

Self-Discrepancy: A Theory Relating Self and Affect

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This article presents a theory of how different types of discrepancies between self-state representations are related to different kinds of emotional vulnerabilities. One domain of the self (actual; ideal; ought) and one standpoint on the self (own; significant other) constitute each type of self-state representation. It is proposed that different types of self-discrepancies represent different types of negative psychological situations that are associated with different kinds of discomfort. Discrepancies between the actual/own self-state (i.e., the self-concept) and ideal self-states (i.e., representations of an individual's beliefs about his or her own or a significant other's hopes, wishes, or aspirations for the individual) signify the absence of positive outcomes, which is associated with dejection-related emotions (e.g., disappointment, dissatisfaction, sadness). In contrast, discrepancies between the actual/own self-state and ought self-states (i.e., representations of an individual's beliefs about his or her own or a significant other's beliefs about the individual's duties, responsibilities, or obligations) signify the presence of negative outcomes, which is associated with agitation-related emotions (e.g., fear, threat, restlessness). Differences in both the relative magnitude and the accessibility of individuals' available types of self-discrepancies are predicted to be related to differences in the kinds of discomfort people are likely to experience. Correlational and experimental evidence supports the predictions of the model. Differences between self-discrepancy theory and (a) other theories of incompatible self-beliefs and (b) actual self-negativity (e.g., low self-esteem) are discussed.

The notion that people who hold conflicting or incompatible beliefs are likely to experience discomfort has had a long history in psychology. In social psychology, for example, various early theories proposed a relation between discomfort and specific kinds of "inconsistency" among a person's beliefs (e.g., Abelson & Rosenberg, 1958; Festinger, 1957; Heider, 1958; McGuire, 1968; Newcomb, 1968; Osgood & Tannenbaum, 1955). And various classic theories relating self and affect proposed that self-conflicts or self-inconsistencies produce emotional problems (e.g., Adler, 1964; Allport, 1955; Cooley, 1902/1964; Freud, 1923/1961; Horney, 1939, 1946; James, 1890/1948; Lecky, 1961; Mead, 1934; Rogers, 1961). The theory to be presented here, self-discrepancy theory, has close ties to this historical tradition. But its construction was guided by a distinct set of aims: (a) to distinguish among different kinds of discomfort that people holding incompatible beliefs may experience, (b) to relate different kinds of emotional vulnerabilities systematically to different types of discrepancies that people may possess among their self-beliefs, and (c) to consider the role of both the

availability and the accessibility of different discrepancies people may possess in determining the kind of discomfort they are most likely to suffer.

Although many different types of belief incompatibility have been described in the literature—for example, dissonance (e.g., Aronson, 1969; Festinger, 1957), imbalance (e.g., Heider, 1958; Newcomb, 1968), incongruity (e.g., Osgood & Tannenbaum, 1955), and self-inconsistency (e.g., Epstein, 1980; Lecky, 1961)—the emotional consequences have typically been described only in very general terms, such as tension, unpleasantness, pressure, conflict, stress, or discomfort. And yet it is clear from the general psychological literature that distinct emotional clusters or syndromes exist. From factor analysis, cluster analysis, and circular scaling, researchers have reported that dissatisfaction, feeling discouraged, feeling pitiful, feeling sad, feeling gloomy, and feeling miserable tend to cluster (e.g., Cattell, 1973; DeRivera, 1977; Ewert, 1970; Kemper, 1978; Zuckerman & Lubin, 1965), whereas guilt, anxiety, worry, fear, feeling tense, feeling alarmed, and feeling threatened form another cluster (Ausubel, 1955; Bibring, 1953; Cattell, 1973; DeRivera, 1977; Ewert, 1970; Kemper, 1978; Russell, 1980; Zuckerman & Lubin, 1965). This basic distinction between dejection-related emotions and agitation-related emotions has also been made frequently in the clinical literature, not only to distinguish between depression and anxiety but also to distinguish between different kinds of depression (see, e.g., Beck, 1967, 1983; Cameron, 1963; White, 1964).

Thus previous theories of belief incompatibility are limited in that they do not consider that distinct kinds of discomfort may be associated with belief incompatibility. These theories, then, cannot predict *which* kind of discomfort or emotional problem will be induced by a particular type of belief incom-

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patibility. In addition, the possibility does not arise that chronic individual differences in type of belief incompatibility may be related to individual differences in emotional vulnerability. Indeed, among theories concerned with self-evaluation, theories of vulnerability to generally positive or negative emotions are relatively common, such as theories of achievement motivation (e.g., Atkinson, 1964; McClelland, 1961), but theories of vulnerability to *different kinds of negative emotions* are rare. And those that have been proposed tend to describe emotional vulnerability in terms of problem areas, such as interpersonal dependency problems versus achievement or self-efficacy problems, rather than to relate emotional vulnerability to specific types of incompatible beliefs (e.g., Beck, 1983; Blatt, D'Afflitti, & Quinlan, 1976). A primary purpose of self-discrepancy theory, then, is to predict which types of incompatible beliefs will induce which kinds of negative emotions.

Another purpose is to consider whether the availability and accessibility of different types of incompatible beliefs induce different kinds of discomfort. Incompatible beliefs are cognitive constructs, and as such they can vary in both their availability and their accessibility. Construct *availability* refers to the particular kinds of constructs that are actually present (i.e., available) in memory to be used to process new information, whereas construct *accessibility* refers to the readiness with which each stored construct is used in information processing (see Higgins & Bargh, 1987; Higgins, King, & Mavin, 1982; Tulving & Pearlstone, 1966). Individual differences can arise either because people have different types of constructs available or because they have the same types available but their relative accessibilities differ.

Common to theories of belief incompatibility is the assumption that the incompatibility reflects a particular type of psychological situation that influences its possessor's responses. Thus, these theories compare persons who do or do not possess the particular belief incompatibility (e.g., cognitive dissonance, imbalance) and thus are or are not likely to respond in terms of the psychological situation associated with it. These theories, then, compare only whether a particular (negative) psychological situation is or is not available and thus are limited by considering only the absence or presence of one basic type of psychological situation.

In contrast, Kelly's (1955) theory of personal constructs proposed that individuals vary widely in the particular types of psychological situations available to them; that is, there is a wide variety of personal viewpoints or ways of construing the world (see also Lewin, 1935). But Kelly did not relate different types of available constructs to different types of emotional vulnerability. And neither Kelly's nor any other theory of belief incompatibility distinguished between individual differences in construct availability and individual differences in construct accessibility. Following Kelly, individual differences in personal constructs have been commonly conceived as differences in the nature and content of people's constructs, in the viewpoint people have of social objects and events (e.g., Markus, 1977; Sarbin, Taft, & Bailey, 1960; Tagiuri, 1969). Such differences constitute differences in the availability of social constructs. Higgins et al. (1982) proposed that the accessibility of social constructs can also differ, momentarily or chronically.

Considerable evidence indicates that various contextual fac-

tors, such as prior exposure to construct-related stimuli (i.e., priming), can produce temporary individual differences in the accessibility of generally available social constructs (e.g., common trait constructs, such as "stubborn" or "hostile") and that these differences in turn can produce differences in subsequent responses to social stimuli (for reviews, see Higgins, Bargh, & Lombardi, 1985; Higgins & King, 1981; Wyer & Srull, 1981). There is also evidence that chronic individual differences in construct accessibility can influence social information processing (e.g., Bargh & Thein, 1985; Gotlib & McCann, 1984; Higgins et al., 1982). Another important purpose of self-discrepancy theory, then, is to introduce construct accessibility as a predictor of when available types of incompatible beliefs (and which of the available types) will induce discomfort.

Self-Discrepancy Theory

Over the years many different facets of the self or self-images have been identified. One finds descriptions of two "actual" selves—the kind of person an individual believes he or she actually is and the kind of person an individual believes that others think he or she actually is. The "others" can be significant others or the generalized other (see Erikson, 1950/1963; Lecky, 1961; Mead, 1934; Wylie, 1979). In addition to these actual selves, a variety of different potential selves have been identified (e.g., Markus & Nurius, 1987).

James (1890/1948), for example, distinguished between the "spiritual" self, which included one's own moral sensibility and conscience, and the "social" self, which included the self that is worthy of being approved by the highest social judge. Rogers (1961) distinguished between what others believe a person should or ought to be (i.e., the normative standard) and a person's own belief about what he or she would "ideally" like to be. Elaborating on Freud's (1923/1961) basic "superego"/"ego ideal" conceptions, Schafer (1967) and Piers and Singer (1971) distinguished between the superego representing the moral conscience and the ideal self representing hopes and goals (see also Cameron, 1963). Cooley (1902/1964) also described a social "ideal self" built up by imagining how a "better I" of aspiration would appear in the minds of persons we look up to. In his programmable theory of cognition and affect, Colby (1968) distinguished between "wish-beliefs," such as "I want to marry Tom," and "value-beliefs," such as "I ought to help my father."

Although a variety of aspects of the self have been distinguished across different theories (see Greenwald & Pratkanis, 1984), there has been no systematic framework for revealing the interrelations among the different self-states. In an attempt to do so, self-discrepancy theory postulates two cognitive dimensions underlying the various self-state representations: domains of the self and standpoints on the self.

Domains of the Self

There are three basic domains of the self: (a) the *actual* self, which is your representation of the attributes that someone (yourself or another) believes you actually possess; (b) the *ideal* self, which is your representation of the attributes that someone (yourself or another) would like you, ideally, to possess (i.e., a representation of someone's hopes, aspirations, or wishes for

you); and (c) the *ought* self, which is your representation of the attributes that someone (yourself or another) believes you should or ought to possess (i.e., a representation of someone's sense of your duty, obligations, or responsibilities).

The distinction proposed here between the ideal self and the ought self is reflected in various distinctions suggested in the literature (e.g., Colby, 1968; James, 1890/1948; Piers & Singer, 1971; Rogers, 1961; Schafer, 1967). In an extensive discussion of the difference between moral conscience and personal ideals, Schafer (1967) cogently argued that "ideals and superego morality have been confined together when each should long ago have had a place of its own" (p. 131). A classic literary example of the difference between the ideal self and the ought self is the conflict between a hero's "personal wishes" and his or her "sense of duty." A current real-world example is the conflict some women have between their own wishes to be successful professionals and some other persons' beliefs that they ought to be housewives and mothers.

Standpoints on the Self

It is not enough to distinguish among different domains of self if one wishes systematically to relate self and affect. One must also discriminate among self-state representations by considering whose perspective on the self is involved. There are two basic standpoints on the self, where a standpoint on the self is defined as a point of view from which you can be judged that reflects a set of attitudes or values (see Turner, 1956): (a) your *own* personal standpoint, and (b) the standpoint of some significant *other* (e.g., mother, father, sibling, spouse, closest friend). A person can have self-state representations for each of a number of significant others.

Except for theories focusing solely on the actual self, previous theories of the self have not systematically considered the different domains of self in terms of the different standpoints on those domains (e.g., your beliefs concerning the attributes you would personally like ideally to possess versus your beliefs concerning the attributes that some significant other person, such as your mother, would like you ideally to possess). In fact, this failure to be explicit about which standpoint on the self is involved in a particular self-concept has led to confusions in the literature. For example, although most measures of "low self-esteem" have involved comparing a person's actual self and his or her *own* ideal self, some measures have involved comparing a person's actual self and his or her beliefs about *others'* ideals for him or her (often referred to as the "social ideal self" in the literature), and other measures have been ambiguous concerning whose ideal standpoint is involved (see Wylie, 1979).

In addition to Turner's (1956) work, the concept of standpoint is found in some writings on the impact of reference groups on self-judgment, where a "normative reference group" is described as a source of a person's values or perspectives (see Kelley, 1952). In discussing "level of aspiration," Lewin (1935) distinguished between the expectations of adult authority figures that can raise a child's level of aspiration (i.e., "other" standpoints) and a child's own hopes and personal goals (i.e., "own" standpoint). The notion of standpoint is also implicit in Mead's (1934) discussion of the development of the self, where a person's own recognition of self as distinct from others develops

from the viewpoint of significant others (usually a child's mother and father). Mead, however, did not make clear to what extent the different standpoints on self remain distinct, and, in fact, suggested that in later development a person's self-concept becomes based on the viewpoint of "generalized others" rather than particular others.

In contrast to the relatively rare use of the distinction between "own" versus "other" standpoints in classifying different types of self-state representations, the distinction between "own" versus "other" has frequently been used as a critical feature in various systems for classifying emotions (e.g., Dahl, 1979; DeRiviera, 1977; Freud, 1915/1957; Kemper, 1978; Roseman, 1984) and distinguishing among motivations (e.g., Breckler & Greenwald, 1986; Buss, 1980; Scheier & Carver, 1983; Snyder, 1979). By incorporating the distinction between "own" and "other" as a feature for classifying self-state representations, we can relate different emotional/motivational conditions to different self-state conditions (as described later).

Self-State Representations and Their Motivational Significance

Combining each of the domains of the self with each of the standpoints on the self yields six basic types of self-state representations: actual/own, actual/other, ideal/own, ideal/other, ought/own, and ought/other. The first two self-state representations (particularly actual/own) constitute what is typically meant by a person's *self-concept* (see Wylie, 1979). The four remaining self-state representations are self-directive standards or acquired guides for being—in brief, *self-guides* (see Higgins, Strauman, & Klein, 1986, for a review of different kinds of standards). Self-discrepancy theory proposes that people differ as to which self-guide they are especially motivated to meet. Not everyone is expected to possess all of the self-guides—some may possess only ought self-guides, whereas others may possess only ideal self-guides.

Self-discrepancy theory postulates that we are motivated to reach a condition where our self-concept matches our personally relevant self-guides. The notion that standards, particularly ideal and ought standards, are motivating has a long history. James (1890/1948) pointed out that standards both directly prompt action and, through their use in self-evaluation, arouse emotions that are themselves motivating. Theories of level of aspiration, although focusing on the relation between performance and standard setting (see Festinger, 1942; Lewin, 1935; Rotter, 1942), have traditionally assumed that people need high "ideal" goals or aspiration levels in order to motivate performance. Control theory or cybernetics (see Miller, Galanter, & Pribram, 1960; Wiener, 1948) assumes that people self-regulate through a discrepancy-reducing negative feedback process whose function is to minimize differences between one sensed value (which could be a self-concept) and some other reference value or standard of comparison (which could be a self-guide). Duval and Wicklund's (1972) theory of objective self-awareness argues that increasing self-focused attention increases our awareness of discrepancies between our real self and personal standards of correctness, subsequently inducing a motivation to reduce the discrepancy (see also Wicklund & Gollwitzer, 1982). And Carver and Scheier's control-theory approach to behav-

ioral self-regulation (e.g., Carver & Scheier, 1981; Scheier & Carver, 1982), which integrates both of these latter two perspectives, emphasizes the motivational significance of matching to standards.

Self-discrepancy theory differs from these other theories in proposing that different types of chronic discrepancies between the self-concept and different self-guides, as well as between different self-guides, are associated with different motivational predispositions. It is not possible in this article to consider all of the possible types of self-discrepancies (e.g., ideal/own vs. ought/other).¹ An especially important set of self-discrepancies is the set that reflects a discrepancy between an individual's self-concept and his or her self-guides. This set of self-discrepancies has also received the most empirical attention. In this article, therefore, we focus on the following four types of discrepancies: actual/own:ideal/own, actual/own:ideal/other, actual/own:ought/own, and actual/own:ought/other.

Types of Self-Discrepancies and Quality of Discomfort

Although self-discrepancies might be considered to constitute a form of belief inconsistency, the source of discrepancy-induced discomfort is not assumed to be simply a failure to achieve internal consistency or a "good Gestalt fit." Indeed, if this was assumed to be the only source of the discomfort, then self-discrepancy theory, like previous inconsistency theories, would not predict that different types of discrepancies induce different kinds of discomfort. But as Abelson (1983) has pointed out with respect to Heider's (1958) balance theory and Festinger's (1957) cognitive dissonance theory, inconsistencies among cognitions reflect personal costs and problems—not simply cognitive experiences. Self-discrepancy theory shares this perspective (see also Holt, 1976; Kemper, 1978; Plutchik, 1962; Schlenker, 1985) by assuming that each type of discrepancy reflects a particular type of negative psychological situation that is associated with specific emotional/motivational problems.

When people believe that they have lost or will never obtain some desired goal, they feel sad or disappointed. When people believe that something terrible is going to happen they feel apprehensive or threatened. More generally, there are two basic kinds of negative psychological situations that are associated with different kinds of emotional states (see, for example, Jacobs, 1971; Lazarus, 1968; Mowrer, 1960; Roseman, 1984; Stein & Jewett, 1982): (a) the *absence of positive outcomes* (actual or expected), which is associated with dejection-related emotions (e.g., dissatisfaction, disappointment, sadness); and (b) the *presence of negative outcomes* (actual or expected), which is associated with agitation-related emotions (e.g., fear, threat, edginess). It has been understood for many years that psychological situations are a function of both the nature of external events and people's interpretations of those events (see, for example, Asch, 1952; Lewin, 1951; Merton, 1957), and that there are individual differences in how external events are interpreted (see, for example, Kelly, 1955; G. S. Klein, 1970; Murray, 1938; see also Coyne & Lazarus, 1980). Self-discrepancy theory proposes that individual differences in types of self-discrepancies are associated with differences in the specific types

of negative psychological situations their possessors are likely to experience.

Just as your emotional response to your performance is not determined by the properties of the performance per se, but by its significance or meaning to you, self-discrepancy theory assumes that the motivational or emotional effects of your actual/own attributes, or self-concept, are determined by the significance to you of possessing such attributes. And the significance is assumed to depend on the *relation* between the self-concept and your self-guides, with different types of relations representing different types of negative psychological situations, as described next:

1. *Actual/own versus ideal/own*: If a person possesses this discrepancy, the current state of his or her actual attributes, from the person's own standpoint, does not match the ideal state that he or she personally hopes or wishes to attain. This discrepancy then represents the general psychological situation of the absence of positive outcomes (i.e., nonobtainment of own hopes and desires), and thus the person is predicted to be vulnerable to *dejection-related emotions*.

More specifically, the person is predicted to be vulnerable to *disappointment* and *dissatisfaction* because these emotions are associated with people believing that their personal hopes or wishes have been unfulfilled. Most psychological analyses of these emotions have described them as being associated with (a) the individual's *own* standpoint or agency (e.g., James, 1890/1948; Kemper, 1978; Roseman, 1984; Wierzbicka, 1972) and (b) a discrepancy from his or her hopes, desires, or ideals (e.g., Abelson, 1983; Carver & Ganelen, 1983; Durkheim, 1951; Duval & Wicklund, 1972; Horney, 1950; James, 1890/1948; Kemper, 1978; Rogers, 1961; Wierzbicka, 1972). The motivational nature of this discrepancy also suggests that it might be associated with *frustration* from unfulfilled desires.

2. *Actual/own versus ideal/other*: If a person possesses this discrepancy, the current state of his or her actual attributes, from the person's own standpoint, does not match the ideal state that the person believes some significant other person hopes or wishes that he or she would attain. This discrepancy, then, again represents the general psychological situation of the absence of positive outcomes (i.e., nonobtainment of a significant other's hopes or wishes), and thus the person is again predicted to be vulnerable to *dejection-related emotions*.

More specifically, because people who believe that they have failed to obtain some significant other's hopes or wishes are likely to believe that the significant other is disappointed and dissatisfied with them, self-discrepancy theory predicts that they will be vulnerable to *shame*, *embarrassment*, or *feeling downcast*, because these emotions are associated with people believing that they have lost standing or esteem in the opinion of others. Most psychological analyses of "shame" and related emotions have described them as being associated with (a) the standpoint or agency of one or more *other* people (e.g., Ausubel, 1955; Cooley, 1902/1964; DeRivera, 1977; Lewis, 1979; Piers & Singer, 1971; Wierzbicka, 1972) and (b) a discrepancy from achievement or status standards (e.g., Cooley, 1902/1964; De-

¹ The Self-Discrepancies and Self-Concept Negativity section includes a brief description of the kind of discomfort that is associated with a discrepancy between two self-guides.

Rivera, 1977; Erikson, 1950/1963; Kemper, 1978; Piers & Singer, 1971). Some analyses describe shame as being associated with discrepancy from both moral and nonmoral standards (e.g., Ausubel, 1955; Lewis, 1979). The motivational nature of this discrepancy suggests that it might also be associated with concern over losing the affection or esteem of others.

3. Actual/own versus ought/other: If a person possesses this discrepancy, the current state of his or her actual attributes, from the person's own standpoint, does not match the state that the person believes some significant other person considers to be his or her duty or obligation to attain. Because violation of prescribed duties and obligations is associated with sanctions (e.g., punishment), this discrepancy represents the general psychological situation of the presence of negative outcomes (i.e., expectation of punishment), and thus the person is predicted to be vulnerable to *agitation-related emotions*.

More specifically, the person is predicted to be vulnerable to *fear* and *feeling threatened*, because these emotions occur when danger or harm is anticipated or impending. Most psychological analyses of these emotions have described them as associated with (a) external agents, in particular the standpoint or agency of one or more *other* people (e.g., Abelson, 1983; Ausubel, 1955; DeRivera, 1977; Freud, 1923/1961; Kemper, 1978; Piers & Singer, 1971; Sullivan, 1953), and (b) a discrepancy from norms or moral standards (e.g., Ausubel, 1955; Dahl, 1979; Freud, 1923/1961; Kemper, 1978; Piers & Singer, 1971; Sullivan, 1953). The motivational nature of this discrepancy suggests that it might also be associated with feelings of *resentment* (i.e., resentment of the anticipated pain to be inflicted by others).

4. Actual/own versus ought/own: If a person possesses this discrepancy, the current state of his or her attributes, from the person's own standpoint, does not match the state that the person believes it is his or her duty or obligation to attain. This discrepancy, then, again represents the general psychological situation of the presence of negative outcomes (i.e., a readiness for self-punishment), and thus self-discrepancy theory predicts that the person is vulnerable to *agitation-related emotions*.

More specifically, the person is predicted to be vulnerable to *guilt*, *self-contempt*, and *uneasiness*, because these feelings occur when people believe they have transgressed a personally accepted (i.e., legitimate) moral standard. Most psychological analyses of guilt have described it as associated with (a) a person's *own* standpoint or agency (e.g., Ausubel, 1955; Erikson, 1950/1963; Freud, 1923/1961; James, 1890/1948; Kemper, 1978; Lewis, 1979; Piers & Singer, 1971) and (b) a discrepancy from his or her sense of morality or justice (e.g., Ausubel, 1955; Erikson, 1950/1963; Freud, 1923/1961; Horney, 1939; James, 1890/1948; Kemper, 1978; Lewis, 1979; Piers & Singer, 1971). The motivational nature of this discrepancy suggests that it may be associated with feelings of moral worthlessness or weakness.

The distinction between shame and guilt suggested here is that shame involves feeling that one has been lowered in the esteem of others because one has disappointed them by failing to accomplish their hopes and wishes for one, whereas guilt involves feeling that one has broken one's own rules concerning how one ought to conduct one's life. This distinction is consistent with previous discussions of the difference between shame and guilt (e.g., Erikson, 1950/1963; James, 1890/1948). It is also evident from the preceding descriptions of psychological

analyses of these two emotions that most theories consider shame to involve the "other" standpoint and guilt to involve the "own" standpoint, and that most theories consider shame to involve the "ideal" domain and guilt to involve the "ought" domain. Nevertheless, there are some theories that consider guilt to involve the "other" standpoint as well (e.g., Horney, 1939; Piers & Singer, 1971) and shame to involve the "ought" domain as well (e.g., Ausubel, 1955; Lewis, 1979). These theories, then, would predict that discrepancies in addition to those postulated by self-discrepancy theory can induce shame and guilt. But all of the theories would agree that the discrepancies postulated by self-discrepancy theory to induce shame and guilt should do so.

The distinction between fear and guilt suggested here is that fear involves anticipating sanctions from others for having violated their rules, whereas guilt involves chastising oneself for having broken one's own rules of conduct. This distinction between fear and guilt is consistent with those previously made in the psychological literature on emotions (e.g., Ausubel, 1955; Freud, 1923/1961; Kemper, 1978).

As I mentioned earlier, self-discrepancy theory does not assume that people possess only one or the other of these types of self-discrepancies. Particular individuals can possess none of them, all of them, or any combination of them. Thus, one can have no emotional vulnerability, only one (i.e., a pure case), or a number of different kinds of emotional vulnerabilities. Moreover, even if a person possesses more than one type of self-discrepancy, and thus more than one kind of emotional vulnerability, the discrepancies are not necessarily equally active and equally likely to induce discomfort. In order to determine which types of discrepancies a person possesses and which are likely to be active and induce their associated emotions at any point, we must consider the next feature of self-discrepancy theory: distinguishing between the availability and the accessibility of self-discrepancies.

Availability and Accessibility of Self-Discrepancies

The *availability* of any particular type of self-discrepancy is assumed to depend on the extent to which the attributes of the two conflicting self-state representations diverge for the person in question. Each attribute in one of the self-state representations (e.g., actual/own) is compared to each attribute in the other self-state representation (e.g., ideal/own). Each pair of attributes is coded as either a match (i.e., synonymous attributes of the same or similar degree) or a mismatch (i.e., antonymous attributes, such as actual/own: "unattractive" vs. ideal/own: "attractive," and synonymous attributes of very different degrees, such as actual/own: "slightly attractive" vs. ideal/own: "extremely attractive").

The greater the difference between the number of mismatches and the number of matches (i.e., the greater the divergence of attributes between the two self-state representations), the greater is the magnitude of that type of self-discrepancy available to the subject. And the greater the magnitude of a particular type of discrepancy, the greater will be the *intensity* of the kind of discomfort associated with the discrepancy when it is activated. The likelihood that an available self-discrepancy will be activated in turn depends on its accessibility.

The *accessibility* of an available self-discrepancy is assumed to depend on the same factors that determine the accessibility of any stored construct (for reviews, see Higgins & King, 1981; Higgins, Bargh, & Lombardi, 1985; Wyer & Srull, 1981). One factor is how recently the construct has been activated. For example, it has been demonstrated that exposure to trait labels in a prior "unrelated" task (a *priming* manipulation) increases the likelihood that subjects will subsequently interpret a target person's ambiguous behaviors in terms of the particular constructs activated by the labels (e.g., Higgins, Rholes, & Jones, 1977; Srull & Wyer, 1979; see also Bargh & Pietromonaco, 1982). As Abelson (1959) pointed out, there are numerous inconsistencies in anyone's belief system that may lie dormant, and it is plausible to assume that pressure operates only when the issue is salient (e.g., when the self-discrepancy has been contextually primed).

It has also been shown that the more frequently a construct is activated, the more likely it will be used subsequently to interpret social events (e.g., Higgins, Bargh, & Lombardi, 1985; Srull & Wyer, 1979, 1980). The influence of frequency of activation is also reflected in the effects of chronic individual differences in construct accessibility on social interpretation and memory (e.g., Bargh & Thein, 1985; Higgins et al., 1982).

The accessibility, or likelihood of activation, of a stored construct also depends on the relation between its "meaning" and the properties of the stimulus event. A stored construct will not be used to interpret an event unless it is applicable to the event (see Higgins & Bargh, 1987; Higgins et al., 1977). Thus the negative psychological situation represented in a self-discrepancy (i.e., the "meaning" of the discrepancy) will not be activated by an unambiguously positive event. And a self-discrepancy need not have high prior accessibility in order to be used to interpret a negative event if the event instantiates the discrepancy's "meaning" clearly enough. In sum, the accessibility of a self-discrepancy is determined by its *recency of activation*, its *frequency of activation*, and its *applicability* to the stimulus event.

I should note that self-discrepancy theory does not assume that people are aware of either the availability or the accessibility of their self-discrepancies. It is clear that the availability and accessibility of stored social constructs can influence social information processing automatically and without awareness (see Bargh, 1984; Bargh, Bond, Lombardi, & Tota, 1986; Bargh & Pietromonaco, 1982; Higgins & Bargh, 1987; Higgins & King, 1981; Kelly, 1955). Thus, self-discrepancy theory assumes that the available and accessible negative psychological situations embodied in one's self-discrepancies can be used to assign meaning to events without one's being aware of either the discrepancies or their impact on processing. The measure of self-discrepancies requires only that one be able to retrieve attributes of specific self-state representations when asked to do so. It does *not* require that one be aware of the relations among these attributes or of their significance.

General Hypothesis of Self-Discrepancy Theory

A number of implications follow from the set of assumptions above:

1. Individual differences in which types of self-discrepancies are available will be associated with individual differences in

the kinds of discomfort that people will suffer (i.e., individual differences in emotional vulnerability).

2. The greater the magnitude of a particular type of self-discrepancy, the more intensely its possessor will suffer the kind of discomfort associated with that type of discrepancy.

3. If a person possesses more than one type of self-discrepancy (i.e., has more than one type of self-discrepancy available), he or she is likely to suffer most intensely the kind of discomfort associated with whichever type of discrepancy has the greatest magnitude.

4. Individual differences in which type of self-discrepancy is temporarily most accessible will be associated with momentary individual differences in the kinds of discomfort that people will suffer (i.e., individual differences in emotional episodes).

5. The greater the accessibility of a particular type of self-discrepancy, the greater the likelihood that its possessor will suffer the kind of discomfort associated with that type of discrepancy.

6. If a person possesses more than one type of self-discrepancy, he or she is most likely to suffer momentarily the kind of discomfort associated with whichever type of discrepancy has the greatest temporary accessibility.

These implications of self-discrepancy theory are captured in the following general hypothesis: The greater the magnitude and accessibility of a particular type of self-discrepancy possessed by an individual, the more the individual will suffer the kind of discomfort associated with that type of self-discrepancy.

Evidence for Self-Discrepancy Theory

In this section I will review evidence for the preceding hypothesis of self-discrepancy theory. First I will discuss observational and correlational evidence supporting the hypothesized distinct associations between particular types of self-discrepancies and particular kinds of discomfort. Next I will present experimental evidence for the causal assumptions in the theory. Then I will describe some additional evidence of the relations between self-discrepancies and more general emotional problems (i.e., dejected depression vs. agitated depression or anxiety).

Evidence of Distinct Self-Discrepancy-Discomfort Associations

Although the previous literature relating self and affect does not contain studies that directly tested self-discrepancy theory, there is some evidence of distinct relations between particular types of discrepant self-beliefs and particular kinds of discomfort that is relevant to, and generally supports, the proposed hypothesis.

James (1890/1948) stated that when success does not match our pretensions or aspirations (an actual/own:ideal/own discrepancy), we will feel disappointed. Duval and Wicklund (1972) also reported that when we focus on our own "real self: ideal self" discrepancy, as a consequence of being objectively self-aware, we become increasingly dissatisfied and disappointed. Various other researchers have observed that a felt discrepancy between what one actually is and what one wants or hopes to be, once again reflecting an actual/own:ideal/own dis-

crepancy, leads to disappointment and dissatisfaction (e.g., Durkheim, 1951; Fenichel, 1945; Jacobson, 1946; Rogers, 1961).

Cooley (1902/1964) stated that if people have a sense of the difference between their current self and their social ideal self (an actual/own:ideal/other discrepancy), they are plunged into feelings of shame or unworthiness. Similarly, James (1890/1948) said that when self-estimation does not match the social ideal self, a person experiences shame. Piers and Singer (1971) observed that when people fail to reach the goals and hopes for them that are associated with their parents (i.e., their ideal/other), they feel shame, which can include an expectation of loss of love. As discussed earlier, an actual/own:ideal/other discrepancy reflects our belief that we have failed to obtain some significant other's goals for us, which is associated with believing that the significant other is disappointed in or dissatisfied with us. It has frequently been noted that shame associated with failure to meet a significant other's goals or wishes involves loss of face and presumed exposure to the dissatisfaction of others (e.g., Ausubel, 1955; Mead, 1934; Tompkins, 1984).

A discrepancy between one's actual behavior and the behavior prescribed by significant others (an actual/own:ought/other discrepancy) has often been said to create fear and anxiety because of apprehension over anticipated sanctions or negative responses by others (e.g., Freud, 1923/1961; Scheier & Carver, 1977; Sullivan, 1953). In contrast, transgression of one's own internalized moral and religious standards (actual/own:ought/own discrepancy) has been associated with guilt and self-criticism (e.g., Ausubel, 1955; Bibring, 1953; Freud, 1923/1961; James, 1890/1948; Piers & Singer, 1971; Tompkins, 1984). Weiner, Russell, and Lerman (1979) reported that when people attribute their failures to a lack of sufficient effort on their part (i.e., not trying as hard as they know they should have), which perhaps reflects an actual/own:ought/own discrepancy, they feel guilty.

There is also some evidence of distinct relations discernible in previous self-conflict theories of depression. A review of these theories reveals a basic similarity: Each theory proposes that the emotions associated with depression arise from a discrepancy between a person's perceived self and some standard. It has not been noted, however, that there are two different self-conflict theories of depression as a function of the type of standard that is emphasized. One set of theories, which could be described as the "actual:ought" theories, emphasizes the ought standard. These theories propose that depression is caused by discrepancy between a person's actual self and his or her superego or moral conscience (e.g., Cameron, 1963; Fenichel, 1945; Freud, 1917/1959, 1923/1961; Rado, 1927/1956). Freud, for example, suggested that depression results from a felt disparity between the ego as object and the superego or conscience. Another set of theories, which could be described as the "actual:ideal" theories, emphasizes the ideal standard. These theories propose that depression is caused by a discrepancy between a person's actual self and his or her goals, aspirations, or ideal self (e.g., Bibring, 1953; Jacobson, 1946; Sandler & Joffe, 1965). Bibring, for example, suggested that depression results from an inner-systemic conflict involving a discrepancy between a person's actual self and his or her goals and aspirations.

According to self-discrepancy theory, these two different

types of self-conflicts or discrepancies should induce different kinds of depression—an actual:ought discrepancy should induce agitated depression, whereas an actual:ideal discrepancy should induce dejected depression. Indeed, the depressive symptoms emphasized by the "actual:ought" conflict theorists have been guilt, apprehension, anxiety, and fear (i.e., agitated depression), whereas the depressive symptoms emphasized by the "actual:ideal" conflict theorists have been feelings of failure, disappointment, devaluation, and shame (i.e., dejected depression). It is also interesting in this regard that people who develop involuntal melancholia tend to be highly moralistic (i.e., high ought standard), and their illness usually involves agitated depression (Mendels, 1970).

With regard to standpoint, the importance of distinguishing between performance:ought/own discrepancies and performance:ought/other discrepancies is suggested in the moral socialization findings of Hoffman (e.g., 1971, 1975). In one study involving elementary school children and adults, Hoffman (1975) found that moral transgression was associated with guilt for females but with fear and anticipation of punishment for males (especially for the adults). Hoffman suggested that males may represent moral standards mostly in terms of external sanctions, whereas females may internalize moral standards. If so, then the results of his study are consistent with the distinction between the actual/own:ought/own discrepancy (for females) and the actual/own:ought/other discrepancy (for males) proposed in the model. Moreover, fear and anticipation of punishment were uncorrelated with expressions of guilt, consistent with the model's proposal that these emotions have distinct underlying causes. In another study, Hoffman (1971) also found that emphasis on an ought/other standard (as measured by identification with one's parents' moral standards) was not associated with guilt or moral confession but was associated with conformity to rules (presumably because of anticipation of punishment).

In a direct test of self-discrepancy theory, I and my colleagues (Higgins, Klein, & Strauman, 1985) had undergraduates fill out a questionnaire designed to measure their self-discrepancies (the Selves questionnaire) as well as a variety of questionnaires that measured different kinds of chronic discomfort and emotional symptoms. The Selves questionnaire asked respondents to list up to 10 traits or attributes for each of a number of different self-states. It was administered in two sections, the first involving the respondent's own standpoint and the second involving the standpoints of the respondent's father, mother, and closest friend. In the beginning of the questionnaire the actual, ideal, and ought self-states were defined (as described earlier). Each page of the questionnaire concerned a particular self-state: for example, "Please list the attributes of the type of person *you* think you *actually* are" or "Please list the attributes of the type of person your *Mother* believes you *should* or ought to be." By having subjects spontaneously list the attributes associated with each of their self-states (as opposed to a constrained, checklist procedure), we increased the likelihood that the attributes obtained would be important and accessible to each subject.

The subjects were also instructed to rate the overall extent to which a particular standpoint (self, mother, etc.) on a particular domain of self (actual, ideal, ought) was relevant or meaningful to them as a source of information. This was done because self-

discrepancy theory assumes that only *relevant standpoints* are motivationally or emotionally significant. Indeed, a study by R. Klein and Higgins (1984) found preliminary support for this assumption. Undergraduates filled out a questionnaire containing some questions that measured the relevance of the standpoint of different significant others designated by their role relationship to the subject (e.g., mother, father, best friend) with respect to different domains (e.g., for the ought domain, "Whose viewpoint on the type of person you should or ought to be matters most to you?"; "Whose viewpoint matters least to you?"). A few weeks later, as part of a different study, the subjects were asked to imagine different types of performance: guide discrepancies involving the standpoints of different significant others, and they reported how the event would make them feel. As expected, the magnitude of discomfort reported was significantly greater ($p < .05$) when the "other" standpoint was the most relevant to the domain than when it was the least relevant.

This effect of standpoint relevance is consistent with Newcomb's (1968) conclusion concerning the discomfort associated with incompatible beliefs:

An individual's most salient concern, in dealing with such multiple cognitions, is the suitability of the other person as a source of information, or support, or of influence concerning the object cognized by each of them. Insofar as the other person is devalued in this context, he will be indifferent to the latter's cognitions. (p. 50)

Newcomb's research suggests that standpoint relevance is critical for whether self-state incompatibility will induce discomfort (see also Rogers, 1961; Rosenberg, 1979).

Thus in the Higgins, Klein, and Strauman (1985) study, subjects' ratings of the relevance of the different significant others were used to select for each domain that "other" who was most relevant to the subject. Four different types of self-discrepancies were then calculated: actual/own:ideal/own; actual/own:ideal/other; actual/own:ought/other; and actual/own:ought/own. First, for each self-discrepancy the attributes in one self-state were compared to the attributes in the other self-state to determine which attributes *matched* (i.e., both self-states listed the same attribute; synonyms were considered to be the same attribute) and which attributes *mismatched* (i.e., an attribute in one self-state was an antonym of an attribute in the other self-state). Second, the self-discrepancy score for the two self-states was calculated by subtracting the total number of matches from the total number of mismatches.

In order to measure chronic discomfort and emotional symptoms, the following measures were used (for more details about these measures, see Higgins, Klein, & Strauman, 1985): the Beck Depression Inventory (Beck, Ward, Mendelson, Mock, & Erbaugh, 1961), the Blatt Depressive Experiences Questionnaire (Blatt et al., 1976), the Hopkins Symptom Checklist (Derogatis, Lipman, Rickels, Uhlenhuth, & Covi, 1974), and the Emotions Questionnaire (Higgins, Klein & Strauman, 1985).

Because the published results of our study did not consider all four possible types of actual/own:guide discrepancies, the data from this study were reanalyzed to compare all four types of discrepancies. To test the hypothesis of self-discrepancy theory, partial correlations between each of the discrepancies and each of the items were calculated, partialing out the contribu-

tion to each correlation deriving from their common relation to all the other discrepancies (*all* significant partial correlations are reported):

1. Actual/own versus ideal/own: We predicted this discrepancy would be associated with feelings of disappointment and dissatisfaction in particular and with dejection in general. As predicted, the actual/own:ideal/own discrepancy was uniquely associated ($p < .05$) with subjects' feeling "disappointed," "dissatisfied," *not* feeling "effective," feeling "blameworthy," and "feeling no interest in things."

The actual/own:ideal/own discrepancy was also uniquely associated ($p < .05$) with the Introjection subscale of the Blatt Depressive Experiences Questionnaire, which consists mostly of items measuring general discrepancy with standards, especially ideal standards (e.g., "I often find that I don't live up to my own standards or ideals") and general dejection (e.g., "There are times when I feel empty inside"). In general, then, the results of this study suggest that the actual/own:ideal/own discrepancy is associated with *dejection from perceived lack of effectiveness or self-fulfillment*.

2. Actual/own versus ideal/other: We predicted this discrepancy would be associated with feeling shame and embarrassment in particular and with dejection in general. As predicted, the actual/own:ideal/other discrepancy was uniquely associated ($p < .05$) with subjects' feeling lack of "pride," lack of feeling "sure of self and goals," "feeling lonely," "feeling blue," and "feeling no interest in things."

The actual/own:ideal/other discrepancy was also uniquely associated ($p < .05$) with the Blatt Introjection subscale as well as with the Blatt Anaclitic subscale, which mostly measures beliefs concerning dependency on others and sensitivity to others' expectations (e.g., "If I fail to live up to expectations, I feel unworthy," "I am very sensitive to others for signs of rejection"). In general, then, the results of this study suggest that the actual/own:ideal/other discrepancy is associated with *dejection from perceived or anticipated loss of social affection or esteem*.

3. Actual/own versus ought/other: This discrepancy was predicted to be associated with fear and feeling threatened in particular and with agitation in general. The actual/own:ought/other discrepancy was uniquely associated ($p < .05$) with subjects' suffering "spells of terror or panic," feeling "suddenly scared for no reason," feeling "so concerned with how or what I feel that it's hard to think of much else," and feeling "shame." The association between feeling "shame" or "lack of pride" and possessing a discrepancy from either a significant other's ought standard or a significant other's ideal standard supports the position, discussed earlier, that shame is associated with "other" standpoints on either moral or nonmoral domains (e.g., Ausubel, 1955; Lewis, 1979). In general, the results of this study suggest that the actual/own:ought/other discrepancy is associated with *agitation from fear and threat*.

4. Actual/own versus ought/own: This discrepancy was predicted to be associated with feelings of guilt and self-contempt in particular and with agitation in general. As predicted, the actual/own:ought/own discrepancy was associated with "feelings of worthlessness" and was the only type of discrepancy that was uniquely associated with feelings of "guilt." But the latter correlation was *negative*, partial $r(49) = -.27$, $p < .05$. In a later study (Strauman & Higgins, 1987), we also found that the

actual/own:ought/own discrepancy was uniquely but negatively associated with "anxiety over transgressions of rules," partial $r(59) = -.26, p < .05$. Although the direction of these results was not expected, the overall pattern is consistent with an analysis of "guilt" provided by Horney (1939) and others (e.g., Cameron, 1963). Horney suggested that the more people's feelings of guilt or self-recrimination for moral transgression are genuine, the more they may refrain from expressing them. Indeed, it has been suggested that "guilty" neurotics tend to deny their feelings of guilt and instead express them as feelings of worthlessness that less directly imply sinfulness.

There was also evidence that the actual/own:ought/own discrepancy was uniquely associated ($p < .05$) with the following emotional symptoms: "feeling irritated all the time," "feeling low in energy or slowed down," "feeling no interest in things," and "feeling everything is an effort." This cluster of emotional symptoms is consistent with the classic description of "guilty" or "anxiety" neurotics as suffering from irritability and fatigue (see Cameron, 1963). In general, then, the results of this study tentatively suggest that the actual/own:ought/own discrepancy is associated with *agitation from self-criticism*. Further research on this discrepancy is clearly needed, however, to test this hypothesis.

We also found evidence of distinct self-discrepancy-discomfort associations in a study by Strauman and Higgins (1987) that extended and refined the Higgins, Klein, and Strauman (1985) study in a number of respects. First, the method for calculating the magnitude of self-discrepancies was improved. In the Selves questionnaire, after respondents listed the attributes for each self-state, they were asked to rate the extent to which the standpoint person (self or other) either believed they actually possessed or ought to possess or wanted them ideally to possess each attribute they listed. The 4-point rating scale ranged from *slightly* (1) to *extremely* (4). These ratings permitted a new distinction to be made—between "true" matches, where synonymous attributes across two self-states also had ratings that varied by no more than 1 scale point, and synonymous "mismatches," where synonymous attributes across two self-states had ratings that varied by 2 or more scale points (e.g., actual/own: "slightly attractive" versus ideal/own: "extremely attractive"). Antonymous attributes across two self-states continued to be coded as mismatches. This new measure of the magnitude of self-discrepancy, then, reserves the "match" classification to cases of true overlap and takes into account the severity of a mismatch.

The second improvement in the study was the collection of the various measures of discomfort and emotional symptoms approximately 2 months after subjects filled out the Selves questionnaire. The delay both reduced the likelihood that subjects would respond to the discomfort measures by trying to relate them to their answers on the Selves questionnaire and permitted a test of the stability of the self-discrepancy-discomfort associations over a period of time. The final improvement was the development of subscales reflecting distinctive kinds of discomfort that could be used as multi-item measures to replace the item-by-item analyses performed in our 1985 study. We accomplished this refinement by performing a series of factor analyses on subjects' responses to the unambiguously dejection-related and agitation-related items in the Beck Depression Inventory

(BDI), the Blatt Depressive Experiences Questionnaire (BDEQ), the Hopkins Symptom Checklist (HSCL), and the Emotions Questionnaire (EQ).

These analyses identified two distinct sets of items (i.e., high within-set intercorrelations and low between-set intercorrelations), which reflected a "disappointment/dissatisfaction" emotional syndrome and a "fear/restlessness" syndrome, as follows:

1. *Disappointment/dissatisfaction*: (a) "disappointed in yourself" (EQ); (b) "I am very satisfied with myself and my accomplishments" (BDEQ, reversed scoring); (c) "I feel I am always making full use of my potential abilities" (BDEQ, reversed scoring); (d) "uncertain over ability to achieve goals" (EQ); and (e) "blaming yourself for failure to achieve goals" (EQ).

2. *Fear/restlessness*: (a) "feeling you are or will be punished" (BDI); (b) "feeling afraid to go out of your house alone" (HSCL); (c) "feeling afraid to travel on buses, subways or trains" (HSCL); (d) "sleep that is restless or disturbed" (HSCL); and (e) "feeling so restless you couldn't sit still" (HSCL).

According to self-discrepancy theory, the actual/own:ideal/own discrepancy should be related to the disappointment/dissatisfaction cluster, whereas the actual/own:ought/other discrepancy should be related to the fear/restlessness cluster. And indeed they were: the actual/own:ideal/own discrepancy was significantly related to the disappointment/dissatisfaction subscale (as measured 2 months later), $r(70) = .38, p < .001$, and the actual/own:ought/other discrepancy was significantly related to the fear/restlessness subscale, $r(70) = .42, p < .001$. But the critical question is whether these associations are unique. To test this, each of the self-discrepancies was related to each of the kinds of discomfort, with the contribution to the association between each pair of variables from their associations to the alternative variables being statistically removed. The partial correlational analysis revealed, as predicted, that the actual/own:ideal/own discrepancy was uniquely related to the disappointment/dissatisfaction cluster (as measured 2 months later), partial $r(66) = .30, p = .01$, but was unrelated to the fear/restlessness cluster, partial $r(66) = -.08, p > .35$. The actual/own:ought/other discrepancy was uniquely related to the fear/restlessness cluster, partial $r(66) = .35, p < .01$, but was unrelated to the disappointment/dissatisfaction cluster, partial $r(66) = .04, p > .50$.

It should be noted that, as predicted by self-discrepancy theory, it was the actual/own discrepancy from the self-guide as defined by both domain *and* standpoint that was critical for predicting each distinctive kind of emotional syndrome. Consistent with the theory's predictions concerning which specific type of self-discrepancy would be associated with which particular kind of discomfort, the disappointment/dissatisfaction cluster was significantly correlated with the actual/own:ideal/own discrepancy but *not* with the actual/own:ideal/other discrepancy ($p > .10$), and the fear/restlessness cluster was significantly correlated with the actual/own:ought/other discrepancy but *not* with the actual/own:ought/own discrepancy ($p > .5$).

This study also tested the theory's prediction that the actual/own:ideal/own discrepancy and the actual/own:ought/other discrepancy are associated with two different kinds of anger—frustration and resentment, respectively. The partial correla-

tional analysis revealed, as expected, that the actual/own:ideal/own discrepancy was uniquely related to "frustration" (as measured 2 months later), partial $r(66) = .36, p < .01$, but not with "resentment" ($p > .15$), whereas the actual/own:ought/other discrepancy was uniquely associated with "resentment," partial $r = .39, p < .01$, but not with "frustration" ($p > .2$).

Evidence That Magnitude and Accessibility of Different Types of Self-Discrepancy Determine Kind of Discomfort

Self-discrepancy theory proposes that the greater the magnitude and accessibility of a particular type of self-discrepancy, the more its possessor will experience the kind of discomfort associated with it. That is, the theory proposes that discomfort is influenced by two factors: (a) The magnitude of one's available types of self-discrepancies—the greater the discrepancy, the more intensely its possessor will experience the kind of discomfort associated with it. Thus, everything else being equal, one will experience most intensely the kind of discomfort associated with the greatest self-discrepancy. (b) The accessibility of one's available types of self-discrepancies—the greater the accessibility of a particular type of discrepancy, the more likely its possessor will experience the kind of discomfort associated with it. Thus, everything else being equal, one is most likely to experience the kind of discomfort associated with the most accessible self-discrepancy. These implications of the central hypothesis of the theory were directly tested in a couple of recent experimental studies (Higgins, Bond, Klein, & Strauman, 1986).

