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Development of an Instrument Measuring Existential Authenticity

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Abstract

The purpose of this study was to develop an instrument to measure existential authenticity in adults. Existential authenticity was defined as awareness of the existential givens in the human experience as defined by Irvin Yalom. This construct is theorized as the goal of existential psychotherapy, which is a meaning-centered psychotherapy aligned with the purpose of providing clients with the tools to cope with life’s negativities and live a meaningful life. Many diagnostic conditions, including depression, psychological trauma, and anxiety, are conceptualized as amenable to the benefits of existential psychotherapy and the journey towards existential authenticity. A review of the literature revealed that an instrument for measuring existential authenticity did not exist. An initial pool of test items was developed using Yalom’s definitions. Content validity was determined by expert input and the resulting 49-item survey was administered online to 222 test subjects. Recruitment was conducted via post card mailed to a random sample of the Greater Cincinnati Geographic Region. Participants were predominantly female (77.5%), Caucasian (81.5%), married (56.7%), well educated (23.9% with a graduate or professional degree), and with a mean age of 45.3. Factor analysis revealed one factor consistent with the theoretical underpinnings of the work, captured in a 12-item index. Internal consistency reliability in the current sample was good ($\alpha = .871$). Evaluation of the psychometric properties demonstrated a promising index although further development is required. The data are consistent with an instrument in the beginning stages of development.

Keywords: existential, authenticity, scale development, awareness, psychological theory
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Chapter One

Introduction

There is a growing crisis in mental health care in America. Mental illness and substance abuse disorders cause more disability than any other chronic illness and are prevalent among one in four Americans (Hanrahan, Delaney & Stuart, 2012). Fragmentation and inefficiency in the health care delivery system, along with recent federal legislation mandating changes in that system, provide the opportunity for implementing meaningful changes in mental health care (Hanrahan, Delaney & Stuart, 2012). Psychiatric/Mental Health Nurse Practitioners, with their emphasis on holistic health care as practiced by nurses, are in a unique position to provide more efficient and effective mental health care services and are on the cutting edge of that movement (Hanrahan, Delaney & Stuart, 2012).

Concurrent with the recognition of the burgeoning rates of mental illness and problems in the health care delivery system is a call for more research into mental health treatment techniques. The National Institute of Mental Health (NIMH), in its 2008 strategic plan, outlines four strategies for addressing the problems in mental health care delivery in America. Objective number three of this plan identifies the need to develop new and better interventions for the prevention and treatment of mental illness, including a specific call for innovative approaches and a need to broaden the concept of intervention research (NIMH, 2008). This presents the opportunity to explore the latest research in mental health interventions and add to that research with the goal of improving outcomes for mental health clients.

One interesting and understudied intervention is existential psychotherapy (EP). EP is a form of treatment for mental illness that offers a unique and broadly applicable way to explore individuals’ awareness of themselves and their ability to look beyond their immediate problems.
(Sharf, 2012), and, as such, is a reasonable treatment to explore in the quest for innovative approaches to the growing mental illness concern in America. Wong (2009) describes EP as meaning-centered psychotherapy, aligned with the purpose of providing clients with the tools to cope with negativities and live a meaningful life despite suffering and obstacles. He also notes that, while EP offers a holistic and honest way of studying the totality of human existence, it also brings with it a bias against scientific research (Wong, 2009; Yalom, 1980). It is perhaps for this reason that there is a paucity of research into the effectiveness of existential psychotherapeutic techniques. As stated by la Cour and Hvidt (2010) quantitative research in this area is virtually absent.

EP has as its goal the genuine life, which is a possibility open to all individuals, and which is designated with the term authenticity (Jacobsen, 2007). An authentic life is one that is grounded and real and involves an awareness of the basic conditions, or existential givens, of human life; it is a life in which the person chooses to look the existential givens squarely in the eye and live with them constructively rather than creating a fantasy life in which those conditions do not exist (Jacobsen, 2007). EP theory holds that failure to address the existential givens results in an inauthentic, and therefore, unsatisfying existence (Jacobsen, 2007). EP offers the opportunity for all people to live a more satisfying life by virtue of authenticity. In order to assess this aspect of an individual’s existence, however, it is necessary to be able to measure existential authenticity (EA). A review of the literature revealed that a tool for measuring EA did not exist.

