

Who volunteers for companionship with mental patients? A study of attitude-belief-intention relationships¹

Edward H. Fischer,² Connecticut Valley Hospital

A major purpose of this study was to show the degree of relationship between humanitarian attitudes and beliefs about mental patients, on one hand, and volunteering for a companionship program for mental hospital patients, on the other. Stated in bald terms, this seems a modest and straightforward sort of research goal. A respondent's attitude toward helping others (e.g., "needy or unfortunate persons") and beliefs about patients (e.g., "it's dangerous to forget for a moment that they are mentally ill") ought to affect his inclination to visit a chronic patient on a regular basis. Yet the social psychology literature indicates that predictive validity of attitude measures is perhaps the most poorly verified area of attitude research. Wicker (1969) reviewed many of the relevant studies going back to LaPiere's (1934) classic, and found that only rarely have investigators reported a correlation as high as .50 between what people say (attitude measure) and what they do (attitude-appropriate behavior) with regard to an attitude object.

To illustrate, Fazio (1969) found correlations of up to .49 between stated fear of insects and subjects' overt handling of a large cockroach. The subjects' performance took place just after they had completed the fear survey, and under these instructions: "In an attempt to assess the extent to which students might be afraid of handling certain animals, we have selected one situation listed in the survey you have just completed" (p. 706, my emphasis). Under such a heavy set for attitude-behavior con-

1. The study was partly supported by Public Health Service Research Grant 1 RO 3 MH 16749-01 from the National Institute of Mental Health.

2. The cooperation of Dr. Philip D. Wheaton, President, Middlesex Community College, and his staff is gratefully acknowledged. The author also wishes to thank Carol Efron and Gary Johnson for their help with data tabulation and analyses.

pp 112 to 113

Companionship
sistency, the
unity. Fish
Fishbein (1
might be e
aspects of a
presumed to
ably or unfa
individual r
in a certain
Negro beca
rudely, or b
particular N
he fears ins
he wants to
or please th

In Fishb
statements o
have the clo
concerning
dictors of i
Warner and
situational c
in an effecti
tudes affect
tribution sho
the situation
by group co

In the pr
titude variab
field-recruitm
in a group o
to join a cor
tention to p
patient who,
(b) general
about helpin
and mental i

3. The Comp
Knapp, and Tur

sistency, the correlations might have been expected to approach unity. Fishbein (1967), Iusko and Schopler (1967), Ajzen and Fishbein (1969), and others have suggested that predictions might be enhanced by taking into account several attitudinal aspects of a behavioral situation, rather than just one which is presumed to be the chief underlying predisposition to act favorably or unfavorably toward the attitude object. For example, an individual may hold a prejudiced attitude toward Negroes yet in a certain setting respond objectively or favorably toward a Negro because he believes he will be punished for behaving rudely, or because he indeed has positive feelings toward this particular Negro person. Or in Fazio's situation, subject may say he fears insects but nevertheless handles the cockroach because he wants to fulfill the role of experimental subject, as he sees it, or please the experimenter.

In Fishbein's (1967) formulation, behavioral intentions (i.e., statements of the form "I would do thus and so in that situation") have the closest alliance to behavior, while feelings and beliefs concerning the attitude object may or may not be good predictors of intentions and behaviors. Other theorists, such as Warner and DeFleur (1969), maintain that personal motives and situational constraints for or against action must also be included in an effective prediction equation. However, if individual attitudes affect an important part of behavioral variance, their contribution should be demonstrable apart from unique features of the situation, particularly when the relationships are determined by group comparison methods.

In the present investigation, two hypothetically pertinent attitude variables were used to postdict behavioral intention, in a field-recruitment setting. The following attributes were measured in a group of incoming students who had been given an appeal to join a companionship program³ for mental patients: (a) *intention* to participate in a helping relationship with a mental patient who, according to hospital staff, could benefit by a visitor; (b) *generalized attitudes* of social responsibility and concern about helping others; (c) *specific beliefs* about mental patients and mental illness.

3. The Companion Program has been previously described by Holzberg, Knapp, and Turner (1967).

It was thought that general altruistic attitude and specific beliefs about mental patients, in linear combination, would have a reasonably close link to subjects' intentions to participate in companionship. In effect, beliefs about patients would function like a kind of cognitive screen, with respect to humanitarian attitude. Persons who hold negative beliefs, e.g., that patients are dirty, dangerous and unpredictable, unlike "normal people," etc., will tend to shy away from a program intended to bring them into contact with such individuals, despite their altruism. The inclination of subjects who do not hold unfavorable views of mental patients to take part in the program will vary according to the positiveness of their helping attitude.

