# The Development and Validation of a Scale for Measuring Self-Leadership

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***Abstract***

*The purpose of this study was to develop a psychometrically sound measure of Self-leadership within the framework of the Internal Family Systems model to be used in clinical practice and research. A cross-sectional study using survey data in a sample of government employees (N=745) was conducted to develop the measure and evaluate its psychometric properties. A 50-item Self-Leadership Scale (SLS) was developed, as well as a brief 20-item version for use in clinical practice. Both the 50-item and brief 20-item scales were found to have adequate internal consistency and construct validity, as well as marginal test-retest reliability. In exploring correlates of Self-leadership, both scales were found to relate to measures of well-being representative of one's internal environment (i.e., general health perceptions, life satisfaction, symptoms of illness, perceived stress) and measures of work indicative of one's external environment (i.e., supervisor support, coworker support, work stress, job satisfaction). Conceptual issues relating to Self-leadership (e.g., viewing it as a state versus a trait), limitations of the study, and implications for the use of the SLS in bridging the gap between research and practice are discussed.*

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## INTRODUCTION

The concept of Self-leadership examined in this research is based on the Internal Family Systems (IFS) model, which evolved out of the recognition of the multiplicity of the mind and an attempt to understand the mind and then change it using systems theory (Schwartz, 1995; 2001). In the IFS model, an individual is viewed as containing multiple subpersonalities or parts that form an internal family. This internal family is organized in the same way as other human systems (e.g., a school or a corporation), functioning best when leadership is clearly designated, respected, fair, and capable. According to the IFS model, the natural internal leader is the Self. All people have at the core of their psyche, or seat of consciousness, a Self, defined as an active, compassionate inner leader containing the perspective, confidence, and vision necessary to lead an individual's internal and external lives harmoniously and sensitively (Schwartz, 1995). A brief description of the IFS model follows. For a more comprehensive review, see Schwartz (1995; 2001) and Goulding and Schwartz (1995).

## THE INTERNAL FAMILY SYSTEMS MODEL

The IFS model combines the existing paradigms of multiplicity of the mind and systems theory into a model of the individual as a system (Schwartz, 1995, 2001). Most theorists (e.g., Freud, Winnicott, Kohut, Jung) who have described the intrapsychic process refer to the mind as having some degree of multiplicity. With respect to systems theory, the IFS model emphasizes the importance of viewing the individual as a system composed of various parts. One-or two-word descriptions are often used to describe parts such as the achiever, the caretaker, the critic, the clown, the rebel, the distracter, etc. These parts develop and relate to one another in a harmonious pattern when the Self is leading.

An important premise of the IFS model is that human systems are different from mechanical systems in that they can self-correct. Human beings are born with an innate drive toward and wisdom regarding their own well-being,

and strive toward creativity, intimacy, and growth. As individuals go through life they often encounter environmental constraints that come from a variety of sources including trauma (e.g., childhood sexual abuse), tangible burdens (e.g., poverty), developmental burdens (e.g., unexpected death), and legacy burdens (e.g., shame). Thus, the IFS model was originally developed as a psychotherapeutic approach to help individuals find and release the constraints that block access to their inner resources and wisdom. When individuals are Self-led, they enhance their internal environments, which ultimately results in more effective interactions with their external environments.

**The Self**

Self-leadership has been compared to the state of centeredness achieved during meditation or martial arts. Leading with the Self is similar to mindfulness (Kabat-Zinn, 1994, Surya Das, 1997, 2000), being in the flow (Csikszentmihalyi, 1990, 1993), following one's bliss (Campbell & Moyers, 1988), and having a secure sense of self (Stern, 1985). However, Self-leadership as described in the IFS model is distinguished from the above descriptions in that the Self is viewed as an active, compassionate leader rather than a nonassertive, nonjudgmental observer or witness. In leading, the Self attempts to hold diversity and unity in balance, to resolve conflicts without imposing synthesis or expelling parts, and to celebrate differences. The experience of Self-leadership can be understood using Beahrs' (1982) metaphor of a symphony or orchestra:

Like the overall Self, the orchestra is a complex whole with a personality of its own. Like any multicellular organism or social group, it is composed of many component parts or orchestra members, each with its own sense of identity and unique personality, but all of which function together in a coordinated cooperative endeavor to the advantage not only of the whole, but of all the parts. While the music is made entirely by the composite of parts, which transcends being a mere algebraic sum, it is held together and organized by the leadership of an executive, the conductor. Although he makes none of the actual music, the conductor is in charge - at one level a fundamental paradox, at another simple commonsense knowledge available to all of us (pp. 6-7).

It is this active leading by the Self that provides a safe and nurturing environment and enables the internal family system to maintain homeostasis and well-being, as well as transform stressful situations into opportunities for growth. Schwartz (2001) cautions, however, that very few people constantly and fully live in Self-leadership. Given the reality of daily living, all individuals have been, to varying degrees, rejected, shamed, humiliated, abandoned, and traumatized. The IFS model presents a path towards increased Self-leadership that is based upon twenty years of experience working with clients. Schwartz (2001) describes eight qualities that his clients exhibit as they increasingly embody more Self-energy in their daily lives. These characteristics of Self-leadership include: calm, clarity, curiosity, compassion, confidence, courage, creativity, and connectedness.

***Calm***. The experience of calmness is defined as a pervasive sense of psychological and physiological calm. Self-led individuals experience less activity in their mind and body and react to stressors in the environment in less extreme and automatic ways. Rather than being overwhelmed by the common stress response of fight, flight, or frozen impulses, Self-led individuals hold a calm, steady center. Although waves of painful and joyful feelings are experienced, this calm center remains undisturbed.

