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1 Determinants of Self-handicapping Strategies in Sport and their Effects on Athletic Performance

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Abstract

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2 The purpose of the present experiment was to examine self-efficacy and self-esteem as predictors
3 of claimed and behavioral self-handicapping and to compare the relationship between behavioral
4 and claimed self-handicaps, and athletic performance. A total of 31 basketball players
5 participated in the study. Claimed self-handicaps were significantly negatively correlated with
6 self-esteem whereas behavioral self-handicapping was significantly negatively correlated with
7 self-efficacy. Performance was negatively correlated with behavioral self-handicapping, but was
8 not correlated with claimed self-handicapping. These findings reinforce the conceptual distinction
9 between claimed and behavioral self-handicaps by demonstrating that the two strategies are
10 indeed related to different factors and that they have different consequences for performance.

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12 Key words: self-handicapping, self-esteem, self-confidence, performance, sport

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Determinants of Self-handicapping Strategies in Sport and their Effects on Athletic Performance

Self-handicapping is a self-presentational strategy whereby people make claims or engage in behaviors prior to an upcoming performance, in order to have a reasonable excuse for a possible failure (Berglas & Jones, 1978). From an attributional perspective, self-handicaps blur the relationship between ability and performance. Thus, a self-handicapping athlete who performs poorly can attribute failure to the performance impediment rather than ability or competence whereas the athlete who performs well creates the impression of being especially competent and talented, because success was achieved despite impediments (Tice, 1991).

Theorists have highlighted the important conceptual distinction between behavioral and claimed self-handicapping (e.g., Hirt, Deppe, & Gordon, 1991; Leary & Shepperd, 1986).

However, effort has not been directed toward determining whether each has different determinants. The majority of the published sport studies have focused on determinants of *claimed* self-handicapping (e.g., Kuczka & Treasure, 2005; Martin & Brawley, 2002) or on determinants *behavioral* self-handicapping (e.g., Berglas & Jones, 1978; Pyszczynski & Greenberg, 1983). The few studies that have examined both types have assumed common determinants (e.g., Elliot, Cury, Fryer, & Huguet, 2006; Thompson & Richardson, 2001).

Behavioral self-handicaps are a more costly, riskier strategy than claimed self-handicaps. For example, not practicing can provide an excuse for poor performance, but also decreases the likelihood of a successful performance. In contrast, simply claiming to be too anxious or tired also serves as an excuse for poor performance, but does not actually reduce the likelihood of success (see Hirt et al., 1991). Given these differences, it is possible that different factors underlie the use of these two strategies (see Coudevylle, Famose, Martin Ginis, & Gernigon, 2007). Knowledge of these factors would contribute to a better understanding of predictors of self-handicapping and the development of interventions to alter the use of self-handicaps.

1 Athletes who use behavioral self-handicaps may take such a risk because they are
2 convinced of an impending performance failure. In line with this reasoning, Pyszczynski and
3 Greenberg (1983) showed that participants in a low-probability of success condition intended to
4 exert less effort on an upcoming highly ego-relevant task, than did participants in a high-
5 probability of success condition. As social cognitive theory proposes that maladaptive
6 behaviors--such as reduced effort--result primarily from low expectations of mastery in an
7 uncertain situation (Bandura, 1986, 1997), it is plausible that the use of behavioral self-handicaps
8 may be linked to *situation-specific* low levels of performance self-efficacy.

9 In contrast, athletes who use claimed self-handicaps may suffer from more *general* self-
10 doubts; they may not necessarily believe that failure is imminent, but they may have weak beliefs
11 about their general levels of capability, success and self-worth. Within the self-handicapping
12 literature, feeble self-beliefs have been conceptualised as low self-esteem (see Tice, 1991).
13 Athletes with low self-esteem may not want to risk sabotaging an upcoming performance with a
14 costly behavioral self-handicap, but just in case they do fail, they may desire the protection of a
15 relatively low-risk, claimed self-handicap. Indeed, Martin and Brawley (2002, Study 2) found
16 that low self-esteem was associated with greater claimed self-handicapping prior to a fitness test.