METHOD

Subjects and Procedure

The respondents were 329 new students at Middlesex Community College, who met in August, prior to their first classes. The reason for the assembly was to meet college officials, find out about class schedules, and so forth. The author had arranged with the administration to be introduced as "Coordinator of the College Student Companion Program at CVH (Connecticut Valley Hospital)," following some brief preliminary talks by the college's president, registrar, and dean.

Nearly all subjects' family homes were within commuting distance of the college, and biographical data taken at the time of recruitment revealed that over one-half of the students were natives of Middletown (locale of both college and hospital) or an immediately adjacent town. The subjects were, then, more typically members of the community surrounding the recruiting hospital than the student-subjects of some previous hospital visitation studies, e.g., Knapp and Holzberg (1964). The majority of the present students were certain to have been acquainted with the hospital, as a community institution, and likely had formed some attitudes about CVH and about mental patients.

The appeal for volunteers was given vocally and printed on sign-up forms. The author told the gathering he had two purposes, to ask their participation in the hospital's companion program, and to collect data for a study of college students' attitudes. He explained that each volunteer would visit one patient continuously—an hour a week, for the duration of a semester or an entire school year. It was emphasized that patients selected for companionship had been in the hospital

Companionship
for long periods
from friends
brief instructions
ment forms (v

Recruitment

The sign-up
tinguished from
the first a 40
panionship, st
with patients
times could b
page they we
address, and t

Please check

I w
CV
Wo
con
at
Pro
pro
pre
De
join

Comments (if

Instruction
ested" categor
item determin
underway. R
themselves av
a negative ca

The attach
postdict inten
graphic inform
data). The at
developed to

4. E. H. Fi
Unpublished ar

for long periods, had no regular visitors, and potentially could benefit from friendship with an interested outsider. Students were then given brief instructions for filling out the attitude scales, and the recruitment forms (with attached attitude inventory) were distributed.

Recruitment Form and Attitude Scales

The sign-up form was printed on colored paper, and thereby distinguished from the attitude questionnaire. It consisted of two pages, the first a 400 word explanation of the purposes and logistics of companionship, stressing need for visitors, how students might interact with patients (playing cards, going for walks, etc.), and that visiting times could be arranged to suit the students' schedules. On the next page they were asked to record their name, telephone number, and address, and to respond to the item appearing below:

Please check one of the following:

- I would like to become a companion at
CVH this fall
- Would probably like to be in the
companion program, but I am unsure
at this time
- Probably not interested in this
program, but I am unsure at the
present time
- Definitely not interested in
joining CVH companion program

Comments (if any):

Instructions made it clear that, while checking one of the "interested" categories need not represent a final decision, responses to the item determined who would be contacted later, as the program got underway. Respondents who indicated positive intent thus made themselves available for the future recruitment; those who checked a negative category effectively closed off this possibility.

The attached questionnaire contained the attitude scales used to postdict intentions, a short-form social desirability test, and a demographic information sheet (sex, birth order, religion, and social-class data). The attitude inventory included 68 items from a longer series developed to measure several humanitarian dimensions.⁴ The present

4. E. H. Fischer. Consistency among humanitarian and helping attitudes. Unpublished article, Connecticut Valley Hospital, 1970.

inventory omitted statements referring to animals and children, which were in the original. The remaining items comprised four scales, derived by factor analysis, which assessed helping, social responsibility, and nontraditional humanitarian (essentially sex progressivism) views, and attitude toward criminals. The helping and social-responsibility attitudes were of most interest in the current study; the nontraditional and criminal scales were given as control measures, to see if the former two factors correlated more strongly with volunteering (as would be expected). Examples of items from the helping and social-responsibility scales are, respectively: "You can get into real trouble being a 'Good Samaritan,' and are better off steering clear of others' problems," and "I would like to take part in a social action program for aiding needy or unfortunate persons."

Fourteen belief statements about mental patients and mental illness also were given. Ellsworth (1965) found that scores of psychiatric aides, on this beliefs scale, were highly correlated with patients' perceptions of the aides' behaviors (toward patients).⁵ "Good" aides were apt to reject statements such as "Every mental hospital should be surrounded by a high fence with guards."

