



SOCIAL DESIRABILITY SCALES AND THEORIES OF SUICIDE: CORRELATIONS WITH ALIENATION AND SELF-CONSCIOUSNESS

P. J. Watson,* J. Trevor Milliron† and Ronald J. Morris

Psychology Department, University of Tennessee at Chattanooga, 615 McCallie Avenue, Chattanooga, TN 37403, U.S.A.

(Received 2 November 1994)

Summary—Edwards but not Marlowe–Crowne Social Desirability scores influence the predictability of suicidal intent. If this effect occurs because the Edwards Scale records a substantive trait rather than a response set, then it should display predictable associations with variables that are relevant to theories of suicide. In line with the work of Durkheim (Suicide, 1897/1951) and Baumeister (Psychological Review, 97, 90–113 1990), the present studies revealed that Edwards and Marlowe–Crowne scales correlated with greater social integration, healthier self-functioning, and reduced self-consciousness. Many of these outcomes were more robust for the Edwards Scale, but the Edwards Scale also was more internally reliable. Overall, these data supported the Durkheimian conclusion that if certain forms of suicide result from society's insufficient influence on the individual, then social desirability scales may operationalize society's sufficient representation within the personality.

INTRODUCTION

While social desirability scales putatively monitor a need for approval, this and similar interpretations have not gone unchallenged. McCrae and Costa (1983), for example, have argued that measures "of lying, defensiveness, or social desirability are still widely used to assess the validity of substantive scales....and to correct scores for individuals, despite evidence in the literature that neither of these functions is justified" (p. 882). In support of this claim, McCrae and Costa analyzed self-reported and presumably more objective spouse ratings of personality and found that high social desirability scores seemed to reflect a substantive and apparently adjusted personality trait. This alternative characterization of social desirability scales has in fact been used to explain their direct relationships with healthy self-functioning (e.g. Jones & Crandall, 1986; Ochse & Plug, 1986) and their inverse linkages with psychopathology (e.g. Heilbrun, 1964; Watson & Morris, 1991).

Whether social desirability instruments operationalize a response set or a substantive trait nevertheless has remained a controversial issue, and resolving this question has been especially important in research clarifying the manner in which hopelessness predicts suicidal intent (e.g. Minkoff, Bergman, Beck & Beck, 1973). Linehan and Nielsen (1981, 1983) discovered that the positive relationship between these two variables was completely eliminated when variance in Edwards' (1970) Social Desirability scores was partialled out. The influence of a social desirability response set therefore was implicated, and caution was advised in interpreting the role of hopelessness in suicide.

Nevid (1983), however, counterargued that this social desirability effect pointed toward the operation of a theoretically meaningful construct; and Petrie and Chamberlain (1983) failed to observe similar results when they used the Marlow–Crowne Social Desirability Scale (Crowne & Marlowe, 1960). Reports then followed that the Edwards and Marlowe–Crowne scales measure different things (Cole, 1988; Holden & Fekken, 1989; Strohsahl, Linehan & Chiles, 1984), that the social desirability effect is reliable when the Edwards and other similar scales are employed (Holden & Mendonca, 1984; but see Ivanoff & Jang, 1991), and that response sets therefore remain a legitimate concern (e.g. Holden, Mendoca & Mazmanian, 1985; Mazmanian, Mendonca, Holden & Dufton, 1987; Mendonca, Holden, Mazmanian & Dolan, 1983).

Still further investigations then demonstrated that hopelessness and social desirability may interact in predicting suicidal tendencies (Cole, 1988; Holden, Mendonca & Serin, 1989; Ivanoff & Jang,

^{*}To whom all correspondences should be addressed.

[†]Currently a graduate student in clinical psychology at Fuller Theological Seminary in Pasadena, California, U.S.A.

