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Helplessness and Self-Blame Attributions in Depression: Investigation of one Possible Resolution of This Paradox Among College Students in Taiwan

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Depressed persons often feel helpless to change their environment, and at the same time blame themselves for being the cause of misfortune. Paradoxically, they believe they have no effect on events, and in another sense they believe they have powerful effects. The purpose of this study was to examine a resolution of this paradox offered by Janoff-Bulman's model of self-blame attributions for depression which distinguishes between "behavioral self-blame" and "characterological self-blame". In this study, college students in Taiwan were administered three Chinese versions of instruments, the Beck Depression Inventory, the Attributional Style Questionnaire -- a measure of helplessness, and the Self-Blame Scale. Of 1443 students who returned surveys, a stratified sample of 1000 participants was analyzed.

Six research hypotheses were derived from Janoff-Bulman's model. Correlational evidence supported four of the six. Both general self-blame and helplessness were significantly positively correlated with depression. These findings support both Beck's and Seligman's models of depression, and support the existence of the paradox of belief in which depressed persons feel both helpless and self-blame about the same event.

As predicted by Janoff-Bulman's model, characterological self-blame was significantly correlated with depression and helplessness. However, contrary to predictions, behavioral self-blame was also significantly positively correlated with depression and helplessness. Thus, findings of this study supported Janoff-Bulman's model of self-blame with regard to assumptions about characterological self-blame, but not with regard to assumptions about behavioral self-blame.

Additional exploratory multiple-regression analyses found that helplessness and characterological self-blame were significant predictors of depression. Each uniquely predicted about 5% of the variance in depression. However, behavioral self-blame accounted for only a trivial amount of unique variance. Additionally, depression and characterological self-blame were significant predictors of helplessness, uniquely explaining 5% and 4% of the variance, respectively. Again, behavioral self-blame accounted for only a trivial amount of unique variance. Results of this study provide support for an association between characterological self-blame, helplessness, and depression. Implications and limitations of these findings, as well as suggestions for further research are discussed.

Key word : helplessness, self-blame, attribution, depression, resolution of the paradox

INTRODUCTION

Why do people who feel helpless and powerless think that whatever they try will fail? How can they feel so powerful in their helplessness? How can individuals blame themselves for outcomes over which they have no control? Depressed persons often feel helpless to change their environment, and at the same time assume responsibility for the outcomes of negative events. Paradoxically, they believe they have no effect on events, and in another sense they believe they have powerful effects. Seligman's learned helplessness model of depression and Beck's cognitive model of depression result in a paradoxical situation. It is proposed that a view of depressed persons as both helpless and self-blaming is theoretically paradoxical. This research is intended to examine one possible resolution and the clinical implications of this paradox.

Seligman's helplessness model which holds that depression involves a feeling of helplessness in which depressed persons learn that outcomes are independent of responses (Barnett & Gotlib, 1990; Brown & Siegel, 1988; Hiroto, 1974; Lester, 1989; Seligman, 1975). Furthermore, the attribution-based second generation of helplessness theory (Abramson, Seligman, & Teasdale, 1978) proposed a reformulated learned helplessness model. This model proposes that a negative explanatory or attributional style can precipitate the development of depression (Gong & Hammen, 1980; Peterson, Schwartz, Seligman, 1981; Peterson & Seligman, 1984) or have a substantial impact on individual's coping and posttraumatic adjustment (Meyer & Taylor, 1986). Additionally, Beck (1967, 1976) proposed that depression is characterized by negative sets, self-blame, and self-punishment and depressed individuals interpret their experience in terms of continuing self-blame, personal deficiency, and negative expectations. Abramson and Sackeim (1977) pointed out that when combined, Seligman's learned helplessness model of depression and Beck's cognitive model of depression constitute a paradox. They have proposed that to view depressed persons as both helpless and self-blaming is theoretically paradoxical.

Abramson and Sackeim (1977) and Peterson (1979) explored some possible resolutions of this paradox. One possible resolution of the paradox, and the focus of the present study, is Janoff-Bulman's model of self-blame attributions. Janoff-Bulman (1979) believed that "characterological" self-blame is a possible solution to the depressive paradox. Janoff-Bulman hypothesized that there are two kinds of self-blame, behavioral and characterological self-blame, and only characterological self-blame, which involves attributions regarding an individual's personality that are relatively stable, will result in depression and feelings of helplessness. Behavioral self-blame, which involves attributions regarding a person's behavior that are controllable and changeable, is an adaptive response that will not result in depressed mood and uncontrollability. According to Janoff-Bulman, behavioral self-blame is control-related and pertains to attributions made to a modifiable source, one's behavior, for example, "It happened to me because I did something which led to it," while characterological self-blame is esteem-related and involves attributions made to more nonmodifiable source, one's character, for

instance, "It happened to me because I am the sort of person to whom such things happen." This distinction is useful in that it resolves the contradictory evidence that self-blame can be a predictor of good coping among accident victims (Janoff-Bulman & Wortman, 1977), can be associated with more effective post-rape adjustment (Janoff-Bulman, 1979), while at the same time being commonly considered a correlate of depression. Janoff-Bulman (1979) suggests that behavioral self-blame may promote a general belief in one's ability to avoid a recurrence of negative outcomes and effect positive outcomes in the future, which is an adaptive response. Characterological self-blame, conversely, involves focusing more on the past and what it was about them that rendered them deserving of the negative outcome for which they are blaming themselves, which is a maladaptive response (Miller, & Porter, 1983). In the case of rape, for instance, a woman can blame herself for having walked down a street alone at night or for having let a particular man into her apartment (behavioral self-blame), or she can blame herself for being "too trusting and unable to say no" or a "careless person who is unable to stay out of trouble" (characterological self-blame). The biggest differences between the self-blame attributions may be captured through the use of a controllability dimension. Because people can exert control over behavior but can do so far less over their personality, these categories of blame differ in controllability (Carver, Ganellen, & Behar-Mitrani, 1985; Weiner, 1974). Besides the perceived controllability dimension, the other two dimensions of significance distinguishing these two types of self-blame are the stable-unstable and global-specific dimensions which contribute to perceived control. Behaviorally attributed bad events were seen as more controllable and their causes less stable and less global than were characterologically attributed bad events and their causes (Peterson et al., 1981). Characterological attributions for bad events were more global and stable than behavioral attributions.

A number of studies have found that self-blame and helplessness contribute independently to depression (Beck, Rush, Shaw & Emery, 1979; Beck & Weishaar, 1989; Coleman & Beck, 1981; Wener & Rehm, 1975). However, a review of the literature (Abramson & Sackeim, 1977; Peterson, 1979) reveals very few studies that have been conducted to examine whether these paradoxical beliefs exist simultaneously in depressed persons. Thus, whether the paradoxical beliefs exist simultaneously in depressed persons or not is an issue that still needs to be explored empirically. Additionally, it is likely that investigations of the possible resolutions of the paradox will lead to a better understanding of depression. Resolution of the paradox awaits future research. In addition, studies have reported that internal attributions for negative outcomes are associated with increased depression (Ickes, & Leyden, 1978; Sweeney, Anderson, & Bailey, 1986), but Janoff-Bulman (1979) hypothesized that self-blame, an internal self-attribution, can be an adaptive and functional response. However, inconsistent findings continue to be reported in studies that have examined Janoff-Bulman's model of self-blame (Janoff-Bulman, 1979, 1982; Janoff-Bulman & Wortman, 1977; Katz & Burt, 1988). Moreover, very little research examines Janoff-Bulman's self-blame model on depression. In particular, only one study (Janoff-Bulman, 1979) could be

located that empirically tested how Janoff-Bulman's self-blame attributions model can resolve the paradox in depression. Therefore, the present study is designed as an exploration of the role of Janoff-Bulman self-blame model in resolving the depression paradox and to determine whether characterological self-blame is a distinguishing characteristic of depressed individuals.