All attitude items were presented in a four-category (agree-disagree) response format. The scales were keyed so that a high score meant prohumanitarian attitude, or benign beliefs about patients.

The social desirability test consisted of 17 Marlowe-Crowne (1960) items selected from Goldfried's (1964) cross-validity study.

RESULTS

Intention to Participate (Volunteering) as a Critical Dependent Variable

It must be noted that, in the present study, the attitude variables were not being correlated with behavior per se, but rather with volunteering to participate in companionship (at a future date). Intention is a rather indirect behavioral criterion. However, scaled intentions may be a purer measure than a gross behavioral index, say, whether subject showed up or not for a preliminary companion session. The intention may exclude contaminating factors such as the student's having other obligations at the arranged time. Nonetheless, it was certainly desirable to check the correspondence between intention and

5. Ellsworth named this scale "nontraditionalism." However, to spare confusion with the "nontraditional humanitarian" attitude, also studied herein, Ellsworth's scale will be called (with apology) "beliefs about patients."

Companionship w
"actual" behav
of intention as
questionable.

Approximat
forms had been
category 4 (1
number of sub
gories 3 (prob
were sent a for
being held the
return postcar
whether he cou
he wanted anot
or wanted to w
and reminded o

Forty-eight
3, and none of
and began seei
chi-square test
categories 4, 3
There was, then
intention and la

Demographic C

The relations
ness to sign up
only demograph
showed a much
The finding is r
represented in h
altruism than m
with previous i
psychological re
more likely than
Kinsey-type inte
volving hypnosi
visits with a me
risk, the action i

6. E. H. Fischer,

"actual" behavior. If the two were completely unrelated, use of intention as a variable to represent volunteering would be questionable.

Approximately three weeks after the recruitment and attitude forms had been administered, the 23 students who had checked category 4 (highest interest in program), and an equivalent number of subjects—picked randomly—who had checked categories 3 (probably interested) and 2 (probably not interested), were sent a form letter. The letter stated that two meetings were being held the following week, to discuss companionship. A return postcard was enclosed for the respondent to indicate whether he could make one of the meetings, or if not, whether he wanted another appointment with the companion coordinator, or wanted to withdraw. Students not heard from were telephoned and reminded of the meetings.

Forty-eight percent of category 4, 22 percent from category 3, and none of the category 2 students subsequently responded and began seeing companion patients at the hospital. A 2×3 chi-square test of the frequencies (show versus no-show, for categories 4, 3, and 2) yielded $\chi^2 = 15.08$, $df = 2$, $p < .001$. There was, then, a substantial correspondence between expressed intention and later performance.

Demographic Correlates of Intention

The relationships between demographic variables and willingness to sign up for companionship can be seen in Table 1. The only demographic factor which seemed to matter was sex. Women showed a much greater inclination to volunteer ($p < .0001$). The finding is not surprising, since women frequently are over-represented in humanitarian activities, and have shown stronger altruism than men.⁶ But it is interesting to compare the result with previous findings of sex differences in volunteering for psychological research. Rosenthal (1965) reported that men were more likely than women to take part in risky experiments (e.g., Kinsey-type interviews about sexual behavior, and studies involving hypnosis or electrical shocks). While volunteering for visits with a mental patient can be considered an interpersonal risk, the action is probably motivated more seriously by kindness

6. E. H. Fischer, Consistency among humanitarian and helping attitudes.

Table 1. Percentages of students who expressed positive or negative intention to join companion program by sex, birth order, religion, and social class.

Intention	Demographic factor								
	Sex ^a		Birth order ^b		Religion ^c			Social class ^d	
	Male (N = 220)	Female (N = 109)	Firstborn (N = 137)	Later born (N = 192)	Roman Catholic (N = 211)	Protestant (N = 100)	Other (N = 16)	I, II, III (N = 91)	IV, V (N = 235)
Positive (N = 96)	20	48	29	29	31	23	31	29	30
Negative (N = 233)	80	52	71	71	69	77	69	71	70

Note.—Subjects who checked categories 4 or 3 (interested, probably interested) on the sign-up sheet were considered to have positive intent, for the analyses; those who checked 2 or 1 had negative intent (not interested). Incomplete information for religion and social class reduced the total N slightly in these two classifications.

