

Self-Esteem, Self-Handicapping, and Self-Presentation: The Strategy of Inadequate Practice

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ABSTRACT In two experiments we investigated the causes of low preparatory effort (minimal practicing for an upcoming event that is to be evaluated), a possible form of self-handicapping. Experiment 1 found that people with high self-esteem practiced less than people with low self-esteem, although a prior experience of success eliminated this difference. Experiment 2 showed that people with high self-esteem practiced less only when the practice duration was publicly known, indicating that they were using a strategic self-presentational ploy rather than responding to superior confidence. This difference may reflect a desire to maximize the self-presentation of high ability by appearing to succeed despite minimal preparatory effort. These results suggest that this form of self-handicapping is a strategy used by highly confident individuals in uncertain situations to make a favorable impression on others.

Everyone is evaluated at times, and one often has the chance to prepare for the evaluation. Common sense would prescribe that the more important the evaluation is, the more thoroughly one should prepare, in order to make the performance as good as possible. On the other hand, there are some psychological benefits to poor or inadequate preparation, particularly in terms of protecting one's self-concept. If one has not prepared adequately, then a bad outcome can be blamed on the lack of preparation rather than being taken as a sign of low ability. Moreover, the implication of high ability is especially strong if success occurs despite obstacles or handicaps (see Kelley, 1972, on discounting

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and augmentation in attribution) The purpose of this article is to explore whether some individuals will strategically reduce their amount of preparatory effort in order to gain these attributional benefits

Leary and Shepperd (1986) noted that the term *self-handicapping* has had multiple, inconsistent usages, but a central one refers to placing obstacles in the way of one's task performance so as to furnish oneself with an external attribution when future outcomes are uncertain Lack of preparation before an evaluation is conceptually similar to this meaning of self-handicapping The self-protective advantages of self-handicapping were described by Jones and Berglas (1978, see also Berglas & Jones, 1978), who noted that the external attributions for failure protect one from loss of esteem In addition to self-protection, however, there can be a self-enhancing function for placing such barriers to one's own performance, for they increase one's potential credit for success

Lack of preparation before an evaluation is similar to putting a barrier in the way of one's own success, because inadequate preparation mitigates the impact of failure but enhances the credit for success (Pyszczynski & Greenberg, 1983) In fact, Rhodewalt, Saltzman, and Wittmer (1984) and Harris and Snyder (1986) have operationalized self-handicapping precisely as reduced or minimal preparation (practice) before an evaluation Other behavioral examples of self-handicapping have been identified in the literature, such as alcohol use (Jones & Berglas, 1978, Tucker, Vuchinich, & Sobell, 1981), drug use (Berglas & Jones, 1978, Kolditz & Arkin, 1982), test anxiety (Smith, Snyder, & Handelsman, 1982), psychological symptoms (Smith, Snyder, & Perkins, 1983, see also Schouten & Handelsman, 1987, Snyder, Smith, Augelli, & Ingram, 1985), withdrawal of effort (Smith et al., 1982, see also Frankel & Snyder, 1978), and underachievement (Jones & Berglas, 1978)

Self-Esteem

The motivation behind self-handicapping is to protect and enhance one's self-esteem (Arkin & Baumgardner, 1985, Harris & Snyder, 1986, Jones & Berglas, 1978, Snyder & Smith, 1982) Self-handicapping presumably occurs because of threats to self-esteem on important, self-relevant dimensions¹ It is plausible, therefore, that individual differences in trait

¹ Self-handicapping is typically discussed when competence-relevant performances are required One's self-esteem can be threatened in a variety of other contexts as well as performance competence Competence image is only one aspect of self-esteem

self-esteem may be associated with differential tendencies to engage in self-handicapping

Conflicting predictions can be made regarding the effects of trait self-esteem on the tendency to self-handicap. On the one hand, it might be predicted that individuals with low self-esteem would self-handicap in esteem-threatening situations more than individuals with high self-esteem because they are more insecure (Cohen, 1959). People low in self-esteem are more likely than people high in self-esteem to expect failure (Cohen, 1959, McFarlin & Blascovich, 1981), and therefore they may be more likely to adopt self-handicapping strategies to excuse the anticipated failure. In addition, people with low self-esteem need more positive evaluation and/or are more motivated to avoid negative evaluations (Jones, 1973), so they may be more motivated to self-handicap to protect or enhance self-esteem. Self-protection has been identified as a central concern of people with low self-esteem (Baumeister, Tice, & Hutton, 1989), and so to the extent that self-handicapping is protective, it should be associated with low self-esteem.