To understand self-blame attributional styles in depressed students have both theoretical and clinical implications. If the model presented in this study can be supported, theoretically, it implies that attributions may influence adjustment. The findings could also identify potentially useful clinical interventions, and have implications for counselors who work with victims or depressed people. Treatment strategies typically emphasize providing a nonjudgmental atmosphere for victims that actively discourages self-blame. If, however, behavioral self-blame is associated with greater feelings of control and better functioning, counselors might need to reconsider this treatment strategy (Frazier, 1990). Counselors might increase clients' sense of controllability and encourage appropriate, adaptive self-blame.

Purposes of This Study

The present study examines the features of this possible incompatibility between views of depression. The study has several major purposes: (a) to examine the empirical existence of the paradox; (b) to place particular emphasis on a resolution of the paradox of helplessness and self-blame in depression by examining Janoff-Bulman's model of self-blame attributions for depression; (c) to test the usefulness of the distinction between two types of self-blame, behavioral self-blame and characterological self-blame, in the area of depression, and (d) to test whether behavioral self-blame attributions has a positive, adaptive function.

A Diagram of the final hypothesized resolution of the paradox in depression, based on Janoff-Bulman model, is presented in Figure 1. This model was used in the current study to examine the paradox and also investigate the possible resolution for the paradox with a Taiwanese sample. Specifically, the research questions and hypotheses in this study were:

1. Research hypotheses examining empirical existence of the paradox: The idea to examine the paradox is by investigating the relationships among self-blame attributions, helplessness and depression.

Hypothesis 1-a. There is a significant positive association between general self-blame attributions and depression.

Hypothesis 1-b. There is a significant positive association between helplessness and depression.

2. Research hypotheses testing the resolution for the paradox: The second research question proposed to investigate Janoff-Bulman's model by dividing self-blame into characterological self-blame, and behavioral self-blame.

Hypothesis 2-a. Characterological self-blame is positively associated with depres-

sion.

Hypothesis 2-b. Characterological self-blame is positively associated with helplessness.

Hypothesis 2-c. Behavioral self-blame is not significantly associated with depression.

Hypothesis 2-d. Behavioral self-blame is not significantly associated with helplessness.

In addition to the six hypotheses described above, the following exploratory research questions were also examined: Among these three variables (characterological self-blame, behavioral self-blame, or helplessness) which predicts the greatest (highest) unique amount of the variances in depression? Which of these three variables (characterological self-blame, behavioral self-blame, or depression) predicts the most unique amount of the variances in helplessness?

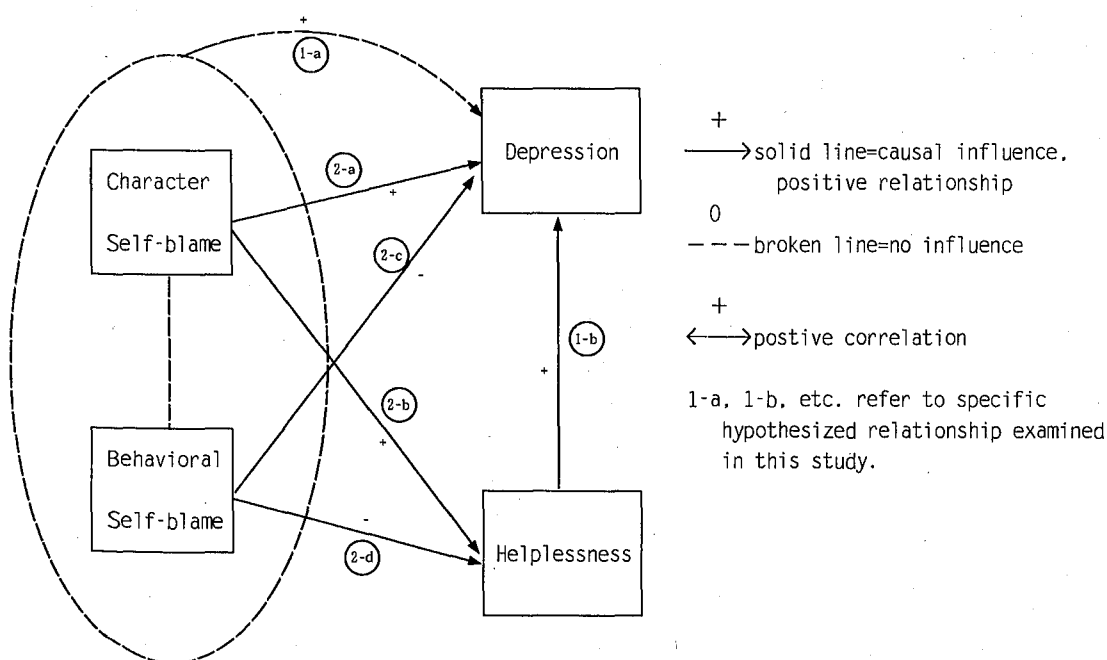


Figure 1. Research hypotheses

METHODOLOGY

Participants

Participants in this study consisted of 1000 students chosen from the National Taiwan Normal University (NTNU). The university in the first semester of 1993 had an enrollment of approximately 5235 undergraduate students. The university population consists of 16 groups based on college and grade variables. These are presented in Table 1. For the purpose of representativeness of the selected sample two classification variables, college and grade, were used to stratify the sample. Table 1 presents the stratified sampling of NTNU students. In order to obtain a final sample of 1000 participants, it was necessary to distribute more than this number of packets. Survey packets were distributed to 1443 undergraduates enrolled in NTNU.

Students participation was voluntary and students were assured that their responses would remain anonymous. Inspecting the data from all participants revealed that responses from 49 of the 1443 were not usable due to careless, incomplete, or haphazard responding. The final valid sample contained 1394 students. A random procedure was used to eliminate cases from each cell and reduce the final sample to 1000 students in the correct proportions required for stratification.

Instruments

Students were administered a survey packet which contained the translated Chinese versions of three instruments: the Beck Depression Inventory, the Attributional Style Questionnaire, and the Self-Blame Scale. An established standardized Chinese translation of Beck Depression Inventory was available (Ko, 1989). The remaining two instruments were translated into Chinese by the author.

Beck Depression Inventory (BDI)

The Beck Depression Inventory (BDI; Beck, 1967) is a 21-item self-report inventory used to measure depth of depression. Participants are asked to read 21 multiple choice items, and each item consists of four statements, scored on a range from 0 to 3. Participants are directed to complete each item in terms of how they felt "during the past week, including today." A total score, ranging from 0 to 63, is obtained by summing the items. The greater the score, the greater the severity of depression. In this study, a standardized Chinese translated version (BDI-C) was used (Ko, 1989). The Chinese version of the Beck Depression Inventory (BDI-C; Ko, 1989) is a 21-item self-report inventory, adapted from the BDI. The content, format, and scoring of the BDI-C were the same as the original BDI. Ko (1989) conducted reliability and validity studies of the BDI-C and reported that the instrument exhibited high internal consistency reliability as measured by Cronbach's alpha (.89) and also had good concurrent validity when compared with psychiatric ratings of depression in clinical patients.

