiuseppe, McGowan, Simon, & Gardner, 1990; Heimberg, Becker, Goldfinger, & Vermilyea, 1985; Kanter & Goldfried, 1979).

Cognitions mediate many maladaptive affective responses and shy individuals exhibit a distinctive pattern of self-relevant social cognition which perpetuates their anxiety and behavioral inhibition (Beck, 1976; Ellis, 1962; Hartman, 1984). These cognitive processes generally include negative or maladaptive statements, unrealistic expectations, preoccupation with performance, overconcern with others' awareness of distress, irrational beliefs, negative self-evaluations, faulty cognitive appraisals, and fear of negative evaluation.

There is considerable evidence that cognitions, or what people think about, and the way in which people evaluate themselves play an important role in social anxiety and shyness which provide support for these models. For example, compared to less shy people, individuals who are shy tend to evaluate themselves unfavorably on important social situations (Clark & Arkowitz, 1975; Clark & Wells, 1995; Kocovski & Endler, 2000). Measures of self-evaluation such as self-esteem correlate negatively with measures of shyness and social anxiety (Cheek & Buss, 1981; Leary & Kowalski, 1993; Miller, 1995). In addition, perfectionist expectations (Saboonchi & Lundh, 1997), and the belief that others are more evaluative and critical which leads to lowered expectations of making desired impressions on other interactants (Leary, Kowalski, & Campbell, 1988) constitute important components of social anxiety. Many studies (e.g., Goldfried & Sobocinski, 1975; Halford & Foddy, 1982) have showed that irrational beliefs including demand of approval and an overemphasis on gaining others' acceptance are also positively correlated with social anxiety and shyness measures.

According to Nichols (as cited in Beck et al, 1985), there are several cognitively oriented components of social anxiety. These components generally include perception and expectation of disapproval or critical regard by others; having rigid

ideas of appropriate social behavior; negative fantasy or imagination that produces anticipatory anxiety; and exaggerated interpretation of the sensory feedback related to tension or embarrassment. Lucock and Salkovskis (1988) similarly hypothesized that the cognitions of socially anxious people reflect two general distortions: (a) unrealistic expectations about the ability to cope with social situations; and (b) the likelihood of threatening social events occurring regardless of the subject's performance. As a support of these propositions, Edelman (1985) showed that people who were socially anxious believed that they were unlikely to be able to deal with embarrassing situations adequately. Rather, in difficult social situations, they were likely to perceive the probability of negative evaluation from other individuals as high.

Cheek and Melchior (1990) summarized various cognitive and meta-cognitive tendencies of shy individuals before, during, and after shyness-eliciting situations. Examples of these processes include expectation that their behavior will be inadequate and that they will be evaluated negatively; holding irrational beliefs about how good their social performance should be and how much approval they should get from others; becoming anxiously preoccupied; judging themselves more negatively than others judge them; blaming themselves for social failures and attribute success to external factors; and remembering negative self-relevant information and experiences more than positive ones.

The literature, thus, shows that most of the contemporary theories concerned with social anxiety emphasize the role of cognitions as mediators of anxiety and/or inhibition. In addition, there is no doubt that cognitive approaches have contributed significantly to the understanding and treatment of shyness (Clark & Arkowitz, 1975; Heimberg, & Becker, 2002). Cheek and Melchior (1990) concluded, after conducting several studies and reviewing the literature on self-concept processes of shy people, that the cognitive component is the predominant aspect of shyness syndrome.

1.5 Theoretical Framework of the Study: Self-Presentational Approach to Shyness

Self-presentation, also known as impression management, is the attempt to control the self-relevant images one projects to others (Schlenker, 1980). More specifically, it refers to the manner in which individuals plan, adopt, and carry out strategies for managing the impressions they make on others (Arkin et al., 1980). The construct of “self-presentation” was systematically studied by sociologist Erving Goffman (1959), and attracted the attention of other researchers especially from social psychology (e.g., Baumeister, 1982; Schlenker, 1980; Tedeschi, 1981). Goffman proposed that in order to understand the social behaviors of individuals one must focus on public behaviors, and that people’s responses are based on these surface appearances. Because people give very much importance to others’ judgments and reactions, they often present images of themselves that are aimed at affecting these judgments. Goffman’s work is written from a symbolic interactionist perspective, emphasizing a qualitative analysis of the interactive nature of the communication process.

When people deal with others, they respond in part on the basis of the impressions they have formed (Leary, 1983a). If people have formed a positive impression of an individual, they are likely to behave positively toward that person. However, if their impressions are negative, they are likely to react in ways that are undesirable. People, thus, generally believe that it is better if they control how they are perceived by others; i.e., their self-presentations (Tedeschi, 1981). The basic premise of the self-presentational perspective is that people are highly concerned about gaining the approval of others. In order to achieve this, they spend considerable effort assessing what possible factors will influence the impression they make on others and then behave in a way to create a favorable impression (Schlenker, 1980).

Self-presentational behaviors are a function of both the person and the situation, in that, the kinds of impressions people try to convey are guided by the individual’s motives and personality, as well as by the immediate social setting that the person is

in (Leary, 1995). Although some people seem to regard concerns with others' impressions as a sign of insecurity, self-presentation is actually an essential and unavoidable aspect of everyday interaction. According to Goffman (1959), it is actually functional for the individual, and even essential for smooth interaction; however, an excessive concern with others' impressions can lead to maladaptive behaviors.

Self-presentational perspectives have been offered for explanations of many behaviors since 1970s, including personality, aggression, altruism, helping, conformity, attribution, leadership, and exercise behavior (Leary, 1995). One of the fields that this perspective has been applied is social anxiety and shyness (Arkin et al., 1980; Schlenker & Leary, 1982).

Self-presentational theory of social anxiety, which was also applied for conception of shyness, is an integrative framework that enables researchers to re-conceptualize many theories into this model. In addition to accounting for the known causes and correlates of shyness, this model also subsumes other popular models of shyness such as those involving behavioral (e.g., poor social skills) and cognitive (e.g., negative self-evaluations) components as well as different psychological (e.g., personality traits) and social influences (e.g., parenting behaviors).

According to this social-cognitive theory, social anxiety “results from the prospect or presence of personal evaluation in real or imagined social settings” (Leary & Schlenker, 1982, p. 642). Social anxiety and subsequent avoidance behaviors are the result of two cognitive components: the desire to make a particular impression in an interpersonal situation, and the belief that one is not capable of making this desired impression. In other words, the model offered maintains that social anxiety occurs when people are motivated to make a particular impression on others, but hold a low subjective probability that they will do so. It has been assumed that all instances of social anxiety arise from people's concerns with how they are perceived and evaluated by others, suggesting a link between self-presentational concerns and social anxiety.

Self-presentational model of social anxiety further proposes that people who are dispositionally socially anxious are consistently more concerned with how others regard them than less anxious persons, thus, making use of the trait approach of social anxiety and shyness. Compared to their less anxious peers, socially anxious people are more concerned with making good impressions on others and are likely to think that others have formed less favorable impressions of them (Leary, 1983a; Maddux, Norton, & Leary, 1988). The higher the individual's desire to convey certain impressions, the more likely he or she is to become socially anxious. It is actually the gap between the perceived expectation of the audience and the person's ability to create the desired impression along with the social consequences of the expected negative evaluation that will probably determine the amount of social anxiety experienced (Leary & Kowalski, 1995).

The individual engages in an assessment process with regard to the likely self-presentational outcome whenever the self-presentational goal is important or the individual's social performance is impeded (Schlenker & Leary, 1982). If the individual expects that he/she can not achieve the desired impression, then the person withdraws from the situation, either by physically or cognitively (e.g., mentally dissociating from the task). In an attempt to make the constructs of social anxiety and shyness more specific, Schlenker and Leary (1982) made a distinction between contingent and non-contingent interactions. Contingent interactions are the ones in which the responses of the actor depend upon the prior responses of other people; whereas non-contingent interactions require that the individual's interactions are guided primarily by internal plans and only minimally by the responses of others. The anxiety precipitated by contingent interactions is referred to interaction anxiety which typically involves shyness, dating anxiety, and heterosexual social anxiety. On the other hand, if the anxiety is experienced in response to non-contingent settings, then it is called audience anxiety which may involve stage-fright or speech anxiety. In the case of shyness, thus, the person must continually be responsive to the actions of others.

The two cognitions, namely the desire to make certain impressions and the doubt about doing so, are proposed to be the mediators of shyness. Any situational or dispositional characteristic that affects one or both of these cognitions contribute to individual's level of anxiety and the extent to which he/she manifests avoidance behaviors (Leary, 1983a). It can be said that many factors have the potential to influence an individual's desire to create a particular impression on others, and his/her doubt about the ability to do so. For instance, skill deficits affect the degree of social anxiety by causing a person to doubt his ability to create a desired impression (Leary & Kowalski, 1995). Some cognitive factors such as appraisal of threat of danger, high need for approval, negative self-evaluations, perfectionistic attitudes, irrational beliefs, and attributional biases may also contribute to either a high level of self-presentational motivation or doubts regarding one's ability to create a desired impression.

Various studies, both laboratory ones and using self-report measures, have supported different aspects of self-presentational model of shyness. For instance, shy individuals were found to have less self-efficacy expectations (Maddux et al., 1988); fear others' disapproval (Jackson et al., 1997; Montgomery & Haemmerlie, 1982); think that they are making less favorable impressions on other people (Leary et al., 1988; Leary & Kowalski, 1993); make less positive self-statements (Greenberg, Pyszczynski, & Stine, 1985); have low expectations for success (DePaulo et al., 1990); have negative expectations regarding social outcomes (Greenberg et al., 1985); hold high standards for themselves and especially for others (Saboonchi & Lundh, 1997), and view themselves as less socially and emotionally competent (Baumgardner, Kaufman, & Levy, 1989).

In one of the variations of this model, Arkin et al. (1986) focused on shyness as an antecedent to self-presentation, in contrast to viewing presentation of self as an antecedent of shyness. They attempted to determine a "protective" self-presentation which implies that the individual simply tries to avoid disapproval rather than trying to gain approval that is known as "acquisitive" self-presentation. People engage in protective self-presentation in an attempt to create an impression that is relatively

safe (Shepperd & Arkin, 1990), and to minimize feelings of shyness (Arkin et al., 1986). The typical avoidance behavior of the socially anxious person who uses this kind of self-presentational style in social encounters has been demonstrated by a number of studies (Curran, 1977; Jones & Russell, 1982; McGovern, 1976). Arkin et al. (1986) pointed out that only when shy individuals feel safe in conversing will they enter an interaction as an active participant. This view provides support for the social and interpersonal nature of shyness.

In another variation of the model, Leary and Atherton (1986) attempted to integrate self-presentation theory with self-efficacy theory (Bandura, 1973) by which two sets of self-presentation expectancies have been identified that are regarded to play important roles in eliciting shyness. One is “self-presentational efficacy expectancy” which concerns the presumed likelihood of executing behavior intended to convey a particular expectation; the other is “self-presentational outcome expectancy” which corresponds to the estimated probability that the behavior executed will have the desired self-presentational effect. People with greater dispositional social anxiety report lower situational self-efficacy expectancies and outcome expectancies for self-presentation (Maddux et al, 1988). People may doubt that they will make the impressions they desire because they can not execute those impressions (i.e., low efficacy expectations), or because they think other people will not be impressed by their social performances (i.e., low outcome expectations). These arguments are in line with the propositions of self-presentational theory concerning the cognitive components.

1.5.1 Antecedents of Shyness Associated with Self-Presentation

It has been argued that self-presentational approach to shyness, as compared to other theoretical models, is a relatively much comprehensive theory aimed at accounting for almost every instance in which a person becomes socially anxious or shy (Leary & Schlenker, 1981; Schlenker & Leary, 1982). Self-presentational theory is a social-cognitive theory which posits that shyness is a reaction to real or imagined self-presentational difficulties. The degree to which people are motivated to manage

impressions, as well as the degree to which their beliefs that they can or can not make the impressions are affected, differ across situations and depending on some social, cognitive, and psychological factors (Leary & Kowalski, 1995). Put differently, the perspective assumes that shyness is a secondary reaction which arises from situations or characteristics that heighten people's self-presentational concerns. This section introduces some of the important antecedents of shyness as conceptualized in self-presentational theory. These antecedents are borrowed from different perspectives and were integrated by self-presentation theory, and they constitute the variables of the proposed model of shyness for the present study, which are consequently presented.

1.5.1.1 Fear of Negative Evaluation

Watson and Friend (1969, p. 449) defined fear of negative evaluation as “the apprehension about others’ evaluations, avoidance of evaluative situations, and the expectation that others would evaluate oneself negatively”. People high in fear of negative evaluation experience fear of receiving negative evaluation from others, and are extremely concerned about how others perceive them, whether or not this perception will reflect on them personally (Gregorich, Kemple, & Leary, 1986). Additionally, those individuals assume that in many situations others performed better than they did; they expect to be humiliated or devalued; they are more likely to behave in ways believed to decrease their chance of being negatively evaluated; and they tend to evaluate feedback as less positive (Baldwin & Fergusson, 2001; Friend & Gilbert, 1973; Gregorich et al., 1986; Smith & Sarason, 1975). The prospect of interpersonal evaluation is a frightening event which distinguishes shyness and social anxiety from other anxiety conditions, and was very well reflected in an argument by Ellis and Harper (1975, p. 133): “98 percent of what we call anxiety in modern life is little more than over-concern for what someone thinks about you”.

As Leary (1983a) pointed out, since people highly apprehensive about being evaluated negatively are more concerned with making good impressions on others, a strong relationship between shyness and fear of negative evaluation would be

expected. In fact, fear of negative evaluation or in other words, fear of disapproval and criticism from others, has been cited as one of the most important cognitive components of social anxiety and shyness by many researchers (Beck et al., 1985; Hartman, 1983; Leary & Kowalski, 1995; Nichols, 1974; Schlenker & Leary, 1982; Watson & Friend, 1969). Although there are various types of anxieties that people are likely to experience in different situations, the distinguishing characteristic of social anxiety is the concern about the prospect or presence of interpersonal evaluation within a situation in which a person may find him/herself (Schlenker & Leary, 1982).

A great deal of research has supported the view that fear of negative evaluation is associated with shyness and social anxiety. Studies using self-report measures pointed out the moderate to high positive association between shyness and fear of negative evaluation, and that shyness is predicted from fear of negative evaluation or from heightened expectations of rejection by others (e.g., Cowden, 2005; Jackson, Flaherty, & Kosuth, 2000; Karakashian, Walter, Christopher, & Lucas, 2006; Miller, 1995).

There are also several laboratory studies aimed at identifying this distinctive cognitive component of individuals. For instance, a study conducted by Winton, Clark, and Edelman (1995) revealed that socially anxious individuals have a greater propensity toward identifying others' emotional expressions as negative in social threat conditions. In another study (Alden, Teschuk, & Tee, 1992), when confronted with shyness-eliciting situations, shy individuals were found to expect that their behavior will be negatively evaluated and criticized.

Earlier, Smith and Sarason (1975) gave subjects hypothetical feedback on a set of rating scales and then asked them to rate the favorableness of the feedback. As compared to non-socially anxious individuals, those who were socially anxious expected to receive more negative evaluations and criticism. Similarly, Smith, Ingram, and Brehm (1983) assessed the cognitive processes of individuals through performance measures under stress or no-stress conditions. They found that when

socially-anxious individuals are in socially stressful situations, they exhibit an increase in concern about evaluations from others. Asendorpf (1987) also showed that shy people have more fear of social evaluation and more negatively biased thoughts about impressions they made on a partner, and engaged in more negatively biased reactions to feedback provided by a partner.

Leary (as cited in Leary, 1983a) conducted an experiment in which he had subjects with high and low fear of negative evaluation, interact with another naive subject. A condition in which either the way to act in order to make a good impression upon the other subject was made explicit or was left ambiguous. The results showed that whereas subjects low in fear of being negatively evaluated reported being equally relaxed whether they knew what kind of image to project or not, subjects who were high in fear of negative evaluation felt significantly less relaxed when they did not know how to act in order to make a good impression on the other subject than when they knew how to respond. Leary concluded that people who are high in fear of negative evaluation become more anxious when they do not know how to make good impression on others.

Halford and Foddy (1982) assessed subjects' performances in a series of simulated social interactions. Results showed that socially-anxious individuals had a high frequency of self-statements concerned with rejection or disapproval by others in social interaction than individuals low in social anxiety. A research by Lucock and Salkovskis (1988) also yielded results consistent with the notion that socially anxious individuals rate the likelihood of being criticized more highly than non-socially anxious subjects. A recent study carried out by Jackson, Fritch, Nagasaka, and Gunderson (2002) similarly found that individuals who experience high levels of shyness approached interactions with heightened expectations of rejection and with preoccupation with disapproval from others.

Additional support for the important role of fear of negative evaluation in shyness comes from studies with regard to need for approval (Leary, 1983a). In some instances, individuals are motivated to project social images that others will regard as

socially desirable, whereas in other instances, they may want to be seen undesirable to achieve their interaction goals. Approval-motivated behavior is defined as a style of self-presentation that inflates one's public image, and people are usually more motivated to obtain others' approval and acceptance (Crowne & Marlowe, 1964). Schlenker (1980) further asserted that when people are high in need for approval, they will manage impressions to a greater degree. Studies have demonstrated that both social anxiety and approval-motivated subjects are overly concerned with social evaluation, fear disapproval, and conform to social norms to avoid rejection (Crowne & Marlowe, 1964; Deffenbacher, Zwemer, Whisman, Hill, & Sloan, 1986; Nichols, 1974). It may be concluded, then, that shyness is associated with factors that increase individual's motivation to seek approval.

In sum, fear of negative evaluation is one of the most important variables, which is directly related to self-presentational concerns of shy people, because when people have fears of receiving negative evaluation from others, they will be more motivated to make a particular impression on the audiences (Schlenker & Leary, 1982). Moreover, as the theory and related literature suggested, fear of negative evaluation has also a mediator role in that it affects the influence of many situational or dispositional factors on shyness besides its direct predictor role on shyness and social anxiety (Leary & Kowalski, 1995; Watson & Friend, 1969). In other words, the concern of individuals regarding receiving negative evaluation from others is prone to be affected by other factors. Some of the important factors that have the potential to make differences in one's concerns over others' evaluations are presented in detail in the following sections.

1.5.1.2 Self-Evaluations

Self-evaluations represent an individual's subjective ratings of his/her abilities and skills in general. The negative relationship between self-evaluation and shyness/social anxiety has been consistently demonstrated by various studies (e.g., Breck & Smith, 1983; Cheek & Buss, 1981; Clark & Arkowitz, 1975). When people regard themselves negatively or believe that they will not be able to handle the

demands of an encounter, it is very likely that they experience shyness (Clark & Wells, 1995). Shy people critically and continually monitor their performance, exhibit a negative evaluation bias regarding their social performance, and degrade their interpersonal and social functioning (Alden & Wallace, 1995; Beck et al., 1985; Beidel et al., 1985; Cacioppo, Glass, & Merluzzi, 1979; Montgomery et al., 1991).

In general, self-evaluations, like fear of negative evaluation, constitute an important component of shyness. That is, shy individuals experience more negative thoughts than their counterparts especially when engaged in social interaction (Bruch et al., 1989); underestimate positive aspects of their performance and overestimate negative aspects (Clark & Arkowitz, 1975); believe that they are incompetent in many social interactions (Prisbell, 1997); and exhibit low self-esteem and low self-concept (Cacioppo et al., 1979; Franzoi, 1983).

For instance, the relationship between shyness and self-statements, (i.e., self-referent internal speech) which are regarded as a means of self-evaluations, has been studied by many researchers. Clark and Wells (1995) asserted that people generally carry out an internal dialog of thoughts before, during, and after social interactions, which influences the individual's performance in his/her interactions. While positive self-statements help the person identify the benefits of a social situation, negative self-statements hinder the person's ability to function adaptively in the situation (Schwartz & Garamoni, 1989). Examples of negative self-statements include "I do not know what to talk about" and "I look nervous". Studies have consistently implied that shy and socially anxious individuals generate a greater number of negative self-statements in various social situations (Beidel et al., 1985; Bruch et al., 1989; Clark & Arkowitz, 1975; Glass, Merluzzi, Biever, & Larsen, 1982).

In one study, Halford and Foddy (1982) had high, moderate, and low social anxiety groups of subjects engage in a social behavior test and the performance of the subjects in a series of simulated social interactions was assessed. It was found that there was a high correlation between negative self-statements by subjects and their social anxiety. Another study demonstrated that high socially anxious men generated more negative self-statements than low anxious ones when anticipating a meeting

with an unfamiliar woman (Cacioppo et al., 1979). Amico, Bruch, Haase, and Sturmer (2004), recently, found that frequency of negative statements contribute substantially to trait shyness.

Further evidence for the relationship between shyness and self-evaluations come from studies of self-efficacy. Self-efficacy refers to the estimate of one's ability to master his/her behavioral skills (Bandura, 1969). With regard to self-efficacy, researchers have found that shy people have generally much lower perceptions of themselves than do less shy people (Arkin et al., 1980; Bandura, 1969), and that self-efficacy beliefs contribute to self-reported interpersonal shyness (Caprara et al., 2003; Hill, 1989).

Patterson, Churchill, and Powell (1991) found that while waiting to meet a stranger, subjects high in social anxiety rated themselves as being significantly more unfriendly, insecure, and lacking in control as compared to subjects low in social anxiety. There are also other studies (Leary & Atherton, 1986; Leary et al., 1988; Maddux et al., 1988) supporting the notion that social anxiety is directly related to self-efficacy expectancies, with socially-anxious individuals having lower self-efficacy expectations. Wallace and Alden (1991) similarly reported that male subjects who were socially anxious perceived themselves as less capable of meeting other's expectations in social situations.

Although the constructs of self-statements and self-efficacy provide useful means of understanding the link between self-evaluations and shyness, a more general sense of rating of oneself, namely self-esteem was of greater interest for the present study. Self-esteem has been defined as "a personal judgment of worthiness" (Coopersmith, 1967, p. 4), or put differently it is a subjective feedback about the adequacy of the self (Bednar, Wells, & Peterson, 1989). With regard to the relationship between shyness and self-esteem, research is consistent in yielding a significant negative correlation (Cheek & Buss, 1981; Geist & Borecki, 1982; Jones et al., 1986; Leary, 1983a; Leary & Kowalski, 1993; Miller, 1995). That is, people who are high in the experience of shyness tend to have lower self-esteem compared to non-shy people.

Cheek et al. (1986), for instance, used Shyness Scale and self-esteem measures in order to examine the relationship between these two constructs. The findings revealed significant negative correlations between scores on shyness and five dimensions of self-esteem, namely, self-regard, academic ability, physical appearance, physical ability, and vocational certainty. Various other studies have also confirmed the negative association of shyness with self-esteem for particular age groups such as elementary school students (Lazarus, 1982a); college students (Cheek & Buss, 1981); and older adults (Hansson, 1986).

Although the relationship between shyness and self-esteem has been demonstrated in various studies, there are inconsistent findings in relation to the contribution of self-esteem to shyness. A study by Kocovski and Endler (2000), for instance, indicated that self-esteem is not a direct predictor of shyness. They found that low self-esteem leads to an increased fear of negative evaluation from others which in turn results in increased shyness, suggesting that fear of negative evaluation is a mediator between self-esteem and shyness, and that contribution of self-esteem to shyness is only via approval/disapproval concerns. However, in another study, Miller (1995) showed that participants' shyness level was significantly predicted by poor self-esteem, suggesting that negative self-evaluations are important indicators of one's experience of shyness.

According to self-presentational theory, people who have low self-esteem are more prone to social anxiety because, by virtue of feeling less valued and accepted by other people, they are more worried about the kinds of impressions they are making on others than people who have high self esteem; in other words they have doubts about social success or are highly motivated to make a desired impression (Schlenker & Leary, 1982). Thus, negative self-evaluation results in shyness to the degree that it leads people to anticipate that they are unable to project the social images they desire.

Moreover, given that one's feelings of self-worth partly depend on others' evaluations of him/her (Coopersmith, 1967), and that others' appraisals are a major

determinant of how one perceives and evaluates him/herself (Backman, Secord, & Pierce, 1963), it is logical to assume that self-presentational motivation is affected by self-esteem. In terms of self-presentation theory, therefore, it can be assumed that there is a negative relationship between self-esteem and shyness; that concerns about being negatively evaluated by others is affected by self-esteem; and that one of the components of both fear of negative evaluation and shyness is self-esteem. However, considering the inconsistent findings evidenced in the literature, more research is needed to highlight the interrelationships among self-evaluations, self-presentational concerns, and shyness; and to what extent self-esteem uniquely contributes to shyness.

1.5.1.3 Perceived Social Skills

Social skills are a collection of isolated and discrete learned behaviors; and social competence refers to the smooth sequential use of these skills in an effort to establish an ongoing social interaction (Riggio, 1986). In fact, a person is regarded socially inadequate if he/she is unable to affect the behavior and feelings of others in the way he/she intends and society accepts (Trower, Bryant, & Argyle, 1978).

As discussed before, social skills deficit approach proposed that the reason for individuals to experience shyness is their lack of requisite social skills to perform proficiently in various social situations (Curran, 1977). However, there is a great controversy regarding whether socially anxious individuals really have deficits in their social skills repertoire; whether they have always been unskilled; or whether the actual skill deficiency or the perception of individual is more important that leads to one's inhibition and anxiety (Stravynski & Amado, 2001).

Twentyman and McFall (1975) studied shy subjects' behavior in several ways, and found that shy individuals had fewer interactions with women in fewer situations and of shorter duration. However, whether this was due to lack of skill, active avoidance or some other reason can not be ascertained from the study. Pilkonis (1977b) also compared shy and non-shy subjects, and found that shy students were less able to

initiate and structure conversations, waited longer before starting a conversation, and performed less well in an unstructured situation than less shys. However, the researcher speculated that shy subjects did not have a complete deficit of social skills, but rather they were unwilling to employ their social skills. Similarly, Glasgow and Arkowitz (1975) grouped their subjects as low and high socially anxious on the basis of their frequency of dating and assessed their social skills. The results of the study revealed that the best correlate of male subjects' shyness was negative self-evaluations rather than a lack of social skills, suggesting a cognition operating between social skills and shyness.

Lewin, McNeil, and Lipson (1996) divided subjects in three groups: speech fear, social anxiety, and low anxiety. Subjects engaged in a role-play in which they made a 5-minute speech, and they were assessed in terms of anxiety before and after the speech. Results showed that subjects who had speech anxiety, avoided and escaped from the task more than the subjects in the low-anxious group. In addition, participants in both anxious groups had various speech dysfluencies. However, whether these features reflect skill or are behavioral features of anxiety is not clear.

Although it has been difficult to identify specific social deficiencies among highly socially anxious people, research has demonstrated that there is a tendency among shy individuals to underestimate their own level of social skills (Arkowitz et.al., 1975; Cacioppo et. al., 1979; Curran, Wallander, & Fischetti, 1980; Miller, 1995). That is, they perceive themselves as lacking social competence in comparison to objective observers (Rapee & Lim, 1992). Cartwright, Hodges, and Porter (2003) showed that social anxiety is not related to objectively rated skill level but to the perceived or subjective social competence. Rather than observing skill deficits, the observers identified nervousness as behaviors.

Some theorists (Cheek & Melchior, 1990; Leary & Kowalski, 1995; Rapee & Heimberg, 1997), based on the evidence obtained from the studies, have argued that it is likely that shy individuals are likely to possess the necessary social skills, but are inept in using them, or are prevented from using them due to some cognitions such as

self-preoccupation, low sense of self, and/or approval/disapproval concerns. Crozier (1982) pointed out that shy people do not have a real deficit in social skills, but instead they are consumed by a lack of confidence in these skills. As Hill (1989) found, shy and non-shy participants were relatively similar in their knowledge of appropriate social behavior, but that shy participants were less likely to employ these responses and did not believe they had the ability to do so effectively.

Riggio (1986) provided evidence that self-reported shyness is negatively correlated with emotional sensitivity, a measure of decoding skill which is actually one of the aspects of social skills. In terms of conversational skills, a study by Prisbell (1991) also revealed that, in contrast to non-shy, shy individuals perceived themselves as less skillful in verbal fluency, and expressiveness. In addition, they perceived themselves as lacking the ability to show warmth and empathy. Other studies also revealed that perceived interpersonal competence is a strong predictor of shyness (Jackson et al., 1997; Jackson et al., 2000). Sergin (1999) asserted that the potential role of social skills deficits as an antecedent to shyness may be difficult to evaluate but is likely to occur.

Considering the tendency of shy people to underestimate their level of social skills, and to perceive themselves as lacking interpersonal social competence, cognitive models attempted to address the inconsistencies in the literature in explaining the role of social skills on shyness by including covert processes; in other words, mental processes. These models have succeeded in accounting for why people who have skills at their disposal can not adequately use them (van der Molen, 1990). Theorists (e.g., Clark & Wells, 1995; Rapee & Heimberg, 1997) have suggested that shy people are anxious and inhibited not because they lack social skills, but because they believe they lack them.

Self-presentational theory is one of these models, which is regarded as relatively more successful in integrating social skills and shyness/social anxiety. Schlenker and Leary (1982) proposed that the belief in one's poor social skills automatically increases fear and doubts about one's social performance. As mentioned before, this

concern and doubt about one's social performance is an important factor in eliciting shyness and social anxiety (Rapee & Lim, 1992). Moreover, people who evaluate themselves negatively would be more likely to underestimate their ability to deal effectively with others and, thus, experience shyness, even though they have the necessary social competence. As support of this notion, Maddux et al. (1988) have shown that socially anxious people assume that their successfully executed behaviors will not be that successful in making the desired effects on other people; and that they have a pessimistic view of interactions with others.