***Clarity***. Clarity is defined as the ability to perceive situations without distortions from extreme beliefs and emotions. The experience of clarity is void of preconception and projection, and reflects what the Buddhists call "beginner's mind", a view in which there are many possibilities. The absence of Self-leadership is characterized by limited perception and possibility as well as the experience of extreme beliefs and emotions. This position is called the "expert mind" and is based upon previous experiences and current desires. When individuals see through the eyes of the Self, they see with clarity.

***Curiosity***. Curiosity is defined as listening to another individual or to our own parts in a non-judgmental manner with the intention to understand. "Like the inquisitiveness of a child, we are full of innocent interest in people and their reactions" (Schwartz, 2001, p. 51). For example, Self-led individuals are curious about someone else's anger or their own anger. This kind of non-judgmental curiosity results in dialogues that are enlightening as well as growth producing. When people or parts sense no fear of judgment, just genuine interest and intent to understand, they become less defensive and are often happy to share their story with someone who is not judging them.

***Compassion***. The experience of compassion is defined as being open-heartedly present with other people, or one's parts, without feeling the urge to rescue them or to distance from them. This is possible, even when people are in pain, because the Self-led individual knows that other people also have a Self, which once released, can relieve and heal their pain. "If people relieve their own suffering, they learn to trust their own Self and they learn whatever lessons the suffering has to teach. Compassion, then, leads to doing whatever possible to foster the release of the other's Self

rather than becoming the other's healer" (Schwartz, 2001, p.54). Often, simply being in the presence of a Self-led individual with this kind of openhearted compassion will release the other person's Self.

***Confidence***. The experience of confidence refers to responding to present situations assured in the ability of the Self to handle the situation, protect parts as necessary, and comfort parts if they get hurt. Because Self-led individuals know they are loved, they emanate love, and live a life of authenticity, assured in their ability to function in the present moment rather than worrying about the future or ruminating over past hurts. If situations involve danger, Self-led individuals take steps to protect themselves without becoming defensive or overreacting, and if necessary, nurture any parts that were hurt. Over time, such interactions result in more and more confidence in the Self.

***Courage***. While Self-led individuals are compassionate, they also have the strength to be forceful and protective without judgment when necessary. Courage is defined as the experience of looking at present situations and then acting in an open- hearted manner congruent with the needs of the situation. Self-led individuals have the courage to move towards happiness and joy. They also have the strength to move towards difficult or painful experiences, such as witnessing an upsetting event of the past rather than trying to minimize its impact or forget about the event entirely. Particularly in these situations, it takes courage to look and then courage to act.

***Creativity***. Creativity is defined as the innate wisdom and truth that one experiences when the rational mind is quiet and the noise from inner critics is diminished. This quieting of the rational mind and of one's inner critics makes space for intuition and for creative expression to spontaneously emerge. Schwartz (2001) cautions, however, that the way to real creative self-expression is not to avoid or shut out such emotions as anger, grief, jealousy, or fear. Rather, it is the exploration of these feelings that enables individuals to speak their truth and experience creative self-expression.

***Connectedness***. The experience of connectedness is defined as increasingly embodying more Self-energy, as well as being in the presence of other individuals who also are Self-led. Relief is experienced because you are in the company of someone with whom there is no need to impress or to hide from because you won't be judged or controlled. In this extraordinary moment, each of you can be who you really are. As individuals become more and more Self-led, they feel a greater sense of connectedness and attraction to all the Selves around them.

The eight characteristics of Self-leadership described above are inter-related. An individual who has a calm center is able to perceive situations with greater clarity and less influence from extreme beliefs and emotions. This combined sense of calmness and clarity enables an individual to listen to others with non-judgmental curiosity. The sincere interest in and witnessing of another individual helps foster compassion and connectedness. Over time, these Self-led experiences result in individuals feeling more and more confident in their ability to effectively handle a variety of situations with courage. This courage enables one to move toward strong, emotional experiences thus providing the opportunity for creative self-expression.

**Parts**

Subpersonalities exist from birth in potential and emerge as distinct parts at significant points in an individual's life (Goulding & Schwartz, 1995). Each part has a unique view of the world, set of abilities and desires, style of expression, and range of emotion. The IFS model describes three major groups of parts common to all individuals. These include exiles, managers, and firefighters. The most sensitive members of the internal family are the exiles. The exiles are the parts that carry the emotions and memories from past experiences when a person was frightened, hurt, humiliated, or shamed. When an individual feels threatened, or fearful of a situation that might activate an exile's feelings or bring memories into consciousness, a manager part will emerge and attempt to maintain control over the internal and external environments. Manager parts are highly protective and strategic. They focus on helping individuals function on a daily basis and manage their lives, which often involves trying to block an exile's vulnerable feelings from consciousness. Managers live in fear of the escape of exiles and thus try to keep these vulnerable and needy parts locked up or exiled in inner closets; further, the managers try to avoid situations that might activate an exiles feelings or memories into consciousness.

The third group, the firefighters react powerfully and automatically whenever an exile is upset. Because an exile may overwhelm an individual with feelings or make an individual vulnerable to being hurt again in a similar way, firefighter parts tend to be highly impulsive and use stimulation (e.g., food, alcohol, drugs, work, sex) in an effort to stifle or put out the inner flames of feelings as quickly as possible (Schwartz, 1995). For example, if an individual has an interpersonal or group interaction that triggers exiled feelings of abandonment, a manager part may make a plan to avoid situations in which feelings of vulnerability and thus the potential for abandonment arise. If, however, this manager is unable to keep the feelings of abandonment under control and a subsequent interaction triggers intense

feelings of vulnerability, a firefighter part may take over and lead the person to binge eat or to consume alcohol in an effort to stifle these feelings.

## LITERATURE ON THE IFS MODEL

There is a substantial literature base on the IFS model. The main focal points of this literature include overviews and in-depth discussions of the IFS model, its use in individual, couples, and family therapy, as well as its use in treating specific problems such as sexual abuse and bulimia (Goulding & Schwartz, 1995; Schwartz 1987; 1988; 1992; 1995; 2001). Within this literature base, the concept of Self-leadership is discussed at length, and characteristics of Self-led individuals are described. Therapists trained in the IFS model are able to make qualitative assessments of Self-leadership based on these characteristics. However, quantitative assessments of Self-leadership have not been made. Thus, although much has been written on the IFS model and Self-leadership, empirical research on this construct is lacking.