On the other hand, there are several bases for predicting that individuals with high self-esteem would be more likely to self-handicap than individuals with low self-esteem. A failure may be a greater blow to people with high self-esteem because they are not accustomed to failure and, under most conditions, do not expect to fail at important, self-relevant tasks. Harris, Snyder, Higgins, and Schrag (1986) found that women with high self-esteem were more likely to propose protective excuses for possible failure (although they did not engage in any active or behavioral self-handicapping activity). This could mean that people with high self-esteem are especially concerned with managing the implications of possible failures.

Another reason for suggesting that self-handicapping primarily would be linked to high levels of self-esteem is its potential value for self-enhancement. A recent literature review concluded that people with high self-esteem are more prone to engage in self-enhancing behaviors (Baumeister et al., 1989). As a result, they may self-handicap in order to maximize their attributional credit for success. Baumeister (1982) found that people with high self-esteem were more willing to use various self-presentational ploys to enhance their reputations. Self-handicapping may well follow the same pattern, especially insofar as it may be a self-presentational strategy (Kolditz & Arkin, 1982, see below). With regard to preparatory effort, one might predict that people with high self-esteem would practice minimally so that their antici-

pated success would seem to prove their high innate ability rather than seeming a result of effortful preparation

A similar prediction is suggested by recent studies of depression. Depression is associated with low self-esteem (Beck, 1967, 1976, Becker, 1974, 1979, Bibring, 1953, Brown & Harris, 1978). Therefore, comparing the defensive attributional strategies of depressed and nondepressed subjects may provide some indirect evidence for the prediction that individuals with high self-esteem might be more likely to self-handicap than individuals with low self-esteem. Several studies have demonstrated that depressed individuals (who presumably have lower self-esteem) are less likely than nondepressed individuals to engage in defensive, self-enhancing tactics that tend to cast the self in a favorable light (Alloy, 1982, Alloy & Abramson, 1979, Lewinsohn, Mischel, Chaplin, & Barton, 1980).

Yet another prediction would suggest that the effects of dispositional self-esteem (whatever they may be) may interact with performance feedback. Self-handicapping is a strategic response to the uncertainty of future performance outcomes, so initial feedback may remove some of the need for it. Indeed, Berglas and Jones (1978) suggested that a contingent success experience removed any need to engage in self-handicapping. They found self-handicapping only in response to noncontingent success feedback. Contingent success feedback should therefore eliminate the motivational basis for self-handicapping. In addition, the absence of initial feedback constitutes a relative lack of external situational structure, which may be conducive to effects of individual differences (West, 1983), so it seemed plausible that trait levels of self-esteem would predict behavior most directly in the absence of initial feedback. Thus, we had grounds for predicting both a main effect for contingent success feedback (1 e, reducing the amount of self-handicapping) and an interaction between success feedback and self-esteem (1 e, self-esteem will only predict self-handicapping in the absence of feedback).

Preparatory Effort

The present research used duration of preparatory effort as the main dependent measure of self-handicapping. That is, subjects were permitted to practice as much or as little as possible. We reasoned that extensive practice is the optimal way to ensure a maximal performance, but

subjects may realize that extensive practice reduces some of the attributional benefits of success. Specifically, to fail despite extensive practice is to prove oneself incompetent, whereas to fail after inadequate practice is ambiguous. By similar reasoning, to succeed after extensive practice is far less impressive than to succeed after minimal preparation. Thus, long practice times will maximize the likely *performance* outcomes, but short practice times will maximize the *attributional* outcomes. Deciding the duration of one's practice time may thus reflect how one strikes a balance between these opposing goals.

Self-handicapping involves creating obstacles to one's own performance for the sake of attributional benefits, so in the present circumstances self-handicapping would mean keeping one's practice times to a minimum. Not practicing thus resembles a familiar pattern in self-defeating behaviors, namely the trade-off of one sort of benefits for another, leading in general to poorer objective outcomes (Baumeister & Scher, 1988).