There is a cycle of one's poor social performance, doubting his/her abilities, self-presentational concerns, and shyness as evidenced in the literature. Believing that one lacks important social skills may urge the person think that he/she is unlikely to make a favorable impression or to be evaluated positively in social encounters (Leary, 1995). Lucock and Salkovskis (1988) also pointed out the importance of cognitive factors in social anxiety, and hypothesized that cognitions may account for why individuals with appropriate social skills fail to use them in some situations, and why they do not experience reduction in their anxieties. This proposition is consistent with Rapee and Lim's (1992) claims that lower performance beliefs reported by socially anxious subjects are in fact a result of distorted beliefs rather than actual performance. Flett, Hewitt, and De Rosa (1996) found that level of perceived social skills was negatively associated with fear of negative evaluation. Miller (1995) similarly showed that various aspects of social competence were inversely related to fear of being negatively evaluated and motive to avoid exclusion, and positively with social behavior – a measure of self-esteem.

As consistent with social cognitive models, and self-presentational approach in particular, low social competence may either lead to the experience of shyness by making the individual to doubt about his/her abilities and thus heighten fears of being negatively evaluated, or it is likely that perceiving oneself as lacking the adequate social skills directly contributes to one's shyness. Perceived social competence, thus, has the potential to influence one's self-presentational concerns and doubts about him/herself in general, as well as his/her experience of shyness. Bruch (2001)

suggested that the relationship between shyness and social competence needs to be studied by examining different personality and cognitive factors' mediating roles besides its direct contribution.

1.5.1.4 Socially-Prescribed Perfectionism

According to the contemporary cognitive theories, one of the characteristics of socially anxious people is that they perceive themselves as not meeting the expectations of others, or falling short of people's standards, and they believe others will evaluate them negatively as a result (Frost, 2001; Rapee & Heimberg, 1997). These features of social anxiety have also been helpful in making inferences about perfectionism as well.

Perfectionism has been considered as a multidimensional construct since 1990s (Frost, Marten, Lahart, & Rosenblate, 1990; Hewitt & Flett, 1991). One of the most popular and widely accepted conceptualization of multidimensional perfectionism has been offered by Hewitt and Flett (1991). They proposed that there are three components of perfectionism: self-oriented, other-oriented, and socially-prescribed.

Self-oriented perfectionism was described as an intra-individual dimension reflecting perfectionist behaviors that both stemmed from the self and directed toward the self (Hewitt & Flett, 2002). The person high in self-oriented perfectionism sets high standards for him/herself, strives to attain perfection and avoid failure. Other-oriented perfectionism refers to an interpersonal aspect involving unrealistic expectations, and overcritical evaluative style directed to others. Finally, socially-prescribed perfectionism was defined as one's beliefs or perceptions that others had unrealistic expectations for them and evaluated them stringently. Of great interest in this study was the final one, socially-prescribed perfectionism.

Hewitt and Flett (2002) proposed that perfectionism dimensions can enhance the aversiveness of experienced stressors or failures. Similarly, these dimensions may influence the generation of stressful failures, and the anticipation of future stressors

and failures. Among the three perfectionism dimensions, other-oriented perfectionism was detected as the one which was least associated with psychological symptoms; whereas socially-prescribed perfectionism was found to be the one most closely related to maladaptive thought and symptoms such as anxiety, depression, and self-esteem (Chang & Rand, 2000; Donaldson, Spirito, & Farnett, 2000; Flett, Hewitt, Blankstein, & O'Brien, 1991). This may be due to the interpersonal nature of socially-prescribed perfectionism since it places performance pressure on the individual, and make it seen as beyond his/her control (Alden, Ryder, & Mellings, 2002).

In terms of shyness, this external pressure beyond one's control may increase a shy person's expectations for failure. Schlenker and Leary (1982) proposed according to self-presentational theory that the discrepancy between self-efficacy and perceived standards of evaluation by others is important in social anxiety. That is, if the person believes that others have high standards for him/her, and at the same time think that he/she is unable to meet these standards, then it is likely that the individual experiences social anxiety (Bandura, 1986). In most of the social-cognitive theories of social anxiety, it is indicated that shy people assess their behavior in relation to some standard and that they perceive themselves to fall short of what is expected or desired. Wallace and Alden (1995) similarly claimed that the judgments of an individual must include the decision of what is expected or desirable in a given situation, especially the perceptions of what others expect (i.e., socially-prescribed perfectionism). Socially anxious people, therefore, believe that others expect a flawless social performance (Leary et al., 1988).

Alden, Bieling, and Wallace (1994) examined the relationship between measures of social anxiety and dimensions of perfectionism, and found that rather than holding themselves up to self-oriented perfectionist standards, the socially anxious subjects reported others expected them to be perfect. This result supported the link between social anxiety and socially-prescribed perfectionism. Alden et al. (1994) concluded that perfectionist features of shyness have an interpersonal rather than a personal context. However, in an initial study, Wallace and Alden (1991) failed to find any

differences between shy and non-shy subjects in their perceptions of the standards other people held for them.

Another study (Flett et al., 1996) highlighted the association of socially-prescribed perfectionism with shyness, fear of negative evaluation, and self-esteem. There was a negative relationship between socially-prescribed perfectionism and self-esteem; and a positive relationship between socially-prescribed perfectionism and fear of negative evaluation. The authors based on these findings asserted that individuals with higher levels of socially-prescribed perfectionism have adopted patterns of responding to anticipated criticism from people with unrealistic expectations by becoming isolated and withdrawn.

Similar findings were reported in relation to the association of socially-prescribed perfectionism with cognitions such as fear of negative evaluation, and a need for approval from others (Hewitt & Flett, 1991). According to Hollender (1965) perfectionists are overly sensitive to rejection and excessively concerned with approval from others. In this respect, Blankstein, Flett, Hewitt, and Eng (1993) showed a positive association of socially-prescribed perfectionism with social evaluative concerns such as being criticized, and looking foolish.

Studies (Rosser, Issakidis, & Peters, 2003; Saboonchi & Lundh, 1997) have also showed that the “concern over mistakes”, “doubts about action”, and “socially-prescribed perfectionism” dimensions of two perfectionism measures showed significant correlations with social anxiety, suggesting that both cognitive-evaluative model (Clark & Wells, 1995) and self-presentational model (Schlenker & Leary, 1982) of social anxiety are consistent with the hypothesis of perfectionism as a causal factor behind social anxiety. Frost (2001) concluded after a review of related literature that perfectionism, especially the maladaptive evaluative concern dimension, seems to be related to most forms of social anxiety in non-clinical populations and that socially-anxious individuals exaggerate the likelihood and consequences of potential social mistakes.

Besides concerns over evaluation of others, the notion that sense of self-worth is partially determined by perfectionist attitudes regarding others' expectations and evaluations was supported with a recent study by Ashby, Rice, and Martin (2006). These researchers found that perfectionist beliefs about other people's demands and expectations were significant predictors of self-esteem, suggesting that maladaptive perfectionism results in poor self-esteem, and thus feelings of inadequacy. The role of socially-prescribed perfectionism on self-esteem was also revealed in an earlier study (Preusser, Rice, & Ashby, 2004) in that highly perfectionist attitudes in terms of others' expectations were found to influence one's sense of self-worth.

Consistent with the cognitive theories and self-presentation theory, it can be assumed that perceptions of high expectations from others could greatly increase the anticipation that one will perform poorly and be negatively evaluated (Arkin et al., 1986; Carver & Scheier, 1986; Schlenker & Leary, 1982). As Hewitt and Flett (1991) argued, since individuals with high levels of socially prescribed perfectionism are concerned with meeting others' standards, they exhibit a greater fear of negative evaluation and place greater importance on obtaining the attention but avoiding the disapproval of others. People with social anxiety are particularly critical of mistakes they make in front of others, because of their heightened worry about what others might be thinking of them. Hamechek (1978) argued that shyness is a way to avoid rejection and gain acceptance for the perfectionists. However, whether this evaluative dimension, or in other words socially-prescribed perfectionism, is uniquely related to shyness or aspects of shyness is unclear. In addition, although it has been documented that socially-prescribed perfectionists score higher on measures of shyness and social anxiety, inconsistent findings also exist with regard to the specific contribution of perfectionism to shyness. Jackson et al. (1997), for instance, have failed to find a significant relationship between shyness and dimensions of perfectionism, concluding that perfectionist standards are not related to shyness. Thus, further research on how socially-prescribed perfectionism interacts with other factors to contribute to social anxiety is warranted.

1.5.1.5 Perceived Parental Attitudes

As self-presentational model of shyness suggested, all cases of social anxiety or shyness do not arise for precisely the same reasons for all individuals, although the precipitating factors will always involve concerns with how one is appearing to others (Leary & Kowalski, 1995). There is a wide variety of situational and dispositional factors that can lead to these concerns. One of these factors, which have the potential to affect the motivation to impress others and the doubts about social performance, regards parental influences which usually bring about positive or negative consequences for the psychosocial adjustment of children and youth (Maccoby & Martin, 1983; Steinberg, Elmen, & Mounts, 1989). The important role of parental factors such as child-rearing styles and attitudes of parents in affecting various aspects of children's psychosocial functioning has also been documented in Turkish samples. For instance, it has been shown that the type of behaviors and the attitudes that the mother and the father manifest affect the thought patterns (Aydın & Öztütüncü, 2001), identity development (Çakır, 2001), loneliness (Çiftçi-Uruk & Demir, 2003), social anxiety (Erkan, 2002), psychological adjustment (Erkman & Rohner, 2006), and self-esteem (Haktanır & Baran, 1998) of children.

Various studies (e.g., Baumrind, 1991; Buri, 1989; Coopersmith 1967) have pointed out the important role of parental attitudes and behaviors in the development of cognitive biases such as self-evaluations and concerns over approval/disapproval. Overcontrol and lack of autonomy provided by parents are very likely to influence the degree of children and youth's cognitions, especially the ones related with the individual's self-worth and self-perceptions, which can then lead to problems such as social anxiety (Chorpita, Albano, & Barlow, 1996).

Research on self-evaluation, for instance, indicated that different parental attitudes or child rearing styles affect children's level of self-esteem. It has been proposed that parents who are neglecting, rejecting, and overprotecting have children who tend to have low self-esteem; and parents of high self-esteem children tend to be more warmly accepting of their children than parents of low self-esteem children

(Coopersmith, 1967; Haque, 1988; Kawash, Kerr, & Clewes, 1985; Rice, 1990). These studies also found that parents of high esteem children were more concerned with their children's lives and problems, interested in and encouraging of their children's pursuits, knew their children's friends better, and enjoyed their offspring more. In addition, parental supportive behavior characterized by nurturance, warmth, and approval influences the self-worth of the adolescents (Gecas, 1972), suggesting the strong relationship between parents' evaluation of the adolescent and the adolescent's self-esteem.

Earlier, Helper (1955) noted that individuals whose parents were accepting tended to accept and like themselves. Child-rearing styles that convey parental acceptance of the child have the potential to produce children with high self-esteem than those parenting styles that convey non-acceptance. As a support of this proposition, Conger, Conger, and Scaramella (1997) found that early adolescent self-esteem was likely to be lower when parents were perceived as controlling; and higher when acceptance is perceived. In terms of shyness, Zimbardo and Radl (1981) claimed that low level of self-esteem caused by negative attitudes and behaviors from parents, consequently, is likely to be associated with shyness and to result in proneness to social anxiety.

With regard to approval concerns, Buss (1980) claimed that parents, who continually criticize their children's appearance and behaviors and overly emphasize being scrutinized by others, are likely to contribute to the development of high fear of negative evaluation in social situations on the part of the child. Bögels, Van Oosten, Muris, and Smulders (2001) further maintained that exposure to negative feedback may make children sensitive for negative evaluation. Allaman, Joyce, and Crandall (1972) investigated the developmental antecedents of individual differences in need for approval. They found that children who were high on need for approval tended to have parents who employed harsh styles of parenting or child rearing. High need for approval children had less warm and affectionate, and more punishing and restrictive mothers. In addition, perceived paternal rejection was associated with high need for

approval in children. Arkin et al. (1986) also found that overprotection and lack of autonomy lead to child's tendency to avoid disapproval.

According to Bruch and Cheek (1995), early relationships with parents have substantial influence on the individuals' vulnerability to become shy or socially anxious especially during adolescence and early adulthood. An unaffectionate parental style without any encouragement or opportunity for expressive and inquisitive communication is likely to foster an exaggerated sense of self as a social object being evaluated with high standards for social acceptance, and a self with concerns over receiving rejection. These individuals develop relational schemas that reflect their disapproval concerns that may jeopardize new or emerging relationships (Baldwin & Fergusson, 2001).

Although parental factors contribute a lot to the development of self-worth and motivation for self-presentation, the literature fails to provide satisfying evidence that certain attitudes and behaviors of parents serve as direct causal agents in shyness and social anxiety. There is consensus on research findings in relation to the differences between shy and non-shy children and youth in terms of parenting styles such that parental acceptance is reported more by non-shys whereas parental control is more likely to be reported by shys (Hummel & Gross, 2001; Mills & Rubin, 1993). However, with regard to their specific contribution, researchers have stressed the significant but indirect role of parenting styles or parent practices in the development and maintenance of social anxiety and shyness (e.g., Bruch, 1989; Burgess et al., 2001). While parental overprotection, overcontrol, and rejection foster anxiety and withdrawn behaviors in children and youth, a parenting style characterized by warmth, acceptance, and affection contributes to a healthy and positive self-image, and thus, protects toward excessive social anxiety (Eastburg & Johnson, 1990; Klonsky et al., 1990). Nevertheless, the picture suggests that the role of parental attitudes on shyness via doubts and concerns in terms of self-presentational processes requires validation.

1.6 Shyness Studies in Turkey

A few studies have been conducted in Turkey regarding shyness. One of them (Gökçe, 2002) investigated shyness level of high school students in terms of demographic variables, self-esteem, and loneliness. The findings of this study showed that self-esteem, loneliness, education level of the mother, and perceived income level of the family were significant predictors of shyness, with self-esteem accounting for most of the variance in shyness scores of high school students, indicating that low self-esteem predicted greater shyness.

In another study, Güngör (2002) examined university students' experiences of shyness with respect to various demographic variables. This study revealed no differences between males and females with respect to their shyness scores. Students who perceived themselves as academically successful were found to be more shy than the ones who perceived themselves as relatively less successful in school. In addition, students who participated in social activities were less shy than students who did not. Another finding was that the less the perceived income of the family, the higher the students' level of shyness. Finally, students who perceived their parents as protective were more likely to be shy than the ones who perceived their parents as democratic.

Yüksel (2002) also investigated various predictors of shyness among university students. He found that significant predictors of shyness were self-esteem, perceived academic achievement, and education level of the mother. Although a significant positive relationship between loneliness and shyness was encountered, loneliness was not an indicator of shyness.

Erdal (2003) examined the shyness level of employed and unemployed female adults in terms of various demographic variables. It was found that the higher the education level of participants, the lower their level of shyness. In addition, it was revealed that participants who have lived mostly in big cities were less shy compared to ones who have lived in smaller cities.

There are also studies that have investigated some aspects of social anxiety in Turkish samples. In one study, Erkan (2002) adapted two measures, which assess components of social anxiety, into Turkish. These are Fear of Negative Evaluation Scale, and Social Avoidance and Distress Scale. Erkan demonstrated the usability of these scales for Turkish adolescents. The study also examined the parental attitude differences in terms of social anxiety levels of adolescents. The findings of the study showed that adolescents whose parents were authoritarian and protective-demanding scored higher in social anxiety measures than adolescents who had democratic parents. No gender differences were found in terms of social anxiety scores. In addition, number of people in household, education level of parents, income level of the family, and participation of family members in social activities were found to be important familial risk factors in making a difference in social anxiety levels of participants.

Akyıl (2000) examined the parental antecedents of social anxiety among adolescents. Specifically, the effects of parental child-rearing practices on social anxiety were studied. The findings from the research revealed that mothers' overprotection and fathers' lack of emotional warmth had significant influences on social anxiety level of adolescents. No significant differences in social anxiety scores in terms of age and sex were encountered.

Another study (Eren-Gümüş, 1997) was an attempt to examine social anxiety level of university students with respect to various demographic variables. The researcher, first, adapted Liebowitz Social Anxiety Scale which is a widely used measure of social anxiety and social phobia, into Turkish; and then investigated the scores of participants on this measure in terms of age, gender, academic success, and education level of parents. It was found that participants living in bigger cities experienced more social anxiety than the ones living in smaller cities; and students whose parents had a university degree were less socially-anxious than whose parents were less educated.

Öztaş (1996) adapted Inventory of Interpersonal Situations, which is a measure of discomfort experienced in social situations, for use with Turkish university student samples. The researcher also showed that low socio-economic status was associated with higher levels of discomfort experienced in social situations and with lower frequency of social behaviors. No gender differences were encountered with respect to reported social discomfort.

1.7 Purpose of the Study

The purpose of the present study was to examine the causes of shyness in a Turkish sample by making use of the broad framework of self-presentational theory. Specifically, a model based on self-presentational approach to shyness was developed to be tested in order to see a set of relationships among the factors associated with social, psychological, and cognitive aspects of self-presentation and to what extent a combination of these variables account for individuals' experience of shyness. As reviewed in detail in the previous sections, the proposed antecedents of shyness for this study were fear of negative evaluation, self-esteem, perceived social skills, socially-prescribed perfectionism, and perceived parental attitudes. Figure 1.1 presents the proposed causal model of the present study.

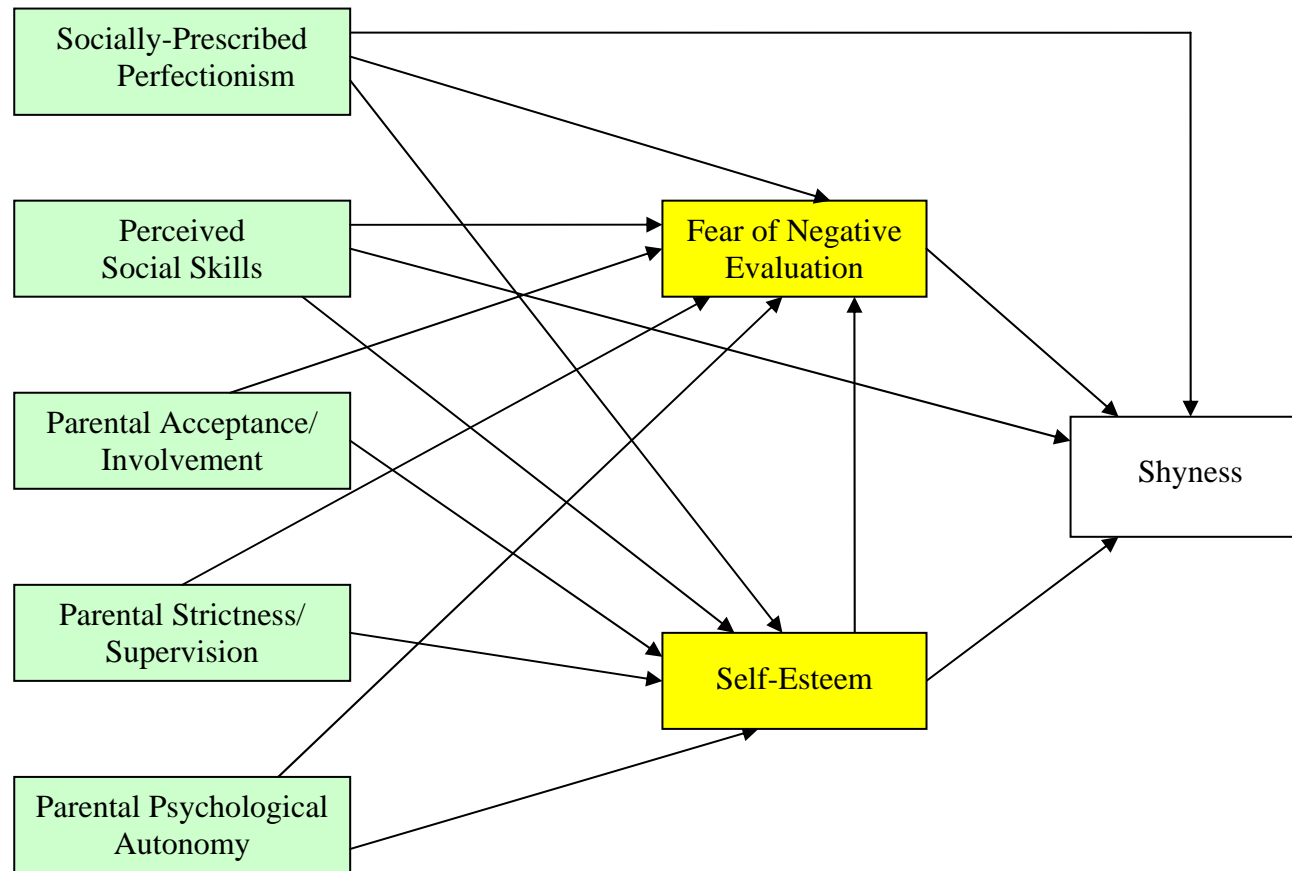


Figure 1. The Proposed Causal Model

The model that was tested in the present study combined the independent constructs, fear of negative evaluation, self-esteem, socially-prescribed perfectionism, perceived social skills, and perceived parental attitudes; and the dependent construct shyness; having fear of negative evaluation, and self-esteem as mediators between shyness and other variables at the same time. According to the model, socially-prescribed perfectionism, perceived social skills, and perceived parental attitudes were proposed to predict fear of negative evaluation and/or self-esteem; fear of negative evaluation and self-esteem to predict shyness; and self-esteem to predict fear of negative evaluation. In addition, direct paths from socially-prescribed perfectionism and perceived social skills to shyness were also tested in order to see whether the relationship between shyness and these variables were mediated by fear of negative evaluation and/or self-esteem, or whether they directly led to shyness. The strength of the paths displayed in Figure 1.1 were determined and tested in order to see whether the propositions of self-presentational theory operated in a similar direction for the present sample.

1.8 Research Questions

Given that the purpose of the present study was to investigate the structural relationships among the aforementioned study variables, based on the proposed causal model depicted previously, the following research questions were sought to be answered.

1. To what extent shyness is predicted from fear of negative evaluation, self-esteem, socially-prescribed perfectionism, and perceived social skills?
2. To what extent fear of negative evaluation is predicted from self-esteem, socially-prescribed perfectionism, perceived social skills, and perceived parental attitudes?
3. To what extent self-esteem is predicted from socially-prescribed perfectionism, perceived social skills, and perceived parental attitudes?

1.9 Significance of the Study

To take oneself as the object of one's thoughts has been cited as a distinguishing ability of human beings (Gallup & Suarez, 1986). This ability is reflected in the construct of 'the self' which is defined as the human capacity for self-attention and its attendant cognitive and motivational processes (Leary, 2001, p. 218). In terms of shyness, the self has been seen an important mechanism, and it has been argued that researchers studying shyness could benefit much by exploring its related dimensions and conceptions (Crozier & Alden, 2001).

It has been suggested that the ability to consider how one is perceived by other individuals helps to regulate certain behaviors in ways that would have desired effects on others; and to create social influence (Goffman, 1959; Schlenker, 1980). This kind of ability requires a self, and the involvement of self in shyness implies that variation in self-related processes is a major factor in individual differences in shyness (Crozier & Alden, 2001; Leary, 2001). Although the concern with how one is evaluated by other people is essential in order for social interactions to proceed smoothly, an excessive concern can lead to behaviors which are not always adaptive (Leary, 2001). Excessive self-presentational concerns can make people miserable, interfere with their social lives, and lead them to behave in ways that are not always in their best interests (Leary, 1986). The self-presentational perspective suggesting that a variety of factors precipitate or heighten the experience of shyness by increasing people's motivation to make impressions on others, explains both situational and dispositional mediators of shyness, and attempts to incorporate important aspects of other influential theoretical approaches (Schlenker & Leary, 1982).

A detailed examination of various self-presentational concerns is central to understanding shyness, so that elimination of these excessive concerns is achieved. In addition, not only the investigation of the relationship between shyness and specific self-presentational variables is sufficient, but also how a combination of these variables predicts shyness as well, which is a neglected area among researchers

in providing evidence for the theory. The studies with regard to the test of self-presentational variables simply focused on the relationship between these factors and shyness (e.g., Leary & Atherton, 1986; Maddux et al., 1988). However, there is a dearth of research examining the structural relationships among these variables and to what extent they together account for the experience of shyness besides their specific contributions.

Moreover, although shyness research has reached considerable advances in Western populations in terms of the nature, etiology, and treatment alternatives, there is a great lack of understanding of the shyness construct for Turkish samples in terms of grounded theories. Different aspects of self-presentational theory of shyness was supported by different studies with Western populations, and consequently a lot regarding the nature of the construct has been accomplished (e.g., Leary et al., 1988; Leary & Kowalski, 1993; Maddux et al., 1988; Saboonchi & Lundh, 1997). The comprehensive nature of self-presentational theory of shyness was believed to account for various factors contributing to shyness of Turkish university students.

Besides the huge number of people experiencing shyness, the literature has pointed out that shyness is a universally unpleasant, debilitating, and persistent experience that most people report experiencing; and that individuals usually experience shyness as shameful, unacceptable, and undesirable (Beidel et al., 1985; Cheek & Melchior, 1990; Curran, 1977; Jones et al., 1986; Zimbardo, 1977). For instance, shy people worry that others will judge and evaluate them negatively (Schlenker & Leary, 1982), are excessively self-conscious (Buss, 1980; Crozier, 1979), feel uneasiness in interpersonal interactions, and withdraw from or avoid evaluative social situations (Beidel & Turner, 1998). The significant effects which interfere with people's social and emotional well-being (Bruch, 2001; Jones et al., 1986) have also been well documented. It has been argued that shyness affects many aspects of a person's life and should not be left unaddressed (Zimbardo, 1977).

In addition, shyness has been reported to include a significant portion of students attending university (Asendorpf, 1989; Bryant & Trower, 1974; Pilkonis, 1977b). It

has been argued the social life offered in university is full of opportunities for socializing with peers, making new friends, and dating (Asendorpf, 2000) College environment is an unfamiliar social setting for the students, inhabited by large numbers of situations and people that would potentially elicit shyness. The students are evaluated by many people, compete with them, and engage in various forms of social relationships (Crozier, 1982; Schlenker & Leary, 1982). In other words, the university environment represents a social-evaluative setting where the motivation for self-presentations of students is likely to be affected by a variety of factors. Shyness, thus, can be a critical and pervasive part of a university student's life, since self-presentation is an important aspect of the experience of social discomfort (Leary, 2001).

This study, by making use of self-presentational theory, attempted to test several social, psychological, and cognitive factors in predicting shyness. The findings that are obtained from this study may also guide the practitioners in designing appropriate intervention and training programs that will help individuals overcome their problem, since this model posits that appropriate treatments should be matched with a particular individual whose self-presentational concerns regarding shyness have been determined (Leary, 1983a). The apparent prevalence of shyness among college students and the problems that often accompany feelings of shyness seem to warrant attention of counseling professionals in order to meet the needs of students in assisting them in their efforts to alleviate their social distress as well as prevent future problems.

1.10 Operational Definitions of Terms

The terms that are used throughout this study are conceptualized and defined as follows:

Self-presentation, also called impression management, involves the processes by which individuals attempt to control the impressions others form of them (Schlenker, 1980).

Shyness, in this study, refers to an affective-behavioral syndrome characterized by social anxiety and interpersonal inhibition which results from the prospect or presence of others of interpersonal evaluation (Leary, 1986). It is accepted as a form of social anxiety, and thus, all instances of shyness are believed to involve social anxiety.

Fear of negative evaluation is an aspect of self-presentation and refers to the apprehension about others' evaluations, avoidance of evaluative situations, and the expectation that others would evaluate oneself negatively (Watson & Friend, 1969). It reflects a motive to avoid disapproval of other people.

Self-esteem was defined as the totality of the individual's thoughts and feelings with reference to himself as an object (Rosenberg, 1965). It is the entire range of attitudes, values, and judgments of individuals regarding their perceptions, emotions, thoughts, behaviors, abilities, past experiences, physical characteristics, and personal values (Coopersmith, 1967). In the present study, self-esteem was used as a means of individual's self-evaluations.

Social skills are a collection of isolated and discrete learned behaviors; and use of these skills in an effort to establish an ongoing social interaction represents a general social competence of an individual (Riggio, 1986). They are, in other words, interpersonal abilities which facilitate desired social interactions in various social encounters.

Socially-prescribed perfectionism is one of the dimensions of perfectionism which is considered as multidimensional. It refers to one's beliefs or perceptions that others had unrealistic expectations for him/her and evaluated him/her stringently (Hewitt & Flett, 2002).

Parental attitudes, for the present study, are conceptualized in terms of three different patterns namely, acceptance/involvement, strictness/supervision, and psychological autonomy. Acceptance/involvement refers to the degree to which

individuals perceive their parents as loving, responsive, and involved; strictness/supervision reflects ultimate parental monitoring and supervision of the children; and psychological autonomy refers to non-coercive and democratic discipline of parents (Lamborn, Mounts, Steinberg, & Dornbusch, 1991).

1.11 Limitations of the Study

This study has limitations that should be considered while interpreting and generalizing the results.