The first study tested whether the kind of discomfort that resulted from focusing on a negative event would vary depending on the type of self-discrepancy that was predominant for an individual (i.e., the type of self-discrepancy with the greatest magnitude). Undergraduates were asked to imagine either a positive event in which performance matches a common standard (e.g., receiving a grade of A in a course) or a negative event in which performance fails to match a common standard (e.g., receiving a grade of D in a course that is necessary for obtaining an important job). For the "negative event" condition, we expected that subjects with a predominant actual:ideal discrepancy would show an increase in dejection-related emotions, whereas subjects with a predominant actual:ought discrepancy would show an increase in agitation-related emotions. For the "positive event" condition, we expected that the subjects' predominant self-discrepancies would produce less effect on their emotions because the negative psychological situations associated with the discrepancies would not be applicable to positive events (see Higgins & King, 1981; see also Mischel, 1984, for a similar argument).

Subjects filled out the Selves questionnaire a few weeks before the experimental session. They were divided into high and low actual:ideal discrepancy groups at the median of their actual/own:ideal/own discrepancy scores, and into high and low actual:ought discrepancy groups at the median of their actual/own:ought/own discrepancy scores. We then used these divisions to create two distinct groups of subjects varying on which type of discrepancy was predominant—a high actual:ideal discrepancy/low actual:ought discrepancy group and a high ac-

tual:ought discrepancy/low actual:ideal discrepancy group. When the subjects arrived at the experimental session, they first completed a semantic differential questionnaire that assessed their general mood prior to the experimental manipulation. They also performed a simple writing-speed task. Writing-speed scores have been found to decrease following a "sad" mood induction (Natale & Hantas, 1982). Subjects then received either the positive or negative guided-imagery task, modeled after a procedure used by Wright and Mischel (1982). Following the guided-imagery task, subjects were given the writing-speed test for the second time. They then filled out the Multiple Affect Adjective Checklist (MAACL; Zuckerman & Lubin, 1965) to measure their current feelings.

The MAACL was used to create a summary score for dejection-related emotions (e.g., blue, discouraged, low, happy [reversed for scoring], satisfied [reversed for scoring]) and a summary score for agitation-related emotions (e.g., afraid, agitated, desperate, calm [reversed for scoring], quiet [reversed for scoring]). A Type of Self-Discrepancy (predominant actual:ideal discrepancy; predominant actual:ought discrepancy) \times Event Focus (positive event; negative event) \times Kind of Discomfort (dejection-related; agitation-related) analysis of variance (ANOVA) was performed on the postmanipulation mood scores, with subjects' premanipulation mood (as measured by the semantic differential) as a covariate. We found a significant three-way interaction. As predicted, there was no difference between predominant actual:ideal discrepancy subjects and predominant actual:ought discrepancy subjects in their dejection-related and agitation-related mood scores when they were exposed to a positive event; but when they were exposed to a negative event, predominant actual:ideal discrepancy subjects felt significantly more dejected than did predominant actual:ought discrepancy subjects, whereas the latter tended to feel more agitated than their counterparts.

We also tested the hypothesis by performing a Type of Self-Discrepancy \times Event Focus ANOVA on the percentage of increase in subjects' writing speed, again using subjects' premanipulation mood as a covariate. We found a two-way interaction. As predicted, the predominant actual:ideal discrepancy subjects were slower following the negative event focus as compared to the positive event focus, whereas the predominant actual:ought discrepancy subjects were, if anything, faster.

The results of this first study indicated that both the intensity and the quality of emotional change induced by focusing on an event that was likely to be experienced as negative varied as a function of the magnitude and type of self-discrepancy that was predominant for a subject (as measured weeks earlier). Thus we verified the hypothesized relation between the relative magnitude of different types of discrepancies and differences in emotional change.

The purpose of the second study was to demonstrate our second hypothesized relation, between the relative accessibility of different types of self-discrepancies and differences in emotional change. Four to 6 weeks before the experimental session, undergraduates completed the Selves questionnaire. Two groups of subjects were recruited for the experiment (for further procedural details, see Higgins, Bond, Klein, & Strauman, 1986)—subjects who were relatively high on both actual:ideal discrepancy (i.e., actual/own:ideal/own discrepancy and ac-

tual/own:ideal/other discrepancy combined) and actual:ought discrepancy (i.e., actual/own:ought/own discrepancy and actual/own:ought/other discrepancy combined) and subjects who were relatively low on both discrepancies. The ostensible purpose of the study was to obtain the self-reflections of a youth sample for a life-span developmental study. The subjects were told that their mood during the study would be checked because previous research indicated that mood can sometimes influence people's self-reflections. This cover story provided the rationale for obtaining mood measures both before and after the experimental manipulation.

Half of the subjects in each discrepancy group were randomly assigned to an ideal priming condition, and the other half were assigned to an ought priming condition. In the ideal priming condition, the subjects were asked (a) to describe the kind of person that they and their parents would ideally like them to be and the attributes that they and their parents hoped they would have, and (b) to discuss whether there had been any change over the years in these hopes and aims. In the ought priming condition, subjects were asked (a) to describe the kind of person that they and their parents believed they ought to be and the attributes that they and their parents believed it was their duty or obligation to have, and (b) to discuss whether there had been any change over the years in these beliefs. Both before and after this priming manipulation, subjects filled out a mood questionnaire that identified both dejection-related emotions (e.g., sad, disappointed, and enthusiastic [reversed for scoring]) and agitation-related emotions (e.g., tense, nervous, and calm [reversed for scoring]). The subjects were asked to rate the extent to which they *now* were feeling each emotion on a 6-point scale that ranged from *not at all* (0) to *a great deal* (5). The scores for the dejection-related emotions were combined to create a dejection measure, and the scores for the agitation-related emotions were combined to create an agitation measure.

For the subjects who were high in both types of self-discrepancies, we predicted the kind of discomfort associated with the type of self-discrepancy whose accessibility was temporarily increased by the priming manipulation—an increase in dejection-related emotions in the ideal priming condition and an increase in agitation-related emotions in the ought priming condition. In contrast, for the subjects who were low in both types of self-discrepancies, we predicted that the priming manipulation would, if anything, decrease the kind of discomfort associated with the primed discrepancy (i.e., make them feel better by reminding them of goals or obligations they have met)—a slight decrease in dejection-related emotions in the ideal priming condition and a slight decrease in agitation-related emotions in the ought priming condition. To test these predictions, a Level of Self-Discrepancy (high actual:ideal and high actual:ought; low actual:ideal and low actual:ought) \times Type of Priming (ideal priming; ought priming) \times Kind of Discomfort (dejection-related; agitation-related) ANOVA was performed on subjects' mood change scores (i.e., the postpriming score minus the prepriming score).

As Table 1 shows, we found a significant three-way interaction. As predicted, ideal priming increased high-discrepancy subjects' dejection and slightly decreased low-discrepancy subjects' dejection, whereas ought priming increased high-discrepancy subjects' agitation and slightly decreased low-discrepancy

Table 1
Mean Change in Dejection Emotions and Agitation Emotions as a Function of Level of Self-Discrepancies and Type of Priming

Level of self-discrepancies	Ideal priming		Ought priming	
	Dejection emotions	Agitation emotions	Dejection emotions	Agitation emotions
High actual:ideal and actual:ought discrepancies	3.2	-0.8	0.9	5.1
Low actual:ideal and actual:ought discrepancies	-1.2	0.9	0.3	-2.6

Note. Each of eight dejection emotions and eight agitation emotions was measured on a 6-point scale from *not at all* to *a great deal*. The more positive the number, the greater the increase in discomfort.

subjects' agitation. Thus, this study demonstrates that increasing the accessibility of different types of self-discrepancies increases different kinds of discomfort, but only for subjects whose magnitude of discrepancy is high (i.e., individuals for whom the self-discrepancies are available). And this occurs even for those who possess *both* types of self-discrepancies. The fact that people with both types of self-discrepancies can experience either an increase in dejection or an increase in agitation depending on which type of discrepancy is made temporarily more accessible by the momentary context explains why some people suffer from dejection and agitation at different moments in their lives.

The results of these studies indicate that activating self-discrepancies by having people think about negative events or their own personal guides (i.e., their hopes and goals or duties and obligations) will induce the kind of discomfort that is associated with the activated self-discrepancy. But if a self-discrepancy is a cognitive structure composed of the relation between two self-state representations (e.g., the relations between a person's actual/own attributes and his or her ought/other attributes), then it should be possible to *automatically* activate this structure, and thus induce its associated discomfort, by simply activating a single component of the structure. Moreover, given that the attributes in people's self-guides are inherently positive, activating even a *positive* attribute should induce discomfort if the attribute is a component of a person's self-guide and the person's actual/own value on the attribute is discrepant from his or her self-guide value on that attribute. And if it were possible to activate the self-discrepant structure and induce its associated discomfort with a task that did not even involve self-focused attention (i.e., a non-self-referential task), the notion that self-discrepancies are emotionally significant cognitive structures would be especially compelling. These possibilities were tested in a recent study by Strauman and Higgins (in press).

New York University undergraduates were asked to participate in a study on "physiological effects of perceiving others" in which they were given phrases of the form, "An *x* person is _____" (where *x* would be a trait adjective such as "friendly" or "intelligent") and were asked to complete each sentence as quickly as possible. For each sentence, each subject's total ver-

balization time and skin conductance amplitude were recorded. In addition, subjects reported their mood at the beginning and end of the session. The subjects were either predominantly actual:ideal discrepant or predominantly actual:ought discrepant as measured at least 4 weeks earlier. Each of these groups of subjects was randomly assigned to one of three priming conditions: (a) "nonmatching" priming, where the trait adjectives were attributes in a subject's self-guide but the attributes did not appear in the subject's actual/own self-concept; (b) "mismatching" priming, where the trait adjectives were attributes in a subject's self-guide and the value of these attributes in the subject's actual/own self-concept was discrepant from the value in the self-guide; and (c) "yoked (mismatching)" priming, where the trait adjectives were attributes that did *not* appear in either a subject's self-guide or actual/own self-concept but were the *same* attributes that appeared as the trait adjectives for some other subject in the "mismatching" priming condition. In addition to these trait adjectives that defined the three subject-related priming conditions, all subjects received the same set of "subject-unrelated" trait adjectives, which were attributes that did not appear in any of the subjects' self-guides or actual/own self-concepts.

The basic prediction was that priming mismatching attributes would induce a dejection-related syndrome (i.e., mood, physiology, and behavior) in ideal-discrepant subjects but would induce an agitation-related syndrome in ought-discrepant subjects. The results were consistent with this prediction. The greatest increase in dejection-related emotions (from the beginning to the end of the session) occurred for ideal-discrepant subjects in the "mismatching" priming condition, and the greatest increase in agitation-related emotions occurred for ought-discrepant subjects in the "mismatching" priming conditions ($p < .05$). The same basic pattern of results was also found on the physiological and behavioral measures. As shown in Table 2, in the "mismatching" priming condition, ideal-discrepant subjects' mean skin conductance amplitudes and total verbalization time *decreased* (for subject-related attributes as compared with subject-unrelated attributes), whereas ought-discrepant subjects' mean skin conductance amplitudes and total verbalization time *increased* (both $ps < .05$). As predicted, for the subject-related attributes in the mismatching priming condition, the differences between actual:ideal discrepant subjects and actual:ought discrepant subjects in mean skin conductance amplitude and mean total verbalization time were quite striking (both $ps < .01$).

Self-Discrepancies and Emotional Problems

The results of these various correlational and experimental studies provide considerable support for the central hypothesis of self-discrepancy theory. Further support is provided by some additional evidence that also raises an important question: Given that people can suffer greatly from discrepancies between their actual self-state and their self-guides, why do they not simply lower or change their self-guides to reduce the discrepancy?

