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Two Distinct Facets of Competitiveness and their Influence on Psychological

Adjustment

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Abstract

This study was conducted to explore the influence of competitiveness as a personality trait on psychological adjustment. Competitiveness was differentiated into two distinct facets referred to as superiority competitiveness and mastery competitiveness. In terms of psychological adjustment, the effects of these facets of competitiveness on depression, loneliness, self-esteem, anxiety, and eating patterns were examined. Questionnaires were used to assess the aforementioned dimensions. The results of the study revealed some noteworthy gender differences. Among females, superiority competitiveness was associated with higher levels of depression. Among males, superiority competitiveness was associated with less loneliness. A significant association was also observed between mastery competitiveness and decreased anxiety among females. These differentiated gender patterns seem to reflect differences in the way males and females are socialized to think and behave.

Two Distinct Facets of Competitiveness and their Influence on Psychological Adjustment

Competition is a phenomenon so engrained in our thinking that we often cannot detect it. To the extent that thinking patterns reflect cultural phenomena, it is no wonder that people immersed in a competitive atmosphere often develop competitive ways of thinking. The foundation of our economy relies on the assumption that competition is a process that encourages innovation (Kuperberg, 2003). Competition is also a defining aspect of the educational system and sports in many parts of the world, often leading people to interpret life in win/lose terms. Many theorists have argued that our culture assumes that competition is the “normal” state of the world (Kohn, 1992). That is, many have argued that competition is part of human nature. By assuming that competition is a natural part of life, competitiveness is often unquestioned as something we should encourage in people, but rather, is seen as something inevitable and even positive (Kohn, 1992). Moreover, there is also a tendency to associate competitiveness with an innate drive to achieve and overall feelings of well-being so that it is often viewed as a commendable personality trait.

Although competitiveness is frequently packaged in these positive terms, we are often struck by another side of competitiveness which is far less glorious. When we refer to someone as being the “competitive type,” there is typically an underlying suggestion that their character is somehow flawed either by selfishness or an inflated conception of themselves. Indeed, when we describe someone as competitive, it tends not to be in admiration for that person. Understandably, our society is torn between these conflicting notions of competitiveness as a personality trait making us somewhat ambivalent about

competition. The purpose of the current study is to clarify this ambivalence by examining the nature of competitiveness and its influences on psychological adjustment.

One reason why there is ambivalence surrounding competitiveness may be due to a controversy over whether competitiveness is a learned trait or a natural quality in people (Kohn, 1992). That is, it has been argued that competitiveness is either a way of living that people have naturally evolved towards or an aspect of culture that people have been trained in. Although it is unclear which speculation is accurate, it may be helpful to inquire about the positive and/or negative consequences that competitiveness presents in our lives. In order to address the ambivalent notions attached to competitiveness, this personality trait has been examined in terms of two distinct facets of competitiveness. In this study, I sought to clarify this ambiguity by examining two facets of competitiveness referred to as superiority competitiveness and mastery competitiveness (see Table 1) and how they influence psychological adjustment.

Superiority Competitiveness. This facet of competitiveness can be considered an offshoot of the evolutionary purpose of intraspecies competition, which emerged as a way to gain superiority over rivals for limited resources (Hibbard, 2000). People with a superiority competitiveness disposition must feel that they are superior to others in order to feel good about themselves. This is because people who are superiority competitive feel the need to outperform others as a way of affirming their self-worth. Since there is a need to feel superior to others, winning becomes the individual's ultimate goal, of which he or she will strive to achieve at all costs. One way to sum up this facet of competitiveness might be with the statement "winning is what is most important and not how you get there." It is not the

process one goes through to get to the top that is important but instead, whether one can make it to the top.

The neoanalyst Karen Horney (1937) has used the term “hypercompetitiveness” to describe this facet of competitiveness in its extreme form. Horney described hypercompetitiveness as a need for individuals to compete with the ultimate goal being to win at all costs in order to maintain or enhance feelings of self-worth (Ryckman, Libby, van den Borne, Gold, & Lindner, 1997). Hypercompetitive individuals, in her view, are characterized by an accompanying orientation of manipulation and vilification of others across a myriad of situations. In order to find out more about this specific facet of competitiveness, Ryckman and his colleagues devised the Hypercompetitive Attitude Scale (HCA; Ryckman, Hammer, Kaczor, & Gold, 1990) which provides a measure of the degree to which individuals exhibit this personality trait.

Mastery Competitiveness. This facet of competitiveness seems to embody much of the positive perception we have of this personality trait. Indeed, it may be this side of competitive people that we find to be appealing and desirable. Mastery competitiveness is derived from the evolutionary goal of competing to master and conquer the challenges of the environment (Hibbard, 2000). Mastery competitiveness is an attitude in which the emphasis is not placed on winning, but rather the enjoyment and mastery of a task. Although winning is important, the main motivators are self-improvement and self-discovery, with superiority not being a driving force. Individuals with this disposition do not feel the need to use social comparison because how they rank with others is irrelevant in defining their self-worth. People who have a mastery competitiveness orientation form a self-derived definition of success that is consistent, as opposed to external cues that are prone to fluctuation. Winning

with this orientation has more to do with having performed up to the standards that people set for themselves rather than with outperforming everyone else. As people with this orientation measure themselves according to set absolute standards or previous performances, they are, in a sense, competing with themselves. Therefore, self-improvement is important to people with a mastery competitiveness disposition because it is a process they must go through in order to achieve these standards of success.

A similar concept has been explored by Ryckman and his colleagues who have identified a type of competitiveness termed “personal development competition orientation.” It has been defined as an attitude with an emphasis placed, not upon winning, but rather on using the competitive experience to facilitate personal growth (Ryckman, Libby, van den Borne, Gold, & Lindner, 1997). People with such dispositions do not view others as an interference that must be removed but rather as helpers that can encourage their learning and growth. Personal development competitors do not see people as getting in the way of their success, in fact, they tend to see people as enhancers of their success (Ryckman, Libby, van den Borne, Gold, & Lindner, 1997). People with this disposition want to win, but defeating others is not thought of as a necessary means to winning.

Psychological Adjustment

Because competitiveness seems to be so pervasive, a number of assumptions exist concerning the costs and benefits of competitiveness in various domains. One important domain where these cultural assumptions exist is the area of psychological adjustment. This next section will examine how competitiveness relates to factors of psychological adjustment, specifically, self-esteem, depression, anxiety, loneliness, and eating patterns. First, I will examine self-esteem.

Self-Esteem. How worthy and adequate individuals feel can be defined to a great extent by their level of self-esteem. Due to its strong link to psychological health, self-esteem is one of the most frequently studied variables in psychology (Trzesniewski, Donnellan, & Robins, 2003). Having a healthy amount of self-esteem enables a person to have healthy social relationships, subjective well-being, and many other positive outcomes. In contrast, low self-esteem has been linked to numerous problematic outcomes, including depressive symptoms and antisocial behavior (Block, Gjerde, & Block, 1991).

Karen Horney has argued that on a largely unconscious level, hypercompetitive individuals feel powerless and insignificant typically due to their parents having exposed them to harsh disciplinary practices and treatment early in life (Ryckman, Thornton, & Butler, 1994). Horney also asserted that because individuals who are high in hypercompetitiveness tend to strive unremittingly to achieve in multiple roles, they usually experience role overload and conflict. Taking on an excessive number of roles commonly leads to individuals falling short of these goals and, as a result, feeling generally dissatisfied with their lives. Since superiority competitive individuals need to feel superior to others in order to feel worthy, their self-esteem is dependent upon whether they consider others to be below them in rank.

Leary and Baumeister (2000) have characterized self-esteem as an indicator of transient beliefs about one's worth relative to others. From this perspective, self-esteem is highly reactive to social evaluation and is therefore continually fluctuating in response to external feedback. Superiority competitiveness is a trait where people rely substantially on these external resources to confirm their worth. To the individual who has a superiority competitiveness disposition, his/her self-concept could be shattered when ranking fluctuates

and his/her internal sense of worth is not strong. Since a person's ranking is not stable, self-esteem, in turn, may be even more unstable.

