Debra Pepler’s work focuses on children’s aggressive behaviors (e.g., bullying) using naturalistic observations of interactions among school-aged peers with remote microphones and video cameras. She also studies risk and protective factors associated with the adjustment of children in violent, homeless, 1-parent and 2-parent families. I had the opportunity to see her deliver an interesting day-long workshop to the Learning Disabilities Association in Waterloo a few years ago, when she presented intriguing examples of bullying on the playground on videotapes. She’s an engaging speaker and clearly her work fits well with our interpersonal focus.

Welcome back from your vacations and visits over the holidays! I hope you enjoyed a break and are feeling invigorated and refreshed, looking forward to all the possibilities of the upcoming year.

Preparations are well underway for our 12th annual meeting, which will be held in Toronto on Saturday May 30 and Sunday May 31. The meeting will be hosted by Marc Fournier, who is also the program chair this year. The call for submissions, registration form, and hotel information are all enclosed. We are honored to have two keynote speakers this year: Erik Woody and Debra Pepler. Erik Woody’s interests lie in personality theory and measurement, and in exploring the relationship between personality and psychopathology. His more recent work focuses on studying patterns of social interaction and their relation to psychopathology, and how hypnosis may be used to create analogues of psychopathological states (such as auditory hallucinations and OCD behaviors). I am particularly pleased he will be joining us this year, and hope you will welcome him warmly. Perhaps you’ll be able to convince him to tell an interesting story or two about Bob Carson, who first introduced him to interpersonal theory when Erik was a graduate student at Duke University.

Debra Pepler’s work focuses on children’s aggressive behaviors (e.g., bullying) using naturalistic observations of interactions among school-aged peers with remote microphones and video cameras. She also studies risk and protective factors associated with the adjustment of children in violent, homeless, 1-parent and 2-parent families. I had the opportunity to see her deliver an interesting day-long workshop to the Learning Disabilities Association in Waterloo a few years ago, when she presented intriguing examples of bullying on the playground on videotapes. She’s an engaging speaker and clearly her work fits well with our interpersonal focus.

The 12th annual SITAR meeting will be held on the University of Toronto’s historic St. George Campus on May 30th-31st. Guests can choose to stay at the Howard Johnson located in the heart of Yorkville, Toronto’s fashionable shopping, dining and entertainment district (CAD$119/night), or at the Holiday Inn Midtown (CAD$129/night). Although both hotels are within walking distance of the St. George Campus it is recommended that attendees first try to book at the Holiday Inn Midtown. The rooms at the Holiday Inn are bigger, the walking distance to campus is several minutes shorter, and it is much closer to the restaurant where we will be holding our group dinner. Both hotels are right in the heart of downtown Toronto, in close proximity to some of the finest attractions. Public transportation is close to both locations, providing quick and easy access to many areas around the city. Additional information about lodging can be found in the registration form included with the newsletter or by visiting SITAR webpage at sitarsociety.org.

(continued on page 8)
Social phobia is a condition characterized by a persistent fear of one or more social or performance situations (American Psychiatric Association, 1994) that is typically chronic in course and may affect as much as 13.3% of the population at some point in their life (Kessler et al., 1994). Individuals diagnosed with social phobia often live in constant fear of scrutiny, embarrassing themselves, appearing foolish, or appearing less intelligent than others.

A common critique of the social phobia diagnosis is the inclusion of a generalized subtype. According to the DSM, the generalized subtype specifier should be used “when the [individual’s] fears are related to most social situations” (APA, 1994, p. 451). However, the DSM does not explicitly define the number and type of social situations that comprise the generalized subtype, often leading to different operational definitions among various research groups and inconsistent treatment outcomes. Kachin, Newman, and Pincus (2001) argued that an interpersonal classification of social phobia could augment the DSM-based assessment of symptoms by providing clinically useful and non-overlapping information on the full spectrum of interpersonal difficulties experienced by socially phobic individuals.