Still, self-handicapping tendencies may not be the only factor that affects duration of practice. An alternative, particularly important factor is the subject's perception of the amount of practice necessary for success. This in turn may be a product of subjective confidence and perceived difficulty of objective standards. Because self-esteem implies generally high confidence, one might well predict that people with high self-esteem would practice less than people with low self-esteem, independent of other factors. This tendency might be reduced by initial success (which would provide objective evidence that one does not need to practice much to succeed). If preparatory effort is based mainly on confidence, therefore, one may predict that initial success feedback would reduce everyone's practice duration, and although one might predict that high dispositional self-esteem would still cause greater confidence after success, the discrepancy between individuals with high and low self-esteem would be reduced.

Present Research

To reiterate, the first experiment was designed to investigate two issues. First, there were competing hypotheses about how trait self-esteem would predict behavioral self-handicapping (i.e., would lead to reduced preparatory effort). Second, we hypothesized that the effects of self-esteem would be most apparent in uncertain or unstructured situations,

particularly including the lack of initial feedback, so we predicted that initial success feedback would override and reduce the effects of self-esteem

Experiment 1: Self-Esteem and Initial Success

Experiment 1 was designed to examine the effects of self-esteem and initial success on subsequent practice before an evaluation. Subjects performed a task and then either were told that they had performed exceptionally well or were given no performance feedback. They were then given the chance to practice the task for as long as they liked before being evaluated on a second performance.

Self-handicapping has been described as a strategic response to the uncertainty of future performance outcomes. In Experiment 1, uncertainty about future performance was created by asking subjects to perform a novel, self-relevant task. Because the task was described as probably unlike any other the subject had received feedback on, subjects could not be certain of their ability to do the task. For half the subjects, this uncertainty was reduced by initial feedback suggesting that subjects' ability or performance on the task was high. Because the task was described as predictive of career success outside of the academic setting, performance on the task was assumed to be important to the subjects.

The main predictions were as follows. In the absence of initial success feedback, people with high self-esteem should practice less than people with low self-esteem, either because of greater confidence (hence less perceived need to practice) or because of a greater tendency to self-handicap for strategic, self-enhancing purposes. Initial success should reduce the uncertainty and hence the motive to self-handicap, so success feedback should create longer practice times for all subjects, initial success should also reduce or eliminate the effects of trait self-esteem.

METHOD

Experiment 1 involved a 2×2 Level of Self-Esteem (high vs. low, based on a median split) \times Manipulated Performance feedback (success feedback vs. no feedback) design. Forty introductory psychology students (23 males and 17 females) participated as subjects and were randomly assigned to feedback conditions. The experimenter was blind to self-esteem level.

Measures

All subjects rated their level of self-esteem using Silverman's (1964) version of the Janis and Field (1959) scale. Some researchers have argued that self-esteem may be domain-specific (Fleming & Courtney, 1984; Shavelson, Hubner, & Stanton, 1976; Wylie, 1974, 1979), the Janis and Field scale emphasizes social self-esteem but includes global self-regard and work (and school) competence as well. It was chosen because we wanted to study how individuals respond to social variables (i.e., performance feedback in a public setting). Janis and Field reported evidence that the scores are sufficiently reliable for testing group hypotheses. Their item analysis indicated a high degree of internal consistency, and a split half reliability analysis resulted in a raw reliability coefficient of .69 (the estimated value of the reliability coefficient is .81 when corrected by the Spearman-Brown formula). Scores in Experiment 1 ranged from 33 to 79, with a median of 60.

The dependent measure was collected on a task (game) for which practice before the evaluation would result in an increased score during the evaluation. The game was sold under the commercial name "Roll Up" (see Martens & Landers, 1972, also Baumeister, 1984). The object of the game was to roll a ball up an incline created by two metal bars by moving the bars apart. Points were scored by dropping the ball into a hole. The further the ball rolled up the incline before dropping, the greater the number of points scored. There was a positive correlation between amount of time practiced and subsequent score on the evaluation task for subjects in Experiment 1, $r(40) = .30$, suggesting that this was an appropriate task for us to use (because practice does help one perform better, so reducing practice satisfies the self-defeating component of the definition of self-handicapping). The experimenter suggested that there was a strong possibility that practice would lead to a higher score on the test. Any subject who admitted having extensive prior experience playing this game would have been eliminated, but no subject admitted to being very familiar with the game. In order to ensure that they would be concerned with performing well, subjects were told that the task was one component of a 10-component nonverbal intelligence test that was more closely associated with predicting postacademic success than with measuring intelligence. All subjects were college students, who tend to be relatively concerned with their intellectual functioning, so performance was subjectively important. Subjects were led to believe that the nonverbal test measured important aspects of intellectual functioning different from the highly verbal intelligence tests normally given in school, in order to ensure that they would not simply discount the results of the present test if they were not similar to the results of previous intelligence tests. Subjects were told that the test was designed to be used with populations with above-average intelligence (such as college populations).