Ryckman and his colleagues (1994) have discovered that although hypercompetitive individuals were highly narcissistic and held an exaggerated conception of their own worth, a closer look at their opinions revealed paradoxically low levels of self-esteem in these individuals. Interestingly, we often think that individuals high in superiority competitiveness are confident and full of self-worth. It is possible, however, that this may be a false image they project in order to convince themselves that they are "ok."

People who are characterized more by mastery competitiveness base their self-worth upon absolute standards they set for themselves. They have likely internalized their worth and therefore do not use social comparison in order to confirm self-esteem (Hibbard, 2000). It seems logical that a person who has a firm sense of their worth that does not sway with others' disapproval will generally feel better about themselves. Although approval from others is needed for any person to feel worthy, he/she must internalize these external confirmations to acquire a stable sense of self. Social comparison is used by people as a way to confirm their worth based on how they rank with others in some particular event. It might be argued that needing to constantly confirm one's superiority over others is an indication of trying to compensate for a lack of it. Since mastery competitiveness is not associated with social comparison, it is logical to think that this disposition is also not associated with a need for external confirmation of one's own worth. A superiority competitive individual who constantly looks to be superior will be devastated when feelings of superiority are not confirmed, or when "losing." Since external standards are less stable than internal standards, those who are superiority competitive will probably experience feelings of failure to a greater

extent. Thus, in terms of these two facets of competitiveness, I predicted that mastery competitiveness would be associated with greater levels of self-esteem than superiority competitiveness.

Depression. As research in mental health has progressed, so has our understanding of the devastating consequences that depression brings upon the lives of millions of Americans and their families each year. While everyone becomes depressed now and again, major depressive disorder includes a feeling of chronic hopelessness about the future and typically a sense of failure (Mineka, 2000). This imbalance can be triggered by an extremely stressful life event but typically must occur in conjunction with a predisposed personality for this disorder. Although depression is a result of internal mental processes, it definitely can, and typically is, connected with external events that are stressful and bring us down.

Competitiveness is a personality trait that we value to the extent that we see it as a route to success and achieving happiness (Hibbard, 2000). We might have the assumption that competitive people are happier because they seem to be more successful. But are these assumptions correct? This may lead us to ask the broader question of whether personality plays an important factor in influencing mental health. An ample number of studies have, in fact, confirmed that personality, in conjunction with life events, influences our susceptibility to certain mental disorders, with depression being one of the widely researched topics. Although there is no known single factor that causes depression, some insightful research has helped us to pinpoint certain personality traits that have strong links to this disorder.

Research has mainly examined depression as a function of the Big Five personality traits. A study conducted by Finch and Graziano (2001) found that the influence of Agreeableness towards depression was mediated entirely by social negativity (inversely).

People high in Agreeableness were found to interpret the social behaviors of others as less confrontational and engage in social behaviors that facilitate intimacy, two behavioral tendencies that served as buffers towards depression (Finch & Graziano, 2001).

Competitiveness and its connectedness to depression have received little attention within the scope of research, perhaps because of our assumption that competitiveness is a trait associated with feelings of well-being. A commonly held assumption in our culture is that by having a drive to achieve, not only will that person have conquered everyone, but they will have also come out on top emotionally (Hibbard, 2000). This seems reasonable, however, competitive individuals will vary in terms of the achievements they aim for depending on whether they are motivated by a superiority competitiveness or mastery competitiveness disposition. It is plausible that different types of motivation could lead to distinct emotional consequences. While it may be true that competitive people lead emotionally fulfilled lives, careful examination must be exerted into how competitiveness, as two distinct dispositions, will lead to healthier emotional outcomes.

I have already speculated lower levels of self-esteem in individuals who are driven by a superiority competitiveness disposition because of their lack of inner drive and deeply engrained self-concept. It also may be the case that a mastery competitive individual who is more focused with self-improvement is not as vulnerable to environmental cues, including external stressors that could lead to depression. For the same basis that individuals high in superiority competitiveness are likely to experience low self-esteem, it may also hold true that these individuals reveal a higher degree of depressive symptomology. For these reasons, I predicted that mastery competitiveness would be associated with less depressive symptomology than superiority competitiveness.

Loneliness. A vast array of research studies have been conducted on loneliness and its associations. Loneliness has been associated with shyness or uncertainties about social competence that often leads to reduced interpersonal interaction and social support (Jackson, Fritch, Nagasaka, & Gunderson, 2002). An interesting point is that loneliness is not necessarily based on the absence or presence of others. As is evident with a person who may be perfectly content while they are alone or completely lonely when surrounded by others, it is based more on how connected we feel inside. As loneliness is widely correlated with depressive symptomology, loneliness may make individuals more susceptible to low self-esteem for the same reasons that depression does. Research indicates that a limited amount of social interaction may, in turn, have an adverse effect on people's perception of themselves, serving as a potential detriment to self-esteem. Loneliness has virtually been unexplored in research with respect to how it can be influenced by different facets of competitiveness. As there is a likelihood that superiority competitiveness is associated with lower levels of self-esteem, the connection between competitiveness and loneliness is a logical one to explore. Also, being that social approval is strongly tied to a person's level of self worth with superiority competitiveness, this may potentially make it easier for a superiority competitive person to experience loneliness when social ties are not strong. Since low self-esteem is often related to loneliness, I predicted that superiority competitiveness would be associated with a greater extent of loneliness than mastery competitiveness.

Anxiety. While a certain amount of anxiety is necessary for normal functioning, too much can be hazardous for a person's health. This overload of anxiety almost seems inevitable when we consider the many pressures we face to be successful in our society. With a competitively structured society, even more external pressure may be placed on

people to be accomplished within work and family life. The psychoanalyst Rollo May (1977) made the powerful conclusion that competition is the most pervasive reason for anxiety in our culture. He claimed that anxiety results from an apprehension about losing but also a fear of “choking” when a person is about to triumph. In an experiment conducted by Haines and McKeachie (1967), competitively structured discussion sections made undergraduate students feel markedly more tense and anxious than they did in the cooperative sessions (1967). It seems that regardless of talent or having confidence that one will win, there is an accompanying anxiety when a person engages in competition.

It is obvious that even in similar circumstances, not everyone reacts with the same level of anxiety. Personality is a crucial factor in how we respond to our environment, and an area that has been the subject of extensive research with regards to anxiety. One study has examined the association between certain attributional styles and anxiety responses to sport competition and found that females who were optimists exhibited significantly lower values of both predicted and actual precompetition anxiety than males categorized as either defensive or real pessimists (Wilson, Raglin, & Pritchard, 2000). Although this type of research is helpful, it looks at the relationship between personality and anxiety when facing a competitive situation, without directly considering how competitiveness as a personality trait can lead to different responses in anxiety levels. A significant lack of research exists that directly explores competitiveness as a personality trait and its associations with anxiety. Indeed, there is an insufficient understanding in this area.

When we think of an anxious person, the qualities that first come to mind tend to include a constant state of nervousness, being easily agitated, or simply just having trouble feeling calm. In general, anxious people do not seem to be at peace with themselves. By

noting different individual responses to anxiety or considering generally anxious people, it is evident that personality plays a role in these differences. One of the personalities that has been categorized in research that is characteristic for symptoms of anxiety is Type A personality.

Type A behavior has received a significant amount of attention in research within the fields of clinical and health psychology. Sharing many of the same components as superiority competitiveness, Type A personality is often referred to as the “hurry sickness”, with a style of living that involves “extremes of competitiveness,” striving for achievement, impatience, haste, and aggressiveness (Kirkcaldy, Cooper, & Furnham, 1998). Previous research conducted on Type A personality offers some interesting insight into how specific aspects of this attributional style are related to stress. As Friedman and Rosenman (1974) worked to find the major determinants of heart attack, they found that a significant relationship existed between Type A behavioral patterns and stress-related illness, especially coronary heart disease (Kirkcaldy, Cooper, & Furnham, 1998). A study conducted by Frances Haemmerlie and her colleagues, however, demonstrated that some aspects of Type A personality, such as the competitiveness and job involvement aspects, were related to positive adjustment in college (1991). It is not clear whether stress was included as a component of adjustment in this study.

