The Relationship Between Guilt, Shame And Self-Efficacy Beliefs In Middle School Students
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Abstract

The perception of the self is one of the fundamental constructs in the psychology of personality together with shame, guilt and self-efficacy, one's perception of ability to influence a situation. This study investigated the possible link between the psychological components of guilt and shame and the self-efficacy beliefs. 228 middle school students, aged between 12 and 13 years, were administered the Test of Self-Conscious Affect (TOSCA), the Self-Efficacy in Interpersonal and Social Communication Scale (SEISC) and the Self-Regulatory Self-Efficacy Scale (SRE). Females scored significantly higher than males on guilt proneness and on SEISC. Guilt resulted positively and significantly associated with SEISC and SRE. Results suggest that guilt-prone individuals perceive themselves as capable of managing interpersonal relationships in a proper way and are able to resist negative peer pressure.

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Keywords: Shame; Guilt; Self-efficacy;

1. Introduction

The study of shame and guilt is a fundamental part of the psychology of the self-conscious emotions. Shame is often confused with guilt. Guilt is described as an unpleasant emotion characterized by beliefs that one should have felt, thought, or acted in a different way (Kubany & Watson, 2003). The guilt feeling concerns a particular behaviour committed by the individual and is oriented outward. Shame is defined, instead, as a social emotion accompanied by a global negative evaluation of the whole self (Tangney, 1996). As many other negative social

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emotions, feelings of shame may arise from insecure attachment styles (Pace & Zappulla, 2013; Schimmenti, 2012; Pace, Madonia, Passanisi, Iacolino & Di Maggio, 2015) and abuse (Schimmenti, Passanisi & Caretti, 2014; Schimmenti, Di Carlo, Passanisi & Caretti, 2014). Thus, shame-prone individuals generally have dysfunctional attachment attitudes, low self-esteem (Schimmenti, Passanisi, Gervasi, Manzella, & Fama, 2014; Schimmenti, Passanisi, Pace, Manzella, Di Carlo & Caretti, 2014), and self and others concepts based on unrealistic contexts (Hampton, Passanisi & Jonsson, 2011). Shame may arise from both moral transgressions and non moral situations (i.e. feelings of inferiority), whereas guilt mainly results from moral actions (Ferguson & Stegge, 1995). Reactions to guilt and shame feelings may also differ. Many scholars support the adaptive nature of guilt. Guilt feelings operate as a reparative function for the individual, by leading him/her to apology, confess (Bybee & Quiles, 1998; Niedenthal, Tangney & Gavanski, 1994), and show empathic responsiveness (Tangney, 1991). Shame does not have any adaptive function and is related to psychological maladjustment, resentment, irritability, distress reactions, suspiciousness, anger and externalization (Tangney, Wagner, Fletcher, & Gramzow, 1992). However, both shame and guilt involve self-blame and are closely linked to our perceptions of self (Baldwin, Baldwin & Ewald, 2006). As shame and guilt, self-efficacy, the people's sense of being able to take control over their actions and outcomes, affects the way in which the individual interprets and interacts with the surrounding environment. Basically, guilt, shame and self-efficacy impact our reactions to and interactions with others, are centrally related to the concept of self and require a person to have a sense of self. Bandura (1997) argues that self-efficacy is the most powerful means of agency that affects an individual's psychological functioning. Agency is the capacity of a person to act intentionally in a world. Perceived self-efficacy “refers to beliefs in one's capabilities to organize and execute the courses of action required to produce given attainments" (Bandura, 1997, p. 3). According to Bandura (1997), self-efficacy development is influenced by families, biological changes, peers, and environmental requests. Although much studies have been carried on the constructs of shame, guilt and self-efficacy independently, unexpectedly little research is available on the correlation between these concepts. This study aimed at determining whether these constructs are related.

2. Purpose of study

The present study makes the following hypotheses: individuals who score high on shame-proneness would demonstrate a lower score on the self-efficacy scales. In contrast, people who score high on guilt-proneness would report a higher score on the self-efficacy scales.

3. Method

3.1. Participants

The study was conducted on a group of 228 students (116 males, 112 females), between the ages of 12 and 13, recruited from two middle schools in Catania (Italy). Participants were administered three self-report measures during their school lessons: the Test of Self-Conscious Affect (TOSCA; Tangney, Wagner, & Gramzow, 1989); the Self-Efficacy in Interpersonal and Social Communication Scale (SEISC; Caprara, 2001); The Self-Regulatory Self-Efficacy Scale (SRE; Caprara, 2001).

3.2. Measures

The TOSCA (Tangney, Wagner, & Gramzow, 1989) consists of 15 brief scenarios (10 negative and 5 positive), followed by affective, cognitive, and behavioural four or five responses, each rated on a five-point scale, measuring shame-proneness (SP) and guilt-proneness (GP), externalization (of blame; E), detachment/unconcern (D), alpha-pride (pride in self; AP) and beta-pride (in behaviour; BP).