First, as with all studies, the characteristics of the sample must be considered when interpreting the results. Although the present study was an attempt to investigate self-presentational predictors of shyness of university students, the participants were selected from Middle East Technical University. Although the university that the sample was drawn represents a heterogenous population, the extent to which the results of the study are generalizable to other university students is not clear.

Second, individuals who are shy tend to be very concerned with how others perceive them. Thus, the participants may have responded to the measures to obtain social desirability even though they were ensured confidentiality and anonymity. In addition, measuring variables such as shyness and fear of negative evaluation by means of self-reports may limit the validity of the results given that the behaviors and emotions of subjects with regard to these variables are not assessed in social-evaluative conditions.

And finally, in terms of assessing social skills, one of the problems mostly encountered in shyness research is that the ratings of individuals of their social skill levels generally are not consistent with the ratings of others (e.g., judges). Shy people usually underestimate their own social competence. Thus, the results regarding shy individuals' behavioral repertoire may not reflect their actual

performance. In addition, rather than the actual social skills and related behavioral performances, only the perceived level of social competence was assessed in the present study.

CHAPTER II

METHOD

This chapter involves description of the methodological procedures of the study. First, the demographic information about participants, and the procedures related to sampling are presented. Then, data collection instruments of the study are given together with their psychometric properties and reliability and validity processes. And finally, procedures for data collection, and methods for data analyses are presented.

2.1 Participants

The data for the present study was collected from undergraduate students enrolled in Middle East Technical University (METU) during fall semester of 2005-2006 academic year. In order to get a representative sample, stratified random sampling procedure was used for the selection of the participants. To achieve this, first, the number and the percentages of the students enrolled in METU in 2005-2006 academic year was obtained from METU Student Affairs Office. The total number of individuals was approximately 13000, and therefore nearly 600 students were proposed to represent the METU population. Then, the approximate number of students in each faculty that would be used as a representative sample was determined by having 5 % of the population of each faculty. However, the researcher was able to collect the data from a total of 539 undergraduate METU students from five different faculties. After employing the missing value analysis explained in the results section, 497 participants remained; thus, the sample size of the present study was accepted as 497.

The demographic information obtained from the participants showed that from 497 students, 287 of the participants were female (57.7 %), and 210 of the participants were male (42.3 %). Students represented four different grade levels. Specifically, they consisted of 141 freshmen (28.4 %), 169 sophomores (34 %), 104 juniors (20.9 %), and 83 seniors (16.7 %). In terms of the distribution of participants by faculty, 83 students (15.4 %) were from Faculty of Education, 90 (18.1 %) students were from Faculty of Arts and Sciences, 86 (17.3 %) students were from Faculty of Architecture, 98 (19.7 %) students were from Faculty of Economics and Administration, and 140 (28.2 %) students were from Faculty of Engineering. The age of the participants ranged from 16 to 30 with a mean of 20.51 ($SD = 1.93$). 7.6 % of the participants perceived their family as having low socio-economic status; 85 % as middle; and 7.2 % as high.

2.2 Data Collection Instruments

Seven instruments, which were all self-report measures, were used in this study. These instruments are: Demographic Information Form, Revised Cheek and Buss Shyness Scale (RCBS; Cheek & Briggs, 1990), Brief Fear of Negative Evaluation Scale (BFNE; Leary, 1983c), Socially-Prescribed Perfectionism Scale (SPPS; Hewitt & Flett, 1991), Rosenberg Self-Esteem Scale (RSES; Rosenberg, 1965), Social Skills Inventory - Short (SSI-Short; Riggio, 1986), and Parental Attitude Scale (PAS; Lamborn et al., 1991).

2.2.1 Demographic Information Form

Demographic Information Form (see Appendix, A) was prepared by the researcher in order to gather information about the participants including their gender, age, major, and perceived socio-economic status of the family. The form also included a brief paragraph explaining the aim of the study.

2.2.2 Revised Cheek and Buss Shyness Scale (RCBS)

Revised Cheek and Buss Shyness Scale (RCBS) is one of the most commonly employed measures of dispositional shyness (Cheek & Briggs, 1990). The original Cheek and Buss Shyness Scale (Cheek & Buss, 1981) contained 9 items. The development of the revised form aimed at improving the psychometric properties of the original scale. The revision resulted in a 13-item revised version of the original scale. There are also two other revised versions of the scale, one with 14 and the other with 20 items; however 13-item RCBS was of interest for the present study, given that it has been accepted as the most prominent measure in shyness research (Leary, 1991).

The RCBS consists of 13 items assessing dispositional shyness (e.g., “I am socially somewhat awkward” or “I feel inhibited in social situations”). The scale is a 5 point Likert-type, ranging from “very uncharacteristic” to “very characteristic”. Items are totaled for an overall shyness score. Scores range from 13 to 65 with higher scores reflecting greater degrees of shyness, and lower scores indicating low or no experience of shyness.

The RCBS was found to be internally consistent (coefficient alpha = .90), and 45-day test-retest reliability coefficient was $r = .88$ (Cheek & Briggs, 1990). Considerable support was also reported for the validity of the scale. The convergent validity was supported via strong correlations with Social Avoidance and Distress Scale (Watson & Friend, 1969, $r = .77$), and Social Reticence Scale (Jones et al., 1986, $r = .79$). The scale also correlated with the original 9-item version ($r = .96$). Leary (1986) recommended the use of RCBS as an appropriate measure of shyness due to its inclusion of both behavioral and physiological factors.

13 items of the RCBS has been translated into Turkish by Güngör (2001). However, Güngör, in the test adaptation process, also added an open-ended question (“In what

situations do you feel shy?") to be answered by university students. She selected seven items from the obtained response list and added them to the translated 13-item scale. As a result, she created a 20-item Shyness Scale.

Güngör (2001) reported evidence for the validity of the 20-item scale after correlating it with Turkish version of Liebowitz Social Anxiety Scale (SKDE; Eren-Gümüş, 1997). The correlation between scores on Shyness Scale and avoidance subscale of SKDE was found to be .78. In addition, Shyness Scale and the total scores obtained from SKDE correlated highly ($r = .71$). The reliability study included a test-retest, and internal consistency methods. The test-retest reliability coefficient was reported as .83, and Cronbach alpha coefficient for internal consistency was found to be .91.

2.2.2.1 Reliability and Validity of Turkish Version of 13-Item RCBS

For the present study, the 13-item version of the original RCBS was used. The researcher conducted a pilot study to provide evidence for reliability and validity of the 13-item translation of RCBS (see Appendix B), and to test the usability of the scale since only this format would be used for the present study.

In this pilot study, 170 undergraduate university students (94 females, 76 males) volunteered to participate. These students were not the participants of the actual study, and were recruited from different faculties of METU. In classroom settings, the participants filled out RCBS, Turkish version of Liebowitz Social Anxiety Scale, and a demographic information sheet.

Evidence for the reliability of the scale was provided by calculating internal consistency estimate. The reliability coefficient alpha was found to be .91, and the inter-item correlations varied between .61 and .83.

To examine the construct validity and the factor structure of the scale, the items of RCBS were subjected to exploratory factor analysis with maximum likelihood. The

analysis revealed only one factor with an eigenvalue greater than unity, and thus indicated that the scale assesses only one dimension. The scree plot also supported this finding. The acquired one factor accounted for 49 % of the variance in participants' responses. The eigenvalue associated with the factor was 6.31. Thus, results showed the uni-dimensionality of the scale, which is a consistent result with the original RCBS. Factor loadings and communality values of each item are presented in Table 2.1.

Table 2.1. Factor Loadings and Communalities of RCBS Items

| Item Number | Factor Loadings | Communality |
|-------------|-----------------|-------------|
| 11 | .82 | .67 |
| 2 | .78 | .61 |
| 4 | .77 | .59 |
| 6 | .75 | .58 |
| 12 | .75 | .56 |
| 9 | .72 | .52 |
| 7 | .69 | .49 |
| 8 | .68 | .47 |
| 5 | .67 | .45 |
| 13 | .65 | .42 |
| 3 | .62 | .39 |
| 10 | .56 | .32 |
| 1 | .51 | .27 |

Evidence for criterion validity of 13-item scale was obtained by correlating it with Turkish form of Liebowitz Social Anxiety Scale (SKDE). As expected, significant correlations were found between total RCBS and SKDE scores of the participants ($r = .77$). Correlation coefficient between scores on shyness and avoidance dimension of SKDE was $.73$, and the coefficient was $.77$ between shyness score, and fear dimension of SKDE. These results are consistent with the findings obtained by GÜNGÖR (2001).

After the support was provided for the psychometric properties of the measure, the researcher concluded that Turkish version of 13-item RCBS was a reliable and valid tool to be used in the present study.

2.2.3 Brief Fear of Negative Evaluation Scale (BFNE)

The original Fear of Negative Evaluation Scale (FNE) was developed by Watson and Friend (1969) in order to assess apprehension about receiving negative evaluation from others. It is, in other words, a measure of social-evaluative anxiety. FNE consists of 30-items and employs a true-false format. People who score high on FNE scale tend to behave in ways designed to avoid the prospect of being evaluated unfavorably.

A brief version of FNE was also developed (BFNE; Leary, 1983c) for the purpose of quick administration and to enhance the psychometric properties of the original form. BFNE consists of 12 items, all of which were selected among the original FNE items (e.g., "I am afraid that others will not approve of me"). However, in BFNE, all item responses are scored on a 5-point Likert-type scale (1 = not at all, 2 = slightly, 3 = moderately, 4 = very, 5 = extremely characteristic) rather than as true or false as in FNE scale. Items 2, 4, 7, and 10 are reverse coded, and all items are totaled for an overall score, which ranges between 12 and 60. With its easier format, BFNE has become one of the most widely used tools for the assessment of social-evaluative anxiety.

Leary (1983c) reported that BFNE correlated highly with the FNE (Watson & Friend, 1969, $r = .96$), had high internal consistency ($r = .90$), and had a test-retest correlation of .75 with a four week interval. The criterion validity of the BFNE was supported through significant correlations with Social Avoidance and Distress Scale (Watson & Friend, 1969, $r = .19$) and the Interaction Anxiousness Scale (Leary & Kowalski, 1993, $r = .32$). In addition, the BFNE correlated positively with two questions presented to the subjects: the degree to which they thought they made a

good impression on others ($r = .31$) and the degree to which they were bothered by an unfavorable evaluation from others ($r = .57$).

2.2.3.1 Adaptation Study of BFNE

The adaptation process of Brief Fear of Negative Evaluation Scale was carried out by the researcher. It was implemented by following the necessary steps in order to ensure equivalency of meaning and prevent any cultural bias. As a first step, three Turkish counselors who were fluent in English and had strong psychology backgrounds, and two English literature experts translated the BFNE into Turkish independently. These five translations were then compared and corrected for discrepancies in vocabulary and phrasing. A common translated version emerged which was subsequently reviewed, along with the original scale, by three counseling professors. These experts evaluated the adequacy of the translation, and final revisions were made considering the corrections and opinions of the expert team.

The Turkish translation of the BFNE was tested in a convenience sample of 90 students from METU in order to check the understandability of the items. Based on the feedback from students, no additional changes were made in the items.

In order to provide evidence for the reliability and validity, and to test the usability of the scale for Turkish university students, a pilot test with 250 (137 females, 113 males) undergraduate university students was carried out. The participants involved in the pilot study were not included in the sample of the actual study. The sample was selected from different departments and grade levels of Middle East Technical University. The mean age of the participants was 20.42 ($SD = 1.92$), and most of the participants (83.6 %) represented middle socio-economic class. In classroom settings, the students filled out Turkish BFNE (see Appendix C) and a demographic information form.

In order to provide evidence for reliability of the scale, the internal consistency estimate for the BFNE was computed using Cronbach alpha. It was revealed that the BFNE had good internal consistency ($\alpha = .94$). The item-total correlations ranged between .41 and .64.

As a test of construct validity, and to examine the factor structure of the scale, the items of the Turkish BFNE were subjected to exploratory factor analysis by maximum likelihood. The results of the analysis yielded only one factor with an eigenvalue greater than unity, suggesting that the scale is unidimensional. The scree plot also supported this finding. The eigenvalue associated with the acquired one factor was 7.09, accounting for 59 % of the variance in responses of the students. Factor loadings and communalities of the items of BFNE are presented in Table 2.2.

Table 2.2. Factor Loadings and Communalities of BFNE Items.

| Item Number | Factor Loadings | Communality |
|--------------------|------------------------|--------------------|
| 8 | .83 | .69 |
| 9 | .82 | .67 |
| 1 | .80 | .64 |
| 11 | .78 | .67 |
| 2 | -.78 | .61 |
| 7 | -.78 | .60 |
| 5 | .77 | .56 |
| 12 | .77 | .59 |
| 3 | .76 | .58 |
| 6 | .75 | .56 |
| 4 | -.72 | .52 |
| 10 | -.67 | .45 |

Although the BFNE was initially constructed to be a unidimensional scale, recent studies examining the factor structure of BFNE demonstrated its two-factor structure, with reverse coded items loading as a second factor (e.g., Rodebaugh, Woods,

Thissen, Heimberg, Chambless, & Rapee, 2004; Weeks et al., 2005). Thus, a forced two-factor model for the present data was also used in order to see whether the structure of Turkish BFNE was similar or different than the structure in original version. Two factors were rotated using a Varimax rotation procedure. The rotated solution yielded two interpretable factors explaining 61 % of the variance. Table 2.3 displays the factor loadings and communalities of the BFNE items for two factors.

Table 2.3. Factor Loadings and Communalities of BFNE Items for Two-Factor Solution.

| Item Number | Factor 1 | Factor 2 | Communality |
|--------------------|-----------------|-----------------|--------------------|
| 8 | .82 | .33 | .72 |
| 9 | .77 | .36 | .70 |
| 6 | .72 | .27 | .60 |
| 5 | .66 | .36 | .58 |
| 11 | .60 | .45 | .57 |
| 1 | .59 | .44 | .61 |
| 12 | .57 | .46 | .53 |
| 3 | .53 | .50 | .54 |
| 2 | .31 | .84 | .68 |
| 7 | .39 | .77 | .69 |
| 4 | .33 | .67 | .55 |
| 10 | .43 | .46 | .51 |

As can be seen in Table 3, the first factor included the straightforward items which explained 33.94 % of the variance, and the second factor included the reverse coded items which explained 27.05 % of the variance. It has been argued that finding a two-factor model for the BFNE might not be an indication of the existence of different constructs, but reflection of item construction given that the scale contains both straightforward and reverse scored items (Weeks et al., 2005). Thus, for the present

study, the single-factor solution Turkish BFNE was accepted, and for the analyses, a total score was computed by summing all items of the scale.

2.2.4 Socially-Prescribed Perfectionism Scale (SPPS)

In order to measure perfectionism as it relates to perceptions of standards for evaluation from others, socially-prescribed dimension of Multidimensional Perfectionism Scale (MPS; Hewitt and Flett, 1991) was used. It is possible to assess socially-prescribed perfectionism as a subtype of the overall construct of perfectionism by using one dimension of this scale. MPS consists of three subscales measuring self-oriented, other-oriented, and socially-prescribed dimensions of perfectionism, each measured by 15 items.

The MPS uses a 7-point Likert-scale, ranging from “strongly agree” to “strongly disagree”. Higher scores on all three subscales reflect greater perfectionism. Of great interest in the present study were items (e.g., “Success means that I must work even harder to please others”) from the socially-prescribed perfectionism subscale, which constitute Socially-Prescribed Perfectionism Scale (SPPS). To get an overall score in SPPS, all items are totaled after having items 9, 13, 14, and 15 reversely scored.

The factor analysis of MPS conducted by Hewitt and Flett (1991) revealed three factors, in other words three subtypes of perfectionism for MPS. Participants’ ratings regarding themselves and ratings by their significant others suggested good inter-rater reliability. Correlations between self-ratings and ratings by significant others were: .35 for self-oriented, .47 for other-oriented, .49 for socially-prescribed subscales. Socially-prescribed perfectionism as measured by MPS also correlated highly with fear of negative evaluation ($r = .46$), anxiety ($r = .30$), and self-blame ($r = .30$).

Hewitt and Flett (1991) reported coefficient alpha levels of .86 for self-oriented, .82 for other-oriented, and .87 for socially-prescribed perfectionism scales. Item-to-subscale score correlations ranged between .51 and .73 for self-oriented items, .43

and .64 for other-oriented items, and .45 and .71 for socially-prescribed items. Subscale intercorrelations ranged from .25 to .40.

Only the socially-prescribed subscale of Turkish MPS (Oral, 1999) was used in this study (see Appendix D). The reliability study by Oral, for overall MPS scale, revealed that coefficient alpha was .91 and the respective alphas were .91, .80; and .73 for self-oriented, socially-prescribed, and other-oriented perfectionism, respectively. Item-total-subscale correlations ranged between .20 and .75 for self-oriented, .22 and .60 for socially-prescribed, and .31 and .52 for other-oriented perfectionism. For the present study sample, the Cronbach alpha reliability was found to be .91.

2.2.5 Rosenberg Self-Esteem Scale (RSES)

Rosenberg Self-Esteem Scale (RSES; Rosenberg, 1965) is a widely used measure of global self-esteem or self-worth, in other words the totality of the individual's thoughts and feelings with reference to him/herself. It was originally designed to measure self-esteem of high-school students, but the scale has also been used with adults with a variety of occupations. It is designed to assess the extent to which a person is generally satisfied with his/her life, considers him/herself worthy, holds a positive attitude toward him/herself, or alternatively feels useless, or desires more respect.

RSES consists of 10-items with a 4-point Likert-type scale ranging from “strongly agree” to “strongly disagree”. The scale has five positively (e.g., “On the whole, I am satisfied with myself”), and five negatively worded items (e.g., “I certainly feel useless at times”). Responses are summed to obtain a total score that can range from 10 to 40. Items 1, 2, 4, 6, and 7 are reverse scored.

Although the scale was developed to be unidimensional, both single-factor and two-factor structures of the scale has been reported. While some studies (e.g., Shahani, Dipboye, & Philips, 1990) identified two independent dimensions, others (Crandall,

1973; Rosenberg, 1965) supported the unidimensionality of the scale. However, the identified separate dimensions were mostly defined by negatively worded vs. positively worded items.

Rosenberg reported that the scale had high internal consistency ($r = .80$) as well as high test-retest reliability ($r = .85$; two week interval). Evidence for convergent validity was provided by positive correlations with Coopersmith Self-Esteem Inventory (Coopersmith, 1967, $r = .60$), and Health Self-Image Questionnaire ($r = .83$).

RSES was standardized for Turkish samples by Çuhadaroğlu (1985). In the Turkish version (Appendix E), the rating scale ranges from “totally right” to “totally wrong” with items 1, 2, 4, 6, and 7 reversely scored. The correlation between psychiatric interviews and the self-esteem scale was .71. Test-retest reliability of the scale was found to be .75. Çankaya (1997) obtained additional convergent validity evidence. Significant correlation coefficients were found between RSES and Self-Concept Inventory ($r = .26$ for the whole group, $r = .26$ for males, and $r = .24$ for females). In addition, item-total correlations ranged between .40 and .70, whereas Cronbach alpha coefficient was .85. For the present study sample, Cronbach alpha coefficient was found to be .88.

2.2.6. Social Skills Inventory-Short (SSI-Short)

SSI was originally developed by Riggio (1986) as a self-report measure assessing general social competence as well as six components of social skills. SSI provides a total score of overall social competence, and its subscales address respondents' ability to send, receive, and regulate both social and emotional communications. The six components of the instrument are; social expressivity (e.g., “When in discussions, I find myself doing a large share of the talking”); social sensitivity (e.g., “There are certain situations in which I find myself worrying about whether I am doing or saying the right things”); social control (e.g., “I can easily adjust to begin in just about any social situation”); emotional expressivity (e.g., “It is difficult for others to

know when I am sad or depressed”); emotional sensitivity (e.g., “I always seem to know what peoples’ true feelings are no matter how hard they try to conceal them”); and emotional control (e.g.,” People can always tell when I am embarrassed by the expression on my face”).

Test-retest reliabilities for the SSI ranged from .81 to .96, and internal consistency alpha coefficients for the SSI subscales ranged from .62 to .87. The intercorrelations of subscales of SSI ranged from -.46 to .78. For the validity of the scale, Riggio (1986) found that SSI correlated in predicted patterns with the Affective Communication Test ($r = .64$), the Profile of Nonverbal Sensitivity ($r = .12$), the Self-Monitoring Scale ($r = .34$), the Public Self-Consciousness Scale ($r = .22$), Private Self-consciousness Scale ($r = .21$), and Social Anxiety Scale ($r = -.41$).

With the purpose of quick and practical administration, a short-form of SSI consisting of 30 selected items among the 90 items of the original SSI is also available (personal communication, October, 2005). These 30 items represent all six subscales of the original scale, 5 items for each.

The original 90-item SSI has been adapted to Turkish by Yüksel (1997). Four week test-retest reliability coefficient of the Turkish SSI was found to be .92. Cronbach alpha coefficient obtained for the total scale was .85; for subscales, alpha changed between .56 and .82. The study by Yüksel (1997) also provided evidence for criterion validity which revealed that Turkish SSI correlated highly with Self-Monitoring Scale (Snyder, 1974, $r = .63$).

For the present study, the 30-item short version of SSI (SSI-Short) was used (see Appendix F). For this purpose, the researcher identified 30 Turkish items of the original form that represented Riggio’s short SSI items. In other words, the Turkish SSI-Short was prepared by using the original Turkish translation (Yüksel, 1997). Among the original 90-item, the items 6, 16, 20, 21, 25, 26, 28, 29, 32, 34, 36, 39,

43, 45, 47, 49, 50, 57, 58, 59, 60, 61, 69, 70, 71, 73, 78, 80, 83, 90 represent the short version. Among these, items 1, 3, 7, 9, 12, 13, 18, 25, and 27 are reversely scored.

Riggio (personal communication, October, 2005) stated that the short form of the scale might not be very applicable for assessing the six different dimensions of social skills, but rather it is more appropriate for assessing the general level of social competence. He recommended using the short form as a measure of general social skills, or in other words of overall social competence of participants. Since the present study did not attempt to measure the dimensions of social skills, but the overall level of perceived social competence, only the total scores obtained from the short form of SSI was used in the analyses, and the subscale scores were not computed.

2.2.6.1 Reliability and Factor Structure of SSI-Short

Before using SSI-Short for the main study, a pilot study was carried out in order to test the usability of the scale among Turkish university students. A sample of 260 students (143 females, 117 males) selected from different faculties of METU participated in this pilot study, and they filled out the SSI-Short and a demographic information form.

In order to obtain evidence for reliability of the scale, internal consistency estimate was calculated. The Cronbach alpha reliability coefficient of the total scale was found to be .70.

To examine the factor structure of the scale, exploratory factor analysis was performed by using maximum likelihood with Varimax rotation. The initial analysis identified 6 factors with an eigenvalue greater than unity explaining 46 % of the variance. However, only one item loaded on each of the fifth and sixth factors. When the factors were restricted to 4, the factors explained 41 % of the variance, providing

the best item loadings. The first factor explained 15 %, the second explained 11 %, the third explained 7 % and the fourth factor explained 6 % of the total variance. Eigenvalues associated with factors were 4.75; 3.34; 2.35; and 1.93, respectively. The factor loadings and communalities of items for each factor are displayed in Table 2.4.

Table 2.4. Factor Loadings and Communalities of SSI-Short Items

| Item Number | Factor 1 | Factor 2 | Factor 3 | Factor 4 | Communality |
|--------------------|-----------------|-----------------|-----------------|-----------------|--------------------|
| 1 | .81 | -.04 | .04 | .05 | .69 |
| 7 | .78 | -.01 | -.01 | -.06 | .68 |
| 13 | .73 | -.07 | -.05 | .22 | .68 |
| 19 | .70 | -.09 | -.04 | .08 | .68 |
| 25 | .65 | .02 | .11 | .15 | .65 |
| 8 | .65 | -.08 | .07 | .13 | .54 |
| 2 | .53 | -.05 | .21 | .22 | .49 |
| 14 | -.52 | .07 | .26 | .10 | .48 |
| 4 | -.11 | -.70 | -.04 | -.05 | .68 |
| 16 | .36 | -.65 | .25 | -.13 | .66 |
| 10 | .35 | .59 | .03 | .08 | .63 |
| 28 | .35 | .59 | .18 | .09 | .59 |
| 22 | .34 | .52 | .24 | .06 | .55 |
| 17 | -.07 | .50 | .02 | .23 | .51 |
| 5 | .02 | .50 | -.03 | .08 | .49 |
| 6 | .18 | .43 | -.12 | .21 | .48 |
| 9 | -.09 | -.18 | .84 | .08 | .75 |
| 3 | -.28 | -.11 | -.76 | .09 | .68 |
| 15 | .01 | .03 | .72 | .10 | .66 |
| 21 | .20 | .03 | .67 | .18 | .63 |
| 27 | -.16 | -.12 | .59 | -.07 | .54 |
| 20 | -.11 | -.10 | -.45 | .12 | .53 |
| 26 | .05 | -.18 | .40 | .10 | .52 |
| 12 | .13 | .11 | .08 | .72 | .72 |
| 18 | .07 | .06 | .11 | .55 | .66 |
| 23 | .03 | .14 | .10 | .65 | .64 |
| 24 | .11 | -.07 | -.07 | .48 | .64 |
| 30 | .11 | -.14 | .12 | .39 | .54 |
| 29 | .09 | -.07 | .06 | .37 | .53 |

Table 2.4 (continued)

| Item Number | Factor 1 | Factor 2 | Factor 3 | Factor 4 | Communality |
|--------------------|-----------------|-----------------|-----------------|-----------------|--------------------|
| 11 | .08 | .08 | .10 | .35 | .46 |

Because it is beyond the scope of this research to determine the dimensions of the scale, no names were attached to the factors obtained. However, when the items of each factor are examined, it can be seen that emotional sensitivity and social sensitivity subscale items were scattered within other subscales; thus resulting in four dimensions. The factor loadings indicated that all of the items could be used as valid items of the scale since no loading was below .30. Since there appeared 4 factors for the present sample, and that the original SSI-Short was prepared to represent 6 dimensions, it is suggested for future studies that the Turkish SSI-Short should only be used as an overall measure of social competence, or additional factor analytic studies are carried out.

2.2.7 Parental Attitude Scale (PAS)

Parental Attitude Scale (PAS; Lamborn et al., 1991) measures three patterns related to perceived parental attitudes: acceptance/involvement, strictness/supervision, and psychological autonomy. These patterns were constructed by Lamborn et al. based on Baumrind's (1967) framework of different parenting styles. Acceptance/involvement dimension refers to the degree to which individuals perceive their parents as loving, responsive, and involved; strictness/supervision dimension assesses ultimate parental monitoring and supervision of the children; and psychological autonomy dimension refers to non-coercive and democratic discipline of parents.

Responses at the first and the third dimensions are measured on a 4-point Likert-scale; whereas the first two items of the second dimension is measured on a 7-point

Likert-scale, and other items are measured on a 3-point Likert-scale. For acceptance/involvement subscale and psychological autonomy subscale, the lowest score that can be obtained from the scale is 9, and the highest score is 36; for strictness/supervision subscale the lowest score that can be obtained is 8 and the highest score is 56. Items 1, 3, 5, 7, 9, 11, 13, 15, and 17 represent the acceptance/involvement scale; items 2, 4, 6, 8, 10, 12, 14, 16, and 18 correspond to psychological autonomy scale; and items from 19 to 26 correspond to strictness/supervision subscale of the instrument. For the second subscale, all items except 12 are reverse coded.

Rather than having total scores on each dimension, four parental attitudes can also be obtained by intersection of acceptance/involvement, and strictness/supervision patterns of the instrument. These are: authoritative, neglectful, authoritarian, and permissive parenting styles. Parents who score above the median point on these two patterns are called authoritative, those who score under the median point are called neglectful, those who score under the median point on acceptance/involvement but above the median on strictness/supervision pattern are called authoritarian, and lastly those who score above the median point on acceptance/involvement but under the median on strictness supervision are called permissive. For the present study, however, only the total scores of each dimension were used as patterns of parental attitudes.

PAS was standardized for Turkish samples by Yılmaz (2000). Test-retest reliability coefficients and Cronbach alpha internal consistency coefficients were .82 and .70 for acceptance/involvement subscale; .88 and .69 for strictness/supervision subscale; and .76 and .66 for psychological autonomy subscale, respectively. For the criterion validity of the scale, extent to which academic achievement of students varied in terms of perception of parents as having democratic attitudes. The finding that the adolescents, who perceived their parents as more democratic, were more successful was accepted as evidence for criterion validity.

For the present study, because the sample consisted of university students, a few modifications were made on the PAS before using the scale. The present tense item wordings were changed to past tense, and the students were asked to evaluate their parents' attitudes toward them by thinking of their experiences until university years, rather than the present attitudes and behaviors of the parents. With these minor changes, Turkish PAS that would be used for university students was formed (see Appendix G).

2.2.7.1 Reliability and Factor Structure of PAS

Using the present study sample, reliability evidence as well as the factor structure of the scale was obtained.

For reliability, the inter-item reliability estimate was computed and for the total scale Cronbach's alpha was found to be .85. The reliability coefficient for the acceptance/involvement scale was .74; for strictness/supervision .82; and for psychological autonomy .65.