1991). Ivanoff and Jang, for example, discovered in a sample of prison inmates that "the ability of hopelessness to explain or predict suicidality *decreases* as social desirability *increases*. In other words, hopelessness has less ability to explain suicidality among those who tend to respond in a more socially desirable manner" (pp. 397–398, their emphasis). Holden *et al.* (1989) observed similar data and suggested that the Edwards and other comparable scales measure a personal sense of self-efficacy and that "cognitions of self-capability reduce the link between suicide and hopelessness" (p. 503). In short, at least some evidence supports the claim that social desirability scales correlate with predictors of suicidality because they operationalize a substantive trait.

The present project sought to clarify this issue by examining social desirability scales from the perspective of different theories of suicide. The empirical question was whether social desirability scales would correlate predictably with variables presumed by these theories to be important in explicating suicide. The observation of such relationships might suggest theoretically enriched opportunities for understanding these scales. Failures to confirm such predictions, of course, would cast doubt on the hypothesis that social desirability scales are meaningfully related to suicidality.

STUDY 1

At the end of the last century, the French sociologist Emile Durkheim (1897/1951) published a classic in the study of suicide. His empirical objective was to examine various sociocultural causal factors in order to identify different species of suicide. Once these various forms of self-destruction were defined, their general characteristics were to be identified. Relevant to this first study was Durkheim's description of the anomic and egoistic types of suicide, which as he noted, often occur together (p. 288).

Anomic suicide is the product of social conditions in which self-restraint is increasingly undermined, most typically through processes associated with the development of market economies. The result is a 'liberation of desires', overexcited ambition, and greed (pp. 254–256). Appetites become limitless. As a consequence, people increasingly are left without meaningful goals, because those "who have only empty space above them are almost inevitably lost in it" (p. 257). This kind of unregulated personality "aspires to everything and is satisfied with nothing" (p. 258). "When one is no longer checked, one becomes unable to check one's self" (p. 271). And as Durkheim's analyses demonstrated, the result can be suicide.

Egoistic suicide is the product of an excessive individualism; and like anomic suicide, it is the outcome of "society's insufficient presence in individuals" (p. 258). Egoists get lost in their own reflective thought and increasingly distance themselves from social life. As they are less and less integrated into communal structures, they lose their reasons for living:

"The individual alone is not a sufficient end for his activity. He is too little. He is not only hemmed in spatially; he is also strictly limited temporally. When, therefore, we have no other object than ourselves we cannot avoid the thought that our efforts will finally end in nothingness....Under these conditions one would lose courage to live, that is to act and struggle, since nothing will remain of our exertions" (p. 210).

Social life supplies this courage by allowing individuals to contribute to social roles and objectives that will survive their death (pp. 208–216). Intellectuals, Durkheim thought, are particularly vulnerable to this form of self-destruction (e.g. p. 258).

In the present study, the Edwards Scale was administered to one sample, and the Marlowe-Crowne was presented to another. Both instruments were examined within the context of other variables deemed to be relevant to Durkheim's analysis of suicide. Dean's (1961) Alienation Scale contains Normlessness and Isolation subscales that explicitly operationalize what Durkheim saw to be two consequences of anomie. A third component was based upon the work of Hegel and Marx. This Powerlessness subscale nevertheless seemed relevant to Durkheim's theory because an inability to 'check one's self' and an impotence in the face of death do seem to be a kind of powerlessness. Furthermore, powerlessness items make reference to the absence of a satisfying social life that Durkheim associated with anomie and egoism. As Dean also noted, these three subscales intercorrelate positively.

The Machiavellianism Scale [Mach IV (Christie & Geis, 1970)] measures an interpersonal

دريافت فورى ب متن كامل مقاله

ISIArticles مرجع مقالات تخصصی ایران

- ✔ امكان دانلود نسخه تمام متن مقالات انگليسي
 - ✓ امكان دانلود نسخه ترجمه شده مقالات
 - ✓ پذیرش سفارش ترجمه تخصصی
- ✓ امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
 - ✓ امكان دانلود رايگان ۲ صفحه اول هر مقاله
 - ✔ امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
 - ✓ دانلود فوری مقاله پس از پرداخت آنلاین
- ✓ پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات