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ABSTRACT

Recent research has demonstrated that self-cognitions can play an important role in physical and emotional well-being. One important aspect of self-cognition concerns the complexity of self-representations. This study tested the hypothesis that self-complexity, as assessed by Linville's self-trait sorting task, would moderate the effects of positive and negative daily events on the perceived quality of life in undergraduate subjects (N=163). It was expected that as self-complexity increased the positive effect of positive daily events and the negative effect of negative daily events on perceived quality of life would decrease. Results revealed that although both positive and negative daily events influenced perceived quality of life scores, these scores were not influenced by the interaction between self-complexity and daily events. These findings suggest that, when major life events occur, high self-complexity short-circuits the spread of negative affect through the self-structure, but, on a daily basis, it creates a demand to juggle multiple self-aspects. Future research should investigate whether self-complexity is more likely to interact with major, as opposed to daily, events. (ABL)

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Self-Complexity

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Self-Complexity, Daily Events, and
Perceived Quality of Life

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Abstract

This study tested the hypothesis that self-complexity, as assessed by Linville's (1985) self-trait sorting task, would moderate the effects of positive and negative daily events on the perceived quality of life of 163 undergraduates. Specifically, we expected that, as self-complexity increases, the positive effect of positive daily events and the negative effect of negative daily events on perceived quality of life would decrease. Results revealed that although both positive and negative daily events influenced perceived quality of life scores, these scores were not influenced by the interaction between self-complexity and daily events.

Self-Complexity, Daily Events, and
Perceived Quality of Life

Recent research has demonstrated that self-cognitions can play an important role in physical and emotional well-being (Linville, 1985). One important aspect of self-cognition concerns the complexity of self-representations. According to Linville (1987), self-complexity refers to whether the cognitive organization of self-knowledge entails few or many self-aspects, and whether the features of these self-aspects overlap to a small or large extent. Linville (1987) found that, under high levels of stress, college students higher in self-complexity were less prone to depression and physical health symptoms than students lower in self-complexity.

In interpreting the buffering effect that self-complexity plays in reducing the inimical effects of stress, Linville (1987) discussed a spillover process. For example, when an examination is failed, presumably the negative thoughts and feelings tend to become tagged with the most relevant self-aspect, i.e., "student." In addition, the negative effects and cognitions may spillover to related self-aspects, e.g., "worker." Because greater self-complexity involves having self-aspects that are more distinct from one another, spillover is posited to decrease as self-complexity increases. In turn, by localizing the distress

associated with negative events, individuals high in self-complexity are resistant to depression and physical health symptoms under conditions of high stress.

Recently, researchers have suggested a booster effect around positive life events that may be a counterpoint to the buffer effect observed in relation to negative life events (Okun, Sandler, & Baumann, in press). If the spillover process is symmetrical for positive and negative events, then because self-complexity is inversely related to spillover, individuals high in self-complexity should benefit less than individuals low in self-complexity from positive events.

The present study examined the main and interactive effects of positive daily events (PDE), negative daily events (NDE), and self-complexity (SC) on the perceived quality of life (PQOL) of college students. We selected PQOL as the criterion variable because previous research has established that PDE and NDE make independent contributions to its prediction (Zautra & Reich, 1983). We hypothesized that: (a) PDE will have a positive effect; (b) NDE will have a negative effect; (c) the positive effect of PDE will decrease as SC increases; and (d) the negative effect of NDE will decrease as SC increases.

Method

Subjects

One hundred sixty-three caucasian students enrolled in undergraduate classes in educational psychology at a major midwestern university received class credit for their participation in the study. Eighty-four percent of the sample were women. The mean age of the subjects was 21.62 years.

Measures

Self-complexity measure. SC was measured via the self-trait sorting task developed by Linville (1985, 1987). Since Linville noted that four adjectives were rarely used by subjects, a pilot study was first conducted to replace them. Ten graduate students were instructed to generate several self-descriptive adjectives with "negative" connotations. A list of these adjectives was compiled. The same graduate students were then instructed to rate the extent to which they viewed those adjectives as characteristic of themselves (1 = "not characteristic at all," 5 = "very characteristic"). The four highest-rated adjectives, "retrospective," "self-conscious," "critical," and "stubborn" were then added to the sorting task. (The mean values for these adjectives were 4.65, 4.12, 4.00, and 3.82, respectively.)