Given that the ability to interact successfully with others is particularly relevant for patients with social phobia, one possible method for deriving an interpersonal classification is to use the Inventory of Interpersonal Problems – Circumplex Scales (IIP-C; Alden, Wiggins, & Pincus, 1990; Horowitz et al., 2000). The use of the IIP-C to form interpersonally based subgroups is based on a theory of pathoplasticity. Pathoplasticity argues that interpersonal factors, while distinct from pathology, can influence the presentation, treatment, and course of a particular disorder (Klein, Wonderlich, & Shea, 1993; Widiger, Verheul, & van den Brink, 1999).

Pincus and colleagues have described statistical methods for using the IIP-C to determine the presence of a pathoplastic relationship. If patients with a particular disorder are not defined by a uniform interpersonal profile on the IIP-C nor are they defined by a complete lack of systematic interpersonal expression, then it is necessary to examine whether a pathoplastic relationship exists. Individual’s responses to the IIP-C are subjected to a cluster analysis and distinct groups with characteristic interpersonal profiles may emerge. If the data support these clusters, this provides necessary but not sufficient evidence for a pathoplastic relationship. Important additional evidence is that the identified groups should not differ in their level of reported interpersonal distress and other psychological variables, such as symptom severity or comorbid psychopathology, which could serve as alternative explanations for the distinct patterns of interpersonal problems. Both results combine to provide the necessary and sufficient evidence to conclude pathoplasticity.

A number of investigations have found that individual differences in interpersonal problems exhibit pathoplastic relationships with pathological symptoms and mental disorders, such as generalized anxiety disorder (Kasoff & Pincus, 2002; Pincus & Borkovec, 2004; Salzer et al., 2008), bulimia (Hopwood, Clarke, & Perez, 2007), borderline personality pathology (Lehener et al., 2003; Ryan & Shean, 2007), perfectionism (Slaney, Pincus, Uliaszek, & Wang, 2006), and fear of failure (Wright, Pincus, Conroy, & Elliot, in press). Importantly, Hilsenroth, Menaker, Peters, and Pincus (2007) examined the interpersonal functioning of patients diagnosed with borderline personality pathology and did not find evidence of pathoplasticity. Evaluation of the patients’ circumplex profiles indicated that there was group homogeneity in the type of interpersonal problem reported. These results highlight that evidence for pathoplasticity is not an artifact of this methodological approach.

Interpersonal pathoplasticity has been demonstrated in social phobia as well. Kachin et al. (2001) found two subgroups of socially phobic individuals with discriminating core interpersonal problems. One subgroup reported difficulties with anger, hostility, and mistrustfulness while (continued on page 5)
Whenever we are introduced to a person we usually experience some immediate feelings of attraction or repulsion, particularly when this person could potentially be a future romantic partner. But why do we experience attraction to some people but not to others? This has been one of the fundamental questions in the study of romantic relationships. Over a thousand studies have been done on this topic and every social psychology textbook on the market seems to include a chapter focusing on interpersonal attraction. In fact, Berscheid and colleagues have nicely summarized this work, which led to several well-replicated “principles” of attraction (e.g., Berscheid & Reis, 1998). However, a major limitation of previous attraction studies is that the vast majority of them have exclusively relied on carefully-manipulated, laboratory-based experiments. The partner presented to the participants oftentimes does not really exist and is shown in vignettes and/or in picture; even if the partner is a real person, typically participants have no opportunity to interact with the partner and develop a real relationship with the partner. Given the limitations of this methodology it is unknown whether or not the romantic attraction one experiences in a laboratory setting generalizes to the real world (e.g., at a bar or a party).

Speed-dating offers a unique opportunity to examine initial romantic attraction processes in a real-life setting with real-life consequences. During speed dating all participants are genuinely looking for a romantic partner and have the opportunity to enter into a committed relationship if they believe they have met the right man or woman at the speed dating event.

Speed-dating is an interesting hybrid between online and offline dating. At a speed-dating event, each participant gets to have a mini-date with a number of opposite sex strangers within the safety of a friendly and merry environment that is policed by the organizers. Each “date” only takes a few minutes. At the end of the event, when all “dates” are finished, each participant informs the organizer whom they would like for a future date, but a second date can only place if the other party is in agreement.