Table 1 Stratified Sampling of National Taiwan Normal University Students

	Education	Sciences	Arts	Fine and Applied Arts	Subtotal
Freshman					
university <i>n</i>	556	298	339	162	1355
percent of total <i>N</i>	11%	6%	6%	3%	26%
stratified sample <i>n</i>	106	57	65	31	259
Sophomore					
university <i>n</i>	525	294	357	162	1338
percent of total <i>N</i>	10%	6%	7%	3%	26%
stratified sample <i>n</i>	101	56	69	29	255
Junior					
university <i>n</i>	445	248	314	136	1143
percent of total <i>N</i>	9%	5%	6%	3%	22%
stratified sample <i>n</i>	85	47	60	26	218
Senior					
university <i>n</i>	553	271	396	179	1399
percent of total <i>N</i>	11%	5%	8%	3%	27%
stratified sample <i>n</i>	106	52	76	34	268
Subtotal					
university <i>n</i>	2079	1111	1406	639	5235
percent of total <i>N</i>	40%	21%	27%	12%	100%
stratified sample <i>n</i>	398	212	270	120	1000

The Attributional Style Questionnaire (ASQ)

The Attributional Style Questionnaire (ASQ; Peterson et al., 1982) is a 12-item self-administered questionnaire which assesses Seligman's conceptualization of perceived control (learned helplessness). The ASQ consists of 12 hypothetical situations with six of the situations describing bad outcomes and six describing good outcomes. Subjects are asked to respond to questions following each situation that tap the internal/external, stable/unstable, and global/specific dimensions of attributions. A number of different subscale scores and constructs can be derived from the ASQ. For this study only the hopelessness composite score was used. In this study the hopelessness construct was considered equivalent to helplessness. Although there may be important differences in nuance, a close reading of Seligman and other's writings indicate that the terms

can be used interchangeably for the purpose of this study. In the current study, the ASQ was translated into Chinese (ASQ-C) for use by the Taiwan sample. It is included in this study as a measure of helplessness. The translation process involved forward and backward translations with evaluations of linguistic and psychological content by bilingual professionals in counseling psychology. A two-way reverse translation method was used to establish reliability. There is a high level of similarity between these two translations, thus providing evidence for the accuracy of translation. Generally speaking, the content, format and scoring of the ASQ-C were the same as the original ASQ. The evaluation of cross-cultural equivalence of the translated version was achieved through the administration of both the original and the translated Chinese forms of the ASQ to 30 senior Taiwanese college students majoring in English. The sequence of administration was counterbalanced. Very high correlations were obtained between the English and Chinese forms for each scale, ranging from $r = .79$ to $r = .94$. They provided evidence for the translation equivalence. The same sample of 30 students was used to obtain data for test-retest correlations. The ASQ-C was administered a second time three weeks later. These correlations ranged from a low of $r = .62$ to a high of $r = .92$. The internal consistency reliability as measured by Cronbach's alpha ranged from $r = .36$ to $r = .89$. These findings suggest low internal reliability for the individual attributional dimensions, but higher reliabilities on composite scores. The results of the ASQ-C are consistent with the results reported by Peterson et al., (1982) and Peterson and Seligman (1984), who noted that these composite scales of the ASQ have consistently proved to be more reliable and valid than the individual dimension scores due to the greater number of items involved. Only the Hopelessness composite score is used in this study to measure helplessness. For this composite the correlations between the ASQ and the ASQ-C was $r = .94$. and Cronbach's alpha coefficient for reliability was .87. Additionally, it also showed a test-retest reliability coefficients of .90.

Janoff-Bulmans Self-Blame Instrument (SBI)

The Self-Blame Instrument (SBI) was a 4-item self-report instrument which assesses Janoff-Bulman's model of self-blame attributions. It was developed for a particular research study by Janoff-Bulman. The SBI consists of 4 hypothetical scenarios and in each scenario the outcome is negative and the role of the target person is intentionally ambiguous. Subjects are asked to first vividly imagine that the various scenarios described had actually been experienced by them and then to respond to five questions following each scenario. The first question has four elements that assess blame in general. Subjects were asked to indicate how much they blamed themselves, other people, the environment (i.e. impersonal world), and chance, for the situations described. The second question taps characterological self-blame, and asks "Given what happened, how much do you blame yourself for the kind of person you are (e.g., the kind of person who is in an accident [Scenario A]). The third question assesses behavioral self-blame by asking "Given what happened, how much do you blame yourself for what you did (e.g. your driving behavior [Scenario A]). Question 4 asks, "How much do you think you deserved what happened?" Question 5 following each scenario is, "If the same situation arose in the future, to what extent do you

believe that you could avoid what happened in this case?" Self-blame measures were summed across the four scenarios.

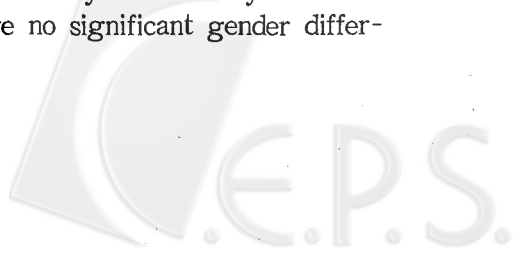
In the present study, the author adapted Janoff-Bulman's self-blame instrument with several revisions made and translated into Chinese (SBS-C) for a Taiwan sample. Three major modifications have been made in the SBS-C. The first change is to change scenarios from four to eight to generate more culturally appropriate scenarios. The second modification is to clarify and elaborate the characterological and behavioral self-blame items for respondents. The third change is to change the way of scoring. Both test-retest and coefficient alpha reliability coefficients were calculated to estimate the reliability of the SBS-C. A group of 42 Educational Psychology and Counseling majors were administered the SBS-C. Two weeks later, 38 were available to complete the SBS-C again. It shows that retest reliability coefficients over two weeks for the SBS-C subscales ranged from $r = .70$ to $r = .88$. The internal consistency of the SBS-C was assessed by calculating coefficient alpha based on the first sample of 42 participants. It shows that coefficients for characterological self-blame and behavioral self-blame were satisfactory.

Data Collection Procedures

The survey packet was administered in a classroom setting to groups of students at the regular time and location of their class meetings. To reduce the impact of assessment reactivity and order effects, the order in which the instruments was changed to control for response bias. The participants returned the packet after they finished in their classes. The instruments took about thirty to fifty minutes to complete. Data was electronically coded using an IBM PC desktop computer, and analyzed using the SPSS statistical package for the IBM Windows environment.

RESULTS

In this study, a stratified sample of 1000 college students was administered three Chinese versions of instruments (BDI-C, ASQ-C, and SBS-C). Data were available for each participant concerning 20 scale and subscale scores. Although not all of these data are relevant to the specific research questions posed in this study, means and standard deviations for all subscales are provided in Table 2 for the reference of other researchers who may be interested in establishing norms for Taiwanese college students on these scales. Separate normative data for men and women are provided. Because of the large sample size and statistical power to detect differences, only mean differences significant at the $p < .001$ level are reported. Table 2 shows that there was only one significant gender difference regarding a variable of specific interest to the research questions in this study. Women were significantly more likely to make behavioral self-blame attributions. Interestingly there were no significant gender differences in depression.



Tests of Research Hypotheses

Of the six hypotheses in this study, the first two examine the empirical existence of the paradox, that is, do persons who are depressed tend to feel both helpless and blame themselves for negative events? The four remaining hypotheses test a possible solution for the paradox. To perform hypothesis tests, Pearson product-moment correlations were carried out.

Table 2 The Mean, Standard Deviation, Possible Range of Values, and Number of Items of the Scales Administered in This Study

Scale/Subscale	scale range	Men (<i>n</i> = 325)		Women (<i>n</i> = 675)		<i>t</i>
		<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	
Beck Depression Inventory						
Depression (DEP ^a)	0 - 63	10.70	6.44	10.35	6.23	.84
Attributional Style Questionnaire						
Internal Negative	1 - 7	4.60	.79	4.43	.68	3.45*
Stable Negative	1 - 7	4.02	.80	4.05	.78	-.69
Global Negative	1 - 7	4.10	1.09	4.07	.98	.45
Hopelessness (HPLS ^a)	2 - 14	8.12	1.60	8.13	1.49	-.05
Internal Positive	1 - 7	4.85	.77	4.84	.73	.26
Stable Positive	1 - 7	5.06	.69	5.11	.66	-1.22
Global Positive	1 - 7	4.79	.91	4.94	.84	-2.55
Hopefulness	2 - 14	9.85	1.33	10.05	1.28	-2.32
Composite Negative	3 - 21	12.72	2.04	12.56	1.87	1.25
Composite Positive	3 - 21	14.7	1.86	14.89	1.76	-1.57
Composite Positive Minus Composite Negative	-18 - 18	1.98	2.73	2.33	2.52	-2.02
Self-Blame Scale						
General Self-Blame (GSB ^a)	0 - 5	3.37	.64	3.42	.56	-1.18
Blame of the Other	0 - 5	1.53	.79	1.71	.73	-3.56*
Blame of Environment	0 - 5	2.19	.87	2.25	.82	-.99
Blame of Chance	0 - 5	2.1	.98	2.17	.96	-.98
Characterological Self-Blame (CSB ^a)	0 - 5	2.07	.94	2.14	.87	-1.26
Behavioral Self-Blame (BSB ^a)	0 - 5	3.12	.66	3.27	.58	-3.67*
Deservingness (DES)	0 - 5	2.35	.69	2.36	.60	-.35
Avoidance (AVO)	0 - 5	2.89	.72	2.97	.62	-1.90