Several studies have found that hostility, a component of the Type A pattern, is a better predictor of heart disease than measures of Type A (Williams et al., 1980). Due to the ambiguity in studies examining stress as a function of personalities such as Type A, this is an area in need of clarification. Since many of the qualities of Type A behavior are associated with stress-linked illnesses and seem to parallel traits in superiority competitiveness, it is

worthwhile to investigate the connection between anxiety levels and superiority competitiveness. Due to the similarity in traits inherent in superiority competitiveness with those of Type A personality, I predicted that superiority competitiveness would be related to higher levels of anxiety than mastery competitiveness.

Eating Patterns. Disordered eating is a persistent and widespread concern in Western societies (Burckle, Ryckman, & Gold, 1999). A phenomenon largely attributed to unrealistic messages of thinness and beauty portrayed in the media, youth are especially vulnerable to these messages, a considerable factor in the almost explosive surge of anorexia nervosa and bulimia cases among American youth. With a dangerously distorted sense of what a normal body type is, people who have eating disorders often have a perpetual feeling of failure regarding how they look. This symptom of perpetual dissatisfaction with their bodies often stems from a lack of self-esteem and striving for perfection. Perfectionism has been known to be a common element among individuals with eating disorders, which has stimulated research looking into the role of personality as a possible factor in the onset of eating disorders. Women especially are at risk of developing an eating disorder because of stronger social norms for females to be beautiful (Burckle, Ryckman, & Gold, 1999). Since appearance is often associated with success within the professional world, beauty becomes an overvalued source of competition between women for career achievement.

As one might imagine, a person with a superiority competitive disposition who relies on external standards to feel good about themselves may be more vulnerable to unrealistic standards of beauty within society. It was found that although a generalized competitive attitude is not a primary contributor to disordered eating, hypercompetitive attitudes is a key source of psychologically unhealthy thinking patterns that lead to disordered eating patterns

(Burckle, Ryckman, & Gold, 1999). People who have low self confidence may strive to attain standards of beauty that are not defined within themselves, but within the media. Since superiority competitiveness is associated with relying on external standards to define self-worth, I predicted that superiority competitiveness would be associated with increased symptoms of disordered eating than mastery competitiveness.

This study explored two distinct facets of competitiveness with how they were related to psychological adjustment. Specifically, self-esteem, depression, loneliness, anxiety, and disordered eating were examined as a function of both mastery competitiveness and superiority competitiveness. The hypotheses were as follows: Mastery competitiveness was predicted to be associated with higher self-esteem. Superiority competitiveness was predicted to be related to increased depression, loneliness, anxiety, and disordered eating patterns. For this study, students from General Psychology classes at Illinois Wesleyan University volunteered to participate in order to fulfill their research requirement. Participants were administered a packet of questionnaires in order to assess the aforementioned variables.

Method

Participants

Participants for this study were comprised of students enrolled in General Psychology at Illinois Wesleyan University. Fifty three students (31 females and 22 males) participated on a volunteer basis in order to fulfill a research credit for General Psychology. Participants ranged in age from 17 to 22 (mean age = 19.15 years) and were mostly Caucasian.

Measures of Competitiveness (see Appendix A)

Superiority Competitiveness: Attitudes Toward Competition Questionnaire. The extent to which students exhibited traits of superiority competitiveness was assessed by using the Hypercompetitiveness Attitude Scale (HAS; Ryckman et al., 1990). The HAS has demonstrated adequate reliability and construct validity (Ryckman, 1994). This questionnaire consisted of 17 items in which respondents were asked to rate themselves using a 5-point likert scale with 1 being the lowest value (never true of me) and 5 representing the highest value (always true of me). Superiority competitiveness is a personality disposition reflecting a drive to beat others at all costs. This dimension of competitiveness is contingent upon comparing one's self to others so that a person relies on external factors to determine his or her self-worth.

Mastery Competitiveness: Personal Mastery Survey. This questionnaire assessed the extent to which individuals exhibited traits of mastery competitiveness. The Personal Mastery Survey (PMS) was developed by adapting items from the Goal Competitiveness subscale of the Competitiveness Questionnaire (CQ; Griffin-Pierson, 1990) and the Personal Development Competitiveness Questionnaire (PDQ; Ryckman, 1996). This scale has been reported to have adequate reliability and construct validity (Griffin-Pierson, 1990). This particular dimension of competitiveness is characterized by a drive to defeat one's own past performances with an emphasis on being the best that a person can be. It is distinct from superiority competitiveness in that an individual does not take into account others' performances when determining his or her level of achievement. That is, the performance of others is simply not relevant. The response format of this survey was a 5-point likert scale ranging from 1 (strongly disagree) to 5 (strongly agree).

Measures of Psychological Adjustment (see Appendix A)

Depression: Feelings Inventory (Hibbard, 2000). This questionnaire assessed a person's depressive symptomology and was based on the widely used Beck Depression Inventory (BDI). The BDI's psychometric properties have been reported to have high content validity, and validity in differentiating between depressed and non-depressed people. The Feelings Inventory lists different feelings and ideas in 26 groups, with 3 statements for each group. The respondent chooses one sentence out of the three that best describes them for the past two weeks.

Self Esteem: Self Survey. The Self Survey, commonly referred to as the Rosenberg Self-Esteem Scale, examined a person's level of self-esteem (Rosenberg, 1965). Respondents were asked to rate 10 items based on a 5-point likert-scale ranging from 1 (strongly disagree) to 5 (strongly agree). The Rosenberg Self-Esteem Scale has demonstrated good internal consistency and stability with adolescents (Hibbard, 2000).

Anxiety: General Emotions Questionnaire. This questionnaire was constructed to assess the amount of anxiety a person faces. Questions from the General Emotions Questionnaire from the Beck Anxiety Inventory, a survey comprised of 10 items that follow a 5-point likert-scale format. It has excellent face validity and a high internal consistency and item-total correlations ranging from .30 to .71. Respondents must choose a number from 1-5 that best describes them with 1 (not at all true of me) and 5 (very true of me).

Loneliness: UCLA Scale. The UCLA Loneliness Scale was used to measure the extent to which a person experiences loneliness by assessing subjective feelings of loneliness or social isolation (Russell, 1996). This survey consisted of ten items that were worded in a negative or lonely direction and 10 items were worded in a positive or non-lonely direction

using a four-point likert-scale format ranging from 1 (never) to 4 (often). The UCLA Loneliness Scale is the most widely used measure of loneliness (Hibbard, 2000).

Disordered Eating: Eating Patterns Questionnaire. The Eating Patterns Questionnaire was named after the Dartmouth College Eating Behavior Self-Assessment which assessed the extent to which a person engaged in disordered eating patterns. This questionnaire consisted of 19 questions which asked questions such as, “Do you feel guilty after eating?” This measurement demonstrated adequate internal consistency.

Procedure

Participants signed an informed consent form which provided a description of the study and the tasks that would be presented. Testing occurred in one session lasting approximately forty-five minutes. Participants were taken into a room and filled out a packet of questionnaires that measured self-esteem, depression, loneliness, anxiety, and disordered eating. Each participant was instructed to read carefully through the questions in each of the surveys and to answer each to the best of his or her ability. Upon completion of the experiment, participants were debriefed and thanked for their participation in the study.

Results

Preliminary Analyses

Reliabilities. The reliability of the measures used in this study were tested by calculating alpha coefficients for each (see Table 2). The analysis indicates that all the scales demonstrate adequate internal consistency.