The only published empirical research conducted to date was a preliminary study by two authors of this paper (Dolbier, Soderstrom, & Steinhardt, 2001). In that study, we investigated the relationship of Self-leadership to a variety of psychological, health, and work measures in university students and corporate employees. We assessed Self-leadership using a measurement tool that is consistent with the IFS model and the construct of Self-leadership -- the Core Wellness Scale (CWS) (Bezner, Adams, & Steinhardt, 1997). The CWS was designed to measure an individual's perception of a secure sense of one's core Self, and is so named because the assured presence of this core Self is necessary to obtain optimal levels of wellness. Findings indicated that Self-leadership related to enhanced psychological functioning (e.g., greater optimism), enhanced health (e.g., fewer symptoms of illness), and measures of an enhanced work environment (e.g., greater perceptions of work satisfaction). Although these results were promising, the CWS was not derived theoretically based on the IFS model. Given that the concept of Self-leadership is elusive and thus difficult to assess, the authors feel strongly that a theoretically derived tool would better capture the essence of this construct.

With the exception of the results of the above-described study, little is known empirically about Self-leadership and its correlates. The IFS model enables speculation regarding what Self-leadership should be related to, but empirical research quantifying those relationships is sorely lacking. In order for research in this area to progress, a theoretically derived measurement tool must be developed that captures the degree to which certain inherent positive qualities of the Self are present and accessed. With such a measurement tool, empirical research on the construct of Self-leadership can begin.

Research and practice can and should inform one another. There has been an expressed need for bridging the gap between research and practice (Schwartz & Breunlin, 1983). A tool for assessing Self-Leadership would help to bridge that gap and would be useful for both researchers and practitioners. The more theoretically sound the tool, the more informed the research will be, and the more relevant the findings of that research will be to practitioners. A Self-leadership measurement tool would provide a way for practitioners and researchers to test and explore IFS as a treatment model. First, it could be used to evaluate the effectiveness of the IFS model as a therapeutic tool. Such outcomes research is an essential activity that has a large impact on practice by increasing its credibility. Second, a Self-leadership measurement tool would be helpful for process research, by administering it at various stages of therapy to explore the therapeutic process. Administering the tool at various stages is also a way for practitioners to assess client progress. Practitioners could aid in the research process by: a) using such a tool, as researchers often cannot be in the clinical setting; and b) informing the research by offering an important focus and perspective for future research.

Thus, the purpose of this study was to develop a theoretically sound measure of Self-leadership, and examine its internal consistency, test-retest reliability, and construct validity. A scale for assessing Self-leadership was developed based on the IFS model and the eight qualities that clients exhibit as they increasingly embody more Self-energy (Schwartz, 2001). A cross-sectional study was conducted to validate the measure and explore the relationship of Self-leadership to both internal and external aspects of an individual's environment. Using a sample of government employees, it was hypothesized that Self-leadership would be related to greater subjective well-being, indicative of one's internal environment, and enhanced work outcomes, reflective of one's external environment.

## METHOD

### Participants

Participants for this study were a convenience sample of employees (N=745) from the Texas Department of Human Services (DHS). The demographic information presented here is based on a smaller sample of 658 participants for whom demographic information was available. However, those participants whose demographic information was not available (N=87) are assumed to be similar to the larger

group. The sample was comprised of 26% males and 74% females with a mean age of 44.2 ± 9.4 years. The sample consisted of 63.5% White, 20.4% Hispanic, 13.8% African American, 2.1% Asian/Pacific Islander, and 0.2% American Indian. All participants were informed that their responses would have no bearing on their relationship to their employer or The University of Texas.

**Procedures**

This study employed a cross-sectional research design using survey data. Employees of DHS completed the survey in a quiet setting within their workplace. Eight weeks later, the Self Leadership Scale was administered again to 160 of the original sample of participants in either a small group setting or via mail. The small group setting was a convenience sample of 80 employees, and 80 employees were chosen at random from the remaining original participants to receive a second survey in the mail. 100 participants responded resulting in a response rate of 62.5%. The University of Texas at Austin Institutional Review Board approved the procedures for the study, and data were collected and recorded so as to ensure the confidentiality of the participants.

**Instruments**

The survey assessed the dispositions of Self-leadership, hardiness, optimism, pessimism, approach coping style, avoidance coping style, positive affectivity, and negative affectivity. Other variables assessed included measures of well-being (i.e., general health perceptions, life satisfaction, symptoms of illness, and perceived stress) and work outcome measures (i.e., supervisor support, coworker support, job satisfaction, and work stress).

*Dispositional Measures*

*Self-Leadership*. The concept of Self-leadership comes from the IFS model, which describes the individual as a complex system with multiple sub-personalities or parts. Self-leadership is defined as the extent to which this system is operated by a core-Self, an active, compassionate inner leader containing the perspective, confidence and vision necessary to lead an individual's internal and external life harmoniously and sensitively (Schwartz, 1995). Self-leadership was assessed using 53 items consistent with the IFS model. Several items from a scale developed by Lia O'Neil in collaboration with Richard Schwartz (the founder of the IFS model) for her Master's thesis (2002) were used as a conceptual starting point. These items were expanded upon to include a minimum of six items for each of the eight qualities that are believed to be present when leading with the Self: calm, clarity, curiosity, compassion, confidence, courage, creativity, and connectedness (Schwartz, 2001). During the development of the items, feedback from Richard Schwartz and IFS therapists was elicited as to the congruence of the items to the eight qualities of Self-leadership, as well as to the IFS model. This feedback was used to improve the content of the items, and thus the content validity of the measure**.**

The instructions for the Self-Leadership Scale read as follows: *Everyone has many different thoughts and feelings. Read the following statements carefully and circle the response that best describes how frequently you experience each statement.* Respondents were asked to indicate the frequency of experiencing each statement on a Likert scale with the following response options: *1 = never/almost never, 2 = rarely, 3 = sometimes, 4 = often,* and *5 = always/almost always.* Sample items representing each of the eight qualities include: *"I feel a sense of inner peace"* (calm), *"I can see things as they are"* (clarity), *"I am open to new ideas and ways of looking at things"* (curiosity), *"I treat myself with kindness"* (compassion), *"I can handle present situations"* (confidence), *"I embrace life's challenges"* (courage), *"I am full of new ideas"* (creativity), and *"I feel a close bond with at least one other person"* (connectedness).

