THE WAY PERCEPTION OF BEHAVIOURAL DETERMINANTS INFLUENCE THE DYSFUNCTIONAL ATTRIBUTIONS IN DEPRESSION

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Abstract
There were examined the predictions according to which attributional reformulation of learned helplessness theory regarding determinant factors of depression, in the case a group of participants with depressive mood. In the examination there were used both real life event and hypothetical ones. By the way of analysis two “pre-attributional” variables, consensus and consistency judgments were associated with negative attributional style and depression. Consensus judgment is an important predictor of depression if the participants with depressive mood report an increased number of negative life events. The results highlight the relation between perceived low consensus and depression and the etiologic role of this variable (but also that of consistency judgments) and also the necessity for implementing some future studies in this research area.

Keywords: helplessness, behavioural determinants, attributions, depression, life events

Introduction
Understanding the social behavior is done by the explanation of the way in which the person knows the reality in his daily life, gives a meaning to events he comes into contact with, is able to make predictions, he has a relative control over his environment. This search for the purpose of the events, for situating a cause of an event or behavior is called causal assignment (Neculau, 1996; Marian, 2008).

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Assignment theories have tried to describe the way in which we explain (to ourselves and to the others) the causes of the situations or events which take place. As a consequence, assignment theory is one of the methods for explaining the meaning of what we observe, deducing a cause and discovering the significance by: the perception of the action (Why?), judging the intention (For which reason?) and mood assignment (How?).

In formal sense, assignment theories are not presented as theories, but rather as a conceptual frame. Sometimes it is aimed at discovering the natural logic for daily explanations as cognitive system (Radu, Iluț, & Matei, 1994; Neculau, 1996; Marian, 2008).

Reformulated model of learned helplessness and performances in tasks

At least three studies examined the foreseen effects of the dimension global / specific. Pasahow (1980) tried to manipulate global / specific dimensions for failure in an experimental task and to examine its impact on a different non-relevant task. Although the performance for the second task was affected by manipulation in the expected direction, the subjects reported global/ specific assignments without being connected to the generalization of helplessness. In the second study, Brewin and Shapiro (1985) did not try to manipulate the assignments but they allowed their subjects to make their own assignments for failure in the case of insolvable problems. The subjects balanced the cause of the failure on the dimensions internality, stability and globality and as foreseen, globality was the only dimension which indicated a relation of performance with the subsequent task: anagram. The relation had a low significance, still it could be noted because it claims the effect of specific assignments which can be connected with helplessness effect as a consequence of global assignments.

Strong evidences for supporting deficits in tasks which suppose performance were supplied in the second half of the study of Brewin and Shapiro (1985). In the last part of the study the authors questioned the subjects about the assignments in case of failure to insolvable problems.

In the end, Alloy, Peterson, Abramson, and Seligman (1984) investigated the extent to which attributional global vs. specific style was connected to the generalization of helplessness; they measured attributional style before the experiment and tested the subjects in similar or different
situations to the one where helplessness was produced. Attributional style was not connected to performance in similar situations but in special situations the subjects with global style for negative results interpreted in a more negative way as compared to those who typically did specific assignments.

The relation between causal assignments and depression received an increased focus during the last two decades but two theoretical aspects were neglected: first, the role of the cognitive determinants’ participation to self-esteem decrease and second, the causal relation between causal desadaptive assignments and other cognitions which could be involved in the beginning of depression or in maintaining it.

In previous studies, there were analyzed the cognitive determinants for self-esteem decrease, considering the fact that both in attributional theories of depression (Abramson, Seligman, & Teasdale, 1978; Arabzadeh, Kadivar, Nildel, Kavousian, & Hashemi, 2012) and in Wiener’s theory (1979) self-esteem is considered important. According to this theory, attributional dimension of internality (the extent to which the results are seen as caused by the person itself or by external circumstances) is a determinant of self-esteem. Consequently, the individuals who make internal assignments for negative events will have a low self-esteem.

Abramson and al. (1978) claimed that as attributional dimensions of stability and globality contribute to the determination of chronicity and generality of depression, internal dimension is the only link of self-esteem levels.