In order to examine the factor structure, the items of the scale were subjected to exploratory factor analysis by using maximum likelihood with Varimax rotation. The scree plot initially yielded 6 factors with eigenvalues greater than 1. However, since the scale is originally a three factor scale, three factors were rotated. The total variance accounted for by these three factors was 34.83 %. The first factor (Acceptance/Involvement) accounted for 12.87 %; the second factor (Psychological Autonomy) explained 11.28 %; and the third factor (Strictness/Supervision) explained 10.68 % of the total variance. Eigenvalues associated with factors were 4.20; 3.45; and 2.39, respectively. The factor loadings and communalities of the items are presented in Table 2.5.

Table 2.5. Factor Loadings and Communalities of PAS Items

| Item Number | Factor 1 | Factor 2 | Factor 3 | Communality |
|--------------------|-----------------|-----------------|-----------------|--------------------|
| 9 | .70 | -.14 | -.11 | .45 |
| 1 | .65 | -.11 | -.10 | .44 |
| 11 | .64 | .02 | -.28 | .44 |
| 3 | .57 | -.07 | -.24 | .37 |
| 17 | .56 | -.29 | -.13 | .41 |
| 7 | .54 | -.08 | -.09 | .31 |
| 15 | .54 | -.07 | -.11 | .31 |
| 5 | .52 | -.34 | -.07 | .46 |
| 13 | .49 | -.07 | -.24 | .32 |
| 2 | .08 | .37 | .01 | .27 |
| 6 | -.10 | .60 | .05 | .43 |
| 8 | -.16 | .58 | .05 | .36 |
| 16 | -.13 | .52 | .05 | .43 |
| 12 | -.37 | .49 | -.03 | .48 |
| 14 | -.20 | .49 | -.01 | .34 |
| 10 | -.06 | .48 | -.04 | .28 |
| 4 | -.10 | .47 | -.08 | .39 |
| 18 | -.16 | .44 | .09 | .28 |
| 26 | -.20 | .11 | .75 | .69 |
| 23 | -.14 | -.18 | .73 | .66 |
| 22 | -.21 | -.14 | .71 | .66 |
| 25 | -.27 | .12 | .68 | .67 |
| 24 | -.10 | .20 | .52 | .47 |
| 21 | -.01 | -.12 | .47 | .44 |
| 19 | .18 | -.15 | .32 | .44 |
| 20 | .18 | -.11 | .31 | .46 |

As can be seen in Table 5, all items of three subscales loaded in an expected fashion, as they are in the original scale (Lamborn et al., 1991), and as reported by other factor analytic studies for the Turkish version (e.g., Çakır, 2001; Yılmaz, 2000).

2.3 Procedure

Data were collected by the researcher during 2005-2006 fall semester in a five week period. A packet including all previously mentioned self-report measures was given to each participant during regular classroom hours. Both the permission of instructors of each class and the consent of the participants were obtained before the administration of the questionnaires. All of the participants volunteered to participate in the study without any incentives. Students were told that they were free not to fill out the questionnaires and participate in the study. To ensure confidentiality and anonymity, participants were not asked for any identifying information.

Although detailed instructions with regard to the scales were included in the questionnaire packets, in order to answer any questions that would arise, the researcher was also present in each classroom where data were collected. The questionnaires were administered in the following order: Revised Cheek and Buss Shyness Scale, Brief Fear of Negative Evaluation, Socially-Prescribed Perfectionism Scale, Rosenberg Self-Esteem Scale, Social Skills Inventory - Short, and Parental Attitude Scale. It took participants approximately 20 minutes to complete the questionnaires. Upon completion of the questionnaires, participants were thanked for their participation.

2.4 Data Analyses

In the present study, for the main purpose, that is, to examine the role of self-presentational variables in predicting and explaining shyness, the theoretical relationships among dependent, independent, and mediating variables were investigated through path analysis by using Lisrel 8.30 software program (Jöreskog & Sörbom, 1993). This section introduces a brief explanation of the path analysis that was employed for the present study.

2.4.1. Path Analysis

Path analysis was used as the main analysis since the purpose of the study was “to test the plausibility of putative causal relationships between one variable and another in non-experimental conditions” (Jöreskog & Sorbom, 1996, p. 158). Several direct and indirect paths between shyness and the proposed self-presentational variables were tested.

As consistent with the proposed theoretical model of the study, shyness, fear of negative evaluation and self-esteem were endogenous variables where fear of negative evaluation and self-esteem were intervening causal (mediator) variables; and socially-prescribed perfectionism, perceived social skills, and perceived parental attitudes were exogenous variables. For clarification, some useful terms regarding path analysis are explained below.

Path model is a diagram relating independent, mediating, and dependent variables (Kline, 1998). Arrows indicate causation between exogenous variables or mediators and the dependent(s).

Causal path to a given variable include the direct paths from arrows leading to it, and correlated paths from endogenous variables correlated with others which have arrows leading to the given variable (Kline, 1998).

Exogenous variable is a variable in a path model with no explicit causes (no arrows going to them, other than the measurement error term). If exogenous variables are correlated with each other, this is indicated by a double-headed arrow connecting them.

Endogenous variable is the variable that does have coming arrows, although arrows may also connect these variables to each other as well. Endogenous variables specifically include mediating causal variables and dependent variables.

Mediator (Intervening endogenous variable) is a variable that accounts for the relationship between the predictor variable(s) and criterion variable(s). In mediational models, the predictor variable has a direct effect on the mediator, which in turn affects the criterion variable (Baron & Kenny, 1986). Thus, the relationship between the predictor and criterion variables can be accounted for by the mediator variable. Mediators have both incoming and outgoing causal arrows in the path diagram.

Path coefficient/path weight is a standardized regression coefficient (beta) showing the direct effect of an independent variable on a dependent variable in the path model. Thus, when the model has two or more causal variables, path coefficients are partial regression coefficients which measure the extent of the effect of one variable on another in the path model controlling for other prior variables, using standardized data or a correlation matrix as input.

To test the paths in the proposed model, a covariance matrix was used to obtain parameter estimations using the maximum likelihood method (Jöreskog & Sörbom, 1996). Multiple goodness-of-fit indices were relied on, since no single indicator has been demonstrated as superior in the path analysis. The indicators were: the chi-square statistic which is actually a measure of overall fit of the model rather than a test statistic, ratio of chi-square to degrees of freedom, root mean square error of approximation, goodness of fit and adjusted goodness of fit indices, and Bentler-Bonett normed fit index (Kelloway, 1998). The explanations of these terms are given below.

Chi Square (χ^2): A significant χ^2 value indicates that the observed and estimated matrices differ. The statistical significance shows the probability that the difference between matrices is related to the sampling variation. A non-significant χ^2 value shows that two matrices are not statistically different (Schumacker & Lomax, 1996). In general, a small chi-square value corresponds to good fit whereas a large χ^2 to a bad fit. A value of zero indicates perfect fit. However, χ^2 is sensitive to sample size. With large samples, trivial discrepancies can lead to rejection of a highly satisfactory model; with small samples, it can be non-significant even in the face of misfits (Loehlin, 2004).

Ratio of Chi-Square to Degrees of Freedom (χ^2 / df): Given that χ^2 alone is not an adequate indicator, usually it is interpreted with its degrees of freedom. Here *df* refers to the difference between known values and unknown value estimates, and the ratio of χ^2 / df determines the identification of a model. As a general rule of thumb, a ratio less than 5 is considered to be acceptable and as the value of the ratio gets closer to 1, the model is accepted to be a fitting model.

Root Mean Square Error of Approximation (RMSEA): RMSEA is relatively insensitive to sample size and it takes into account the error of approximation in the population. A test of significance of the RMSEA is provided by Lisrel and values

less than .08 are considered to be acceptable values (Kelloway, 1998). Steiger (1989) considers values below .10 “good” and below .05 “very good”.

Goodness of Fit Index (GFI): The ratio of the sum of the squared differences between the observed and reproduced matrices to the observed variances is the base of GFI which is provided by Lisrel (Schumacker & Lomax, 1996). Values of GFI range from 0 (poor fit) to 1 (perfect fit), and the values exceeding .90 indicate a good fit to the data (Kelloway, 1998).

Adjusted Goodness of Fit Index (AGFI): The AGFI is the adjusted GFI for the degrees of freedom of a model relative to the number of variables (Schumacker & Lomax, 1996). As GFI, the AGFI has a range from 0 to 1 with values exceeding .90 indicating a good fit to the data.

Bentler-Bonett Normed Fit Index (NFI): This index evaluates the estimated model by comparing χ^2 value of the model to the χ^2 value of the independence model. Fit index lies in the 0 to 1 range, with high values (ideally greater than .90) indicating a good-fitting model (Loehlin, 2004).

CHAPTER III

RESULTS

This chapter presents the results of the study in two separate sections. The first section consists of the preliminary analyses, which specifically involves missing value analysis, the test of normality and the descriptive statistics, gender differences in terms of study variables, and the intercorrelations among the study variables. The second section presents the main analysis of the study, namely path analysis conducted to test the proposed causal model.

3.1 Preliminary Analyses

3.1.1 Missing Value Analysis

Before conducting the analyses, all of the major variables were checked for missing data. Since the Lisrel software program, which runs path analysis, requires a single N, and because the pattern of missing values was random for the present data, cases with missing values more than 5 % were deleted (Tabachnick & Fidell, 2001). Among 539 participants, 497 subjects were left for analyses after this deletion. In order to prevent additional subject loss, cases with missing data less than 5 % were replaced with the mean of the given variable.

3.1.2 Test of Normality and Descriptive Statistics

Given that the statistical analyses that were employed in the current investigation rely on assumptions that variables have normal distributions, data were first assessed to determine the degree of distribution normality by using SPSS 11.5. More specifically, outliers were examined and indices of skewness and kurtosis for study variables were computed. No presence of any outliers was detected. As can be seen

in Table 3.1, each of the study variables manifested a normal distribution, since none of the values greatly deviated from 0.

Table 3.1. Indices of Normality for Study Variables

| Variable | Skewness | Kurtosis |
|-----------------------------------|-----------------|-----------------|
| Shyness | .23 | .03 |
| Self-Esteem | -.34 | -.20 |
| Fear of Negative Evaluation | .19 | -.30 |
| Socially-Prescribed Perfectionism | .20 | -.27 |
| Social Skills | .28 | -.20 |
| Parental Attitudes | | |
| Acceptance/Involvement | .37 | .03 |
| Strictness/Supervision | -.26 | .24 |
| Psychological Autonomy | -.11 | -.39 |

As for the descriptive statistics, the means and standard deviations of the variables by gender and for the total sample were computed. These statistics are presented in Table 3.2.

Table 3.2. Means and Standard Deviations for the Study Variables

| Variable | Female (N = 287) | | Male (N = 210) | | Total (N = 497) | |
|--------------------------------------|---------------------|-------|-------------------|-------|--------------------|-------|
| | M | SD | M | SD | M | SD |
| Shyness | 30.44 | 9.09 | 30.51 | 9.67 | 30.47 | 9.33 |
| Self-Esteem | 32.11 | 4.80 | 31.47 | 5.17 | 31.84 | 4.97 |
| Fear of Negative Evaluation | 32.51 | 10.17 | 32.70 | 9.94 | 32.59 | 10.07 |
| Socially-Prescribed Perfectionism | 50.74 | 17.62 | 50.22 | 17.33 | 50.21 | 17.57 |
| Social Skills | 96.04 | 11.90 | 95.36 | 12.47 | 95.75 | 12.14 |
| Parental Attitudes | | | | | | |
| Acceptance/ Involvement | 17.42 | 4.46 | 17.60 | 4.74 | 17.12 | 4.65 |
| Strictness/ Supervision | 18.21 | 2.61 | 16.57 | 2.90 | 17.52 | 2.85 |
| Psychological Autonomy | 25.74 | 4.09 | 24.11 | 4.61 | 24.41 | 4.33 |

As can be seen in Table 3.2, the means obtained for the shyness levels of the participants was 30.44 for males and 30.51 for males. Statistically similar values were reported by Cheek (as cited in Cheek & Briggs, 1990) who found a mean of 32.4 ($SD = 7.7$) for females and 33.1 ($SD = 8.7$) for males; and by Hopko et al. (2005) who reported means for females and males as 30.8 ($SD = 8.7$) and 31.7 ($SD = 7.4$), respectively.

3.1.3 Gender Differences

In order to see whether scores of participants on each measure differed in terms of gender, a series of independent sample t-test was employed. Results of the analyses

revealed that, participants' scores on shyness ($t = .09, p = .93$), fear of negative evaluation ($t = .21, p = .83$), self-esteem ($t = 1.42, p = .16$), perceived social skills ($t = .61, p = .54$), socially-prescribed perfectionism ($t = .114, p = .11$), perceived parental acceptance/involvement ($t = .106, p = .09$), and perceived parental psychological autonomy ($t = 1.77, p = .06$) did not show any significant differences between male and female participants. The only significant difference encountered was with regard to perceived parental strictness/supervision ($t = 6.64, p < .01$), suggesting that female participants ($M = 18.21, SD = 2.61$) perceived more strictness/supervision in their parents than their male counterparts did ($M = 16.57, SD = 2.90$).

3.1.4 Bivariate Correlations among Study Variables

Given that the primary analysis in this investigation was path analysis, bivariate correlations were computed to depict the interrelationships among all of the study variables. The correlation matrix showing the correlations among the research variables for the entire sample is presented in Table 3.3.

Table 3.3. Intercorrelations among Study Variables for the Entire Sample.

| Variable | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|----------|--------|--------|-------|--------|-------|--------|------|---|
| 1. RCBS | - | | | | | | | |
| 2. RSES | -.48** | - | | | | | | |
| 3. BFNE | .47** | -.33** | - | | | | | |
| 4. SPP | .29** | -.22** | .36** | - | | | | |
| 5. SSI | -.47** | .31** | -.04 | .01 | - | | | |
| 6. A/I | -.23** | .22** | .06 | .10 | .22** | - | | |
| 7. S/S | -.01 | .10 | .08 | -.05 | .11 | -.33** | - | |
| 8. P/A | -.18** | .18** | -.13* | -.27** | .05 | .13* | -.02 | - |

Note. RCBS = Revised Cheek & Buss Shyness Scale, RSES = Rosenberg Self-Esteem Scale, BFNE = Brief Fear of Negative Evaluation Scale, SPP = Socially-Prescribed Perfectionism Scale, SSI = Social Skills Inventory, A/I = Acceptance/Involvement, S/S = Strictness/Supervision, P/A = Psychological Autonomy.

** $p < .001$, * $p < .01$

The correlation matrix helps to determine whether the relationships among the predictors, mediators, and criterion variables conformed to expectations, as well as to assess the presence of multicollinearity. None of the partial correlation coefficients exceeded .50, suggesting that the multicollinearity among the study variables was not severe (Tabachnick & Fidell, 2001).

As can be seen in the correlation matrix displayed in Table 3.3, several patterns emerged. Mostly significant and theoretically expected associations between the dependent variable shyness and other study variables were encountered. The significant correlations among the variables were small to moderate in magnitude ranging from .13 to .48.

Consistent with the expectations, while perceived social skills, self-esteem, and psychological autonomy and acceptance/involvement dimensions of perceived parental attitudes were negatively related to shyness; fear of negative evaluation, and socially-prescribed perfectionism were positively associated with shyness. However,

no significant relationship was obtained between strictness/supervision dimension of perceived parental attitudes and shyness. These results indicated that the lower the participants' perception of their social skills, the greater their shyness levels; the lower their sense of self-esteem, the higher their level of shyness; and the less they perceive parental psychological autonomy, the higher their experience of shyness. Findings additionally suggested that when subjects' fears of receiving negative evaluation increase, their shyness levels also increase. Moreover, the higher the subjects' scores on socially prescribed perfectionism, the higher their shyness levels.

In terms of the relationships between the mediators and the exogenous variables, the results revealed that fear of negative evaluation was positively related to socially-prescribed perfectionism, and negatively to self-esteem and perceived parental psychological autonomy; whereas self-esteem was positively associated with perceived social skills, perceived parental acceptance/involvement and psychological autonomy; and negatively with socially-prescribed perfectionism. These findings showed that high socially-prescribed perfectionism and low self-esteem are associated with greater fears of negative evaluation. In addition poor self-esteem was associated with low perception of social skills, low perceived parental psychological autonomy, high socially-prescribed perfectionism, and high perceived parental acceptance/involvement.

Although no propositions have been made regarding the relations among exogenous variables, the correlation matrix showed that a significant positive relationship between perceived social skills and perceived parental acceptance/involvement; and between socially-prescribed perfectionism and parental psychological autonomy was encountered. In addition, parental acceptance/involvement was positively associated with psychological autonomy, and negatively with strictness/supervision.

Correlations among study variables were also computed separately for males and females. Table 3.4 displays the intercorrelations among study variables for males, and Table 3.5 displays the correlations for females.

Table 3.4. Intercorrelations among Study Variables for Females

| Variable | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|-----------------|--------|--------|-------|--------|------|--------|------|---|
| 1. RCBSS | - | | | | | | | |
| 2. RSES | -.48** | - | | | | | | |
| 3. BFNE | .48** | -.31** | - | | | | | |
| 4. SPP | .30** | -.22** | .35** | - | | | | |
| 5. SSI | -.41** | .26** | .05 | .03 | - | | | |
| 6. A/I | -.19* | .22** | .02 | .06 | .20* | - | | |
| 7. S/S | -.02 | .12 | .01 | -.06 | .09 | -.37** | - | |
| 8. P/A | -.17* | .16* | -.11 | -.25** | .02 | .21* | -.04 | - |

Note. RCBSS = Revised Cheek & Buss Shyness Scale, RSES = Rosenberg Self-esteem Scale, BFNE = Brief Fear of Negative Evaluation Scale, SPP = Socially-prescribed Perfectionism Scale, SSI = Social Skills Inventory, A/I = Acceptance/Involvement, S/S = Strictness/Supervision, P/A = Psychological Autonomy.

** $p < .001$, * $p < .01$

As Table 3.4 presents, for females, significant correlation coefficients among the study variables ranged between .16 and .48.

Table 3.5. Intercorrelations among Study Variables for Males

| Variable | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|-----------------|--------|--------|-------|--------|------|--------|------|---|
| 1. RCBSS | - | | | | | | | |
| 2. RSES | -.51** | - | | | | | | |
| 3. BFNE | .48** | -.32** | - | | | | | |
| 4. SPP | .29** | -.22** | .37** | - | | | | |
| 5. SSI | -.40** | .24** | .05 | .02 | - | | | |
| 6. A/I | -.17* | .20** | .01 | .09 | .20* | - | | |
| 7. S/S | -.02 | .10 | .01 | -.06 | .09 | -.35** | - | |
| 8. P/A | -.15* | .17* | -.09 | -.22** | .02 | .20* | -.03 | - |

Note. RCBSS = Revised Cheek & Buss Shyness Scale, RSES = Rosenberg Self-esteem Scale, BFNE = Brief Fear of Negative Evaluation Scale, SPP = Socially-prescribed Perfectionism Scale, SSI = Social Skills Inventory, A/I = Acceptance/Involvement, S/S = Strictness/Supervision, P/A = Psychological Autonomy.

** $p < .001$, * $p < .01$

As can be seen in Table 3.5, for males, significant correlations among study variables changed between .15 and .51. The correlation matrices by gender, thus, revealed that the correlations were in the same direction for the same variables for both genders.

3.2 Path Analyses for Model Testing

In order to test the partially mediated model depicted in Figure 1.1 (see pp. 54), two separate path analyses were employed using Lisrel 8.30 (Jöreskog & Sörbom, 1993) with maximum likelihood estimation. Path analysis examines the whole model simultaneously by assessing both direct and indirect effects between the variables.

As the model implies, whether the model accounted for the direct effects of socially-prescribed perfectionism, perceived social skills, fear of negative evaluation, and self-esteem on shyness; the direct effects of socially-prescribed perfectionism, perceived social skills, and perceived parental attitudes on both fear of negative evaluation and self-esteem; the direct effect of self-esteem on fear of negative

evaluation; the indirect effects of socially-prescribed perfectionism, perceived social skills, and perceived parental attitudes on fear of negative evaluation; and the indirect effects of socially-prescribed perfectionism, perceived social skills, perceived parental attitudes and self-esteem on shyness were tested. This model is partially mediated since it includes direct paths from exogenous variables to the dependent variable, and mediated paths through the mediators.

The first path analysis was conducted with fear of negative evaluation and self-esteem as mediators between shyness and exogenous variables, namely socially-prescribed perfectionism, perceived social skills, and perceived parental attitudes. The proposed model was tested, first, to see how well the data fitted the model that represented the aforementioned theory. Then, in order to simplify the hypothesized model, a revised model, after the insignificant paths eliminated, was created which was consequently tested by a second path analysis.

The path model summarized in Figure 1.1 (see pp. 54) was fit using Lisrel 8.30. A set of criteria and standards for model fit were calculated to see if the proposed model fit the data. Specifically, chi-square (χ^2), the ratio of chi-square to its degrees of freedom (χ^2 / df), root mean square error of approximation (RMSEA), goodness of fit index (GFI), adjusted goodness of fit index (AGFI), and normed fit index (NFI) which were explained in data analyses section were used as the criteria for model fit.

After assessing overall goodness-of-fit, individual paths were tested for significance. That is, for tests of the proposed relationships of variables, the emphasis moved from model-data fit to inspection of specific parameter estimates and decomposition of the total effects for each exogenous variable into direct and indirect effects.

3.2.1 Results of the Fit Statistics

The aforementioned fit statistics obtained from the path analysis are summarized in Table 3.6.

Table 3.6. Summary of Goodness of Fit Statistics for the Proposed Model (N = 497).

| χ^2 | <i>df</i> | χ^2 / df | RMSEA | GFI | AGFI | NFI |
|----------|-----------|---------------|-------|------|------|-----|
| 8.08 | 3 | 2.69 | .06 | 1.00 | .95 | .93 |

Note. RMSEA: Root Mean Square Error of Approximation; GFI: Goodness of Fit Index; AGFI: Adjusted Goodness of Fit Index; NFI: Bentler-Bonett Normed-Fit Index

Overall, the analysis indicated that the data fit the model, suggesting a high adjustment between the model and the data. First, the chi-square (χ^2) statistics was calculated. As mentioned in the data analysis section, χ^2 is a badness of fit measure in the sense that while a small chi-square corresponds to good fit and a large chi-square to bad fit; a zero chi-square corresponds to almost perfect fit (Jöreskog & Sörbom, 1993). The results showed that the value of χ^2 was 8.08, $p < .05$, which indicated an adequate fit. Besides the χ^2 value, its ratio to degrees of freedom was also calculated. The value of this ratio was $\chi^2 / df = 8.08/3 = 2.69$ which implied a good fit given that generally values less than 3 are expected to be adequate. The ratio in the ideal model would be 1 (Maruyama, 1998).

Since chi-square values depend on sample sizes; in models with large samples, trivial differences often cause chi-square to be significant solely because of sample size. For this reason, many other fit indices were also calculated.

The other important goodness of fit statistics that were calculated and their values were as follows: RMSEA = .06, $p < .05$; GFI = 1.00; AGFI = .95; NFI = .93. These statistics also confirmed the adequacy of the model fit, since in order to provide a good fit, ideally, the value of RMSEA should be less than .08; values of GFI and AGFI should be greater than .90; and value of NFI should be greater than .90. Thus, based on these goodness-of-fit statistics, it was concluded that the model can not be rejected.

3.2.2 Results of Individual Paths

In this section, the results of the individual paths and their significance are given separately. Most of the paths were significant except a few. The path model, with the beta weights (standard coefficients), which express the rate of the effect, for each significant path, is depicted in Figure 3.1, with significant paths in red arrows and non-significant paths in black.

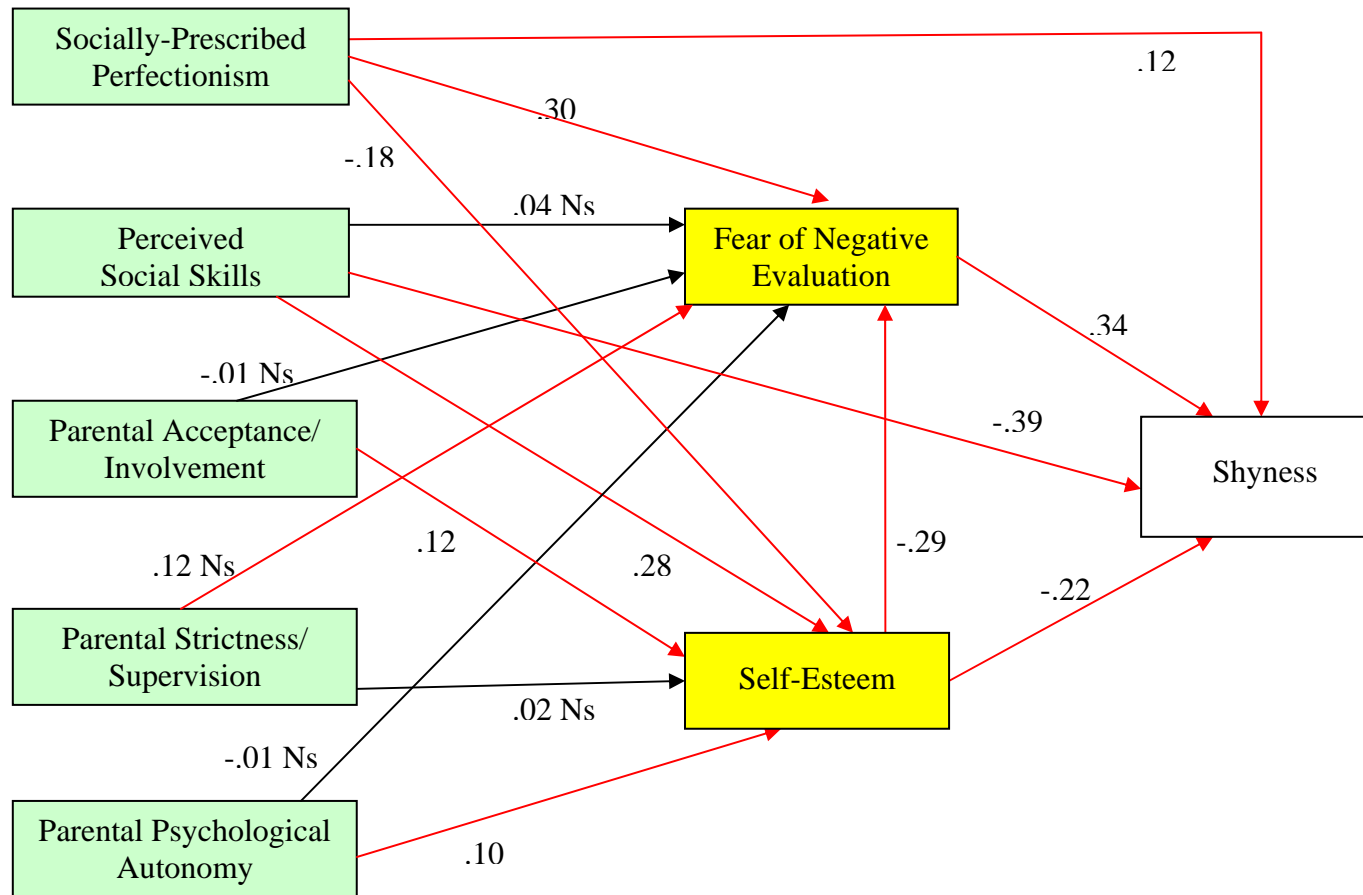


Figure 2. Path Coefficients for the Proposed Causal Model

In the figure, the arrows are used to show the direction of causation and the number above the arrows are beta weights which show the strength of the causation. Path coefficients can be interpreted as standardized beta weights, each estimated after all other paths' effects have been controlled for. Table 12 summarizes the results of path analysis among the model's variables with direct effects of the causal variables.

Table 3.7. Path Weights, Standard Errors, *t*, and *p* Values for Direct Paths for the Proposed Model

| Path | Weight | SE | <i>t</i> | <i>p</i> |
|------------------------------------------|---------------|-----------|-----------------|-----------------|
| Fear of negative evaluation from: | | | | |
| Socially-Prescribed Perfectionism | .30 | .04 | 7.09 | .01 |
| Social Skills | .04 | .04 | .96 | Ns |
| Acceptance/Involvement | -.01 | .04 | -.23 | Ns |
| Strictness/Supervision | .12 | .04 | 2.78 | .01 |
| Psychological Autonomy | -.01 | .04 | -.23 | Ns |
| Self-Esteem | -.29 | .04 | -6.55 | .01 |
| Self-esteem from: | | | | |
| Socially-Prescribed Perfectionism | -.18 | .04 | -4.28 | .01 |
| Social Skills | .28 | .04 | 6.67 | .01 |
| Acceptance/Involvement | .12 | .04 | 2.67 | .01 |
| Strictness/Supervision | .02 | .04 | .47 | Ns |
| Psychological Autonomy | .10 | .04 | 2.39 | .01 |
| Shyness from: | | | | |
| Fear of Negative Evaluation | .34 | .04 | 9.44 | .01 |
| Self-Esteem | -.22 | .04 | -5.92 | .01 |
| Socially-Prescribed Perfectionism | .12 | .04 | 3.48 | .01 |
| Social Skills | -.39 | .03 | -11.41 | .01 |

Note. Ns = Non-significant

Table 3.7 displays both significant and non-significant direct paths to fear of negative evaluation, self-esteem, and shyness with their beta weights, standard errors, and *t* and *p* values. The significant beta weights ranged from .10 to -.39.