For me the most interesting question that arises during this type of interaction is what leads people to make a decision about who they want to date. My colleagues and I conducted our own speed-dating study that mimics the commercial ones, with the exception that our participants did not pay to attend this dating event, instead they earned course credit. We ran 6 events and had a total of 54 males and 54 females. This study was an interesting experience, both for the participants and for the experimenter. I enjoyed watching how people acted from the very first minute they stepped into the “dating arena.” For example, some participants seemed to carefully dress themselves to be “dating-appropriate” and others seemed to be overly friendly in order to cover their nervousness. Most importantly all participants took the opportunity to meet new dating partners very seriously, perhaps because they seriously considered that they might be able to meet the person of their dreams.

In this study we were able to examine the extent to which the principles of attraction established by laboratory researchers using vignettes and confederates were generalized to a more realistic setting which potentially has outcomes of real-life importance (i.e., finding a romantic partner). Specifically, we tested the robustness of four principles of attraction: beauty (i.e., physical attractiveness), similarity (i.e., common background, interests, and personality), reciprocity (i.e., mutual liking), and security (i.e., ability to create and maintain a close relationship by having positive traits like extroversion, agreeableness, conscientiousness and an absence of negative traits like neuroticism, anxiety, and avoidance).

Using Kenny’s (1994) Social Relations Model analyses and meta-analyses, we found overwhelming support for the beauty principle. In fact, the strongest predictor for both males and females of attraction was partners’ physical attractiveness. In other words, women’s and men’s initial attraction feelings were dominated by how their partner looked. This finding seems contradictory to the classical evolutionary argument that men generally favor physical attractiveness more than women. We believe this finding might have resulted from the fundamental difference between mating preference research and attraction research—whereas mate preference research focuses on the conscious, rational thoughts about an ideal partner, attraction research studies less conscious and more spontaneous feelings and behaviors. The (continued on page 7)
When I was asked to write a piece regarding my experiences in seeking out a post-doctoral position, I thought, “I could fill the entire newsletter with this!” Truly, my initial intention was to obtain a faculty position in a psychology department rather than go on to a post-doctoral fellowship. Of course, life doesn’t always work out the way you plan that it will, so let me start by explaining my reasoning for seeking a post-doc in the first place.

I was in the midst of completing my internship in clinical neuropsychology at the University of Chicago when I began submitting applications for faculty positions. Let me say that this was not an easy task while working a very demanding internship! Whereas I received interest from a number of institutions and was invited for interviews, my impression was that none of the departments constituted a good fit for my research interests. It was then that I came to the realization that I had to begin considering post-doctoral positions.

Many questions popped into my head: Do I want a clinical or research position? What are my goals for a post-doc? How many years am I willing to commit to the position? Fortunately, I did not have any geographical restrictions and was in a good financial position thanks to graduate fellowships. I grappled with the question of a clinical versus research position a great deal. Being in neuropsychology, I knew that, at least from a clinical perspective, the standard was that I become certified with the American Board of Professional Psychology in my specialty. It was crucial that I keep my career goal in mind because my decisions at this juncture were completely guided by what I wanted to be “when I grow up”. Given that virtually all clinical psychology positions in Psychology departments seemed to require licensure (or at least being “license eligible”), I decided that I wanted a position where I could not only get sufficient clinical hours to be eligible for licensure but also receive preparation for my diplomat exam in clinical neuropsychology. And because I wanted to maintain some amount of clinical work in my career, I decided to primarily apply for clinical positions. In neuropsychology, this meant participating in a match process. So, I sent off a round of applications to these sites and was invited for interviews.

The issue of research experience, however, remained. If I were to have chosen an entirely research post-doc, my goal would have been to learn functional magnetic resonance imaging (fMRI) because of its relevance to my future research career. I was aware that match sites incorporated a research project into their training; although there would not be sufficient time to learn fMRI on a full-time clinical post-doc. The other snag was that my research interests, largely pertaining to personality and brain function, did not line up very well with the typical neuropsychology post-doctoral site. My decision was to contact research labs which were conducting work similar to my own which might also have opportunities for training in neuropsychology. Of these few sites, two had positions available, so I sent off my applications and interviewed for both.