It is socialization factors in the etiology of self-discrepancies, I believe, that provide the answer both to why they do not and to why self-discrepancies can be so painful. Perhaps people possessing actual:ought discrepancies had an early history of pa-

Table 2
Mean Standardized Skin Conductance Amplitude and Mean Total Verbalization Time as a Function of Type of Self-Discrepancy and Type of Priming for Subject-Related and Subject-Unrelated Attributes

Type of self-discrepancy and type of priming	Subject-unrelated attributes	Subject-related attributes
Mean standardized skin conductance amplitude ^a		
Actual:ideal discrepancy		
Mismatching	-0.10	-0.30
Nonmatching	-0.21	0.19
Yoked (mismatching)	-0.02	0.24
Actual:ought discrepancy		
Mismatching	-0.14	0.26
Nonmatching	-0.25	0.09
Yoked (mismatching)	-0.09	0.14
Mean total verbalization time ^b		
Actual:ideal discrepancy		
Mismatching	1.59	1.31
Nonmatching	1.89	1.97
Yoked (mismatching)	2.15	2.26
Actual:ought discrepancy		
Mismatching	1.99	2.47
Nonmatching	1.60	1.65
Yoked (mismatching)	1.40	1.42

^a All values are standardized using the mean and standard deviation skin conductance amplitude from each subject's priming trials (subject-related and unrelated attributes).

^b The length in seconds of each subject's total verbal response to each attribute phrase.

rental interactions that involved the presence of negative outcomes—for example, parents who criticized, punished, or rejected them for not being the type of child their parents believed they ought to be; parents who were intrusive or controlling in order to make them become the type of child the parents believed they ought to be; parents who communicated to them their worries about them or their own fear and dread of the world in general. In contrast, people possessing actual:ideal discrepancies may have had an early history of parental interactions that involved the absence of positive outcomes—for example, parents who withdrew from them, abandoned them, or paid little attention to them whenever they were not the type of child the parents wanted or hoped for; parents who did not or could not satisfy the child's needs for love, nurturance, or approval; parents who communicated to them their disappointment in them or their own feelings of hopelessness, sadness, and discouragement about life. People possessing both types of self-discrepancies may have experienced both kinds of negative interactions with their parents.

It is likely that children are motivated to avoid the negative psychological situation associated with their parents' negative interactions with them. To do so, children must learn to anticipate these events and discover how their own responses and attributes increase or decrease the likelihood that these events will occur. This learning process ultimately leads to the acquisition of mental representations of their parents' ideal guides for them

(to avoid the absence of positive outcomes) and/or their parents' ought guides for them (to avoid the presence of negative outcomes). It also causes children to acquire beliefs about the negative consequences of failing to meet their parents' guides. It is well known, for example, that depressed people often grow up believing that their parents' care, affection, and approval are dependent on their living up to and pursuing their parents' standards for them (see Arieti & Bemporad, 1978; Beck, 1967; Guidano & Liotti, 1983).

If children believe that it is essential to meet their parents' guides to avoid experiencing a negative psychological situation, then a failure to do so (as reflected in a discrepancy between their current state and the end-state represented by their parents' guides for them) is likely to induce intense emotional discomfort. In order to avoid this intense pain, the child must attempt to meet the parents' guides, which requires in turn that the child monitor his or her progress toward meeting the guide. Such monitoring involves comparing a current performance or attribute to the standard represented by the guide. This means that the current level of the attribute is interpreted in reference to the guide rather than in reference to some factual standard, such as the child's previous level of the attribute (see Higgins, Strauman, & Klein, 1986). Over time, then, the child's actual/own self may be constructed, at least in part, in reference to his or her guides. Thus to the extent that children believe it is essential to meet the guides for them, they are more likely to acquire actual:guide discrepancies, they are more likely to suffer intensely from any discrepancy they do possess, and they are more likely to resist any attempt to modify their guides.

We have argued (Higgins, Klein, & Strauman, 1985) that in order for self-discrepancy theory to be maximally useful as an approach for understanding, and eventually treating, emotional problems, it must be extended to include variables that reflect personal beliefs about the interpersonal consequences of possessing the discrepancy. Therefore, a measure of beliefs in such contingencies was included in Strauman and Higgins's (1987) study described earlier. Part of a general Socialization Questionnaire asked the subjects the following kinds of questions: (a) "Have you ever felt unloved because you didn't live up to your parents' *ideals* for you? To what extent?" (b) "Have you ever felt you would be emotionally abandoned if you didn't live up to your parents' *ideals* for you? To what extent?" (c) "Did you ever believe that your parents would reject you if you didn't live up to their *oughts* for you? To what extent?" Subjects' scores for the three ideal questions were averaged to form an overall ideal-outcome contingency score, and their scores for the three ought questions were averaged to form an overall ought-outcome contingency score.

As described earlier, subjects' self-discrepancies were obtained weeks before they answered the questionnaires measuring their emotional problems. Using tertiary splits, we divided the subjects into three levels—high, medium, and low—with regard to both actual:ideal discrepancy (i.e., actual/own:ideal/own discrepancy and actual/own:ideal/other discrepancy combined) and actual:ought discrepancy (i.e., actual/own:ought/own discrepancy and actual/own:ought/other discrepancy combined). Using median splits, we also divided the subjects into two levels of ideal-outcome contingency and two levels of ought-outcome contingency. We then performed a Level of Ac-

Table 3
Squared Multiple Correlations Between Domain of Self-Discrepancy Plus Outcome Contingency and Type of Emotional Problem

Domain of self-discrepancy and outcome contingency	BDI depression	HSCL depression	HSCL anxiety	HSCL paranoid
Ideal	.39***	.27***	.18*	.11
Ought	.11	.17*	.22**	.24**

Note. BDI = Beck Depression Inventory; HSCL = Hopkins Symptom Checklist. $N = 70$.

* $p < .05$. ** $p < .01$. *** $p < .001$.

tual: Ideal Discrepancy \times Level of Ideal-Outcome Contingency ANOVA and a Level of Actual:Ought Discrepancy \times Level of Ought-Outcome Contingency ANOVA for each of a set of general measures of emotional problems.

Our most important prediction was that the intensity of the subjects' emotional problems would be related to both their level of self-discrepancy and their level of outcome contingency and that the quality of their emotional problems would depend on the type of self-guide involved (i.e., ideal vs. ought). Table 3 shows the results. As predicted, an actual:ideal discrepancy combined with an ideal-outcome contingency was strongly associated with depressive (i.e., dejection-related) symptoms but had a relatively weak association with anxiety/paranoid (i.e., agitation-related) symptoms, whereas the reverse was true for an actual:ought discrepancy combined with an ought-outcome contingency. (For other results of this study, see Higgins, Klein, & Strauman, 1987.)

The results in Table 3 suggest that there is some relation (although weak) between an actual/own:ideal/own discrepancy and agitation-related symptoms and some relation between an actual/own:ought/other discrepancy and dejection-related symptoms. This apparent weak relation, however, could be due to the intercorrelation between the two types of self-discrepancies. In order to control statistically for this potential factor, analyses of covariance were performed in which level of actual:ought discrepancy was the covariate for the analyses involving the ideal domain, and level of actual:ideal discrepancy was the covariate for the analyses involving the ought domain. These analyses replicated the significant relation between ideal domain and depressive symptoms and the significant relation between ought domain and anxiety/paranoid symptoms, but both the relation between ideal domain and anxiety and the relation between ought domain and depression were no longer significant ($p > .20$).

The ability of self-discrepancy theory to discriminate between people vulnerable to mild depression and those susceptible to anxiety was retested in a subsequent study by Strauman and Higgins (1987). We used a latent variable analysis to evaluate simultaneously the validity of the predicted constructs (see Bentler, 1980). Introductory psychology students first filled out the Selves questionnaire as part of a battery of measures they received at the beginning of the semester. Approximately 1

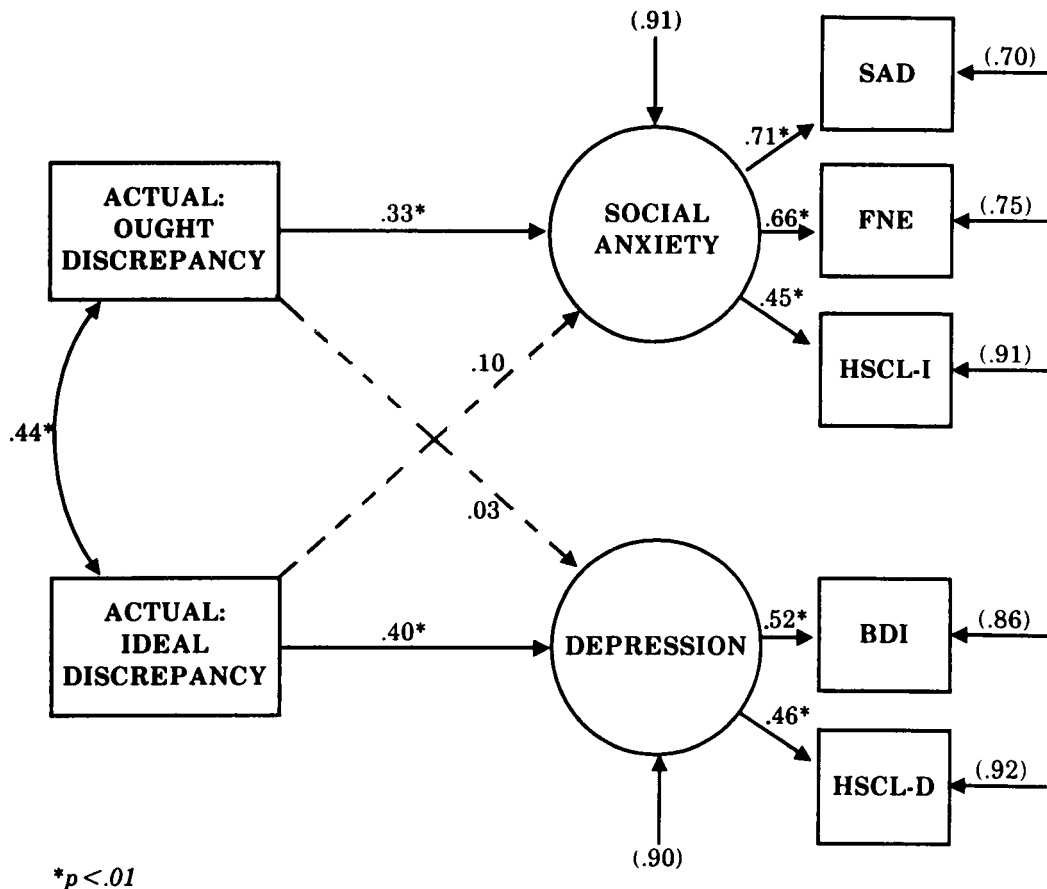


Figure 1. Latent-variable model relating type of self-discrepancy (actual/own:ideal/own discrepancy; actual/own:ought/other discrepancy) to kind of emotional problem (depression, social anxiety). (SAD = Social Avoidance and Distress Scale; FNE = Fear of Negative Evaluation Scale; HSCL = Hopkins Symptom Checklist, I = Interpersonal Sensitivity subscale, D = Depression subscale; BDI = Beck Depression Inventory.)

month later they filled out another battery of measures that comprised both the latent variable for *depression*—the Beck Depression Inventory (BDI) and the Hopkins Symptom Checklist Depression subscale (HSCL-D)—and the latent variable for *social anxiety*—the Fear of Negative Evaluation Scale (FNE; Watson & Friend, 1969), the Social Avoidance and Distress Scale (SAD; Watson & Friend, 1969), and the Hopkins Symptom Checklist Interpersonal Sensitivity subscale (HSCL-I).

The hypothesized causal structure—the validity of both the depression construct and the social anxiety construct, a relation between actual/own:ideal/own discrepancy and depression that is independent of a relation between actual/own:ought/other discrepancy and social anxiety, and vice versa—was the only model to provide an acceptable fit to the sample data, $\chi^2(11, N = 163) = 16.70, p > .15$. (For further discussion of the comparison of the hypothesized causal structure with alternative models, see Strauman & Higgins, 1987.) As Figure 1 shows, actual/own:ideal/own discrepancy was uniquely associated with depression but not with anxiety, whereas actual/own:ought/other discrepancy was uniquely associated with social anxiety but not with depression. The results of this study, then, strongly support the predictions of self-discrepancy theory.

Comparison to Other Theories Relating Self-Beliefs and Affect

What is the relation between self-beliefs and affect? This has been a central question from the beginning of psychologists' interest in the self. And the general answer most often given is that incompatible self-beliefs produce emotional problems. Among a wide array of possibilities, three basic types of incompatible self-beliefs can be identified: (a) inconsistencies between one's self-perceived attributes (or self-concept) and external, behavioral feedback related to one's self-perceptions; (b) contradictions among one's self-perceived attributes that impede a coherent and unified self-concept; and (c) discrepancies between one's self-perceived attributes and some standard or self-guide. Self-discrepancy theory is an example of the latter type of theory.