^a $\chi^2 = 25.8, df = 1, p < .0001.$

^b $\chi^2 < 1.$

^c χ^2 (RC vs. Prot.) = 2.3, $df = 1, p > .10$

^d $\chi^2 < 1$; social class was indexed by applying Hollingshead's (1957) criteria to the occupation and education of subject's father.

than by a desire for novel adventures. This interpretation was bolstered by the analyses of attitudes, presented next.

Attitudes of Volunteers and Nonvolunteers

Table 2 gives the mean scores for subjects who indicated positive or negative intent to join the program, for each of the predictor-scale variables. As shown, volunteers scored significantly higher in the humanitarian direction on all but the nontraditional scale. Volunteers also held more benign beliefs about mental patients. However, there was no apparent distinction between the two groups for social desirability, suggesting that a tendency to make oneself look good on this test did not influence intentions.

The correlations between the various attitude measures and scaled intentions are given in the first column of Table 3. The largest coefficient obtained was $r = .36$, for both helping and social-responsibility scales. Although the .36 coefficient is quite low, it represents an appreciably stronger relationship than the

Table 2.—Mean scores for subjects who expressed positive or negative intent to join the program.

Variable	Positive Intent (N = 96)	Negative Intent (N = 233)
Helping	3.58	3.12
Social responsibility	3.58	3.12
Nontraditional	3.12	3.58
humanitarian	3.58	3.12
Criminal	3.12	3.58
Beliefs about patients	3.58	3.12
Social desirability	3.12	3.58

Note.—The analyses were conducted on the sexes, analysed separately.

* $p < .01$

** $p < .001$

*** $p < .0001$

Table 3. Intention to join the program and belief measures.

Variable	Intention
Helping	.36
Social responsibility	.36
Nontraditional	-.18
humanitarian	.36
Criminal	-.18
Beliefs about patients	.36
Best-predictor	.36

Note.—All correlations are significant at $p < .05$.

.18 correlation (ts = 3.58 and social responsibility both tests).

The correlations between the various attitude measures and scaled intentions are given in the first column of Table 3. The largest coefficient obtained was $r = .36$, for both helping and social-responsibility scales. Although the .36 coefficient is quite low, it represents an appreciably stronger relationship than the

7. All t and F values are significant at $p < .05$.

Table 2. Mean attitude and social desirability scores for students who expressed positive or negative intention to join companion program.

Variable	Intention				t (difference)
	Positive (N = 96)		Negative (N = 233)		
	\bar{X}	SD	\bar{X}	SD	
Helping	39.3	5.62	34.9	6.00	6.32***
Social responsibility	55.2	5.62	50.3	7.18	6.60***
Nontraditional humanitarian	34.1	4.69	33.2	4.90	1.56
Criminal	46.6	7.57	43.2	8.22	3.61**
Beliefs about patients	40.3	6.51	37.7	6.69	3.27*
Social desirability	9.4	3.45	9.1	6.74	0.53

Note.—The attitude differences between positive and negative intent groups also held within sexes, analysed separately.

* $p < .01$
 ** $p < .001$
 *** $p < .0001$

Table 3. Intercorrelations (Pearson r) between intention, attitude, and belief measures (N = 329).

Variable	Intent	Help	Soc-R	Nontr.	Crim.	Beliefs
Intention						
Helping	.36					
Social responsibility	.36	.64				
Nontraditional humanitarian	.15	.31	.29			
Criminal	.21	.48	.50	.35		
Beliefs about patients	.18	.53	.42	.32	.32	
Best-predictor	.47	.89	.78	.33	.60	.52

Note.—All correlations significantly greater than zero ($p < .005$); uncorrected for attenuation.

.18 correlation between beliefs about patients and intentions ($t_s = 3.58$ and 3.23 for helping versus beliefs, and social responsibility versus beliefs, respectively; $df = 326$, $p < .002$ in both tests).⁷

The correlation was raised to $r = .47$ through use of a bastard scale, composed of 17 items that correlated .20 ($p < .001$, $df = 327$) or greater with volunteering. The bastard scale included mostly helping and social-responsibility statements; none of the beliefs about patients items met the criterion for inclusion in this best-predictor instrument.

7. All t and z tests reported were based on two-tailed distributions.

Table 4. Attitude-intention correlations within beliefs subgroups.