*Hardiness.* Hardiness was defined as a personality characteristic describing an individual with three closely related tendencies: perceiving change as a challenge, commitment to the people and activities in which they are involved, and a sense of personal control in handling life events (Kobasa, 1979). The 30-item Dispositional Resilience Scale (DRS) was selected as a measure of hardiness because it assesses the presence of each of these tendencies (Bartone, Ursano, Wright, & Ingraham, 1989). Respondents were asked to reply using a Likert scale ranging from *0 = not true at all* to *3 = completely true* to items such as *"By working hard you can always achieve your goals"* and *"Changes in my routine are interesting to me".* The internal consistency for the DRS in this sample was $\alpha = .75$.

*Optimism and Pessimism.* Dispositional optimism is defined as the tendency across time and context to have positive expectations. Conversely, dispositional pessimism reflects a relatively stable inclination to expect negative outcomes (Scheier & Carver, 1985). The dispositions of optimism and pessimism were measured using the revised Life Orientation Test (LOT-R; Scheier, Carver, & Bridges, 1994). The LOT-R possesses six items, plus four filler items. The four filler items designed to disguise the content of the scale were omitted due to space limitations. This may have inflated internal consistency values, although such inflation is unlikely because the six items were integrated with other psychological scales that would have had a similar masking

effect. All six items can be used to measure optimism when three of them are reversed scored. However, for this study measures of both dispositional optimism and dispositional pessimism were considered more favorable in order to test both the convergent and divergent validity of the Self-Leadership Scale. The three items that did not need to be recoded combined for a measure of dispositional optimism. Respondents indicated on a Likert scale ranging from *0 = strongly disagree* to *4 = strongly agree* the extent to which they agreed with items such as *"In uncertain times, I usually expect the best"*. The three remaining items measured dispositional pessimism. On the same Likert scale, respondents indicated the degree to which they agreed with items such as *"If something can go wrong for me, it will."* The internal consistency for dispositional optimism in the current study was $\alpha$ = .69, for dispositional pessimism $\alpha$ = .79.

*Approach and Avoidance Coping Style.* Dispositional coping style refers to an individual's preferred behavioral and cognitive responses to stressful situations that remain stable across time and circumstances (Carver, Scheier, & Weintraub, 1989). Researchers make a common conceptual distinction in the *focus* of coping responses or strategies. An individual with an approach coping style prefers strategies that are aimed at problem solving or active attempts to resolve the stressor. An individual with an avoidance coping style prefers strategies that are aimed at avoiding active confrontation of the stressor or reducing emotional tension associated with the stressor. These two general coping styles were assessed using seven two-item subscales of the dispositional version of the Brief Coping Orientations to Problems Experienced (Brief COPE) scale (Carver, 1997) along with one two-item subscale from the extended version, the Coping Orientations to Problems Experienced scale (COPE; Carver et al., 1989). Together, these eight subscales measure a broad range of cognitive and behavioral coping strategies that individuals typically use in stressful life situations. Four subscales were combined to assess an approach coping style: active coping, planning, suppression of competing activities and positive reframing. An item from the suppression of competing activities subscale that represents an approach coping strategy is *"I focus on dealing with the problem, and if necessary let other things slide a little"*. Four subscales were also combined to assess an avoidance coping style: denial, behavioral disengagement, mental distraction, and venting. *"I refuse to believe that it has happened"* is an item from the denial subscale that represents an avoidance coping strategy. For each of the 16 coping items, respondents were asked to indicate the extent to which they used the strategies on a Likert scale ranging from *0 = not at all* to *3 = a lot*. The internal consistency for approach coping was $\alpha$ = .75 and for avoidance coping $\alpha$ = .70.

*Positive and Negative Affectivity*. Trait positive affectivity is defined as the predisposition to experience positive feelings and emotions that reflect general levels of energy and enthusiasm, and has been closely associated with the disposition of extraversion (Watson & Pennebaker, 1989). Trait negative affectivity refers to the tendency to experience a broad range of aversive feelings and emotions, and has been likened to the disposition of neuroticism (Watson & Pennebaker, 1989). Trait positive and negative affectivity were measured using the 20-item Positive and Negative Affect Schedule (PANAS) developed by Watson, Clark, and Tellegen (1988). On a Likert scale ranging from *1 = not at all to 5 = very much so,* respondents indicated to what extent they generally felt various positive and negative feelings and emotions. Sample items for positive affectivity included *"enthusiastic," "alert," and "active," while "upset," "ashamed,"* and *"hostile"* are examples of negative affectivity items. The internal consistency for each of the scales was adequate, with $\alpha$ = .91 for positive affectivity, and $\alpha$ = .91 for negative affectivity.