a variable involved the hypothesis testing

* *p* < .001

Research Hypotheses on Examining the Paradox

The existence of the paradox would be supported by finding of a significant positive correlation among self-blame attributions, helplessness and depression. Results are shown in the top row of Table 3. Hypothesis 1-a predicted that there would be a significant positive correlation between general self-blame attributions and depression. The result indicates that this hypothesis was supported, $r = .17$, $p < .001$. However, a correlation of .17 is actually fairly low. In a smaller sample, it would not have been significant. Thus, the support for hypothesis 1-a was not very strong. Hypothesis 1-b predicted that there would be a significant positive association between helplessness and depression. This hypothesis was also supported, $r = .33$, $p < .001$. Therefore findings of the present study provide tentative support for the existence of the "depressive paradox."

Research Hypotheses Testing: A Resolution For The Paradox

The second set of research questions proposed to investigate Janoff-Bulman's model of self-blame by dividing self-blame into characterological self-blame, and behavioral self-blame. The first two rows of Table 3 provide a test for hypotheses 2-a and 2-b, namely, that characterological self-blame would be significantly positively associated with depression (2-a) and helplessness (2-b). Results show that characterological self-blame was significantly positively correlated with depression, $r = .34$, $p < .001$, and was also significantly positively correlated with helplessness, $r = .36$, $p < .001$. Thus, both hypotheses received strong support.

Table 3 Correlations Testing the Depression Paradox, and a Possible Resolution

	DEP Depression	HPLS Helplessness	GSB General Self-Blame	CSB Character Self-Blame	BSB Behavior Self-Blame	DES Deserv- ingness	AVO Avoidance
DEP Depression	-	.33*	.17*	.34*	.17*	.31*	-.19*
HLPS Helplessness		-	.25*	.36*	.25*	.39*	-.18*
GSB General Self-Blame			-	.52*	.63*	.28*	-.01
CSB Character Self-Blame				-	.39*	.51*	-.20*
BSB Behavior Self-Blame					-	.35*	.07
DES Deservingness						-	-.30*
AVO Avoidance							-

Note. N=1000

* $p < .001$

Janoff-Bulman's model predicts that behavioral self-blame would not be significantly associated with depression (hypothesis 2-c) or helplessness (hypothesis 2-d). However, results shown in the top two rows of Table 3 indicate that behavioral self-blame was found to be significantly positively correlated with depression, $r = .17$, and with helplessness, $r = .25$. Thus, these results fail to support an important element of Janoff-Bulman's model, that behavioral self-blame can be distinguished from characterological self-blame in regard to association with helplessness and depression.

The validity check for the Janoff-Bulman's self-blame attributions model: It is possible to use the "Deservingness" and "Avoidance" (perceived avoidability) subscales from the SBS to provide a validity check for Janoff-Bulman's self-blame model. According to the model, persons high in characterological self-blame should also exhibit high levels of "Deservingness" and low in "Avoidance" of blame. Conversely, the model predicts that persons high in behavioral self-blame should tend to exhibit high levels "Avoidance" and low levels of "Deservingness" for blame. The final group of correlations shown in Table 3 provides mixed support for these checks on validity. Characterological self-blame, as expected, was significantly positively correlated with deservingness ($r = .51$, $p < .001$) and significantly negatively associated with avoidance ($r = -.20$, $p < .001$). However, contrary to expectation behavioral self-blame was not associated with avoidance, and was significantly positively associated with deservingness ($r = .35$, $p < .001$). These results call into question the validity of either the construct of behavioral self-blame itself, or the accuracy of measurement in this study.

Hierarchical Multiple Regression Analyses

Finally, two exploratory research questions were pursued to determine which variables are the best unique predictors of depression and helplessness. Two sets of hierarchical multiple regression analyses were conducted. In the first, depression was the criterion, with characterological self-blame, behavioral self-blame, and helplessness as the predictors. In the second, helplessness was the criterion, with characterological self-blame, behavioral self-blame, and depression as the predictors.

The first research question was pursued with a set of three hierarchical regression analyses used to predict depression. Each of the three analyses was identical, except that the sequence of entry for the three predictor variables was varied so that each was entered last in one of the three analyses. The last step of the hierarchical regression provides a test for the unique variance accounted for by that predictor, after accounting for the variance associated with the other two predictors.

Results of the first set of regression are shown in Table 4. The increment in R^2 in the last step of each analysis indicates the unique variance accounted for by the

Table 4 Hierarchical Multiple Regression Predicting Depression from Characterological Self-Blame, Behavioral Self-Blame, and Helplessness

Step Number	R	R ²	Adj. R ²	Increment in R ²	F change	(df)	r	Beta	t	(df)
Analysis No. 1, unique effects of HLPS Helplessness (N=1000)										
1 BSB Behavioral Self-Blame							.17*	.01	.30	1.996
CSB										
Characterological Self-Blame	.34	.11	.11	.11	64.53*	2,997	.34*	.25	7.52*	1.996
2 HPLS Helplessness	.41	.16	.16	.05	59.51*	1,996	.33*	.24	7.71*	1.996
Analysis No. 2, unique effects of BSB Behavioral Self-Blame(N=1000)										
1 HPLS Helplessness							.33*	.24	7.71*	1.996
CSB										
Characterological Self-Blame	.41	.16	.16	.16	98.12*	2,997	.34*	.25	7.52*	1.996
2 BSB Behavioral Self-Blame	.41	.16	.16	.00	.09	1,996	.17*	.01	.30	1.996
Analysis No. 3, unique effects of CSB Characterological Self-Blame(N=1000)										
1 HPLS Helplessness							.33*	.24	7.71*	1.996
BSB Behavioral										
Self-Blame	.34	.12	.12	.12	66.15*	2,997	.17*	.01	.30	1.996
2 CSB										
Characterological Self-Blame	.41	.16	.16	.05	56.49*	1,996	.34*	.25	7.52*	1.996

* $p < .001$.

variable entered at that step, after controlling for the variance of the block two variables entered in the previous step. Table 4 shows that helplessness uniquely accounted for 5% of the variance in depression, characterological self-blame also uniquely accounted for 5% of the variance in depression-- both statistically increments, whereas behavioral self-blame was not a significant unique predictor of depression. Taken together, the three variables account for 16% of the variance in depression.

Table 5 Hierarchical Multiple Regression Predicting Helplessness from Characterological Self-Blame, Behavioral Self-Blame, and Depression

Step Number	R	R ²	Adj. R ²	Increment in R ²	F change	(df)	r	Beta	t	(df)
Analysis No. 1, unique effects of DEP Depression (N=1000)										
1 BSB Behavioral Self-Blame							.25*	.12	4.03*	1,996
CSB Characterological Self-Blame	.38	.14	.14	.14	82.87*	2,997	.36*	.23	7.09*	1,996
2 DEP Depression	.44	.19	.19	.05	59.51*	1,996	.33*	.23	7.71*	1,996
Analysis No. 2, unique effects of BSB Behavioral Self-Blame (N=1000)										
1 DEP Depression							.33*	.23	7.71*	1,996
CSB Characterological Self-Blame	.42	.18	.18	.16	107.68*	2,997	.36*	.23	7.09*	1,996
2 BSB Behavioral Self-Blame	.44	.19	.19	.01	13.61*	1,996	.25*	.12	4.03*	1,996
Analysis No. 3, unique effects of CBS Characterological Self-Blame (N=1000)										
1 DEP Depression							.33*	.23	7.71*	1,996
BSB Behavioral SELF-BLAME	.39	.15	.15	.15	87.99*	2,997	.25*	.12	4.03*	1,996
2 CSB Characterological Self-Blame	.44	.19	.19	.04	50.29*	1,996	.36*	.23	7.09*	1,996

* $p < .001$

Results of the second set of hierarchical regression analyses used to predict helplessness are shown in Table 5. Once again, multiple analyses were performed to allow a different predictor to enter the equation in the final step. Table 5 shows that behavioral self-blame uniquely accounted for 1% of the variance in helplessness, characterological self-blame 4% and depression uniquely accounted for 5% of the variance in helplessness. Taken together the three predictors accounted for 19% of the variance in helplessness. The findings indicate that, although all three are statistically significant

predictors, characterological self-blame is much more useful than behavioral self-blame in predicting helplessness.