Inconsistencies between one's self and external feedback can occur from one's own responses or the responses of others. Aronson's (1969) version of cognitive dissonance theory (Festinger, 1957), with its emphasis on self-expectancies, is an example of the former case. The theory proposes that when people behave in a manner that is inconsistent with their self-concept,

they experience discomfort (see also Bramel, 1968; Rogers, 1959), as when someone who believes that he or she is decent and truthful persuades another person to perform a task that he or she knows is boring. Wicklund and Gollwitzer's (1982) symbolic self-completion theory proposes that people who are committed to a self-definition but have been unable to achieve it completely experience a psychological tension that motivates self-completion strategies. Swann's (1983) self-verification theory is also concerned with inconsistencies between self-concepts and external feedback, but it focuses on people's attempts to obtain responses from others that confirm their self-concept (see also Lecky, 1961; Wicklund & Gollwitzer, 1982). The theory states that people are distressed when they receive social feedback that is inconsistent with their self-concept, even when the feedback disconfirms a negative self-conception. People will seek out self-consistent social feedback and avoid self-inconsistent feedback in a manner reminiscent of the "selective exposure" hypothesis of cognitive dissonance theory (see Olson & Zanna, 1979; Wicklund & Brehm, 1976).

It has also been proposed that people need consistency among their self-perceived attributes in order to form a coherent and unified self-concept (see, for example, Allport, 1955; Brim, 1976; Epstein, 1973; Harter, 1986; Lecky, 1961; Morse & Gergen, 1970; Rogers, 1961; Snygg & Combs, 1949). Harter has found that adolescents are able to distinguish between those self-perceived opposite traits that are in conflict or inconsistent with each other (e.g., "smart" and "fun-loving" in school) and those that are not in conflict because they occur in different contexts (e.g., "outgoing" with friends and "shy" with romantic interests). As theories proposing the need for self-consistency suggest, the adolescents were distressed by their self-perceived conflicting traits.

The first two types of theories of incompatible self-beliefs emphasize the interrelation among self-perceived attributes, behaviors, and experiences—that is, the interrelation among different pieces of information about the actual self. The third type emphasizes the relation between the actual self and some standard or self-guide. These theories propose that discrepancies between our self-perceived attributes (or behavior) and some contextually salient standard or personal aspirations or values produce discomfort (e.g., Adler, 1964; Cantor & Kihlstrom, 1986; Cooley, 1902/1964; Duval & Wicklund, 1972; Freud, 1923/1961; Horney, 1950; James, 1890/1948; Markus & Nurius, 1987; Scheier & Carver, 1982; Sullivan, 1953). In his classic theory of the self, James distinguished between the motivational role of the self in prompting and regulating action (i.e., self-seeking, self-preservation) and in influencing the process of self-evaluation (i.e., self-estimation, self-appreciation). Theories of the third type vary in whether they emphasize the self-regulatory/action-eliciting aspect of the self (e.g., Cantor & Kihlstrom, 1986; Markus & Nurius, 1987; Scheier & Carver, 1982) or the self-evaluative aspect of the self (e.g., Adler, 1964; Cooley, 1902/1964; Horney, 1950).

Because past theories of incompatible self-beliefs have often not explicitly distinguished between actual-self attributes and self-guides (e.g., goals and values), some of them are, in fact, blends of the second and third types of theories (e.g., Harter, 1986; Lecky, 1961; Rogers, 1961; Snygg & Combs, 1949). In such cases it is not clear whether people's motivation is to have

a coherent, unified self per se—self-consistency for the sake of stability, predictability, or orderliness (like a "good Gestalt fit")—or whether their motivation is self-enhancement as defined in relation to their goals and values.

Self-discrepancy theory is an example of the third type of theory that emphasizes the self-evaluative aspect of the self, but it has a number of unique features:

1. It explicitly distinguishes among different types of self-guides in the different types of negative psychological situations that are represented by their discrepancy from the actual self-concept (e.g., an actual self-concept:ideal self-guide discrepancy representing the absence of positive outcomes; an actual self-concept:ought self-guide discrepancy representing the presence of negative outcomes).

2. It explicitly distinguishes among different self-guides in terms of the standpoint on the self that is involved. As I mentioned earlier, although Mead (1934) described the development of different standpoints, it is not clear in his theory whether the different standpoints on the self remain distinct. The distinction between private and public self-consciousness as chronic predispositions to be self-attentive (see Carver & Scheier, 1978; Fenigstein, Scheier, & Buss, 1975) seems to mirror the "own" versus "other" standpoint proposed here. But both "own" and "other" standpoints are personal, covert aspects of one's internally represented self-guides, and thus *both* of these standpoints would be associated with *private* self-consciousness. Moreover, in self-discrepancy theory only the internally represented standpoints of *significant* others are considered—not some general concern about how one appears and is observed by others (i.e., public self-consciousness).

3. It explicitly distinguishes between the availability of a self-discrepancy, as measured by the magnitude of a discrepancy between internally represented self-states, and the accessibility of a self-discrepancy, which can vary as a function of contextual priming.

Self-discrepancy theory could be used to provide a general framework for understanding the emotional consequences of incompatible self-beliefs. In particular, it could be used to distinguish among incompatible self-beliefs with regard to the different kinds of negative emotions they are likely to induce. The first two types of theories of incompatible self-beliefs, in particular, have tended to describe the emotional consequences of incompatibility only in very general terms, such as conflict, anxiety, or distress. If we consider the first type of theory, for example, it may be that the emotional impact of external behavioral feedback, whether from one's own response or from another person, depends on whether the actual/own attribute to which the feedback is relevant has implications for the person's self-discrepancies. If the behavioral feedback either disconfirms an actual/own attribute that currently matches an ideal/own attribute, confirms an actual/own attribute that currently mismatches an ideal/own attribute, or creates a new actual/own attribute that mismatches an ideal/own attribute, the person should feel disappointed and dissatisfied. On the other hand, if the behavioral feedback either disconfirms an actual/own attribute that currently matches an ought/other attribute, confirms an actual/own attribute that currently mismatches an ought/other attribute, or creates a new actual/own attribute that mis-

matches an ought/other attribute, the person should feel afraid and threatened.

One case of discomfort induced by disconfirming feedback would seem to be difficult to explain in terms of self-discrepancy theory: The case where someone who possesses negative or socially undesirable actual/own attributes is made uncomfortable by feedback disconfirming those attributes (see Swann, 1983). In self-discrepancy theory, however, whether an attribute is socially desirable is not relevant. What matters is whether an attribute matches or mismatches one's self-guides. It is possible, therefore, that a person could possess an attribute that is negative or socially undesirable but nevertheless matches one of his or her important self-guides. For example, even though an attribute is dysfunctional outside the home and does not meet a child's own wishes it could match what some significant other in the home wants the child to be or believes the child ought to be, such as in the case of a child whose parents believe it is his or her duty to be dependent, submissive, and diffident. According to self-discrepancy theory, disconfirming such "negative" attributes would induce discomfort because it would create a discrepancy with a self-guide; the kind of discomfort would depend on which type of self-discrepancy the disconfirmed attribute activated (e.g., fear and threat for an actual/own:ought/other discrepancy).

The second type of theory of incompatible self-beliefs concerns cases of discomfort from contradictions among self-attributes that impede a coherent and unified self. Some of these cases may reflect discrepancies between the attributes people believe they possess and the attributes that significant others believe they possess (i.e., an actual/own:actual/other discrepancy) or discrepancies between the attributes that two different significant others believe they possess (i.e., an actual/Other 1: actual/Other 2 discrepancy). Such discrepancies are often described as an "identity crisis" and are especially common in adolescence (see Erikson, 1950/1963, 1968; Harter, 1986).

As I mentioned earlier, other cases of this general type may reflect discrepancies involving self-guides and thus are actually instances of the third type of theory. Lecky (1961), for example, described the acute need for unity in adolescence caused by a challenge to values associated with the adolescents' parents from values associated with the adolescent's romantic partner. This conflict probably reflects a discrepancy between the kind of person the parents believe the adolescent ought to be and the kind of person the romantic partner would like the adolescent to be (i.e., an ought/Other 1:ideal/Other 2 discrepancy). Similarly, Harter (1986) provides the following example of a student's beliefs about how he or she should act in school—"I know I *should* be doing well in school. I get pressure from my father"—which is in conflict with the student's self-perceived actions. According to self-discrepancy theory, this actual/own:ought/other discrepancy should produce not only general conflict, as Harter suggests, but fear and threat in particular. And discrepancies with personal goals and desires, which Harter also describes, should produce disappointment and dissatisfaction. Self-discrepancy theory could potentially complement other theories of self-belief incompatibility by differentiating among the kinds of discomfort that incompatibility can produce as a function of the types of discrepancies reflected in the incompatibility.

Self-Discrepancies and Self-Concept Negativity (or Low Self-Esteem)

The notion that a discrepancy between one's self-concept (i.e., the perceived actual self) and one's preferred, potential self is associated with discomfort has been central to the literature on self-esteem (see Rosenberg, 1979; Wells & Marwell, 1976; Wylie, 1961, 1979). Although these descriptions are often not explicit about which self-guide is involved, it is usually the ideal self-guide discrepancy, with low self-esteem being associated with a high actual:ideal discrepancy. At the same time, some other researchers have defined low self-esteem as a global negative self-concept (see Demo, 1985). Indeed, some have questioned whether measuring "discrepancy" contributes anything beyond measuring just the "negativity" of self-concepts (see Hoge & McCarthy, 1983; Wells & Marwell, 1976; Wylie, 1961, 1979). The same question could be raised with respect to self-discrepancy theory: Does the notion of "discrepancy" contribute anything beyond the negativity of the actual self alone?

The results of our tests of self-discrepancy theory, described earlier, indicate that the notion of discrepancy is necessary if we wish to distinguish among different kinds of discomfort associated with a global "negative" self-concept. In one of the experiments, for example, subjects who possessed both an actual:ideal discrepancy and an actual:ought discrepancy experienced different kinds of discomfort depending on which self-guide was primed. Moreover, if global self-concept negativity was all that mattered and type of discrepancy was irrelevant, then our analyses partialing the effects of one type of discrepancy from the effects of another, where each discrepancy is calculated in relation to the same measure of the actual self-concept, would reveal nothing. The results of our studies, however, clearly support the conclusion that discomfort is induced by the negative psychological situation that the actual-self:self-guide discrepancy *as a whole* represents.

The contribution of the notion of discrepancy is also evident when we consider *cases of discrepancy that do not even involve the self-concept*. As I mentioned earlier, although this article focuses on the case of actual/own:self-guide discrepancies, self-discrepancy theory is not restricted to these discrepancies. For example, some people's personal hopes and wishes for themselves are discrepant from some significant other's beliefs about the kind of person it is their duty or obligation to be—an ideal/own:ought/other discrepancy (see Horney, 1946). Such Self-Guide 1:Self-Guide 2 discrepancies represent another type of negative psychological situation: a double approach-avoidance conflict. One would expect such conflicts to be associated with feeling confused or uncertain. The distinctiveness of this particular type of discrepancy-discomfort relation was tested in a recent study (Van Hook & Higgins, 1986).

Twenty-eight introductory psychology students were selected on the basis of their responses to the Selves questionnaire. Half of the subjects had at least one self-guide:self-guide mismatch and the other half had no self-guide:self-guide mismatches. Six to eight weeks later, all subjects filled out an emotions questionnaire that asked respondents to indicate how often they felt different kinds of emotions. The questionnaire identified dejection-related emotions (e.g., disappointed, dissatisfied, embarrassed), agitation-related emotions (e.g., tense, afraid, threat-

ened), anger-related emotions (e.g., angry, resentful), and confusion-related emotions (i.e., unsure of self/goals, muddled, confused about identity).

A Level of Self-Guide 1:Self-Guide 2 Discrepancy (high; low) \times Kind of Discomfort (dejection; agitation; anger; confusion) ANOVA was performed on the measure of frequency of discomfort. We found a highly significant main effect of level of Self-Guide 1:Self-Guide 2 discrepancy, $F(1, 26) = 17.03, p < .001$; that is, the high-discrepant group reported suffering discomfort more frequently than did the low-discrepant group. In addition, there was also a significant Level of Self-Guide 1:Self-Guide 2 Discrepancy \times Kind of Discomfort interaction, $F(3, 78) = 4.65, p < .01$. As predicted, the difference between the high-discrepant and low-discrepant groups in reported frequency of discomfort was greater for the confusion-related emotions (high, $M = 4.6$; low, $M = 2.9$) than for the other kinds of discomfort (high, $M = 4.0$; low, $M = 3.3$). These results suggest that the Self-Guide 1:Self-Guide 2 discrepancy, where the negativity of the subject's self-concept is not even part of the measurement of the discrepancy, is associated with another distinct kind of discomfort (i.e., confusion/uncertainty).

