

# “SELF-CONTROL” CONCERNS FOR MEN AND WOMEN: REFINEMENT AND EXTENSION OF A CONSTRUCT

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This study develops and refines aspects of the construct of self-control according to a four-quadrant model: Assertive-positive, assertive-negative, yielding-positive, and yielding-negative. Twenty-six men and 78 women evaluated areas of their life in terms of the perceived degree to which they utilized these various dimensions of control. Results indicated that, depending on the specific area of clinical concern (e.g., interpersonal relationships, professional pursuits, emotional expression, health), there were significant differences in the kinds of self-control strategies that Ss tended to employ. From a clinical perspective, while Ss in this sample exercised a high degree of assertive-positive control in their professional lives, in the interpersonal and affective spheres they perceived themselves to be more out of control and exercising more negative-assertive control.

The past decade and a half has seen a marked rise in the number of empirical investigations devoted to the clinical and health care uses of self-control strategies. These techniques, loosely subsumed under the label “self-control strategies,” include, but are not limited to, behavioral self-management, meditation, biofeedback, self-hypnosis, guided daydreams, imagery and cognitive therapies (Beck, 1976; Ellis, 1962; Fromm, 1955; Fuller, 1978; Kanfer, 1977; Mahoney & Arnkoff, 1979; Shapiro, 1980; Shapiro, 1975; Kamiya, Barber, Miller, & Schwartz, 1980; Shapiro & Zifferblatt, 1976; Singer, 1975; Thoresen & Mahoney, 1974). The research is relatively convincing that these techniques are more effective than a placebo control for a variety of affective and physical disorders.

In psychotherapy, self-management strategies have been used successfully to treat a variety of client problems including obesity (Cooke & Meyers, 1980), smoking (Best, 1980), depression (Davidson, 1976), obsessive thoughts (Melamed & Siegel, 1975), anxiety (Meichenbaum, 1977), and family conflict (Shapiro, 1981). In all cases, the client is trained to self-administer a program of assessment and intervention procedures (Marlatt & Gordon, 1980). More recently, the concept of behavioral medicine has achieved prominence, and the applications of self-control procedures to medical settings have received increased attention. Self-control strategies commonly are viewed as an adjunct to drug therapy and other traditional medical interventions. In this context, the practice of self-control procedure involves transferring control of the disorder from the drug to the client (Bakal, 1979). Hypertension (Blanchard & Young, 1973), alcoholism (Strickler, Lowel, Lawrence, & Liebson, 1976), drug abuse (McNamara, 1979), and insomnia (Loates & Thoreson, 1979) have been among the clinical problems treated, in part, with behavioral self-management strategies.

However, despite this flourishing of the field, research in the area currently has hit a plateau. Recent studies have been unable to differentiate between the clinical effectiveness of various self-control strategies for a particular clinical problem (Raskin, Bali, Peeke, 1980; Shapiro, 1982a; Zuroff & Schwartz, 1980). Thus, we have suggested the need for a broad-based reassessment in order to make this “plateau” temporary and to be able to match more precisely self-control strategy to a particular person with a par-

clinical use of a self-control strategy. These efforts have been reported elsewhere (Shapiro & Shapiro, 1979; Shapiro, Note 1).

A second direction, and one with which this article is concerned, is to begin to address the question of what exactly is "self-control." Even a cursory review of the literature suggests that the term frequently is used to mean different things and lacks uniform cohesion across or within groups of researchers, clinicians, and lay individuals. Thus, we need more precision with regard to control in general and self-control in particular. To this end, we have evolved a broad-based construct of self-control, developed an axiomatic therapy and postulates related to the construct, and suggested the multiple levels from the body through the spiritual upon which this concept and theory may operate. Because these have been reported elsewhere (Shapiro, 1982b) we will add only a few sentences here. Our intent is to determine whether different types of "control" are more effective at different "levels" of reality and in different situations. In order to determine this, we need to understand whether the construct of "control" has different meanings depending upon the situation.

#### Elaboration of a Control Construct

To begin to deal with some of these issues, previous exploratory effort has attempted to develop a four-quadrant construct of self-control based initially on contrast between eastern and western psychologies. Eastern views of self-control generally have involved yielding, acceptance, letting go, and nonattachment, whereas western views of self-control generally involve assertiveness, goal-orientedness, productivity, and instrumentality. (Gilgen & Cho, 1979; Goldman & Epstein, 1982; Shapiro, 1978; Walsh, 1980). Because this model has been described elsewhere (Shapiro, 1982b), it is mentioned only briefly here and illustrated in Table 1.