Procedure

All subjects participated individually. After signing a consent form, subjects completed the self-esteem scale. Subjects were then told that they were participating in a psychometric experiment that was examining the effects of practice on the 10 different components of a nonverbal intelligence test. They were told that they would be tested at the task for a 2-minute period, given a chance to practice the task, and then tested again for 2 minutes. After the first 2 minutes, half of the subjects were told that they had scored in the 96th percentile of college students and had received one of the highest scores that the experimenter had seen. The other half of the subjects were given no feedback regarding their performances on the first trial.

All subjects were then asked to practice the task for however long they wished. Subjects were told that they would be timed but would not be scored on the task while they practiced. In order to eliminate any incorrect perception by the subjects of experimenter demand to practice briefly or for a long time, the experimenter emphasized that it did not matter how long they practiced. They were told to let the experimenter know whenever they wanted to stop practicing and take the test the second time. The experimenter sat quietly, holding a stopwatch and observing the subject while the subject practiced. The dependent measure was the amount of time subjects spent practicing. After practicing, subjects completed the manipulation check (in which they indicated how well they felt they had performed on the first trial) and performed the task once more for the experimenter to score. Subjects were then fully debriefed.

RESULTS

Manipulation Check

Just prior to debriefing, subjects were asked to report on an 11-point scale (with 1 indicating not at all well and 11 indicating extremely well) how well they had performed the task on the first trial. Subjects who had received success feedback reported that they had performed significantly better, $M = 9.95$, than subjects who had received no feedback, $M = 4.35$, $t(38) = 18.32$, $p < .0001$, suggesting that subjects in the success condition found the feedback plausible.

Duration of Practice

The main results are presented in Table 1. There was a significant interaction between level of self-esteem and performance feedback, $F(1, 36) = 10.80$, $p < .001$. Subjects with low self-esteem practiced

Table 1
Mean Duration of Practice Experiment 1

Self-esteem	Initial outcome	
	Success	No feedback
High	275 5 (11)	131 2 (9)
Low	215 8 (9)	412 5 (11)

Note Numbers represent mean number of seconds practiced by subjects Numbers in parentheses = cell n 's

significantly less if they had received success feedback for the task than if they had received no feedback, $t(36) = 2.69$, $p < .05$, whereas for subjects with high self-esteem there was a marginally significant reversal of that pattern, $t(36) = 1.98$, $p < .10$.

Alternatively, pairwise comparisons could be performed within feedback condition and between self-esteem levels. When subjects were not given any feedback, individuals with high self-esteem practiced significantly less than individuals with low self-esteem, $t(36) = 3.85$, $p < .01$, but after being given success feedback there was a nonsignificant reversal of that pattern.

Males and females were randomly distributed across cells (in roughly equal patterns); no gender differences were found.

DISCUSSION

The results of Experiment 1 supported the hypothesis that initial success feedback interacts with dispositional self-esteem to determine how long the person practices for an upcoming evaluation. When subjects were not given any feedback, persons with high self-esteem practiced less than those with low self-esteem, suggesting that people with high self-esteem may generally be more likely to self-handicap for the sake of the attributional benefits. Once initial success had been achieved, however, the effects of self-esteem were eliminated. In short, the results of Experiment 1 support the view that people with high self-esteem are most prone to engage in self-handicapping, particularly under conditions of high performance uncertainty.

We had also predicted a main effect for success feedback on duration of practice, but this prediction was not confirmed. We had reasoned that uncertainty produces self-handicapping, so initial success feedback

should eliminate the motive to self-handicap, resulting in generally longer practice times. This pattern was obtained only among subjects high in self-esteem; subjects low in self-esteem showed a significant reversal of that pattern, that is, they practiced less after success than when no initial feedback was received.

One likely explanation for this reversal is that people with low self-esteem did not wish to risk following up their initial success with a subsequent failure that might discredit the initial success. In other words, success may have elicited a self-protective response from them. People with low self-esteem presumably have experienced relatively few successes and lack confidence that they can repeat and sustain such successes. In such a context, each success would be highly welcome, and one would not want to jeopardize it by trying to duplicate it. This reasoning is consistent with past evidence that people with low self-esteem tend to withdraw effort after initial success (Baumeister & Tice, 1985). People with high self-esteem, of course, would not be subject to the same insecurity, for their presumably high level of confidence would lead them to expect that they could indeed repeat an initial success.

