THE TORONTO ALEXITHYMIA SCALE WITH INCARCERATED OFFENDERS

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Summary—The present study examined the Toronto Alexithymia Scale (TAS) in a sample of 508 male inmates incarcerated for sexual and violent offences. A confirmatory procedure applied to the 20-item version of the TAS (TAS-20) resulted in a two-factor solution: Emotional Understanding Deficit, and Experiencing and Utilizing Emotion. The factor scale of Emotional Understanding Deficit had a strong inverse relationship with social desirability measures and a positive relationship with all dimensions of psychopathology. On a measure of intelligence, Emotional Understanding Deficit and Experiencing and Utilizing Emotion scales had the expected verbal/performance discrepancy. Unexpected negative relationships occurred between the TAS and theoretically relevant dimensions from the Hare Psychopathy Checklist—Revised. Although the results indicate limitations of the TAS-20’s usage with inmates, there was support for the TAS scales' validity with an incarcerated sample.

INTRODUCTION

Alexithymia is a relatively new construct referring to a diminished ability to identify and/or communicate feelings. The construct first occurred in the psychosomatic literature with patients who had difficulty in verbal expression of emotions and elaboration of fantasies (Sifneos, 1972; Taylor, 1984). For clinicians working with psychosomatic patients, the construct of alexithymia provided a label for the failure of insight therapy with patients and allowed for the suggestion that this trait may predispose individuals to psychosomatic disease (Linden, Wen & Paulhus, in press).

With the introduction of a new construct, it is important to determine the relationship with other, more established constructs. Alexithymia has been shown to be different from repression, trait anxiety (Martin & Pihl, 1986), and depression (Parker, Bagby & Taylor, 1991). Also, earlier work suggested that the association between alexithymia and the tendency to develop physical symptoms is not due to neurotic defenses against affects, drives, and fantasies (Nemiah, 1975). As expected, there is a positive relationship between alexithymia and hypochondriasis, thereby supporting a relationship between alexithymia and psychosomatic concerns (Bagby, Taylor & Ryan, 1986a). Alexithymics have a negative relationship with psychological mindedness (Bagby, Taylor & Parker, 199b; Bagby et al., 1986a) and respond poorly to insight oriented psychotherapy (Taylor & Bagby, 1988).

Conceptually, the view of alexithymia as occurring along a continuum with individual shifts in communication style inters a single dimension (Taylor, 1984). Research, however, has shown the construct to be multidimensional. Dimensions include emotional awareness deficits, lack of imaginative ability, external, operative cognitive style (Hendryx, Haviland, Gibbons & Clark, 1992), difficulty in describing feelings, importance of feelings, and daydreaming (Bagby et al., 1986b).

The construct of alexithymia may have implications for understanding emotionally based violent transactions, including the violence of psychopaths. Krystal (1979) indicated that alexithymics have violent bursts of emotional behavior, but are unaware of the underlying feelings expressed. Not being aware of feelings may contribute to an inability to experience empathy, and therefore violence. Although the lack of empathy is not a defining characteristic of alexithymia, identification of feelings is a prerequisite to communicating feelings to others and having empathy (cf. Sifneos, 1972). Psychopathy is a personality disorder defined by a constellation of personality and behavioral characteristics (Hare, 1991). Recent research indicates that the construct of psychopathy consists of two correlated factors; one defined by the interpersonal and affective characteristics labeled "callous,
selfish, and remorseless use of others”, and the other defined by behavioral characteristics labeled “chronically unstable and antisocial lifestyle” (Hare, Harper, Hakstian, Forth, Hart & Newman, 1990). Psychopaths commit more crimes of violence and engage in more institutional violence than do nonpsychopathic criminals (Hare & McPherson, 1984). In addition, the motives for violence of psychopaths are more likely to be of a callous and cold-blooded nature as compared to the affective motives of the nonpsychopath’s violence (Williamson, Hare & Wong, 1987).

Recent research has also suggested a relationship between alexithymia and a diminished capacity to experience pleasure in social and interpersonal interactions (Prince & Berenbaum, 1993). Violent psychopaths are not able to maintain long-term interpersonal relations (Hare, 1991) and consequently spend more time in settings that do not foster close relationships. In the violence committed by psychopaths, the victims are generally not known to the perpetrator (Williamson et al., 1987). As a potential indicator of experiencing pleasure in interpersonal relations, alexithymia may contribute to explaining the etiology of violent offences committed by psychopaths.

With regard to the measurement of alexithymia, Linden et al. (in press) have reviewed several measures of alexithymia including self-report, projective techniques, and observer-rated questionnaires. They concluded that most of the scales were psychometrically weak, had insufficient research, or contradictory research findings. For example, the usage of scales with questionable reliability in clinical studies with respiratory, essential hypertension, and asthma patients may limit the validity of the results. Many measures of alexithymia also show little or no relationship to each other (Krystal, Giller & Cicchetti, 1986; Taylor & Bagby, 1988). These criticisms limit the generalizability of specific studies and impede further theoretical developments.

Linden et al. (in press) have suggested that of the self-report measures, the Toronto Alexithymia Scale [TAS (Taylor, Ryan & Bagby, 1985)] has some promising psychometric properties. Using a university sample, the development of the 26-item TAS included comparisons to other measures that were of theoretical relevance to the construct of alexithymia (Bagby et al., 1986a). The TAS had a negative relationship with psychological mindedness and a need for cognition. In addition, there was a negative relationship with verbal IQ, but not with a nonverbal measure of IQ, indicating limited language skills of those with elevated TAS scores. Minimal or no relationship occurred between the TAS and the Interpersonal Problems, Alienation, and Deviation scales of the Basic Personality Inventory [BPI (Jackson, 1989)]. A three-factor solution of inability to identify and report feelings, analytic cognitive style, and paucity of fantasy life resulted from principal components analysis with psychiatric patients (Mann, Wise & Shay, 1992).

The TAS scales have undergone several revisions. With the 23-item scale [TAS-R (Taylor, Bagby & Parker, 1992)], developments included the improvement of scale homogeneity, and the deletion of items referring to daydreaming. Drawbacks of the Daydreaming items included a strong association with socially desirable responding and too narrow in scope for assessing the broader area of imaginal activities. The TAS-R yielded a two-factor solution; the first described the assessment and description of feelings and body sensations of emotional arousal, and the second factor consisted of externally orientated thinking. Replication of the two-factor solution occurred with both college students and psychiatric outpatients.

Recently, the authors of the TAS developed a 20-item scale [TAS-20 (Bagby, Parker & Taylor, 1994a; Bagby, Taylor & Parker, 1994b)]. In contrast to the two-factor structure of the TAS-R, factor analysis of the TAS-20 yielded a three-factor solution. The three factors were labeled: (a) difficulty identifying feelings and distinguishing them from the bodily sensations of emotion; (b) difficulty describing feelings to others; and (c) externally orientated style of thinking. Cross-cultural replication of this factor structure occurred among American, Canadian, and German student samples (Parker, Bagby, Taylor, Endler & Schmitz, 1993).

When introducing a measure with a specialized population, re-evaluation of the measure should occur to ensure adequate psychometric properties and construct validity. Past research has used the TAS primary with clinical and student samples. Because of the potential use with violent and psychopathic populations, the purpose of the present study was to explore the psychometric properties and construct validity of the TAS in an inmate sample. The present study focused on four areas. First, we examined the factor structure of the TAS-20 to determine whether a three-factor solution would emerge. Second, because of the strong influence that incarceration has on emotional functioning (Zamble & Porporino, 1988) and by definition the TAS comprises emotionally related items,
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