My final and most fortuitous approach was to network with other sites in Chicago to determine whether I could find a position that would provide me with a combination of both clinical and research experiences. In my discussions with one of my neuropsychology supervisors at the University of Chicago, I learned that there were some unique positions available at the University of Illinois-Chicago (UIC) where I could combine clinical and research training, the former qualifying me for board certification and the latter providing training in fMRI. This option immediately struck me as just the right fit, incorporating the exact training experiences I needed to achieve my clinical and research goals. Lucky for me, this research would be right up my alley—investigating neurobiological markers of specific dimensions of personality and psychopathology in patients with bipolar disorder and their unaffected family members. After interviewing for positions throughout the country, I was offered the fellowship at UIC. I count myself lucky for capturing one of the few of these types of positions available in neuropsychology.

Looking back six months now as a Research Associate in the Center for Cognitive Medicine and Neuropsychology Fellow in the Department of Psychiatry at UIC, I can see that this was the best opportunity for me. I am well on my way to learning fMRI, developing studies examining fMRI markers of specific personality traits in bipolar disorder family members, and in the

(continued on page 7)
INTRODUCING THE GUEST SPEAKERS FOR SITAR’S 12TH ANNUAL MEETING IN TORONTO: DRS. DEBRA PEPLER AND ERIK WOODY

Dr. Debra Pepler is a Distinguished Research Professor of Psychology at York University and a Senior Associate Scientist at the Hospital for Sick Children. Her major focus is on aggression and victimization among children and adolescents, particularly in the school context. Her research identifies bullying as a relationship problem that transforms to other problems of power and aggression over the lifespan. Together with Dr. Wendy Craig, Dr. Pepler is leading a national network, PREVNet (Promoting Relationships and Eliminating Violence Network), a Networks of Centres of Excellence – New Initiative. With national non-government organizations and Canadian research partners, PREVNet’s mission is to promote healthy relationships and healthy development for all Canadian children and youth (www.prevnet.ca).

Dr. Erik Woody is a Professor at the University of Waterloo, in Ontario, Canada, and until recently served as the Director of Clinical Training there. After acquiring a B.A. at Reed College, he went to Oxford University on a Rhodes Scholarship, where he did an M.Sc. under the supervision of Gordon Claridge. Subsequently, while completing a Ph.D. in clinical psychology at Duke University, he was introduced to interpersonal theory by Robert Carson and completed a dissertation under the supervision of Philip Costanzo. Dr. Woody’s research, which takes in a variety of other topics such as hypnosis and obsessive-compulsive disorder, has been supported by the Social Sciences and Humanities Research Council, the Natural Sciences and Engineering Research Council, the Canadian Institutes of Health Research, and the Ontario Mental Health Foundation.

INTERPERSONAL PATHOPLASTICITY IN SOCIAL PHOBIA: A CLINICAL REPLICAION

(CONTINUED FROM PAGE 2)

the other subgroup reported difficulties with unassertiveness, exploitable, and over-nurturance. One potential limitation of the Kachin et al. study was their use of a non-clinical, undergraduate sample.

Based on previous research, the current study had three main goals. First, this study aimed to replicate the results of Kachin et al. (2001) in a clinical sample. Second, to provide evidence for the pathoplasticity of social phobia by demonstrating that different subgroups can be formed using the IIP-C and that those groups will be similar on measures of demographics, symptom severity, and comorbidity, but different on the types of interpersonal problems reported. Third, to examine differences between the interpersonally-based social phobia subgroups at post-treatment on measures of general symptom severity, level of social anxiety, psychological well-being, level of optimism, and domains of life functioning.

Method

Participants in this study were 77 treatment-seeking adults with a primary diagnosis of social phobia. The demographics of the patients in this study were as follows: 44 males and 33 females with a mean age range of 32.78 (SD = 11.35). Patients received a course of integrative psychotherapy at the University of Bern outpatient clinic. Based on research conducted by Grawe and colleagues, the therapists in this study differentially combined interventions from different therapy schools (i.e. CBT, interpersonal, process-experiential, systemic) following a treatment plan that was tailored to meet the needs of each patient (Grawe, 2004).

