UCLA LONELINESS SCALE

Reference:

Russell, D , Peplau, L. A.. & Ferguson, M. L. (1978). Developing a measure of loneliness. *Journal of Personality Assessment, 42,* 290-294.

Description of Measure:

A 20-item scale designed to measure one's subjective feelings of loneliness as well as feelings of social isolation. Participants rate each item as either O ("I often feel this way"), S ("I sometimes feel this way"), R ("I rarely feel this way"), N ("I never feel this way").

The measure has been revised two times since its first publication; once to create reverse scored items, and once to simplify the wording. (See other UCLA Loneliness Scale pages on the site).

Abstracts of Selected Related Articles:

Russell, D , Peplau, L. A.., & Cutrona, C. E. (1980). The Revised UCLA Loneliness Scale: Concurrent and discriminate validity evidence. *Journal of Personality and Social Psychology, 39*, 472-480.

The development of an adequate assessment instrument is a necessary prerequisite for social psychological research on loneliness. Two studies provide methodological refinement in the measurement of loneliness. Study 1 presents a revised version of the self-report UCLA (University of California, Los Angeles) Loneliness Scale, designed to counter the possible effects of response bias in the original scale, and reports concurrent validity evidence for the revised measure. Study 2 demonstrates that although loneliness is correlated with measures of negative affect, social risk taking, and affiliative tendencies, it is nonetheless a distinct psychological experience.

Russell, D. (1996). UCLA Loneliness Scale (Version 3): Reliability, validity, and factor structure. *Journal of Personality Assessment, 66*, 20-40.

In this article I evaluated the psychometric properties of the UCLA Loneliness Scale (Version 3). Using data from prior studies of college students: nurses, teachers, and the elderly, analyses of the reliability, validity, and factor structure of this new version of the UCLA Loneliness Scale were conducted. Results indicated that the measure was highly reliable, both in terms of internal consistency (coefficient *a* ranging *from* .89 to .94) and test-retest reliability over a 1-year period (*r* = .73). Convergent validity for the scale was indicated by significant correlations with other measures of loneliness. Construct validity was supported by significant relations with measures of the adequacy of the individual's interpersonal relationships, and by correlations between loneliness and measures of health and well-being. Confirmatory factor analyses indicated that a model incorporating a global bipolar loneliness factor along with two method factors reflecting direction of item wording provided a very good fit to the data across samples. Implications of these results for future measurement research on loneliness are discussed.

Weeks, D. G., Michela, J. L., Peplau, L. A., & Bragg, M. E. (1980). Relation between loneliness and depression: A structural equation analysis. Journal of Personality and Social Psychology, 39,1238-1244
Research on loneliness has been hampered by its strong association with depression. The 2 states frequently co-occur, and measures of the 2 states are substantially correlated. Inability to manipulate experimentally loneliness or depression makes it difficult to untangle the causal influence of one on the other. The combination of longitudinal design and structural equation methodology is proposed as a solution to this general problem. Measures of loneliness and depression (e.g., the Beck Depression Inventory and Profile of Mood States) were administered to undergraduates at 2 points 5 wks apart. Data from 333 Ss were correlated and analyzed under a succession of structural equation models. Results indicate that loneliness and depression were correlated but clearly different constructs; neither was a direct cause of the other, although both probably share some common origins; both were highly stable over the 5-wk period.

Scale:

INSTRUCTIONS: Indicate how often each of the statements below is descriptive of you.

C indicates "I often feel this way"
S indicates "I sometimes feel this way"
R indicates "I rarely feel this way"
N indicates "I never feel this way"

1.	I am unhappy doing so many things alone	O S R N
2.	I have nobody to talk to	O S R N
3.	I cannot tolerate being so alone	O S R N
4.	I lack companionship	O S R N
5.	I feel as if nobody really understands me	O S R N
6.	I find myself waiting for people to call or write	O S R N
7.	There is no one I can turn to	O S R N
8.	I am no longer close to anyone	O S R N
9.	My interests and ideas are not shared by those around me	O S R N
10.	I feel left out	O S R N
11.	I feel completely alone	O S R N
12.	I am unable to reach out and communicate with those around me	O S R N
13.	My social relationships are superficial	O S R N
14.	I feel starved for company	O S R N
15.	No one really knows me well	O S R N
16.	I feel isolated from others	O S R N
17.	I am unhappy being so withdrawn	O S R N
18.	It is difficult for me to make friends	O S R N
19.	I feel shut out and excluded by others	O S R N
20.	People are around me but not with me	O S R N

Scoring:

Make all O's =3, all S's =2, all R's =1, and all N's =0. Keep scoring continuous.

REVISED UCLA LONELINESS SCALE

Reference:

Russell, D., Peplau, L.A., & Cutrona, C.E. (1980). The revised UCLA Loneliness Scale:
   Concurrent and discriminant validity evidence. Journal of Personality and Social
   Psychology, 39, 472-480.

Description of Measure:

   A 20-item scale designed to measure one's subjective feelings of loneliness as well as
feelings of social isolation. Participants rate each item on a scale from 1 (Never) to 4
(Often).
   This measure is a revised version of the original UCLA Loneliness Scale. The main
reason for this revision was to make 10 of the 20 original items reverse scored. This scale
has been revised again to simplify the wording (see other UCLA Loneliness Scale pages on
this website).

Abstracts of Selected Related Articles:

Russell, D , Peplau, L. A.. & Ferguson, M. L. (1978). Developing a measure of loneliness.
   Journal of Personality Assessment, 42, 290-294.

   Research on loneliness has been hindered by the lack of a simple and reliable
   assessment technique. The development of the UCLA Loneliness Scale, a short, 20-item
   general measure of loneliness is reported. The measure has high internal
   consistency(coefficient alpha = .96) and a test-retest correlation over a two-month period
   of .73. Concurrent and preliminary construct validity are indicated by correlations with
   self-reports of current loneliness and related emotional states, and by volunteering for a
   "loneliness clinic."

Russell, D. (1996). UCLA Loneliness Scale (Version 3): Reliability, validity, and factor
   structure. *Journal of Personality Assessment, 66*, 20-40.

   In this article I evaluated the psychometric properties of the UCLA Loneliness Scale
   (Version 3). Using data from prior studies of college students: nurses, teachers, and the
   elderly, analyses of the reliability, validity, and factor structure of this new version of
   the UCLA Loneliness Scale were conducted. Results indicated that the measure was
   highly reliable, both in terms of internal consistency (coefficient a ranging *from* .89 to
   .94) and test-retest reliability over a 1-year period (r = .73). Convergent validity for the
   scale was indicated by significant correlations with other measures of loneliness.
   Construct validity was supported by significant relations with measures of the adequacy
   of the individual's interpersonal relationships, and by correlations between loneliness
   and measures of health and well-being. Confirmatory factor analyses indicated that a
   model incorporating a global bipolar loneliness factor along with two method factors
   reflecting direction of item wording provided a very good fit to the data across samples.

Implications of these results for future measurement research on loneliness are discussed.

Kraut, R., Patterson, M., Lundmark, V., Kiesler, S., Mukophadhyay, T., & Scherlis, W. (1998). Internet paradox: A social technology that reduces social involvement and psychological well-being? *American Psychologist, 53*,1017-1031.

The Internet could change the lives of average citizens as much as did the telephone in the early part of the 20th century and television in the 1950s and 1960s. Researchers and social critics are debating whether the Internet is improving or harming participation in community life and social relationships. This research examined the social and psychological impact of the Internet on 169 people in 73 households during their first 1 to 2 years on-line. We used longitudinal data to examine the effects of the Internet on social involvement and psychological well-being. In this sample, the Internet was used extensively for communication. Nonetheless, greater use of the Internet was associated with declines in participants' communication with family members in the household, declines in the size of their social circle, and increases in their depression and loneliness. These findings have implications for research, for public policy, and for the design of technology.

Scale:
INSTRUCTIONS: Indicate how often each of the statements below is descriptive of you.