Variable	Beliefs about patients			z (difference) favorable versus neutral
	Favorable (N = 107)	Neutral (N = 116)	Unfavorable (N = 106)	
Helping	.24	.47	.32	-1.95*
Social responsibility	.27	.40	.33*	-1.03
Nontraditional		.27	.04	-1.98**
humanitarian	.00	.12	.17	0.99
Criminal	.25	.57	.47	-1.98**
Best-predictor	.36			

Note.—Standard deviations were practically identical, across belief subgroups, for every attitude variable.

* $p < .06$

** $p < .05$

Beliefs as Moderator for Attitude-Intention Correlation

It will be recalled the study's chief prediction was that humanitarian attitude and beliefs about patients combined would correlate with intentions better than either variable alone, with the best attitude-intention correlation being for subjects with most benign beliefs. To test the prediction, the whole sample was divided into three subgroups (favorable, neutral, unfavorable), on the basis of belief scores. According to the hypothesis, the highest coefficients should obtain for subjects with favorable beliefs. Looking at Table 4, it can be seen that the hypothesis was not verified. In fact, the weakest relationships occurred in the favorable beliefs subsample; also, some of the most important correlations (helping, best-predictor) were significantly greater for subjects with neutral beliefs. The correlation between best-predictor scores and intentions was $r = .57$, within the neutral beliefs subgroup.

Thus, attitudes and beliefs appeared to interact (nonlinearly) in their relationship to intentions. The author's best guess as to why this occurred is prompted by Ellsworth's (1965) comment that the beliefs about patients scale may be highly correlated with authoritarianism. Vacchiano, Strauss, and Hochman (1969) suggested authoritarian scales may be curvilinear predictors of certain behavior. In the present case, beliefs about patients per se may have had little bearing on the other variables studied; but

Companionship with perhaps the best which moderate

Unfortunately evaluated direct the questionnaire—.66 correlation additional humanitarian of sexual progress educated in me age girl the or been included between nontrad was only .32 (able, fairly ind

Accordingly of nontradition correlations ex intercorrelation coefficients w by the antihur (smallest coef scale, then, a latent person true moderate

The current Turner's (19 vide "... an altruism . . . as regards d religion, or soc than nonvol responsibility more import in students'

The relat was most co

8. E. H. Fis

perhaps the beliefs scale represented a personality dimension which moderated differences in attitude-intention correlations.

Unfortunately the retrospective explanation could not be evaluated directly, as no authoritarian scale had been given with the questionnaire. However, in another study the author found a $-.66$ correlation between California F Scale scores and nontraditional humanitarianism;⁸ the latter measure consists primarily of sexual progressivism items (e.g., "All young people should be educated in methods of birth control, if only to spare some teenage girl the ordeal of having an illegitimate child"), and had been included in the present inventory. Also, the correlation between nontraditional humanitarianism and beliefs about patients was only $.32$ (see Table 3)—therefore a second mediating variable, fairly independent of the first, could be tried.

Accordingly, subjects were trichotomized again on the basis of nontraditional humanitarian scores, and the attitude-intention correlations examined in the new subgroups. The pattern of intercorrelations was very similar to that in Table 4; the largest coefficients were in the neutral humanitarian group, followed by the antihumanitarian, and then the prohumanitarian subgroup (smallest coefficients). The precise contents of the moderator scale, then, appeared not to matter. It seems probable that a latent personality dimension, common to both scales, was the true moderator.

CONCLUSIONS

The current findings solidly support Holzberg, Knapp, and Turner's (1967) contention that companionship programs provide "... an outlet for certain impulses of human generosity and altruism . . ." (p. 98). Although volunteers were not atypical as regards demographic characteristics such as birth order, religion, or socioeconomic class, they were considerably more likely than nonvolunteers to be oriented toward helping and social-responsibility. Evidently general humanitarian attitudes figured more importantly than did specific beliefs about mental patients in students' getting involved in the hospital program.

The relationship between attitudes and behavioral intentions was most consistent for subjects who were nonextreme on a third

8. E. H. Fischer, Consistency among humanitarian and helping attitudes.

Edward H. Fischer

subgroups.

	z (difference) favorable versus neutral
	-1.95*
	-1.03
	-1.98**
	0.99
	-1.98**

of subgroups, for every

relation

ion was that hu-
combined would
variable alone, with
or subjects with
whole sample was
ral, unfavorable),
e hypothesis, the
s with favorable
at the hypothesis
ships occurred in
he most important
nificantly greater
ion between best-
within the neutral

eract (nonlinearly)
's best guess as to
s (1965) comment
ghly correlated with
chman (1969) sug-
r predictors of cer-
out patients per se
riables studied; but

dimension (probably authoritarianism). This result offers some promise that predictions from attitudes can be sharpened by taking into account personality factors.