The purpose of this study was to develop an instrument to measure EA in adults. The instrument was developed based on the instrument development process described by Robert F. DeVellis (2012) and utilized the four existential givens (death, isolation, freedom and
meaninglessness) as defined by Irvin Yalom (1980), whose ideas served as the primary theoretical foundation for this work.

**Aim:** To develop an operational definition of EA in the form of an index using Yalom’s four existential givens as the latent variables for the four subscales comprising the index.

The steps in this process included:
- Generating an item pool for each concept composed of statements regarding awareness of Yalom’s four existential givens and their influence on daily life.
- Seeking expert input from existential therapists to validate the pool items for each subscale.
- Administering the survey to a sample group.
- Performing statistical analysis of the data collected, as described in chapter 3 and including correlations and factor analysis (FA).
- Adjusting the survey based on the statistical analysis.

**Background and Significance**

EP has as its roots the philosophy of European existentialism, beginning with the first existential philosopher, Soren Kierkegaard (Sharf, 2012). According to Kierkegaard (1980), individuals must deal with the angst and torment of their temporary existence; dealing with this uncomfortable state is a task of becoming human. Other existential philosophers include Nietzsche, Heidegger and Sartre; existential writers include Dostoyevsky, Camus and Kafka (Sharf, 2012). All of these individuals contributed to the development of existentialism as a philosophy and included an emphasis on the subjective nature of human experience, on the concept of awareness of that existence, and on the attempt to encompass all of the problems related to the existence of humanity (Sharf, 2012).
Also critical to the development of EP was Freudian psychoanalysis. Early proponents of EP include Binswager, Boss, and Frankl, all of who were trained as psychoanalysts (Sharf, 2012). Sharf (2012) describes these early existential therapists as being influenced by Freud’s ideas about drives and motives while also influenced by Heidegger’s ideas about existentialism and the nature of human existence. More recent contributors to the literature include Rollo May and Irvin Yalom, both of whom have been prolific writers about EP. Jacobsen (2007) equates Yalom’s view of the existential givens with Freud’s view of the sex drive as a drive that permeates almost everything and to which most people close their eyes. Yalom (1980) describes EP as being a dynamic psychotherapy, drawing on what he calls Freud’s major contribution to psychotherapy – the model that posits conflicting forces within individuals, with thoughts, emotions and behaviors (both adaptive and maladaptive) being the result of those forces, and with varying levels of awareness of the forces themselves. These forces are, in the opinion of existential psychotherapists, the existential givens of human existence. Yalom (2002) characterizes these as the everyday concerns of life and our situation in the world, or the deep structure of our existence. He identifies four existential givens and sees them as death, freedom, isolation, and meaninglessness (Yalom, 1980). In depth exploration of these four concepts occurred as part of this study.

An important aspect of EP in terms of the individual’s relationship with the existential givens of human existence lies in their awareness of the existential givens. Yalom (1980) attacks the notion that the existential givens are too painful to be brought to the forefront of thought for the average person, as is often perceived by patients and therapists alike, when he states that, “wisdom does not lead to madness nor denial to sanity: the confrontation with the givens of existence is painful but ultimately healing” (p. 14). Awareness then is the process of facing the
existential givens of human existence. Cannon (2009) discusses existential awareness when she states that much of human misery arises from denial or avoidance of the true nature of existence; she goes on to describe awareness as occurring in the present, with attentiveness to the present moment. Claessens (2009) expands on this by comparing existential awareness to Buddhist mindfulness, which she sees as being quite similar. While it is possible to use Buddhist mindfulness techniques to enhance existential awareness, Nanda (2009) points out that Buddhist teachings indicate that anxiety can be relieved by letting go of feelings through mindfulness, while EP sees anxiety as a key contributor to awareness and calls on humans to re-examine their life and address its meaning and purpose. Another key distinguishing factor between mindfulness and existential awareness is that EP rests on discourse and spoken language while mindfulness is an internal process of experiencing the present moment (Nanda, 2009). Existential awareness involves consciousness of the existential givens of human existence and clarification of the meaning of one’s worldview (Nanda, 2009). Madison (2010) points out that it is the person’s own perspective that enlightens awareness, not just the experience of the present moment. Existential awareness, as defined for this study, is the individual’s understanding and consciousness of the existential givens of death, freedom, isolation, and meaninglessness as exhibited by incorporation of the existential givens into their worldview and daily life.