Statement	Never	Rarely	Sometimes	Often
1. I feel in tune with the people around me	1	2	3	4
2. I lack companionship	1	2	3	4
3. There is no one I can turn to	1	2	3	4
4. I do not feel alone	1	2	3	4
5. I feel part of a group of friends	1	2	3	4
6. I have a lot in common with the people around me	1	2	3	4
7. I am no longer close to anyone	1	2	3	4
8. My interests and ideas are not shared by those around me	1	2	3	4
9. I am an outgoing person	1	2	3	4
10. There arc people I feel close to	1	2	3	4
11. I feel left out	1	2	3	4
12. My social relationships arc superficial	1	2	3	4
13. No one really knows me well	1	2	3	4
14. I feel isolated from others	1	2	3	4
15. I can find companionship when I want it	1	2	3	4
16. There are people who really understand me	1	2	3	4
17. I am unhappy being so withdrawn	1	2	3	4
18. People are around me but not with me	1	2	3	4
19. There are people I can talk to	1	2	3	4
20. There are people I can turn to	1	2	3	4

Scoring:
Items 1, 5, 6, 9, 10, 15, 16, 19, 20 are all reverse scored.
Keep scoring continuous.

UCLA LONELINESS SCALE VERSION 3

Reference:

Russell, D. (1996). UCLA Loneliness Scale (Version 3): Reliability, validity, and factor
structure. *Journal of Personality Assessment, 66*, 20-40.

Description of Measure:

A 20-item scale designed to measure one's subjective feelings of loneliness as well as
feelings of social isolation. Participants rate each item on a scale from 1 (Never) to 4
(Often).

This measure is a revised version of both the original UCLA Loneliness Scale and the
Revised UCLA Loneliness Scale. The first revision was done to make 10 of the 20 original
items reverse scored. The second revision was done to simplify the scale so less educated
populations could comprehend it (see other UCLA Loneliness Scale pages on this website).

Abstracts of Selected Related Articles:

Russell, D , Peplau, L. A.. & Ferguson, M. L. (1978). Developing a measure of loneliness.
Journal of Personality Assessment, 42, 290-294.

Research on loneliness has been hindered by the lack of a simple and reliable
assessment technique. The development of the UCLA Loneliness Scale, a short, 20-item
general measure of loneliness is reported. The measure has high internal consistency
(coefficient alpha = .96) and a test-retest correlation over a two-month period of .73.
Concurrent and preliminary construct validity are indicated by correlations with self-
reports of current loneliness and related emotional states, and by volunteering for a
"loneliness clinic."

Russell, D , Peplau, L. A.., & Cutrona, C. E. (1980). The Revised UCLA Loneliness Scale:
Concurrent and discriminate validity evidence. *Journal of Personality and Social
Psychology, 39*, 472-480.

The development of an adequate assessment instrument is a necessary prerequisite for
social psychological research on loneliness. Two studies provide methodological
refinement in the measurement of loneliness. Study 1 presents a revised version of the
self-report UCLA (University of California, Los Angeles) Loneliness Scale, designed to
counter the possible effects of response bias in the original scale, and reports concurrent
validity evidence for the revised measure. Study 2 demonstrates that although
loneliness is correlated with measures of negative affect, social risk taking, and
affiliative tendencies, it is nonetheless a distinct psychological experience.

McKenna, K. Y. A., Green, A. S., & Gleason, M. E. J. (2002). Relationship formation on the
internet: What's the big attraction? *Journal of Social Issues, 58*, 9–31

We hypothesized that people who can better disclose their "true" or inner self to others on the Internet than in face-to-face settings will be more likely to form close relationships on-line and will tend to bring those virtual relationships into their "real" lives. Study 1, a survey of randomly selected Internet newsgroup posters, showed that those who better express their true self over the Internet were more likely than others to have formed close on-line relationships and moved these friendships to a face-to-face basis. Study 2 revealed that the majority of these close Internet relationships were still intact 2 years later. Finally, a laboratory experiment found that undergraduates liked each other more following an Internet compared to a face-to-face initial meeting.

Scale:
INSTRUCTIONS: Indicate how often each of the statements below is descriptive of you.

