REPRESSION-SENSITIZATION AND EXTERNAL-INTERNAL DIMENSIONS
OF MILLON'S PERSONALITY TYPOLOGY

THESIS

Presented to the Graduate Council of the
North Texas State University in Partial
Fulfillment of the Requirements

For the Degree of

MASTER OF ARTS

By

Robert Steven Heath, B.S.
Denton, Texas
August, 1982
Heath, Robert Steven, Repression-Sensitization and External-Internal Dimensions of Millon's Personality Typology. Master of Arts (General-Experimental Psychology), August, 1982, 45 pp., 2 tables, references, 28 titles.

In a study using 73 females and 30 male undergraduates, information on the basic dimensions of Millon's eight personality styles was obtained from correlations of the Millon Behavioral Health Inventory with Rotter's I-E scale and Byrne's R-S scale. Hypotheses predicting a significant relationship between the active-passive and repression-sensitization were generally supported. Predictions of a significant relationship between the dependent-independent dimension and generalized expectancy of locus of control were not supported. Implications of these findings for the efficacy of Millon's system are discussed, along with future research possibilities.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>LIST OF TABLES</th>
<th>iv</th>
</tr>
</thead>
<tbody>
<tr>
<td>REPRESSION-SENSITIZATION AND EXTERNAL-INTERNAL DIMENSIONS OF MILLON’S PERSONALITY TYPOLOGY</td>
<td></td>
</tr>
<tr>
<td>Introduction</td>
<td>1</td>
</tr>
<tr>
<td>Method</td>
<td>16</td>
</tr>
<tr>
<td>Subjects</td>
<td></td>
</tr>
<tr>
<td>Instruments</td>
<td></td>
</tr>
<tr>
<td>Procedure</td>
<td></td>
</tr>
<tr>
<td>Results</td>
<td>19</td>
</tr>
<tr>
<td>Locus of Control</td>
<td></td>
</tr>
<tr>
<td>Repression-Sensitization</td>
<td></td>
</tr>
<tr>
<td>Millon’s Personality Scales</td>
<td></td>
</tr>
<tr>
<td>Discussion</td>
<td>21</td>
</tr>
<tr>
<td>Appendices</td>
<td>28</td>
</tr>
<tr>
<td>References</td>
<td>44</td>
</tr>
</tbody>
</table>

iii
# LIST OF TABLES

<table>
<thead>
<tr>
<th>Table</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Descriptive Statistics for Values on Millon Personality Scales, I-E Locus of Control, and Repression-Sensitization (N = 103)</td>
<td>19</td>
</tr>
<tr>
<td>2. Correlations Between Locus of Control, Repression-Sensitization, and Millon's Personality Scales</td>
<td>20</td>
</tr>
</tbody>
</table>
In 1969, Theodore Millon proposed a new system for the classification of pathological conditions. In this system, he delineated eight basic coping strategies which were described as conducive to pathological personality functioning. These categories, while providing a description of types of maladaptive behavior, in a broader sense described the range of personality styles one encounters in normal as well as pathological behavior. These eight personality styles were derived essentially from a four by two matrix which combined two variables considered by Millon to be basic constructs in human personality (Millon, 1969). The first referred to the primary source from which individuals gain positive reinforcements and avoid negative ones. A person was considered "dependent" if his primary source consisted of individuals around him or "independent" if he relied mainly upon himself. Conflict between these two sources created an "ambivalent" personality style, with a person lacking a primary source seen as "detached." Each of these four sources was qualified by the style of instrumental behavior a person employed to obtain these reinforcements, which Millon divided into "active" and "passive." The resulting eight personality styles provided a unique
view of pathology, in that they embraced the full range of behavioral styles and interpersonal strategies within a common theoretical framework of understanding.

Millon (1969) initially described how individuals employing each of the eight styles would be expected to respond to most interpersonal situations. These theoretical descriptions provided support for the development of the DSM III (1980) personality disorder profiles, which form the basis for Axis II diagnoses. Description of these personality styles and their corresponding DSM III category are outlined below.

1) The person employing the passive-detached style functions socially as an observer, unattached through personal relationships to any potential source of rewards or affection or of interpersonal danger. This person minimizes emotional and affectionate needs, preferring social impassivity to social involvement. This pattern corresponds to the Schizoid disorder in DSM III.

2) The active-detached style is employed by someone who has come to view relationships as negative, potentially painful experiences which are to be avoided. They are suspicious, apprehensive, mistrustful of others, and are always vigilantly guarding against the possibility that their longing for affection will lead to a repetition of painful experiences of the past. Instead, they prefer to actively deny those feelings,
and maintain interpersonal distance through social withdrawal. This pattern corresponds to the Avoidant disorder in DSM III.

3) The person employing the passive-dependent style depends upon the other person in the relationship to provide affection, security and leadership, while showing no initiative or autonomy of his own. Such relationships often develop in the early experiences of a child with his parent, with these individuals preferring to contribute a submissive role in order to maintain their source of support. This pattern corresponds to the Dependent disorder in DSM III.

4) The active-dependent style is characterized by an insatiable and indiscriminate search for stimulation and affection. This person behaves in a socially outgoing manner, giving others the impression of being very independent. Beneath this guise, however, lies an intense need for social approval, attention, and affection, with true autonomy perceived as fearful prospect. This pattern corresponds to the Histrionic disorder in DSM III.

5) The passive-independent style is employed as a result of an over-valuing of self-worth reflected by an egotistical self-involvement. These individuals believe that their perceived superiority is obvious to others around them, causing them to maintain an air of
arrogant self-assurance. This pattern corresponds to the Narcissistic disorder in DSM III.

6) The active-independent style develops from a learned mistrust of others. People are seen as unreliable and generally responsible for the injustices this person has suffered. Such beliefs justify the hostility, rejection, and retribution they exhibit in most interpersonal situations as the only method of avoiding deceit and betrayal. This pattern corresponds to the Antisocial disorder in DSM III.

7) The passive-ambivalent style is based on a conflict between fear of social disapproval and hostility toward others. Through disciplined self-restraint, their own desires are inhibited and are replaced by a passive, over-controlled conformity to the demands of their environment. They exhibit affective restraint, interpersonal respectfulness, cognitive constriction, and prefer a rigid, highly regulated and repetitive life pattern in an effort to avoid their oppositional feelings. This pattern corresponds to the Compulsive disorder in DSM III.

8) The active-ambivalent style involves the same struggle experienced in the passive-ambivalent style, without the successful control of the outward expression of the conflict. The ambivalence invades everyday life, causing these individuals to vacillate between
deference and conformity one time, and aggressive negativism the next. Their behavior is a mixture of anger of stubborness with periods of guilt and shame. This pattern corresponds to the Passive-aggressive disorder in DSM III. (Millon, 1980, p. 62-64).

The ability of these theoretically derived dimensions to provide such clinically useful profiles led Millon to develop an instrument which extended this usefulness to the level of the individual. The Millon Multi-axil Clinical Inventory (MMCI) was introduced in 1977 as an instrument designed specifically for use with clinical populations. Moreover, it was systematically linked to the comprehensive theory of personality Millon had presented in 1969. The instrument provided objectively verifiable measures of personality characteristics and clinical syndromes through twenty clinical scales derived directly from this theory. The first eight scales corresponded to the eight personality styles reflected in pathological functioning, with the other scales providing measures of pathological personality syndromes and symptom disorders.

The MMCI offered improvements over other objective assessment instruments that were currently in use in a number of areas. In the MMCI Test Manual (1977), Millon described his inventory as "small enough to encourage use in all types of diagnostic and treatment settings, yet large enough to permit the assessment of a wide range of
clinically relevant behaviors" (1977), p. 1). At 175 items, it was much shorter than comparable instruments which were currently in use, and with terminology geared for an eighth grade reading level, most individuals could complete the form in fifteen to twenty-five minutes. The profile derived from the inventory was different as well, in that it divided information concerning the more enduring personality characteristics of patients from the acute clinical states they displayed. Such a division made clear the differences, as well as the interaction between, "longstanding characterological patterns and the specific clinical symptomatology a patient manifests under psychic stress" (1977, p. 2).

In 1979, Millon introduced a second instrument similar to the MMCI, designed for use with medical populations. The Millon Behavioral Health Inventory was developed to provide information about the physically ill patient in much the same way that the MMCI approached individuals with psychological problems. The MBHI profile, like the MMCI, provided three different types of information. The first eight scales were identical to those of the MMCI, and provided a description of the basic personality style of the individual along the dimensions Millon outlined in 1969. The next six scales were designed to reflect problematic psychosocial attitudes and stressors which could influence susceptibility to or the course of a medical problem. The last six scales were included to screen for possible
psychosomatic complications or for the possibility of especially poor response to either illness or treatment interventions. The MBHI offered the same advantage of brevity as the MMCI, but evolved as a separate scale designed for and normed on a non-psychiatric, or normal, population.

One of the most important considerations for the developers of the Millon scales, as with any other instrument, concerned the empirical evidence of its ability to relate to the clinical situation as effectively as it was designed to do. The information presented in the MMCI and MBHI test manuals concerning the statistical evaluation of these instruments was divided into four sections: 1) reliability estimates for retest stability and internal consistency; 2) internal structure data on item overlap, scale intercorrelations, and factor analysis; 3) external correlations obtained with other diagnostic inventories and with moderator variables; and 4) external validation results on correction scores, individual scale cutting lines, and configural interpretations. Results reported in each section substantiated the efficacy of these instruments in relating to the clinical situation. Much of the uniqueness of the Millon inventories, however, lies in their derivation directly from a comprehensive theory of personality. Therefore, it is as important to verify the efficacy of the theory, and the inventories' relationship to it, as it is to move the clinical validity of the instrument.
Much of the support for the efficacy of Millon's primary dimensions comes from a perusal of dimensions common to other personality theories. In 1915, Freud presented a framework of personality structure which differed from his primary theories involving psychosexual development and the personality structures of the id-ego-superego. This framework was never fully developed by Freud as a system of his own, and in fact represented ideas set forth in the earlier writings of Heymans and Wiersma, McDougall, Meumann, and Kollarits (Millon, 1981). Each of these theorists previously identified what Freud described as the three primary dimensions influencing the instincts: 1) subject (ego)--object (world); 2) pleasure-pain; and 3) active-passive. The subject-object dimension referred to the primary distinction of self versus other as two different sources that could exert power over an individual. The pleasure-pain dimension divided motivation into the two polarities of approaching events that are attractive versus avoiding events as seen as aversive. The active-passive dimension referred to the tendency of a person to either take initiative in surrounding events or behave in a reactive manner to those events.

Although Freud abandoned this view of man's personality in favor of those now associated with his name, these dimensions continued to exist as a common thread running through later theories of personality. Adler expanded upon the
active-passive dimension in his adaptation of Freud's ideas, describing four "types" that he believed encompassed the basic styles of personality. The first style, active constructive, was described as including individuals who were ambitious and oriented toward success, while passive constructive individuals were seen as charming, and placed a great deal of importance upon receiving attention for what they accomplished. Active destructive individuals were described as rebellious, vicious, and antisocial, with the passive destructive style described as lazy, stubborn, or passive-aggressive.

Jung made use of the introversion-extroversion dichotomy which resembled the subject-object dimension in many ways. The introvert was described as being interested in the inner world of concepts and ideas, while the extravert's interests were in the outer world of people and things. Therefore, when circumstances allowed, the introvert directed both perception and judgement upon ideas, while the extravert directed both upon his environment (Myers, 1962). Similarities could also be seen between this internal external orientation and Karen Horney's (1945) interpersonal approach to personality. She described the basic patterns of relating to others in terms of movement towards, away from, or against others. Movement towards others was also known as the compliant style, and was characteristic of an individual whose self-esteem and personal aspirations depended heavily
upon affection and approval of others. Such a person may show tendencies toward self-accusation, helplessness, and passivity, with a morbid dependency developing in the more extreme cases. Movement away from others led to a detached style, with the individual drawing exclusively upon internal sources for their existence. This may involve an active attempt to avoid relationships, preferring to achieve peace by curtailing needs and wishes, and may lead to total alienation in some individuals. Movement against others, or the aggressive style, resulted from over-glorification of internal abilities and a rigid denial of weakness and inadequacy. Life was seen as a struggle for survival at the expense of others. Like the detached type, these individuals depended upon internal sources for strength. The aggressive type, however, actively used relationships for personal gain rather than avoiding them.

Fiske and Maddi (1968) have presented a description of personality types using both the active-passive and internal-external dimensions in conjunction with the level of activation that becomes customary for a person. Activation related to levels of stimulus intensity, meaningfulness, and variety that an individual becomes accustomed to, with high activation leading to the development of needs in these areas, and low activation developing corresponding fears. Within this model, an individual who was a real "go-getter," seeking out challenges to meet in the physical and social environment
would be classified as a high-activation person with active and internal traits was described as "pursuing impact through thinking, daydreaming, responding to challenges posed by limitations of mind and body, without much regard for the tangible affairs of the external world (Maddi, 1968, p. 501). By substituting high and low activation, and active passive traits into the profile, Maddi was able to generate a total of eight personality types, which resemble Millon's personality styles in many ways.

A brief evaluation of theories such as these appears to confirm the commonality of such dimensions as active-passive and internal-external in the human experience, and may provide sufficient substantiation for the polarities that provide the basis for Millon's personality typology. Yet, this perceived commonality may not be sufficient validation when applying these constructs directly to a clinical population through individual assessment. Although it appeared that the internal-external dimension was a basic one in human interaction, was this dimension as it was measured on Millon's inventories related to more widely used measures of the same dimension? Could the same be said for the active-passive dimension? The purpose of this study was to address these theoretical questions in an objectively verifiable manner through comparisons with two commonly used research instruments: Rotter's I-E Scale and Bryne's Repression-Sensitization Scale.
The "rediscovery" of the concept of internal versus external control of reinforcement during the formulation of social learning theory (Rotter, 1954) led to the construction of Rotter's Internal External Locus of Control Scale (Rotter, 1966). This scale, known also as the I-E Scale, was designed to measure generalized expectancy for locus of control of reinforcement, or simply locus of control. Rotter defines the two concepts as follows:

When a reinforcement is perceived by the subjects as following some action of his own but not being entirely contingent upon his action, then, in our culture, it is typically perceived as the result of luck, chance, fate, as under the control of others, or as unpredictable because of the great complexity of the forces surrounding him. When the event is interpreted in this way by an individual, we have labeled this a belief in external control. If a person perceives that the event is contingent upon his own behavior or his own relatively permanent characteristics, we have termed this belief in internal control (1966, p. 1).

This description of internal versus external locus of control was very similar to the self/other dicotomy which provided the theoretical distinction between the dependent and independent dimension in Millon's model of personality. Millon states that:
dependent personalities have learned that feeling good, secure, confident, and so on... are best provided by others. Independent personality patterns, in contrast, are characterized by a reliance on the self. These individuals have learned that they obtain maximum pleasure and minimum pain if they depend upon themselves rather than others (1980, p. 59).

It appears, therefore, that both scales measure very similar dimensions, and thus should correlate closely with one another.

In the years since the scales' introduction, literally hundreds of research articles utilizing it have been reported, as the importance of locus of control as a variable in a variety of human interactions becomes better understood.

A number of researchers have called into question the undimensionality of the concept of locus of control (Abramowitz, 1973; Levenson, 1973; Mirals, 1970; Reid & Ware, 1973) and several scales based upon a multi-dimensional conceptualization have been developed. Levenson (1974) prepared a scale which utilized a tripartite division for classifying locus of control, designating Internal, Powerful Others, and Chance as three separate factors. The Nowicki-Strickland I-E Scale for children (1973) and for adults (1974) identifies at least four factors involved in locus of control—Helplessness, Superstition, Futility, and Persecution. Despite these varying theoretical views, however,
the Rotter, scale continued to receive support as a measure of generalized expectancy (Joe, 1971; Rotter, 1975; Tyler et al., 1979), and was chosen for the current study to remain consistant with related research recently completed.

The Repression-Sensitization Scale (Byrne, 1961) was the result of a decade of investigation into the area of perceptual defenses. Information from these studies suggested that there was a continuum with respect to the characteristic way in which an individual responded to threatening stimuli. The R-S Scale, as well as the Revised R-S Scale (1963), rated an individual on the predominant behavior mechanisms utilized in responding to such stimuli. Repressors were seen as using primarily avoidance strategies, such as denial and repression, while sensitizors are predominantly approaching, showing increased vigilance, intellectualizing, and obsessional behaviors (Byrne, 1961). These characteristics were similar to those used by Millon to describe the active/passive dimension of his theory. Individuals classified as active were described by Millon as "characterized by their alertness, vigilance, persistance, decisiveness, and ambitiousness in a goal directed behavior," similar to descriptors used for Byrne's sensitizors (1981, p. 60). Passive personalities, on the other hand, were said to engage in few overtly manipulative strategies to gain their ends, preferring to wait for the circumstances of their environment to take their course. Such behavior closely
paralleled that which would be expected from Byrne's repres-
sors. The similarity in theoretical descriptors suggested
that the R-S scale was a credible measure of the active/
passive dimension in Millon's typology.

Although some researchers have questioned the scale's
ability to discern ego-defensive strategies for coping with
threat (Carlson, 1979; Wood, 1979), the literature provides
general support of the R-S Scale as corresponding to beha-
vioral correlates of response styles (Rofe, 1979; Wagstaff,
1977). Shapiro and Rosenwald (1979) found a projective
measure of repression-sensitization to correlate with the
R-S Scale, with repressors showing a significantly greater
number of avoidant free association responses, and sensi-
tizors making more approach associations. Carr and Post
(1974) were generally supportive of the R-S Scale, but
believed it to reflect more accurately a conceptual process
than a defense mechanism.

The present study was designed to determine if a rela-
tionship existed between the concepts measured by Rotter's
I-E Scale and the dependent-independent styles measures by
the MBHI. Further, Millon's theoretical dimension of active-
passive was evaluated in the more behavioral terms of Bryne's
R-S Scale in an effort to understand the proposed dicotomy
in terms of its relation to actual individual behavior styles.
Four independent hypotheses have been advanced. First, that
individuals classified as independent on the MBHI will be
rated as more internally controlled on Rotter's I-E Scale. Second, that individuals classified as dependent on the MBHI will be rated as more externally controlled on Rotter's I-S Scale. Third, individuals rated as passive on the MBHI will be classified as repressors on Byrne's R-S Scale. Fourth, individuals rated as active on the MBHI will be classified as sensitizors on the R-S Scale.

Method

Subjects

The subjects for this study were 73 female and 30 male undergraduate volunteers enrolled in Introductory Psychology at North Texas State University. Their ages ranged from 18 to 40, with the mean age of 20.9 years.

Instruments

Subjects were profiled using the eight personality styles represented in both the Millon Multi-axil Clinical Inventory (1976) and the Millon Behavioral Health Inventory (1979). The MBHI was the instrument administered, in this study, as it was designed for and normed on non-psychiatric populations, while the MMCI was designed strictly for use with clinical populations (Millon, 1976). Scoring and interpretation of the eight personality scales was explained in the MBHI manual, with computer scoring and interpretation available. Test-retest reliability has been reported as ranging from .77 to .88, with a mean of .82. Internal consistancy as measured by the Kuder-Richardson Formula 20
ranges from .66 to .86, with a median of .83 for all scales. Validation information was obtained from scale by scale comparisons with several more established inventories: the MMPI, the Symptom Distress Checklist (SCL-90), Beck's Depression Inventory, the Webber-Johansson Temperament Survey, and the CPI. Correlations ranged from .32 to .75, and were overall supportive of external validity.

Expectancy of internal versus external control of reinforcement was measured by Rotter's (1966) I-E Locus of Control Scales. This scale consists of 29 forced-choice items, with 6 of the items being "filler items" to make the purpose of the test more ambiguous. Scoring instructions are detailed by Rotter (1966), and the score being the number of external choices made. Internal consistancy ranges from .55 to .76, with test-retest reliability ranging from .49 to .83. Construct validity is provided from repeated correlations between .55 and .60 with the James-Phares Likert-type scale (Blackman, 1962), and from two non-questionnare studies. In one, Adams-Webber (1963) compared the I-E scale with scores from a story completion test. Scoring was based upon whether the consequences of an "immoral course of action" by the story's main character was seen as following from the character's behavior or were more a function of external conditions. Results of the study indicated a highly significant relationship between those whose stories included more external causality and high I-E scores. In
another study, Cardi (1962) developed a measure of internal-external control from a semi-structured interview which ranged from 35 minutes to an hour. Judges rated the subjects as to locus of control from the interview data, and obtained a biserial correlation of .61 (p < .002) for the subject's ratings and I-E scale scores.

Defense style was measured using the revised Byrne's Repression-Sensitization Scale, which consists of 182 MMPI items. The revised scale, like the original scale (Byrne, 1961), requires the subject to mark True or False to each item as it pertains to them personally. Reliability coefficients of .94 (split-half) and .82 (test-retest) have been reported. Validity coefficients of .62 and .55 were found when R-S scores were related to self-ideal discrepancy and negative self-description on Worchel's Self Activity Inventory. On measures of Hostility Incongruency, R-S scores were positively related to each of three types of incongruency, while correlations with Ulman's Facilitation--Inhibition Scale ranged from -.75 to -.94.

Procedure

Administration of the three instruments occurred during one hour long session to groups of 15 subjects at a time. Participation was strictly voluntary, and each subject was apprised of the confidential nature of the information given and of the option to withdraw at any time without penalty. To insure confidentiality, only assigned subject numbers
were used to identify each subject's questionnaires; signed informed consent forms were collected separately and contained information that could serve to associate individuals with their responses. A set of instructions for the activity, along with instructions for each instrument, were given to each subject and read aloud by the experimenter at the beginning of the session. The MMCI was administered first, followed by the I-E scale, and the R-S scale for each subject. Following the session, each subject was debriefed as to the nature of the study, and the availability of the results upon completion.

Results

The descriptive statistics for scores obtained on the Millon Behavioral Health Inventory, the Rotter I-E Locus of Control Scale, and the Repression-Sensitization Scale are presented in Table 1. The Pearson intercorrelations between these scales are presented in Table 2.

Table 1

Descriptive Statistics for Values on Millon Personality Scales, I-E Locus of Control Scale, and Repression-Sensitization Scale (N = 103)

<table>
<thead>
<tr>
<th>Scale</th>
<th>M</th>
<th>Mdn</th>
<th>Mode</th>
<th>SD</th>
<th>Min</th>
<th>Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>32.57</td>
<td>35.0</td>
<td>40.0</td>
<td>22.76</td>
<td>0.0</td>
<td>89.0</td>
</tr>
<tr>
<td>2</td>
<td>46.45</td>
<td>49.67</td>
<td>32.0</td>
<td>26.49</td>
<td>0.0</td>
<td>110.0</td>
</tr>
<tr>
<td>3</td>
<td>32.70</td>
<td>31.56</td>
<td>32.0</td>
<td>26.22</td>
<td>0.0</td>
<td>90.0</td>
</tr>
<tr>
<td>4</td>
<td>54.04</td>
<td>58.14</td>
<td>75.0</td>
<td>26.00</td>
<td>1.0</td>
<td>115.0</td>
</tr>
</tbody>
</table>
Table 1--Continued

<table>
<thead>
<tr>
<th>Scale</th>
<th>M</th>
<th>Mdn</th>
<th>MODE</th>
<th>SD</th>
<th>Min</th>
<th>Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>55.70</td>
<td>64.67</td>
<td>75.0</td>
<td>25.27</td>
<td>1.0</td>
<td>115.0</td>
</tr>
<tr>
<td>6</td>
<td>62.60</td>
<td>67.80</td>
<td>72.0</td>
<td>25.29</td>
<td>10.0</td>
<td>115.0</td>
</tr>
<tr>
<td>7</td>
<td>46.51</td>
<td>47.14</td>
<td>60.0</td>
<td>20.61</td>
<td>0.0</td>
<td>85.0</td>
</tr>
<tr>
<td>8</td>
<td>56.20</td>
<td>58.6</td>
<td>56.0</td>
<td>25.05</td>
<td>1.0</td>
<td>115.0</td>
</tr>
<tr>
<td>RS</td>
<td>44.49</td>
<td>44.67</td>
<td>28.0</td>
<td>16.27</td>
<td>10.0</td>
<td>84.0</td>
</tr>
<tr>
<td>IE</td>
<td>10.16</td>
<td>10.11</td>
<td>10.0</td>
<td>3.64</td>
<td>2.0</td>
<td>21.0</td>
</tr>
</tbody>
</table>

Table 2

Correlations Between Locus of Control, Repression-Sensitization, and Millon's Personality Scales

<table>
<thead>
<tr>
<th></th>
<th>I-E - External</th>
<th>R-S Sensitization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Passive Detached</td>
<td>-0.127</td>
<td>-0.500***</td>
</tr>
<tr>
<td>Active Detached</td>
<td>0.275**</td>
<td>0.543***</td>
</tr>
<tr>
<td>Passive Dependent</td>
<td>-0.204*</td>
<td>-0.144</td>
</tr>
<tr>
<td>Active Dependent</td>
<td>-0.179*</td>
<td>-0.444***</td>
</tr>
<tr>
<td>Passive Independent</td>
<td>-0.110</td>
<td>-0.361***</td>
</tr>
<tr>
<td>Active Independent</td>
<td>0.189*</td>
<td>0.210*</td>
</tr>
<tr>
<td>Passive Ambivalent</td>
<td>-0.153</td>
<td>-0.165*</td>
</tr>
<tr>
<td>Active Ambivalent</td>
<td>0.319***</td>
<td>0.710***</td>
</tr>
</tbody>
</table>

*p < .05

**p < .05

***p < .001
Locus of Control

Individuals in this study displayed a wide range of scores on the I-E scale ($R = 2.0-21.0$) suggesting that the group contained individuals who fell along a continuum from very internal to very external. The group mean of 10.16 is significantly more external than the sample means of 7.97 and 8.34 reported for undergraduates in studies reported by Lefcourt (1976), as well as those reported by Rotter (1966) in the original monograph.

Repression-Sensitization

The scores reported for the R-S scale suggest that these individuals represent a wide range of defense styles ($R = 10.0-84.0$) from extreme repressors to extreme sensitizors. The mean of 44.49 is not significantly different from the means of 42.24 and 42.68 reported by Bryne in 1963.

Millon's Personality Scales

The general profile of the sample population as reported by the MBHI is consistent with what would be expected for a college population, with individuals characterized as generally assertive, outgoing, and either comfortable in their independence from others or in the process of working through issues of dependence. Individuals were least likely to be characterized as socially withdrawn or easily controlled and influenced by others.

Discussion

Support for the various hypotheses in this study was mixed, but provided useful insight into the efficacy of the
dimensions Millon's classification system is based upon. First, the prediction that individuals rated as passive on the MMCI would be classified as repressors on Byrne's R-S Scale was strongly supported. Second, the prediction that individuals rated as active on the MMCI would be classified as sensitizors on the R-S Scale was also supported. The third hypothesis concerning the predicted relationships between internal locus of control and the independent dimension was not supported. The fourth hypothesis relating external locus of control and dependence was also not supported.

The first two hypotheses seem to support the idea that the characteristic way a person seeks out or defends against elements in their environment is an important construct in understanding and classifying basic personality functioning. Seven of the eight personality dimensions were correlated with R-S scores, with six of the seven correlations being significant. It is interesting to note, however, that the exception in both cases concerned the dependent personality. While the active dimension of the other three styles show positive correlations with R-S of .54, .21, and .71, the active dependent personality style showed a -.44 correlation. Likewise, at -.14, the passive dependent style was the only dimension whose correlation was non-significant.

The negative R-S correlation, or high repression scores, associated with the active dependent personality style may be
a function of the particular personality involved. The Histrionic personality, as it is known in DSM III, is described as outgoing, gregarious, and stimulus seeking--outwardly an active effort at forming dependent relationships. Yet, the dynamics of such a personality present a different picture entirely. As Millon states, "...the tendency of histrionics to seal off, repress, and make inaccessible substantial portions of their meager inner life further aggravates their dependence on others" (p. 63). It is quite possible that this inner repression and denial is what is being reflected in the R-S score, as opposed to the active outward appearance constantly being presented. This might explain the lower negative correlation for the passive-dependent, or Dependent personality, as well. A person whose outward behavior more closely resembles their inner need for dependence may make less use of denial and repression to reconcile their behavior. Failure to identify these individuals as being strong repressors or strong sensitizors would therefore be consistant. Regardless, it is doubtful that these results distract from the efficacy of the active-passive dimension in Millon's system so much as they point to the uniqueness of the active and passive dependent patterns and the corresponding need to understand better their similarities, as well as their differences.

The findings concerning the last two hypotheses show clearly that no relationship exists between generalized
expectancy for locus of control and the amount of external control one seeks through commitment to interpersonal relationships. Rotter (1966) defines generalized expectancy as a belief about the nature of the world, but says that it is not necessarily correlated with a preference for internal or external control. Thus, it appears that simply a belief in the nature of the control of reinforcement is not the determinant factor in deciding one's approach to interpersonal relationships. Two aspects of the data suggests, however, the possibility that more specific locus of control factors may be involved in this process. First, the apparent direction of these correlations suggests a relationship with the active-passive dimension of Millon's scales. Second, those individuals described as primarily external in locus of control were also seen as actively uninvolved with others as sources of reinforcement (active detached, active independent, active ambivalent). These relationships may reflect the difference between locus of control factors described by Levenson (1974) as belief in luck, and belief in powerful others.

If an individual believed luck or fate controlled their future to a large extent, it is unlikely that they would attempt to actively dispute what they believed to be inevitable. In such a case, externality would correlate with passivity. It is doubtful, however, that a population of college students would, as a group, hold to that belief.
Their presence in post-mandatory education suggests a belief that their actions will indeed benefit their future. However, if these individuals believe that the influence of powerful others is important, but somewhat responsive to their own efforts, the findings of the study become much clearer. The more important one believes others to be in determining the future, the more active role one takes in trying to influence those persons. For this particular population, such an explanation may be more realistic. In the world of academics, where all of these subjects live and function, the instructor holds the key to their future in his mighty gradebook. Yet all successful students learn that effort in class, sitting on the front row, and after class chats about the day's "stimulating lecture," etc., does help influence the outcome. Thus, the external dimension of belief in powerful others could, for these subjects, signal an active level of involvement, which is what the present study found to occur. Such a relationship would require a strong internal belief in one's independent ability to influence those thought to be in power, which accounts for the findings holding true only for the detached, ambivalent, and independent dimensions. Dependent individuals would not be expected to show a relationship between externality and involvement, as their dependency is based upon a feeling of internal inadequacy and lack of direction without the powerful other in control.
of their lives. This would be supported by the present findings.

In conclusion, the active-passive dichotomy as proposed in Millon's personality theory and measured on the MBHI appears to be a useful dimension in describing differences in personality styles. It remains unclear, however, exactly what behavioral factors constitute an active or passive style, as the study suggested an inconsistency in the concept for dependent individuals, as well as a possible relationship to generalized locus of control. The statistical significance that was observed failed to provide support for the psychological significance of these personality factors. The importance of understanding such factors becomes clearer when the overall system of pathology described by Millon is examined. Beyond the eight personality styles which relate to mild pathological conditions, Millon describes three moderately severe pathological personality styles—cycloid, paranoid, and schizoid. One major difference in these three personality styles from the first eight is the absence of the active-passive dimension as a theoretical basis for differentiation. Thus, understanding the behavioral components of this dimension could, if Millon is correct, provide some basic insight into the personality changes associated with increasing severity of pathology. Such questions could best be addressed by studies which utilized non-psychiatric and psychiatric populations of
varying degrees of pathology. Such research could help determine if indeed the active/passive dimension drops out as a differentiating factor as severity of pathology increases.

The dimensions based upon interpersonal attachment may be equally as valid as a differentiator in personality styles, but are not explained by generalized expectancy of locus of control. It is possible that the nature of the population and specific locus of control factors could account for the findings of the present study, but further investigation directed as these specific issues would be necessary to determine if this is indeed the case. Such instruments designed to evaluate specifically how a person views the role of others in their lives. The potential value of the Millon system of pathology, and the related inventories, warrants continued investigation of these questions.
Appendix A

Subject ____________

Age: ____________
Sex: M     F

Yrs. of Education: ____________

Ethnic Group: Mexican-American     Black     Caucasian
(Circle one)  Other ____________

College Major: ____________
Vocational Objective: ____________

Father's Yrs. of Educ.: ____________
Father's Occupation: ____________

Mother's Yrs. of Educ.: ____________
Mother's Occupation: ____________

Number of Older Sisters: ____________
Number of Younger Sisters: ____________

Number of Older Brothers: ____________
Number of Younger Brothers: ____________

Rural-Urban (Circle one)

<table>
<thead>
<tr>
<th></th>
<th>5000</th>
<th>5000-10,000</th>
<th>10,000-20,000</th>
<th>20,000-40,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Or less</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>40,000-100,000</th>
<th>Over 100,000</th>
</tr>
</thead>
</table>

Marital Status: Single     Married     Separated     Divorced
(Circle one)      Widowed
Appendix B

Repression-Sensitization Scale

1. T  F  I have a good appetite.
2. T  F  I wake up fresh and rested most mornings.
3. T  F  I am easily awakened by noise.
4. T  F  I like to read newspaper articles on crime.
5. T  F  My hands and feet are usually warm enough.
6. T  F  My daily life is full of things that keep me interested.
7. T  F  I am about as able to work as I ever was.
8. T  F  There seems to be a lump in my throat much of the time.
9. T  F  I enjoy detective or mystery stories.
10. T  F  Once in a while I think of things too bad to talk about.
11. T  F  I am very seldom troubled by constipation.
12. T  F  At times I have fits of laughing and crying that I cannot control.
13. T  F  I am troubled by attacks of nausea and vomiting.
14. T  F  I feel that it is certainly best to keep my mouth shut when I'm in trouble.
15. T  F  At times I feel like swearing.
16. T  F  I find it hard to keep my mind on a task or job.
17. T  F  I seldom worry about my health.
18. T  F  At times I feel like smashing things.
19. T  F  I have had periods of days, weeks, or months when I couldn't take care of things because I couldn't "get going."
20. T  F  My sleep is fitful and disturbed.
Appendix B--Continued

21. T F Much of the time my head seems to hurt all over.
22. T F I do not always tell the truth.
23. T F My judgment is better than it ever was.
24. T F Once a week or oftener I feel suddenly hot all over, without apparent cause.
25. T F I am in just as good physical health as most of my friends.
26. T F I prefer to pass by school friends, or people I know but have not seen for a long time, unless they speak to me first.
27. T F I am almost never bothered by pains over the heart or in my chest.
28. T F I am a good mixer.
29. T F Everything is turning out just like the prophets of the Bible said it would.
30. T F I do not read every editorial in the newspaper every day.
31. T F I sometimes keep on at a thing until others lose their patience with me.
32. T F I wish I could be as happy as others seem to be.
33. T F I think a great many people exaggerate their misfortunes in order to gain the sympathy and help of others.
34. T F I get angry sometimes.
35. T F Most of the time I feel blue.
36. T F I sometimes tease animals.
37. T F I am certainly lacking in self-confidence.
38. T F I usually feel that life is worth while.
39. T F It takes a lot of argument to convince most people of the truth.
Appendix B--Continued

40. T  F  Once in a while I put off until tomorrow what I ought to do today.

41. T  F  I think most people would lie to get ahead.

42. T  F  I do many things which I regret afterwards (I regret things more or more often that others seem to do.

43. T  F  I go to church almost every week.

44. T  F  I have very few quarrels with members of my family.

45. T  F  I believe in the second coming of Christ.

46. T  F  My hardest battles are with myself.

47. T  F  I have little or no trouble with my muscles twitching or jumping.

48. T  F  I don't seem to care what happens to me.

49. T  F  Sometimes when I am not feeling well I am cross.

50. T  F  Much of the time I feel as if I have done something wrong or evil.

51. T  F  I am happy most of the time.

52. T  F  Some people are so bossy that I feel like doing the opposite of what they request, even though I know they are right.

53. T  F  Often I feel as if there were a tight band about my head.

54. T  F  My table manners are not quite as good at home as when I am out in company.

55. T  F  I seem to be about as capable and smart as most others around me.

56. T  F  Most people will use somewhat unfair means to gain profit or an advantage rather than to lose it.

57. T  F  The sight of blood neither frightens me nor makes me sick.
Appendix B--Continued

58. T  F  Often I can't understand why I have been so 
cross and grouchy.

59. T  F  I have never vomited blood or coughed up blood.

60. T  F  I do not worry about catching diseases.

61. T  F  At times my thoughts have raced ahead faster 
than I could speak them.

62. T  F  If I could get into a movie without paying and 
be sure I was not seen I would probably do it.

63. T  F  I commonly wonder what hidden reason another 
person may have for doing something nice for me.

64. T  F  I believe that my home life is as pleasant as 
that of most people I know.

65. T  F  Criticism or scolding hurts me terribly.

66. T  F  My conduct is largely controlled by the customs 
of those about me.

67. T  F  I certainly feel useless at times.

68. T  F  At times I feel like picking a fist fight with 
someone.

69. T  F  I have often lost out on things because I 
couldn't make up my mind soon enough.

70. T  F  It makes me impatient to have people ask my 
advice or otherwise interrupt me when I am 
working on something important.