Although the results of these studies indicate that the notion of discrepancy is necessary if one wishes to distinguish among different types of emotional vulnerabilities, it is possible that if one wished only to predict low self-esteem, a measure of actual:ideal discrepancy would contribute nothing beyond a measure of global self-concept negativity. In fact, a recent study by Hoge and McCarthy (1983) reports that their measure of subjects' real self was superior to their measure of real-ideal discrepancy in predicting the subjects' scores on the Rosenberg (1965) and Coopersmith (1967) self-esteem scales.

There are serious limitations with this study, however. Perhaps most critical, subjects were presented with an experimenter-selected set of positive attributes for which they were to indicate their real and ideal selves (e.g., "I am good-looking"; "I am talented in arts and music"). With the exception of one dimension ("What *one thing* do you like to do best of all? How good are you at that?"), there was no guarantee that these attributes were important or relevant to individual subjects. Given that there are considerable individual differences in which attributes are important and accessible to subjects, and that many of the attributes listed by subjects in our previous studies were nonmatches (i.e., neither matches nor mismatches to self-guides), this nonidiographic approach may seriously underestimate the predictive power of actual:ideal discrepancy scores. Indeed, a nonidiographic measure of global self-concept positivity or negativity at least taps subjects' general self-evaluations, whereas a nonidiographic measure of actual:ideal discrepancy may totally miss those attributes that actually match or mismatch the subjects' particular self-guides. Thus, such a measure is especially inappropriate for testing the predictive power of the actual:ideal discrepancy.

In a recent study we used the Selves questionnaire measure of actual self-concept and actual:ideal discrepancy to reexamine this issue (Moretti & Higgins, 1987). In addition to filling out the Selves questionnaire, 41 psychology undergraduates filled out the Hoge-McCarthy measures, the Rosenberg Self-Esteem Scale, and the Coopersmith Self-Esteem Scale. The Selves measure of global self-concept negativity was calculated by cod-

ing each of the attributes listed by a subject in response to the actual/own question as being either positive or negative according to Anderson's (1968) norms of attribute likability, and then either simply totaling the negative attributes listed by a subject (the absolute global negativity score) or dividing the total number of negative attributes listed by the total number of attributes listed (the percentage global negativity score). The actual:ideal discrepancy score for each subject was calculated by combining his or her actual/own:ideal/own discrepancy score and his or her actual/own:ideal/other discrepancy score (as in Higgins, Klein, & Strauman, 1985).

The first result of interest was that the Selves measures of global self-concept predicted both measures of (high) self-esteem better than the less idiographic measure used by Hoge and McCarthy (1983):

1. Rosenberg Self-Esteem Scale—absolute negativity, $r(39) = -.35, p < .05$; percentage negativity, $r(39) = -.33, p < .05$; Hoge-McCarthy positivity, $r(39) = .26, p = .10$.
2. Coopersmith Self-Esteem Scale—absolute negativity, $r(39) = -.37, p < .02$; percentage negativity, $r(39) = -.43, p < .01$; Hoge-McCarthy positivity, $r(39) = .25, p = .10$.

But the critical question is whether the actual:ideal discrepancy contributes to the prediction of self-esteem beyond global self-concept negativity. To test this, the relation between actual:ideal discrepancy and each of the self-esteem measures was calculated, with the contribution to each relation from their common association to global self-concept negativity being partialled out:

1. Actual:ideal discrepancy and Rosenberg Self-Esteem Scale—partialling out absolute negativity, partial $r(38) = -.45, p < .01$; partialling out percentage negativity, partial $r(38) = -.47, p < .01$.
2. Actual:ideal discrepancy and Coopersmith Self-Esteem Scale—partialling out absolute negativity, partial $r(38) = -.50, p < .01$; partialling out percentage negativity, partial $r(38) = -.46, p < .01$.

These results clearly indicate that our measure of actual:ideal discrepancy contributes to the prediction of self-esteem beyond global self-concept negativity. Moreover, when the actual:ideal discrepancy was partialled out of the relation between self-esteem and global self-concept negativity, the correlations between the global self-concept negativity measures and the self-esteem measures were not significant (all $ps > .10$).

General Discussion and Conclusions

Self-discrepancy theory shares a long tradition in psychology of models proposing that incompatible beliefs, and particularly self-beliefs, induce discomfort. Self-discrepancy theory, however, has some distinctive features. First, it systematically relates different types of discrepancies between self-state representations to vulnerability to different kinds of discomfort. Second, not only does it consider whether particular types of discrepancy are available to people as a function of the magnitude of the discrepancies, but it also considers the relative accessibility of individuals' available discrepancies. The various assumptions and implications of self-discrepancy theory are captured by the following general hypothesis: The greater the magnitude and accessibility of a particular type of self-discrepancy pos-

sessed by an individual, the more the individual will suffer the kind of discomfort associated with that type of self-discrepancy.

This hypothesis was tested in a series of correlational and experimental studies. Consistent with the hypothesis, when either the magnitude or the accessibility of the subjects' discrepancy between their self-concepts and their ideal self-guides was greater, the subjects suffered more from dejection-related emotions (e.g., disappointment, dissatisfaction, sadness). When either the magnitude or the accessibility of discrepancy between their self-concepts and their ought self-guides was greater, the subjects suffered more from agitation-related emotions (e.g., fear, restlessness, tension).

The present article has presented the basic assumptions of self-discrepancy theory in the context of related theories and described initial empirical support for the theory's major hypothesis. Future research will need to consider a number of other important issues: (a) how the theory could be used to predict *positive* emotions (e.g., we have found that the absence of an actual/own:ideal/own discrepancy is associated with feeling "happy" and "satisfied," whereas the absence of an actual/own:ought/other discrepancy is associated with feeling "calm" and "secure"); (b) the conditions under which self-guides initiate and direct action as well as being used as standards for self-evaluation; (c) the role of people's beliefs concerning the likelihood that they will ever meet their guides in moderating the motivational and emotional consequences of possessing self-discrepancies (e.g., the role of perceived self-efficacy; see Bandura, 1986); and (d) whether different regions of life should be distinguished when measuring discrepancies in order to predict more accurately emotional vulnerabilities in each region (e.g., achievement vs. interpersonal).

Even in its current form, however, self-discrepancy theory has implications for other areas of psychology. For example, self-discrepancy theory has some implications for treating emotional problems. Although it is not possible to review these implications in detail, it is interesting to note that each of the major alternative ways of reducing self-discrepancies is currently associated with some important approach to treatment. According to self-discrepancy theory, emotional problems are associated with accessible discrepancies between people's actual/own self-concept and one or more of their self-guides. Logically, then, there are three general alternatives for reducing emotional problems induced by self-discrepancies.

First, one could change a client's actual/own self-concept to be less discrepant from the client's self-guides. Behavioral therapeutic approaches accomplish this by modifying clients' persistent performance, and both cognitive and psychodynamic therapeutic approaches accomplish it by modifying clients' interpretations of their performance. Second, one could change the client's self-guides to be less discrepant from the client's actual/own self-concept. Both cognitive and psychodynamic therapeutic approaches accomplish this by lowering either the level or the perceived relevance of a self-guide (e.g., by leading clients to question its fairness, legitimacy, reasonableness, or utility). Third, one could change the accessibility of the discrepancies. Behavioral and environmental intervention approaches accomplish this by reducing clients' exposure to situations and social interactions that are associated with their problems (i.e., that are likely to prime the discrepancy). Cognitive approaches ac-

complish this by having clients actively rehearse positive thoughts and attitudes, which then function as active sets that inhibit passive accessibility effects (see Higgins & King, 1981). Thus self-discrepancy theory potentially provides a single, unified framework for understanding the functional consequences of different kinds of therapeutic approaches—what they do and do not accomplish.

This article has focused on the implications of self-concept discrepancy theory for self-evaluations and personal emotional responses. Nevertheless, the theory also has more general implications for motivation, evaluations of others, and interpersonal relations. People's emotional reactions to their performance, for example, can influence their subsequent motivations to achieve (for a review, see Weiner, 1986). Moreover, individual differences in achievement motivation may reflect individual differences in which self-guides are accessible and used at different stages of the process of self-evaluation (Higgins, Strauman, & Klein, 1986). The differences, for instance, between low- and high-*resultant* achievers described in the literature (e.g., Atkinson, 1964; Kuhl, 1978; Kukla, 1978; Weiner, 1972) could be due to low achievers' having a tendency to interpret their performance as a success or a failure on the basis of whether it is above or below their high *ought/other* standard, in contrast to high achievers' having a tendency to interpret their performance as a success or a failure on the basis of a more moderate *factual* comparison standard (e.g., their own past performance or the average performance) and appraising it in relation to their *ideal/own* standard.

Thus, low achievers would tend to judge their performance as a failure and subsequently feel apprehensive and anxious, whereas high achievers would tend to judge their performance as a success, thereby increasing their self-confidence, but they would also feel dissatisfied because they had not yet fulfilled their personal aspirations. This, in turn, would cause low achievers to avoid subsequent achievement tasks and high achievers to increase their efforts.

Self-discrepancy theory may also have implications for individual differences in evaluating others. There is considerable evidence that people's self-concepts and chronic personal constructs can influence their judgments and memory of others (e.g., Hastorf, Richardson, & Dornbusch, 1958; Higgins, King, & Mavin, 1982; Kelly, 1955; Kuiper & Derry, 1981; Markus & Smith, 1981; Shrauger & Patterson, 1974). If individuals' self-guides are also used in evaluating others, then self-discrepancy theory could predict not only whether the judgment is likely to be positive or negative (i.e., depending on how high are the perceiver's self-guides), but also what the perceiver's specific emotional response to the target's behavior is likely to be. For example, a target's behavior that was discrepant from a perceiver's ideal standards could cause the perceiver to feel dissatisfied and disappointed with the target or to feel sad for the target, whereas a target's behavior that was discrepant from a perceiver's *ought* standards could cause the perceiver to feel resentful or critical toward the target or to worry about the target.

Similarity between partners in the guides they use to evaluate themselves and others could promote positive relationships because it would increase the likelihood of the partners' responding similarly to social events, which in turn is associated with balanced relationships (e.g., Heider, 1958; Newcomb, 1961).

On the other hand, similarity between partners in their self-discrepancies could increase the likelihood that both partners would be emotionally vulnerable to the same events, which would reduce the ability of each partner to serve as a "safety zone" for the other. Perhaps similarity of social evaluative guides but dissimilarity in regions of vulnerability (e.g., achievement vs. interpersonal) would provide the most balanced relationship.

Finally, people's emotions in relationships may be influenced by the role their partner plays in their self-discrepancy system. In some cases, the partner (e.g., parent, spouse, boss) may be represented directly as the significant other in an actual:ideal/other or actual:ought/other discrepancy. In such cases, self-discrepancy theory would predict that the intensity and kind of emotion a person would be vulnerable to experiencing in the relationship would be a function of the magnitude and type of his or her available self-discrepancy involving the partner as significant other. (See McCann & Higgins, in press, for evidence supporting this prediction.) In other cases the partner may not be represented directly as a significant other in an available self-discrepancy, but the partner may have characteristics (e.g., physical and personality attributes; opinions and attitudes; interaction style) that are subjectively similar to a significant other whose standpoint on their self is involved in a preestablished "other" discrepancy, and thus exposure to the partner could activate the discrepancy and its associated discomfort. If someone attempts to resolve a prior discrepancy through a relationship with a new person, then we have the makings for a classic neurotic relationship (i.e., "The relationship makes me miserable, but I feel somehow that I'm getting a lot out of it"). Moreover, because the dynamic source of emotional reactions is the preestablished self-discrepancy and not the partner's actual behavior per se, it explains why the person overreacts to the situation.

With the exception of such neurotic relationships, one might predict more generally that people would seek out relationships that decrease the magnitude or accessibility of their self-discrepancies by modifying their self-concept and that they would avoid relationships that modify their self-concept in a way that increases the magnitude or accessibility of their self-discrepancies. Indeed, even in neurotic relationships, such as those described by Horney (1939) in her discussion of narcissism, the relationship may be maintained because it reduces a self-discrepancy or supports an essential nondiscrepancy.

If support for these additional implications of self-discrepancy theory is found in future research, then the theory would have the potential of providing a unified model for addressing central issues that fall on the interface of social, personality, and abnormal psychology.

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