DISCUSSION

Research Hypotheses and Exploratory Questions

The first two hypotheses concerned the empirical existence of the paradox in the beliefs of depressed persons. The first hypothesis provided a test for Beck's cognitive model of depression. General self-blame exhibited a statistically significant correlation with depression, ($r = .17$). Although statistically significant, this level of association is low in practical terms, accounting for less than 3% of the variance in depression. These results provide some slight confirming evidence for Beck's (1967) cognitive model of depression which proposes self-blame as a primary feature of the depressed person. The findings in the current study are consistent with those reported by Bordieri and Kilbury (1991), Laxer (1964), Tassone (1982), and Woerner (1980) who found that self-blame was associated with depression.

Additionally, some studies reported that self-blame was related to poor adjustment and was viewed as a maladaptive response (Abrams & Finesinger, 1953; Biener, 1983; Bordieri, Comninel, & Drehmer, 1989; Heinemann, Bulka, & Smetak, 1988; Taylor, Lichtman, & Wood, 1984). However, although most people think that self-blame is psychologically damaging, some researches claim that self-blame may be a positive psychological mechanism and associated with good coping and better adjustment in some situations involving accidents, serious illness, or trauma (Brewin, 1982, 1985; Chodoff, Friedman, & Hamburg, 1964; Janoff-Bulman & Lang-Gunn, 1988; Janoff-Bulman & Wortman, 1977; Kaze & Burt, 1988; Miller & Ross, 1975; Schulz & Decker, 1985; Taylor et al., 1984; Tennen, Affleck, Allen, McGrade, & Ratzan, 1984; Peterson et al., 1981; Timko & Janoff-Bulman, 1985; Wortman & Dintzer, 1978).

The second hypothesis provided a test for Seligman's learned helplessness model of depression. Helplessness exhibited a statistically significant positive correlation with depression ($r = .33$). The result provide confirming evidence for Seligman's (1975) learned helplessness model of depression which proposes that feeling of helplessness can precipitate the development of depression. This result is consistent with findings reported in previous studies which supported the depression model of learned helplessness, showing that depressed individuals perceive themselves as exercising little control over their environment (Bauer, 1987; Klein & Seligman, 1976; Miller & Seligman, 1975; Oliver & Williams, 1979). However, this finding of the current study is inconsistent with findings reported by Rizley (1978) who found that depressed subjects did not behave as though they were helpless; to the contrary, they rated their own actions as a more important causal influence on another individual than did nondepressed subjects.

Combining these results, the so-called paradox in depression received empirical

support in this study, namely, depressed persons tend to blame themselves for events over which they feel no control. Participants who scored high on general self-blame showed higher levels of depression, and those who scored high on helplessness also scored high on depression. However, the relationship between general self-blame and depression is weak. The obtained data tends to support the empirical existence of the paradox and suggests that depressed individuals may have a tendency to hold themselves responsible for seemingly uncontrollable events. As Abramson and Sackeim (1977) pointed out, there is logical incompatibility these beliefs. Nevertheless, evidence for this paradox was obtained by this study. These findings are similar to other research which suggests that the paradox exists and is manifested empirically (Hiroto & Seligman, 1975; Lester, 1989; Peterson, 1979). Additionally, some studies have found evidence of the existence of this paradox in nonclinical undergraduate populations (Garber & Hollon, 1980) and in a child clinical population (Kerman, 1981).

The next four hypotheses (from 2-a to 2-d) concerned the resolution for the paradox suggested by Janoff-Bulman. Hypotheses 2-a and 2-b provided a test for Janoff-Bulman's self-blame model with regard to characterological self-blame. Characterological self-blame exhibited statistically significant correlation with depression and helplessness.

The present results demonstrated that characterological self-blame is apparently an important characteristic of depression and helplessness, providing partial confirming evidence for Janoff-Bulman's (1979) self-blame attributions model of depression that proposes the characterological self-blame as a maladaptive response and associate with depression and helplessness, but behavioral self-blame as an adaptive response. This finding is consistent with the results reported in previous studies (Anderson, Horowitz, & French, 1983; Hindin, Zautra, & Reich, 1984; Manne & Sandler, 1984; Meyer & Taylor, 1986), which showed characterological self-blame as a concomitant of depression or helplessness. Specifically, Janoff-Bulman (1979) found that depressed female undergraduates reported more characterological self-blame than did nondepressed female undergraduates. Peterson et al., (1981) surveyed undergraduates with a revised version of the ASQ to examine characterological self-blame. They found that internal attributions for bad events were not always associated with depression. Only internal, characterological self-blame attributions were associated with depression.

The last two hypotheses, 2-c and 2-d, provided a test for Janoff-Bulman's self-blame model with regard to behavioral self-blame. Behavioral self-blame exhibited a statistically significant correlation with depression, ($r = .17$). Although statistically significant, this level of association is low in practical terms, accounting for less than 3% of the variance in depression. The conclusion could be drawn is that behavioral self-blame is practically unrelated to depression. Furthermore, it appears that behavioral self-blame may be an adaptive response that may protect a person from depression. In addition, behavioral self-blame showed a statistically significant correlation with helplessness, ($r = .25$). This level of association is still not high in practical terms, accounting for less than 6% of the variance in helplessness. Because behavioral

self-blame had a weak association with depression and helplessness, Janoff-Bulman's hypothesis appears disconfirmed with regard to behavioral self-blame, which is proposed as an adaptive response and won't be associated with depression or helplessness. The findings of this study are similar to those reported by Carver et al. (1985) who found that both characterological self-blame and behavioral self-blame measured by Janoff-Bulman's (1979) measure of self-blame were positively correlated with depression in a survey of undergraduates. However, these researchers also found a relatively low correlation ($r = .19$) between behavioral self-blame and depression.

The findings of the current study are similar to those which show a positive relationship between behavioral self-blame and depression or poor adjustment. For example, Meyer and Taylor (1986) reported that behavioral self-blame was associated with poor adjustment among rape victims. Results of the present study are inconsistent with those reported by Affleck et al., (1987), Croog and Levine (1987), Janoff-Bulman (1979, 1981, 1982), Peterson et al., (1981), Tennen et al., (1984), Tennen, Affleck, & Gershman, (1986); and Timko and Janoff-Bulman (1985), who claimed that behavioral self-blame might be an adaptive response and associated with better coping. For example, Peterson et al., (1981) found that blame directed at their own behaviors correlated with lack of depressive symptoms. Tennen et al., (1984) found that children who explained the onset of their disease in terms of their behavior were rated by their physicians as coping better with diabetes than were children who explained the onset in terms of genetic inheritance. Janoff-Bulman (1982) found that behavioral self-blame by victims was associated with high self-esteem and perceptions of future avoidability of the victimization. In addition, Timko and Janoff-Bulman (1985) found similar results among breast cancer patients. Women who believed that they were behaviorally responsible for their conditions were seen as adjusting better than were those who made characterological self-blame attributions.