As with awareness, EA needed to be carefully defined in the context of EP and this study. Multiple definitions of authenticity exist, even within existentialism itself. Jakopovich (2010) describes authenticity as a political virtue, based on Sartre’s writing, while Guignon (2008) refers to existential authenticity as an ideal way of life characterized by integrity, intensity, lucidity, coherence and honesty. Steiner and Reisinger (2005) view authenticity as being true to one’s self or one’s essential nature, while Grene (1952) defines a genuine existence as a free one.
Clearly the philosophers do not agree on a definition of the concept (Steiner & Reisinger, 2006). For purposes of this study, the theoretical definition of EA drew from Jacobsen’s definition of living life by looking at the basic life conditions that exist for all people and dealing with them constructively, rather than creating a world in the mind in which those conditions do not exist (2007). Stolorow (2011) takes this concept one step further in integrating EA with awareness when he states that, “the extent to which we can move toward more authentic existing depends significantly on whether the contexts of our daily living provide a relational home in which the emotional pain entailed in such a move can be held, borne, and integrated” (p 287). This view of EA, as a concept demonstrated by an individual’s awareness of the existential givens of life in terms of their daily life choices, was used as the foundation for the development of this tool.

Multiple mental health conditions can be directly related to existential issues. Anxiety is a well-known aspect of existential angst and is often seen as a normal and desirable condition upon recognition of the existential givens in life (Yalom, 1980). Claessens (2009) describes the transcendence of anxiety as only being possible through acceptance – in other words, authenticity. Badiee (2008) conceptualizes depression as a state of mind in which the individual experiences existential meaninglessness, producing a sense of existential obscurity. Post Traumatic Stress Disorder (PTSD) has been conceptualized as a sudden confrontation with death, which offers the opportunity to discover a paradoxical respect for life (Corbett & Milton, 2011). As is clear, many diagnostic conditions, including depression, psychological trauma and anxiety, are conceptualized as amenable to the benefits of EP and the journey towards EA.

According to EP, achievement of satisfaction lies in an individual’s ability to be aware of and constructively cope with the existential givens in human life. It can be inferred from this discussion that adult human beings have a wide variety of experiences and inherent traits that
interact with each other and that impact on their ability to find satisfaction and happiness in life (see Appendix A on page 66). As pointed out by Madison (2010), an individual’s perspective is formed by their experiences and inherent traits, which then determines their awareness. It is theorized that these experiential and inherent variables, in either adaptive or maladaptive ways, directly impact on an individual’s capacity for EA. It is further theorized that awareness of the existential givens is at the core of EA and can be conceptualized as a measure of EA itself. Exploration of this theory, including exploration of the ways in which the experiential variables can be altered to impact personal perspective, requires an operational definition of EA, which was the purpose of this study.
Chapter Two

Concept Analysis

"We have a hunger for something like authenticity,
but are easily satisfied by an ersatz facsimile."
- George Orwell, c. 1949

Authenticity is a concept that is widely used in EP to refer to a preferred or ideal type of life experience. It is also a term that appears in multiple other contexts, including nursing (Maris, 2010), the culinary arts (Mannur, 2007), religion (Eliason, Samide, Williams, and Lepore, 2010; Stedman, 1984), journalism (Holt, 2012), tourism (Kim and Jamal, 2006; Steiner and Reisinger, 2006), and philosophy (Guignon, 2008; Guignon, 2012; Grene, 1952; Heidegger, 1962; Jakopovich, 2010). Authenticity is associated with the concepts of truth, honesty, realism, faithfulness, and accuracy. It is also a concept whose meaning has evolved over time, from the ancient religious conceptualization to a more current secular one. Complicating the picture is the fact that it is often used in two distinct ways – authenticity as representing that which is real and authenticity as being true to oneself (Steiner and Reisinger, 2006).

