

**ADAPTATION AND PSYCHOMETRIC PROPERTIES
OF THE FORMS OF SELF
CRITICIZING/ATTACKING
AND SELF-REASSURING SCALE**

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ABSTRACT

The objective of this study was to translate and adapt Forms of Self Criticizing/Attacking and Self-Reassuring Scale (FSCRS) in Urdu language as well as to establish the psychometric properties of translated version of FSCRS. After following the standardized procedure of adaptation, psychometric properties were assessed by administering Urdu version of FSCRS on a sample of 245 adult students. The age of the participants ranged from 18 to 25 years with the mean age of 21.2 years. Demographic Information Form, Urdu version of Forms of Self Criticizing/Attacking and Self-Reassuring, Siddique-Shah Depression Scale and Interaction Anxiousness Scale were used. To establish psychometric properties, Cronbach's alpha and Pearson Product Moment Coefficient of Correlation were used. Internal consistency of three factors of FSCRS included Inadequate Self, Reassure Self, and Hated Self was .68, .70 and .51 respectively. Association of subscales of FSCRS with Siddique-Shah Depression scale and Interaction Anxiousness Scale was found significant. It is concluded that Urdu version of FSCRS is found to be reliable and valid measure to use with Pakistani adult population.

Keywords: Self-Criticizing, Self-Reassuring, Adaptation, Psychometric Properties

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INTRODUCTION

Over the decades, there is growing interest to explore self-to-self relation in development and maintenance of psychopathology. As people's internal dialogues have substantial role in success and failure of minor to major tasks from one's personal to social life. Though, self-scrutiny is somehow beneficial as it helps to identify mistakes, brings humility and promote positive changes but its excessive use perpetuate harms to well-being that overshadowed its beneficial impacts (Panayotova, 2016). Self-criticism is one of the forms of covert behavior to relate with one's self. Self-criticism is one's style to define self in negative way, identify one's own fault and inadequacies and respond in punitive way while commit any mistake that may in turn to social disapproval (Ferreira, Pinto-Gouveia, & Duarte, 2014; Thompson & Zuroff, 2004). Having excessive self-blame, negative and critical thoughts, highlight one's own shortcomings, consequently, exacerbate failures and put an individual at risk to develop feelings of worthlessness. Self-criticism is also considered a maladaptive strategy to cope up with meagerness and feelings of inferiority (Gilbert, Clarke, Hemple, Miles, & Irons, 2004) and restrict one's functioning (Gilbert et al., 2010).

Self-criticism is understood as pathogenic trait, therefore, have trans-diagnostic role in development and continuity of mental disorders (Gilbert & Procter, 2006). Theoretically and empirically, it is well established that self-criticism has, by and large, imperative role in etiology and maintenance of mental health issues. Thought processes of people with themes of self-attacking, self-devaluation, and self-criticism is repeatedly found to be associated with depressive disorder, anxiety disorders, eating disorder, and personality disorders (Boujut & Gana, 2014; Duffy & Henkel, 2016; Holle & Ingram, 2008; Kannan & Levitt, 2013). Gilbert and colleagues (2004, 2006) further suggested that people use self-criticism as coping strategy to get escape from feelings of inadequacy, in consequence, highly self-critical people may likely to have low motivation to pursue and achieve their goals (Breines & Chen, 2012; Shulman, Kalnitski, & Shahar, 2009).

Indeed self-criticism, self-condemnation and self-devaluation plays prominent role in psychopathology that led researchers to develop scales to examine these maladaptive cognitive patterns (e.g. Blatt, Quinlan, Chevron, McDonald, & Zuroff, 1982; Thompson, & Zuroff, 2000). However, these tools were based on view that self-criticism is single factor but Gilbert (2000) further explored that the self-attacking and self-reassuring thoughts could be developed