A related possible explanation for the reduced effort among people with low self-esteem following success was that they may have regarded it as an atypical and possibly noncontingent experience. Shrauger (1975) proposed that people are most prone to believe feedback that is consistent with their self-concepts (see also Swann, Griffin, Predmore, & Gaines, 1987), and so people with low self-esteem may be doubtful or suspicious of highly positive feedback. They may be prone to suspect that it was a result of luck or chance (unlike people with high self-esteem, who presumably expect to succeed and view favorable feedback as yet another confirmation of their high competence). Noncontingent success has been identified as a major cause of self-handicapping (Berglas & Jones, 1978; Jones & Berglas, 1978), and so perceptions of success as noncontingent would help explain why people with low self-esteem appeared to withdraw effort following initial success. Insofar as we have no data bearing on attributions for the success made by people with low self-esteem, this explanation remains speculative. Still, Berglas and Jones reported that they found it quite difficult to induce subjects to perceive success as noncontingent, even when it really was noncontingent. Because no procedures (similar to Berglas and Jones's) were used to foster the perception of noncontingency, it seems doubtful that the present results were mediated by this perception, although it cannot be ruled out.

One ambiguity about these results concerned whether practice duration was caused by inner confidence or by strategic, self-handicapping motives. Individuals with low self-esteem may have practiced for a long time in the no-feedback condition because they lacked confidence that they could perform well, but when they received success feedback their confidence was raised. Subjects with high self-esteem may have reduced their preparatory effort as a strategic maneuver to discount the implication of future failure—or they may simply have been more confident of success at the task and therefore felt less need to practice than people with low self-esteem. The latter explanation does not fully account for the effects of success feedback, for people with high self-esteem should have been more confident than others even after success, and it is very unclear why initial success would have *reduced* the confidence of people with high self-esteem. Still, Experiment 1 was not designed to distinguish between the strategic and the confidence hypotheses, and someone might argue that success feedback somehow altered levels of confidence so as to yield the pattern of results we observed. Experiment 2 attempted to address this issue.

Experiment 2: Public Versus Private Practice

The second experiment was concerned with why subjects with high self-esteem practiced less than subjects with low self-esteem under conditions of no feedback. Two explanations are possible. Subjects with high self-esteem may have reduced their preparatory effort as a self-presentational ploy in order to preserve a public image of competence. Alternatively, they may have practiced for a shorter time simply because they were more confident. If they were practicing less than subjects with low self-esteem because they were more confident, they should practice less in private (where no audience is aware of the amount of time spent practicing) as well as in public (where they are explicitly timed by the experimenter), for their intrapsychic self-evaluation presumably remains the same even if others are present. However, if minimal practice is a strategic ploy to protect a public image, then subjects with high self-esteem should only practice less than subjects with low self-esteem in a public setting.

The broader issue here is whether self-handicapping is designed to benefit the public self or the private self. Berglas and Jones (1978) found that self-handicapping occurred in private as well as in public, but Kolditz and Arkin (1982) found it only in a public setting, and they

suggested that self-handicapping is a self-presentational strategy.² If so, then the self-handicapping by people with high self-esteem should only occur in a public setting (where the experimenter knew and recorded the amount of time the subject spent practicing), and not in a private setting (where the amount of time preparing or practicing before the evaluation would be known only to the subject). Experiment 2 was designed to investigate whether the effects of self-esteem depended on self-presentational factors.

METHOD

Thirty-eight students (25 males and 13 females) volunteered to participate in partial fulfillment of a requirement for introductory psychology. We used a 2×2 Self-Esteem (high vs. low) \times Publicness of Practice (experimenter present during practice vs. not present) design.

When the subject arrived the experimenter reviewed the cover story (on validating a 10-part test of nonverbal intelligence, as in Experiment 1) in detail and demonstrated the Roll Up game. Subjects did not perform the game before practicing, unlike in Experiment 1. Subjects were told that they would be given one 2-minute trial at the task, and that they could practice the task for as long as they liked before the trial.