Following Linville (1987), subjects were given 33 index cards, each containing the name of one trait, and two recording sheets.

Subjects were instructed to form groups of traits that went together, where each group of traits described an aspect of the subject or his/her life. Subjects were given unlimited time to complete this task.

SC scores were calculated for each subject based upon the feature sort using the formula: $SC = \log_2 n - (\sum_i n_i \log_2 n_i) / n$, where n was the total number of features (33) and n_i was the number of features in a particular group combination (Linville, 1987). In the present study, scores ranged from 2.63 to 5.04, with a mean value of 3.92 ($SD = .63$).

Daily life events scale. Positive and negative daily events were assessed using an abridged version of the Inventory of Small Life Events (Zautra, Guarnaccia, & Dohrenwend, 1986). Our version comprised 138 events (64 positive and 74 negative events) covering the following 12 life areas: school, recreation, religion, money/finance, transportation, children, household/residence, relations with family, love/marriage, crime/legal matters, social life, and work.

Subjects were instructed to indicate whether or not each event had happened to them during the past month. The total number of positive and negative events checked were summed separately to provide two scores for each subject. The mean score for PDE was

25.91 ($SD=6.81$), whereas the mean score for NDE was 16.59 ($SD=6.80$).

Perceived quality of life An abridged, 12-item version of the Andrews and Withey (1976) scale was used to assess PQOL. Subjects were asked to rate on a scale of 1 to 7 (1="terrible," 4="mixed," and 7="delightful") how they felt about each of the following 12 life concerns: health, finances, family relations, paid employment, friendships, housing, living partners, recreation, religion, self-esteem, transportation, and education. The item mean score on the scale was 5.04 ($SD=.65$).

Results

To test our hypotheses concerning the main and interactive effects of PDE, NDE, and SC, PQOL scores were regressed on SC, PDE, NDE, and the multiplicative interactions of SC with PDE and SC with NDE. The full model yielded an R square of .21 ($F(5, 157) = 8.39$, $p < .001$). A partial F -test on the net contribution of the two interaction terms above and beyond the main effects of PDE, NDE, and SC yielded a nonsignificant increment in R square ($F(3, 159) = 1.85$, $p > .10$), indicating that the full model did not explain a significantly greater amount of variance in PQOL scores than the main effects model. Therefore the main effects model, which yielded an R square of .19, was retained ($F(3, 159) = 12.62$, $p < .001$). The standardized regression coefficients in this model for

SC, PDE, and NDE were $-.17$, $.44$, and $-.38$, respectively (highest $p < .02$).

Discussion

Consistent with our predictions, both PDE (positively) and NDE (negatively) influenced PQOL. However, contrary to our hypotheses, PQOL scores were not predicted by the SC by daily events interactions. One possible explanation concerns the type of events assessed in the present study. Presumably, when daily events occur, the feelings tagged with the most relevant self-aspect are moderate in their intensity. Perhaps the spillover process to other self-aspects is activated only when the feelings elicited by the events are strong. In this regard, it is worth noting that the life event measure used by Linville (1987) included a mix of daily and major events. Future research should investigate whether SC is more likely to interact with major, as opposed to daily, events.

The counseling implications with respect to daily events are relatively straightforward. Counseling interventions designed to enhance PQOL can focus on decreasing NDE, increasing PDE, or both (Lewinsohn, 1974). In particular, helping clients to take responsibility for initiating and carrying out PDE can foster PQOL (Reich & Zautra, 1981).

The counseling implications with respect to promoting SC are less straightforward. On the one hand, SC may be an asset when

individuals experience a major negative event (Linville, 1987). SC theory (Linville, 1985) suggests that counselors can help clients experiencing major negative events by encouraging them to localize their negative feelings and to focus on other self-aspects about which they have positive feelings. On the other hand, SC appears to be liability when individuals are not experiencing major negative events. Linville (1987) found that, under low levels of stress, SC was positively related to depression and physical health symptoms. Similarly, we found that SC was inversely related to PQOL. Perhaps having a large number of distinct self-aspects creates chronic role conflicts that can diminish subjective well-being. If this is so, high self-complexity is a mixed blessing. When major life events occur, high self-complexity short-circuits the spread of negative affect through the self structure but, on a daily basis, it creates a demand to juggle multiple self-aspects.

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