Peterson, Schwartz, and Seligman (1981) forwarded an alternative theory where the connection between depression and / or low self-esteem with assignments for negative scenarios is characteriological (internal and stable or internal and global).

Kelley and Michela (1980) described three cognitive variables; first of all, consensus judgment derived from social comparison. With regards to success or failure, individuals evaluate if they are more or less dexterous regarding the results. Secondly, judgments consistency is connected to the frequency by which a result is perceived as being a manifest also in the past of an individual. Thirdly, distinctiveness judgment is involved in the way in which particular results and non-usual were perceived as being in relation with other experiences of the individuals. Dispositional attributions tend to be made for results with a low consensus, low distinctiveness and high consistency (Brewin
Considering the fact that mood factors are internal, stable and sometimes global, we expect that all three classes to influence all attributional dimensions described by Abramson et al. (1978). Internal assignments are more probably based on the consensus of judgments. Current methods for measuring internality such as Attributional Style Questionnaire (ASQ; Peterson, Semmel, von Baeyer, Abramson, Metalsky, & Seligman, 1982) do not specify the consensus of the information but the simple solicitation for the subjects to indicate the extent to which the result cause was „to a certain extent, because of me” or „to a certain extent, because the others or other circumstances” could solve the problem.

According to learned helplessness theory, the influence of the consensus and consistency on psychical mood of the person, could take place by their input in the causal attributional process (Brewin & Furnham, 1986). In the model of helplessness attributionally reformulated assignments are those which claim the proofs for self-esteem variations, chronicity and/ or generality of symptoms (Marian, Filimon, & Cioară, 2009). This point of view is in contrast with the predictions derived from the theory of social comparison which claims that people are directly evaluated by comparison with others (by using the information consensus) without specifying the need for attributional mediation.

Objectives

1. In this study we investigate the relation between depression semiology and dis-adaptive attributional style and the interferences at pre-attributional level, the consistency and the consensus. We analyze on which conditions the appeal to assign the consensus and behavior consistency has a direct action on depression semiology or by the means of disadaptive attributional style.

2. The experimental step will investigate the relation between depression semiology and internal negative causal assignments, the perceived consensus and recent life events. The experimental step will observe in which conditions the appeal to assign the consensus has a direct action on depression
or by the means of negative internal assignments considering recent life events as a direct causal factor.

**Method**

**Participants**

The sample was made by participants who have never been hospitalized in psychiatry hospitals. The participants were selected according to the results obtained at SCL-90, DEP scale (depression).

There were 107 depressive participants included in the study, from rural and urban areas. The lot included 40 (37.4%) participants which graduated secondary school, 26 students (24.3%) and 41 (38.3%) participants with university degree. The participants to this study range between 19 and 58 years old (m=31.37; SD=11.21) out of which, 58 (54.2%) men and 49 (45.8%) women. From the marital status point of view, in the study there were included 64 single (59.8%) and 43 married persons (40.2%).

**Measures**

*Attributional Style Questionnaire (A.S.Q.*) devised by Peterson et al. (1982); it is a measure of explanatory style patterns which in turn reflects one’s tendency to select certain causal explanations for favorable or unfavorable events. The internal consistency reported by Marian (2010) was \( \alpha = .82 \) for positive events, and \( \alpha = .72 \) for negative events. This moderate internal consistency is supported by other findings.

*Symptom Check List 90-R* (Derogatis, 1994) is an instrument which evaluates the gravity of the symptoms reported by patients. The *internal consistency* of its subscales is situated between .75 and .86 and for ISG it is .97. *Test-retest trust quotient* of the two testing phases (T1 and T2) is between .77 and .87 (see Marian, 2008).

*Survey of Recent Life Experiences*. Kohn and Macdonald (1992) proposed Survey of Recent Life Experiences (SRLE) which they validated starting from 92 items. In our study we use the short version of SRLE which is formed of 41 items meant to measure the hassles accumulated during a period of time. The internal consistency of the total score was .90 (41 items). Test-retest trust quotient of the two testing phases is between .66 and .78 (see Marian, 2008; Oprea, Marian, Filimon, & Banciu, 2011).
**Procedure**

In order to group the participants according to their level of depression, there were selected only the participants who presented high quotas to DEP scale. The participants received the necessary instructions so that the scales to be filled in adequately.