In the public condition, the experimenter was present, watching and timing the subject while he or she practiced. The experimenter then left the room while the subject filled out the Janis and Field (1959) self-esteem questionnaire. Subjects were told that the amount of time they practiced needed to be recorded for statistical purposes but that they should feel free to practice for as long as they liked.

In the private condition, the subject was not aware that the experimenter knew how long he or she practiced. To accomplish this, the subject was told to practice as long as desired, then to fill out the self-esteem questionnaire, and then to go to another room to get the experimenter to administer the per-

2 Kolditz and Arkin (1982) replicated the Berglas and Jones (1978) procedure with important methodological changes, which may have resulted in a very different psychological set and level of involvement for the subjects. These differences in how the subjects perceived the task may well account for the discrepancies in the findings of the two studies. In any case, the present experiments do not attempt to address the issue of whether self-presentational concerns are the *only* reason subjects self-handicap. It seems that people may sometimes self-handicap for self-presentational reasons, possibly in addition to intrapsychic reasons. This article is an attempt to examine only the self-presentational component of self-handicapping, while recognizing that individuals may sometimes self-handicap in private as well in order to manage their impressions of themselves.

formance trial. Subjects were told that the questionnaire took different people different amounts of time ("anywhere from 3 to 20 minutes") to complete. Thus, from the subject's point of view, even if the experimenter did notice how much time elapsed before the subject came to get her, the experimenter would not know how the subject had divided this time between practicing the task and filling out the questionnaire.

Unlike the anticipated performance measure, which was described as a publicly performed task, subjects were asked not to identify themselves on the written measures. This was done so that subjects would not use the written measures to comment on, modify, or explain their practice or anticipated performance on the task. Subjects were told not to practice again after filling out the scale and to get the experimenter from the next room when they were finished.

Unbeknownst to subjects in the private condition, the experimenter was monitoring their duration of practice. The sound of the apparatus was clearly audible in the next room, which made it possible to obtain a highly unobtrusive measure of practice duration.

When the subject retrieved the experimenter, a manipulation check was administered, which completed the procedure. Subjects were debriefed, thanked, and dismissed.

RESULTS

Manipulation Checks

Ratings confirmed that subjects in the public condition believed that they were being timed while they practiced, $M = 1.2$, where 1 = very much so, 5 = not at all, but in the private condition subjects generally were not aware that the experimenter knew how long they practiced, $M = 4.2$, $t(36) = 4.35$, $p < .001$.

Duration of Practice

The results of this study are presented in Table 2. Analysis of variance revealed a significant main effect for publicness, indicating longer practice times in the private than in the public condition, $F(1, 34) = 27.42$, $p < .01$. This was qualified, however, by a significant interaction between publicness and self-esteem, $F(1, 34) = 5.06$, $p < .05$. Within the public condition subjects with high self-esteem practiced significantly less than subjects with low self-esteem, $t(34) = 2.22$, $p < .05$. This trend was nonsignificantly reversed in the private condition, with

Table 2
Mean Duration of Practice Experiment 2

Self-esteem	Public	Private
High	122.8 (12)	447.9 (8)
Low	256.9 (8)	386.6 (10)

Note: Durations are measured in seconds. Numbers in parentheses = cell *n*'s.

subjects with high self-esteem practicing longer than subjects with low self-esteem.

Self-esteem scores in Experiment 2 ranged from 33 to 80, with a median of 59.5. No significant differences were found in self-esteem scores in the public versus the private condition. Males and females were randomly distributed across cells (in roughly equal patterns), no gender differences were found.

DISCUSSION

The results of Experiment 2 supported the self-presentational explanation rather than the differential confidence explanation for the tendency of people with high self-esteem to minimize preparatory effort. Under public conditions, subjects with high self-esteem practiced less than subjects with low self-esteem, replicating the finding in the no-feedback condition in Experiment 1. This difference disappeared in the private condition, however, even showing a (nonsignificant) trend in the reverse direction. This effect of publicness apparently contradicts the hypothesis that the differences obtained in Experiment 1 arose from differing levels of confidence, for the subject's intrapsychic level of confidence should have been the same in both conditions. Rather, it appears that the reduction of preparatory effort by subjects with high self-esteem (in the public condition) was a strategic, self-presentational ploy designed to maximize attributional benefits of performance outcomes. Reduced practice would increase their credit for success and discount the implications of failure.