at the same time. Gilbert argued that self-critical thoughts typically activated when individuals experience failure in any important task and when things turn out wrong. During these distressing situations an alternative response to cope with this inability and failure could be thoughts of self-compassion or self-support depends on earlier experiences. According to Gilbert, Clarke, Hempel, Miles, and Irons, (2004), these thoughts and behaviors originated from earlier experiences and parent-child relationship. Generally, parents regulate children's behavior by using punishment, as well as by expressing warmth and encouraging responses. When parents treat their children with care and warmth in times of their failure, they become able to develop self-reassurance. Children learned self-critical and self-reassuring thoughts through modeling and by internalizing behaviors of significant others. Another source of these critical thinking is shame whenever people thinks that others have negative view about their self, they use self-critical thinking as a response to anger and fear (Gilbert, 1998; Gilbert, & Procter, 2006). Hence, people use self-critical thoughts to correct themselves, use while they feel hatred for themselves and they used to criticize themselves in reassuring way for improvement as well. Based on these assumptions, Forms of Self-Criticizing/Attacking and Self-Reassuring Scale was developed (Gilbert, Clarke, Hempel, Miles, & Irons, 2004) to distinguish self-attacking thoughts from thoughts of self-reassurance which used to neutralize self-critical thoughts by having reassuring and warms attitude or thoughts towards self simultaneously.

Contemplating the role of self-critical thoughts in psychopathology, psychotherapy, and its practical impact in life of peoples working in every sphere of life, the present study is an endeavor to translate and adapt Forms of Self-Criticizing/Attacking and Self-Reassuring Scale (FSCRS) in Urdu language and to establish psychometric properties of translated version. Adaptation and establishment of psychometric properties of this scale would help researcher and clinician to explore its etiological role in psychopathology, to evaluate changes over the course of disorder and its role in treatment in Pakistani context.

METHOD

Participants

The study was carried out in two phases. In the first phase, translation and adaptation of Forms of Self Criticizing/Attacking and Self-Reassuring Scale (FSCRS) was done. In the second phase the psychometric properties of the Urdu version of FSCRS were established.

Phase-I: Translation and Adaptation of Forms of Self Criticizing/Attacking and Self-Reassuring Scale

The standard procedure of translation/adaptation of psychological measures was followed for the translation/adaptation of Forms of Self Criticizing/Attacking and Self-Reassurance (FSCRS) suggested by Hambleton, Merenda, and Spielberger (2005). The scale was given to three subject experts who have expertise in research, scale development and adaptation with proficiency in source and target language. Then, translated version was also given to expert in Urdu language to check any inconsistency and to adjust wording of items according to functional use by targeted population. This translation was evaluated by another group of translators and after few amendments, translated scale was forwarded to subject expert and language expert for back translation to ensure the conceptual equivalence.

After forward and backward translation, scale was reviewed by subject experts who made comparisons of original and translated version to check any inconsistency or ambiguity. After incorporating few changes, translated scale was tested by conducting pilot study to identify any ambiguity in items and to make it more comprehensible for target population. For this purpose, 50 participants were selected on the basis of predetermined criteria. Purpose of study was clearly described to build the rapport and obtained true responses. After getting the consent from concerned authorities and participants, scale was administered in group setting. Based on their responses and feedback regarding wording and comprehension of meanings on each item of FSCRS, pre-final version was finally revised and made ready for data collection to establish the metric equivalence.

Phase- II: Establishment of Psychometric Properties of Forms of Self Criticizing/Attacking and Self-Reassuring Scale

Participants

The sample for the present study consisted of 245 university students recruited from universities situated in Rahim Yar Khan. The age of the participants ranged from 18 years to 25 years with the mean age of 21.2 ($\pm SD = 1.9$). The demographic characteristics of the participants are described in Table 1.

Measures

Forms of Self Criticizing/Attacking and Self-Reassuring Scale

The Forms of Self Criticizing/Attacking and Self-Reassuring Scale (FSCRS) originally developed by Gilbert, Clarke, Hempel, Miles and Irons (2004) and translated and adapted in Urdu language in present study assesses self-criticism and self-reassurance at the same time. This scale consists on 22-items and based on three factors. Self-critical thoughts are measured by subscale of *Inadequate Self*. It assesses feeling of incompetency and inadequacy while facing setback. The second subscale is *Hated Self* which measures disgusted and self-punitive desires. The third sub-scale is *Reassured Self* which measure self-reassurance, i.e. positive and warm thoughts towards self. These items are rated on a 5-point Likert scale ranging from 0 = *not at all like me* to 4 = *extremely like me*. The Cronbach's alpha reported by Gilbert and associate for the subscale of Inadequate Self was .90 whereas for the subscales of Hated Self and Reassured Self was .86.