Statement	Never	Rarely	Sometimes	Often
*1. How often do you feel that you are "in tune" with the people around you?	1	2	3	4
2. How often do you feel that you lack companionship?	1	2	3	4
3. How often do you feel that there is no one you can turn to?	1	2	3	4
4 How often do you feel alone?	1	2	3	4
*5. How often do you feel part of a group of friends?	1	2	3	4
*6. How often do you feel that you have a lot in common with the people around you?	1	2	3	4
7. How often do you feel that you are no longer close to anyone?	1	2	3	4
8. How often do you feel that your interests and ideas are not shared by those around you?	1	2	3	4
*9. How often do you feel outgoing and friendly?	1	2	3	4
*10. How often do you feel close to people?	1	2	3	4
11. How often do you feel left out?	1	2	3	4
12. How often do you feel that your relationships with others are not meaningful?	1	2	3	4
13. How often do you feel that no one really knows you we11?	1	2	3	4
14. How often do you feel isolated from others?	1	2	3	4
*15. How often do you fee1 you can find companionship when you want it?	1	2	3	4
*16. How often do you feel that there are people who really understand you?	1	2	3	4
17, How often do you feel shy?	1	2	3	4
18. How often do you feel that people are around you but not with you?	1	2	3	4
*19. How often do you feel that there are people you can talk to?	1	2	3	4
*20. How often do you feel that there are people you can turn to?	1	2	3	4

Scoring:
The items with an asterisk are reverse scored. Keep scoring on a continuous basis.

This scale is provided only for Researchers.

DIFFERENTIAL LONELINESS SCALE (DLS)

Reference:

Schmidt, N. & Sermat, V. (1983). Measuring loneliness in different relationships. *Journal of Personality and Social Psychology*, *44*, 1038-1047.

Description of Measure:

A 60-item scale designed to measure one's subjective sense of lacking satisfaction with a variety of social relationships. The relationships the scale deals with are: (1) romantic-sexual relationships, (2) friendships, (3) family relationships, (4) relationships with the community. In particular, the scale attempts to measure the difference between what an individual believes is the type of relationship one would like to have and the type of relationship one is actually having.

Each item is answered either as True or False.

Abstracts of Selected Related Articles:

Marshall, G. W., Michaels, C. E., & Mulki, J. P. (2007). Workplace isolation: Exploring the constructs and its measurements. Psychology and Marketing, 24, 195-223.

Virtual offices are a growing trend in today's work environment and are expected to influence marketing roles dramatically, especially selling. These conditions may lead to perceptions of isolation, both socially and organizationally. Workplace isolation is a two-dimensional construct that represents individuals' perceptions of isolation from others at work and includes perceived isolation from both colleagues and from the company's support network. This article reports the results of a four-sample study to develop and validate a self-report scale for measuring the two facets of workplace isolation. The scale's usefulness for future research and management applications are discussed.

Alfons, M. & Brumagne, M. (1985). Loneliness among children and young adolescents. Developmental Psychology, 21, 1025-1031.

Investigated differences in loneliness involving parents and peers and the relations between loneliness, choices of a "first comfort figure" (FCF), and social sensitivity as perceived by peers. 60 female and 52 male 5th graders, 97 female and 45 male 7th graders, and 66 female and 73 male 9th graders were given a loneliness scale and a sociometric measure of perceived social sensitivity. Results indicate that age differences in parent-related loneliness were marginally significant. Seventh graders seemed to have fewer loneliness experiences in their relationships with parents than 5th and 9th graders. Boys more frequently reported those feelings than girls. Ss who indicated both parents as their FCFs had the lowest scores for parent-related loneliness, whereas those who indicated friends as their FCFs had the highest scores for parent-related loneliness. With respect to peer-related loneliness, no age or sex differences were found. However, girls who chose both parents as their FCFs were more lonely than boys who did the same, and boys who chose their fathers as their FCFs mentioned more peer-related

loneliness feelings than the girls who made this choice. Ss perceived as socially sensitive by their classmates less frequently mentioned peer-related loneliness feelings.