TABLE 1  
A Four-quadrant Model of Self-control

Quadrant 1	Quadrant 2
Positive	Positive
Assertive	Yielding
Quadrant 3	Quadrant 4
Negative	Negative
Assertive	Yielding
(Overcontrol)	(Too Little Control)

Quadrant One (based on stereotypically western modes of self-control) reflects a goal-oriented, self-starting, initiating mode called positive assertive; Quadrant Two (based on stereotypically eastern modes of self-control) reflects a yielding, accepting, letting go, compassionate mode called positive yielding. The two negative quadrants of the model are Quadrant Three, negative assertive, which involves aggressiveness, overcontrolling, selfishness, and rigidity; and Quadrant Four, negative yielding, which involves passivity, timidity, and following.

Preliminary efforts (Shapiro, Peper, Harr, & Carrere, Note 2) suggest that these quadrants have a certain overlap with the literature on male and female sex-role psychology, both in terms of socially desirable qualities (Bem, 1974, 1981; Lubinski, Tellegen, & Butcher, 1981; Spence, Helmreich, & Stapp, 1975) and socially undesirable qualities (Holahan & Spence, 1980). Further, Quadrant Three, negative assertive, appears to have an overlap with the profile of the Type A person (Brunson & Matthews, 1981; Friedman & Rosenman, 1974; Vickers, Hervig, Rahe, & Rosenman, 1981).

#### Multiple Levels

A second model developed was a multilevel one by which reality might be defined. These levels, as discussed at length elsewhere, are overlapping and from a reciprocal and omni-determinism view do influence each other. However, for heuristic and research purposes, the divisions seem useful. These levels include the *body level* (covert sensations, psychological cues, reflexes, health issues, overt behavior, lifestyle); the *"mind" level*, which is subdivided further into cognitions, images, attention, and affect (affect is included under mind, even though it is defined as the interaction of physiological cues and the labels one attaches to these); the *ego or self level*; the *intimacy level* (including adult intimacy, family, interpersonal relationships), the *professional level*; the *socioeconomic level*; and the *spiritual level*. These levels may form the content, or they may function as context, i.e., the framework for all the others. For example, with body as context, the mind as content may be in service of the body's health. With mind as context, a calm body (content) may be used in service of calming the mind.

#### Purpose of this Study

In our language, self-control has a variety of meanings, not all of which may be positive. One purpose of this study was to attempt to approximate linguistically the four quadrants discussed above. Because the quadrants are designed to represent self-control cross-culturally, it was important to see how accurate a meaning they could convey to a western audience. To this end, we generated words that we thought might be representative of the four quadrants. *High self-control* was intended to be positive and represent Quadrant One; *too much self-control* was intended to be negative and represent Quadrant Three; *low self-control* was intended to be positive and represent Quadrant Two; *too little self-control* was intended to be negative and to represent Quadrant Four (See Table 1). Our model suggests that at times it may be in the individual's best interest to be able to give up active control, rather than to exert active control. Whereas in the West, control implies *active* control: power or mastery, in the East it may be associated equally well with yielding control: accepting and letting go (Shapiro, 1978; Shapiro, 1982b).

However, the term "low self-control" did not seem to have a wholly positive connotation to convey this meaning, and so we added the phrase "able to give up control," to represent Quadrant Two, in the sense of ability to give up active control (the control of being able to let go). The choosing to give up active control is an accepting action; in our model, "yielding control." Although this concept of self-control as acceptance is quite

TABLE 2  
Relationship of Questions Addressed to Individuals at the Workshop  
to the Four-quadrant Model

High Self-control	Able to give up control
List 3 areas of your life in which you feel you exhibit a high degree of self-control.	List 3 situations in your life in which you are able to "give-up" self-control, i.e., to yield, be spontaneous more accepting.
Quadrant 1	Quadrant 2
Too much Self-control	Too Little Self-control
List 3 areas of your life in which you feel you exercise too much self-control.	List 3 areas of your life in which you feel you exercise too little self-control.
Quadrant 3	Quadrant 4

well-understood and used in the East, we thought it might be difficult for western individuals, so we labeled it "ability to give up control" rather than yielding self-control.

In our model, Quadrants Three and Four represent different ways in which people can be out of control. Therefore, we also asked individuals when or around what issues they felt "out of control."

In addition, given our axiomatic model, one of our postulates is that "people need to feel in control." Therefore, we thought that it might be easier for some individuals to say what they feared losing control over, rather than when they were out of control. Fear of losing control was added as a complementary question to "out of control" as a way of possibly understanding how people respond to this potential fear (i.e., develop very rigid control needs) and also to give some indication of affect level associated with a given area.

In addition to these definitional issues, the study had two further purposes. First, we wanted to see whether the control areas expressed fell into any regular pattern in terms of the multiple levels of reality we had posited. Second, we wanted to assess sex differences in terms of self-control areas of concern. We felt it was possible on a clinical level that men and women might exhibit somewhat different emphases in the kinds of self-control concerns they expressed, or in the priorities they placed on various aspects of their lives as these interfaced with issues of self-control. So this final question dealt with identifying any sex differences to emerge between men and women in terms of self-reported areas of self-control concern.