All patients completed the Inventory of Interpersonal Problems – Circumplex Scales. Patients also completed two symptom measures: the Brief Symptom Inventory (BSI; Derogatis, 1993) which assesses psychological symptom severity and the U-Bogen (Ullrich & Ullrich, 1990) which is a German-language measure assessing social skills and social fears. Finally, patients completed three outcome measures: the Bern Subjective Well-Being Inventory (BFW; Grob et al., 1991) which assesses psychological well-being, the Changes in Life Domains Questionnaire (VLB; Itten, 2002) which is a change-sensitive instrument constructed to evaluate changes in life domains and life satisfaction over time in psychotherapy, and the Revised Questionnaire of Changes in Experiencing and Behavior (VEV-VW; Wiltutzki, 1999) which is a change-sensitive instrument constructed to evaluate change in optimism over time in psychotherapy.

Results

To test the possibility that pathoplasticity may exist in this sample, the whole sample of socially phobic patients’ responses on the IIP-C dimensions of Dominance and Love were cluster analyzed using the centroids from Kachin et al. (2001). The current study was able to replicate the interpersonally based clusters identified in Kachin et al. and did find evidence for the pathoplasticity of social phobia in the replicated clusters. However, we were unable to conduct post-treatment analyses using the replicated clusters due to a reduction in sample size and an uneven distribution of patients in each replicated cluster. To maximize the use of collected data, we decided that a second cluster analysis would be performed. The results of this second cluster analysis will be presented here and are thought to be the best representation of the interpersonal problems reported by social phobics in this sample.

A two-cluster solution was again found in the data and was replicated across Ward’s (1963) hierarchical clustering method and an agglomerative clustering method (SPSS K-Means [KMI]) using squared Euclidean distances. Using the structural summary method (Gurtman & Balakrishnan, 1998), the interpersonal problem profile for Cluster 1 (n = 32) had an elevated peak at 308.22° on the interpersonal circumplex indicative of Friendly-Submissive interpersonal problems while Cluster 2 (n = 45) fell at 258.75° on...
the interpersonal circumplex with an elevated peak indicative of Cold-Submissive interpersonal problems. Both clusters exhibited excellent goodness-of-fit to circumplex expectations with Cluster 1 having an R² value of .88 and Cluster 2 having an R² value of .91; and both Cluster 1 and Cluster 2 displayed large amplitudes (1.40 and 1.29 respectively).

Additional analyses were then performed comparing the two clusters on interpersonal distress (e.g., elevation), pre-treatment symptoms, gender composition, and diagnostic comorbidities. We found no significant differences between the two clusters on these dimensions at pre-treatment thus providing necessary and sufficient evidence for the pathoplasticity of social phobia in this sample.

The final set of analyses examined differences between the two clusters at post-treatment. As would be expected with pathoplasticity and the interpersonal nature of social anxiety, we found significant differences at pre-treatment between the clusters on the U-Bogen; therefore, pre-treatment differences on this measure were controlled for in the post-treatment analyses. The results of the between-subjects MANCOVA for the U-Bogen showed that there was a significant effect for cluster membership at post-treatment while controlling for pre-treatment scores; F(7, 20) = 3.50, p< .01. One-way ANCOVAs demonstrated that Friendly-Submissive social phobics scored significantly lower than Cold-Submissive social phobics on fear of failure and critique, fear of contact, difficulties being able to demand, difficulties being able to say “no,” and excessive norm orientation at post-treatment.

One-way ANOVAs were also conducted comparing the two clusters on psychological well-being, optimism, and changes in life satisfaction at post-treatment. We found that Friendly-Submissive social phobics reported significantly higher scores on psychological well-being, optimism, and reported more satisfaction with family of origin, current family life, current social environment, and current therapy outcome at post-treatment than Cold-Submissive social phobics. Overall, Friendly-Submissive social phobics exhibited significantly lower scores on measures of psychopathology and significantly higher scores on measures of well-being and satisfaction at post-treatment than Cold-Submissive social phobics in this sample.