Considering all the results found in this study for the last four hypotheses, findings supported Janoff-bulman's model of self-blame regarding assumption about characterological self-blame, but not regarding assumptions about behavioral self-blame. The current study found partial support for Janoff-Bulman's resolution of the paradox, in that depressed participants had higher characterological self-blame. Contrary to expectations, behavioral self-blame had a weak positive association with depression, instead of the negative association predicted by Janoff-Bulman's model. Additionally, regarding the validity check for the Janoff-Bulman's model, characterological self-blame, as expected, had a significant positive correlation with deservingness and a significant negative correlation with avoidance. However, contrary to expectation, behavioral self-blame was not associated with avoidance and had a significant positive association with deservingness ($r = .35$). The findings are consistent with the results reported above and support Janoff-Bulman's model of self-blame with regard to assumption about characterological self-blame. However, behavioral self-blame shows a finding that is inconsistent with Janoff-Bulman's hypothesis which proposed that behavioral self-blame is uniquely associated with the perception of future avoidability and that it

is adaptive precisely for this reason.

Studies examining Janoff-Bulman's model of two types of self-blame have been inconsistent. Some studies supported Janoff-Bulman's (1979) differentiation between behavioral self-blame and characterological self-blame (Follette & Jacobson, 1987; Janoff-Bulman, 1979, 1982; Janoff-Bulman & Wortman, 1977; Peterson et al., 1981; Valdez, 1985) but some did not (Carver et al., 1985; Frazier, 1990; Kaze & Burt, 1988). Specifically, Kaze and Burt (1988) surveyed rape victims, but didn't distinguish between behavioral self-blame and characterological self-blame. Meyer and Taylor (1986) did distinguish between these two types of self-blame, but the two types of blame were not directly assessed. Bordieri and Kilbury (1991) examined the effect of different types of self-blame attributions on perceived rehabilitation outcomes, and the results supported Janoff-Bulman's (1979) differentiation of self-blame attributions. The findings are diversified.

Regarding the two exploratory research questions, results from hierarchical regression analyses showed that helplessness and characterological self-blame were significant predictors of depression. Each uniquely predicted about 5% of the variance in depression. However, behavioral self-blame was not a significant predictor and accounted for only a trivial amount of unique variance. In addition, depression and characterological self-blame were significant predictors of helplessness, uniquely explaining 5% and 4% of the variance, respectively. Again, behavioral self-blame accounted for only a trivial amount of unique variance. The results demonstrated that characterological self-blame was a much stronger predictor of the depression and helplessness than behavioral self-blame, which only accounted for a trivial amount of unique variance. These findings are similar to those reported by Carver et al. (1985) who found that only the effects attributable to characterological self-blame, compared with behavioral self-blame, accounted uniquely for significant variance in depression and only characterological self-blame is a significant predictor in depression.

Summary and Interpretation of Findings

Considering the findings of this study as a whole, several important inferences can be drawn.

First, the results of the current study are mixed as to whether behavioral self-blame and characterological self-blame are different constructs, or in fact not different. On the one hand, the behavioral self-blame had a very low association with depression and was not significant predictor of depression, but the characterological self-blame had a stronger correlation with depression and was a significant predictor of depression. Additionally, the two measured constructs were moderately correlated in this study ($r = .39$). The lack of overlap indicates the measure may assess different constructs. Further, behavioral self-blame had no correlation with avoidance, but characterological self-blame had a significantly negative association with avoidance. Thus, there is some evidence of construct validity. On the other hand, the validity check for behavioral self-blame did not turn out as expected in this study, and several of the

correlations for this construct were not as expected. It is not possible to conclude on the basis of this study whether behavioral self-blame does, or does not exist in the sense that undergraduate students think of themselves in this way. The lack of evidence in this study may be due to flawed measurement techniques, or to an actual absence of the construct as people think about themselves.

Second, the findings in this study suggest that internal attributions for negative outcomes are associated with increased depression and helplessness. The results are consistent with the findings of previous researches (Kerman, 1981; Kupier, 1978; Sweeney et al., 1986). However, the exact roles that the internal and external attributional dimension play in depression and its treatment are uncertain (Banks & Goggin, 1983; Phares, Wilson, & Klyver, 1971).

Third, predictors in this study accounted for a relatively small amount of the variance in depression. The predictors chosen for this study were selected to test the Janoff-Bulman's model. It is possible that a more complete set of predictors would have a higher degree of relationship to depression. Findings of this study suggest that depression is probably a complex phenomenon that is determined by a large number of variables, rather than any single variable, or small set of variables.

Fourth, it was surprising to find that behavioral self-blame had a weak positive relationship with depression and helplessness. Why were the obtained results not consistent with those reported by Janoff-Bulman (1979) who found behavioral self-blame was an adaptive response? Why did participants in this study respond with numerically higher mean ratings of behavioral self-blame measure compared to characterological self-blame? These questions are crucial, because a basic finding of this study does not agree with expectations based on the model this research attempted to examine. Consideration of the findings, and the results of debriefing interviews with several of the participants in this research suggests nine possible explanations for this discrepancy. Each is presented in the paragraphs below: (1) The discrepancy in findings is due to problems with the measurement of behavioral self-blame. The Behavioral Self-Blame Subscale requires fairly abstract causal judgments. Perhaps the greater complexity and abstraction of this concept and the greater difficulty of the judgments result in greater measurement error, producing less reliable correlations. Because there are no adequate measures of self-blame, a scale was constructed for the present study. Construction of the Self-Blame Scale was done in several phases intended to improve upon Janoff-Bulman's instrument by increasing the number of items, and sharpening the distinctions between behavioral self-blame and characterological self-blame. However, translating the complex cognitions and interpreting the attributions of these college students is an exceedingly complex process. Low reliability of the Behavioral Self-Blame Subscale might also limit its validity. The coefficient alpha of .62, for the Behavioral Self-Blame Subscale is only marginally adequate. The scale developed for this study simply may not measure behavioral self-blame, although the construct may be a valid one. (2) Participants may have responded to the scale as they felt they "should", instead of how they actually felt. It is not uncommon for the Chinese to

response in this way, because Chinese are relatively rule oriented and conformist (Wilson, 1981) and, generally speaking, education is moralistically oriented. (3) It may be difficult for participants to differentiate characterological self-blame and behavioral self-blame. For example, one participant asked whether "lazy" is an aspect of character or a behavior? Quite a few researchers (Abbey, 1987; Porter, 1983) have pointed out the conceptual difficulty of distinguishing between behavioral self-blame and characterological self-blame. For example, if we consistently do some behaviors, then many persons would view these behaviors as representing a trait. Behaviors with cross-situational consistency and high stability across time imply an aspect of "character". While some behaviors are considered as unchanging, on the other hand some character traits are viewed as changeable. For example, if one is considered reluctant to trust, that person still may be seen of quite capable of learning to trust under the right circumstances. Janoff-Bulman (1979) mentioned that may be behavioral self-blame reported by participants "co-occurred with characterological self-blame, and blaming one's behaviors was thus an extension of blaming one's character. It may be difficult to blame one's character without blaming one's behavior, yet it may be very possible to blame one's behavior without blaming one's character." (4) Participants might confuse the concepts self-blame, causality, and responsibility. When one believes s/he is the "cause" of a problem, it does not necessarily follow that this person will blame himself/herself for it, or assume responsibility (Shaver & Drown, 1986). The possibility of being an unwitting, accidental cause of a problem allows one to escape blame. However, daily experience shows that many persons who accidentally cause a problem, nevertheless take responsibility for attempting to repair the situation. (5) Related to measurement problems with behavioral self-blame, perhaps the consequences of the scenarios are not serious (negative) enough. Participants may not have felt a strongly negative reaction to the hypothetical situations, and tended to minimize the consequences of the scenario. (6) Another way the seriousness of the scenario could have been minimized, was the hypothetical versus real nature of the situations presented. Miller, Klee, and Norman (1982) and Miller and Porter (1983) pointed out that researchers should pay more attention to the situational influences on a person's behavior. Sometimes antecedent conditions are responsible for a person's present behavior. The attributions in hypothetical situations, or actual experiences in daily events are different. Zuroff, Igreja, and Mongrain (1990) found that situational details of interpersonal situations were involved in depressive symptoms. A number of characteristics in the scenarios presented in this study may have confounded the results, including length of the scenario descriptions, context (for example, academic or family relations situation), ambiguity, personal relevance and realism for an individual subject, "cost" of the mistake described in the scenario, consequences of the mistake (for example, harm to self and/or harm to target person or third parties), whether the scenario involves a single mistake or several, and whether the situation is ongoing (Dweck & Goetz, 1978; Hindin et al., 1984; Taylor et al., 1984). (7) Janoff-Bulman (1979) pointed out behavioral self-blame has adaptive function only in the absence of characterological

self-blame. Although this may be true, it may also be very rare and difficult for Taiwan students to accomplish. It is likely that many students who feel behaviorally blameworthy will also feel some degree of characterological self-blame. (8) It is possible that Janoff-Bulman's model only fits certain types of subjects, such as victims, but not necessarily all depressed persons (Timlo & Janoff-Bulman, 1985). (9) Finally, there is the possibility that the construct of behavioral self-blame does not exist. The construct has been questioned by prominent researchers (Shaver & Drown, 1986). Nine possible reasons that the findings of this study did not support the part of Janoff-Bulman's model which proposed "behavioral self-blame" as a construct distinct from "characterological self-blame." Many of these reasons are not mutually exclusive, and more research is needed to determine which one, or ones, explain the findings of this study.