Use of the term authenticity is found in the literature with increasing frequency in recent decades. A search for journal articles containing the word authenticity was conducted using the Summon search engine, starting on August first of each year. This search revealed an average of 725 articles per year in the decade from to 1993, increasing to an average of 9578 articles per year between 2003 and 2013. The increase in use is especially apparent in the last five years, with an average of 10,578 journal articles per year between 2008 and 2013. Only 10,643 journal articles were found that mentioned authenticity prior to 1983, a number only
slightly higher than the average number of articles mentioning authenticity published per year in
the last five years.

Given the diversity of contexts within which the concept is used, the varying uses of the
concept within those contexts, and the frequency with which it is being discussed, a clear
understanding of the meaning of authenticity may be obscured. The purpose of this analysis is to
clarify the meaning of authenticity within the context of EP. In addition, this analysis may result
in a clearer understanding of authenticity as it relates to life satisfaction and life experience.

Methods. Walker and Avant (2011) describe a process of concept analysis for use in
type development in nursing. Theirs is perhaps the most frequently used method by nurses. It
is not without significant criticism, however, from both epistemological as well as ontological
perspectives. Paley (1996) states that concepts are not the building blocks of theory, as proposed
by Walker and Avant, but rather exist in niches created by theory, while Risjord (2009a) states
that concepts can only be developed as part of theories, due to changes in the meaning of
concepts as the theoretical context changes. Risjord (2009b) goes on to clarify ‘scientific’ versus
‘ordinary’ concepts, a distinction not made by Walker and Avant. It is this emphasis on the
scientific, theoretical context that seems particularly applicable to the concept of authenticity.

Another area of criticism of the method proposed by Walker and Avant (2011) is the
apparent linear nature of the process. Rodgers (1989) describes a cyclical or evolutionary process
of concept development, acknowledging the fact that concepts are continually subject to change.
Parse (1997) likewise criticizes the linear process, which she describes as reductionistic, while
proposing a process called concept inventing, which is a multidimensional process of analyzing
and synthesizing in order to bring to life a new concept. Both of these approaches emphasize the
need to re-evaluate the understanding of the concept as the theoretical understanding emerges.
All of these criticisms are congruent with what Meleis (2012) views as the two primary criticisms of the concept analysis process: lack of contextualization and viewing the concepts as static.

Chinn and Kramer (2011) appear to address the static issue when they describe the process of concept analysis for theory development as a means of producing a tentative definition of a concept and a tentative analysis of the usefulness of the concept in a particular situation and suggest the inclusion of multiple sources of information, including art, literature and imaginative sources. However, this does not address the criticism made by Paley (1996) that the process can become a “vacuous exercise in semantics” in which the theory forming process inexplicably follows the concept analysis rather than accompanying it. This is an important concern when analyzing a concept such as authenticity that has been described in the literature as part of a theory for many years.

Other considerations must also be explored. Thorne (2005) makes a strong argument for the contextualization of concept analysis when she points out the need for the process to occur for the purpose of enhancing knowledge for practice. She further describes conceptual knowledge as the scaffolding that is used to make sense of complex clinical problems (Thorne, 2005). This seems particularly important when analyzing a concept that is deeply entrenched in clinical practice. Hupcey and Penrod (2005) describe the goal of the concept analysis as to establish the state of the science, which they view as the initial step in the process of concept advancement. This goal requires the researcher to focus on the scientific literature and not on constructed cases, hypothetical exemplars, or imaginative exploration. It is this view of concept analysis, steeped in the purpose of clinical usefulness and based on an in depth exploration of the state of the science rather than cases and exemplars, that formed the basis for this work.
This analysis explored the concept of authenticity from an evolutionary perspective, with an emphasis on distinguishing between the scientific and the common usages and with the goal of defining the concept in terms of current existential psychotherapy literature. The work of Chinn and Kramer (2011), Rodgers (1989), and Risjord (2009a, 2009b) were predominant in this process. The context of this exploration lies within the field of scientific study, rather than common usage, with additional emphasis on the usefulness of the concept analysis for the purpose of making sense of complex clinical problems. Hopefully, this process will illuminate the concept of existential authenticity for the ultimate purpose of advancing the concept in future work.

**Analysis.**

**Selecting a Concept.** Chinn and Kramer (2011) describe the process of selecting a concept for analysis with emphasis on contextualization related to the purpose of the analysis. Authenticity was chosen due to the importance of the concept to the field of EP and in light of competing meanings apparent in the literature. Although Chinn and Kramer (2011) emphasize the importance of concept analysis as it relates to building a knowledge base in nursing, this analysis does not focus specifically on nursing’s use of the concept but rather on the EP use.