Sadava, S. W. & Matejcic, C. (1987). Generalized and specific loneliness in early marriage. Canadian Journal of Behavioral Science, 19, 56-66.

38 husbands (mean age 26 yrs) and wives (mean age 23.8 yrs), married for an average of 35.8 mo and without children, independently completed a set of established measures of loneliness and of aspects of their marital relationship (e.g., UCLA Loneliness Scale). Significant levels of loneliness were reported by some Ss, and only modest correlations were found between the loneliness scores of husbands and wives. General and specific loneliness were related to marital attitudes, particularly less liking, less intimacy, and greater communication apprehension among husbands, and to less liking, less marital satisfaction, less love, and less self-disclosure among the wives. Scores of the spouses and spouse difference scores on several of these variables were also related to loneliness. Findings are discussed as pertaining to loneliness without social isolation and in relation to the quality of relationships.

Scale (taken from http://www.yorku.ca/rokada/psyctest/lonely.doc)**:**

Instructions: For each statement, decide whether it describes you or your situation or not. If it does seem to describe you or your situation, mark it TRUE (T). If not, mark it FALSE (F). If an item is not applicable to you because you are currently not involved in the situation it depicts, e.g., a current romantic or marital relationship, then mark it FALSE (F).

1.*	I find it easy to express feelings of affection toward members of my family.	T	F	Fam
2.	Most everyone around me is a stranger.	T	F	Gr
3.	I usually wait for a friend to call me up and invite me out before making plans to go anywhere.	T	F	Fr
4. *	Most of my friends understand my motives and reasoning.	T	F	Fr
5.	At this time, I do not have a romantic relationship that means a lot to me.	T	F	R/S
6.	I don=t get along very well with my family.	T	F	Fam
7.*	I have at least one good friend of the same sex.	T	F	Fr
8.	I can=t depend on getting moral or financial support from any group or organization in a time of trouble.	T	F	Gr
9.*	I am now involved in a romantic or marital relationship where both of us make a genuine effort at cooperation.	T	F	R/S
10.	I often become shy and retiring in the company of relatives.	T	F	Fam
11.*	Some of my friends will stand by me in almost any difficulty.	T	F	Fr
12.	People in my community aren=t really interested in what I think or feel.	T	F	Gr
13.	My trying to have friends and to be liked seldom succeeds the way I would like it to.	T	F	Fr
14.*	I spend time talking individually with each member of my	T	F	

	family.			Fam
15.	I find it difficult to tell anyone that I love him or her.	T	F	R/S
16.	I don=t have many friends in the city where I live.	T	F	Fr
17.*	I work well with others in a group.	T	F	Gr
18.*	I am an important part of the emotional and physical well-being of my lover or spouse.	T	F	R/S
19.	I don=t feel that I can turn to my friends living around me for help when I need it.	T	F	Fr
20.	I don=t think that anyone in my family really understands me.	T	F	Fam
21.*	I have a lover or spouse who fulfils many of my emotional needs.	T	F	R/S
22.*	My friends are generally interested in what I am doing, although not to the point of being nosy.	T	F	Fr
23.*	Members of my family enjoy meeting my friends.	T	F	Fr
24.*	I allow myself to become close to my friends.	T	F	Fr
25.	My relatives are generally too busy with their concerns to bother about my problems.	T	F	Fam
26.	Few of my friends understand me the way I want to be understood.	T	F	Fr
27.	No one in the community where I live cares much about me.	T	F	Gr
28.	Right now, I don=t have true compatibility in a romantic or marital relationship.	T	F	R/S
29.*	Members of my family give me the kind of support that I need.	T	F	Fam
30.	A lot of my friendships ultimately turn out to be pretty disappointing.	T	F	Fr
31.*	My romantic or marital partner gives me much support and encouragement.	T	F	R/S
32.	I am not very open with members of my family.	T	F	Fam
33.	I often feel resentful about certain actions of my friends.	T	F	Fr
34.	I am embarrassed about the way my family behaves.	T	F	Fam
35.	People who say they are in love with me are usually only trying to rationalize using me for their own purposes.	T	F	R/S
36.*	I have a good relationship with most members of my family.	T	F	Fam
37.*	In my relationships, I am generally able to express both positive and negative feelings.	T	F	Fr
38.	I don=t get much satisfaction from the groups I attend.	T	F	Gr
39.*	I get plenty of help and support from friends.	T	F	Fr
40.	I seem to have little to say to members of my family.	T	F	Fam
41.	I don=t have any one special love relationship in which I feel really understood.	T	F	R/S
42.*	I really feel that I belong to a family.	T	F	Fam
43.	I have few friends with whom I can talk openly.	T	F	Fr
44.	My family is quite critical of me.	T	F	Fam
45.*	I have an active love life.	T	F	R/S