Discussion
The current study provided evidence for the pathoplasticity of social phobia in a clinical sample. We found two distinct subgroups of socially phobic patients who shared a common Axis I diagnosis, but differed in the types of interpersonal problems reported. Incorporating an interpersonal problems component in the diagnostic assessment process may lead to a better understanding of the main areas in which an individual is experiencing the greatest amount of distress, as well as the ways in which an individual may be maladaptively responding to their distress.

In addition, given the two distinct types of interpersonal problems reported by socially phobic patients in this study, specific interventions could be designed to target these interpersonal problem areas more effectively (e.g., Alden & Capreol, 1993; Borkovec et al., 2002) and improve treatment responsiveness for all socially phobic patients.

A possible critique of this study is the small sample size. Future studies should include a larger sample of socially phobic patients and correct for the difficulties associated with collecting follow-up data. In my future work I hope to expand research of pathoplasticity to other disorders such as PTSD, and to investigate adjunctive treatments that could be added to CBT that would increase responsiveness for all patients with different types of interpersonal problems.

References

(continued on page 8)
difference in findings from these two fields seems to indicate that humans’ rational, conscious thoughts can be independent from their actual behaviors in real life encounters.

Another striking finding from this research was the lack of evidence for the similarity principle. We correlated couple similarity on 22 characteristics with both partners’ attraction. None showed a substantial link in either sex. This finding presents a strong contrast to previous experimental attraction research that suggested that similarity between two partners, particularly similarity on attitudinal domains, is a strong predictor of attraction. We believe that the inconsistency can be explained, at least partially, by the differential external validity that previous experimental research and current speed-dating research have. In an experiment where everything is well controlled, partner similarity is the only variable which varies across potential romantic partners and, as it turns out, is a predictor of attraction. That is, individuals do prefer similar partners over dissimilar ones. However, when attraction is examined in a real-life context where fewer variables are controlled, attraction is likely to be impacted by a host of factors and similarity does not seem to carry as much weight. In other words, although people have a general preference for similar partners, similarity is clearly not the most important determinant of initial attraction. It is important to note that similarity may play an increasingly important role later on in relationship development (e.g., Luo & Klohnen, 2005).

We did find intriguing sex differences when evaluating evidence for the security principle. Men’s attraction had a significant positive correlation with their female partner’s extraversion, agreeableness, conscientiousness, self-esteem and a significant negative association with their partner’s neuroticism, anxiety, and negative affect. However, partner personality traits did not predict women’s attraction. Once again, this sex difference seems to contradict the evolutionary principle that women particularly care about partner security because this will be important for raising children. We currently do not have a good explanation for this finding, but we suspect that it might be attributable to the college students in our sample. Because our participants were primarily freshmen, it is likely that men and women would experience differential pressure and anxiety in dating situations. Specifically, because the females in the study may favor older males, the freshman males might have felt anxious about finding a romantic partner and would have preferred “secure” women as a potential romantic partner.

Finally, for the reciprocity principle, we found that, at the speed dating event, partners’ ratings of liking for each other did not show a significant correlation. However, a week after the speed dating event, participants came back to our lab to see the responses each of their partners left them; that is, whether their partners wanted to date them or not. When they finished reviewing their partners’ feedback, we asked them to report their attraction to each partner again. This time we found a strong positive correlation between partners’ liking for each other. This suggests that the reciprocity principle may operate at a conscious level; that is, people need to be aware of others’ feelings toward them for mutual liking to occur.

We believe that this novel research methodology, which utilizes speed-dating has the potential to bring new insights into the research of romantic attraction. While the findings yielded by this methodology by no means prove that the commonly accepted principles of attraction are wrong, or that the traditional methodology is invalid, they do suggest that it is important for us to take a more comprehensive and real-life approach when examining (or reexamining) even well-understood topics in social psychology.