Observed Gender Differences. Although no predictions were made regarding gender differences in the patterns of competitiveness itself, the means and standard deviations for males and females were computed to allow for clarification and interpretation of any

important differences among the measures. Gender differences were found for four constructs. Males' self-reported superiority scores were significantly higher than females' (males $M = 3.03$, $SD = .67$, females $M = 2.49$, $SD = .49$; $t(51) = 3.37$, $p < .01$). Males also showed significant differences in their mastery scores (males $M = 4.10$, $SD = .50$, females $M = 3.76$, $SD = .52$; $t(51) = 2.39$, $p < .05$). It was discovered that females' scores on attitudes towards college were significantly higher than males' (females $M = 4.38$, $SD = .30$, males $M = 3.88$, $SD = .60$; $t(50) = -3.96$, $p < .05$). Females also revealed disordered eating scores that were significantly higher than males' (females $M = 1.57$, $SD = .43$, males $M = 1.20$, $SD = .25$; $t(51) = -3.59$, $p < .05$).

Correlation between Superiority and Mastery Competitiveness. It was found that superiority and mastery competitiveness had a moderately positive correlation with each other ($r = .55$). This is somewhat contradictory to previous studies (e.g., Hibbard, 2000) that show superiority and mastery to be relatively independent dimensions. Although a moderate correlation, the patterns for these facets suggest differential influences on adjustment.

Psychological Adjustment

A major goal of this study was to assess the prediction that (1) mastery competitiveness would be associated with higher levels of positive psychological adjustment, (i.e., self-esteem); and (2) superiority competitiveness would be associated with negative psychological adjustment (i.e., higher levels of depression, loneliness, anxiety, and disordered eating). To evaluate these predictions, correlation coefficients (Pearson r) were calculated between superiority and mastery competitiveness scales and the various facets of psychological adjustment. These correlations are reported in Table 3.

Self-esteem. I predicted that mastery competitiveness would be associated with higher levels of self-esteem than superiority competitiveness. This prediction received partial support with significantly high levels of self-esteem observed among females ($r = .43$). For males, however, there was no similar association.

Depression. I expected that superiority competitiveness would be associated with increased depression compared to mastery competitiveness. This prediction was partially confirmed as a significant association was discovered between superiority competitiveness and elevated levels of depression among females ($r = .39$). There was no significant correlation found, however, between superiority competitiveness and depression among males.

Loneliness. I predicted that superiority competitiveness would be associated with increased loneliness. Contrary to expectations, superiority competitiveness was found to be negatively and significantly correlated with loneliness in males ($r = -.439$). Although no statistically significant relationship was apparent for females, there was a positive correlation between superiority competitiveness and loneliness that was close to reaching the level of significance ($r = .31, p < .10$). Although not statistically significant, the direction and strength of this correlation is noteworthy.

Anxiety. I expected that superiority competitiveness would be associated with increased levels of anxiety. This prediction was not confirmed. Interestingly, however, a significant correlation was discovered between mastery competitiveness and decreased levels of anxiety among females only ($r = -.41$).

Disordered Eating. I predicted that superiority competitiveness would be associated with disordered eating patterns. This relationship was not observed. There were no

significant correlations shown between superiority competitiveness and disordered eating for either males or females.

Interactive Effects of Superiority Competitiveness and Gender

Although no specific predictions were made, the differentiated patterns of associations revealed by males and females offered sufficient reason to more closely examine the combined effects of superiority competitiveness and gender. Using median splits, participants were classified into those individuals who were high in superiority competitiveness and those who were low in superiority competitiveness. This classification was called Superiority Level. A 2 x 2 factorial analysis with Gender and Superiority Level as between-subject factors was conducted with all dependent variables. Only the three dependent variables where significant interactions were discovered are discussed. It should also be noted that no interactions were discovered for mastery competitiveness and gender; thus, these results are not discussed.

Loneliness. A two-way analysis of variance (ANOVA) revealed a Gender x Superiority Level interaction for loneliness, $F(1, 53) = 20.9, p < .05$. Paired comparisons (two-tailed t -tests) indicated that males who had low levels of superiority were significantly more lonely than those who had high levels of superiority. In contrast, females who had high levels of superiority were significantly more lonely than those who had low levels of superiority (see Figure 1).

Depression. A two-way analysis of variance revealed a main effect of gender, $F(1, 53) = 5.19, p < .05$, and a main effect of superiority level, $F(1, 53) = 5.77, p < .05$. These main effects must be interpreted with caution. A Gender x Superiority Level interaction was revealed for depression, $F(1, 53) = 14.25, p < .05$. Paired comparisons (two-tailed t -tests)

indicated that (1) females who had high levels of superiority were significantly more depressed than those who had low levels of superiority; and (2) at the high superiority level, females were significantly more depressed than males (see Figure 2).

Anxiety. Finally, a two-way analysis of variance (ANOVA) revealed a Gender x Superiority Level interaction for anxiety, $F(1, 53) = 3.66, p < .05$. Paired comparisons (two-tailed t -tests) indicated that (1) females who had high levels of superiority were significantly more anxious than those who had low levels of superiority; and (2) at the high superiority level, females were significantly more anxious than males (see Figure 3).

Discussion

The purpose of this study was to clarify our ambivalent perceptions towards competitiveness by examining its effects on psychological adjustment. By evaluating competitiveness as a personality trait, the main goal was to increase our understanding of the nature of competitiveness and to assess the influence of these two facets of competitiveness on self-esteem, depression, loneliness, anxiety, and disordered eating patterns. First, I will discuss the findings related to psychological adjustment, along with a discussion of the combined effects of gender and superiority competitiveness. I will then discuss the implications of these findings. Finally, I will discuss limitations and future directions for research.

Psychological Adjustment

One assumption in our culture is that competitive people are "the winners," of our society and that being a winner transcends into feelings of confidence and satisfaction in oneself. Our results seem to suggest that people's perceptions of themselves and their

emotional health is dependent on both the facet of competitiveness one is referring to and one's gender.

Mastery competitiveness was found to be an important indicator of self-esteem in females. This finding is consistent with previous research which found positive associations between self-esteem and a mastery competitive orientation in high school students (Hibbard, 2000). It is worthwhile to note that males experienced higher levels of self-esteem in association with mastery competitiveness as well, but not to the same extent as females. Since the central theme of mastery competitiveness is that individuals feel the need to achieve excellence and be the best at what they do, it is possible that it is an orientation conducive to healthier thinking styles. If people's motivation is to do well, not to beat others, they will probably not feel as much pressure to prove themselves in a public realm as people who have a superiority competitive orientation might. The defining features of mastery competitiveness seem to already ensure that people will have a high level of self-esteem since they care about producing a high quality performance, not a performance that is just merely good enough for other people's standards. When a person sets absolute standards in conquering a task, it seems to suggest that that person has a firm sense of his or her goals, as opposed to a person who uses external standards which are subject to fluctuation.

It might be expected, then, that superiority competitiveness seems to be linked to lower levels of self-esteem as it is defined by individuals constantly using external standards by measuring themselves against others. It is important to note that superiority competitiveness was negatively, but weakly, associated with self-esteem for both genders. Although not statistically significant, the direction of the associations seem to support (albeit weakly) that people frequently compete to overcome underlying doubts about their

capabilities in order to compensate for low self-esteem (Kohn, 1992). It may be possible that having a superiority competitive disposition would lead a person to want to engage in competitive situations that sustain this way of thinking in that person. Although we cannot speculate any causal relationships, perhaps people who have low self-esteem may be more susceptible to developing a superiority competitive disposition because of a greater need to compensate for feelings of inadequacy.

Consistent with this line of analysis, superiority competitiveness seems to be associated with greater depression. For the same reasons that superiority competitiveness seems to be linked with lower self-esteem, individuals with this orientation may actually experience more depression. However, the fact that this phenomenon only seems to pertain to females may highlight some important differences in the way males and females are socialized to behave. For instance, it is seen as “normal” for males to want to conquer others and turn friendly activities into contests. In fact, it is not only acceptable in our society for males to behave in this manner, it is sometimes encouraged as part of how to act as a man.

While a normal phenomenon in males, the same superiority competitive behaviors are seen as being out of character for females. Girls are taught early on to act “lady-like” which often entails being especially considerate of people, not necessarily to “beat them” in competition. Males may be socialized to be more dominant, where a superiority attitude may be positively reinforced through social institutions such as family, educational settings, and peers. Although females in sports may adopt a superiority competitive orientation to a greater extent than females not involved in sports, it is still not considered acceptable once they step out of that domain. As these behaviors are gender-oriented, it is not difficult to see how males or females acting outside of this stereotype may feel isolated. Although mastery

competitiveness seems to have an overall positive association with psychological adjustment for both genders, it seems that superiority competitiveness, where gender socialization may be more apparent, may be partially to blame for females' higher depression.