Limitations of the Study

Many of the nine possible reasons discussed in the preceding section why Janoff-Bulman's model was not fully supported by the findings of this study stem from methodological limitations described as below. (1) Threats to generalizability: (a) The sample of students was all from NTNU, who may not be representative of the typical college student. (b) Another important consideration relating to the generalizability of findings is the degree to which the scenarios presented to participants were representative of the general situations. (2) Measurement problems: (a) construct validity and low internal reliability of the measure, especially the Behavioral Self-Blame Subscale. (b) all measures were subjective self-reports. (3) Statistical problems : (a) The relationships between variables were examined with correlational methods. This study could not examine the causal nature of these relationships. (b) The large number of subjects provide a great amount of statistical power. Therefore correlations that were rather trivial in terms of practical significance, were nevertheless statistically significant. In addition, even though many more correlations achieved significance than would have been expected by chance, some were probably statistical artifacts. This highlights the need to replicate the findings reported here under different conditions (e.g., with different populations, different predictors, criteria, etc.).

Implications for Clinical Practice

Dweck (1975) noted that therapeutic attempts to alter attributions from characterological to behavior self-blame may be clinically adaptive for the individual. Although the findings of this study did not provide support for the adaptive function of behavioral self-blame, the importance these findings have for interventions designed to help the depressed person is worth further discussion. Examination of a depressed individual based on an understanding of paradoxical realities can heighten the therapist's appreciation for each client's "resistance" to change and produce new treatment possibilities.

The findings of this study supported the relationships among self-blame attributions, helplessness, and depression. Results suggest that therapy which emphasizes cognitive restructuring, changing attributions, and providing the sense of control for the depressed individual might be very effective (Kavan & Dowd, 1984; McMullin, 1986; Valins & Nisbett, 1971).

Results of this study have suggested an association between characterological self-blame and helplessness in depression. The importance of cognition factors in depression is supported. Recognition of this importance has had therapeutic implications (Freeman, Pretzer, Fleming, & Simon, 1990; Teasdale, 1989). Results of this study suggest that Seligman's (1975) control-oriented strategies may be appropriate for depressed persons, whose self-blaming does not imply high perceived control. Thus, how to provide clients with a sense of control and decrease the feelings of helplessness becomes very important. An intervention aimed at emphasizing personal control, building upon initial small successes and choices one has might be therapeutic with clients (Peterson, 1982). Further, Beck's (1967) cognitive model emphasizes cognitive restructuring of the depressed individual. Further research is needed to advance knowledge about the relationship among self-blame attribution, helplessness and depression, and to apply this knowledge in order to increase the individual mental health.

Findings of this study suggest that attributions may influence adjustment, the implication for clinical practice concerns the quality and content of therapist interventions, and in training therapists to be more sensitive to clients' internal attributions and self-blaming pattern, and realize how these impact client functioning. Successful therapists may need to address harmful, self-blaming and destructive attitudes and behaviors, and assist clients to develop a healthier style of attributions. Moreover, Janoff-Bulman and Lang-Gunn (1988) noted that self-blame attributions may be more malleable and directly modifiable than personality or character, and may thus be an important preliminary step in helping clients to cope with the feelings of helplessness. Leading people not to focus on their nonmodifiable character, may increase perceived future avoidability of negative events and perceived control in general. This is especially important for depressed clients who generally have a high need for control (Miller & Porter, 1983). Finally, since both helplessness and characterological self-blame are predictors of depression, if future research suggests that they both contribute to causing depression, interventions may fail if they focus only one and not the other. Counselors working with depressed persons may want to include a reduction in both helplessness and characterological self-blame or even internal self-blaming attributions as part of their treatment plans.

Suggestions for Future Research

One of the most definitive statements that can be made about the present study is that its findings raise far more questions than are answered. Thus, there are lots of questions which could be explored further. Below are some suggestions for future

research.

The first suggestions for future research are based directly on the limitations of this study. Results need to be extended to other samples to improve generalizability. Further testing of measurement methods for self-blame, especially behavioral self-blame, are needed.

More research is needed to explore and test Janoff-Bulman's model. Future studies could examine the effect of different types of self-blame attributions on adjustment to various forms of victimization.

Central to Janoff-Bulman's model is the distinction between characterological self-blame and behavioral self-blame. This study did not support such a distinction for college students in Taiwan. More research is needed, especially to examine what combinations of characterological and behavioral self-blame might be most adaptive. Recall that Janoff-Bulman (1979) pointed out that behavioral self-blame is adaptive only in the relative absence of characterological self-blame. This proposition needs further testing. Such studies will face the challenge of devising instruments which can measure the difference in these types of self-blame, if differences exist. Further research is needed to establish the relation of both types of self-blame to depression and helplessness in different populations selected on the basis of age, educational level, gender, and ethnicity.

An further research, and experimental study could be conducted on a non-clinical population or a clinical population attempting to teach subjects how to distinguish between characterological self-blame and behavioral self-blame. The experimental group would then be followed up to determine if their level of coping had improved. Criteria to measure improvement would not only include self-report instruments but also consist of a significant others' rating and behavior index.

Characterological self-blame is an interesting target for research in itself. Characterological self-blame has only recently been investigated as a correlate of depression, and results from this study suggest that characterological self-blame was as potent a predictor of depression as helplessness. Future study might well address this issue. Carver et al., (1985) found that the tendency to generalize from a single failure to a broader sense of personal inadequacy, which is similar to characterological self-blame, is an important part of the phenomenology of depression. The relationship between characterological self-blame and generalization should be explored further.

Studies which focus on behavioral self-blame, if its existence as a separate construct can be established, might also prove very useful. Future research should examine under what conditions behavioral self-blame might be adaptive. The research on this point is mixed and inconsistent. The basis for this inconsistency should also be explored.

The relation of an individual's tendency to self-blame should be explored in connection to the personal constructs of causality, responsibility, and blameworthiness (Critchlow, 1985; McNeill-Harkins, 1989; Shaver & Drown, 1986), and all three of these constructs should be clarified. In addition, in the present study behavioral and charac-

terological self-blame have not been related to the attributional dimensions of internal-ity, stability, globality (Abramson et al., 1978), and controllability (Janoff-Bulman, 1979). Making these links would help to clarify the meaning of the two types of self-blame. Of course, more study is need to assess how the cognitive processes of depressed persons differ from those of nondepressed persons (Coyne, Aldwin, & Lazarus, 1981; Coyne & Gotlib, 1983; Gotlib & Beatty, 1985).