The self-efficacy in interpersonal and social communication scale (SEISC; Caprara, 2001) consists of 19 items measuring self-efficacy in communication. A 7-point Likert scale was used to respond to each item ranging from 1 (not able at all) to 7 (very able).
The Self-Regulatory Self-Efficacy Scale (SRE; Caprara, 2001) is a 12-item, Likert format instrument designed to measure self-regulatory self-efficacy (i.e. the resistance to peer pressure for transgressive activities). A 4-point Likert scale was used to respond to each item ranging from 1 (not able at all) to 4 (very able).

4. Results

An analysis of variance (ANOVA) was run within subjects with the independent variable of gender (male or female). We found significant differences between males and females: the latter reported higher scores on guilt-proneness (F=20.19, p<.001) and on SEISC (F=10.14, p<.005), (see Table 1).

| Table 1. Differences in TOSCA's factors, SEISC and SRE in relation to gender |
|---------------------------------|-----------------|-----------------|
|                                  | M (SD)          | M (SD)          |
| SP                               | 36.33 7.47      | 37.88 8.14      |
| GP                               | 55.53 8.11      | 60.29 7.85      |
| E                                | 37.56 8.24      | 36.67 8.19      |
| AP                               | 17.91 3.26      | 17.68 3.61      |
| BP                               | 18.28 3.28      | 18.29 3.23      |
| D                                 | 32.12 5.78      | 31.28 5.79      |
| SEISC                            | 91.35 13.99     | 97.13 13.39     |
| SRE                              | 19.61 3.81      | 19.87 4.23      |

For the overall sample guilt-proneness was positively associated with SEISC (r=.22; p<.01) and SRE (r=.24; p<.01), which means that guilt-prone people feel they can handle interpersonal relationships in an appropriate manner. The Externalization factor was in negative relationship with the SRE (r = -.13, p <.05). This suggests that the more people tend to praise or blame external factors, the less they feel self-efficient in managing the transgressive pressure arising from the peer group. Finally, both the AP (r = .18, p<.01) and BP (r = .17, p <.01) factors were in positive relation with SEISC (see Table 2). This result means that the more individuals have a positive self-image, both at a general level or resulting from a specific behavior, the more they perceive themselves able to relate with others in a participatory and constructive way.

| Table 2. Correlation between TOSCA's factors, SEISC and SRE |
|---------------------------------|------|------|------|------|------|------|------|
|                                  | 1    | 2    | 3    | 4    | 5    | 6    | 7    |
| 1. SP                            |      |      |      |      |      |      |      |
| 2. GP                            | .30**|      |      |      |      |      |      |
| 3. E                             | .31**| -.09 |      |      |      |      |      |
| 4. AP                            | .04  | -.07 | .23**|      |      |      |      |
| 5. BP                            | .01  | .03  | .22**| .61**|      |      |      |
| 6. D                             | -.07 | -.13*| .35**| .41**| .37**|      |      |
| 7. SEISC                         | .05  | .22**| -.04 | .18**| .17**| -.01 |      |
| 8. SRE                           | .07  | .24**| -.13*| -.03 | .03  | -.04 | .36**|

Note: N = 228. Pearson’s r correlations; ** p<.01; * p<.05.
5. Discussion and Conclusions

In this study males reported a lower propensity for guilt than females. Boys are not socialized for interpersonal sensitivity, but are supported in their efforts for independence. In this manner, they develop a higher threshold of connectedness to others’ feelings, and consequently may not always be conscious of the effect of their behaviour on others. Without a more sensitive internalized mechanism to make them aware of the potential for guilt and shame consequences, boys more often find themselves in situations that induce actual guilt. In contrast, girls reported a higher propensity for guilt than boys did. According to Tangney (1991) guilt is primarily an interpersonal emotion, close related to the ability to empathize. Women are primed for interpersonal connection and awareness of others’ emotional states. Girls, more than boys, make amends with friends, and put themselves in the service of others. Thus, girls are consciously aware of the effects of their actions on others and this may prevent them from committing a guilt-inducing act (Benetti-McQuoid & Bursik, 2005). This gender difference is interesting because girls, more than boys, are at a greater risk of moral nature disorders such as eating and psychosomatic disorders (Granieri & Schimmenti, 2014; Leanza, Passanisi, & Leanza, 2013; Passanisi, Leanza, & Leanza, 2013), in which feelings of guilt are often evident.

In the present study, participants' scores for guilt and self-efficacy were significantly correlated. Whether the relationship between self-efficacy and guilt is causal, bidirectional, or influenced by an outside factor remains to be investigated. Tangney and Dearing (2002) argue that guilt is focused mainly on the object. Bandura (1997) theorizes self-efficacy as domain specific; therefore, it would be expected that guilt and self-efficacy would be more closely linked than shame and self-efficacy.

Finally, this study suggests a new direction of treating dysfunctional attitudes, as externalization, through the improvement of self-efficacy. If the two are related, it is reasonable that improving the individual’s self-efficacy, the externalization of locus of control may turn into cognitive agency. Interventions aimed at boosting self-efficacy by itself may, of course, be beneficial in the educative context. According to Bandura (1997) the methods used to improve a person's self-efficacy involve the use of vicarious and mastery experiences, verbal persuasion and improvement of self-efficacy. If the two are related, it is reasonable that improving the individual’s self-efficacy, the externalization of locus of control may turn into cognitive agency. Interventions aimed at boosting self-efficacy by itself may, of course, be beneficial in the educative context.

References