17 The primary purpose of the present experiment was to examine self-efficacy and self-
18 esteem as predictors of claimed and behavioral self-handicapping. It was predicted that self-
19 efficacy would be negatively correlated with the use of a behavioral self-handicap whereas self-
20 esteem would be negatively correlated with the use of claimed self-handicaps. A secondary
21 purpose was to compare the relationship between behavioral and claimed self-handicaps, and
22 athletic performance. Presumably, behavioral self-handicaps would have a negative effect on
23 performance because they lower one's chance of success (Hirt et al., 1991; Leary & Shepperd,
24 1986). Indeed, reduced preparatory effort (i.e., a behavioral self-handicap) has been linked with

1 poorer performance (e.g., Elliot et al., 2006). In contrast, claimed self-handicaps may improve
2 performance by reducing pressure to perform well (Leary & Shepperd, 1986; Ryska, Yin, &
3 Cooley, 1998). Two studies involving children produced conflicting results regarding the effects
4 of claimed handicaps on performance (Elliot et al., 2006; Ryska, 2002). Thus, further research is
5 warranted to address this issue. We hypothesized that performance on a basketball task would be
6 negatively related to behavioral self-handicapping and positively related to claimed self-
7 handicapping.

8 Method

9 *Participants*

10 Participants were 31 competitive basketball players, 16 men (M age = 20.8 years; SD =
11 4.8) and 15 women (M age = 19.6 years; SD = 3.9). All players competed at the French regional
12 level—a sufficiently competitive level to ensure that participants would be personally invested in
13 the experimental task and its outcome.

14 *Measures*

15 *General Self-esteem* was measured by the French version (Vallières & Vallerand, 1990) of
16 Rosenberg's Self-Esteem Scale (Rosenberg, 1965). Participants rated the 10 scale items on a
17 four-point Likert scale (1 = *strongly disagree*; 4 = *strongly agree*).

18 *Self-efficacy* was measured using a procedure adapted from Bandura and Adams (1977).

19 Participants indicated if they believed that they could make 1, 2, 3, 4, and 5 successful passes
20 through the obstacle course (yes/no response) and if so, their degree of confidence (0% = *not*
21 *sure*; 100% = *totally sure*). A mean score was calculated across the items to which participants
22 responded 'yes'.

23 *Claimed Self-handicapping* was measured using a state measure similar to that used and validated
24 by Martin and Brawley (2002, Study 2). The scale consisted of 14 impediments that athletes may

1 use as self-handicaps such as: “*I am feeling tired,*” “*I have personal concerns in this moment,*”
2 and “*I am ill.*” The impediments were those most frequently cited by athletes in studies of self-
3 handicapping in sport (e.g., Carron, Prapavessis, & Grove, 1994). Participants indicated whether
4 each impediment was present (*yes/no*), and the extent to which it would interfere with their
5 performance (i.e., perceived impact), using a scale ranging from 0 (*not at all*) to 6 (*extremely*). A
6 total score was calculated by summing the impact scores for the impediments that were present.
7 Two items were reversed scored before being added to the total.

8 *Behavioral Self-handicapping.* Within the context of sports participation, a lack of preparatory
9 effort constitutes an index of behavioral self-handicapping (Prapavessis, Grove, & Eklund, 2004).
10 Thus, behavioral self-handicapping was operationalized as the amount of time, in minutes, spent
11 practicing during a warm-up period. A measurement protocol used by Harris and Snyder (1986)
12 and Tice (1991) was employed (see procedure).

13 *Performance.* Performance was scored by counting the number of successful shots and passes
14 completed on an obstacle course (described next). Performance scores could range from 0 to 11.

15 *The Experimental Task*

16 The task consisted of completing three repetitions of an obstacle course laid out on a
17 standard basketball court. The test began with the completion of two free-throws followed by
18 running to mid-court, and then turning around backwards and performing a backward defensive
19 shuffle to the end of the court. Then, the participant picked up a basketball and dribbled it to mid-
20 court. At mid-court, the participant dribbled the ball between three pylons while bouncing the
21 ball between the legs and passing it behind the back. The participant then continued to the basket
22 and attempted a lay-up. After the lay-up, the participant repeated the entire course again and
23 finished with a jump shot. The course was repeated a third time, finishing with a three-point shot.