Another interesting finding is in the differential patterns evident in the association between superiority competitiveness and loneliness in males and females. The fact that males were less lonely with a superiority competitive orientation further solidifies the argument that gender socialization plays a partial role in these differences. Males who possess a more superiority competitive orientation will fit into society's standards of masculinity and perhaps, as a result, be included in masculine activities to a greater extent. When people do what is expected of them in society, it is rewarding (Kohn, 1992). This may give them a chance to befriend and have the support of other males. Also, the fact that males will probably be more accepted with this orientation could foster feelings of general self-worth and confidence, protecting them from negative affective states such as loneliness. Females who exhibit a superiority competitive orientation may drive other females away and, consequently, experience more isolation and loneliness.

Results indicate that mastery competitiveness is related to decreased anxiety in females. Although there was a similar finding for males, the amplified effects in females could be because mastery competitiveness parallels more feminine ways of thinking. Fitting closely with society's norms, females will not experience as much dissonance against societal expectations as they may with a superiority competitiveness orientation. The less of a clash they feel, the less anxious a female would probably be. Also, with mastery competitiveness having such positive effects as higher self-esteem, it is logical to interpret that a person who feels good about themselves will feel less anxious.

Our finding that disordered eating was not related to superiority competitiveness appears contradictory to previous findings. The relationship that was seen between superiority competitiveness and disordered eating was weak for both genders. We may speculate that this puzzling finding reflects a less than optimal sample size and/or the homogeneity of the population at a small university, which possibly provided an incomplete picture of this relationship. Another possibility may be that it is not superiority competitiveness per se that is linked to disordered eating, but a negative cognitive orientation that is likely to accompany it. According to Burckle and his colleagues (1999), people who are prone to disordered eating are those who are dissatisfied with themselves and want to strive to attain an appropriate standard of beauty. For instance, since superiority competitiveness is related to increased depression in females, there could be a greater tendency for disordered eating patterns to arise because of the strong relationship between depression and disordered eating. Yet, since females seem to be negatively affected by superiority competitiveness, disordered eating could be more prevalent for them. A decreased tendency for disordered eating patterns was related to mastery competitiveness for both genders as well. Due to the positive relationship between mastery competitiveness and psychological adjustment, this is a logical finding.

Finally, in terms of adjustment, the findings regarding the interaction between gender and superiority level on depression, loneliness, and anxiety was most interesting. For both depression and anxiety, it was the females who were the most superiority-oriented that experienced the most detrimental effects. It was clear that high levels of superiority among females seem to be related to negative adjustment. Males, however, did not show the same patterns (see Figures 2 and 3). Again, for reasons outlined above, traditional gender

socialization may be to blame. Particularly for females who are driven to prevail over others, the psychological cost seems quite high. Perhaps most striking was the unexpected interaction of gender and superiority level regarding loneliness. It was actually males who were the most superiority-oriented that were the least lonely, whereas it was the males who were the least superiority oriented that were the most lonely. Females showed exactly the opposite pattern (see Figure 1). The message seems clear: If you are a male and want to fit in and not be isolated, behave in a superiority-like manner. On the other hand, if you are a female, it is not in your best interest to behave in a superiority-like manner; you may become socially isolated.

Consistent with our hypotheses, the two facets of competitiveness brought upon differentiated patterns of psychological adjustment. As expected, mastery competitiveness was associated with higher self-esteem, however, this relationship was observed only among females. Although these factors of adjustment were not associated with mastery competitiveness in males, they showed a decreased occurrence of loneliness. Although males were not as impacted by mastery competitiveness as females were, there was a strong tendency for males who were more mastery oriented to demonstrate higher levels of self-esteem and decreased depression. Overall, we can conclude from these findings that mastery competitiveness plays a substantial role in promoting positive factors of psychological adjustment for both males and females. We can possibly deduct from this finding that certain components of the mastery competitive orientation are advantageous to a person's mental health such as a desire to improve one's own performance and to learn and grow as an individual. It is evident that people who care about improvement inherently care about themselves.

Of course, social norms play an important role in shaping the way we interpret the world around us (Kohn, 1992). Competition in a culture tends to instill a demand in people to compete with others. However, although these cultural forces partially explain why people feel the urge to perform better than others, people who have a superiority competitive disposition may be striving for victory in order to overcome doubts about themselves. The superiority competitiveness disposition seems to not only be a product of culture but a reflection of a need to be better than others, which can be traced back to low self-esteem. Victory is something that is noticed by the public, which then internalizes into feelings of worthiness for the victorious individual. However, if a person is dependent on winning to feel good about themselves, that person will have to endure a constant and often futile struggle to stay on top.

Doing well is different than doing better than others (Kohn, 1992). While it is true that social comparison informs us of whether what we do is any good, it does not actually necessitate that a person will naturally want to be better than the next person. Psychologist Albert Bandura (1977) pointed out that in competitive, individualistic societies, a person's success denotes another person's failure so that social comparison is used for self-appraisal. It could be that mastery competitiveness does not reflect the need for people to compensate for low self-esteem in order to convince themselves they are "ok."

Implications of the Study

What are the implications of these findings for real-life contexts? It seems that with the competitive nature of sports, education, and relationships, superiority competitiveness follows a corresponding disposition that adapts to these environmental features. Although it seems that adopting a superiority competitive disposition can be beneficial because of its

congruence to these competitively structured arenas, it seems that it is not a fundamentally healthy disposition when putting culture aside. If superiority competitiveness was an essentially good disposition, it would not have reflected in greater depression in females. We can speculate that because this culture instills certain ideas about competition, such as the fact that it is a fun and enjoyable part of life, we are socialized to believe that behaving and thinking competitively is therefore the best way to behave. However, because competition is a function of societal norms, there are other social behaviors that could provide healthier and possibly even more fun alternatives. For instance, if less emphasis was placed on winning in games and more on just having fun, people would not have to be judged on their ability to beat others. Having fun does not necessarily mean that someone has to lose. While we may not be able to abandon or dramatically alter our competitive sports or games, perhaps transferring the emphasis on winning to mastering the game could ultimately foster healthier psychological adjustment. As mastery competitiveness seems to be associated with higher self-esteem for both males and females, it seems that it can only be helpful to instill or nurture this orientation in people. For example, by instilling a mastery competitive orientation in athletes, healthier thinking styles can emerge that could perhaps improve upon an athlete's performance. Since females exhibited less anxiety with a mastery competitive orientation, perhaps teaching the mind-set of self-improvement (e.g., beating one's own racing time) can have strong implications for reducing precompetition anxiety in athletes and most likely an accompanying increase in the quality of athletic performance.

Mastery competitiveness could be specifically applied to parenting styles. Results suggest that parents should feel assured in raising their children to adopt a mastery competitiveness orientation no matter what gender they are. If parents praise their children

only when they win at something, the children may strive to outperform others in order to gain approval from their parents. This is probably most evident in cases where parents place a heavy emphasis on their children's performance instead of their improvement in a certain activity. However, even well-intentioned parents who try to deemphasize the importance of winning often find that their efforts in telling their children to "do their best" translates into triumphing over others (Kohn, 1992). Unconscious messages of disappointment may even be transferred from the parents to their children with anything other than victory because of their own socialization to be competitive. Also, parents can take measures to avoid comparing their children with siblings so as to prevent the incidence of sibling rivalry and the future development of superiority competitiveness.