Siddique-Shah Depression Scale

The Siddique-Shah Depression Scale (SSDS; Siddiqui, 1992) is self-reported indigenously developed scale, aimed to assess the depression in both non-clinical and clinical population. This scale consisted of 36 items developed on nonclinical and clinical populations. The split half reliabilities for clinical population were .84 and .79 whereas for nonclinical population were .89 and .80. Similarly, the Cronbach's alpha obtained for nonclinical and clinical populations was .89 and .91 respectively. The validity was determined through correlation with the Zung's Depression Scale ($r = .55$ $p < .05$) and through psychiatrists' rating of depression ($r = .40$; $p < .05$).

Interaction Anxiousness Scale

The Interaction Anxiousness Scale (IAS; Leary, 1983) is self-reported measure developed to assess the social anxiety, which refers to anxiety or fear about one or more socially faced situations in which individuals are subject to possible scrutiny. This scale is comprised of 15 items, measured on 5 point Likert Scale ranging to "*extremely characteristics of me*" to "*not all characteristics of me*". Studies evidenced that IAS is reliable and valid measure (Jones, Briggs, &

Yasien, Zia, Yasmin & Maham

Smith, 1986; Leary & Kowalski, 1987). Urdu version of IAS was used in present study (Riaz, & Bano, 2011).

Procedure

The authorities of the universities situated in Rahim Yar Khan were contacted to seek approval for data collection. After seeking permission from authorities, the participants were approached and purpose of study was clearly described to build the rapport and obtained true responses. They were assured of the confidentiality of their responses and briefed about their right to withdraw participation during study. After getting the consent from participants, the research measure were administered in group setting. At the end of the administration, respective authorities and participants were thanked for their time and cooperation.

Scoring and Statistical Analysis

After administration of the research measures, all the scales were scored according to respective scoring procedure. Then reliability and validity estimates were made. All the analysis was done using Statistical Package for the Social Sciences-Version 21.

Reliability Analyses

The item total correlation coefficients of Forms of Self Criticizing/Attacking and Self-Reassuring Scale (FSCRS) were computed using Pearson Product Moment Coefficient of Correlation (Table 2). The Internal Consistency Reliability estimate was made using Cronbach's Alpha Coefficient (Table 3).

Validity Analysis

The Convergent validity was assessed by using Siddiqui-Shah Depression Scale (SSDS) and Interaction Anxiousness Scale (IAS). The Pearson Product Moment Coefficient of Correlation was computed among FSCRS and SSDS and IAS to make validity estimate (Table 4).

RESULTS

Table. 1

Descriptive Statistics for Demographic Characteristics of Participants (N=245)

Variables	Category	<i>f</i>	%
Gender	Male	108	44.1
	Female	137	55.9
Family Structure	Nuclear	99	40.4
	Joint	146	59.6
	<i>M</i>		<i>SD</i>
Age	21.2		1.9

Yasien, Zia, Yasmin & Maham

Table. 2

Item-total correlation of Forms of Self Criticizing/Attacking and Self-Reassuring Scale (N=245)

Item No	<i>r</i>	<i>Sig</i>
1	.56	.00*
2	.66	.00*
3	.46	.00*
4	.30	.01*
5	.38	.00*
6	.66	.00*
7	.60	.00*
8	.61	.00*
9	.61	.00*
10	.43	.00*
11	.60	.00*
12	.46	.00*
13	.60	.00*
14	.51	.00*
15	.42	.00*
16	.67	.00*
17	.47	.00*
18	.34	.00*
19	.62	.00*
20	.56	.00*
21	.52	.00*
22	.34	.00*

* $p < .05$

Table. 3

Cronbach' Alpha of Urdu version of Forms of Self Criticizing/Attacking and Self-Reassuring Scale (N=245)