Thus, in summary, we wanted to understand better how a group of educated lay people saw self-control as operating in their lives. We then wanted to become more precise about this concept of self-control and, specifically, to address whether Ss would be able to identify in their own lives areas in which they exercised too much or too little self-control, high or low self-control, to look generally at times when they might feel out of control in a negative sense, and situations in which they feared losing control. In this way we felt that we could begin to be more precise about self-control. We suggest that it is not a unitary concept and that different types of self-control may be operative in different situations depending upon the content level of reality on which one was dealing and the context level of reality from which one was operating.

#### METHOD

##### *Subjects and Setting*

A one-page worksheet was distributed to 35 men and 85 women who were participating in a workshop on self-control skills conducted by the authors. Twenty-six men and 78 women returned the worksheets, for an overall response rate of 86.6%. The mean age of the male respondents was 40.0 years, while the mean age of the females was 37.9 years. Approximately equal percentages of men and women were married, single, separated, or divorced (see Table 3). The group was highly educated; 62.9% of the women and 61.5% of the men held either a B.A., M.A., or Ph.D. degree. Almost a quarter of both male and female respondents were unemployed, while 57.2% of the women and 46.2% of the men held professional and highly skilled professional jobs.

##### *The Worksheet*

The worksheet began with a 5-point Likert-type scale on which Ss rated their overall perceived level of self-control. They then were asked to list three aspects of their lives that they felt were of most concern to them in each of the following seven specific areas: (a) high self-control (Quadrant One); (b) too much self-control (Quadrant Three); (c) low self-control (Quadrant Two); (d) able to give up control (Quadrant Two); (e) too little self-control (Quadrant Four); (f) out of control (Quadrants Three and Four); (g) afraid of losing control.

#### RESULTS

##### *Groupings of Data*

Because of the heuristic methodology employed in this study, for the seven open-ended questions, Ss could generate a virtually infinite quantity of words. Therefore, it was decided to examine in detail only those words that were endorsed by at least 15% of either male or female Ss. All words generated by Ss were coded by a research assistant into a 59-item schema, which reflected various levels of reality. In the body level were items such as eating, athletics, and illness. In the intimate sphere were items such as family, intimate, and interpersonal relations. In the cognitive and affective spheres were items such as vulnerability, fear, loneliness, independence, anger, spontaneity, and expressing emotions. Accordingly, frequencies were obtained for all words listed in the seven categories described earlier. Because of the ambiguity in the term "low self-control," this category subsequently was dropped from the analyses. Results will be reported both in terms of the six self-control categories and in terms of male and female profiles of various aspects of their personal and professional lives in relation to self-control.

##### *Importance of Self-control and Assessment of Perceived Levels of Self-control*

When asked to rate the importance of having self-control on a scale of 1-5 (5 = highly important), the median score for men was 3.7 ( $N = 25$ ) and for women was 3.8 ( $N = 78$ ). Both male and female respondents then rated their own perceived levels of self-control on a similar Likert-type scale, with median scores of 3.9 and 4.0, respectively. A Mann-Whitney U test showed no significant differences between men and women on either of these two scales.

From the above we can see that our sample felt that self-control was an important quality and that they all had relatively high levels of self-control. The next set of questions tried to define more specifically this concept of self-control and the areas in which Ss did/did not perceive themselves as having it. These are summarized below and reflected in Table 3.

##### *High Self-control (Scale One: Assertive/Active-positive)*

Fifty-one percent of the women and 60% of the men reported that they exercised high self-control in the area of achieving goals. Twenty-eight percent of the women and 40% of the men felt that they exercised high self-control in interpersonal areas. Twenty-eight percent of the men also felt that they exercised high self-control in terms of fulfilling their responsibilities (as compared to 11.7% of women), and 20% felt that they had high self-control in their family and professional lives (as compared to 15.6% and 16.9% of women).

##### *Able to Give Up Control (Scale Two: Yielding-positive)*

Women felt most able to give up control in the areas of intimate/interpersonal relations (49.2%) and sex (22.2%). Men also felt able to give up control in their intimate/interpersonal relationships (43.8%), in their emotional expression (18.8%), and of their anger (18.8%). Only 6.3% of male respondents felt able to give up control in the area of sex.

##### *Too Much Self-control (Scale Three: Assertive/Active-negative)*

Twenty-eight percent of the women felt that they were too self-controlled in terms of their emotional expression, while 21.1% of male respondents identified this concern for themselves. Interpersonal relations, verbal expression, anger, and sex each were listed by 15.0% of female respondents as being areas in which they exercised too much self-control. Fifty-two percent of the men felt that they also had too much self-control in interpersonal/intimate relations, while 15.8% each mentioned sex and anger as areas of too much self-control.