*Measures of Well-Being*

*General Health Perceptions.* General health perceptions are defined as an individual's comprehensive view of how good his/her personal health is at the time, as well as how good he/she expects it to be in the future (Ware & Sherbourne, 1992). In order to ascertain the perceived general health of the participants, five items from the MOS 36-item Short Form Health Survey (Ware & Sherbourne, 1992) were used. For four of these items, respondents were asked to indicate how true or false statements such as *"I am as healthy as anybody I know,"* and *"My health is excellent"* were using a Likert scale ranging from *1 = definitely false* to *5 = definitely true*. For the fifth item, respondents were asked to answer the question, "In general, would you say your health is:" using a Likert scale ranging from *1 = poor* to *5 = excellent.* An $\alpha$ of .81 was computed for the internal consistency of general health perceptions for this study.

*Life Satisfaction.* Life satisfaction is a global assessment of one's quality of life based upon an internally set standard (Diener, Emmons, Larson, & Griffin, 1985). Life satisfaction was assessed using the five-item Satisfaction With Life Scale (SWLS) developed by Diener and colleagues (1985). Respondents recorded how much they agreed with items such as *"In most ways my life is close to ideal"* and "*The conditions of my life are excellent"* on a Likert scale ranging from *1 = strongly disagree* to *7 = strongly agree.* The internal consistency for the SWLS was $\alpha$ = .91.

*Symptoms of Illness.* Psychosomatic symptoms of illness were gauged by the Symptoms Checklist (Bartone et al., 1989), which includes 20 items measuring the extent to which participants experienced various physical and psychological symptoms over the past few weeks. On a Likert scale ranging from *0 = none* to *3 = very often,* respondents rated how often they experienced symptoms such as *"headaches," "upset stomach,"* and *"difficulty concentrating."* In the current study the internal consistency for the Symptoms Checklist was $\alpha = .88$.

*Perceived Stress.* Perceived stress refers to the degree to which situations in one's life during the past month were perceived as stressful, as measured by the four-item version of the Perceived Stress Scale (PSS; Cohen, Kamarck, & Mermelstein, 1983). This shortened version of the PSS has been shown to have adequate reliability, and to be a good predictor of stress in that it highly correlates with symptomatological measures and life event scores (Cohen et al., 1983). On a Likert scale ranging from *0 = never* to *4 = very often,* respondents answered questions about how frequently they felt a certain way in the past month. Examples of the items include *"How often have you felt that you were unable to control the important things in your life?"* and *"How often have you felt difficulties were piling up so high that you could not overcome them?"* The internal consistency of the PSS in the current study was $\alpha = .81$.

*Work Measures*

Supervisor Support. Supervisor support is defined as the amount of instrumental and emotional support provided by one's supervisor (Karasek & Theorell, 1990). Supervisor support was assessed using the four-item Supervisor Support Scale developed by Karasek and Theorell (1990). Respondents were asked to indicate the extent to which they agreed with items such as "*My supervisor pays attention to what I am saying," and* "*My supervisor is helpful in getting the job done*" using a Likert scale ranging from *1 = strongly disagree to 4 = strongly agree.* The internal consistency of the Supervisor Support Scale was found to be $\alpha = .89$.

*Coworker Support.* The five-item Coworker Support Scale (Karasek and Theorell, 1990) was used to identify the amount of instrumental and emotional support provided by coworkers at work. Respondents were asked to indicate how much they agreed with statements such as *"People I work with take a personal interest in me,"* and *"People I work with are helpful in getting the job done,"* using a Likert scale ranging from *1 = strongly disagree* to *4 = strongly agree.* The internal consistency for the Coworker Support Scale in this study was $\alpha = .86$.

*Job Satisfaction.* Job satisfaction is defined as a pleasurable or positive emotional state resulting from the appraisal of one's job experiences as fulfilling important job values (Henne & Locke, 1985). This construct was measured using 15 items from the Job Satisfaction Scale (JSS; Warr, Cook, & Wall, 1979) of the Perceived Intrinsic Job Characteristics Scale. These 15 items asked respondents to indicate how satisfied they were with certain aspects of their present job, such as "*The physical work conditions,"* and *"The amount of variety in their job," using a Likert scale ranging from 1 = extremely dissatisfied to 7 = extremely satisfied.* An internal consistency of $\alpha = .92$ was observed for job satisfaction in this study.

*Work Stress.* Work stress is defined as employees' overall perceptions of stress at work during the previous month with respect to irritating hassles, stressful events, and ongoing problems. Work stress was measured using the seven-item Perceived Work Stress Scale (PWSS; Mackie, Holahan, & Gottlieb, 2001), which adapted items from the aforementioned PSS to apply to the work setting. Respondents were asked to indicate the extent to which they *"Had to deal with stressful events at work,"* and *"Felt nervous or 'stressed out' at work"* over the past month using a Likert scale ranging from *1 = never* to *5 = very often*. The internal consistency for the PWSS in the current study was $\alpha = .89$.

**Data Analysis**

For the final Self-Leadership Scale, items with corrected item-to-total correlations of less than .30 were deleted. For the brief version of the Self-Leadership Scale, the 20 items with the highest item-to-total correlations were selected. The internal consistencies of the final SLS and brief SLS were then examined. Means and standard deviations for each of the variables were calculated. Pearson product moment correlations were calculated to examine the relationship between: 1) both SLS scales (final and brief) at time one with both SLS scales at time two to determine the test-retest reliability of the two scales; 2) both SLS scales with hardiness, dispositional optimism, approach coping style, and trait positive affectivity to determine the convergent construct validity of the scales; 3) both SLS scales with dispositional pessimism, avoidance coping style, and trait negative affectivity to determine the divergent construct validity of the scales; and 4) both SLS scales with measures of well-being (i.e., general health perceptions, life satisfaction, symptoms of illness, perceived stress) and work measures (supervisor and coworker support, job satisfaction, work stress) to explore other variables to which Self-leadership may be related.

The rationale for using dispositional measures to establish the construct validity of the Self-Leadership Scale is based on the premise that Self-leadership is a disposition. Self-leadership is a way of being that is relatively stable across time and situations and can be used to characterize differences in individuals. These individual differences are based on the degree of constraint and/or nurturance in the environment in which the internal family system develops.