References

GRADUATE STUDENT CORNER:
TRANSITIONING FROM STUDENT TO POST-DOC FELLOW
(CONTINUED FROM PAGE 4)

process of writing grants to continue this line of research. Clinically, I have spent a good deal of time each week seeing patients for neuropsychological testing and participating in relevant didactic activities.

I have the best of both worlds.

I am able to extract from these experiences some important pieces of advice that I can impart to those SITAR student members interested in pursuing post-doctoral studies: (1) have a clear idea of what your career goal is (i.e., Psychology department, academic medical center, private practice); (2) determine what the requirements are for that position (i.e., licensure, board certification); (3) brainstorm every possible post-doctoral position for which you might be eligible; (4) determine what factors limit your selections (i.e., geographic or financial restrictions); (5) network with your supervisors and colleagues to see if there are other positions that you may not have been aware of; and (6) be well-prepared for your interviews with a clear sense of how your research or clinical training would be advanced and serve as a good fit for that particular site.

The road from student to post-doc to faculty (or whatever your career goal might be) can definitely be a bumpy one. The important things are to remain optimistic about the possibilities, begin preparing early in the process, and be honest with yourself about what constitutes a good match for your career goals. I’m hopeful that this same line of reasoning will land me my dream job in the near future! I wish the same for all of the other students embarking on a similar journey.
**T O R O N T O  A C T I V I T I E S  A N D  A T T R A C T I O N S**

Toronto is the largest city in Canada and, although the city itself stretches for miles, its downtown is relatively small. Fortunately, for the most part, downtown is where everything happens. Below is a listing of various activities and attractions which can be experienced in Toronto.

**Art Gallery of Toronto**  
[www.ago.net](http://www.ago.net)  
This museum is comprised of over 50 galleries and represents all types media and the best traditions of Western art.

**Bata Shoe Museum**  
[www.batashoemuseum.ca](http://www.batashoemuseum.ca)  
Housed in Richard Moriyama’s building, this museum is North America’s largest shoe museum.

**Fort York**  
[www.fortyork.ca](http://www.fortyork.ca)  
Fort York contains Canada’s largest collection of original buildings dating to the War of 1812.

**St. James Cathedral**  
[www.stjamescathedral.on.ca](http://www.stjamescathedral.on.ca)  
The cathedral was built in 1853 and features beautiful stained glass windows and Canada's tallest steeple.

**Royal Ontario Museum**  
[www.rom.on.ca](http://www.rom.on.ca)  
The Royal Ontario Museum is Canada's largest museum and research facility. Inside are over six million treasures of art, archaeology and natural science.

**CN Tower**  
[www.cntown.net](http://www.cntown.net)  
Built as a TV transmission antenna, this tower has come to be known as Toronto’s most iconic symbol.

---

**P R E S I D E N T ’ S  M E S S A G E  ( C O N T I N U E D  F R O M  P A G E  1 )**

The annual SITAR conference presents a wonderful opportunity to share your ideas with like-minded individuals. Our group tends to be relatively small, congenial, scholarly, challenging, and fun. It is not uncommon for researchers to take opportunities at the meeting to begin new projects, discuss collaborations, and make new connections. Therefore, now is the time to contemplate in what capacity you will want to contribute to the meeting. Plan to submit your best work. Invite a colleague whose work you feel may be of interest to other interpersonal researchers. Encourage your students to attend and present either a poster or a talk.

This year for the first time, students have the opportunity to apply for their posters or first-authored talks to be considered for the Jerry S. Wiggins Student Award for Outstanding Interpersonal Research. We’re very pleased that the award is named after Jerry, who was an esteemed colleague and good friend of many of you, and an important founding member of SITAR. Given that we have a relatively small society, I would strongly urge students to consider applying for this prestigious award. Details for how to apply are also enclosed.

Finally, each year, we set up a table that contains manuscripts, in-press papers, and newly published papers. Please plan to bring copies of your work to be displayed and shared on this table. Don’t be shy; we’re all interested to read about your latest work! If you cannot attend, please send any papers that you want to be placed on the display table to me or Steve Strack by May 16 at the latest.