Too Little Self-control (Scale Four: Passive-negative)

The greatest number of women respondents agreed that they had too little self-control in the area of eating (38.2%). Other areas of concern were health (21.8%) and time management (16.4%). Sixteen percent of men also mentioned eating as an area of too little self-control. Health was mentioned by 27.8% of male respondents, time management by 16.7%, and family and achieving goals each were mentioned by 22.2%.

Out of Control (Scales Three and Four)

Thirty-one percent of the women felt out of control of their anger, and this was also reflected in the men (28.6%). The same percentage of males also felt out of control in

TABLE 3  
Percentage of S Responses by Sex in Seven Categories of Self-control Concerns

Self-control		Women (N = 77) (%)		Men (N = 25) (%)	
Scale One Active-Positive	High Self-control	Achieving Goals	51.9	Achieving Goals	60.0
		Interpersonal/Intimate	28.6	Interpersonal/Intimate	40.0
		Professional Life	16.9	Fulfilling Responsibilities	28.0
		Family	15.6	Family	20.0
				Professional Life	20.0
Scale Two Yielding-Positive	Able to Give Up Control	Women (N = 63)		Men (N = 16)	
		Interpersonal/Intimate	49.2	Interpersonal/Intimate	43.8
		Sex	22.2	Emotional Expression	18.8
				Anger	18.8
Scale Three Active-Negative	Too Much Self-control	Women (N = 60)		Men (N = 19)	
		Emotional Expression	28.3	Interpersonal/Intimate	52.9
		Interpersonal/Intimate	15.0	Emotional Expression	21.1
		Verbal Expression	15.0	Anger	15.8
		Anger	15.0	Sex	15.8
		Sex	15.0		
Scale Four Yielding-Negative	Too Little Self-control	Women (N = 55)		Men (N = 18)	
		Eating	38.2	Health	27.8
		Health	21.8	Family	22.2
		Time Management	16.4	Achieving Goals	22.2
				Time Management	16.7
		Eating	16.7		
Scales Three and Four	Out of Control	Women (N = 69)		Men (N = 21)	
		Anger	31.9	Anger	28.6
		Interpersonal/Intimate	18.8	Interpersonal/Intimate	28.6
		Health	19.0	Sex	19.0
		Family	15.9		
Related to Scales Three and Four	Fear of Losing Control	Women (N = 58)		Men (N = 16)	
		Interpersonal/Intimate	25.1	Anger	43.8
		Anger	24.1	Interpersonal/Intimate	18.8

TABLE 4  
Multidimensional Profile of Female Respondents According to Areas of Self-control Concern (N = 77)

Area	Quadrant One High Self-control (%)	Quadrant Two Able to Give Up Control (%)	Quadrant Three Too Much Self-control (%)	Quadrant Four Too Little Self-control (%)	Quadrants Three and Four Out of Control (%)	Fear of Losing Control (%)
Spiritual	10.7	4.8	0	0	2.9	3.4
Self	7.8	12.7	13.3	5.5	10.1	5.2
Interpersonal/Intimate**	33.8	49.2	23.3	18.1	42.9	27.5
Family	15.6	4.8	13.3	5.5	15.9	5.2
Achieving Goals	51.9	6.3	11.7	3.6	1.4	8.6
Fulfilling Responsibilities*	11.7	0	6.7	5.5	1.4	0
Professional Life	16.9	3.2	5.0	0	2.9	0
Emotional Expression*	9.1	14.3	28.3	7.3	7.2	6.9
Anger	11.7	4.8	15.0	10.9	31.9	29.1
Health****	13.0	1.6	0	21.8	19.5	5.2
Eating****	7.8	0	1.7	38.2	11.6	1.7
Sex***	5.2	22.2	15.0	1.8	2.9	5.2

\*Significant differences between endorsements of the four self-control quadrants at the .05 level were found on this dimension for female and male Ss combined, as described in the text.

\*\*Significant differences between endorsements of the four self-control quadrants at the .02 level were found on this dimension for both female Ss and for male and female Ss combined, as directed in the text.

\*\*\*Significant differences at the .01 level were found for male and female Ss combined as described in the text.

\*\*\*\*Significant differences between endorsements of the four self-control quadrants at the .001 level were found on this dimension for female Ss or for male and female Ss combined, as described in the text.