24 *Procedure*

1 To maximize the likelihood of self-handicapping, an experimental situation was created in
2 which factors that are known to elicit self-handicapping (for a review, see Coudeville et al.,
3 2008) were made salient. Specifically, the testing situation emphasized public performance, an
4 emphasis on results, social comparisons of one's performance with others, and public awareness
5 of the use of self-handicaps. Participants performed the test in the presence of spectators, coaches
6 and other players, were told that their test results would be used to identify the best and worst
7 players in the region, and that their scores would be compared with their teammates' scores.

8 After hearing and reading this information, participants completed the measures of self-
9 esteem and self-efficacy. Then, they completed the measure of claimed self-handicapping. In
10 order to mask the true purpose of the self-handicapping questionnaire, participants were told:

11 “The following questionnaire is intended to know your general actual state in order to
12 comment on your results today. It will allow those that will evaluate your competence (the
13 experimenter, your trainer, the other players, the spectators) to consider your current personal
14 situation when authenticating your results and comparing them with those of the other
15 participants. Your responses to this questionnaire will be made public along with your results
16 so that those who evaluate your performance will be better able to evaluate your competence”.

17 After completing the claimed self-handicapping measure, the experimenter explained the
18 warm-up procedure. In accordance with Harris and Snyder (1986) and Tice (1991), participants
19 were told that they could have as much time as they desired to warm-up. To make sure that all
20 participants realized that a lack of preparatory effort could serve as a behavioral self-handicap,
21 the experimenter told the participants that a lack of preparatory effort could provide an
22 explanation for a good or bad performance on the test. He also reminded players that a good
23 warm-up is essential to a good performance and that a bad warm-up can provoke a bad
24 performance. Therefore, participants knew that the lack of practice before the test could be

1 detrimental to their performance (see Harris & Snyder, 1986; Tice, 1991). As no participant had
2 previously performed the experimental task, one can assume that a warm-up would be essential to
3 successful performance of the task.

4 Participants then warmed-up and the experimenter timed each participant's warm-up.
5 Once the participant indicated that she/he was ready, the experimental task proceeded. Upon
6 completion of the task, the participant was debriefed regarding the true purpose of the study.

7 Results

8 *Descriptive statistics*

9 Three female participants refused to perform the warm-up and test due to injury. Thus, for
10 analyses relating to behavioral self-handicapping and performance, $n = 28$. For all other analyses,
11 $n = 31$. Prior to testing our hypotheses, ANOVAs were conducted to examine possible sex
12 differences in self-handicapping (see Kuczka & Treasure, 2005) and performance. As these
13 ANOVAs were not significant ($ps > .05$), the data were collapsed across sex for all subsequent
14 analyses.

15 *Correlation Analyses*

16 Table 1 shows that as predicted, claimed self-handicaps were significantly negatively
17 correlated with self-esteem ($r = -.48, p < .01$), but not self-efficacy ($r = -.12, p > .05$), such that
18 athletes with lower self-esteem reported a greater impact of performance impediments. Also as
19 predicted, time spent warming up was significantly positively correlated with self-efficacy ($r =$
20 $.52, p < .01$), but not self-esteem ($r = -.35, p > .05$). Thus, as self-efficacy increased, behavioral
21 self-handicapping decreased as indexed by greater time spent practicing. In partial support of our
22 third hypothesis, performance was correlated with time spent warming up ($r = .50, p < .01$), but
23 not with the impact of claimed self-handicaps ($r = .07, p > .05$).