**Clarifying Purpose.** To provide a sense of direction for the analysis, it is important to be clear about its purpose (Chinn and Kramer, 2011). As was previously stated, the purpose of this analysis is to clarify the meaning of authenticity within the context of EP. An important part of this process is distinguishing between the uses of the concept in EP as opposed to existential philosophy, as well as historic and contemporary common usage of the term.

**Sources of Evidence.** While exploring the sources of evidence, it is important to generate the criteria for the concept, tentative at first and more refined over time (Chinn and Kramer,
This included distinguishing between common usage and scientific usage as the process proceeded, as well as distinguishing between differing theoretical uses.

**Dictionary/thesaurus definitions.** Webster’s dictionary (Whitehall, 1956) defined authenticity as: “the quality of being authentic, or of having established authority for truth and correctness; genuineness.” Similarly, the Oxford English Dictionary (2013) defined authenticity as, “being authoritative or duly authorized; being in accordance with fact, as being true in substance; as being what it professes in origin or authorship, as being genuine; genuineness; as being real, actual; reality.” These definitions represent the common usage of the concept of authenticity as being true or reality based, with significant emphasis on having authority and being genuine. As a starting point, these common usage definitions were contrasted with other uses of the concept. An important formulating criterion is proposed in the context of authenticity as a quality of being.

**Nursing literature.** Maris (2010) discussed authenticity in the context of nursing as an ideal form of leadership, with exemplary leaders being those who have the courage to be themselves and to live by their ideals and principles. She suggested the goal of nursing leadership as being authentic leaders who expect a high degree of sophistication on the part of their followers, who are viewed as independent, critical thinkers (Maris, 2010). She also pointed out that students are skilled at identifying inauthentic faculty and should be used as mirrors of authenticity (Maris, 2010). In this context, it would appear that authenticity refers to the process of being true to oneself while at the same time being honest, principled, and fair.

**Culinary arts literature.** In her discussion of the effect of relocation on individuals and their nostalgic desire to recreate some parts of the reality of their former life, Mannur (2007) used the concept of authenticity to explore the search for the foods and dishes remembered from
another culture. She discussed the “flavor of authenticity” and the “authentic versions” of foods remembered from years earlier, which are impossible to accurately recreate due to differences in food preparation, availability and flavors (Mannur, 2007). It is notable that, in this context, authenticity does not represent a factual representation of an unchanging object or event but rather the fluid and dynamic creation of a facsimile that evokes similar feelings and memories for the individual; that is, the authenticity derives from the expectations of the individual rather than a factual recreation of reality. This is a distinction that will be further discussed in other contexts.

Religion literature. Perhaps unique in perspective is the understanding of the concept of authenticity in which a person is authentic if they accurately reflect what God wants them to be. Stedman (1984) identified five aspects of the individual that are required to achieve authenticity, all of which he identifies as based on biblical teachings. These included unquenchable optimism, unvarying success, unforgettable impact, unimpeachable integrity, and undeniable reality. These are not necessarily reflections of the true self but rather the self that one wishes to be or feels they ought to be. Contrasting this is a view of religious existentialism in which the individual seeks authenticity by finding meaning and making choices based on their unique belief system (Eliason et al., 2010), a use of the concept much more closely related to reflecting the inner self. Eliason et al. (2010) went to great lengths to emphasize the compatibility of EP and spirituality, which they found as unique among counseling theories due to its philosophical framework. Keeping in mind that some adherents of specific religious interpretations of authenticity would argue that the self as God intended is the true self, it is nonetheless clear that an incompatibility of definitions exists. Critchley and Webster (2013) addressed this incompatibility when they, as proponents of a religious lifestyle, were quite critical of the modern quest for an authenticity
which they described as a “personal ethic of authenticity and a liturgy of inwardness” leading to what they described as passive nihilism, unattached to an external reality and in which everything becomes an expression of personal authenticity, devoid of meaning or higher purpose.