TABLE 5  
Multidimensional Profile of Male Respondents According to Area of Self-control Concern (N = 25)

Area	Quadrant One High Self- control (%)	Quadrant Two Able to Give Up Control (%)	Quadrant Three Too Much Self-control (%)	Quadrant Four Too Little Self-control (%)	Quadrants Three and Four Out of Control (%)	Fear of Losing Control (%)
Spiritual	8.0	12.5	0	0	0	0
Self	8.0	0	5.3	5.6	4.8	6.3
Interpersonal/Intimate	40.0	43.8	52.6	22.2	38.1	25.1
Family	20.0	6.3	10.5	22.2	0	6.3
Achieving Goals**	60.0	6.3	5.3	22.2	0	6.3
Fulfilling Responsibilities*	28.0	6.3	0	0	0	0
Professional Life	20.0	6.3	0	0	0	6.3
Emotional Expression	8.0	18.8	21.1	5.6	9.5	6.3
Anger	8.0	18.8	15.8	5.6	28.6	43.8
Health*	8.0	0	0	27.8	0	12.5
Eating	4.0	0	0	16.7	4.8	12.5
Sex	8.0	6.3	15.8	5.6	19.0	0

\*Significant differences between endorsements of the four self-control quadrants at the .05 level were found on this dimension for male Ss or for male and female Ss combined, as described in the text.

\*\*Significant differences between endorsements of the four self-control quadrants at the .01 level were found on this dimension for both male Ss and male and female Ss combined, as described in the text.

their interpersonal relationships (as compared to 18.8% of the women). Nineteen percent of the men felt out of control of their sexual lives, while only 2.9% of the women agreed with this for themselves.

#### Fear of Losing Control

Women most feared losing control in terms of their intimate/interpersonal relationships (25.1%) and in terms of their anger (24.1%). While a few men feared losing control of their intimate relationships (6.3%), a large number of men (43.8%) were afraid of losing control of their own anger. While only 3.4% of the women feared losing control in their intimate/interpersonal relationships, 18.8% of the men shared this fear.

#### The Relationship of Multilevels of Reality to the Four Quadrants

It is possible to construct a profile of an individual that considers variously the person's spiritual, personal, interpersonal and familial, professional, emotional, sexual, and health-related dimensions. The following results compare male and female respondent profiles along these dimensions. (These results are summarized in Tables 4 and 5.)

**Spiritual.** Spiritual aspects of life did not seem to relate to self-control issues in the minds of most respondents. Ten percent of women and 8% of men listed this as an area of high (Quadrant 1) self-control, while 12.5% of males and 4.8% of females felt able to give up control (Quadrant 2) in this area. Things spiritual rarely were mentioned by men or women in any other category, which possibly indicates for those respondents who did list it a relative degree of satisfaction with the amount of control that they exercised over their spiritual lives. Whether male and female Ss were combined or considered separately, there were no significant differences in terms of whether they felt that they exercised active-positive or yielding-positive control in this area, although there seemed a slight tendency to favor assertive-positive strategies.

**Self.** Thirteen percent of the women felt that they had too much self-control (Quadrant 3) over themselves. On the other hand, 10.1% felt that they were out of control of themselves. Further, 12.7% of females respondents felt that they were able to give up control (Quadrant 2) of the self. These findings may represent different subsets, but suggest a degree of conflict in the area of self for some female respondents. By contrast, few males mentioned self, and then most often as an area of high (Quadrant 1) self-control. Self never was mentioned otherwise as an area of concern. Whether male and female Ss were combined or considered separately, there were no significant differences in terms of whether they felt that they exercised more assertive-positive, yielding-positive, assertive-negative or yielding-negative control in this area, although there seemed a slight tendency toward reporting that assertive-negative control was used most often by women and assertive-positive strategies most often by men.

**Interpersonal/intimate relationships.** Women respondents reported significantly more yielding-positive and assertive-positive control (Quadrants 2 and 1) in the area of intimate and interpersonal relations, as compared to their negative counterparts (Quadrants 3 and 4) ( $\chi^2(1) = 5.7, p \leq .02$ ). Thirty-three percent of the women felt that they had assertive-positive self-control in this area, while 49.2% reported having yielding-positive control. Twenty-three percent felt that they exercised assertive-negative control in this area, while 18.1% felt that they exercised yielding-negative control in their interpersonal relationships, and 27.5% were afraid of losing control in their interpersonal relationships, and 27.5% were afraid of losing control in this area.

For the males, 40% felt this to be an area of assertive-positive self-control, and 43.8% described it as an area of yielding-positive self-control. Fifty-two percent reported it as an area in which they exercised too much assertive-negative control; only 22.2% of the men described it as an area of yielding-negative self-control. Thirty-eight percent of the men felt out of control in the interpersonal area, and 25.1% feared losing control.

These findings are suggestive of ambivalence and anxiety in this area for some men, who exhibit a similar pattern to women, although women tend to feel more out of control. No significant differences for male Ss in terms of their endorsements of assertive-positive, assertive-negative, yielding-positive, or yielding-negative control dimensions were discovered. However, when male and female Ss were combined, there were significant differences in their relative endorsements of positive assertive and yielding control, as compared to negative-assertive and yielding control ( $\chi^{2(1)} = 6.26, p < .02$ ). Again, these differences appeared to be in the direction of a significant reliance on both assertive and yielding positive, as opposed to negative strategies.