The results of the path analysis among the model's variables with indirect effects of the causal variables with the beta weights, standard errors, and *t* and *p* values are summarized in Table 3.8.

Table 3.8. Path Weights, Standard Errors, *t*, and *p* Values for Indirect Paths for the Proposed Model

| Path | Weight | SE | <i>t</i> | <i>p</i> |
|------------------------------------------|---------------|-----------|-----------------|-----------------|
| Fear of negative evaluation from: | | | | |
| Socially-Prescribed Perfectionism | .05 | .01 | 3.58 | .01 |
| Social Skills | -.08 | .02 | -4.67 | .01 |
| Acceptance/Involvement | -.03 | .01 | -2.48 | .01 |
| Strictness/Supervision | -.01 | .01 | -.47 | Ns |
| Psychological Autonomy | -.03 | .01 | -2.25 | .01 |
| Shyness from: | | | | |
| Socially-Prescribed Perfectionism | .16 | .02 | 6.85 | .01 |
| Social Skills | -.07 | .02 | -3.42 | .01 |
| Acceptance/Involvement | -.04 | .02 | -2.01 | .01 |
| Strictness/Supervision | .03 | .02 | 1.98 | .05 |
| Psychological Autonomy | -.04 | .02 | -2.12 | .01 |
| Self-Esteem | -.11 | .04 | -3.25 | .01 |

Note. Ns = Non-significant

As Table 3.8 displays, the beta weights of the significant indirect paths varied between -.03 and -.32.

3.2.2.1. Relationships among Endogenous Variables

The direct and indirect paths regarding the relationships among self-esteem, fear of negative evaluation, and shyness with beta weights, standard errors, and *t* and *p* values are summarized in Table 3.7 and Table 3.8. Figure 3.1 also displays the significant and non-significant paths with standardized path weights.

The results of the path analysis showed that, fear of negative evaluation strongly predicted shyness ($\beta = .34, p < .01$), indicating that greater fears of being negatively evaluated results in greater shyness. Self-esteem was also found to have a significant direct effect on shyness with a beta weight of $-.22, p < .01$, suggesting that decreased self-esteem leads to increased shyness. In addition, findings also confirmed that self-esteem is a significant predictor of fear of negative evaluation ($\beta = -.29, p < .01$). This result suggested the indirect effect of self-esteem on shyness via fear of negative evaluation. This indirect effect had a beta weight of $-.11, p < .01$.

These findings indicated that self-esteem not only directly influenced shyness but also directly affected fear of negative evaluation which in turn affected shyness, and that fear of negative evaluation partially mediated the relationship between self-esteem and shyness.

3.2.2.2 Relationships among Endogenous Variables and Socially-Prescribed Perfectionism

The paths regarding the relationships among socially-prescribed perfectionism, fear of negative evaluation, self-esteem, and shyness are displayed in Figure 3.1, and the direct and indirect paths with standardized beta weights, standard errors, t , and p values are summarized in Table 3.7 and Table 3.8.

As can be seen in Figure 3.1, socially-prescribed perfectionism predicted fear of negative evaluation with a beta of .30, $p < .01$, indicating that high socially-prescribed perfectionism leads to greater concerns of being negatively evaluated. Socially-prescribed perfectionism also produced a significant association with self-esteem. Specifically, socially-prescribed perfectionism predicted self-esteem ($\beta = -.18$, $p < .01$), suggesting that increased socially-prescribed perfectionism leads to decreased self-esteem. The indirect effect of perfectionism on shyness through self-esteem and fear of negative evaluation had a beta weight of .16, $p < .01$; whereas the beta weight for the indirect effect of socially-prescribed perfectionism on fear of negative evaluation through self-esteem was rather small ($\beta = .05$, $p < .01$). Another significant effect was the direct effect of socially-prescribed perfectionism on shyness. That is, socially-prescribed perfectionism predicted shyness directly ($\beta = .12$, $p < .01$).

3.2.2.3 Relationships among Endogenous Variables and Perceived Social Skills

Figure 3.1 displays the coefficients for paths from perceived social skills to fear of negative evaluation, self-esteem, and shyness. The direct and indirect effects of the paths with standardized beta weights, standard errors, t and p values are presented in Table 3.7 and Table 3.8.

The results of the path analysis showed that the path between perceived social skills and fear of negative evaluation was not significant ($\beta = .04$). This finding suggested that perceived social skills was not a significant predictor of fear of negative evaluation.

The other path that was tested was for the relationship between perceived social skills and self-esteem. This path was found to be significant with a strong beta weight ($\beta = .28, p < .01$). However, the indirect effect of social skills on shyness through self-esteem had a small effect size ($\beta = .07, p < .01$). The direct effect of perceived social skills on shyness was also significant with a beta weight of $-.39, p < .01$. This strong effect suggested that perception of lack of social skills resulted in increased shyness.

3.2.2.4 Relationships among Endogenous Variables and Perceived Parental Attitudes

The significant paths between three parental attitudes (i.e., acceptance/involvement, strictness/supervision, and psychological autonomy) and fear of negative evaluation, self-esteem, and shyness are displayed in Figure 3.1. Table 3.7 and Table 3.8 summarize the direct and indirect effects with standardized beta weights, standard errors, t and p values.

In terms of three dimensions of perceived parental attitudes, the findings varied for each dimension. Specifically, the results of the path analysis showed that perceived parental acceptance/involvement did not predict fear of negative evaluation given that beta weight was not significant for this path ($\beta = -.01$). However, acceptance/involvement dimension predicted self-esteem ($\beta = .12, p < .01$). This result indicated that lack of perceived parental acceptance/involvement resulted in decreased self-esteem. The indirect effect of acceptance/involvement on shyness through self-esteem had a beta weight of $-.04, p < .05$, suggesting that self-esteem

mediated the relationship between shyness and perceived parental acceptance/involvement.

On the other hand, for strictness/supervision dimension of perceived parental attitudes, the path to fear of negative evaluation was found to be significant ($\beta = .12$, $p < .01$) indicating that increased perceived strictness/supervision from parents led to increased fear of negative evaluation. The beta weight for the indirect effect of strictness/supervision on shyness through fear of negative evaluation was $.03$, $p < .05$, suggesting the mediator role of fear of negative evaluation between strictness/supervision and shyness. On the other hand, the path from strictness/supervision to self-esteem was not significant ($\beta = .02$).

Finally, with regard to perceived parental psychological autonomy, the path to fear of negative evaluation was not significant ($\beta = -.01$). However, a significant effect of parental psychological autonomy on self-esteem was encountered ($\beta = .10$, $p < .01$), suggesting that perceived parental psychological autonomy led to increased self-esteem. The indirect effect of psychological autonomy on shyness through self-esteem had a beta weight of $-.04$, $p < .05$. Thus, self-esteem mediated the effect of perceived parental psychological autonomy on shyness.

3.2.3 Regression Equations for the Direct Paths

Table 3.9 displays the regression equations computed in testing the direct paths to shyness, fear of negative evaluation, and self-esteem, and related Squared Multiple Correlation Coefficients (R^2) for the proposed causal model.

Table 3.9. Regression Equations and Squared Multiple Correlation Coefficients (R^2) for the Proposed Model.

| Regression Equation | R^2 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| Fear of Negative Evaluation = (-.29) self-esteem + (.30) socially-prescribed perfectionism + (.12) parental strictness/supervision + e^* | .21 |
| Self-Esteem = (-.18) socially-prescribed perfectionism + (.28) perceived social skills + (.12) parental acceptance/involvement + (.10) parental psychological autonomy + e^* | .17 |
| Shyness = (.34) fear of negative evaluation + (-.22) self-esteem + (.12) socially-prescribed perfectionism + (-.39) perceived social skills + e^* | .48 |

* e = error variance

As can be seen in the regression equations given in Table 3.9, fear of negative evaluation was predicted from self-esteem, socially-prescribed perfectionism, and perceived parental strictness/supervision. These variables explained 21 % of the total variance in fear of negative evaluation. Self-esteem was predicted from perceived social skills, socially-prescribed perfectionism, perceived parental acceptance/involvement, and parental psychological autonomy. The total variance explained in self-esteem by these variables was 17 %. Finally, shyness was directly predicted from socially-prescribed perfectionism, perceived social skills, fear of negative evaluation, and self-esteem. These four variables explained 48 % of the total variance in shyness.

3.2.4 The Revised Model

Based on the findings of the first path analysis that were presented in the previous section, the paths that were found to be non-significant were deleted and a revised model was formed. The paths which were deleted were: (a) the path from perceived social skills to fear of negative evaluation, (b) the path from perceived parental

acceptance/involvement to fear of negative evaluation, (c) the path from perceived parental strictness/supervision to self-esteem, and (c) the path from perceived parental psychological autonomy to fear of negative evaluation. Although the proposed model had adequate fit statistics and the present data supported the proposed model, the simplified model with only the significant paths was fit again by using Lisrel 8.30. Path coefficients for the paths of the revised model are presented in Figure 3.2.

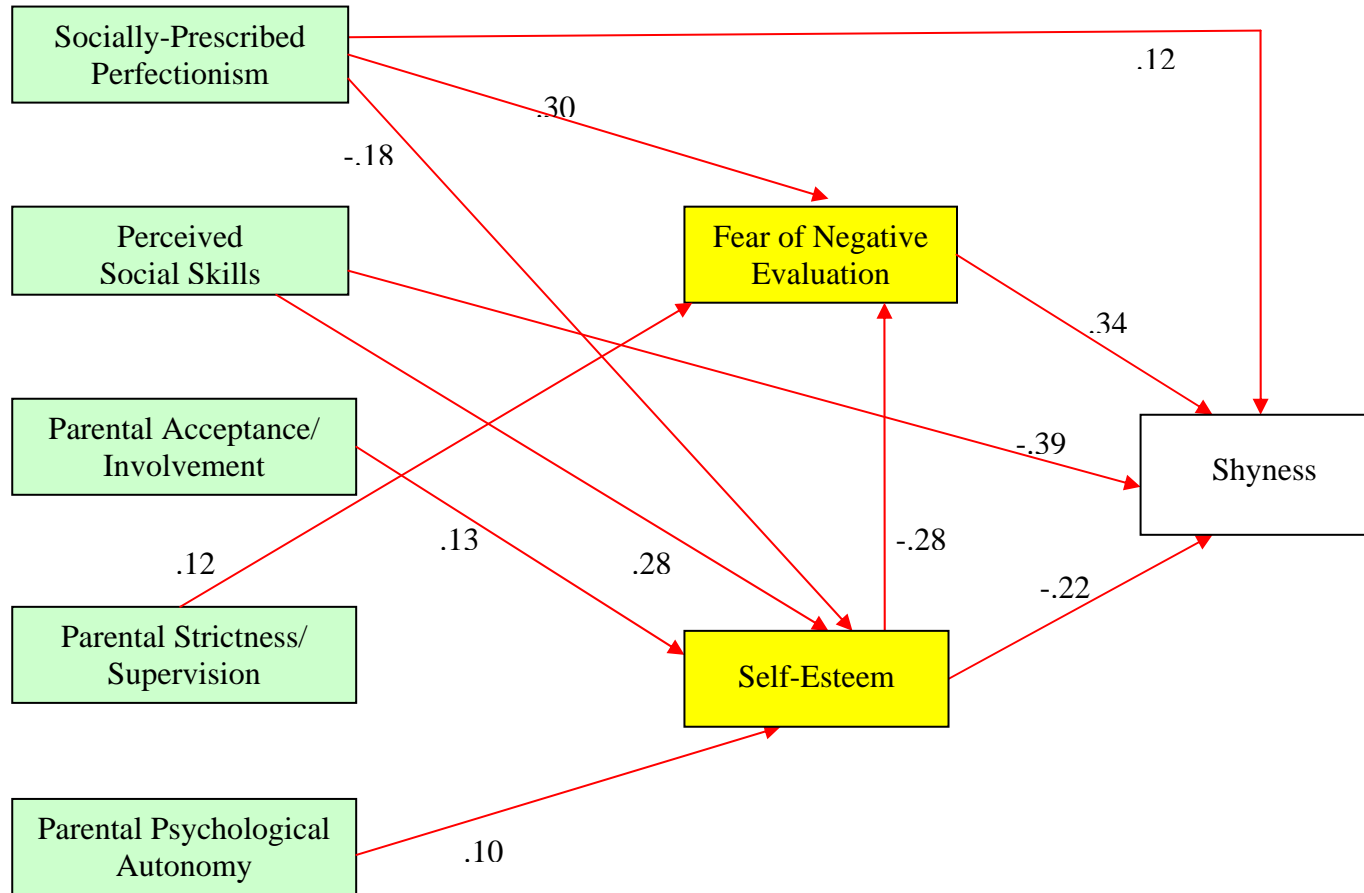


Figure 3. Path Coefficients for the Revised Model

The same fit statistics, namely chi-square, the ratio of chi-square to its degrees of freedom, root mean square error of approximation, goodness of fit index, adjusted goodness of fit index, and normed fit index were calculated for the revised model as well. The summary of these fit statistics is displayed in Table 3.10.

Table 3.10. Summary of Goodness of Fit Statistics for the Revised Model (N = 497).

| χ^2 | <i>df</i> | χ^2 / df | RMSEA | GFI | AGFI | NFI |
|----------|-----------|---------------|-------|------|------|-----|
| 9.30 | 7 | 1.28 | .00 | 1.00 | .98 | .99 |

Note. RMSEA: Root Mean Square Error of Approximation; GFI: Goodness of Fit Index; AGFI: Adjusted Goodness of Fit Index; NFI: Bentler-Bonett Normed-Fit Index.

As Table 3.10 suggests, the results showed that the value of χ^2 was 9.30, $p < .05$, which indicated a good fit. The ratio of χ^2 to degrees of freedom was $\chi^2 / df = 9.30/7 = 1.28$ which is almost equal to the ideal value of 1. The values of the other important fit statistics were: RMSEA = .00, $p < .05$; GFI = 1.00; AGFI = .98; NFI = .99. These results indicated that estimation for the revised model did not change significantly from that of the proposed model although the fit indices were better for the revised model.

Table 3.11 presents the regression equations used to test the direct paths and related Squared Multiple Correlation Coefficients (R^2) for the revised model.

Table 3.11. Regression Equations and Squared Multiple Correlation Coefficients (R^2) for the Revised Model.

| Regression Equation | R^2 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| Fear of Negative Evaluation = (-.28) self-esteem + (.30) socially-prescribed perfectionism + (.12) strictness/supervision + e^* | .21 |
| Self-Esteem = (-.18) socially-prescribed perfectionism + (.28) perceived social skills + (.13) parental acceptance/involvement + (.10) parental psychological autonomy + e^* | .17 |
| Shyness = (.34) fear of negative evaluation + (-.22) self-esteem + (.12) socially-prescribed perfectionism + (-.39) perceived social skills + e^* | .49 |

* e = error variance

Table 3.11 suggests that the regression equations for the revised model with multiple correlation coefficients were almost the same as the ones of the proposed model. Specifically, self-esteem, socially-prescribed perfectionism, and perceived parental strictness/supervision explained 21 % of the variance in fear of negative evaluation; socially-prescribed perfectionism, perceived social skills, perceived parental acceptance/involvement, and perceived parental psychological autonomy accounted for 17 % variance in self-esteem; and fear of negative evaluation, self-esteem, socially-prescribed perfectionism, and perceived social skills accounted for 49 % of the variance in shyness.

CHAPTER IV

DISCUSSION, IMPLICATIONS AND RECOMMENDATIONS

4.1. Discussion

The purpose of the present study was to examine the predictors of shyness within a self-presentational framework (Schlenker & Leary, 1982) in a Turkish sample. Specifically, the current study investigated various social, cognitive, and personality predictors of shyness; and how combination of these variables operated to lead to the experience of shyness in Turkish university students. Using a broad self-presentational framework, a mediational model was tested in which socially-prescribed perfectionism, perceived social skills, and perceived parental attitudes were proposed to interact with the fear of negative evaluation, and self-esteem to predict shyness. The proposed model was tested by using path analysis and as the results summarized in the previous section revealed, several patterns emerged. This section will be devoted to a general discussion regarding the findings obtained from the present study.

4.1.1 Discussion Regarding the Relationships among Endogenous Variables

According to the findings, first, it was found that individual's concerns about receiving negative evaluation from others, and his/her doubts about him/herself were significant direct predictors of shyness. Specifically, high fears of being negatively evaluated and negative self-evaluations, or in other words low self-esteem, resulted in increased shyness. In addition, it was found that fear of negative evaluation was predicted by self-esteem. Thus, the effect of self-esteem on shyness was found to be mediated by approval concerns besides its significant direct effect.

The finding regarding the role of fear of negative evaluation in shyness is consistent with the propositions of contemporary cognitive theories of shyness, and self-presentational model. It has been demonstrated that fear of negative evaluation is an important cognitive component of social anxiety and shyness given that people with high motivation to seek approval and fear disapproval tend to score high in dispositional shyness (Ellis, 1962; Goldfried & Sobocinski, 1975; Leary, et al., 1988; Leary & Kowalski, 1993; Watson & Friend, 1969). Consistent with this notion, researchers have also found that compared to less anxious counterparts, socially anxious individuals are more concerned with making good impressions on others and are more worried about receiving negative evaluation (Greenberg et al., 1985; Maddux et al., 1988; Winton et al., 1995). In the present study, fear of negative evaluation predicted shyness with a strong effect size, suggesting that concerns over approval/disapproval from others play a significant role in the experience of shyness. This finding is in line with the previous studies which have shown that fears of being negatively evaluated were indicators of shyness and social anxiety (e.g., Cowden, 2005; Jackson et al., 2002).

The inverse relationship between self-esteem and shyness has also been cited as one of the most consistent findings in the relevant literature (Cheek & Buss, 1981; Cheek & Melchior, 1990; Crozier, 1995; Fehr & Stamps, 1979; Jones et al., 1986; Miller, 1995). These studies demonstrated that shy people tend to have a low opinion of themselves. Self-esteem has also been found to be an antecedent of shyness in some studies (e.g., Bohrnstedt & Felson, 1983; Miller, 1995), indicating that poor self-esteem predicts the presence of shyness. The role of self-esteem in shyness was similarly revealed in studies conducted with Turkish samples as well (Gökçe, 2002; Yüksel, 2002).

Moreover, the contribution of self-esteem to shyness via fear of negative evaluation is not surprising considering the propositions of self-presentational perspective and related research findings. That is, individuals with low self-esteem worry about how they are evaluated by others due to their feelings of low self-worth (Leary & Kowalski, 1995). This proposition was confirmed by another study in which fear of

negative evaluation was found to partially mediate the relationship between self-esteem and shyness (Kocovski & Endler, 2000). The results of the present study, on the other hand, revealed that not only approval motivation is an antecedent of shyness but also individual's poor evaluations of him/herself, and that self-esteem is a determinant of approval concerns.

People who have low trait self-esteem tend to experience more shyness, given that due to their feelings of being less valued by other people, they are more concerned about the impressions they are making than people who have higher self-esteem (Leary, 1999). A novel perspective on self-esteem and a refinement of self-presentational theory, namely sociometer theory (Leary, 1999; Leary & Downs, 1995) posits that self-esteem may be conceptualized as a subjective indicator of the degree to which the individual is being valued and accepted versus devalued and rejected by others. The motive of individuals to maintain self-esteem functions to minimize the likelihood of rejection (Leary, Tambor, Terdal, & Downs, 1995). Therefore, poor self-esteem is likely to result in concerns over evaluation by other people. However, the finding that self-esteem predicted shyness regardless of the influence of fear of negative evaluation is consistent with Miller's (1995) finding that shyness is uniquely related to self-regard above and beyond the effect of concerns over approval.

4.1.2 Discussion Regarding the Relationships among Endogenous Variables and Socially-Prescribed Perfectionism

Another finding obtained from the study regards the role of perceived need to attain standards and expectations prescribed by significant others, namely socially-prescribed perfectionism, in predicting shyness. Consistent with the cognitive theories and the self-presentation approach, the belief that others have high social standards for the individual, leads to increased shyness in the form of anxiety and inhibition (Alden et al., 2002; Frost, 2001). The present study provided support for this view by revealing that socially-prescribed perfectionism is a significant predictor

of shyness. That is, perceiving that others have high expectations for oneself, evaluate him/her stringently, and exert pressure on him/her to be perfect, results in increased shyness. Past research demonstrated the positive relationship between social anxiety and socially-prescribed perfectionism (Flett et al., 1996; Hewitt & Flett, 1991). Results from this study supported past theory and research in that shy people tend to think that other people evaluate them against perfectionist standards, thus being likely to endorse socially-prescribed perfectionist beliefs (Alden et al., 1994; Clark & Wells, 1995).

On the other hand, socially-prescribed perfectionism was also a significant predictor of both fear of negative evaluation and self-esteem. That is, beliefs that others expect and evaluate the individual against some standards, leads to increased concerns over negative evaluation from other people as well as poor self-worth. The inverse relationship between socially-prescribed perfectionism and self-esteem, and the positive association with fear of negative evaluation have been demonstrated by past studies (Ashby & Rice, 2002; Blankstein et al., 1993; Flett et al., 1996; Hewitt & Flett, 1991).

Overall, the findings obtained from the present study suggested that, individuals who unrealistically believe that others hold high standards for them, tend to evaluate themselves negatively and fear other people's disapproval. Then, these cognitions result in heightened shyness on the part of the individual. Despite its direct prediction, what emerged as a pattern in terms of its effects is that the effect of socially-prescribed perfectionism on shyness was much stronger when it is mediated by evaluative concerns. It can be concluded then that socially-prescribed perfectionism is an important antecedent to and determinant of approval/disapproval concerns.

The notion that, social performance standards are antecedents of self-esteem and fear of negative evaluation, has been maintained in propositions of several theories including perfectionism (Hewitt & Flett, 2002), sociometer (Leary & Downs, 1995), self-presentation (Schlenker & Leary, 1982), and self-efficacy (Bandura, 1986). The

common argument of all is that these two cognitions are strongly tied to people's beliefs about how they are evaluated and how accurately they perceive expectations of others for their own performance. That is, people who hold unrealistic beliefs about others' evaluations tend to have poor self-esteem and concerns over approval/disapproval.

Generally, it has been argued that one personality trait can manifest itself quite differently depending on the levels of other traits or cognitions (Cheek & Briggs, 1990). As the results suggested, the degree to which socially-prescribed perfectionism influences shyness may vary depending on two cognitions that affect self-presentational concerns, namely fear of negative evaluation and self-esteem. Literature suggests that while having high expectations for oneself may motivate an individual to perform well under some circumstances; unrealistic standards are likely to result in failure (Pacht, 1984). When the individual's unrealistic beliefs about the aforementioned social standards interact with perception of low self-worth and high concerns about being negatively evaluated, the resulting experience is usually considered maladaptive since the individual will be more likely to avoid social interaction (Alden et al., 2002; Carver & Scheier, 1986). This may lead to perceived failure by others' standards and poor self-image. As Leary (1986) argued, the very likely experience will be being overly apprehensive in social situations, and even avoiding interaction altogether, pointing out the importance of paying attention to excessive self-presentational concerns (Beidel & Turner, 1998; Schlenker & Leary, 1982).

4.1.3 Discussion Regarding the Relationships among Endogenous Variables and Perceived Social Skills

The relationship between perceived social skill level and shyness was also of great interest for the present study. The results of the study showed that perceived social skills predicted shyness indicating that perceiving skill deficits in oneself results in the experience of shyness. Besides, social skills failed to predict fear of negative evaluation, but it was a significant predictor of self-esteem. This finding suggested

that people who perceive themselves as possessing low social competence negatively evaluate themselves, and this evaluation leads to increased shyness. However, considering the mediating role of fear of negative evaluation between self-esteem and shyness, it was revealed that social competence also indirectly leads to fear of negative evaluation via self-esteem. Therefore, it can be concluded that people who perceive themselves as lacking adequate social skills are not concerned about the evaluations of other people in the first place, but their feelings of low self-worth is the determinant of their basic approval concerns, thus showing more support for a self-evaluation model (Clark & Arkowitz, 1975) rather than a cognitive model in which approval concerns and fears of negative evaluation purely play fundamental roles (e.g., Bandura, 1986; Beck, 1985).

Self-presentational theory would argue that social skill deficits affect shyness indirectly by leading people to doubt that they have the interpersonal resources to convey desired impressions of themselves to other individuals (Leary & Kowalski, 1995; Schlenker & Leary, 1982). This proposition is consistent with the acquired link between perceived social skills and self-evaluations in the present study. That is, people who perceive themselves as lacking certain social skills are also likely to feel worthless. In the present study, self-esteem was significantly predicted from social skills, supporting the aforementioned aspect of self-presentation. The finding that skill deficits lead to lowered self-evaluations supports a cognitive component operating as an important variable in the model of shyness (Cheek & Melchior, 1990; Maddux et al., 1988; Rapee & Lim, 1992), whether poor social skills are real or imagined. On the other hand, evaluative concerns were found to be unrelated to perceived social competence given that social skills did not predict fear of negative evaluation, indicating that the belief in lack of social competence does not directly result in concerns over negative evaluation. Rather, as the findings suggested, this belief leads to either negative self-evaluations or directly to the experience of shyness.

The direct effect of perceived social skills on shyness was demonstrated with the past research as well. Jackson et al. (1997), for instance, showed that shyness is predicted

by perceived interpersonal skill deficits. Miller (1995) and Prisbell (1991), similarly, revealed the significant contribution of lack of social skills to the experience of shyness. McCullough et al. (1994) reported that individuals, who were overly submissive in social situations showed inhibited, introverted behaviors. In sum, it can be suggested that for the present sample, perceiving a deficit in social skills is actually a stronger determinant of the experience of shyness than concerns over receiving negative evaluation and poor self-evaluations.

As noted before, there are confounding and unclear findings in the literature in terms of the role of social skills in shyness (Stravynski & Amado, 2001). This picture arises both from conceptual issues regarding social skills and from the debates on accurate assessment of social competence. It has been argued that it is very difficult to distinguish between the actual social skill deficits and the perceived deficits, as well as to rely on a single measure, whether self-report or behavioral, that is precise in assessing the actual social skills (Glass & Arnkoff, 1989). Whether the findings obtained from the measure of social skills actually reflected participants' social competence or their imagined social skill levels is not clear given that participants reported their perceptions of their social skills, and that objective ratings were not used.

4.1.4 Discussion Regarding the Relationships among Endogenous Variables and Perceived Parental Attitudes

The last line of findings concerns the degree to which fear of negative evaluation and self-esteem are predicted from three different perceived parental attitudes; and the indirect effect of these parental attitudes on shyness through the mediator roles of self-evaluations and approval concerns. The results specifically showed that perceived parental acceptance/involvement predicted self-esteem but not fear of negative evaluation; perceived parental strictness/supervision predicted fear of negative evaluation but not self-esteem; and perceived parental psychological autonomy predicted self-esteem but not fear of negative evaluation. These findings suggested that when individuals perceive lack of acceptance/involvement from their

parents they tend to have negative self-evaluations, i.e., low self-esteem, which in turn results in shyness. In addition, when strictness/supervision is perceived, individuals have increased concerns over being negatively evaluated which, again, leads to increased experience of shyness. Finally, individuals who perceive lack of parental psychological autonomy also tend to have lowered self-esteem and consequently increased shyness.

Research has shown that the primary cause of low self-esteem is a history of disapproval or rejection by family. Parents who are rejecting or indifferent toward their children tend to foster low self-esteem than parents who are accepting and affectionate (Baumrind, 1989; Coopersmith, 1967). Similarly, researchers have identified the familial predictors of fear of negative evaluation as different practices that parents use in raising their children. In general, children who are concerned about receiving negative evaluation tended to have parents who used strict and harsh modes of child rearing rather than parents who are accepting and providing enough autonomy for the child (Allaman et al., 1972; Bögels et al., 2001). In the present study, aspects of these arguments were supported in that while self-esteem was predicted by acceptance/involvement and psychological autonomy provided by parents, fear of negative evaluation was predicted from parental strictness/supervision, suggesting that perceived parental attitudes either influence the level of self-evaluations or approval concerns that directly lead to the experience of shyness.

The relationship between several parenting behaviors and attitudes and shyness has been shown by many studies (e.g., Bruch, 1989; Hummel & Gross, 2001; Nelson, Hart, Wu, Yang, Roper, & Jin, 2006). However, the indirect influence of parental attitudes on shyness through cognitions has been a neglected focus in shyness research. This study demonstrated the mediating role of self-esteem and fear of negative evaluation between different perceived parental attitudes and shyness. However, the variances in fear of negative evaluation and self-esteem explained by parental attitudes were rather small compared to the effects of social competence and socially-prescribed perfectionism. This may be attributed to the relative importance

of more stable traits and beliefs in cognitions over socialization processes for the present sample.

4.1.5. General Discussion

As a general conclusion, it can be argued that, the present study highlighted important aspects of shyness as experienced by Turkish university students. Within a self-presentational framework, several contributors of shyness as well as their structural relationships were revealed. The present study also showed that both traits and cognitions play important roles in the experience of shyness. That is, individuals not necessarily have to endorse maladaptive cognitions to experience shyness, but their more stable traits such as social skills may lead to shyness. Cognitions, namely fears of others' evaluations and negative self-evaluations strengthen the effect of the traits on shyness, but the role of parental factors, are not as central to the development of one's self-evaluations and approval concerns as individual differences. The present study validated the notion that various psychological, cognitive, and social factors do interact to account for the experience of shyness. The shy individuals, therefore, find themselves having to deal with a variety of self-presentational concerns.