It is here that a significant distinction can be made between authenticity as an externally defined state and authenticity as an internally defined state. Although common usage emphasizes truth and reality-based experiences, it does not distinguish between internally or externally defined states. At this point a criterion for existential authenticity is proposed as an internally defined state, based on the individual’s perceptions and desires, rather than an externally imposed state, in keeping with the emphasis on the clinical application of this work.

**Journalism literature.** Holt (2012) described existential journalism as a rejection of the demands of conformity and compromise of personal convictions, equating ethical lives with authentic lives by encouraging journalists to follow their own inner conscience. He was critical of this concept, however, pointing out that authenticity has multiple weaknesses, of which three are primary. First is that the concept of authenticity is a secularization of a religious concept that separates the fundamental source of value (God) from the process of ethical decision-making (Holt, 2012). Secondly, he contended that authenticity is imbued with relativism and moral subjectivism making it, again, unsuitable for use in ethical decision-making (Holt, 2012). Finally, Holt (2012) proposed that authenticity, in this context, represents an unattainable condition, given its focus on personal achievement and negligence of responsibility to others. In other words, he identified authenticity as an amoral construct, useless for purposes of moral decision-making. This view of authenticity, as a selfish exercise with the unattainable goal of an exclusively personal existence, will be explored further but it should be noted that, for counseling purposes, an amoral perspective, in which external judgments are not formed, is
desirable. Rather than making moral judgments regarding the thoughts and feelings of clients, counselors seek to identify clinically helpful interactions, making this particular criticism of authenticity unimportant from a clinical usefulness perspective. In fact, from a clinical perspective, it seems clear that another criterion for authenticity is that it is a valueless state, free from socially imposed judgment, dependent instead on individual perceptions.

Tourism literature. Both Kim and Jamal (2007) and Steiner and Reisinger (2006) discussed existential authenticity in the context of tourism. Modern society is viewed by many as inauthentic and unsatisfying, leading to a quest for authenticity in touristic experiences, which the tourism industry attempts to provide through various attractions designed to mirror cultures and societies of interest to tourists (Kim and Jamal, 2007). The quest consists of a search for the truth that underlies modern life, for experiences in which the individual can step outside the normally expected activities and experiences, resulting in heightened emotional reactions and bodily feelings (Kim and Jamal, 2007). Again it is clear that these experiences are not usually factual recreations but are intended to tap into the expectations and desires of the tourist. Kim and Jamal (2007) went a bit further in describing object- and activity-related authenticity, which are forms of transient authenticity, experienced only in the context of the tourist activity.

Steiner and Reisinger (2006) viewed this transient form of authenticity as congruent with Heidegger’s, meaning that there is no authentic self and no authentic or inauthentic people, but rather authentic experiences. Although Steiner and Reisinger (2006) voiced confidence in the concept of EA as described by Heidegger and its application to the field of tourism, it is also clear that this experience-bound understanding would have limited clinical usefulness for counselors, beyond the immediate experiences while in a counseling session. For the purpose of EP, and in keeping with the goal of clinical usefulness, it seems obvious that a more sustained
state of authenticity would be desirable, rather than momentary experiences. Therefore, a fourth tentative criterion for authenticity is that it is a relatively continuous state, rather than a momentary one.

*Philosophy literature.* Any discussion of existentialism as a philosophy must begin with Martin Heidegger (1962), the philosopher who used the term authenticity to describe the capacity to be fully human. Although he was not the only existential philosopher, he was the one who wrote the most about the concept of authenticity. Heidegger viewed authenticity as an ideal way of life characterized by integrity, lucidity, coherence and honesty, which he identified as the truly human traits; he did not view authenticity as being true to one’s inner nature but rather to one’s humanness, which exists in all people (Guignon, 2008). This is in keeping with the tentative criteria established for authenticity as an internally defined, relatively continuous state but rather at odds with the notion of authenticity as an amoral construct.