**Family.** Fifteen percent of the women felt this to be an area in which they exercised a high degree of self-control (Quadrant 1), while 13.3% felt that they exercised too much self-control (Quadrant 3) in their family life. Fifteen percent felt out of control of their families. By contrast, there did not appear to be much willingness or desire among women to be able to give up control (Quadrant 2) in this area. This appeared to be an area of high assertive-positive and assertive-negative control for women.

Twenty percent of the men mentioned this as an area of high (Quadrant 1) self-control, but 10.5% felt that they exerted too much self-control (Quadrant 3) in this sphere. Only 4.8% felt able to give up control (Quadrant 2) in this area. A high 22.2% felt that they exercised too little self-control (Quadrant 4) in their family life. Thus men appeared to report reliance on either assertive-positive, assertive-negative, or yielding-negative strategies in this area. While family per se did not seem to be an area of great anxiety (there was little mention, in contrast to the women, of being out of control or losing control), 12.5% of the men specifically listed their marriages as an area in which they feared losing control. Marriage rarely was mentioned by the women. The male profile suggests considerable confusion about how one should act vis-à-vis family. No significant differences for either men or women in this area in terms of relative endorsement of assertive vs. yielding control strategies were found.

#### Professional

**Achieving goals.** Fifty-one percent of the women perceived this to be an area of high (Quadrant 1) self-control, while only 11.8% felt they exercised too much self-control (Quadrant 3) in this area. Only 8.6% feared losing control here. Little mention was made by the women of being out of control or wanting to give up control (Quadrant 2) in this area, which perhaps implies a relatively satisfied feeling about their ability to function competently and successfully using an assertive control mode. This may be in part a reflection of the high level of educational and occupational attainments of the women in the sample.

The men revealed a profile similar to the women's; 60.0% described this as an area of high (Quadrant 1) self-control. In fact, male Ss perceived themselves as exercising assertive-positive control in this area significantly more often than they exercised assertive-negative, yielding-positive or yielding-negative control (Fisher's Exact Test,  $p < .01$ ). However, 22.2% of the male respondents felt that they had too little self-control (Quadrant 4) here, perhaps indicative of a need to strive harder. In general, though, it appeared that these males were relatively satisfied with their performance in terms of achievement and goals. When male and female Ss were combined, there were also significant differences in their perceptions of their endorsement of assertive vs. yielding control in this area. Both men and women perceived themselves as exhibiting assertive-positive control for achieving goals more often than other kinds of control ( $\chi^{2(1)} = 8.14, p < .01$ ).

**Fulfilling responsibilities.** Eleven percent of the women indicated this as an area of high (Quadrant 1) self-control. It was mentioned rarely in other categories, which suggests relative satisfaction along this dimension of active-positive control. Similarly,

28.0% of the men reported this as an area of high (Quadrant 1) self-control. It was not mentioned elsewhere by men, again suggesting that those men who thought about responsibilities in relation to self-control were relatively satisfied with their performance. When all Ss were combined, we perceived a similar pattern in this area as in achieving goals (Fisher's Exact Test,  $p < .05$ ). Both men and women perceived fulfilling their responsibilities as more associated with the quadrant than any other.

**Professional life.** Sixteen percent of the women and 20% of the men reported this as an area of high (Quadrant 1) self-control, with no stated worries or anxieties in terms of being out of control or losing control in this area.

#### Affective

**Emotional expression.** Twenty-eight percent of the women and 21.1% of the men felt that they exercised too much (Quadrant 3) self-control in this area. Women perceived themselves as in an assertive-negative Quadrant 3 significantly more often than in any other ( $\chi^{2(1)} = 4.00, p < .05$ ). When male and female Ss were combined, this same trend also appeared ( $\chi^{2(1)} = 5.68, p < .02$ ). By contrast, only 18.8% of the women and 14.3% of the men felt that they were able to give up control in terms of their emotional expression. It appears that both men and women had some concerns about their ability to share feelings, specifically worrying that they either shared too much or not enough. However, some respondents did feel able to act in a yielding and nurturing way in this area.

**Anger.** Among the women, 15.0% listed anger as an area of too much (Quadrant 3) self-control. However, only 4.8% felt able to give up control (Quadrant 2) in this area. We may infer considerable ambivalence and high anxiety toward this particular emotion from the fact that 31.9% of the women felt out of control of their anger (again identifying an association between high (Quadrant 1) and too much (Quadrant 3) self-control, and paradoxically feelings of being out of control), while 24.1% mentioned anger as an area in which they feared losing control.