## RESULTS

The means, standard deviations, and range of possible scores for all variables are reported in Table 1. The final and brief SLS were shown to possess adequate internal consistency, test-retest reliability, and construct validity.

**TABLE 1. Range of possible scores, means, and standard deviations for all variables.**

| | Possible Range | Mean | SD |
|---|---|---|---|
| Self-Leadership | 50-250 | 187.3 | 23.5 |
| Brief Self-Leadership | 20-100 | 77.5 | 11.6 |
| Hardiness | 0-90 | 61.3 | 7.4 |
| Dispositional Optimism | 0-12 | 8.7 | 2.0 |
| Dispositional Pessimism | 0-12 | 3.5 | 2.5 |
| Approach Coping Style | 8-32 | 25.2 | 3.5 |
| Avoidance Coping Style | 8-32 | 15.2 | 3.4 |
| Trait Positive Affectivity | 10-50 | 36.1 | 7.1 |
| Trait Negative Affectivity | 10-50 | 17.7 | 6.4 |
| General Health Perceptions | 5-25 | 18.8 | 4.0 |
| Life Satisfaction | 5-35 | 23.7 | 7.0 |
| Symptoms of Illness | 0-60 | 10.8 | 8.1 |
| Perceived Stress | 0-16 | 5.2 | 3.0 |
| Supervisor Support | 4-16 | 12.5 | 2.7 |
| Coworker Support | 5-20 | 15.6 | 2.7 |
| Job Satisfaction | 15-105 | 74.9 | 15.0 |
| Work Stress | 7-35 | 20.4 | 5.7 |

### Reliability

For the determination of the final SLS, three items out of the 53 items that were originally generated had corrected item-to-total correlations below .30 and were deleted. These included: *"I have a sense for when things aren't right," "I can see the pain behind someone's anger,"* and *"I'm curious about why people do what they do."* This reduced the number of items in the final SLS to 50. For the brief SLS, the 20 items with the highest item-to-total correlations out of the 53 items that were originally generated were selected. The range of item-to-total correlations for these top 20 items was .54 to .70. The internal consistency (Cronbach's alpha) was $\alpha$= .95 for the final 50-item SLS and $\alpha$ = .93 for the 20-item brief SLS. Table 2 shows the 50 items that comprised the final version of the SLS, and also indicates the 20 items that comprised the brief version of the SLS. The test-retest reliability was $r$ = .66, $p$< .001 for the 50-item SLS and $r$ = .65, $p$< .001 for the brief SLS.

**TABLE 2. Final and brief Self-Leadership Scale items**

1. I feel a sense of inner peace.*
2. I am clear about what I want from life.*
3. I have a hard time accepting all aspects of myself.(R)
4. I tend to be judgmental.(R)
5. I feel an inner sense of confidence.*
6. I embrace life's challenges.*
7. It's difficult for me to come up with solutions to problems.(R)
8. I feel disconnected from myself.* (R)
9. I experience feeling calm in my body.*
10. I am defensive regarding my point of view.(R)
11. I treat myself with kindness.*
12. I am open to new ideas and ways of looking at things.
13. I have a hard time trusting my own instincts.* (R)
14. I move forward in spite of my fear.
15. I view myself as creative.
16. I feel alone in the world.* (R)
17. I can maintain an inner steadiness even under pressure.*
18. I am able to identify conflicts within me.
19. I feel compassion for myself.
20. I delight in exploring and discovering new things.*
21. I worry a lot.(R)
22. I fail to take action on my own behalf.(R)
23. I have playtime in my life.
24. I feel a close bond with at least one other person.
25. I feel agitated.* (R)
26. I am able to distinguish between different points of view.
27. I don't like my anger, sadness, fears, etc.(R)
28. I like to explore my inner world.
29. I trust that things will work out.
30. I assert myself.
31. I am full of new ideas.
32. I feel there is a real purpose for my life.*
33. I often find I hold my breath.(R)
34. I feel compassion for others.
35. I'm interested in why people are the way they are.
36. I can handle present situations.*
37. I take action to challenge injustice.
38. I can think creatively about my problems.*
39. I feel loved.*
40. I feel at ease.*
41. I distort what people say or do.(R)
42. I am open-minded.
43. I have faith in myself.*
44. I can apologize when I've hurt someone.
45. I get stuck in the same problems over and over.(R)
46. I feel I belong in this world.*
47. I can see things as they are.
48. I worry about past events or upcoming events.(R)
49. I meet life's challenges with courage.*
50. I have trouble seeing when I'm being exploited.(R)

* Indicates items that are part of the brief SLS.
(R) Indicates items that are reversed scored.

**Validity**

The construct validity of the SLS and brief SLS were supported (see Table 3). Specifically, the convergent construct validity of the SLS and brief SLS were supported by the significant positive relationships to hardiness, dispositional optimism, approach coping style, and trait positive affectivity. The divergent construct validity of the scales was supported by the significant inverse relationships to dispositional pessimism, avoidance coping style, and trait negative affectivity.

**TABLE 3. Convergent and divergent validity of the SLS and brief SLS (correlations with dispositional measures).**

| | Self-Leadership Scale | Brief Self-Leadership Scale |
|---|---|---|
| *Convergent validity* | | |
| Hardiness. | 68* | .65* |
| Dispositional Optimism | .56* | .59* |
| Approach Coping Style | .48* | .46* |
| Trait Positive Affectivity | .75* | .77* |
| *Divergent validity* | | |
| Dispositional Pessimism | -.54* | -.54* |
| Avoidance Coping Style | -.26* | -.24* |
| Trait Negative Affectivity | -.60* | -.61* |

* $p<.01$, two-tailed

## Correlates of Self-Leadership

The hypothesized relationships of the SLS and brief SLS with measures of well-being and work were supported (see Table 4). The SLS and brief SLS were found to have significant positive relationships with general health perceptions, life satisfaction, supervisor support, coworker support, and job satisfaction. Significant negative relationships were found between the SLS and brief SLS and symptoms of illness, perceived stress, and work stress.