Scale	No of items	Cronbach's Alpha
Inadequate Self	9	.68
Reassure Self	8	.70
Hated Self	5	.51

Table 4

Convergent validity of Urdu version of Forms of Self Criticizing/Attacking and Self-Reassuring Scale (N=245)

Scales	SSDS	IAS
Inadequate Self	.59*	.44*
Reassure Self	-.01	.21*
Hated Self	.48*	.17*

Note= SSDS = Siddiqui Shah Depression Scale; IAS= Interaction Anxiousness Scale; * $p < .05$

DISCUSSION

The aim of this study was to translate and adapt Forms of Self-Criticizing/Attacking and Self-Reassurance Scale (FSCRS) and to establish psychometric properties for Pakistani young adult students. Followed by translation and adaptation of FSCRS in Urdu using standard procedure of translation and adaptation, initially the Urdu version was subjected to pilot testing. The results of pilot study provided preliminary support and revealed that scale is ready for next phase i.e. for psychometric evaluation of Urdu Version of FSCRS.

Yasien, Zia, Yasmin & Maham

Several researchers have suggested that the validity and reliability are significantly important issues that must be covered in translation/adaptation of scales (e.g. Anastasi & Urbina, 1997; Bashir, Afzal & Azeem, 2008; McDonald, 1999). In present study, the internal consistency reliability was assessed using Cronbach's Alpha. The obtained Cronbach's alpha values for all three subscales namely, Inadequate Self, Reassure Self and Hated Self is .68, .70, .51 respectively (Table 3) demonstrating that the items are consistent with one another. Additionally, the item-total correlation of FSCRS was also estimated to examine relationship of each item with sum of subscales. The correlation values of items varied from .67 (item 16) to .30 (item 4) and all items are identified significantly correlated with sum of subscale scores ($p < .01$). As suggested by Medina-shepherd and Kleier (2010), minimal item-total correlation is .30 which is acceptable.

Construct validity of Forms of Self Criticizing/Attacking and Self-Reassurance Scale was estimated by using convergent validity. Convergent validity is assessed by estimating correlation of theoretically related variables (Anastasi, 1988), therefore, correlation of scores of Urdu Version of FSCRS with Siddiqui-Shah Depression Scale and Interaction Anxiousness Scale was computed. Previous researchers have also assessed the construct validity of FSCRS by comparing it with other measures used for assessment of depression and anxiety (Fritzsche, 2016). The obtained results have shown that there is significant correlation of subscales of FSCRS with Interaction Anxiousness Scale and Siddiqui-Shah Depression except Reassure Self subscale (Table 4); though the direction of the relationship with this scale is negative however insignificant. Practically, it is empirically suggested that individuals, even from non-clinical population, having anxious thoughts use self reassurance thoughts as a strategy to distract themselves from intrusive thoughts while self-reassurance thoughts found to be linked negatively with depressive symptoms (Irons, Gilbert, Baldwin, Baccus & Palmer, 2006; Langlois, Freeston, & Ladouceur, 2000). This insignificant finding warrant further investigation. Overall results demonstrate good construct validity.

In conclusion, the analysis demonstrates that Forms of Self Criticizing/Attacking and Self-Reassurance Scale-Urdu Version has a good psychometric soundness. Hence, it is a reliable and valid measure to use in Pakistan. Self-related thoughts are shaped and influenced more by social factors prevailing in any culture, therefore, adaptation of FSCRS would help mental health professionals and researchers to move forward to get better understanding

Pakistan Journal of Psychology

about self-critical and self-reassuring thoughts of Pakistani young adults. Urdu is medium of communication at mass level in Pakistan and Urdu version of FSCRS is found valid and reliable. Apart from satisfactory findings, this study has certain caveat. Psychometrics of FSCRS has been established on university population that compromises its generalizability. Nonetheless, self-critical thoughts play an enormous role in individual's life which underscores the need to explore this construct in varied age groups and clinical population. The present study also lacks test retest reliability and predictive validity which can be estimated in future researches.

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Yasien, Zia, Yasmin & Maham

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Pakistan Journal of Psychology

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Yasien, Zia, Yasmin & Maham

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