71. T  F  I would rather win than lose in a game.

72. T  F  Most nights I go to sleep without thoughts or 
ideas bothering me.

73. T  F  During the past few years I have been well most 
of the time.

74. T  F  I have never had a fit or convulsion.

75. T  F  I am neither gaining nor losing weight.
Appendix B--Continued

76. T F I cry easily.
77. T F I cannot understand what I read as well as I used to.
78. T F I have never felt better in my life than I do now.
79. T F I resent having anyone take me in so cleverly that I have had to admit that it was one on me.
80. T F I do not tire quickly.
81. T F I like to study and read about things that I am working at.
82. T F I like to know some important people because it makes me feel important.
83. T F What others think of me does not bother me.
84. T F It makes me uncomfortable to put on a stunt at a party even when others are doing the same sort of things.
85. T F I frequently have to fight against showing that I am bashful.
86. T F I have never had a fainting spell.
87. T F I seldom or never have dizzy spells.
88. T F My memory seems to be all right.
89. T F I am worried about sex matters.
90. T F I find it hard to make talk when I meet new people.
91. T F I am afraid of losing my mind.
92. T F I am against giving money to beggars.
93. T F I frequently notice my hand shakes when I try to do something.
94. T F I can read a long while without tiring my eyes.
<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>95</td>
<td>T</td>
<td>I feel weak all over much of the time.</td>
</tr>
<tr>
<td>96</td>
<td>T</td>
<td>I have very few headaches.</td>
</tr>
<tr>
<td>97</td>
<td>T</td>
<td>Sometimes, when embarrassed, I break out in a sweat which annoys me greatly.</td>
</tr>
<tr>
<td>98</td>
<td>T</td>
<td>I have had no difficulty in keeping me balance in walking.</td>
</tr>
<tr>
<td>99</td>
<td>T</td>
<td>I do not have spells of hay fever or asthma.</td>
</tr>
<tr>
<td>100</td>
<td>T</td>
<td>I do not like everyone I know.</td>
</tr>
<tr>
<td>101</td>
<td>T</td>
<td>I wish I were not so shy.</td>
</tr>
<tr>
<td>102</td>
<td>T</td>
<td>I enjoy many different kinds of play and recreation.</td>
</tr>
<tr>
<td>103</td>
<td>T</td>
<td>I like to flirt.</td>
</tr>
<tr>
<td>104</td>
<td>T</td>
<td>In walking I am very careful to step over sidewalk cracks.</td>
</tr>
<tr>
<td>105</td>
<td>T</td>
<td>I frequently find myself worrying about something.</td>
</tr>
<tr>
<td>106</td>
<td>T</td>
<td>I gossip a little at times.</td>
</tr>
<tr>
<td>107</td>
<td>T</td>
<td>I hardly ever notice my heart pounding and I am seldom short of breath.</td>
</tr>
<tr>
<td>108</td>
<td>T</td>
<td>I have at times stood in the way of people who were trying to do something, not because it amounted to much but because of the principle of the thing.</td>
</tr>
<tr>
<td>109</td>
<td>T</td>
<td>I get mad easily and then get over it soon.</td>
</tr>
<tr>
<td>110</td>
<td>T</td>
<td>I brood a great deal.</td>
</tr>
<tr>
<td>111</td>
<td>T</td>
<td>I have periods of such great restlessness that I cannot sit long in a chair.</td>
</tr>
<tr>
<td>112</td>
<td>T</td>
<td>I dream frequently about things that are best kept to myself.</td>
</tr>
<tr>
<td>113</td>
<td>T</td>
<td>I believe I am no more nervous than most others.</td>
</tr>
</tbody>
</table>
Appendix B--Continued

114. T  F  I have few or no pains.
115. T  F  Sometimes without any reason or even when things are going wrong I feel excitedly happy, "on top of the world."
116. T  F  I can be friendly with people who do things which I consider wrong.
117. T  F  Sometimes at elections I vote for men about whom I know very little.
118. T  F  I have difficulty in starting to do things.
119. T  F  I sweat very easily even on cool days.
120. T  F  It is safer to trust nobody.
121. T  F  Once a week or oftener I become very excited.
122. T  F  When in a group of people I have trouble thinking of the right things to talk about.
123. T  F  When I leave home I do not worry about whether the door is locked and the windows closed.
124. T  F  I do not blame a person for taking advantage of someone who lays himself open to it.
125. T  F  At times I am all full of energy.
126. T  F  My eyesight is as good as it has been for years.
127. T  F  I have often felt that strangers were looking at me critically.
128. T  F  I drink an unusually large amount of water every day.
129. T  F  Once in a while I laugh at a dirty joke.
130. T  F  I am always disgusted with the law when a criminal is freed through the arguments of a smart lawyer.
131. T  F  I work under a great deal of tension.
132. T  F  I am likely not to speak to people until they speak to me.
Appendix B--Continued

133. T  F  I have periods in which I feel unusually cheerful without any special reason.

134. T  F  Life is a strain for me much of the time.

135. T  F  In school I found it very hard to talk before the class.

136. T  F  Even when I am with people I feel lonely much of the time.

137. T  F  I think nearly anyone would tell a lie to keep out of trouble.

138. T  F  I am easily embarrassed.

139. T  F  I worry over money and business.

140. T  F  I almost never dream.

141. T  F  I easily become impatient with people.

142. T  F  I feel anxiety about something or someone almost all the time.

143. T  F  Sometimes I become so excited that I find it hard to get to sleep.

144. T  F  I forget right away what people say to me.

145. T  F  I usually have to stop and think before I act even in trifling matters.

146. T  F  Often I cross the street in order not to meet someone I see.

147. T  F  I often feel as if things were not real.

148. T  F  I have a habit of counting things that are not important such as bulbs on electric signs, and so forth.

149. T  F  I have strange and peculiar thoughts.

150. T  F  I get anxious and upset when I have to make a short trip away from home.

151. T  F  I have been afraid of things or people that I knew could not hurt me.
Appendix B--Continued

152. T  F  I have no dread of going into a room by myself where other people have already gathered and are talking.

153. T  F  I have more trouble concentrating than others seem to have.

154. T  F  I have several times given up going a thing because I thought too little of my ability.

155. T  F  Bad words, often terrible words, come into my mind and I cannot get rid of them.

156. T  F  Sometimes some unimportant thought will run through my mind and bother me for days.

157. T  F  Almost every day something happens to frighten me.

158. T  F  I am inclined to take things hard.

159. T  F  I am more sensitive than most other people.

160. T  F  If given the chance I could do some things that would be of great benefit to the world.

161. T  F  People generally demand more respect for their own rights than they are willing to allow for others.

162. T  F  I enjoy social gatherings just to be with people.

163. T  F  I enjoy the excitement of a crowd.

164. T  F  My worries seem to disappear when I get into a crowd of lively friends.

165. T  F  Whenever possible I avoid being in a crowd.

166. T  F  In a group of people I would not be embarrassed to be called upon to start a discussion or give an opinion about something I know well.