**TABLE 4. Correlations between the SLS and brief SLS and well-being and work measures.**

| | Self-Leadership Scale | Brief Self-Leadership Scale |
|---|---|---|
| *Well-Being Measures* | | |
| General Health Perceptions | .39* | .40* |
| Life Satisfaction | .59* | .64* |
| Symptoms of Illness | -.53* | -.54* |
| Perceived Stress | -.67* | -.68* |
| *Work Measures* | | |
| Supervisor Support | .18* | .18* |
| Coworker Support | .17* | .17* |
| Job Satisfaction | .28* | .30* |
| Work Stress | -.30* | -.30* |

* $p<.01$, two-tailed

## DISCUSSION

The purpose of this research was to develop a psychometrically sound and theoretically based tool to be used in clinical practice and research. A 50-item measure of Self-leadership was developed within the framework of the IFS model (Goulding & Schwartz, 1995; Schwartz, 1995, 2001). In addition, a brief 20-item version of this measure was derived for ease of administration in clinical practice. Both the 50-item and brief 20-item scales were found to have adequate internal consistency and construct validity, and marginal test-retest reliability. Both scales were related to measures of well-being representative of one's internal environment and measures of work indicative of one's external environment.

The Self-Leadership Scale (SLS) contains 50 items with item-to-total correlations above .30. The brief SLS is comprised of the 20 items with the highest item-to-total correlations. Results revealed the SLS ($\alpha$=.95) and brief SLS ($\alpha$=.93) to be internally consistent. Test-retest reliability for the SLS ($r$=.66) and brief SLS ($r$=.65) was marginal. The standard for adequate test-retest reliability varies, but many agree a level of .80 is most desirable (Patten, 2002). The marginal test-retest reliability of the two scales indicates that those who took the survey both times responded to some of the same items differently. Some subjects did not vary at all in their scores (possible range 50 to 250) from one administration to the next (i.e., a minimum difference in the two scores of 0), while others varied a great deal (i.e., a maximum difference in the two scores of 56). The average difference in scores was 13.9, with 25% of those having a difference of 4 or less, 50% having a difference of 10.5 or less, 75% having a difference in scores of 19.8 or less, and 100% having a difference of 56 or less.

Test-retest reliability is appropriate for measures that are expected to remain relatively stable over time. One explanation for the marginal test-retest reliability is that the construct of Self-leadership may be experienced more as a state that varies over time and situations rather than a trait that remains relatively stable across time and situations. Earlier we proposed that Self-leadership is a trait or disposition that can be used to characterize differences in individuals. However, it may be that Self-leadership is a trait for individuals who make a daily conscious effort to lead with the Self, and more of a state for individuals who do not have much Self-awareness and experience only momentary states of calmness, compassion, curiosity, etc. Therefore, it might be helpful to view all the possible scores on the SLS as representing a continuum with the strong and stable presence of the Self at one end, and a weak and possibly more variable presence of the Self at the other end. From this perspective, an increase in scores on the SLS corresponds to more embodiment of the qualities of Self-leadership as well as a more stable Self. According to Schwartz (personal communication, September 19, 2002),

Self-leadership is a *trait* in the sense that it is ever-present in us, yet also a *state* in that we often don't have access to the Self because parts obscure it. Thus, we would not necessarily expect high test-retest reliability because people are more or less triggered at different times. Thus, less reliance should be placed on the outcome of test-retest reliability in favor of the internal consistency measure of reliability in instances such as this where a measure appears to reflect a variable state to some degree.

The SLS and brief SLS were found to have both convergent and divergent construct validity. In support of convergent construct validity, the two scales were shown to have significant positive relationships to the disposition of hardiness, optimism, approach coping style, and positive affectivity. These correlations replicate and extend the findings of Dolbier et al. (2001) who found Self-leadership to be positively related to the dispositions of hardiness, optimism, and approach coping style. The divergent construct validity of the two Self-leadership scales was established by the significant inverse relationships found with the dispositions of pessimism, avoidance coping style, and negative affectivity. These correlations also replicate and extend our prior research that found Self-leadership to be negatively related to avoidance coping style (Dolbier et al., 2001). The relatively high and strongly significant correlations of the Self-leadership scales with this variety of dispositions provide further support for our initial assumption that the concept of Self-leadership is also a disposition.

One type of validity that was not possible to establish with the SLS was factorial validity. Items for the SLS were generated based on the eight qualities of Self-leadership, and at least six items for each quality were created. The SLS was developed with the intention of factoring it into the eight characteristics of Self-leadership, which could potentially result in a subscale representing each of the characteristics. However, due to high intercorrelations between and conceptual overlap among the items, an interpretable and clear factor analysis did not result. Items representing the quality of "calmness" appeared to be pervasive throughout the factor analysis. This finding, although initially discouraging, provides evidence for the strong interrelatedness of the eight qualities.

Given the lack of empirical research on the concept of Self-leadership, one of the objectives of this research was to explore some of its potential correlates. One of the basic premises of the IFS model is that as individuals lead with the Self, their internal environments are enhanced. Therefore, we tested whether Self-leadership was related to measures of well-being that are indicative of one's internal environment. This IFS premise was supported in that both Self-leadership scales were significantly related to better perceptions of health, greater life satisfaction, fewer symptoms of illness, and less perceived stress. These results are consistent with and extend prior findings showing Self-leadership to be related to greater perceived wellness, fewer symptoms of illness, and less perceived stress (Dolbier et al., 2001). Leading with the Self enables the internal family system to maintain harmony and homeostasis and innately strive toward well-being. Also, Self-leadership may serve as a protective resource in stressful situations. These functions of the Self are potential explanations for the relationship of Self-leadership to these measures of well-being.