Only 8.0% of the men felt that anger was an area of high (Quadrant 1) self-control, while 21.1% felt that they exercised too much (Scale 3) self-control over their anger. Interestingly, 18.8% of male respondents felt ready to give up control in this area (Quadrant 2). Also 28.6% out of control of their anger, and a quite high 43.8% feared losing control of their anger.

#### Body

**Health.** Thirteen percent of the women listed health as an area in which they already had high (Quadrant 1) self-control. No women felt that they exercised too much self-control (Quadrant 3) in this area, and almost none felt able to give up control here (Quadrant 2). Twenty-one percent listed it as an area of too little (Quadrant 4) self-control, while 14.5% felt out of control of their own health. Women respondents felt health significantly more than they used assertive-negative (Quadrant 3) or yielding-positive (Quadrant 2) strategies (Fisher's Exact Test,  $p < .001$ ). Male respondents also were concerned about the state of their health. Men tended to perceive themselves also as endorsing assertive-positive and yielding-negative (Quadrants 1 and 4) in this area more often than Quadrant 2 and 3. (Fisher's Exact Test,  $p < .05$ ). Twenty-seven percent felt that they exercised too little self-control (Quadrant 4) in this area, and none felt able to give up control (Quadrant 2). While women appeared to feel out of control of their health (19.5%), men feared losing control in this area (12.5%).

**Eating.** As might be expected, both men and women were concerned about their eating habits. No men and no women felt able to give up control in this area (Quadrant 2); by contrast, 38.2% of the women and 16.7% of the men felt that they had too little



self-control (Quadrant 4) in this area. Women strongly perceived themselves as yielding-negative in this area (Quadrant 4) (Fisher's Exact Test,  $p < .001$ ). While this trend did not achieve significance for men alone, when all Ss were combined, the same pattern emerged ( $\chi^{2(1)} = 22.00, p < .001$ ). While women felt out of control of their eating (11.6%), men feared losing control (12.5%).

*Sex.* While few women felt this to be an area of high (Quadrant 1) self-control, 15.0% reported that they exercised too much control (Quadrant 3) in their sexual lives. On the other hand, 22.2% of the women felt able to give up control (Quadrant 2) in this area, a fairly yielding position but one apparently unaccompanied by notable anxiety, as few women mentioned sex as an area of being out of control or afraid of losing control. Women reported endorsement of yielding-positive quadrant in this area significantly more often than other quadrants (Fisher's Exact Test,  $p < .001$ ).

Fifteen percent of the male respondents felt that they had too much (Quadrant 3) control in this area. A relatively high percentage of respondents (19.0%) reported feeling out of control in this area, and male respondents never mentioned sex as an area of being able to give up control (Quadrant 2).

When all Ss were combined, they appeared to endorse yielding-positive (Quadrant 2) or assertive-negative (Quadrant 3) quadrants significantly more often than yielding-negative (Quadrant 4) or assertive-positive (Quadrant 1) quadrants ( $\chi^{2(1)} = 8.81, p < .01$ ).

#### SUMMARY

Although the preliminary nature of this investigation, the heuristic methodology employed, the small sample size, and the biased nature of the sample preclude any facile generalization of these findings, some further comments are in order, if only to delineate clearly useful directions for future research.

First, in terms of the sample itself, it should be noted that respondents, particularly the women, appeared to be well-educated, professional people, who placed a relatively high value on self-control and who perceived themselves to be fairly self-controlled people. It would be valuable to study populations of different ethnic, cultural, and socioeconomic backgrounds, and especially populations identified more randomly than was possible in the present study.

Respondents in this sample did not appear to relate frequently spiritual goals, values, or concerns to different types of personal control. When they did, there appeared a slight tendency for both men and women to accomplish in the spiritual realm through assertive-positive control. Neither men nor women appeared to feel out of control in this area.

In terms of self-concerns, women tended to report using either yielding-positive or assertive-negative control. Men, on the other hand, seemed to endorse assertive positive control and, in contrast to the women, expressed few concerns about being out of control in this area.

One might conclude further that respondents in this sample exercised a high degree of assertive-positive control in their professional lives and were satisfied with their performance in this area despite the fact that one-quarter currently were unemployed. In terms of their performance-related and achievement-oriented dealings with the outside world, they also gave the impression of being competent and successful individuals who felt this success to be related to assertive-positive control. Neither men nor women appeared to have any concerns of losing control or being out of control in this realm.

However, in terms of their interpersonal and family lives, and in terms of their emotional lives, Ss gave evidence of much more ambivalence and confusion. While men and women appeared to have a nicely androgynous balance of assertive-positive and yielding-positive control in their interpersonal relationships, a high percentage of both men and women felt out of control in their intimate/interpersonal relationships. Men

also appeared to feel that they exercised considerable assertive-negative control in this sphere. Women appeared to feel that they exercised assertive control (both positive and negative) vis-à-vis their families and often felt out of control in this area. Men, on the other hand, appeared to feel that they had either assertive-positive or yielding-negative control in this area.