All the participants filled in ASQ and during the immediate next stage they had the extra task to make appreciations regarding the consistency and the consensus by answering the following questions evaluated on a scale from 1 to 4.

**Consistency:** „How frequently do you think that similar events take place?” (Possible answers were: 1 = Never, 2 = Occasionally, 3 = Frequently enough and 4 = Frequently);

**Consensus:** „Would you admit that such an event could have taken place more often that most people know or the other way around?” (The possible answers were: 1 = Most probably it happened to them, 2 = To a certain extent more likely it happened to them, 3 = To a certain extent it may have happened to me and 4 = Most probably it happened to me).

The answers according to consistency and consensus were summarized for the six positive results and six negative results of the scenarios proposed in ASQ.

**Design**

Experimental design is a multifactorial one where predictors (or exogenous variables) are the consensus, the consistency and the negative attributional style and the criterion is depression.

Considering that predictors are numeric and continuous variables we use the way analysis. Consensus and consistency are exogenous variables as they are the causal scheme start point while negative attributional style plays the role of exogenous and endogenous variable. In the causal schemes proposed, depression plays the exclusively endogenous variable because it is considered to be caused by the mutual action of the presented variables.

The consensus and recent life events are exclusively exogenous variables and internal negative assignments play both the exogenous variable role and the endogenous one. In the proposed causal scheme, depression is an exclusively endogenous variable being caused by the mutual action of exogenous variables.
The way analysis allows the testing of causal models and of the relations between pre-attributional variables (consensus and consistency) and the negative attributional style as well as the identification of mediators (negative attributional style and internal negative assignments).

**Presentation and interpretation of the results**

We use the way analysis for examining the extent to which the relation between consensus, consistency and depression is mediated by the attributional disadaptive style. For this analysis the scores of the participants to the dimension internality, stability and globality were combined according to the prescriptions of Peterson et al. (1982) and Brewin and Furnham (1986) and the scores for consensus and consistency were used as separate variables.

Consequently, our wish was to test the validity of the model proposed by us; consensus and consistency are „preattributional variables” which act on the desadaptive attributional style as a depression determinant. Kelley and Michela (1980) claimed that mood assignments tend to be made for results with a low consensus, low distinctiveness and high consistency.

By regression it would have been necessary to divide the model in two sections, in order to be analyzed separately. In the first section of verifying the theory, the dependent variable would have been negative attributional style measured by the score CN for ASQ, and the predictors consensus and consistency. In the second section, the dependent variable was depression (measured by the score at scale DEP from SCL-90), and the predictor was negative attributional style (score CN from ASQ).

The statistic method (Kline, 2010) chosen by us is efficient in testing the causal model of learned helplessness (presented in fig. 1). Exogenous variables in the case of our model are consensus and consistency (cause variable), while CN score (negative attributional style) plays the exogenous variable role (cause variable) in relation with depression. Negative attributional style also plays the endogenous variable role (effect variable) being given the fact that we consider it as being caused by the mutual action of the two variables consensus and consistency. In our model, depression is an exclusively endogenous variable considering that it is influenced by negative attributional style.
In figure 1 there are presented the coefficients of three causal ways of preattributional variables (consensus and consistency) for depression, self-esteem and distress, attributionally mediated. The data is consequent to the model proposed where, in order, the correlation between negative causal assignations and depression is a product of articulation with consistency but not with the consensus of judgments.

In the case of the model presented in figure 1, the measurement error $e_1$ and $e_2$ represents dispersion caused by unique factors and the correlation between the two exogenous variables (consensus and consistency) is highly significant ($r=.77$, $p<.001$).

The structured equation in the case of causal model of depression tested by the program AMOS (table 1) indicates a high matching degree ($\chi^2=4,754$, $p>.09$) considering the fact that there are no significant differences between the participants’ data and the matrix obtained on the basis of the connections specified in our model.