Limitations and Future Directions

First, due to the correlational design of this study, self-report bias could be considered a possible limitation to the accuracy of these findings. Due to the reactive nature of the surveys, participants had an awareness that their responses were being recorded, and may not have responded as accurately or honestly. Participants may have also felt the need to respond what they "should" believe rather than what they actually believe. As a way to correct for this in future studies, multi-informant data should be collected so as to verify or strengthen claims made by participants in the study. Second, an alternative approach could be used to supplement self-report data with an observant or experimental method. This approach has yet to be performed in research and is greatly needed to broaden our understanding of the nature of competitiveness and to allow causal inferences to be made. Finally, a small sample size may not have allowed for a completely accurate representation of competitiveness. Moreover, participants were mostly Caucasian and attended a small private university, they

were similar in ethnicity and most likely in socio-economic status. This lack of heterogeneity in the sample may have contributed to an overrepresentation of certain characteristics of the general population.

In terms of future directions for research, further exploration of the cultural assumptions about competitiveness are indeed worthy of investigation. For example, cultural assumptions such as “the winner takes all” suggest that competition is the road to success and achievement. Whether or not competitive people do achieve more than non-competitive people is still unclear.

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Table 1

Mastery and superiority competitiveness: A comparison

Superiority Competitiveness	Mastery Competitiveness
Focus is on winning	Focus is on achieving mastery and increasing competence
Constantly measures self against others	Measures self by absolute standards
Goals are performance-oriented	Goals are mastery- oriented
Tendency to choose tasks where winning is likely	Tendency to choose challenging tasks

Table 2

Cronbach's alpha coefficient for measures

Measures	Cronbach's Alpha
Attitudes toward Competition (Superiority competitiveness)	.9072
Personal Mastery Survey (Mastery competitiveness)	.8162
Self Survey (Self Esteem)	.9485
Feelings Inventory (Depression)	.8555
UCLA Scale (Loneliness)	.8973
General Emotions Survey (Anxiety)	.8600
Eating Patterns (Disordered Eating)	.8546

Table 3

Correlation coefficients between competitiveness and psychological adjustment

<u>Measures</u>	<u>Superiority</u>		<u>Mastery</u>	
	<u>Males</u>	<u>Females</u>	<u>Males</u>	<u>Females</u>
Self-esteem	-.06	-.16	.39'	.43*
Depression	-.24	.39*	-.38'	-.29
Loneliness	-.43*	.31'	-.77**	-.17
Disordered Eating	.16	.14	-.08	-.03
Anxiety	-.10	.12	-.13	-.41*

Note: ** indicates $p < .01$, * $p < .05$, ' $p < .10$

Figure Caption

Figure 1. Gender x Superiority Level interaction for Loneliness

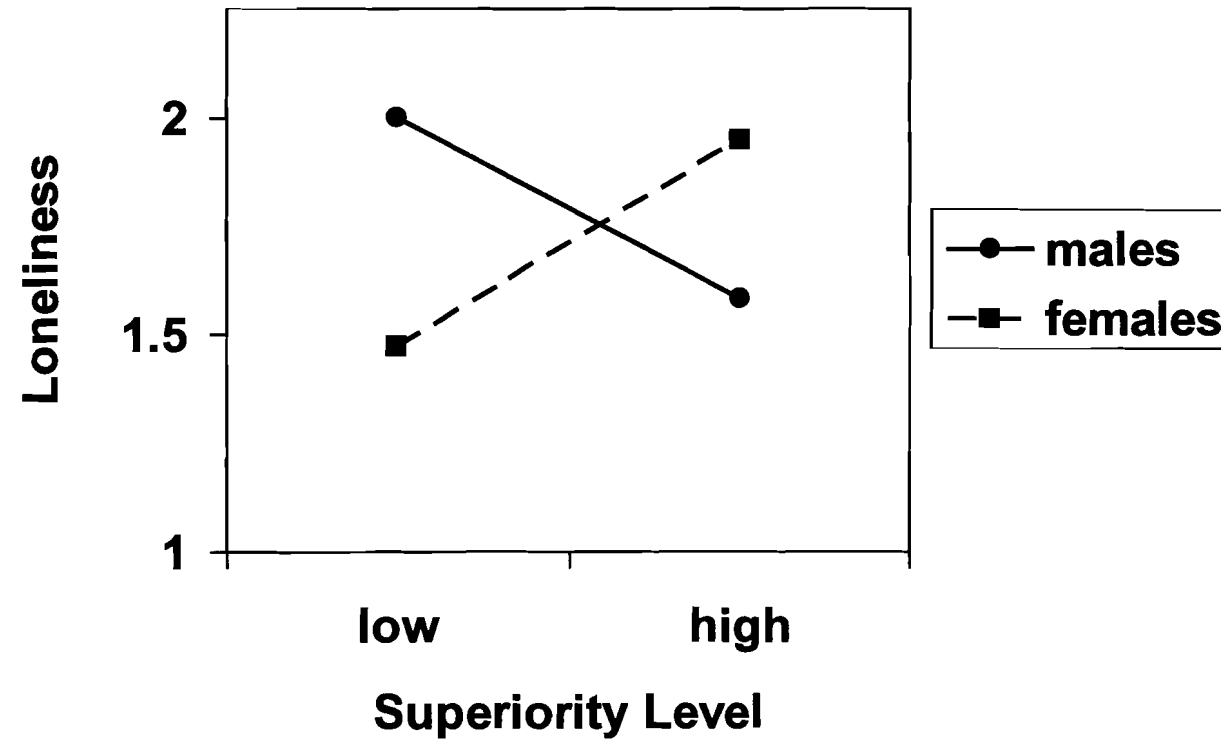


Figure Caption

Figure 2. Gender x Superiority Level interaction for Depression.