Expressing their emotions appeared troublesome primarily in terms of assertive-negative self-control for both men and women. Anger in particular appeared to be a source of anxiety to women and even more so to men. Both men and women felt that they exercised primarily assertive-negative control in this area and were strongly concerned about losing control or of already being out of control of their anger.

Health concerns also ranked high on the list of problem areas in terms of Ss' self-reports. Both men and women felt health to be an area of yielding-negative or assertive-positive control. Eating habits in particular were problematic for both men and women; a large number of women in particular felt that they exercised too much yielding-negative control in this area. Both men and women had some feelings of being out of control or fear of losing control in these areas.

Interestingly, a relatively high number of male respondents reported feeling out of control of their sex lives, whereas women presented a more yielding, but anxiety-free profile. All Ss reported using primarily yielding-positive or assertive negative control in this area.

It appeared worthwhile to make some broad generalizations as well about the theoretical model employed in this study. Theoretically, it could be argued that one has the choice to opt for any of 10 control profiles in interacting with a given life dimension (in terms of pure theory, this list is considerably longer, but in practice we rarely found people who endorsed more than two simultaneous dimensions). Thus, an individual could describe him/herself as exhibiting assertive-positive dimensions; assertive-negative dimensions; yielding-positive dimensions; or yielding-negative dimensions. She/he also could employ the following combinations: Assertive-positive and assertive-negative; assertive-positive and yielding-positive; assertive-positive and yielding-negative; assertive-negative and yielding-positive; assertive-negative and yielding-negative; yielding-positive and yielding-negative. In analyzing our sample, we found a high proportion of assertive-positive. We also found a tendency for feelings of control to be influenced by the particular life dimension. Thus, for example, primarily assertive-positive dimensions were associated with the areas of achieving goals, fulfilling responsibilities, professional life and (men only) self. Primarily assertive-negative dimensions were associated with expressing emotions and anger; and primarily yielding-negative dimensions were associated with eating. Sex appeared most often related to a combination of yielding-positive and assertive-negative strategies; while health issues illustrated the reverse pattern, characterized primarily by assertive-positive and yielding-negative control. Finally, in the area of interpersonal relations, both men and women felt that they used a combination of assertive-positive and yielding-positive control. It is interesting to note that in the sample there was no example of a life dimension associated exclusively with positive-yielding.

From a clinical perspective, Ss' responses in this study suggest that special attention be paid to the following areas: (1) Too much self-control (assertive-negative control): (a) for women, emotional expression, interpersonal/intimate relations, verbal expression, anger, and sex; (b) for men, interpersonal/intimate relations; sex and anger. (2) Too little self-control (yielding-negative control): (a) for women, eating, health, and anger; (b) for men, eating, interpersonal relationships, health, and sex. (3) Out of control or fearing of losing control: (a) for women, anger and interpersonal/intimate relationships; (b) for men, anger, interpersonal relationships, sexual lives. Overall, there did not appear to be major differences in self-control concerns between men and women, although the exploratory nature of this study prohibits any definite conclusions at this time.

Several theoretical points should be reiterated as a possible basis for future research in the area of self-control. First, there did seem to emerge across categories a fairly consistent pattern of high and too much self-control paradoxically being associated with feelings of being out of control. One might speculate that there are certain situations in which the more one tries to exert assertive/active self-control, the more one ends up feeling out of control. This theory relates to the eastern and western concepts of self-control mentioned at the start of this paper. However, a more tightly designed study would be required to determine whether this association was more than random.

Second, further research would need to clarify theoretically within a control model the concepts of "out of control" and "fear of losing control." It was unclear from this investigation whether these categories represented theoretically distinct groupings or whether being out of control was simply a more intense developmental progression of being afraid of losing control. In addition, it would be important to specify further the exact relationship of these categories to the out-of-control categories delineated in the control model: i.e., Quadrants Three and Four. For example, further research might investigate whether individuals choose the out-of-control category because they feel overly rigid (Quadrant Three) or because they feel passive, irresponsible, avoiding (Quadrant Four).

Finally, further research should build upon the findings of this study, which show that self-control is not a unitary concept and that in fact it may be manifest in a given individual's life in many different forms. Further, it may be that an individual perceives himself as positive-assertive and/or positive-yielding (Quadrants 1 and 2) in some areas of his life, but simultaneously may have concerns about being too assertive or too yielding in these areas as well as in other areas. This study should be seen as the first attempt in the development of a self-control inventory that can help provide additional precise refinement for defining clinical concerns in control terms and thereby make it possible to match more accurately and effectively a given self-control strategy to a particular person with a particular clinical problem.

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