Table 1. The values of absolute indicators for tested models

<table>
<thead>
<tr>
<th>Model tested</th>
<th>$\chi^2$</th>
<th>df</th>
<th>$p$</th>
<th>RMR</th>
<th>RMSEA</th>
<th>GFI</th>
<th>AGFI</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Causal model of depression</td>
<td>4,754</td>
<td>2</td>
<td>.09</td>
<td>.06</td>
<td>.06</td>
<td>.99</td>
<td>.96</td>
</tr>
</tbody>
</table>
The indicator RMR shows an efficient model of helplessness in depression considering that the value obtained by us is situated under the critical threshold .10 which means that we explain adequately the evolution of the observed data. Also, the indicator RMSEA does not pass over the threshold .08 which means that the model is matching in proportion of 90%. GFI is an indicator dependent on collected data and in the case of the proposed model of learned helplessness; it claims the data previously presented and the adjusted form of AGFI indicator, has a very close value and it confirms and supports the data presented in table 1.

Table 2. The values of the comparison indicators for the tested models

<table>
<thead>
<tr>
<th>Model tested</th>
<th>NFI</th>
<th>RFI</th>
<th>IFI</th>
<th>CFI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Causal model of depression</td>
<td>.98</td>
<td>.96</td>
<td>.99</td>
<td>.99</td>
</tr>
</tbody>
</table>

In table 2 we present the testing of differences between our models and a null model, so NFI, RFI IFI and CFI indicate the desirability of the models. Given the fact that in psychology there are accredited simple models and not the redundant ones, we give credit to the model.

Based on the above mentioned indicators we can conclude that the structural model is adequate for supporting that the assignments of consistency is a cause of disadaptive attributional style which at its turn shall act on depression.

Table 3. The ration of regression in structural model

<table>
<thead>
<tr>
<th>Model tested</th>
<th>Estimate</th>
<th>S.E.</th>
<th>C.R.</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Causal model of depression</td>
<td>CN &lt;--- Consensus</td>
<td>.055</td>
<td>.056</td>
<td>.989</td>
</tr>
<tr>
<td></td>
<td>CN &lt;--- Consistency</td>
<td>.144</td>
<td>.059</td>
<td>2.446</td>
</tr>
<tr>
<td></td>
<td>Depression &lt;--- CN</td>
<td>.109</td>
<td>.014</td>
<td>7.741</td>
</tr>
</tbody>
</table>

Table 4. Standardized estimation of regression ratio

<table>
<thead>
<tr>
<th>Model tested</th>
<th>Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Causal model of depression</td>
<td>CN &lt;--- Consensus</td>
</tr>
<tr>
<td></td>
<td>CN &lt;--- Consistency</td>
</tr>
<tr>
<td></td>
<td>Depression (SCL-90) &lt;--- CN</td>
</tr>
</tbody>
</table>

In tables 3 and 4 we present the ratio of regression in the models proposed such as the influence of the causal variables on the endogenous variables (CN and depression). We consider that a major part is played by the
consistency of judgments, meaning that the more a person considers that negative events similar to the experiential ones which shall be produced, the higher is the possibility for the activation of the causal disadaptive style; this shall lead to chronic and generalized deficits for adaptation to real life situations and the final point shall be mood modification towards depression.

The relation between consensus, consistency and causal assignments

In figure 1 we indicate that for negative scenarios or life events, only the consistency correlates with disadaptive attributional style. Out of the two variables, consistency explains the largest part of attributional style variance of scores for negative results.

In the line of Abramson’s et al. (1978) results and Brewin and Furnham (1986) attributional disadaptive style was fund as being associated to judgments connected to consistency rather than consensus. We also support the fact that the consistency of judgments is strongly associated with internal, stable and global assignments for negative situations. The analyses made suggest that these variables (consensus and consistency) have a direct influence on attitudes and behavior, attitude mediated by disadaptive causal assignments.

The relation between disadaptive attributional dimensions, life experiences and depression

According to the results obtained in the first part of the research, we assumed that disadaptive causal assignments regarding recent life experiences which produce distress are associated to depression.

The participants received SRLE (Kohn & Macdonald, 1992; Oprea et al., 2011) which is made of a list with hypothetical recent life experiences.