SUMMARY

329 students were asked to join a companionship program for mental hospital patients. It was expected that the relationship between humanitarian attitudes and intention to participate would be stronger for subjects with benign beliefs than for subjects with unfavorable beliefs about patients. The findings were: (a) subjects' intentions corresponded to their later joining ($p < .001$), and were unrelated to social desirability; (b) general helping and social-responsibility attitudes correlated higher than did specific beliefs about patients, with willingness to become a companion; (c) attitude-intention correlations were greatest for subjects with neutral beliefs, and *weakest* for subjects with benign beliefs (upsetting the main hypothesis); (d) the same pattern of correlations obtained in subgroups trichotomized on the basis of another scale (ostensibly unrelated to volunteering for companionship) which had an authoritarian component. Result (d) suggests that a personality factor, not beliefs about patients, moderated variations in the attitude-intention relationship.

REFERENCES

- Ajzen, I., & Fishbein, M. The prediction of behavioral intentions in a choice situation. *Journal of Experimental Social Psychology*, 1969, **5**, 400-416.
- * Ellsworth, R. B. A behavioral study of staff attitudes toward mental illness. *Journal of Abnormal Psychology*, 1965, **70**, 194-200.
- Fazio, A. F. Verbal and overt-behavioral assessment of a specific fear. *Journal of Consulting and Clinical Psychology*, 1969, **33**, 705-709.
- Fishbein, M. Attitude and the prediction of behavior. In M. Fishbein (Ed.), *Readings in attitude theory and measurement*. New York: John Wiley & Sons, 1967.
- Goldfried, M. R. A cross-validation of the Marlowe-Crowne social desirability scale items. *Journal of Social Psychology*, 1964, **64**, 137-145.
- Hollingshead, A. B. Two factor index of social position. Manuscript, Yale University, 1957.
- Holzberg, J. D., Knapp, R. H., & Turner, J. L. College students as companions to the mentally ill. In E. L. Cowen, E. A. Gardner, & M. Zax (Eds.), *Emergent approaches to mental health problems*. New York: Appleton-Century-Crofts, 1967.
- Insko, C. A., & Schopler, J. Triadic consistency: A statement of affective-cognitive-consistency. *Psychological Review*, 1967, **74**, 361-376.
- Knapp, R. H., & Holzberg, J. D. Characteristics of college students volunteering

Edward H. Fischer

is result offers some
n be sharpened by

ionship program for
at the relationship
ion to participate
beliefs than for sub-
The findings were:
later joining ($p <$
ility; (b) general
related higher than
gness to become a
were greatest for
for subjects with
); (d) the same
trichotomized on
l to volunteering
component. Re-
ot beliefs about
attention relation-

entions in a choice
9, 5, 400-416.
ward mental illness.

pecific fear. *Journal*
9.
I. Fishbein (Ed.),
rk: John Wiley &

social desirability
15.
Manuscript, Yale

nts as companions
M. Zax (Eds.),
York: Appleton-

of affective-cog-
361-376.
ents volunteering

Companionship with mental patients

563

- for service to mental patients. *Journal of Consulting Psychology*, 1964, 28, 82-85.
- LaPiere, R. T. Attitudes vs. actions. *Social Forces*, 1934, 14, 230-237.
- Marlowe, D., & Crowne, D. P. A new scale of social desirability independent of psychopathology. *Journal of Consulting Psychology*, 1960, 28, 349-354.
- Rosenthal, R. The volunteer subject. *Human Relations*, 1965, 18, 389-406.
- Vacchiano, R. B., Strauss, P. S., & Hochman, L. The open and closed mind: A review of dogmatism. *Psychological Bulletin*, 1969, 71, 261-273.
- Warner, L. G., & De Fleur, M. L. Attitude as an interactional concept: Social constraint and social distance as intervening variables between attitudes and action. *American Sociological Review*, 1969, 34, 153-169.
- Wicker, A. W. Attitudes versus actions: The relationship of verbal and overt behavioral responses to attitude objects. *Journal of Social Issues*, 1969, 25, 41-78.

Manuscript received January 14, 1971.