Aiding further in our exploratory analyses of the IFS model is the basic premise that the enhanced internal environments of Self-led individuals result in more effective interactions with their external environments. We examined whether Self-leadership was related to work measures indicative of one's external environment. Support for this IFS premise was demonstrated by both Self-leadership scales being significantly related to greater supervisor and coworker support, less work stress, and greater job satisfaction. These correlations are consistent with and extend our prior work in which we found Self-leadership to be related to greater work satisfaction, more effective work relationships, and less work stress (Dolbier et al., 2001). Similar to this prior research is the observation in the current research that the correlations for measures of work representing one's external environment, while significant, were not as strong as those relating Self-leadership to measures of well-being indicative of one's internal environment.

The results of this research should be considered in light of several methodological limitations. First, as with all survey data, self-report has inherent limitations. Psychological surveys measure a representation of reality that is a function of the respondent's point of reference as well as the extent to which the act of measuring influences the construct being measured. This raises several important issues in the context of Self-leadership. First is the subjectivity involved in individuals self-reporting on their own Self-leadership. It is each individual's perceptions of the presence of the qualities of Self-leadership that are assessed, not an objective measure indicative of some absolute truth. It can be argued that it is what the individual perceives to be his/her reality, rather than what a researcher tries to objectively measure as his/her reality that is important. However, the SLS does have some elements of objectivity in that the abstract construct of Self-leadership is made measurable via the responses to scale items, and assessed systematically and consistently across individuals and situations. Self-report is thus perhaps the most appropriate way to assess the construct of Self-leadership – by combining and balancing subjectivity and objectivity.

A second issue raised by the use of self-report is whether people are able to report when they are leading with the Self. An individual's ability to recognize and report when he/she is leading with the Self increases with awareness and practice. People who are not aware of the concept of the Self and who are not aware of the presence of their own Selves within them will likely be unable to recognize and report on Self-leadership. For example, if individuals have a manager part in the lead they are likely to respond to the SLS items the way they think they "should" or are "supposed to" respond. Therefore, the extent to which people are aware of and practice Self-leadership influences their responses to the SLS.

A third issue in subjective reporting is whether the act of measuring Self-leadership and bringing it into awareness somehow influences the experience of Self-leadership. Some people may experience a response to answering the scale items that changes the experience of leading with the Self. For example, bringing the qualities of Self-leadership into awareness might increase the presence of the Self, or a particular item may trigger a part to respond and take the lead, thus obscuring Self-leadership.

Another methodological limitation of this research is the use of a convenient sample. The convenient sample of government employees limits the generalizability of the findings to other populations. Further research is necessary using diverse populations to strengthen the external validity of the study findings. For example, use with clinical populations that are often targets of IFS therapy would further validate the use of the SLS in these populations.

Finally, the design of the study is cross-sectional, therefore causation cannot be determined and the possibility that some third variable may be accounting for some of the relationships found in this study cannot be dismissed. It is important to emphasize that Self-leadership is correlated or systematically and linearly related to the dispositional, well-being, and work variables, but that it is not a cause of those variables. The use of a longitudinal design in future research would enable examination of the cause-effect relationship between Self-leadership and variables of interest.

The theoretically based and psychometrically sound SLS can be used to bridge the researcher-practitioner gap and advance our understanding of the IFS model through future research in a number of ways. For example, the SLS can be used to measure the effectiveness of IFS therapy in clinical practice to bolster its visibility and credibility. We may gain a deeper understanding of the process of IFS therapy by administering the SLS at various points throughout therapy. The SLS also can be used by practitioners to monitor client progress in therapy, or by clients to monitor themselves after therapy.

For therapists who are interested in assessing Self-leadership as a momentary state in the therapeutic process, or for researchers who are interested in observing the effects of manipulating a state of Self-leadership, we suggest altering the instructions and Likert scale responses to make such assessments possible. In these instances, the following instructions should be substituted: *Everyone has many different thoughts and feelings. Read the following statements carefully and circle the response that best describes the extent to which you are experiencing each statement right now.* The Likert scale response options should also be changed in the following way to reflect state assessment: *1 = not at all, 2 = a little, 3 = a moderate amount, 4 = very much so,* and *5 = extremely.*

As stated earlier, there is a need for an enhanced relationship between research and practice. Because of its theoretical base, psychometric soundness, and practical applicability, the SLS provides a vehicle for bridging the gap between these two sometimes-disparate areas. The SLS provides a tool that clinicians and practitioners can use in their practice to assess the effectiveness of IFS therapy, as well as the process of IFS therapy. The role of the practitioner in moving research forward is crucial, as feedback from individuals who use the tool in practice will inform modifications to the tool that enhance its relevance and applicability. The role of the researcher in moving practice forward is also essential. For instance, the SLS can be helpful to process researchers in gaining a deeper understanding of the IFS therapeutic process, as well as to outcome researchers in testing the effectiveness of IFS therapy. It also provides a first step to researchers interested in exploring such questions as what predicts Self-leadership, what causes increased Self-leadership, and what are the positive and negative consequences of Self-leadership. Having such a tool that quantifies the topic of study also can help in the grant awarding process as the emphasis is almost always given to methodologies that contain quantification and tests.

One specific and necessary area of future research is to develop a theoretically based and psychometrically sound tool to assess the various parts or subpersonalities of the internal family system. While the current research provides a measurement tool for assessing Self-leadership, a large part of the IFS model is still missing from the assessment arena – the parts within the internal family system. We cannot get a sense of the system and its inner workings by only measuring one aspect of it – the Self - even though it is a leading component. We may never be able to get a complete, synergistic picture by reducing the system down

to its components, but this is one available method for advancing our understanding of psychological phenomena. Using measures of the Self and the parts in research and practice will enable us to obtain further knowledge that contributes to our understanding of the intrapsychic processes portrayed by the IFS model.

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