46.	I have few friends that I can depend on to fulfil their end of mutual commitments.	T	F	Fr
47.*	Generally I feel that members of my family acknowledge my strengths and positive qualities.	T	F	Fam
48.*	I have at least one real friend.	T	F	Fr
49.	I don=t have any neighbours who would help me out in a time of need.	T	F	Gr
50.*	Members of my family are relaxed and easy-going with each other.	T	F	Fam
51.	I have moved around so much that I find it difficult to maintain lasting friendships.	T	F	Fr
52.*	I tend to get along well with partners in romantic relationships.	T	F	R/S
53.	I find it difficult to invite a friend to do something with me.	T	F	Fr
54.	I have little contact with members of my family.	T	F	Fam
55.	My friends don=t seem to stay interested in me for long.	T	F	Fr
56.*	There are people in my community who understand my views and beliefs.	T	F	Gr
57.	As much as possible, I avoid members of my family.	T	F	Fam
58.	I seldom get the emotional security I need from a romantic or sexual relationship.	T	F	R/S
59.*	My family usually values my opinion when a family decision is to be made.	T	F	Fam
60.*	Most of my friends are genuinely concerned about my welfare.	T	F	Fr

Scoring:
For items with no asterisk, each marking of T (TRUE) is given one point. For items with an asterisk, each marking of F (FALSE) is given one point. The scale measures loneliness in four types of relationships, namely romantic/sexual relationships (R/S), friendships (Fr), relationships with family (Fam), and relationships with larger groups (Gr).

INVENTORY OF INTERPERSONAL PROBLEMS (IIP)

Reference:

Horowitz, L. M., Rosenberg, S. E., Baer, B. A., Ureno, G., & Villasenor, V S. (1988).
Inventory of interpersonal problems: Psychometric properties and clinical applications.
Journal of Consulting and Clinical Psychology, 56, 885-892.

Description of Measure:

A 127-item measure designed to help both clients (patients) and therapists determine
sources of interpersonal distress. The measure is a self-report inventory that asks
participants to rate a variety of interpersonal problems that may cause distress. The items
are divided into two groups: (1) interpersonal inadequacies or inhibitions (78 items), (2)
excesses or compulsions (49 items). The items in the first group all start with the phrase
"It is hard for me to…", whereas the items in the second group involve the phrase "too
much". Participants rate each item on a scale from 0 to 4 on how much difficulty/distress
they feel regarding the item.

Abstracts of Selected Related Articles:

Horowitz, L. M., Rosenberg, S. E., & Bartholomew, K. (1993). Interpersonal problems,
attachment styles, and outcomes in brief dynamic psychotherapy. *Journal of Consulting
and Clinical Psychology, 61*, 549-560.

The Inventory of Interpersonal Problems (IIP) has been used to identify dysfunctional
patterns in interpersonal interactions. Interpersonal problems can be organized in two
dimensions, and the two-dimensional space can be divided into eight equal sectors
(octants). Subscales of the IIP describe each of these octants. The instrument has been
used to identify (a) interpersonal problems that are discussed most often in a brief
dynamic psychotherapy and (b) problems that are treated most easily. The results show
that problems in the "exploitable" octant improve most frequently, whereas problems in
the "dominating," "vindictive," and "cold" octants do not improve as readily. Attachment
styles in adulthood were examined (following a model proposed by Bowlby), and
different attachment styles were found to correspond to different types of interpersonal
problems. Finally, these variables were related to the ability to describe other people
clearly. The article also discusses implications for brief dynamic psychotherapy.