167. T  F  I like parties and socials.

168. T  F  I shrink from facing a crisis or difficulty
Appendix B--Continued

169. T  F  I have sometimes stayed away from another
person because I feared doing or saying some-
thing I might regret afterwards.

170. T  F  Religion gives me no worry.

171. T  F  I am apt to take disappointments so keenly that
I can't put them out of my mind.

172. T  F  At times I think I am no good at all.

173. T  F  I worry quite a bit over possible misfortunes.

174. T  F  I am apt to pass up something I want to do becuase others feel that I am not going about
it in the right way.

175. T  F  I wish I could get over worrying about things
I have said that my have injured other people's
feelings.

176. T  F  I have several times had a change of heart about
my life work.

177. T  F  I must admit that I have at times been worried
beyond reason over something that really did not
matter.

178. T  F  A windstorm terrifies me.

179. T  F  I have a daydream life about which I do not tell
other people.

180. T  F  I have often felt guilty because I have pre-
tended to feel more sorry about something than
I really was.

181. T  F  I feel tired a good deal of the time.

182. T  F  I sometimes feel that I am about to go to pieces.
Appendic C

I-E Locus of Control Scale

This is a questionnaire to find out the way in which certain important events in our society affect different people. Each item consists of a pair of alternatives lettered a or b. Please select the one statement of each pair (and only one) which you more strongly believe to be the case as far as you're concerned. Be sure to select the one you actually believe to be more true rather than the one you think you should choose or the one you would like to be true. This is a measure of personal belief; obviously there are no right or wrong answers.

Your answers to the items on this inventory are to be recorded by placing a circle around the letter corresponding to your answer. Please print your name at the top of the test.

In some instances you may discover that you believe both statements or neither one. In such cases, be sure to select the one you more strongly believe to be the case as far as you're concerned. Also try to respond to each item independently when making your choice; do not be influenced by your previous choices.

1. a. Children get into trouble because their parents punish them too much.
   b. The trouble with most children nowadays is that their parents are too easy with them.

2. a. Many of the unhappy things in people's lives are partly due to bad luck.
   b. People's misfortunes result from the mistakes they make.

3. a. One of the major reasons why we have wars is because people don't take enough interest in politics.
   b. There will always be wars, no matter how hard people try to prevent them.

4. a. In the long run people get the respect they deserve in this world.
   b. Unfortunately, an individual's worth often passes unrecognized no matter how hard he tries.

5. a. The idea that teachers are unfair to students is nonsense.
   b. Most students don't realize the extent to which their grades are influenced by accidental happenings.
Appendix C--Continued

6.  a. Without the right breaks one cannot be an effective leader.
    b. Capable people who fail to become leaders have not taken advantage of their opportunities.

7.  a. No matter how hard you try some people just don't like you.
    b. People who can't get others to like them don't understand how to get along with others.

8.  a. Heredity plays the major role in determining one's personality.
    b. It is one's experiences in life which determine what they're like.

9.  a. I have often found that what is going to happen will happen.
    b. Trusting to fate has never turned out as well for me as making a decision to take a definite course of action.

10. a. In the case of the well prepared student there is rarely if ever such a thing as an unfair test.
     b. Many times exam questions tend to be so unrelated to course work that studying is really useless.

11. a. Becoming a success in a matter hard work, luck as little or nothing to do with it.
     b. Getting a good job depends mainly on being in the right place at the right time.

12. a. The average citizen can have an influence in government decision.
     b. This world is run by the few people in power, and there is not much the little guy can do about it.

13. a. 'When I make plans, I am almost certain that I can make them work.'
     b. This world is run by the few people in power, and there is not much the little guy can do about it.

14. a. There are certain people who are just no good.
     b. There is some good in everybody.

15. a. In my case getting what I want has little or nothing to do with luck.
     b. Many times we might just as well decide what to do by flipping a coin.
16. a. Who gets to be the boss often depends on who was lucky enough to be in the right place first.  
   b. Getting people to do the right thing depends upon ability, luck has little or nothing to do with it.

17. a. As far as world affairs are concerned, most of us are the victims of forces we can neither understand, nor control.  
   b. By taking an active part in political and social affairs the people can control world events.

18. a. Most people don't realize the extent to which their lives are controlled by accidental happenings.  
   b. There really is no such thing as "luck,"

19. a. One should always be willing to admit mistakes.  
   b. It is usually best to cover up one's mistakes.

20. a. It is hard to know whether or not a person really likes you.  
   b. How many friends you have depends upon how nice a person you are.

21. a. In the long run the bad things that happen to us are balanced by the good ones.  
   b. Most misfortunes are the result of lack of ability, ignorance, laziness, or all three.

22. a. With enough effort we can wipe out political corruption.  
   b. It is difficult for people to have much control over things politicians do in office.

23. a. Sometimes I can't understand how teachers arrive at the grades they give.  
   b. There is a direct connection between how hard I study and the grades I get.

24. a. A good leader expects people to decide themselves what they should do.  
   b. A good leader makes it clear to everybody what their jobs are.

25. a. Many times I feel that I have little influence over the things that happen to me.  
   b. It is impossible for me to believe that chance or luck plays an important role in my life.
Appendix C--Continued

26. a. People are lonely because they don't try to be friendly.
   b. There's not much use in trying too hard to please people, if they like you, they like you.

27. a. There is too much emphasis on athletics in high school.
   b. Team sports are an excellent way to build character.

28. a. What happens to me is my own doing.
   b. Sometimes I feel that I don't have enough control over the direction my life is taking.

29. a. Most of the time I can't understand why politicians behave the way they do.
   b. In the long run the people are responsible for bad government on a national as well as on a local level.
References


Millon, T., Green, C., & Meagher, R. *Millon behavioral health inventory manual.* 1979