The main effect for publicness suggests that all subjects self-handicapped for self-presentational reasons to some extent, but that people with high self-esteem did so more than people with low self-esteem. Although nervousness or aversiveness caused by the experimenter's presence may have contributed to the main effect for publicness, it can-

not easily explain the interaction between publicness and self-esteem (see below). The interaction between publicness and self-esteem signifies the greater tendency of people with high self-esteem to self-handicap under public conditions than people low in self-esteem, supporting previous findings indicating that individuals with high self-esteem are more aggressive than individuals with low self-esteem in using self-presentational tactics to enhance their images (Baumeister, 1982).

As an alternative explanation, it might be suggested that practicing in the presence of the experimenter made the subjects nervous or embarrassed, which caused them to stop practicing sooner in public than in private, in order to terminate an aversive experience. To explain the present findings, one might propose that subjects with high self-esteem found the experience more aversive than those with low self-esteem, so they practiced less in public. However, it seems implausible that they found the experimenter's presence during practice more aversive than the subjects with low self-esteem because several of the items on the self-esteem scale ask subjects to rate themselves in similar situations (e.g., "When you are trying to win in a game or sport and know that other people are watching you, how rattled or flustered do you usually get? How often do you feel self-conscious? When you have to talk in front of a class or a group of people, how worried do you usually get?"), with low evaluative concern scored as the high self-esteem response. Using other measures of self-esteem, Greenwald, Bellezza, and Banaji (1988) found significant negative correlations between social anxiety and self-esteem. Thus, although nervousness or discomfort caused by the experimenter's presence may have contributed to the main effect for publicness, it presumably would have had a greater effect on people with low self-esteem, so it cannot easily explain the interaction.

GENERAL DISCUSSION

Reduced, minimal, or inadequate practice for an upcoming performance is conceptually similar to self-handicapping. It protects one from the implications of failure but enhances one's credit for success. The performer thus benefits regardless of whether the outcome is success or failure. The drawback, however, is that inadequate practice increases the probability of failure. In this research, a positive correlation was found between duration of practice and quality of subsequent performance, which suggests that lesser practice did indeed tend to lead to

poorer performance. Thus, deliberate reduction of practice duration would qualify as a self-defeating behavior. The present results bear on the issue of when people will sabotage their performance quality for the sake of attributional benefits.

Implications of Present Results

Both experiments showed self-handicapping to be affected by dispositional level of self-esteem, and each time it was the people with high self-esteem who employed strategic reductions of preparatory effort. The fact that self-esteem predicts self-handicapping signifies that self-handicapping, or in this case the reduced duration of practice, is centrally concerned with how the individual regards him or herself. It is therefore appropriate and even necessary to invoke self-regard in explaining how much preparatory effort people exert. Based on our results, the withdrawal of preparatory effort can be regarded as a strategy used by highly self-confident individuals to enhance their potential credit for success or to escape potential blame for failure.

The effect of publicness suggests that it is often the public self, rather than the private self-concept, that is the main focus of self-handicapping. This does not contradict our previous conclusion that self-esteem is centrally implicated in self-handicapping, for different levels of trait self-esteem may be closely linked to typical self-presentational strategies (Baumeister et al., 1989). Indeed, in a recent review we argued that self-esteem measures may be more closely and directly linked to self-presentational patterns than to intrapsychic self-evaluations (Baumeister et al., 1989). The withdrawal of preparatory effort by individuals with high self-esteem is apparently a strategy designed to make them look good to other people.

Self-esteem effects were mainly evident under conditions of performance uncertainty (i.e., in the absence of initial success feedback). This is consistent with previous evidence that chronic uncertainty of self-evaluation (Harris & Snyder, 1986) and insecurity created by non-contingent success (Berglas & Jones, 1978) produce self-handicapping. There is broad evidence that personality traits have their strongest effects when situational pressures are weak or ambiguous (see West, 1983, cf. Tice & Baumeister, 1985), and hence the present effects of trait self-esteem were strongest in uncertain conditions. When the anticipated performance is highly uncertain, people may fall back on their self-esteem and their habitual strategies to decide how to prepare for it. In the present studies, people with high self-esteem responded to the un-

certainty by using a strategic response (i.e., reduced preparatory effort) that would make them look good regardless of what their actual level of performance would turn out to be. The effects of self-esteem were eliminated, however, by either initial success (Experiment 1) or situational privacy and anonymity (Experiment 2). Thus, the effects of self-esteem on self-handicapping appeared strongest in unstructured situations that invoked self-presentational concerns but that lacked initial evidence about ability.