The results of the present study are correlational and provide little information about causal relationships. These results clearly establish the need for studies which can establish causal relationships and also leave open the possibility that there are cognitive precursors of depression (Lewinsohn, Steinmetz, Larson, & Franklin, 1981). Additionally, further research is needed to identify more precisely what factors may possibly predispose a person to develop depression (Brewin, 1985; Janoff-Bulman & Hecker, 1988). Therefore, other variables thought to be significant risk factors for depression also should be included in future studies, such as total life stress, satisfaction with social supports, negative life events, etc. (Cochran & Hammen, 1985; Hammen & Cochran, 1981; Hammen, Krantz, & Cochran, 1981; Hammen & Mayol, 1982; Robins & Block, 1989; Smurthwaite, 1989; Sowards, 1986). Finally, more research is needed to examine resolutions of the paradox in depression. Lester (1989) pointed out that patients with both component symptoms of the paradox may be especially likely to contemplate suicide and see suicide as the only response in the life situation in which they feel both blameworthy and powerless. Moreover, Abramson and Sackeim (1977) mentioned that the paradox is functional in that perhaps self-blame and helplessness beliefs tend to lessen the seriousness of one-another. This issue is worth further empirical investigation. In addition, is the paradox, a specific feature of depression or a general phenomenon, highlighted in depressive mood states? Abramson and Sackeim (1977) pointed out some research suggests normal individuals may have the phenomenon of the paradox but it is not as compelling as it is in the case of depression. Thus, the generality of the paradox and its extent is an issue for future research. Moreover, there is little research to test any of the possible resolutions of the paradox presented by Abramson and Sackeim (1977), and Lester (1989).

CONCLUSION

The purpose of this study was to investigate the paradox of the helplessness and self-blame in depression by examining Janoff-Bulman's model of self-blame attributions for depression which distinguishes between "behavioral self-blame" and "characterological self-blame". In the present study, college students in Taiwan were administered three Chinese versions of instruments-the Beck Depression Inventory which measures depression, the Attributional Style Questionnaire which measures helplessness, and the Self-Blame Scale which measures general self-blame, characterological self-blame and behavioral self-blame. Of 1443 students who returned surveys, a stratified sample of 1000 participants was analyzed. Six researches hypotheses were derived from Janoff-Bulman's model and were examined

through use of Pearson product-moment correlation analyses and multiple-regression analyses.

Correlational evidence support four of the six hypotheses. The first two hypotheses concerned the empirical existence of the paradox in the beliefs of depressed persons. The first hypothesis provided a test for Beck's cognitive model of depression. General self-blame exhibited a statistically significant correlation with depression, but this level of association is low in practical terms, accounting for less than 3% of the variance in depression. The finding provides slight confirming evidence for Beck's (1967) cognitive model of depression which postulates that self-blame is a significant maladaptive characteristic of depressed persons. The second hypothesis provided a test for Seligman's learned helplessness model of depression. Helplessness exhibited a significant positive relationship with depression. This finding provided support for Seligman's learned helplessness model of depression that views depressed individuals as perceiving themselves as exercising little control over their environment. Taken together these results supported the empirical existence of the paradox in which depressed persons feel helpless and self-blame about the same event.

The next four hypotheses concerned a resolution for the paradox suggested by Janoff-Bulman. As predicted by Janoff-Bulman's (1979) model, characterological self-blame exhibited a statistically significant correlation with depression and helplessness. The present results suggested that characterological self-blame is apparently an important characteristic of depression and helplessness, providing confirming evidence for Janoff-Bulman's self-blame attributions model of depression with regard to characterological self-blame. This model proposes characterological self-blame as a maladaptive response associated with depression and helplessness.

The last two hypotheses, provided a test for Janoff-Bulman's self-blame model with regard to behavioral self-blame. Behavioral self-blame exhibited a weak but statistically significant correlation with depression. Although statistically significant, this level of association is low in practical terms, accounting for less than 3% of the variance in depression. The conclusion could be drawn is that behavioral self-blame is practically unrelated to depression. In addition, behavioral self-blame showed a statistically significant correlation with helplessness, but the level of association is still not high in practical terms, accounting for less than 6% of the variance in helplessness. Contrary to predictions, behavioral self-blame had a weak association with depression and helplessness. Thus, Janoff-Bulman's hypothesis appears disconfirmed with regard to behavioral self-blame. The model proposed that behavioral self-blame is an adaptive response and would not be associated with depression or helplessness. Thus, findings of the current study supported Janoff-Bulman's model of self-blame with regard to assumptions about characterological self-blame, but not with regard to assumptions about behavioral self-blame.

Regarding the additional exploratory questions, hierarchical multiple regression analyses were used to examine the relationships of three predictors (characterological self-blame, behavioral self-blame and helplessness) of depression; and a different set of

three predictors (characterological self-blame, behavioral self-blame and depression) of helplessness, to examine which of the predictors accounted for the greatest unique amount of the variance in the criterion. Results indicated that helplessness and characterological self-blame were significant predictors of depression. Each uniquely predicted about 5% of the variance. However, behavioral self-blame accounted for 0% of the variance in depression. In addition, depression and characterological self-blame were significant predictors of helplessness, uniquely explaining 5% and 4% of the variance, respectively. Again, behavioral self-blame accounted for only a trivial amount of unique variance. Results of this study provide support for an association between characterological self-blame, helplessness, and depression.

In sum, the finding of depression associated with helplessness was consistent with the learned helplessness model of depression proposed by Seligman, and findings concerning self-blame were consistent with the cognitive model of depression developed by Beck. However, support for the later was weak. These findings also suggest the empirical existence of the paradox of depression which exhibits both self-blame and helplessness in a college population. Results of this study lend support to Janoff-Bulman's model of self-blame attribution regarding assumptions about characterological self-blame, but not regarding assumptions about behavioral self-blame. Results of this study provide support for the importance of characterological self-blame and helplessness in depression. A number of important limitations were noted, especially connected with generalizability of the sample and measurement problems. Implications of these findings, as well as suggestions for further research were discussed.

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憂鬱者無助和自責之「憂鬱矛盾現象」： 一個解決此矛盾現象的可能途徑之研究

吳麗娟

憂鬱者常有「憂鬱矛盾現象」(depression paradox)——覺得無助又自責；一方面他們有強烈的無助感，相信自己對事物沒有影響力，另一方面又認為自己有很大的影響力，因為一切困擾都是他們引起的。在文獻中，Seligman 的憂鬱無助論和 Beck 的憂鬱認知論，亦形成理論上的矛盾。本研究的目的乃運用 Janoff-Bulman 的自責歸因理論 (self-blame attributions) 來驗證此矛盾現象。Janoff-Bulman 認為自責有兩種：個性自責 (characterological self-blame) 和行為自責 (behavioral self-blame)，且唯有「個性自責」才會引起憂鬱、無助，而行為自責則是較具建設性的自責方式。

本研究的研究對象係取自國立台灣師範大學，依年級、學院別分層隨機取樣 1000 位學生，以 Beck 的憂鬱量表及自行修訂的歸因型態問卷(一) (測無助感)、歸因型態問卷(二) (測自責) 為評量工具，所得資料分別以積差相關和階層迴歸分析進行處理。本研究的主要發現如下：(一)自責和無助感均與憂鬱呈現顯著正相關。此結果支持 Seligman 無助論和 Beck 認知論，同時也支持「憂鬱矛盾現象」的存在性。(二)個性自責與憂鬱、無助感之間皆呈現顯著正相關，然而，行為自責與憂鬱、無助感亦均呈現顯著正相關。前者的結果支持 Janoff-Bulman 的自責歸因理論，但是後者的結果與其理論不符。(三)探索性的迴歸分析發現無助感和個性自責均可顯著預測憂鬱的傾向，且各自均有 5 % 的獨特的解釋變異量。然而，行為自責所能解釋憂鬱的部分則微乎其微。此外，憂鬱和個性自責均可顯著預測無助感，其獨特的解釋變異量分別是 5 % 和 4 %。然而，行為自責在獨立解釋無助感的變異量也十分微小。(四)本研究的結果支持個性自責、無助感與憂鬱的關係，但並未發現行為自責獨立存在的事實，需要再作進一步的研究探討。最後，研究者根據上述研究結果、研究限制、輔導之應用和未來研究的方向等四方面，進行進一步的討論並提出建議，以供未來研究之參考。