Alden, L. E., Wiggins, J. S., & Pincus, A. L. (1990). Construction of circumplex scales for the
Inventory of Interpersonal Problems. *Journal of Personality Assessment, 55*, 521-536.

We constructed a set of circumplex scales for the Inventory of Interpersonal Problems
(IIP; Horowitz, Rosenberg, Baer, Ureno, & Villasenor, 1988). Initial scale construction
used all 127 items from this instrument in two samples of university undergraduates (n
= 197; n = 273). Cross-sample stability of item locations plotted against the first two
principal components was high. A final set of eight 8-item circumplex scales was derived

from the combined sample (n = 470) and cross-validated in a third university sample (n = 974). Finally, we examined the structural convergence of the IIP circumplex scales with an established measure of interpersonal dispositions, the Revised Interpersonal Adjective Scales (IAS-R; Wiggins, Trapnell, &Phillips, 1988). Although both circumplex instruments were derived independently, they shared a common circular space. Implications of these results are discussed with reference to current research methods for the study of interpersonal behavior.

Gurtman, M. B. (1996). Interpersonal problems and the psychotherapy context: The construct and validity of the Inventory of Interpersonal Problems. *Psychological Assessment, 8*, 241-255.

This research investigated the construct validity of Ihe Inventory of Interpersonal Problems (IIP; L. M. Horowitz, S. E. Rosenberg, B. A. Baer, G. Ureno, & V. S. Villasenor, 1988) in the context of psychodynamic psychotherapy. The interpersonal circumplex was used to categorize patients reporting interpersonal distress into 1 of 4 problem quadrants: Friendly Dominant, Hostile Dominant, Hostile Submissive, and Friendly Submissive. At several points in treatment, therapists assessed their patients' personality disturbances, global functioning, and assets and liabilities for therapy. Patients described their in-session experiences using the Therapy Session Report (D. E. Orlinsky & K. I. Howard, 1975). The 4 problem types each had a coherent and distinctive set of correlates. Patients' interpersonal problems were articulated in therapists' perceptions and evaluations, and in the kinds of interpersonal and intrapsychic themes (wants, hopes, feelings, behaviors, etc.) that characterized patients' retrospective accounts of the therapy sessions. The results add to knowledge about the IIP, interpersonal problems, and the psychotherapy context.

Scale:

The IIP is available for purchase only.

Here are some example items:

Part I. The following are things you find hard to do with other people.

It is hard for me to:	(not at all)				(extremely)
1. trust other people.	0	1	2	3	4
2. say "no" to other people.	0	1	2	3	4
3. join in on groups.	0	1	2	3	4
4. keep things private from other people.	0	1	2	3	4
5. let other people know what I want.	0	1	2	3	4
6. tell a person to stop bothering me.	0	1	2	3	4

INVENTORY OF INTERPERSONAL PROBLEMS CIRCUMPLEX SCALES (IIP-C)

Reference:

Horowitz, L. M., Alden, L. E., Wiggins, J. S*., et al (2000). *IIP - Inventory of Interpersonal Problems Manual*. San Antonio, TX: The Psychological Corporation.

Description of Measure:

It is a 64-item self-report measure designed to assess interpersonal problems. The 64 items make up a circumplex of problems, which is composed of the following 8 scales:
1.) Domineering – being too aggressive
2.) Vindictive – being suspicious and distrustful
3.) Cold -- having trouble with affection and sympathy
4.) Socially Inhibited –being socially anxious and shy
5.) Nonassertive – failing to be forceful
6.) Overly Accommodating – being too trusting and permissive
7.) Self-Sacrificing –being too eager to please others
8.) Intrusive – seeking attention inappropriately

The Circumplex has the following main Axis:
1.) Domineering to Nonassertive
2.) Cold to Self Sacrificing

Participants respond to each item using a 5-point scale ranging from 0 (not at all) to 4 (extremely).