Out of 107 participants, 22 did not experiment negative life experiences, 41 experimented events at medium level and 44 had negative events at very high level. When the participants experimented irritating or affecting events at medium or extreme level, the results indicated a high degree of similarity, and for this reason we present only the results of the participants sample (N=44) who experimented high degree negative events.
Table 5. Correlations between attributional variables, recent life experiences and depression

<table>
<thead>
<tr>
<th>Variable</th>
<th>Depression</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Negative life experiences</td>
<td>.606</td>
<td>.001</td>
</tr>
<tr>
<td>Internal negative</td>
<td>.069</td>
<td>NS</td>
</tr>
<tr>
<td>Stable negative</td>
<td>.439</td>
<td>.001</td>
</tr>
<tr>
<td>Global negative</td>
<td>.316</td>
<td>.001</td>
</tr>
<tr>
<td>Negative attributional style</td>
<td>.376</td>
<td>.001</td>
</tr>
</tbody>
</table>

Recent life experiences were significantly associated with depression ($r=.606$, $p<.01$; see Table 5). Depression was not associated with negative internal assignments but the relation is maintained in the case of stable and global negative assignments when participants reported affecting recent life experiences and this fact supported the accuracy of the data presented in the work.

Once again, we used the way analysis in order to examine the relation between consensus, internality, the impact of events and depression (composite scores were not calculated considering that not all dimensions could be relevant for this small number of recent life experiences). In figure 2 we indicate that there is a certain direct effect of the consensus on depression. The consensus of judgments effect is independent from the effect of irritating situations which also accounts a good part of the variance proportion in depression.

![Figure 2. Way analysis - The relation of consensus, internal assignments and recent life events with depression](image)
In the case of our model, the exogenous variables are the consensus and negative life events (cause variables), while internality plays the exogenous variable role (cause variable) in relation with depression. Internality also plays the endogenous variable part (effect variable) as we consider it to be caused by the action of consensus. In our model, depression (figure 2) is an exclusively endogenous variable considering that it is influenced by internality and by negative life events.

The model implemented suggests that negative internal assignments have a negative impact on depression. In the case of causal model of depression tested by the program AMOS (table 6), the structural equation indicates a high matching degree ($\chi^2=8.08$, $p>.36$) being given the fact that there are no significant differences between the data of the participants and the matrix obtained based on the specific connections from our model.

Table 6. The values of absolute indicators for the model tested

<table>
<thead>
<tr>
<th>Model tested</th>
<th>$\chi^2$</th>
<th>df</th>
<th>$p$</th>
<th>RMR</th>
<th>RMSEA</th>
<th>GFI</th>
<th>AGFI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Causal model of depression</td>
<td>8.08</td>
<td>1</td>
<td>.36</td>
<td>.02</td>
<td>.00</td>
<td>.99</td>
<td>.96</td>
</tr>
</tbody>
</table>

The indicator RMR shows an efficient model in depression. Also, RMSEA indicator does pas pass over .06 which means that the model is matching in proportion of 90%. GFI supports the data previously presented and also the AGFI indicator.

Based on the indicators mentioned in table 6 we can conclude that the structural model (figure 2) is not appropriate for claiming that consensus assignment is a cause for assignment internality which shall act on depression. On the other side, the increase of depression level is associated with the increase of internality as we can see in figure 2.

Table 7. The balance of regression in the structural model

<table>
<thead>
<tr>
<th>Causal model of depression (adjusted)</th>
<th>Estimate</th>
<th>S.E.</th>
<th>C.R.</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internal attributions &lt;-- Consensus</td>
<td>.017</td>
<td>.018</td>
<td>.925</td>
<td>.35</td>
</tr>
<tr>
<td>Depression &lt;-- Internal attributions</td>
<td>.186</td>
<td>.096</td>
<td>-1.945</td>
<td>.05</td>
</tr>
<tr>
<td>Depression &lt;-- Negative life events</td>
<td>.089</td>
<td>.062</td>
<td>1.442</td>
<td>.14</td>
</tr>
<tr>
<td>Depression &lt;-- Consensus</td>
<td>.026</td>
<td>.019</td>
<td>1.384</td>
<td>.16</td>
</tr>
</tbody>
</table>
Table 8. Standardized estimation of regression balance