The original exposition of self-handicapping theory portrayed it as a means by which insecure people could protect their self-regard (Jones & Berglas, 1978). Our results suggest two modifications in that view. First, it appears that it is high self-esteem, rather than insecurity or low self-esteem, that is associated with this self-defeating withdrawal of preparatory effort. Insofar as people with high self-esteem are more inclined toward self-enhancement than self-protection (Baumeister et al., 1989), the emphasis in self-handicapping theory should perhaps be shifted from protecting to *enhancing* the image of self. Second, we found that the strategic withdrawal of effort by people with high self-esteem occurred only in a public setting. This is consistent with other evidence suggesting that self-handicapping theory should emphasize the public self rather than the private self-concept (Kolditz & Arkin, 1982).

Alternative Explanations

We have interpreted reducing one's practice duration as a self-handicapping strategy because it jeopardizes objective success in the service of attributional benefits. It is conceivable, however, that practice duration might reflect other motives. Subjective confidence seems the most likely, for a confident person presumably feels that less practice would be necessary to achieve success, as compared to an insecure person. It may be, for example, that people with high self-esteem are simply more confident and therefore do not think that they have to practice as much as others do.

Two of our findings are particularly difficult to explain on the basis of differential confidence. First, initial success presumably should increase confidence, and so it should reduce practice time, but Experiment 1 showed the opposite. Initial success increased the practice durations of people with high self-esteem. Second, the shorter practice times of people with high self-esteem occurred only in public and not in private conditions (in Experiment 2)—but intrapsychic, subjective confidence should have been the same in both conditions, because the presence

of others should not alter the perceived task difficulty (It is conceivable, however, that social facilitation may have affected the findings, in that the presence of the audience was necessary to facilitate the dominant response of high confidence for individuals with high self-esteem³) Thus, some of our findings are consistent with a confidence explanation, but others are not, and it seems most parsimonious to regard reduced practice as a strategic self-presentational ploy designed to maximize attributional benefits

Another view might suggest that subjects reduced their practice times as a means of shortening the experiment, possibly in order to escape the situation. From this perspective, the findings of Experiment 1 would mean that success makes people with low self-esteem want to escape the situation faster but has the opposite effect on people with high self-esteem (cf. Baumeister & Tice, 1985). The findings of Experiment 2 would mean that the presence of others makes everyone, but especially people with high self-esteem, want to escape faster. This last finding is difficult to reconcile with that alternative explanation, for (as noted earlier) it is people with low rather than high self-esteem who are most adversely affected by the presence of an audience. This view also makes the questionable assumption that subjects find it so appealing to save a few minutes by shortening the experiment that they are willing to risk an embarrassing failure—whereas past work suggests that people are strongly motivated to make a favorable impression even on total strangers, and they will subordinate their outside goals to the immediate situation (cf. Brown, 1968, Brown & Garland, 1971).

CONCLUSION

This research found that self-handicapping by means of reduced preparatory effort was more characteristic of people with high rather than low self-esteem. This appeared to be a self-presentational strategy designed to maximize their public attributional outcomes, for the difference obtained only when the practice duration was known to others. Further, the difference obtained mainly in response to relatively unstructured situations, for it was eliminated by initial performance feedback.⁴ Thus, this

3 We would like to thank an anonymous reviewer for proposing this alternative explanation.

4 Experiment showed this effect for success feedback. In another, unpublished experiment, we replicated that effect for success and found it also for initial failure feedback.

form of self-handicapping appears to be a self-presentational strategy used by highly confident people in uncertain situations. Individuals with high self-esteem may be especially concerned with managing the impressions others form of them, and they may self-handicap (in our studies, practice less before an evaluation) in an attempt to control those impressions and present themselves most positively. However, if the testing condition is private, there is no opportunity to impress an audience and so the motivation to self-handicap is reduced. In addition, if the audience is aware of an earlier success, then the individual may have already accomplished the desire to impress and need not use strategic ploys such as self-handicapping to create the desired impression.

Self-handicapping is a self-defeating behavior pattern. In these studies, practicing less meant performing worse. In that context, our results suggest that high self-esteem may often bring a troublesome or even destructive burden of egotism. The overriding concern with sustaining a highly favorable view of self in the minds of others led many of our subjects to reduce their preparatory effort. In the long run, this pursuit of reputation may cause individuals with high self-esteem to fail to perform up to their potential.

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