The descriptive statistics, however, indicated that the participants of the present study can be regarded as individuals who do not experience extreme levels of shyness. Generally, studies (e.g., Lorant et al., 2000) have documented that when people experience social discomfort in the form of a relatively pathological state, shyness is usually reported in greater degrees by the subjects than the ones found for the present sample. Thus, it can be argued that although participants of this study were only moderately shy, and that shyness was not experienced excessively, it was revealed that social-evaluative concerns are central to people experiencing shyness. Most of the studies (Clark & Arkowitz, 1975; Davison, & Zigelboim, 1987; Hartman, 1984; Lucock, & Salkovskis, 1988), which reported the shy individuals' maladaptive thinking patterns such as fear of being negatively evaluated and negative self-evaluations, studied with relatively more socially-anxious subjects who can be

considered as belonging to clinical groups. Given that the participants of the present study were not that anxious compared to other study samples, it can further be argued that shyness experienced in moderate levels is also affected by the aforementioned maladaptive cognitions.

In addition, as noted before, the extent to which the combination of various self-presentational variables predict shyness has been a neglected area in shyness research using self-presentational perspective, since a few attempts have been made to achieve this (e.g., Jackson et al, 1997). The findings of this study partially filled this gap by revealing that not only a single self-presentational concern is a factor leading to the experience of shyness, but also the interaction of various concerns has the potential to result in this experience.

4.2 Implications

Findings from the present study can provide valuable information regarding the acknowledged links between shyness and several predictors. The information can especially be useful in terms of counseling practices, in that counselors and other practitioners may use this research to guide their work with shy university students.

Considering the findings from the present study that both tendency to evaluate oneself negatively and to endorse concerns over receiving negative evaluation from other people, an application of an intervention that attempts both to increase one's self-esteem and lower approval concerns and heightened anxiety can be of great benefit for the shy individuals (Cheek & Melchior, 1990). It has been shown that clients who tend to have rigid approval/disapproval schemas and/or who consistently evaluate themselves negatively, usually benefit from interventions designed to change specific cognitions that lead to anxiety and inhibition (Clark & Arkowitz, 1975; DiGiuseppe et al., 1990; Heimberg et al., 1985).

With regard to fears of being negatively evaluated, interventions usually aim at reducing approval motivation. The clients whose concern with approval is

excessively high might benefit from cognitive therapies which are specifically designed to reduce the importance placed on others' evaluations (Ellis, 1969; Glass & Shea, 1986). Cognitive structuring techniques also achieve the same goal by teaching clients how to identify and modify their assumptions about the importance of others' evaluations (Beck, 1976; Clark & Wells, 1995; Rapee & Heimberg, 1997). In terms of raising self-esteem, practitioners may help clients to change their unrealistically negative views of themselves. These perceptions can be changed either directly through cognitive modes of interventions, or by providing clients with successful experiences (Beck et al., 1985; Clark & Wells, 1995). In fact, self-esteem programs are more successful when they include features that would be expected to increase real or perceived social acceptance (Leary, 1999). Given that low self-esteem results in greater levels of shyness, as documented in the present study, these programs can be utilized to help these individuals increase their sense of self-worth.

One of the important findings obtained from the present study concerns the contribution of perceived skill deficits to shyness. Some studies have found that if the individuals lack adequate interpersonal skills, social skills training is effective in enhancing social behavior and reducing social anxiety (Avery, Haynes-Clements, & Lamke, 1981; Barrow & Hayashi, 1980; Bellack & Hersen, 1979; Christiansen & Arkowitz, 1974; Curran, 1977; Wlazlo, Schroeder-Hartwig, Hand, Kaiser, & Munchau, 1990). The training usually includes various components of social competence such as verbal and non-verbal communication, direct instruction, role-playing, self-disclosure, and behavioral rehearsal. However, given that socially anxious and shy people usually underestimate their interpersonal social competence, first, the practitioners should be careful in the assessment process such that the client's actual level of social skills should be determined as well as their perceptions of themselves, in other words their cognitions involved in their self-assessments.

It is believed that since participants of the present study who reported having low social competence also tended to have a low opinion of themselves, they can be helped better by cognitive-behavioral approaches that is targeted at both real and perceived skill deficits (Alden & Cappe, 1986; Hartman & Cleland, 1990). From a

self-presentational perspective, increasing the level of social skills will be helpful in reducing social anxiety, because it increases the individual's confidence that he/she will come across more acceptably (Leary & Kowalski, 1995). Thus, it is suggested that the skills targeted for remediation should be the ones that the individual believes will help him/her make better impressions on other people (Gambrill, 1996; Leary & Atherton, 1986). This requires a successful assessment process on the part of the professional so that clients' specific self-presentational deficiencies can be understood accurately. Girodo, Dotzenroth, and Stein (1981) similarly suggested that social skills training may be effective for overcoming shyness; however, their contention is that shy individuals need to be shown that successful social outcomes are contingent on their ability. Thus, if the shy individuals believe that application of these social skills produce successful interpersonal changes, then it is likely that they experience an increase in self-esteem and reduction in social anxiety.

The present study also found that socially-prescribed perfectionism has substantial contribution to the experience of shyness either directly or by influencing concerns over evaluation and negative self-evaluations. Although in some situations perfectionism is considered as having adaptive features (Flett et al., 1991; Flett & Hewitt, 2002), as discussed before, extreme forms of perfectionism are usually maladaptive. In fact, it has been shown that high standards for oneself is potentially adaptive whereas degree of distress experienced when one's perceived performance fails to meet one's perfectionist standards is a negative dimension which usually leads to low self-worth and social anxiety (Ashby et al., 2006). Given that excessive social performance standards result in shyness, the treatment approaches should include identifying and re-shaping beliefs that others expect one to achieve unrealistic standards of social behavior (Alden et al., 2002). Socially-prescribed perfectionism was also found to be a predictor of fear of negative evaluation and self-esteem. Therefore, these links may help practitioners identify the specific concerns and thought patterns of shy clients. However, the practitioners should be careful in the assessment process in order to accurately tap the type of perfectionist standards of the clients.

An additional application of the findings may be related to the the family, especially parental factors in influencing the self-presentational concerns of university students. Practitioners may try to identify family atmospheres that produce more positive developmental experiences for shy individuals such as being accepting and involving in their concerns; and reduce the negative consequences of the anxiety and inhibition such as harsh modes of parenting and attitudes that limit the autonomy of the youth (Martin & Thomas, 2000). By including parents in the intervention process, the counselor may help them employ and maintain proper parenting behaviors and attitudes so that the development of social skills, relationships, and self-esteem can be encouraged on the part of the children (Dill and Anderson, 1999).

In general, a useful suggestion of self-presentational approach to shyness is that treatments for dispositional shyness will be most effective when they are tailored to the personality dispositions associated with a particular individual's self-presentational worries (Schlenker, & Leary, 1982). As the present study revealed, there are various factors that may lead to shyness, but that the precipitating factors involve concerns with how one is appearing to others. Consequently, careful attention to the specific nature of a client's self-presentational concerns can enhance treatment effectiveness in counseling settings. Client-treatment matching, therefore, is crucial in helping clients overcome their concerns related to shyness (Leary, 1987); as well as taking clients' predispositions into account to achieve maximal therapeutic gains whether or not the counselor or therapist uses cognitive, behavioral, or social skills interventions (Arnkoff, Glass, Shea, McKain, & Sydnor-Greenberg, 1987).

Since it was found that shy individuals are very much concerned about other people's evaluations, in the early stages of treatment, clients may behave in ways similar to how they behave in real life social situations which evoke anxiety. That is, they may manifest fears of receiving negative evaluation from the counselor. Therefore, practitioners need to be prepared for potential resistance and the safety behaviors that are used as protective self-presentation by the client; and they should be aware of the fact that these clients will be more willing to endorse open self-presentations in later stages of the counseling process.

This study supported the importance of social-evaluative concerns in eliciting shyness. However, whether these features of shyness make a good or bad impression depends on how they are viewed (Leary & Buckley, 2000). In this respect, educative interventions that help people distinguish between situations in which it is reasonable to be concerned with others' impressions of them, and those in which it is not, may be useful in lowering the general level of anxiety (Leary, 1987). Especially in school settings, where large groups should be served in terms of counseling services, psycho-educational interventions may be uniquely beneficial to shy clients since groups are means of providing a social training laboratory in the interpersonal setting most problematic for such clients (Barrow & Hayashi, 1980; Biemer, 1983; Haynes-Clements & Avery, 1984; Kelly & Keaten, 1992). As Alden and Cappe (1986) claimed, when shy individuals practice interpersonal skills in a group, they can shift their attentional focus to others and the task; therefore they are able to reduce anxiety and social dysfunction. Moreover, groups provide a nonthreatening environment in which some social skills can be developed (Avery et al., 1981).

4.3 Recommendations

Considering the lack of systematic studies, shyness research in Turkey is unfortunately a neglected topic in need of urgent attention and effort in terms of thorough investigation. It is believed by the researcher that the present study is a preliminary one with an attempt to investigate shyness within a broad theoretical framework. Based on the present study, following are some recommendations for future research.

This study was an attempt to test some aspects of self-presentational model of shyness by examining its antecedents. There is no doubt that factors, that may influence self-presentational concerns of individuals is not restricted to the ones that have been conceptualized and investigated in the present study. The flexibility of the self-presentational approach provides researchers with the opportunity to examine many situational and dispositional factors which may account for the individual

differences in the experience of shyness. Although the variances in shyness, fear of negative evaluation, and self-esteem accounted for by the variables used in the present study were not small, the rest could be explained by several other factors. These may be dispositions such as self-consciousness (Buss, 1984), social self-efficacy (Smith & Betz, 2000), and positive and negative affect (Watson, Clark, & Tellegen, 1988); or social factors such as social skills and social anxiety level of parents (Bandura, 1973; Filsinger & Lamke, 1983), beliefs and personality of parents (Mills & Rubin, 1993); and interactions with peers. Future studies may include these variables to understand their role in shyness and related variables. This can also be achieved by integrating other complementary theories. There have been attempts, for instance, to integrate self-presentational theory with self-efficacy (Leary & Atherton, 1986), sociometer (Leary & Downs, 1995), social exclusion (Baumeister & Tice, 1990), and attribution (Arkin et al., 1980) theories which all served to explain different aspects of and underlying mechanisms operating in the experience of shyness. Such integrations are especially fruitful in providing researchers with broader frameworks and different methodologies. In addition, despite the merits of self-presentational theory, it has been proposed that not every instance of self-presentational concern causes individuals to experience shyness. Thus, other variables may account for the situations in which self-presentation difficulties do and do not cause people to feel anxious and inhibited, and integration of different theories is believed to partially fill this gap.

Assessment with regard to shyness and its varying forms is a critical but a controversial issue. The debates and problems around measurement of shyness arise from the conceptual difficulties given that it is not very clear what components exactly constitute shyness and to what extent shyness and other similar constructs overlap or diverge. In the present study, a measure assessing the overall level of dispositional shyness was used (Cheek & Buss, 1981). However, the extent to which self-presentational factors are related to dimensions of shyness such as behavioral, affective, and cognitive can not be ascertained from the findings of this study. Future research may assess various forms of anxiety and inhibition such as communication apprehension, dating anxiety, social anxiousness, and embarrassment, and to what

extent they are predicted from self-presentational factors. In order to achieve this, reliable and valid measures assessing forms of social discomfort are needed.

Another similar controversy in terms of the confounding constructs is to what extent shyness shares similarities and is distinct from the clinical condition social phobia. Research shows that they do have similar features as well as differences (Turner et al., 1990); however, the situation for the Turkish samples is yet to be known. For the present study, whether the participants also met the criteria for a clinical condition of social anxiousness was unknown. Future studies may use measures of social phobia in order to differentiate between clinical samples and the normally functioning ones.

The present study assessed the parental attitudes in terms of three different aforementioned dimensions. On the other hand, these three dimensions of parental attitudes are usually used to identify different parenting styles. Higher scores on strictness/supervision as well as higher scores on acceptance/involvement are used to identify authoritative parenting style (Lamborn et al., 1991) which is regarded as the one fostering competence, achievement, social development, self-esteem, and adjustment in children (Forehand & Nousiainen, 1993; Maccoby & Martin, 1983). However, although it has been stated that control was not perceived as rejection in Turkish families (Kağıtçıbaşı, 1970), Akyıl (2000) found that rejection is positively correlated with overprotection, concluding that samples from more educated segments of Turkey may value independence, autonomy, and individuation more and perceive parental attitudes which inhibit these values as rejecting. The same pattern may be true for the present sample as well. In order to clear the picture, the interpretation of the findings regarding parental attitudes should be used cautiously and it is recommended that future research considers focusing on and assessing different types of parenting styles when addressing their role on shyness. Moreover, given that the perception of fathers and mothers by children may be different in terms of attitudes and behaviors (Rohner & Khaleque, 2004), it may be useful to examine aspects of shyness with regard to parental influences by including separate measures for maternal and paternal attitudes or behaviors.

In terms of social skills, this study used a self-report measure which attempts to tap the perception of individuals with regard to their social competence. In shyness literature, the inconsistency in social skill aspects of shy people partly arises from the way social skills are measured. Studies that have shown social skill deficits of shy people have asked participants to self-report their social skills as the present study did. However, this may be a biased way of assessment given that shy people tend to underestimate their level of competence due to their maladaptive cognitions (Cartwright-Hatton et al., 2003). Thus, future research may consider using other measures such as ratings of judges or pure behavioral assessments such as behavioral performance measures in order to see the association of these ratings with shyness as compared to self-reported skill levels so that the real and imagined skill differences can be obtained.

The present study was a non-experimental study in which all assessments were based on self-report measures and no manipulations were made. It is actually very difficult to test all aspects of self-presentational concerns of individuals with non-experimental studies. Most of the studies that have been conducted in relation to interpersonal and social behaviors have been experimental in nature (e.g., Barrios, 1983; Cacioppo et al., 1979; Curran et al., 1980; De Paulo et al., 1990; Leary, 1986; Leary et al., 1988). These studies either made subjects imagine a specific interpersonal encounter or engage in a real life situation by means of role-playing. Studies from this perspective typically involve laboratory manipulations of perceptions and behaviors of participants. Studies of shyness and social anxiety relying on retrospective self-reports may be subject to distortion, and also they may inaccurately reflect the processes that occur during social-evaluative contexts such as involving threat episodes and conditions. Future investigations in which subjects are exposed to social interactions and several manipulations are employed may provide a useful opportunity for more accurately assessing the behaviors and emotions of the subjects involved. Then, assessment of self-presentational thoughts and behaviors of shy people as occurring in social contexts, how these people modify their behaviors, and their self-presentational efficacy expectations can be examined in a more detailed fashion.

Another recommendation could be with regard to the sample, in that the present study participants consisted of undergraduate university students from a reputable and competitive university, and thus the findings can be generalized only to the similar populations. In the future, the experience of shyness should be examined in varying populations such as different age and SES populations from different segment of the society so that comparisons and contrasts can be made between various samples.

In order to see the effectiveness of implications of self-presentational approach, studies suggesting shyness intervention programs need to be conducted as well as the ones in which these programs are actually implemented with the samples these programs are designed for. However, these studies should be based on several empirical research findings given that it is not recommended that one intervention model is borrowed and applied in other cultural contexts without any modifications. Rather, the usability and validity of these models should be assessed before the applications. Thus, it is necessary for researchers in our culture to conduct more research with regard to shyness in terms of theoretical perspectives that may account for different aspects of the construct.

Last but not least, it is believed by the researcher that shyness research necessitates an effort working with various disciplines as well as different perspectives from psychology. It would be the most effective when concepts and methods from social, personality, and clinical psychology are borrowed and used in an integrated fashion as perspectives such as self-presentation has achieved. In addition, considering the interpersonal and social nature of shyness, and that representation of self as a social object lies at the heart of shyness research (Buss 1980, Crozier 1990; Leary 1996), concepts and propositions from other disciplines such as sociology may be of relevance and importance to the topic as Goffman (1959) who is an influential sociologist has pioneered the work on self-presentation.

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APPENDICES

APPENDIX A

DEMOGRAPHIC INFORMATION FORM (DEMOGRAFİK BİLGİ TOPLAMA FORMU)

Sevgili Öğrenciler,

Üniversite öğrencilerinin çeşitli kişilik özelliklerini anlamaya yönelik olarak yürütülen bu çalışmada sizden istenilen, verilen yönergeleri dikkatle okuyarak soruları yanıtlamanızdır. Sorulara vereceğiniz tüm yanıtlar gizli tutulacak ve bu çalışmadan elde edilen veriler kimlik bilgileri olmaksızın değerlendirilecektir. Bu nedenle ölçeğin üzerine kimliğinizi belirleyecek bilgileri yazmanıza gerek yoktur. Çalışma için ayıracağınız zaman ve katkılarınızdan dolayı şimdiden teşekkür ederim.

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Cinsiyet: K () E ()

Bölüm: Sınıf: Yaş:

Türkiye'deki genel standartlara bakıldığında sizce ailenizin sosyo-ekonomik seviyesi aşağıdakilerden hangisine daha çok uymaktadır?

Alt sosyo-ekonomik düzey () Orta sosyo-ekonomik düzey ()

Yüksek sosyo-ekonomik düzey ()

APPENDIX B

REVISED CHEEK & BUSS SHYNESS SCALE (GÖZDEN GEÇİRİLMİŞ CHEEK VE BUSS UTANGAÇLIK ÖLÇEĞİ)

Lütfen aşağıda verilen 13 maddeyi dikkatlice okuyarak, her maddenin sizin duygu ve davranışlarınıza uygunluğunu, verilen dereceleme sistemine göre değerlendiriniz. Yanıtlama işlemini, her maddenin karşısındaki rakamlardan birini işaretleyerek yapınız.

1 = Bana Hiç Uygun Değil 2 = Uygun Değil 3 = Kararsızım
4 = Bana Uygun 5 = Bana Çok Uygun

| | | | | | |
|------------------------------------------------------------------------------------|---|---|---|---|---|
| 1. İyi tanımadığım kişilerle birlikteyken kendimi tedirgin hissedirim. | 1 | 2 | 3 | 4 | 5 |
| 2. Toplumsal ilişkilerde hiç rahat değilim. | 1 | 2 | 3 | 4 | 5 |
| 3. Başkalarından herhangi bir konuda bilgi istemek bana zor gelir. | 1 | 2 | 3 | 4 | 5 |
| 4. Arkadaş toplantıları ve diğer sosyal etkinliklerde genellikle rahat değilimdir. | 1 | 2 | 3 | 4 | 5 |
| 5. Başkaları ile birlikte iken konuşacak uygun konuları bulmakta güçlük çekerim. | 1 | 2 | 3 | 4 | 5 |
| 6. Yeni girdiğim bir ortamda utangaçlığımı yenmek uzun zaman alır. | 1 | 2 | 3 | 4 | 5 |
| 7. Yeni tanıştığım insanlara doğal davranmakta güçlük çekerim. | 1 | 2 | 3 | 4 | 5 |
| 8. Yetkili bir kişi ile konuşurken kendimi gergin hissedirim. | 1 | 2 | 3 | 4 | 5 |
| 9. Sosyal yeterliliğim konusunda kuşkularım var. | 1 | 2 | 3 | 4 | 5 |
| 10. Karşımdaki kişinin gözlerinin içine bakmak bana zor gelir. | 1 | 2 | 3 | 4 | 5 |
| 11. Sosyal ortamlarda kendimi baskı altında hissedirim. | 1 | 2 | 3 | 4 | 5 |
| 12. Tanımadığım kişilerle konuşmak bana güç gelir. | 1 | 2 | 3 | 4 | 5 |
| 13. Karşı cinsten kişilerle birlikteyken daha utangaç olurum. | 1 | 2 | 3 | 4 | 5 |

APPENDIX C

BRIEF FEAR OF NEGATIVE EVALUATION SCALE (OLUMSUZ DEĞERLENDİRİLME KORKUSU ÖLÇEĞİ-KISA FORM)

Lütfen aşağıda verilen 12 maddeyi dikkatlice okuyarak, her maddenin sizi ne kadar yansıttığını verilen 5’li derecelendirme sistemine göre yanıtlayınız.

1 = Hiç Yansıtmıyor 2 = Biraz Yansıtıyor 3 = Orta Derecede Yansıtıyor
4 = Çok Yansıtıyor 5 = Tamamiyle Yansıtıyor

| | | | | | |
|------------------------------------------------------------------------------------------------------|---|---|---|---|---|
| 1. Bir değişiklik yaratmayacağını bilsem bile, insanların hakkımda ne düşüneceği beni kaygılandırır. | 1 | 2 | 3 | 4 | 5 |
| 2. İnsanların, hakkımda kötü bir izlenim edindiklerini bilsem bile buna aldırış etmem. | 1 | 2 | 3 | 4 | 5 |
| 3. Diğer insanların, eksikliklerimin farkına varmasından sıklıkla korkarım. | 1 | 2 | 3 | 4 | 5 |
| 4. Birinin üzerinde nasıl bir izlenim yarattığım konusunda nadiren kaygılanırım. | 1 | 2 | 3 | 4 | 5 |
| 5. Başkalarının beni onaylamayacak olmasından korkarım. | 1 | 2 | 3 | 4 | 5 |
| 6. İnsanların beni hatalı bulmasından korkarım. | 1 | 2 | 3 | 4 | 5 |
| 7. Başkalarının, hakkımdaki düşünceleri beni rahatsız etmez. | 1 | 2 | 3 | 4 | 5 |
| 8. Biriyle konuşurken, hakkımda ne düşündüğü konusunda kaygılanırım. | 1 | 2 | 3 | 4 | 5 |
| 9. Nasıl bir izlenim yarattığım konusunda genellikle kaygı duyarım. | 1 | 2 | 3 | 4 | 5 |
| 10. Birisinin beni yargıladığını bilmek beni çok az etkiler. | 1 | 2 | 3 | 4 | 5 |
| 11. Bazen, diğer insanların hakkımda ne düşündüğüyle gereğinden fazla ilgilendiğimi hissedirim. | 1 | 2 | 3 | 4 | 5 |
| 12. Yanlış bir şey söyleyecek ya da yapacak olmaktan sık sık kaygı duyarım. | 1 | 2 | 3 | 4 | 5 |

APPENDIX D

SOCIALLY-PRESCRIBED PERFECTIONISM SCALE (BAŞKALARINCA BELİRLENEN MÜKEMMELİYETÇİLİK ÖLÇEĞİ)

Aşağıda, kişilik özelliklerinizle ilgili 15 madde verilmiştir. Lütfen her maddeyi okuyarak, bu maddelere ne boyutta katıldığınızı, verilen 7'li derecelendirme sistemine göre yanıtlayınız.

1 = Kesinlikle Katılmıyorum 2 = Katılmıyorum 3 = Bir Miktar Katılmıyorum
4 = Kararsızım 5 = Biraz Katılıyorum 6 = Katılıyorum
7= Kesinlikle Katılıyorum

| | | | | | | | |
|-----------------------------------------------------------------------------------------|---|---|---|---|---|---|---|
| 1. Yaptığım bir şey kusursuz değilse çevremdekiler tarafından yetersiz bulunur. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 2. İnsanlar benden, verebileceğimden fazlasını beklerler. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 3. İnsanlar benden, mükemmelden aşağısını kabul etmezler. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 4. Ailem benden mükemmel olmamı bekler. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 5. Bir işi ne kadar iyi yaparsam çevremdekiler daha da iyisini yapmamı beklerler. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 6. Çevremdekiler yaptığım her şeyde başarılı olmamı beklerler. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 7. Başkalarının benden çok şey beklediğini düşünüyorum. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 8. Başarı, başkalarını memnun etmek için daha da çok çalışmam gerektiği anlamına gelir. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 9. Her konuda üstün başarı göstermem de başkaları benden hoşlanacaktır. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 10. Yakınlarımla hata yapmamı görmeye tahammül edemem. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 11. Başkalarının benden beklentilerini karşılamakta güçlük çekerim. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 12. Bana göstermeseler bile, hata yaptığım zaman diğer insanlar çok bozulurlar. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 13. Başarısız olduğum zamanlar bile başkaları yeterli olduğumu düşünür. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 14. Çevremdekiler benim de hata yapabileceğimi kolaylıkla kabullenirler. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 15. Hata yapsam bile, insanlar yeterli ve becerikli olduğumu düşünürler. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

APPENDIX E

ROSENBERG SELF-ESTEEM SCALE (ROSENBERG BENLİK SAYGISI ÖLÇEĞİ)

Aşağıda, genel olarak kendinizle ilgili duygu ve düşüncelerinize yönelik olarak 10 madde verilmiştir. Lütfen her bir maddeyi dikkatlice okuyarak sizin için doğruluk derecesini verilen 4'lü derecelendirme sistemini kullanarak yanıtlayın.

1 = Çok Doğru 2 = Doğru 3 = Yanlış 4 = Çok Yanlış

| | | | | |
|----------------------------------------------------------------------------------|---|---|---|---|
| 1. Kendimi en az diğer insanlar kadar değerli bulurum. | 1 | 2 | 3 | 4 |
| 2. Bazı olumlu özelliklerimin olduğunu düşünüyorum. | 1 | 2 | 3 | 4 |
| 3. Genelde kendimi başarısız bir kişi olarak görme eğilimindeyim. | 1 | 2 | 3 | 4 |
| 4. Ben de diğer insanların birçoğunun yapabileceği kadar bir şeyler yapabilirim. | 1 | 2 | 3 | 4 |
| 5. Kendimde gurur duyacak fazla bir şey bulamıyorum. | 1 | 2 | 3 | 4 |
| 6. Kendime karşı olumlu bir tutum içindeyim. | 1 | 2 | 3 | 4 |
| 7. Genel olarak kendimden memnunum. | 1 | 2 | 3 | 4 |
| 8. Kendime karşı daha fazla saygı duyabilmeyi isterdim. | 1 | 2 | 3 | 4 |
| 9. Bazen kendimin kesinlikle bir işe yaramadığını düşünüyorum. | 1 | 2 | 3 | 4 |
| 10. Bazen kendimin hiç de yeterli bir insan olmadığını düşünüyorum. | 1 | 2 | 3 | 4 |

APPENDIX F

SOCIAL SKILLS INVENTORY-SHORT (SOSYAL BECERİ ENVANTERİ-KISA FORM)

Lütfen aşağıdaki 30 maddede verilen durumların sizi ne ölçüde yansıttığını, her bir maddeyi dikkatlice okuyarak, verilen 5'li derecelendirme sistemine göre yanıtlayınız.

1 = Hiç Benim Gibi Değil 2 = Biraz Benim Gibi 3 = Benim Gibi
4 = Oldukça Benim Gibi 5 = Tamamen Benim Gibi

| | | | | | |
|--------------------------------------------------------------------------------------------|---|---|---|---|---|
| 1. Başka insanlara dokunmaktan genellikle rahatsız olurum. | 1 | 2 | 3 | 4 | 5 |
| 2. İnsan davranışlarının nedenlerini öğrenmek ilgimi çeker. | 1 | 2 | 3 | 4 | 5 |
| 3. Duygularımı kontrol etmede çok başarılı sayılmam. | 1 | 2 | 3 | 4 | 5 |
| 4. Sosyal olmaktan hoşlanırım. | 1 | 2 | 3 | 4 | 5 |
| 5. Bazı ortamlarda doğru şeyleri yaptığımdan ya da söylediğimden endişe ederim. | 1 | 2 | 3 | 4 | 5 |
| 6. Genç, yaşlı, zengin ve yoksul her türlü insanla birlikte kendimi rahat hissederim. | 1 | 2 | 3 | 4 | 5 |
| 7. Yüz ifadem genellikle tarafsızdır. | 1 | 2 | 3 | 4 | 5 |
| 8. Başkalarıyla olan ilişkilerini izleyerek bir insanın karakterini kolayca anlayabilirim. | 1 | 2 | 3 | 4 | 5 |
| 9. Duygularımı kontrol etmek benim için oldukça zordur. | 1 | 2 | 3 | 4 | 5 |
| 10. Arkadaşların bir araya geldiği eğlence toplantılarına her zaman katılırım. | 1 | 2 | 3 | 4 | 5 |
| 11. Genellikle insanlara söylediklerimin yanlış anlaşılacağından kaygılanırım. | 1 | 2 | 3 | 4 | 5 |
| 12. Bir grup içinde olduğum zaman konuşacağım şeyleri seçmede güçlük çekiyorum. | 1 | 2 | 3 | 4 | 5 |
| 13. Kızgınlığımı çok seyrek gösteririm. | 1 | 2 | 3 | 4 | 5 |
| 14. Ne kadar saklamaya çalışsalar da insanların gerçek düşüncelerini genellikle bilirim. | 1 | 2 | 3 | 4 | 5 |
| 15. Üzgün olsam bile soğukkanlılığımı korumakta oldukça başarılıyım. | 1 | 2 | 3 | 4 | 5 |
| 16. Kendimi yabancılara tanıtırken genellikle ilk adımı ben atarım. | 1 | 2 | 3 | 4 | 5 |
| 17. Herhangi birinin bana gülümsemesinden veya surat asmasından çok etkilenirim. | 1 | 2 | 3 | 4 | 5 |

1 = Hiç Benim Gibi Değil 2 = Biraz Benim Gibi 3 = Benim Gibi
4 = Oldukça Benim Gibi 5 = Tamamen Benim Gibi

| | | | | | |
|-----------------------------------------------------------------------------------------------------------|---|---|---|---|---|
| 18. İlişkilerde insanlar birbirlerinin tüm beklentilerini karşılmalıdır. | 1 | 2 | 3 | 4 | 5 |
| 19. Durgun geçen bir toplantıyı neşelendirebilirim. | 1 | 2 | 3 | 4 | 5 |
| 20. Kendilerini olduğundan farklı gösterenleri, karşılaştığım ilk andan itibaren hemen tespit edebilirim. | 1 | 2 | 3 | 4 | 5 |
| 21. Sinirli olduğum zaman bu durumumu başkalarından çok iyi bir şekilde saklayabilirim. | 1 | 2 | 3 | 4 | 5 |
| 22. Toplantılarda çok çeşitli insanla konuşmaktan hoşlanırım. | 1 | 2 | 3 | 4 | 5 |
| 23. Başka insanların beni sevmesine çok önem veririm. | 1 | 2 | 3 | 4 | 5 |
| 24. Gruplarda genellikle lider olarak seçilirim. | 1 | 2 | 3 | 4 | 5 |
| 25. Duygu ve heyecanlarımı çok seyrek gösteririm. | 1 | 2 | 3 | 4 | 5 |
| 26. Çoğunlukla duyarlı ve anlayışlı bir insan olduğum söylenir. | 1 | 2 | 3 | 4 | 5 |
| 27. Güçlü bir duygumu pek saklayamam. | 1 | 2 | 3 | 4 | 5 |
| 28. Kalabalık toplantılara katılmaktan ve yeni insanlarla tanışmaktan zevk alıyorum. | 1 | 2 | 3 | 4 | 5 |
| 29. Başkalarının üzerinde bıraktığım etki ile genellikle meşgul olurum. | 1 | 2 | 3 | 4 | 5 |
| 30. Her türlü sosyal ortama kolayca uyum sağlayabilirim. | 1 | 2 | 3 | 4 | 5 |

APPENDIX G

PARENTAL ATTITUDE SCALE (ANNE-BABA TUTUM ÖLÇEĞİ)

Aşağıda anne ve babanızın sizinle ilgili olarak sergilemiş olduğu bazı davranışlara ait ifadeler yer almaktadır. Lütfen üniversiteye kadar olan yaşamınızı düşünerek bu davranışların, ailenizin size karşı olan davranışlarını ne derece yansıttığını verilen derecelendirme sistemine göre belirtiniz.