<table>
<thead>
<tr>
<th>Causal model of depression (adjusted)</th>
<th>Internal attributions</th>
<th>Consensus</th>
<th>Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression (SCL-90)</td>
<td>Internal attributions</td>
<td>Consensus</td>
<td>-.086</td>
</tr>
<tr>
<td>Depresion (SCL-90)</td>
<td>Negative life events</td>
<td>Consensus</td>
<td>.131</td>
</tr>
<tr>
<td>Depression (SCL-90)</td>
<td>Consensus</td>
<td>Consensus</td>
<td>.126</td>
</tr>
</tbody>
</table>

In table 7 and 8 we present the balance of regression in the models proposed such as the influence of causal variables (exogenous) on endogenous variable depression; we consider that a major part is played by negative internal assignments which act directly on depression. The results are in the line of those presented by Zautra, Guenther, and Chartier (1985, p. 530) and Brewin and Furnham (1986) who indicated in a correlational study that the depressive symptoms are associated with internal assignments for negative results; the correlational pattern between assignments and general distress was similar to the one obtained in the case of depressive symptoms.

**Conclusions**

The work is within the area of recent preoccupations for the implications that learned helplessness has at psycho-social level when explaining human behavior. In the presentation of relevant theoretic aspects for our theme we underlined many times the importance of associating the behavioral, cognitive and social perspective.

The predictions made according to learned helplessness theory attributionally reformulated with regards to cognitive determinants of depression, were tested by using hypothetical life experiences. Consensus and consistency were not directly associated to depression. Proofs of the connection between depression and low perception of consensus and a high consistency and their possible etiological role were presented in the study.

In the study we examined the association between cognitions regarding recent life experiences and depression.

Judgments of consensus and consistency for negative life experiences were found to be related to depression (mediated by negative causal assignments). It is not possible the exclusion of an alternative results interpretation in terms of diagnostic model (Brewin, 1985; Cochran &
Hammen, 1985; Brewin & Furnham, 1986) according to which mood influences cognitions. Our data do not refer to the polemic about assignments and namely if assignments are involved in change process such as recovery after a depressive episode. With all that, the results lead to a position mainly favorable to theories (Abramson et al., 1978; Weiner, 1979; Brewin & Furnham, 1986) where causal dysfunctional assignments are major determinants of effects and behavior.

Based on the data obtained we consider that when a person is facing a negative result, the level of depression is mostly affected not by causal assignments but by the consistency of judgments (by perceiving the probability that similar events to be produced). Our data claim the theory of social comparison by the fact that depressive persons tend to evaluate other people’s performances as being superior to their own. Tabachnik, Crocker, and Alloy (1983) concluded that depressive subjects see themselves as being different from the others when speaking about the attributes related to depression.

Consequently, the study confirms the fact that low perception of consistency is associated to depression mediated by the attributional style. It is also plausible the fact that consistency of judgments is a major determinant of expected changes and of helplessness deficits chronic character, although this hypothesis still needs to be tested.

In a supplementary way, the data suggest that there are the preattributional cognitions which determine assignments (directly) and not the depression; this could be at the basis of increasing the significance of correlations between these two sets of variables. This pattern confirms recent suggestions about causal assignments which can be considered inferences or reconstructions based on consistency, consensus and distinctiveness of information.

The consensus of judgments is important in determining depression because the relation develops in the process of self-evaluation. Evaluation is involved in the way in which the person acceptably (or neglectfully) behaved in relation with a set of internal standards. Negative self-evaluation is the core of depressive symptoms (Beck, 1976); this affirmation is argued by the fact that low self-esteem imposes the breach of established and universal behavior standards of (for example, the assignments of stable and global causes).

In conclusion, most proofs collected for supporting the reformulated learned helplessness theory partly appear as being susceptible information in
terms of preattributitional variables. The evaluation of information consent in the work was found as having a strong effect on depression but by the negative attributional style (dysfunctional). The results obtained indicate that the role of negative causals was not sufficiently underlined in the specialty literature but, in an exagurate manner, the role of information consensus in cognitive theories of behavior and emotions was supported.

For the future, the results obtained in the case of adults should be compared with those of children and teenagers (ongoing studies) in order to adequately see the phenomenon of learned helplessness. Besides that, starting from the results obtained, the development of specific prevention and intervention would be useful not only in psychopathology domain but (or in the case of institutionalization) but also in the educational, social and organizational one.

References


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