I hope you’ll join us in Toronto and consider staying for a while. Looking forward to seeing you there!

---

**INTERPERSONAL PATHOPLASTICITY IN SOCIAL PHOBIA: A CLINICAL REPLICATION (CONTINUED FROM PAGE 6)**


The Jerry S. Wiggins Student Award for Outstanding Interpersonal Research

The Jerry S. Wiggins Student Award for Outstanding Interpersonal Research is given annually by the Society for Interpersonal Theory and Research (SITAR) in order to recognize and promote outstanding student research in interpersonal psychology. One award is given for the best student presentation (poster or talk) given at the annual SITAR conference.

Eligibility
To be eligible for an award, applicants must:
- Be the first author on a presentation submission (poster or talk)
- Be a full-time graduate student at the time of submission
- Be a student member of SITAR
- Present their poster or presentation at the SITAR conference
- Be presenting a poster or talk that reflects the applicants’ work and not that of an advisor. If the work presented is in-press, the student must be first author on the article.
- Not have previously won the award.

When and How to Apply

Step 1. Students indicate their desire to participate by checking the box entitled “enroll me in The Jerry S. Wiggins Student Award for Outstanding Interpersonal Research” when submitting proposals for the annual conference. These students are automatically enrolled in the award competition upon acceptance of their proposal.

Step 2. Following the acceptance of their proposal, students must also submit a copy of their actual presentation (i.e., poster or slides) no later than 8:00AM on the first day of the conference (May 30, 2009). Failure to provide a copy of the presentation by the deadline will disqualify a participant.

Send your presentation to Sandro Sodano at smsodano@buffalo.edu

Criteria for the Award

The award is to be adjudicated primarily at the conference based on the actual presentation, although ratings will be compiled and the winner will be announced following the conference. The winner is selected by the judges (non-student members of SITAR) who consider the SITAR conference submission, the presentation (poster or talk) itself, a conversation with or responses to questions posed to the presenter, and the potential contribution to the field, as well as the degree to which the work represents the student’s own intellectual effort.

The same evaluative criteria are applied to posters and talks, with the exception that judges interact with (i.e., interview) the poster presenters, but, for talks, the judges observe the presentation as audience members and may ask questions following the talk.

The judges consider the following criteria when evaluating presentations: a succinct statement of the research problem, a clear statement of methods, appropriate data analysis, conclusions that are warranted by the data, an explanation of why the work is important, and a well-organized and clear presentation. For discussions with the presenters, the judges consider each participant’s level of understanding of the research and ability to describe the work in technical and non-technical terms. These criteria are compiled, utilizing a numerical rating scheme, and the award is given to the participant with the highest total score.

Contents of the Award

The award consists of a certificate and free registration (non-transferrable) to the next SITAR conference. In addition, the winner will be announced in the SITAR newsletter, where the individual will also be given the opportunity to present his or her research.
THE JERRY S. WIGGINS STUDENT AWARD FOR OUTSTANDING INTERPERSONAL RESEARCH

SITAR is proud to announce the inaugural year for The Jerry S. Wiggins Student Award for Outstanding Interpersonal Research. Dr. Jerry S. Wiggins was one of the founding members of SITAR and was known for his strong interest, support, and enthusiasm for students. Starting in 2009, this award will be given annually by the Society for Interpersonal Theory and Research (SITAR) in order to recognize and promote outstanding student research in interpersonal psychology. One award will be given for the best presentation (poster or talk) by a student member of SITAR at the annual meeting. The winner will receive an award certificate and free registration to the following SITAR conference as well as an opportunity to present his or her research in the SITAR newsletter.

If you are interested in applying for the award, simply check the box on the submission form indicating that you would like your paper or poster presentation to be considered for the Jerry S. Wiggins Student Award for Outstanding Interpersonal Research and send your proposals by April 1, 2009, the deadline for conference submissions. Further information about the award can be found on page 9.

SITAR is very pleased to be able to offer this award in recognition of the exceptional work that is presented by students at the annual meeting. We believe this award will add distinction to the recipient’s vitae and hope that all student members will consider applying for it.