Discussion

1
2 The primary purpose of the present experiment was to examine self-efficacy and self-
3 esteem as predictors of behavioral and claimed self-handicaps. The results supported the
4 hypotheses and demonstrated that self-efficacy was negatively correlated with the use of a
5 behavioral self-handicap (i.e., short time of preparation) whereas self-esteem was negatively
6 correlated with the use of claimed self-handicaps. Our results support the notion that the use of
7 behavioral self-handicaps may be linked to *situation-specific* low levels of self-efficacy for
8 performance on the upcoming task. Athletes who use behavioral self-handicaps may take such a
9 risk because they are convinced of an impending performance failure, as evidenced by their lower
10 levels of task self-efficacy. Although behavioral self-handicappers may feel that they have
11 nothing to lose (in terms of their performance) by using a behavioral self-handicap, they can still
12 protect their self- and public-images by using such a strategy.

13 Our findings were consistent with previous research which showed that individuals who
14 anticipated an upcoming failure *intended* to use a behavioral self-handicap (Pyszczynski &
15 Greenberg, 1983). Importantly, our findings extended this work by showing that athletes with
16 self-doubts will *actually* use a behavioral self-handicap (i.e., time spent warming up). With
17 regard to the use of claimed self-handicaps, our results supported Martin and Brawley's (2002)
18 findings, as claimed self-handicaps were significantly negatively correlated with self-esteem
19 Athletes who use claimed self-handicaps seem to suffer from more *general* self-doubts (i.e., low
20 self-esteem). As predicted, they may prefer to use claimed self-handicaps, and not behavioral
21 self-handicaps, because they hope to succeed in spite of their low self-esteem.

22 The second purpose was to compare the relationships between behavioral and claimed
23 self-handicaps and athletic performance. The results provided partial support for our hypotheses.
24 Specifically, performance on a basketball task was negatively related to behavioral self-

1 handicapping, but was not related to claimed self-handicapping. Our findings are consistent with
2 those of Elliot and colleagues (2006) who showed that reduced preparatory effort (i.e., a
3 behavioral self-handicap) is linked with poorer performance. However, contrary to previous
4 research (Leary & Shepperd, 1986; Ryska et al., 1998), our results did not show that claimed self-
5 handicaps improve performance. In these previous studies, it was suggested that self-handicaps
6 improve performance by reducing performance pressure; perhaps in the present study, because
7 social evaluative pressures were made so salient, the reduction of the anxiety from claimed self-
8 handicaps was not sufficient to enhance performance.

9 Our results make an important contribution to theory by providing the first sports-based
10 evidence of the conceptual distinction between self-handicapping behaviors and claims. We have
11 shown that the two strategies are indeed related to different factors and can have different
12 consequences for performance. From an applied perspective, given that self-efficacy was related
13 to behavioral self-handicapping which was, in turn, associated with poorer performance, our
14 results suggest that coaches, sport psychologists, and other interventionists should endeavour to
15 promote strong self-efficacy among their athletes. Not only is self-efficacy important for success
16 (e.g., Bandura, 1997) but as the observed correlation between self-efficacy and warm-up time
17 indicate, self-efficacy is also important for deterring the use of harmful behavioral self-handicaps.
18 Despite these contributions, a couple of limitations warrant mention. First, given the relatively
19 small number of participants with a similar level of ability, the generalizability of our study
20 findings are limited. Second, the measure of behavioral self-handicapping could be confounded
21 by factors such as over-confidence or weak motivation. Future research would benefit from
22 testing these hypotheses with a larger, more heterogeneous sample, and controlling for potential
23 confounds of behavioral self-handicapping.

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- 24

1 *Table 1.*2 *Correlations, Means and Standard Deviations of the Variables of the Study*

	2	3	4	5	<i>M</i>	<i>SD</i>
4 1. Self-Efficacy	-.18	-.12	.52**	.19	46.02	15.02
5 2. Self-Esteem		-.48**	-.35	-.20	28.64	3.48
6 3. Claimed Self-handicapping			.00	.07	16.29	7.58
7 4. Time Spent Warming Up ⁺				.50**	13.21	6.51
8 5. Performance					7.10	2.07

9 *Note: * $p < .05$; ** $p < .01$*

10

11 ⁺Time spent warming up is the measure of behavioral self-handicapping. Thus, less warm-up

12 time is indicative of greater self-handicapping.