1 = Tamamen Benziyor 2 = Biraz Benziyor 3 = Benzemiyor 4 = Hiç Benzemiyor

| | | | | |
|----------------------------------------------------------------------------------------------------------------------|---|---|---|---|
| 1. Herhangi bir sorunum olduğunda annem ve babam bana yardım ederdi. | 1 | 2 | 3 | 4 |
| 2. Annem ve babam büyüklerle tartışmam gerektiğini söylerdi. | 1 | 2 | 3 | 4 |
| 3. Annem ve babam yaptığım her şeyin en iyisini yapmam için beni zorlardı. | 1 | 2 | 3 | 4 |
| 4. Annem ve babam herhangi bir tartışma sırasında başkalarını kızdırmamak için susmam gerektiğini söylerdi. | 1 | 2 | 3 | 4 |
| 5. Annem ve babam bazı konularda “sen kendin karar ver” derdi. | 1 | 2 | 3 | 4 |
| 6. Derslerimde ne zaman düşük not alsam annem ve babam kızardı. | 1 | 2 | 3 | 4 |
| 7. Ders çalışırken anlayamadığım bir şey olduğunda annem ve babam bana yardım ederdi. | 1 | 2 | 3 | 4 |
| 8. Annem ve babam kendi görüşlerinin doğru olduğunu, bu görüşleri onlarla tartışmam gerektiğini söylerdi. | 1 | 2 | 3 | 4 |
| 9. Annem ve babam benden bir şey yapmamı istediklerinde, niçin bunu yapmam gerektiğini de açıklardı. | 1 | 2 | 3 | 4 |
| 10. Annem ve babamla her tartıştığimde bana “büyüdüğün zaman anlarsın” derdi. | 1 | 2 | 3 | 4 |
| 11. Derslerimden düşük not aldığımda, annem ve babam beni daha çok çalışmam için desteklerdi. | 1 | 2 | 3 | 4 |
| 12. Annem ve babam yapmak istediklerim konusunda kendi kendime karar vermeme izin verirdi. | 1 | 2 | 3 | 4 |
| 13. Annem ve babam arkadaşlarımı tanırdı. | 1 | 2 | 3 | 4 |
| 14. Annem ve babam istemedikleri bir şey yaptığımda, bana karşı soğuk davranır ve küserdi. | 1 | 2 | 3 | 4 |
| 15. Annem ve babam sadece benimle konuşmak için zaman ayırırdı. | 1 | 2 | 3 | 4 |
| 16. Derslerimden düşük not aldığımda, annem ve babam öyle davranırdı ki suçluluk duyar ve utanırdım. | 1 | 2 | 3 | 4 |
| 17. Ailemle birlikte hoşça vakit geçirirdim. | 1 | 2 | 3 | 4 |
| 18. Annemi ve babamı kızdıracak bir şey yaptığımda, onlarla birlikte yapmak istediğim şeyleri yapmama izin vermezdi. | 1 | 2 | 3 | 4 |

19. Genel olarak anne ve babanız okul zamanı hafta içinde gece arkadaşlarınızla bir yere gitmenize izin verir miydi?

Evet _____ Hayır _____

Eğer cevabınız evet ise, hafta içinde en geç saat kaç kadar gece dışarıda kalmanıza izin verilirdi?

20:00'den önce _____ 20:00 - 21:00 arası _____ 21:00 - 22:00 arası _____

22:00 – 23:00 arası _____ 23:00 ya da daha geç _____ istediğim saate kadar _____

20. Genel olarak anne ve babanız hafta sonları gece arkadaşlarınızla bir yere gitmenize izin verir miydi?

Evet _____ Hayır _____

Eğer cevabınız evet ise, hafta içinde en geç saat kaç kadar gece dışarıda kalmanıza izin verilirdi?

20:00'den önce _____ 20:00 - 21:00 arası _____ 21:00 - 22:00 arası _____

22:00 – 23:00 arası _____ 23:00 ya da daha geç _____ istediğim saate kadar _____

Anne ve babanız aşağıdakileri öğrenmek için ne kadar çaba gösterirdi?

21. Eğer gece bir yere gittiyseniz nereye gittiğinizi Hiç __ Çok az __ Çok __

22. Boş zamanlarınızda ne yaptığınızı Hiç __ Çok az __ Çok __

23. Okuldan çıktıktan sonra ne yaptığınızı Hiç __ Çok az __ Çok __

Anne ve babanızın aşağıdakiler hakkında ne kadar bilgisi vardı?

24. Eğer gece bir yere gittiyseniz nereye gittiğinizi Hiç __ Çok az __ Çok __

25. Boş zamanlarınızda ne yaptığınızı Hiç __ Çok az __ Çok __

26. Okuldan çıktıktan sonra ne yaptığınızı Hiç __ Çok az __ Çok __

APPENDIX H

TURKISH SUMMARY

TÜRKÇE ÖZET

ÜNİVERSİTE ÖĞRENCİLERİNDE UTANGAÇLIĞIN YORDAYICILARI: BİR BENLİK SUNUMU MODELİN İNCELENMESİ

GİRİŞ

Bireyin, çevresindeki insanlarla etkili bir iletişim kurması ve onlarla çeşitli bağlar oluşturması, tatmin edici bir sosyal yaşam için oldukça gereklidir (Schlenker, 1980). Diğer insanlarla yaşamak her ne kadar kişi için kaçınılmaz olsa da bazı bireyler için sosyal ortamlar ve ilişkiler oldukça sıkıntı yaratabilmektedir. Örneğin bazı bireyler, topluluk içinde konuşma yapmaktan veya kalabalık bir ortamda yemek yemekten, mülakatlardan, ya da kendileri için önemli biriyle konuşmaktan kaygı duyabilir. Aslında, hemen hemen herkes bazı ortamlarda belli düzeyde kaygı yaşamaktadır. Ancak, bazen yaşanan kaygı kişinin normal hayatını olumsuz yönde etkileyebilecek kadar fazla olmaktadır (Gilbert ve Trower, 2001; Zimbardo, 1977).

Utangaçlık, sosyal ilişkilerle birlikte öğrenilen ve pek çok insanın az ya da çok yaşayabileceği kaçınılmaz bir olgudur. Utangaçlık çok bilindik bir duygu olmasına rağmen bu alanda yapılan sistematik bilimsel çalışmalar ancak 1970'li yılların sonunda başlamıştır. Zimbardo (1977)'nin utangaçlığın yaygınlığına ve toplumda yaklaşık % 80 oranında bir kesimin kendini utangaç olarak tanımladığına dikkat çekmesi, araştırmacıları utangaçlığın nedenlerini ve bu sıkıntıyı ortadan kaldırmak için gerekli olan müdahaleleri incelemeye yöneltmiştir (Buss, 1980; Clark ve Arkowitz, 1975; Crozier, 1979; Schlenker ve Leary, 1982).

Son zamanlarda utangaçlık alanında yapılan çalışmalar utangaçlığı tamamen bireysel ve özel bir olgu olarak görmekten çok onu sosyal bağlamda kavramsallaştırmaktadır

(Cheek ve Melchior, 1990; Crozier ve Alden, 2001). Özellikle ‘benlik’ kavramının oluşumunun başka insanlara yönelik özelliklerinden yola çıkarak, utangaçlığın da başka insanlarla ilişkili olduğu ve bu olgunun daha çok diğer insanlar ile birlikteken ortaya çıktığı görüşü önem kazanmıştır.

Utangaçlık konusunda sosyal yaklaşımların yanı sıra, kişilik özelliklerinin anlaşılmasında bilişsel olgulara ağırlık verilen görüşler önem kazanmıştır (Beck, Emery ve Greenberg, 1985; Ellis, 1962). Utangaçlıkla ilgili olarak bilişsel süreçlerin, yani kişinin düşünce ve kendisini değerlendirme biçimlerinin önemli olduğu çeşitli araştırmalar tarafından ortaya koyulmuştur (Clark ve Arkowitz, 1975; Lucock ve Salkovskis, 1988; Rapee ve Heimberg, 1997).

Yurtdışında utangaçlık olgusunun doğasına, nedenlerine ve tedavisine yönelik sistematik çalışmalar oldukça fazla sayıda olmasına karşın Türkiye’de bu konuda yapılmış çok az çalışmaya rastlanmaktadır. Bu çalışmanın amaçlarından biri ülkemizde utangaçlığın nedenlerini sosyal bilişsel bir yaklaşım olan benlik sunumu kuramı çerçevesinde anlamaya çalışmaktır.

Utangaçlığın Kavramsallaştırılması

Utangaçlık, kelime anlamı olarak birden fazla anlam içermekte, bu nedenle utangaçlığın kesin ve genel geçer bir tanımı bulunmamaktadır. Araştırmacılar ve kuramcılar arasında özellikle utangaçlığın, sosyal kaygının diğer türlerine göre nasıl kavramsallaştırılacağı ve utangaç bir insanı tanımlarken hangi tepkilerin temel alınacağı üzerinde anlaşma sağlanmamaktadır. Bazı tanımlar utangaçlığı sadece davranışsal tepki olarak görürken (Pilkonis, 1977), diğerlerine göre utangaçlık duygusal bir durum olarak ele alınmaktadır (Jones ve Ark., 1986). Öte yandan, hem fizyolojik hem de davranışsal yönlerini içeren tanımlamalar da bulunmaktadır (Cheek ve Ark., 1986).

Leary (1986) utangaçlığı “sosyal kaygı ve kişiler arası çekingenlik içeren ve kişiler arası değerlendirme durumundaki insanların varlığından kaynaklanan duygusal-

davranışsal belirtiler” olarak tanımlamaktadır. Bu tanıma göre utangaçlık hem sosyal kaygıyı hem de davranışsal çekingenliği kapsamaktadır. İnsanların yaşadığı sosyal sıkıntıların çoğunun başkaları tarafından sosyal değerlendirilme kaygısından kaynakladığı düşünüldüğünde utangaçlığı anlamaya yönelik çalışmalarda sosyal kaygı ele alınmaktadır. Ancak, sosyal kaygının bir türü olarak ele alınan utangaçlık sosyal fobiden farklılık göstermektedir. Sosyal fobi, utangaçlıkla olumsuz değerlendirme korkusu, uyumu zorlaştıran düşünce biçimi gibi çeşitli ortak özellikler göstermesine rağmen, sosyal fobi kronik bir seyir izleyen ve kişinin işlevlerini kısıtlayan bir sorun şeklinde görülmektedir (Turner, Beidel ve Townsley, 1990).

Utangaçlıkla karıştırılan ancak kavramsal olarak farklı oldukları ortaya konulan diğer kavramlar içedönüklük ve girişkenliktir. İçedönüklüğün utangaçlıkla ortak özellikler taşımasına rağmen, sosyal durumlarda her koşulda kaygı ve korku içermemesi yönüyle farklılık gösterdiği belirtilmektedir (Briggs, 1988). Girişkenlikle utangaçlık kavramları arasında ise olumsuz yönde bir ilişki bulunmaktadır; ancak utangaçlık az girişken olmak anlamına gelmediği gibi bu iki kavram birbirinden ayırt edilebilir özellik taşımaktadır (Schmidt ve Fox, 1995).

Bu çalışma, utangaçlığı sosyal kaygının bir çeşidi olarak ele almakta ve Leary (1986)'nin tanımlamasını temel alarak utangaçlığın hem davranışsal hem de duygusal boyutlarının olduğunu varsaymaktadır. Bu nedenle, utangaçlığı açıklamak ve utangaçlıkla ilgili çeşitli çıkarımlar yapmak üzere çalışma boyunca sosyal kaygı literatüründen de yararlanılmıştır.

Utangaçlıkta Tepkisel Bileşenler

Utangaç kişilerin sosyal durumlarda gösterdikleri tepkisel özellikleri incelendiğinde genellikle duygusal, davranışsal ve bilişsel alanda çeşitli ortak özelliklerinin bulunduğu görülmektedir (Cheek ve Melchior, 1990). Utangaç bireyler, duygusal olarak sosyal etkileşimden korkma, karın ağrısı, terleme, kızarma gibi bazı fizyolojik şikayetleri göstermektedir (Cheek ve Briggs, 1990). Davranışsal boyutta ise utangaçlık; çekingenlik, kaçınma ve geri çekilme gibi davranışlar içermektedir (Buss,

1980). Bilişsel anlamda utangaçlığın kapsadığı tepkiler başkaları tarafından olumsuz olarak değerlendirilmekten ya da onay alamamaktan korkma, kendi sosyal ve duygusal yeterliğini küçümseme, başkaları üzerinde nasıl bir izlenim yarattığı konusunda endişelenme ve kendini olumsuz olarak değerlendirmektir (Clark ve Arkowitz, 1975; Schlenker ve Leary, 1982).

Utangaç kişiler bu üç tepki türüne aynı anda sahip olabilmekte, bazen de sadece bir ya da ikisini göstermektedir. Tepkilerin ne kadar ve ne boyutta yaşanacağı bireysel farklılıklara bağlı olarak değişmektedir. Genel anlamda bu üç boyut birarada etkileşerek kaygı, olumsuz düşünme ve davranışsal uyumsuzluğa yol açan kişiler arası bir eğilimi meydana getirmektedir.

Utangaçlığın Durumsal Değişkenleri

Araştırmalar, belirli durumların, etkinliklerin, ya da kişilerin bireylerin utangaçlığında önemli rol oynadığını göstermektedir. Örneğin, Buss (1980) utangaçlığı ortaya çıkaran durumsal değişkenler olarak: a) alışık olunmayan fiziksel çevre, yeni bir insanla tanışma gibi yenilik içeren durumlar; b) bir ortamda yabancılar ya da yetkili kişiler olmak üzere başka insanların varlığı; c) birinin ya da birilerinin kişiye dikkatli bakması gibi sosyal dikkati yoğunlaştıran veya dağıtan durumları belirlemiştir. Holt, Heimberg, Hope ve Liebowitz (1992)'e göre de sosyal kaygı genellikle bir topluluk önünde konuşma yapma, bir toplantıya katılma, önemli kişilerle konuşma ve topluluk içinde yemek yeme gibi durumlardan kaynaklanmaktadır.

Üniversite ortamı, öğrencilerde utangaçlık duygusunun ortaya çıkmasına yol açabilecek belirli durumları içermektedir. Üniversite yaşantısı, öğrencilerin yabancı bireylerle tanıştığı ve kalabalık gruplar içinde bulunmasını gerektiren alışkın olunmayan ortamları içermektedir. Öğrenciler, üniversite ortamında sosyal değerlendirme içeren durumlarla karşılaşmakta; çekicilik, başarı gibi çeşitli yönlerden başkaları tarafından değerlendirilmektedirler (Asendorpf, 2000; Crozier, 2004). Genel anlamda derslere ve seminerlere katılmak, yeni insanlarla tanışmak,

mülakatlara girmek, topluluk önünde konuşmak üniversite öğrencileri için utangaçlığı en fazla tetikleyen durumların başında gelmektedir.

Utangaçlığın Sonuçları

Araştırmacılar, kuramcılar, uzmanlar ve utangaçlık yaşayan bireyler, bu duygu durumunun olumsuz özelliklerini vurgulamalarına ve zaman zaman onu patolojik bir durum olarak görme eğiliminde bulunmalarına rağmen, utangaçlığın kişiye yarar sağlayabilecek olumlu yönlerine de dikkat çekilmektedir (Leary ve Kowalski, 1995). Örneğin utangaçlığın genellikle kişinin normal duygusal işlevi içinde geliştiği ve insani bir duygu durumu olduğu ifade edilmektedir. Utangaçlığın sosyal olarak kabul edilemez davranışları bastırarak kişinin grup yaşantısını kolaylaştırdığı öne sürülmektedir (Izard ve Hyson, 1986). Ayrıca, utangaç kişilerin genelde alçakgönüllü, kontrollü, ciddi ve tartışma sevmeyen kişiler olduğu ve bu özelliklerin ise uyum sağlayıcı özellikler olduğu belirtilmektedir (Gough ve Thorne, 1986).

Bu yapıcı özelliklere rağmen, utangaçlık bazı kişiler için oldukça sıkıntı yaratmakta, pek çok durumda gereğinden fazla yaşanarak kişinin yaşamında kısıtlamalara yol açabilmektedir (Leitenberg, 1990). Utangaç bireyler sosyal durumlarda rahatsızlık duymakta ve bu durum zamanla çekingenlik, yalnızlık ve depresyon gibi ciddi sorunlara eşlik edebilmektedir (Dill ve Anderson, 1999; Ishiyama, 1984). Ayrıca utangaçlığın sadece sosyal alanlarda değil, kişisel, duygusal ve mesleki alanlarda da çeşitli sıkıntılar yarattığı bilinmektedir (Bruch, Rivet, Heimberg, ve Levin, 1997).

Kayıp yaratan durumlardan kaçınma, sosyal etkileşimlerde azalmaya yol açmakta, kişiler arası ilişkileri kısıtlamaktadır. Kaçınma davranışı, kaygıdan anlık ve geçici bir kurtulma sağlasa da göz temasında azalma, daha az konuşma, kendini fazla ifade etmeme, sosyal becerilerde eksiklik gibi pek çok olumsuz davranışsal sonuç doğurabilmektedir. Utangaç kişilerin daha az sayıda ve daha az tatmin edici sosyal ve yakın ilişkilere sahip oldukları, karşı cinsle iletişimde sorun yaşadıkları, konuşmaya başlamada ve sürdürmede zorlandıkları ve flört etmede daha fazla güçlük çektikleri

belirtmiştir (Henderson, Zimbardo, ve Carducci, 1999; Montgomery, Haemmerlie, ve Edwards, 1991).

Utangaçlık, üniversite öğrencileri için çeşitli zorluklar getirebilmektedir. Örneğin utangaçlık, öğrencilerin sosyal yaşamlarını etkilemekte, akranlarla ilişkilerini kısıtlamakta ve benlik gelişimini olumsuz yönde etkilemektedir. Ayrıca utangaç öğrencilerin kariyerle ilgili kararlarının geciktiği, kararları vermekte zorlandıkları, kariyer yaşantılarına daha geç başladıkları ve iş görüşmelerinde güçlükler yaşadıkları da belirtilmiştir (Caspi, Bem, ve Elder, 1989; Phillips ve Bruch, 1988).

Utangaçlığa Kuramsal Yaklaşımlar

Kişilik kuramına göre utangaçlık, bir kişilik özelliği olarak görülmekte ve bireylerin başkaları ile birlikte kaygı yaşamaya, çekingen davranmaya, kendileriyle meşgul olmaya ve az konuşmaya daha çok eğilimli olduklarına inanılmaktadır (Briggs, 1988; Crozier, 1979). Bu görüşe göre, bazıları için utangaçlık kalıtsal bir kişilik özelliği olup genellikle çocukluk yıllarından itibaren belirginleşmeye başlamaktadır. Utangaçlığın genetik ve öğrenilen özelliklerinin olduğu ve kişisel olarak utangaç olan bireylerin genellikle fiziksel gerginlik, kaygı ve çekingenliği utangaç olmayanlara göre daha fazla ve daha sık yaşadıkları belirtilmektedir (Buss, 1986).

Sosyal beceri yetersizliği kuramı, utangaçlığın sosyal becerilerin eksik olmasından ya da yeterli olmamasından kaynaklandığını öne sürmektedir (Curran, 1977). Kişi, yetersiz becerilerinden dolayı sürekli sosyal yönden uygun olmayan biçimde davrandıkça sosyal kaygı yaşamaktadır. Ancak sosyal kaygı yaşayan ve yaşamayan bireyler arasındaki beceri farklarının çok da belirgin olmadığı bulunmuştur (Clark ve Arkowitz, 1975). Araştırmacılar, utangaç kişilerin beceri bakımından diğerlerinden farklı olmadıklarını, farklılığın bu insanların kendi becerilerini küçümsemelerinden kaynaklandığını bulmuşlardır. Sosyal beceri eğitimleri yaşanan kaygıyı azaltsa da, literatürdeki çelişkili sonuçlar sosyal becerilerin utangaçlıktaki rolünü tam olarak kavramaya engel teşkil etmektedir (Leary, 1983).

Davranışçı kuram, utangaçlığın sosyal ortamlarda aşağılanma, küçük düşürülme gibi olumsuz ve istenmeyen deneyimler yaşanması sonucu meydana geldiğini; bu deneyimlerin benzer sosyal durumlarda kaygıya yol açtığını belirtmektedir (Marks, 1969; Wolpe, 1958). Davranışçı kuramların temel alındığı çeşitli müdahale teknikleri, yaşanan sosyal kaygının azaltılmasında önemli rol oynasa da, bu kuramların bireylerin sosyal durumlarda olumsuz davranışsal deneyimlerini neden yaşadığını açıklamada tek başına yetersiz olduğu görülmektedir (Halford ve Foddy, 1982). Son yıllarda davranışçı kuramcılar, düşünce kalıplarına da önem vererek davranışsal-bilişsel yaklaşımları oluşturmuşlardır. Belirli düşünsel süreçlerin koşullanmış tepkilere arabuluculuk ettiğine yönelik önemli kanıtlar elde edilmiştir (Rapee ve Heimberg, 1997).

Bilişsel kuramların utangaçlığı açıklamada daha yeterli oldukları, diğer kuramların çelişkilerine açıklama getirdikleri söylenebilir. Bilişsel kuramlar utangaçlıkta zihinsel süreçlerin etkili olduğunu vurgulamaktadır. Özellikle onaylanmama ya da olumsuz değerlendirilme korkusu, kendini değerlendirme, benlik saygısı, sosyal yeterlik algısı, insanlar üzerinde belirli izlenimler yaratma isteği, kendi sosyal performansını değerlendirme, akılcı olmayan düşünceler, mükemmeliyetçilik gibi düşünce biçimlerinin utangaçlığın ortaya çıkmasında oldukça etkili olduğu belirtilmektedir (Beck, 1985; Clark ve Arkowitz, 1975; Rapee ve Heimberg, 1997; Schlenker ve Leary, 1982; Watson ve Friend, 1969). Yapıcı olmayan düşünce kalıplarının değiştirilmesine yönelik müdahale programları da utangaçlığın azalmasında oldukça yarar sağlamaktadır.

Çalışmanın Kuramsal Çerçevesi: Utangaçlığa Benlik Sunumu Yaklaşımı

Benlik sunumu, kişinin başka insanlara yansıttığı kendisiyle ilgili imajları kontrol etme girişimidir (Schlenker, 1980). Diğer bir ifadeyle, bireyin diğerleri üzerinde yarattığı izlenimleri yönetmek için çeşitli stratejiler planlaması ve uygulamasıdır. Benlik sunumu ilk olarak Goffman (1959) tarafından çalışılmış, daha sonra pek çok araştırmacının ve kuramcının ilgisini çekerek psikolojinin çeşitli alanlarında

uygulanmıştır. Benlik sunumunun uygulandığı alanlardan biri de sosyal kaygı ve utangaçlıktır.

Sosyal bilişsel bir kuram olan benlik sunumu kuramına göre, sosyal kaygı, gerçek ya da hayali sosyal durumlardaki kişisel değerlendirmeler sonucu ortaya çıkmaktadır (Schlenker ve Leary, 1982). Utangaçlığı oluşturan sosyal kaygı ve kaçınma davranışları kişiler arası bir durumda insanlar üzerinde belirli bir izlenim yaratma isteği ve kişinin bu izlenimi bırakamayacağına dair düşünce olmak üzere iki bilişsel bileşenden oluşmaktadır. Yani, benlik sunumu yaklaşımına göre birey, başka insanlarda belirli izlenimler bırakmak isterken aynı zamanda bunu başaramayacağına inanırsa sosyal kaygı yaşamaktadır.

Sözü edilen iki bileşen utangaçlığın ara değişkenleri olarak da bilinmektedir. Buna göre kişinin izlenim bırakma isteği ya da bundan duyduğu şüpheyi etkileyecek olan her durumsal ve sahip olduğu kişisel özellik kişinin duyacağı kaygı ve yaşayacağı kaçınma davranışını etkileyebilmektedir.

Pek çok çalışma, utangaçlığa benlik sunumu yaklaşımının çeşitli varsayımlarını destekleyen sonuçlar bulmuştur. Örneğin utangaç kişilerin başkalarının onaylamayacağından korktukları (Jackson ve Ark., 1997); diğer insanlar üzerinde olumsuz etkiler bıraktıklarını düşündükleri (Leary ve Kowalski, 1993); daha az olumlu iç konuşma yaptıkları (DePaulo ve Ark., 1990) ve kendilerini sosyal olarak yetersiz gördükleri (Baumgardner, Kaufman ve Levy, 1989) bulunmuştur.

Utangaçlığın Benlik Sunumu ile İlişkili Başlatıcıları

Benlik sunumu kuramına göre utangaçlık, gerçek ya da hayali benlik sunumu zorluklarına bir tepki anlamına gelmektedir. Kişinin benlik sunumu motivasyonu ve kendine güvensizliği ise pek çok sosyal, bilişsel ve psikolojik özellikten etkilenebilmektedir (Leary ve Kowalski, 1995). Bu çalışmada utangaçlığın benlik sunumu ile ilişkili olarak olumsuz değerlendirilme korkusu, benlik saygısı, algılanan

sosyal beceriler, başkaları tarafından belirlenen mükemmeliyetçilik ve algılanan anne-baba tutumları başlatıcıları ele alınmıştır.

Olumsuz Değerlendirilme Korkusu

Olumsuz değerlendirilme korkusu, başkalarının değerlendirmelerinden duyulan endişe, değerlendirme içeren durumlardan kaçış ve başkalarının kişiyi olumsuz olarak değerlendireceği beklentisi anlamına gelmektedir (Watson ve Friend, 1969). Olumsuz değerlendirilme korkusu yaşayan kişiler diğer insanlardan olumsuz yönde eleştiri almaktan korkmakta ve başkalarının kendisini nasıl algıladığıyla gereğinden fazla ilgilenmektedirler (Gregorich, Kemple, ve Leary, 1986). Olumsuz değerlendirilme korkusunun, utangaçlığın ve sosyal kaygının en önemli bilişsel parçalarından biri olduğu bilinmektedir (Beck ve Ark., 1985; Hartman, 1983; Schlenker ve Leary, 1982). Yapılan çalışmalar utangaçlığın olumsuz değerlendirilme korkusu ile olan olumlu ilişkisini ve utangaçlığın bu değişken tarafından anlamlı bir şekilde yordandığını göstermiştir (Cowden, 2005; Miller, 1995).

Utangaç kişilerin başkalarının duygusal ifadelerini olumsuz olarak algıladıkları, sosyal kaygı yaratıcı durumlarda diğer insanların kendilerini daha olumsuz olarak değerlendireceklerini düşündükleri ve çevrede bıraktıkları izlenimlerle ilgili olarak daha önyargılı düşüncelere sahip oldukları bulunmuştur. Bu sonuçlar utangaçlık yaşayan bireylerin olumsuz değerlendirilme korkusunun utangaçlık yaşamayanlara oranla daha yüksek olduğunu göstermektedir. Ayrıca onay alma isteği utangaç kişilerde yüksek olduğundan, olumsuz olarak değerlendirilmekten korkmalarının beklenebileceği belirtilmiştir (Leary & Kowalski, 1995).