Abstracts of Selected Related Articles:

Horowitz, L. M., Rosenberg, S. E., Baer, B. A., Ureno, G., & Villasenor, V S. (1988). Inventory of interpersonal problems: Psychometric properties and clinical applications. *Journal of Consulting and Clinical Psychology, 56,* 885-892.

This article describes a new instrument, the Inventory of Interpersonal Problems (IIP), which measures distress arising from interpersonal sources. The IIP meets the need for an easily administered self-report inventory that describes the types of interpersonal problems that people experience and the level of distress associated with them before, during, and after psychotherapy. Two studies are reported. In Study 1, psychometric data are presented for 103 patients who were tested at the beginning and end of a waiting period before they began brief dynamic psychotherapy. On both occasions, a factor analysis yielded the same six subscales; these scales showed high internal consistency and high test-retest reliability. Study 2 demonstrated the instrument's sensitivity to clinical change. In this study, a subset of patients was tested before, during, and after 20 sessions of psychotherapy. Their improvement on the IIP agreed well with all other measures of their improvement, including those generated by the therapist and by an independent evaluator. Although the HP and the Symptom

Checklist-90-Revised (SCL-90-R) were both sensitive to change during the first 10 sessions, only the IIP was sensitive to change in the second 10 sessions. Furthermore, the difference between patient distress on the IIP and on the SCL-90-R successfully discriminated between patients who completed the full treatment and those who did not. Finally, some kinds of problems were more amenable to treatment than others. Problems of assertiveness, for example, were discussed more often and improved more readily than problems of intimacy.

Alden, L. E., Wiggins, J. S., & Pincus, A. L. (1990). Construction of circumplex scales for the Inventory of Interpersonal Problems. *Journal of Personality Assessment, 55*, 521-536.

We constructed a set of circumplex scales for the Inventory of Interpersonal Problems (IIP; Horowitz, Rosenberg, Baer, Ureno, & Villasenor, 1988). Initial scale construction used all 127 items from this instrument in two samples of university undergraduates (n = 197; n = 273). Cross-sample stability of item locations plotted against the first two principal components was high. A final set of eight 8-item circumplex scales was derived from the combined sample (n = 470) and cross-validated in a third university sample (n = 974). Finally, we examined the structural convergence of the IIP circumplex scales with an established measure of interpersonal dispositions, the Revised Interpersonal Adjective Scales (IAS-R; Wiggins, Trapnell, &Phillips, 1988). Although both circumplex instruments were derived independently, they shared a common circular space. Implications of these results are discussed with reference to current research methods for the study of interpersonal behavior.

Ruiz, M. A., Pincus, A. L., Borkovec, T. D., Echemendia, R. J., Castonguay, L. G., & Raguesa, S. A. (2004). Validity of the Inventory of Interpersonal Problems for predicting treatment outcome: An investigation with the Pennsylvania Practice Research Network. *Journal of Personality Assessment, 83,* 213-222.

In this study, we examined the relationship between treatment outcome and variables from the Inventory of Interpersonal Problems Circumplex scales (IIP–C; Horowitz, Alden, Wiggins, & Pincus, 2000) in the Pennsylvania Psychological Association's Practice Research Network (PRN; Borkovec, Echemendia, Ragusea, & Ruiz, 2001). The PRN was a naturalistic observation treatment outcome study conducted with clinicians who were providing outpatient therapy. Assessment instruments, including the Compass Assessment System (Howard, Brill, Lueger, O'Mahoney, & Grissom, 1993; Sperry, Brill, Howard, & Grissom, 1996) and the IIP–C, were used to assess outcome at the 7th session (N = 73) and at termination (N = 42). Significant associations were identified between seventh-session outcome and most of the IIP variables. Only IIP elevation and amplitude were related to termination outcome. Elevation, amplitude, and hostile submissive problems were related to treatment length. Ad hoc analyses indicated that the IIP elevation fully mediated the relationships between interpersonal problems and seventh-session outcome but not the relationship between amplitude and outcome.We discuss the results in relation to the external validity of the IIP.

Scale:

The IIP is available for purchase only.
One can buy it at this website: http://buros.unl.edu/buros/jsp/reviews.jsp?item=07001277