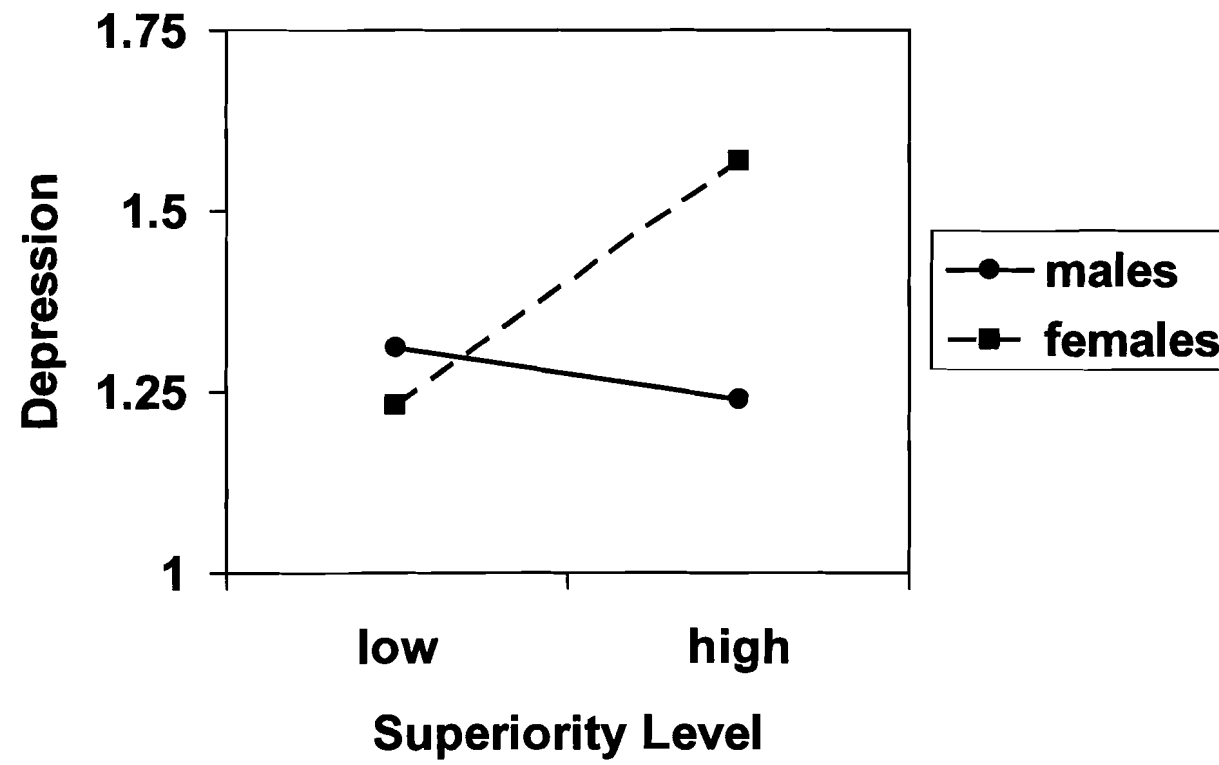
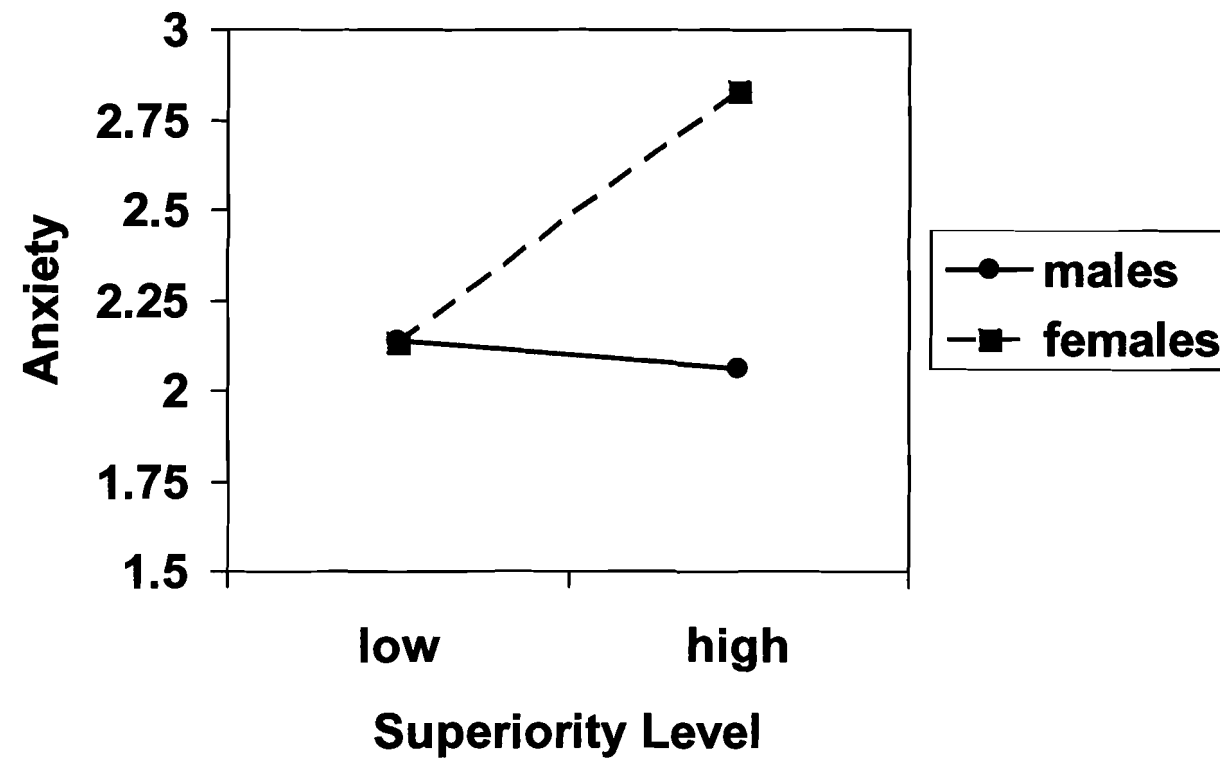


Figure Caption

Figure 3. Gender x Superiority Level interaction for Anxiety



APPENDIX A: QUESTIONNAIRES USED IN THE STUDY

Attitude Toward Competition Questionnaire

Instructions: Please read each sentence carefully and write the number that best describes you. Use the scale below to see what each number means.

5 = Always true of me
4 = Often true of me
3 = Sometimes true of me
2 = Seldom true of me
1 = Never true of me

- ___ 1. Winning in competition makes me feel more powerful as a person.
- ___ 2. I find myself being competitive in situations which do not call for competition.
- ___ 3. I see my opponents as my enemies.
- ___ 4. I compete with others even if they are not competing with me.
- ___ 5. Success in competition makes me feel superior to others.
- ___ 6. When my competitors receive rewards for their accomplishments, I feel envy.
- ___ 7. I find myself turning a friendly game or activity into a serious contest or conflict.
- ___ 8. It's a dog-eat-dog world. If you don't get the better of others, they will surely get the better of you.
- ___ 9. If I can disturb my opponent in some way in order to get an edge in competition, I will do so.
- ___ 10. I really feel down when I lose in a competition.
- ___ 11. I view my relationships in competitive terms.
- ___ 12. It bothers me to be passed by someone while I am driving on the roads.
- ___ 13. I can't stand to lose an argument.
- ___ 14. In school, I feel superior whenever I do better on tests than other students.
- ___ 15. Losing in competition has little effect on me.
- ___ 16. Failure or loss in competition makes me feel less worth as a person.
- ___ 17. I believe that you can be nice and still win or be successful in competition

Personal Mastery Survey

Instructions: Please read each sentence carefully and write the number that best describes you. Use the scale below to see what each number means.

5 = Strongly Agree
4 = Slightly Agree
3 = Neither Agree nor Disagree
2 = Slightly Disagree
1 = Strongly Disagree

- ___ 1. I enjoy competition because it gives me a chance to test my abilities.
- ___ 2. I would want to get an A because it shows me that I have mastered the material.
- ___ 3. I do not care to be the best that I can be.
- ___ 4. Competition motivates me to bring out the best in myself.
- ___ 5. I respect and admire competitive people.
- ___ 6. I am not disappointed if I do not reach a goal that I have set for myself.
- ___ 7. Competition helps me develop my abilities.
- ___ 8. Achieving excellence is not important to me.
- ___ 9. I enjoy competition because it brings me to a higher level of motivation.
- ___ 10. I do my best when forced to compete.
- ___ 12. I enjoy competition not because it makes me feel better than others, but because it brings out the best in me.
- ___ 13. I would rather work in an area that challenges me to excel, rather than an area where things come easy.
- ___ 14. I tend to get too carried away with competition.
- ___ 15. I compete only if it's all in good fun.

Self Survey

Instructions: Use the following numbers to indicate how well each statement describes you.

- 5 = Strongly Agree
- 4 = Agree
- 3 = Neither Agree nor Disagree
- 2 = Disagree
- 1 = Strongly Disagree

- ____ 1. I feel that I am a good person, at least as good as most other people.
- ____ 2. I feel that I have a number of good qualities.
- ____ 3. All in all, I am inclined to feel I am a failure.
- ____ 4. I am able to do things as well as most other people.
- ____ 5. I feel I do not have much to be proud of.
- ____ 6. I wish I could have more respect for myself.
- ____ 7. I certainly feel useless at times.
- ____ 8. At times I think I am no good at all.
- ____ 9. I take a positive attitude towards myself.
- ____ 10. On the whole, I am satisfied with myself.

Feelings Inventory

Instructions: People sometimes have different feelings and ideas. This survey lists the feelings and ideas in groups. From each group, pick ONE sentence that describes you best for the past two weeks. Mark an X next to your answer. After you pick a sentence from the first group, go on to the next group. There is no right or wrong answer.