Sonuç olarak, olumsuz değerlendirilme korkusu utangaç kişilerin benlik sunumu endişeleri ile doğrudan ilişkilidir. Bireyler, başkalarından olumsuz geribildirim almaktan korktuğunda başkaları üzerinde belirli izlenimler bırakma konusunda daha istekli olmaktadır. Ayrıca, olumsuz değerlendirilme korkusunun utangaçlık ve diğer bazı durumsal ve kişilik özellikleriyle olan ilişkisinde bir ara değişken olduğu

düşünülmektedir. Bir başka deyişle, kişilerin olumsuz değerlendirilme ile ilgili kaygıları da birtakım özelliklerden etkilenebilmektedir.

Kendini Değerlendirme

Kendini değerlendirme, kişinin genel yetenekleri ve becerilerini öznel olarak belirlemesi anlamına gelmektedir. Utangaçlık ile kişinin kendini değerlendirmesi arasındaki olumsuz ilişki pek çok çalışmada gösterilmiştir (Breck ve Smith, 1983; Cheek ve Buss, 1989; Clark ve Wells, 1995). Bilişsel kuram ve benlik sunumu yaklaşımına göre insan kendini olumsuz olarak nitelendirdiğinde utangaçlık yaşaması kaçınılmaz olmaktadır. Utangaç bireylerin performanslarını sürekli ve eleştirel bir biçimde izledikleri, kişiler arası ve sosyal yeterliklerini küçük gördükleri, davranışları konusunda önyargılarının olduğu bilinmektedir.

Bu çalışmada kendini değerlendirmenin bir yolu olarak benlik saygısı ele alınmıştır. Benlik saygısı, bireyin, kendi değeriyle ilgili kişisel yargısı anlamına gelmektedir (Coopersmith, 1967). Bu konuda yapılan çalışmalar, benlik saygısı ile utangaçlık arasında olumsuz bir ilişkinin olduğunu göstermektedir (Cheek ve Buss, 1981; Leary ve Kowalski, 1993; Miller, 1995). Utangaçlık yaşayan kişiler kendilerini değersiz olarak görme eğilimindedir. Ancak, benlik saygısının utangaçlık üzerindeki etkisi ile ilgili çelişkili sonuçlar bulunmuştur. Örneğin benlik saygısının utangaçlığı doğrudan değil, olumsuz değerlendirilme korkusu aracılığı ile yordadığı bulunmuştur (Kocovski ve Endler, 2000). Ancak bir başka çalışma utangaçlığın düşük benlik saygısından anlamlı bir şekilde yordandığını göstermiştir (Miller, 1995).

Benlik sunumu yaklaşımına göre düşük benlik saygısı olan bireyler, diğer insanlar üzerinde yapacakları etkiyle çok fazla ilgilendiklerinden sosyal kaygı yaşarlar. Benlik saygısı, insanların istedikleri sosyal izlenimleri yaratamayacakları hissine sebep olduğu ölçüde utangaçlığa yol açmaktadır. Ayrıca, benlik sunumu motivasyonu da benlik saygısından etkilenmektedir.

Algılanan Sosyal Beceriler

Sosyal beceriler birbirinden farklı, öğrenilmiş davranışlar topluluğu olarak tanımlanmakta, sosyal yeterlik ise bu davranışların sosyal etkileşimi sağlamak amacıyla sıralı bir şekilde kullanılması anlamına gelmektedir (Riggio, 1986). Sosyal beceri eksikliği yaklaşımına göre bireylerin utangaçlık yaşamasının nedeni, yeterli sosyal becerilere sahip olmayışları ve bu nedenle sosyal durumlarla baş etmede yeterince iyi olamayışlarıdır (Curran, 1977). Ancak, sosyal kaygı ya da utangaçlık yaşayan kişilerin gerçekten sosyal becerilerinin yetersiz olup olmadığı, yoksa utangaçlıklarının sadece kendilerini algılamalarından mı kaynaklandığı açık değildir.

Yapılan çalışmalarda, utangaç kişilerin utangaç olmayanlara göre iletişim başlatma konusunda daha az girişkenlik gösterdikleri, belirsizlik içeren durumlarda daha başarısız oldukları ve konuşmaya başlamadan önce daha çok duraksadıkları bulunmuşsa da, bu sonuçların sosyal beceri yetersizliği sonucu ortaya çıktığına dair geçerli kanıt yoktur. Ancak, utangaç kişilerin kendi sosyal becerilerini olduğundan daha düşük görme gibi bir eğilimlerinin olduğu bilinmektedir (Arkowitz ve Ark., 1975; Rappe ve Lim, 1992). Nesnel gözlemcilerin aksine, utangaç bireyler sosyal becerilere sahip olma açısından kendilerini başkalarının onları algıladıklarından daha yetersiz olarak algılamaktadır. Bu da utangaç kişilerin aslında sosyal becerilerinin yeterli olduğu; ancak çeşitli bilişsel süreçler sebebiyle bu becerileri kullanmada yetersiz kaldıkları düşüncesini pekiştirmektedir.

Bilişsel kuramlar, utangaç kişilerin sosyal becerileri ile ilgili bulunan çelişkili araştırma sonuçları doğrultusunda çeşitli bilişsel süreçleri kapsayarak sosyal beceri ve utangaçlık arasındaki ilişkiyi açıklamaya çalışmışlardır. Bu yaklaşımlara göre utangaç bireyler sosyal becerileri olmadığı için değil, bu becerilere sahip olmadıklarını ya da yeterli sosyal beceriye sahip olmadıklarını düşündükleri için kaygı ve sosyal ilişkilerden kaçınma yaşamaktadırlar. Bir başka deyişle, kişinin algılamaları utangaçlıklarında önemli rol oynamaktadır.

Benlik sunumu yaklaşımına göre ise, kişi kendini sosyal olarak yetersiz algıladığında kendi sosyal performansı ile ilgili kaygı ve şüpheleri de artmaktadır (Schlenker ve Leary, 1982). Bu kaygı ve şüphe de utangaçlığa yol açan en önemli faktörlerdendir. Bu bağlamda, algılanan sosyal becerilerin utangaçlık ile ilişkisine benlik sunumu kaygıları açısından bakılması yararlı olacaktır.

Başkalarınca Belirlenen Mükemmeliyetçilik

Bilişsel yaklaşımlara göre sosyal kaygı yaşayan bireyin özelliklerinden biri, diğer insanların kişi için koydukları standartlarını ya da ondan beklentilerini karşılayamadıklarını düşünmeleri, bunun sonucunda da onlardan olumsuz değerlendirme alacağına inanmasıdır (Frost, 2001; Rapee ve Heimberg, 1997).

Mükemmeliyetçilik, 1990'lı yıllardan beri çok boyutlu olarak kavramsallaştırılmaktadır. Mükemmeliyetçiliğe çok boyutlu yaklaşımlardan en kabul görenlerinden biri Hewitt ve Flett (1991) tarafından önerilmiştir. Buna göre, mükemmeliyetçiliğin 3 boyutu vardır. Kendine yönelik mükemmeliyetçilik, bireyin kendinden çıkan ve yine kendine yönelik mükemmeliyetçilik davranışlarını yansıtmaktadır. Başkalarına yönelik mükemmeliyetçilik ise yine başkalarına yönelik gerçekçi olmayan beklentileri, aşırı eleştirel değerlendirme biçimi, mükemmeli elde etme ve hatalardan kaçınma için yüksek bir motivasyonu içeren bir boyuttur. Başkalarınca belirlenen mükemmeliyetçilik ise bireyin, başkalarının kendisi ile ilgili gerçekçi olmayan beklentilerinin olduğu ve kendisini aşırı ölçüde eleştirdiklerini düşündüğü bir boyuttur. Bu araştırmada utangaçlığın başlatıcılarından biri olarak başkalarınca belirlenen mükemmeliyetçilik ele alınmıştır.

Mükemmeliyetçilik boyutlarından kaygı, depresyon, düşük benlik algısı gibi belirtilerle ve uyumlu olmayan düşüncelerle en ilişkili olanının başkalarınca belirlenen mükemmeliyetçilik olduğu bulunmuştur (Chang ve Rand, 2000; Flett ve Ark., 1991). Utangaçlık ve sosyal kaygı açısından bakıldığında, utangaç kişilerin kendi davranışlarını bazı standartlara göre değerlendirdikleri ve bu standartları da karşılayamayacak durumda olduklarını düşündükleri bilinmektedir. Sosyal kaygı

yaşayan bireylere göre diğer insanlar kişiden kusursuz bir performans beklemektedir (Leary ve Ark., 1988; Wallace ve Alden, 1995).

Utangaçlık ve sosyal kaygı, mükemmeliyetçilik boyutlarından başkalarının belirlenen mükemmeliyetçilik ile diğer boyutlarına göre daha anlamlı ilişkiler göstermektedir. Bu da utangaçlığın daha çok kişisel değil kişiler arası bir özelliğini yansıtmaktadır. Başkalarının belirlenen mükemmeliyetçiliğin olumsuz değerlendirilme korkusu ve benlik saygısı ile olan ilişkisi de bulunmuştur. Başkalarının belirlenen mükemmeliyetçiliği yüksek olan birey, diğer insanların onu olumsuz olarak değerlendireceğini düşünmekte, aynı zamanda kendisini değersiz olarak görmektedir (Frost, 2001).

Bilişsel kuramlara ve benlik sunumu modeline uygun olarak, başkalarının belirlenen mükemmeliyetçiliğin yüksek olmasının olumsuz olarak değerlendirilme korkusunu ve düşük benlik saygısını arttırması beklenebilir. Ancak, mükemmeliyetçiliğin bu boyutunun utangaçlığa olan katkısının ne ölçüde ve hangi yollardan olduğunu belirlemek için daha fazla çalışmaya ihtiyaç vardır. Bu bakımdan başkalarının belirlenen mükemmeliyetçilik, benlik saygısı, olumsuz değerlendirilme korkusu ve utangaçlık arasındaki yapısal ilişkilerin incelenmesi gerekmektedir.

Algılanan Anne-Baba Tutumları

Utangaçlığa benlik sunumu yaklaşımına göre, her birey için yaşanan kaygı ve kaçınma davranışı aynı nedenlerden olmamakta, ancak nedenlerin benlik sunumu şüphesi ve kaygısıyla ilişkili olduğu bilinmektedir. Bu kaygı ve şüphelere yol açabilecek çok çeşitli faktörler bulunmaktadır. Bunlardan biri de anne ve babada algılanan tutumlardır. Özellikle Türkiye’de ebeveyn davranış ve tutumlarının çocukların psikososyal yaşantılarındaki önemi düşünüldüğünde, anne-baba tutumlarının utangaçlıktaki rolünün incelenmesi gerekli görülmektedir.

Pek çok çalışma çocuklarda kendini değerlendirme ve onay kaygıları gibi bilişsel süreçlerin gelişmesinde ebeveyn tutum ve davranışlarının önemini vurgulamaktadır. Anne ve baba tarafından gösterilen aşırı korumacı ve bağımsızlık kısıtlayıcı tutumların çocukların düşünce biçimlerini etkilediği ve bu tutumların da sosyal kaygı gibi sorunlara yol açtığı belirtilmiştir (Chorpita, Albano, ve Barlow, 1996).

Örneğin kendini değerlendirme ile ilgili yapılan çalışmalarda, umursamaz, aşırı sahiplenici ve baskıcı tutum gösteren ailelerin çocuklarının benlik saygılarının düşük olduğu; buna karşılık benlik saygısı yüksek çocukların anne ve babalarının daha kabul edici ve sıcak oldukları bulunmuştur (Coopersmith, 1967; Rice, 1990). Ayrıca, çocukların dış görünüşleri ve davranışlarını sürekli eleştirmenin, başkalarının ne düşündüklerinin önemli olduğunu vurgulamamanın çocuklarda olumsuz değerlendirilme korkusu yarattığı bilinmektedir (Buss, 1980). Onay alma isteği çok olan çocukların anne baba tutumlarının sert ve baskıcı olarak algılandığı bulunmuştur (Allaman, Joyce, ve Crandall, 1972).

Anne-baba tutumları kişinin benlik sunumu motivasyonunu oldukça etkilemesine rağmen, belirli tutum ve davranışların utangaçlığa doğrudan yol açtığı konusunda literatürde çok fazla kanıt rastlanmamaktadır. Utangaç olan ve olmayan çocuk ve gençlerde anne-babada algılanan tutum ve davranışlarda farklılıklar görülmektedir. Bu çalışmada da anne-baba tutumlarının benlik saygısı ve olumsuz değerlendirilme korkusu aracılığı ile utangaçlığa yol açtığı düşünülmektedir.

Çalışmanın Amacı

Bu çalışmanın amacı üniversite öğrencilerinde utangaçlığın nedenlerini benlik sunumu yaklaşımı çerçevesinde araştırmaktır. Bu amaçla, benlik sunumu yaklaşımı temel alınarak bir utangaçlık modeli geliştirilmiş ve bu model, içeriğindeki sosyal, psikolojik ve bilişsel faktörlerin birbirleriyle olan yapısal ilişkilerini; ayrıca bu değişkenlerin birbiriyle etkileşerek utangaçlığı ne ölçüde yordadığını incelemek üzere test edilmiştir (Figür 1.1, sayfa 54).

Modelde, olumsuz değerlendirilme korkusu, benlik saygısı, algılanan sosyal beceriler, başkalarınca belirlenen mükemmeliyetçilik ve algılanan anne-baba tutumları utangaçlığın başlatıcıları olarak önerilmiştir. Bu değişkenlerden utangaçlık bağımlı değişken, algılanan sosyal beceriler, başkalarınca belirlenen mükemmeliyetçilik ve algılanan anne-baba tutumları bağımsız değişkenler, olumsuz değerlendirilme korkusu ve benlik saygısı ise hem bağımsız, hem bağımlı hem de ara değişkenler olarak belirlenmiştir. Yani, olumsuz değerlendirilme korkusu ve benlik saygısı, diğer bağımsız değişkenler ile utangaçlık arasında ara değişken rolü de üstlenmektedir.

Bu bağlamda araştırmada yanıt aranan sorular şunlardır:

- 1) Utangaçlık; olumsuz değerlendirilme korkusu, benlik saygısı, başkalarınca belirlenen mükemmeliyetçilik ve algılanan sosyal beceriler tarafından ne ölçüde yordanmaktadır?
- 2) Olumsuz değerlendirilme korkusu; benlik saygısı, başkalarınca belirlenen mükemmeliyetçilik, algılanan sosyal beceriler ve algılanan anne-baba tutumları tarafından ne ölçüde yordanmaktadır?
- 3) Benlik saygısı; başkalarınca belirlenen mükemmeliyetçilik, algılanan sosyal beceriler ve algılanan anne-baba tutumları tarafından ne ölçüde yordanmaktadır?

YÖNTEM

Bu çalışmaya, Orta Doğu Teknik Üniversite'sinin 5 ayrı fakültesinden tabakalı seçkisiz örneklem ile seçilmiş 497 (287 kız, 210 erkek) lisans öğrencisi katılmıştır. Araştırmada veri toplamak amacıyla 7 ölçek kullanılmıştır. Bunlar, Demografik Bilgi Formu, Gözden Geçirilmiş Cheek ve Buss Utangaçlık Ölçeği, Olumsuz Değerlendirilme Korkusu Ölçeği-Kısa Form, Başkalarınca Belirlenen Mükemmeliyetçilik Ölçeği, Rosenberg Benlik Saygısı Ölçeği, Sosyal Beceri Envanteri- Kısa Form ve Anne-Baba Tutum Ölçeği'dir.

Gözden Geçirilmiş Cheek ve Buss Utangaçlık Ölçeği'nin kullanılabilirliğini test etmek amacıyla bir pilot uygulama yapılmıştır. Bu uygulamaya ODTÜ'den seçilmiş ve esas çalışmaya dahil edilmeyen 170 öğrenci katılmıştır. Ölçeğin iç tutarlılığı, faktör yapısı ve benzer ölçekler geçerliği hesaplanmış ve ölçeğin araştırmada kullanılmak üzere geçerli ve güvenilir bir ölçme aracı olduğu kanısına varılmıştır.

Olumsuz Değerlendirilme Korkusu Ölçeği- Kısa Form'un Türkçe'ye çevirisi ve adaptasyonu ise araştırmacı tarafından yapılmıştır. Bu amaçla, öncelikle ölçek Türkçe'ye uzmanlar tarafından çevirilmiş, daha sonra ölçeğin güvenilirlik ve geçerliğini belirlemek üzere esas çalışmaya dahil edilmeyen 250 ODTÜ öğrencisi ile bir pilot uygulama yapılmıştır. Ölçeğin iç tutarlılığı ve faktör yapısı incelenmiş ve araştırmada kullanılabilirliğine dair kanıtlar sağlanmıştır.

Sosyal Beceri Envanteri- Kısa Form, araştırmacı tarafından oluşturulmuş; 260 ODTÜ öğrencisinin katılımıyla bir pilot uygulama yapılarak, ölçeğin iç tutarlılığı ve faktör yapısına dair veriler sağlanmıştır.

Veriler araştırmacı tarafından 2005-2006 öğretim yılı güz döneminde 5 haftalık bir sürede toplanmıştır. Öğretim elemanlarının izni alındıktan sonra tüm ölçme araçları öğrencilere ders saatlerinde dağıtılmış ve gerekli açıklamalar tüm öğrencilere standart biçimde yapılmıştır. Tüm öğrenciler çalışmaya gönüllü olarak katılmıştır.

Varilerin analizi için Lisrel 8.30 programı ile yol (path) analizi uygulanmıştır. Bu analiz ile araştırmada sunulan model test edilmiştir. Daha açık bir ifadeyle utangaçlığın benlik sunumu yordayıcılarının utangaçlığı ne ölçüde açıkladığını görmek ve değişkenlerin doğrudan ve dolaylı etkilerini incelemek için birbirleriyle olan yapısal ilişkilerine bakılmıştır.

BULGULAR

Çalışmanın temel analizi olan yol analizinden önce değişkenlerin ortalamaları ve standart sapmaları (Tablo 3.2); daha sonra da değişkenler arasındaki korelasyonlar hesaplanmıştır (Tablo 3.3).

Önerilen modelin testi amacıyla öncelikle modelin çalışma verilerine ne ölçüde uygun olduğunu görmek için çeşitli uygunluk ölçütleri hesaplanmıştır. Bu sonuçlar Tablo 3.6'da belirtilmektedir. Tablodan, tüm istatistiksel uygunluk sonuçlarının anlamlı olduğu görülmektedir.

Modelde kurgulanan doğrudan ve dolaylı yolların anlamlı olup olmadığı standardize edilmiş beta yükleri ile elde edilmiştir. Doğrudan ve dolaylı etkiler Tablo 3.7 ve Tablo 3.8'te sunulmuştur. Figür 3.1 (sayfa 98) ise önerilen modeldeki yolların beta yüklerini göstermektedir. Figürde anlamlı yollar kırmızı, anlamsız yollar ise siyah renkle gösterilmiştir.

Bu yükler incelendiğinde, utangaçlığın olumsuz değerlendirilme korkusu tarafından olumlu yönde yordandığı; benlik saygısı tarafından ise olumsuz yönde yordandığı görülmüştür. Benlik saygısı aynı zamanda olumsuz değerlendirilme korkusunu olumsuz yönde yordamıştır. Bu sonuç, olumsuz değerlendirme korkusunun, benlik saygısı ve utangaçlık arasında bir ara değişken olduğunu göstermiştir. Benlik saygısının utangaçlık üzerindeki etkisi hem doğrudan hem de olumsuz değerlendirilme korkusu aracılığı ile dolaylı olmaktadır.

Başkalarınca belirlenen mükemmeliyetçilik utangaçlığı ve olumsuz değerlendirilme korkusunu doğrudan olumlu olarak yordarken, benlik saygısını olumsuz yönde yordamıştır. Bu bulgu, başkalarınca belirlenen mükemmeliyetçiliğin utangaçlık üzerindeki doğrudan ve hem olumsuz değerlendirilme korkusu hem de benlik saygısı aracılığı ile dolaylı etkisini göstermiştir.

Algılanan sosyal beceriler utangaçlığı olumsuz yönde yordamıştır. Benlik saygısı, sosyal beceriler tarafından olumlu yönde yordanırken, sosyal becerilerin olumsuz değerlendirilme korkusu üzerinde doğrudan bir etkisi olmadığı ortaya çıkmıştır. Sosyal becerilerin hem olumsuz değerlendirilme korkusu hem de utangaçlık üzerinde benlik saygısı aracılığı ile dolaylı etkilerinin olduğu da bulunmuştur.

Algılanan anne-baba tutumlarından kabul/ilginin, olumsuz değerlendirilme korkusu üzerinde anlamlı bir etkisi bulunmazken benlik saygısını olumlu yönde yordadığı ortaya çıkmıştır. Algılanan anne-baba kontrol/denetim ise olumsuz değerlendirilme korkusunu olumlu yönde yordamış, ancak benlik saygısı üzerinde anlamlı bir etkisinin olmadığı görülmüştür. Anne-baba psikolojik bağımsızlık da kabul/katılım gibi benlik saygısını olumlu yönde etkilemiş, olumsuz değerlendirilme korkusunu ise anlamlı olarak yordamamıştır. Bu sonuçlar, algılanan anne-baba kabul/ilgi ve psikolojik özerkliğin utangaçlık üzerinde benlik saygısı aracılığı ile dolaylı birer etkisi olduğunu; aynı zamanda anne-baba kontrol/denetimin utangaçlık üzerinde olumsuz değerlendirilme korkusu aracılığı ile dolaylı bir etkisi olduğunu göstermiştir.

Araştırma modeli, anlamsız olarak bulunan yollar silindikten sonra tekrar test edilmiş ve bu haliyle modelin çok daha iyi uyum istatistiklerinin olduğu görülmüştür (Tablo 15). Figür 3.2 (sayfa 107), yenilenmiş modeldeki beta yüklerini göstermektedir. Utangaçlık, olumsuz değerlendirilme korkusu ve benlik saygısı için elde edilen regresyon eşitlikleri ve R^2 sonuçları Tablo 3.11’de gösterilmiştir. Sonuç olarak benlik saygısı, başkalarınca belirlenen mükemmeliyetçilik ve algılanan anne-baba kontrol/denetim, olumsuz değerlendirilme korkusundaki toplam varyansın % 21’ini; başkalarınca belirlenen mükemmeliyetçilik, algılanan sosyal beceriler, algılanan anne-baba kabul/ilgi ve algılanan anne-baba psikolojik özerklik, benlik saygısındaki toplam varyansın % 17’sini; olumsuz değerlendirilme korkusu, benlik saygısı, başkalarınca belirlenen mükemmeliyetçilik ve algılanan sosyal beceriler ise utangaçlıktaki toplam varyansın % 49’unu açıklamıştır.

TARTIŞMA

Araştırmadan elde edilen sonuçlara bakıldığında olumsuz değerlendirilme korkusunun, düşük benlik saygısının, başkalarınca belirlenen mükemmeliyetçiliğin ve düşük sosyal beceri algısının doğrudan utangaçlığa yol açtığı görülmektedir. Ancak bu doğrudan etkilerin yanında olumsuz değerlendirilme korkusunun ve benlik saygısının beklendiği gibi utangaçlık ve diğer değişkenler arasında ara değişken özelliğine de sahip olduğu ortaya çıkmıştır. Başkalarınca belirlenen mükemmeliyetçilik, düşük benlik saygısı ve olumsuz değerlendirilme korkusuna yol açarak utangaçlığı etkilemekte; algılanan sosyal beceri eksikliği ise düşük benlik saygısına yol açarak utangaçlık üzerinde etkili olabilmektedir. Algılanan anne-baba tutumları da ya öğrencilerin benlik saygısını ya da olumsuz değerlendirilme korkularını etkileyerek utangaçlığa yol açmaktadır. Ayrıca olumsuz değerlendirilme korkusu benlik saygısı ve utangaçlık arasında da bir ara değişkendir. Yani, düşük benlik saygısı olumsuz değerlendirilme korkusuna yol açmakta, bu da utangaçlığa sebep olmaktadır.

Araştırma bulgularında görüldüğü gibi, üniversite öğrencilerinde utangaçlığa yol açabilen pek çok benlik sunumu faktörü bulunmuştur. Bu etkenler kendi aralarında çeşitli etkileşimlerde bulunmakta ve bireylerin utangaçlığı üzerinde rol oynamaktadır. Özetle, bireylerin utangaçlığında hem bilişsel, hem kişisel, hem de sosyal faktörlerin etkili olduğu ortaya çıkmıştır. Sonuçlara göre bilişsel faktörlerin, kişisel özelliklerinin utangaçlık üzerindeki etkisini güçlendirebileceği söylenebilir. Bulgular, benlik sunumu modeli ve diğer bilişsel modellerle tutarlılık göstermektedir. Bu çalışma, üniversite öğrencilerinin utangaçlığının önemli nedenlerini ortaya koymuştur. Benlik sunumu çerçevesinde utangaçlığı açıklayıcı pek çok etkenin bireysel rolleri yanında bu etkenlerin birbirleriyle etkileşerek utangaçlığı yordadığı da bulunmuştur.

Araştırma sonuçlarından elde edilen bulguların psikolojik danışma uygulamaları için yararlı olacağı düşünülmektedir. Öncelikle, utangaçlığa benlik sunumu yaklaşımı, her danışanın kişilik özelliklerinin ve kişiye özgü benlik sunumu kaygılarının hesaba

katılmasına vurgu yaptığından, öncelikle bu kaygıların danışman tarafından belirlenmesi önem taşımaktadır.

Bu araştırmada olumsuz değerlendirilme korkusu ve benlik saygısının utangaçlığı etkilediği, yani uyumsuz düşünce kalıplarının ya da bilişsel süreçlerin utangaçlıkta önemli olduğu ortaya çıkmıştır. Literatüre bakıldığında utangaçlığa ya da sosyal kaygıya yol açan bu tarz düşünce sistemlerinin değiştirilmesinde danışanlara genellikle bilişsel yöntemlerle yardım edildiği görülmektedir. Kişilerin kendilerini daha olumlu olarak algılamaları ve başkalarının kişiyi olumsuz olarak değerlendirilmesi korkusunun azaltılarak yerine daha akılcı ve çarpıtılmamış düşünceler koyulması için bilişsel danışmaların oldukça etkili olduğu bilinmektedir.

Bunun dışında sosyal becerilerle ilgili olarak, kişilerin gerçekten birtakım beceri eksiklikleri olup olmadığının belirlenmesi oldukça önemlidir. Bu araştırmada katılımcıların sosyal becerilerine yönelik olarak kendi algılamaları ölçülmüştür. Ancak sonuçların, onların gerçek sosyal becerilerini yansıttığı kesin olarak söylenemez. Sosyal becerileri yetersiz olan bireyler sosyal beceri eğitimlerinden yararlanabilmekte, böylelikle sözlü iletişim, beden dili, kendini ifade edebilme gibi birtakım becerilerini geliştirebilmektedir. Ancak benlik sunumu yaklaşımının vurguladığı gibi danışanın geliştirmesi gereken beceriler, kişinin diğer insanlar üzerinde daha iyi izlenimler bırakmalarına yardımcı olacaklarını düşündükleri beceriler olmalıdır.

Çalışmada bulunan bir diğer sonuç doğrultusunda, başkalarınca belirlenen mükemmeliyetçiliğin azaltılmasına yönelik olarak da birtakım öneriler yapılabilir. Kişi eğer başkalarının kendisinden çok fazla şey beklediğini düşünüp bu düşünceye odaklanıyor ve kaygı hissediyorsa, psikolojik danışma süreci, sosyal davranışa yönelik gerçekçi olmayan standartları yakalama beklentisi düşüncelerini belirleyip bu düşünceleri değiştirmeye dayalı olmalıdır.

Önleyici etkinlikler olarak, üniversite öğrencilerine utangaçlığın anlatılması, uyumlu ve uyumsuz yönlerinin açıklanması, hangi durumlarda ve ne ölçüde başkalarının

düşüncelerine ve insanlarda bırakılan izlenimlere önem verilmesi gerektiğinin belirlenmesine yönelik olarak psiko-sosyal eğitimlerin hazırlanıp uygulanmasının yararlı olacağı düşünülmektedir.

Bundan sonra Türkiye’de yapılacak çalışmalar için de birtakım öneriler verilebilir. Türkiye’de utangaçlık kavramı bilimsel olarak çok fazla ilgi görmediğinden bu alanda sistematik ve kuramsal temele dayanan çalışmalara ihtiyaç vardır. Bu çalışma utangaçlığı benlik sunumu çerçevesinde incelemiştir. Ancak, bundan sonra başka bakış açıları ve kuramsal yaklaşımlar kullanılarak çalışmalar yapılması, utangaçlığın açıklanması için daha fazla bilgiler verebilir. Bunun dışında, utangaçlığın yaş, sosyo ekonomik statü, üniversite tipi gibi farklı özellikler dikkate alınarak oluşturulacak örneklemde incelemesi uygun olacaktır.

APPENDIX I

VITA

Selda Koydemir was born in İstanbul on January, 26, 1978. She received her B.Sc. degree in July 2000 from Boğaziçi University Guidance and Psychological Counseling Program. She started her master's degree in September 2001 in Middle East Technical University, Psychological Counseling and Guidance; and then accepted for an integrated Ph.D in the same program. From August 2004 until June 2005, she worked as a visiting research scholar at Florida State University, Clinical Psychology Department to cover up a portion of her Ph.D dissertation. She has been working as a research assistant at Middle East Technical University, Educational Sciences Department since August 2002.