1. ☐ I am sad once in a while.
☐ I am sad many times.
☐ I am sad all the time.
2. ☐ Nothing will ever work out for me.
☐ I am not sure if things will work out for me.
☐ Things will work out for me O.K.
3. ☐ I do most things O.K.
☐ I do many things wrong.
☐ I do everything wrong.
4. ☐ I have fun in many things
☐ I have fun in some things
☐ Nothing is fun at all
5. ☐ I am bad all the time.
☐ I am bad many times.
☐ I am bad once in a while.
6. ☐ I think about bad things happening to me once in a while.
☐ I worry that bad things will happen to me.
☐ I am sure that terrible things will happen to me.
7. ☐ I hate myself.
☐ I do not like myself.
☐ I like myself.
8. ☐ All bad things are my fault.
☐ Many bad things are my fault.
☐ Bad things are not usually my fault.
9. ☐ I feel like crying every day.
☐ I feel like crying many days.
☐ I feel like crying once in awhile.
10. ☐ Things bother me all the time.
☐ Things bother me many times.
☐ Things bother me once in a while

11. ☐ I like being with people.
☐ I do not like being with people many times.
☐ I do not want to be with people at all.
12. ☐ I cannot make up my mind about things.
☐ It is hard for me to make up my mind about things.
☐ I make up my mind about things easily.
13. ☐ I look O.K.
☐ There are some bad things about my looks.
☐ I look ugly.
14. ☐ I have to push myself all the time to do my schoolwork.
☐ I have to push myself many times to do my schoolwork.
☐ Doing schoolwork is not a big problem.
15. ☐ I have trouble sleeping every night.
☐ I have trouble sleeping many nights.
☐ I sleep pretty well.
16. ☐ I am tired once in a while.
☐ I am tired many days.
☐ I am tired all the time.
17. ☐ Most days I do not feel like eating.
☐ Many days I do not feel like eating.
☐ I eat pretty well.
18. ☐ I do not worry about aches and pains.
☐ I worry about aches and pains many times.
☐ I worry about aches and pains all the time.
19. ☐ I do not feel alone.
☐ I feel alone many times.
☐ I feel alone all the time.
20. ☐ I never have fun at college.
☐ I have fun at college only once in a while.
☐ I have fun at college many times.
21. ☐ I have plenty of friends.
☐ I have some friends but wish I had more.
☐ I do not have many friends.

22. _____ My schoolwork is alright.
_____ My schoolwork is not as good as before.
_____ I do very badly in subjects I used to be good in.

23. _____ I can never be as good as other people.
_____ I can be as good as other people if I want to.
_____ I am just as good as other people.

24. _____ Nobody really loves me.
_____ I am not sure if anybody loves me.
_____ I am sure that somebody loves me.

25. _____ I usually do what I am told.
_____ I do not do what I am told most times.
_____ I never do what I am told.

26. _____ I get along with people.
_____ I get into fights many times.
_____ I get into fights all the time.

UCLA Scale

Instructions: Indicate how often you feel the way described in each of the following statements. Answer by writing a number from 1 to 4 on the blank line. Use the following scale.

4 = Often
3 = Sometimes
2 = Rarely
1 = Never

- ____ 1. I feel in tune with the people around me.
- ____ 2. I lack companionship.
- ____ 3. There is no one I can turn to.
- ____ 4. I do not feel alone.
- ____ 5. I feel part of a group of friends.
- ____ 6. I have a lot in common with the people around me.
- ____ 7. I am no longer close to anyone.
- ____ 8. My interest and ideas are not shared by those around me.
- ____ 9. I am an outgoing person.
- ____ 10. There are people I feel close to.
- ____ 11. I feel left out.
- ____ 12. My social relationships are superficial.
- ____ 13. No one really knows me well.
- ____ 14. I feel isolated from others.
- ____ 15. I can find companionship when I want it.
- ____ 16. There are people who really understand me.
- ____ 17. I am unhappy being so withdrawn.
- ____ 18. People are around me but not with me.

____ 19. There are people I can talk to.

____ 20. There are people I can turn to.

General Emotions Survey

Instructions: Indicate how often you experience the following feelings and/or behaviors described in each question. Please read each sentence carefully and write the number that best describes you. Try to be as honest as possible when answering the questions as your responses will remain confidential. Use the scale below to see what each number means.

5 = Always true of me
4 = Often true of me
3 = Sometimes true of me
2 = Seldom true of me
1 = Never true of me

- ___ 1. I often experience an unusually fast heart rate, unexplained sweating (even when the area is not unusually warm), shortness of breath, or feelings of choking.
- ___ 2. In certain situations, I sometimes begin to feel dizzy, unsteady, or lightheaded (with no apparent medical problems).
- ___ 3. Occasionally, I am afraid of being harmed, passing out, falling, or getting hurt in some way (even when there is no obvious danger).
- ___ 4. I have a lot of trouble falling asleep, or remaining asleep through the night.
- ___ 5. Frequently, I feel like I have to “double-check” things, such as light switches, door locks, stovetops, or car doors to see if they are secure (even though I am pretty sure that they are safely in place).
- ___ 6. I have a fear of losing control or “going crazy” when things are not going well.
- ___ 7. At times I become forgetful, my thoughts feel like they are racing, and I have trouble concentrating. I sometimes wish I could be calmer and learn to relax.
- ___ 8. I think of myself as a bit more nervous and high-strung than most of my friends and family members, or I am sometimes more easily agitated than most.
- ___ 9. There are specific things I just cannot do, even though I know they are easy and most people can do them with no difficulty whatsoever.
- ___ 10. There have been a lot of changes in my life over the past year.

Eating Patterns

Instructions: Indicate the extent of time that you have engaged in the various behaviors that are described in each question. Try to be as honest as possible when answering the questions as your responses will remain confidential. For each question, circle the response that best indicates about how often you engage in the described activity.

1. Do you worry about gaining weight?

(A) Never or Rarely (B) Some of the time (C) Much of the time (D) All of the time

2. Do you avoid foods because of the fat, carbohydrate, or sugar content in them?

(A) Never or Rarely (B) Some of the time (C) Much of the time (D) All of the time

3. How often do you think about wanting to be thinner?

(A) Never or Rarely (B) Some of the time (C) Much of the time (D) All of the time

4. Are you bothered by the thought of having fat on your body?

(A) Never or Rarely (B) Some of the time (C) Much of the time (D) All of the time

5. Do you feel guilty after eating?

(A) Never or Rarely (B) Some of the time (C) Much of the time (D) All of the time

6. Do you feel that food controls your life?

(A) Never or Rarely (B) Some of the time (C) Much of the time (D) All of the time

7. During the past six months, have you had episodes when both of the following applied:

a) You have eaten an unusually large amount of food within a two hour period, and b) you have felt unable to control how much you were eating within these periods?

(A) Never (B) Less than once a month (C) About 1/month (D) About 1/week (E) 2+/week

During the past six months, have you ever done any of the following:

8. Self-induced vomiting in an attempt to control your weight?

(A) Never (B) Less than once a month (C) About 1/month (D) About 1/week (E) 2+/week

9. Taken laxatives in an attempt to control your weight?

(A) Never (B) Less than once a month (C) About 1/month (D) About 1/week (E) 2+/week

10. Restricted your eating in an attempt to control your weight? Restrictive eating = eating less than 500 calories a day or skipping 2 or more meals a day.

(A) Never (B) Less than once a month (C) About 1/month (D) About 1/week (E) 2+/week

11. Taken diuretics (water pills) in an attempt to control your weight?

(A) Never (B) Less than once a month (C) About 1/month (D) About 1/week (E) 2+/week

12. Exercised in an attempt to control your weight?

(A) Never (B) About 1 hour/day (C) About 2 hours/day (D) About 3 hours/day (E) More than 3 hours/day

13. During the past six months, have you exercised to control your weight even when injured, sick, or against a doctor's orders?

(A) Never or Rarely (B) Some of the time (C) Much of the time (D) All of the time

14. During the past six months, has exercising to control your weight significantly interfered with other activities?

(A) Never or Rarely (B) Some of the time (C) Much of the time (D) All of the time

Do your concerns or behaviors about eating or weight interfere with your:

15. Relationships (e.g., Avoiding family members and /or friends to have time and privacy for bingeing, purging, or exercising)?

(A) Never or Rarely (B) Some of the time (C) Much of the time (D) All of the time

16. Academic/work performance?

(A) Never or Rarely (B) Some of the time (C) Much of the time (D) All of the time

17. Do your concerns or behaviors about eating or weight cause you a great deal of distress?

(A) Never or Rarely (B) Some of the time (C) Much of the time (D) All of the time

18. Have you ever been diagnosed with or treated for an eating disorder? No Yes

19. Women only: How many menstrual periods have you had in the past year?

(A) 9 or more (B) 7-8 (C) 5-6 (D) 4 or less