The issue of the morality of authenticity is also apparent in the writings of other philosophers. Grene (1952) stated that the concept of authenticity in existential philosophy is rooted in the interpretation of freedom as the sole means by which humans shape themselves and their world. To Sartre, another existential philosopher, it is this attitude toward freedom as the expression of personal values that defines an authentic existence (Grene, 1952), emphasizing the ethical context of the philosophical view of authenticity. This is further elucidated in Sartre’s ideal of the self-made man who consciously creates the social relationships that determine his wellbeing and the wellbeing of others; the ideal society, according to Sartre (1956), is an authentic, radically democratic, humanistic form of socialism, a conceptualization fraught with ethical and moral judgments (Jakopovich, 2010).
To illustrate the interpretation, Guignon (2012) points out that Heidegger equated authentic with the term ‘proper’, thereby emphasizing the importance of being a person in the fullest possible sense in order to be authentic; that is, an individual who can assess their primary desires in the context of higher order motivations and make decisions based on the need to remain an active participant in the social context in which they exist is an authentic person. The individual is thereby answerable for their choices and equipped to be “an effective moral agent in facing situations demanding decisions,” (Guignon, 2012, p 97). It seems clear that the existential philosophy interpretation of authenticity contains a moral imperative, inconsistent with the criteria proposed for this exercise as well as the clinically relevant imperative on which this work is based.

*Psychotherapy literature.* EP, as mentioned previously, is unique in that it based on a specific philosophy, namely existentialism. Jacobsen (2007) stated that while authenticity means to be genuine or true, or to live truthfully, EA also means to do so in relation to the basic life dilemmas or existential givens, thus illuminating the connection to the philosophy of existentialism. The philosophy, however, has a reputation for being negative, with its emphasis on accepting death and powerlessness/meaninglessness as unavoidable realities. Bugental (1980) described the search for authenticity as the positive side of existentialism and that even when experiencing depression and anxiety, doing so authentically (that is, truthfully) allows for the freedom to live more fully; that by reclaiming authentic contact with their inner workings, patients can greatly reduce the stress they experience. The clinical application of this approach is clearly of benefit to clients, if such an authentic state can be achieved. In fact, Bader (1994) stated that today’s psychoanalytic patients tend to seek treatment because they feel estranged
from their true selves and that authenticity has replaced repression as the central clinical concern, dramatically emphasizing the clinical importance of understanding and exploring authenticity.

In keeping with the criteria for an internally determined state of authenticity, Miars (2002) described authenticity as a subjective process in which individuals transcend enculturation and invent themselves from within. This was further discussed by Bognar (2010) when he stated that authenticity requires happiness to be based on an autonomous evaluation derived from the person’s own standards, not manipulation or socially conditioned desires. Furthermore, Bauman and Waldo (1998) discuss the concept of authenticity as a kind of existence in which the individual accepts responsibility for choosing the direction of their life and bases choices on values determined by self-awareness. Taken collectively, it is clear that another criterion for authenticity has been revealed as an awareness of the existential givens during the decision making process, meaning that the individual is aware of the existential givens as they make decisions that are in keeping with their true inner self.

There is an additional aspect of existentialism and authenticity that must be considered due to its clinical importance, and this is in regards to mood. Existential philosophers and psychotherapists alike commonly accepted that an authentic existence is likely to cause anxiety, which is not viewed as pathologic or abnormal (Miars, 2002). In fact, it is seen as a normal reaction to the existential givens of human life. Stolorow (2011) made the additional point that shame, and not anxiety, is the manifestation of an inauthentic existence; that in shame we feel exposed as deficient before the gaze of others and thereby belong not to ourselves, but to them. Absence of shame, therefore, becomes the final criterion by which authenticity is defined.

**Formulating Criteria.** Formulating criteria are the expression of the essential conceptual meaning in a succinct form (Chinn and Kramer, 2011). The formulating criteria for EA, based on
the above analysis, consists of a state of being that is internally defined, congruent with the individual’s inner self, relatively continuous, lacking in socially imposed moral or ethical judgments, and in which the individual makes decisions with a clear awareness of the existential givens of human existence and with an absence of shame.

**Conclusion.** It is clear from the evidence presented on the topic of authenticity that it is a concept that is being discussed, used, critiqued, and analyzed in a multitude of contexts. While debate can ensue regarding specific aspects of the concept of authenticity as applied to specific contexts, within the realm of a clinically useful understanding of EA and how that understanding can be explored within the context of EP, the current state of the science is as has been described in this analysis. EA, as a goal for clients in treatment with an existential psychotherapist, offers the possibility of attaining a state of existence that is congruent with the individual’s true self, freeing them from the shame of socially imposed judgments and offering guidance with decision making in the form of awareness of the existential givens of human life as they make those decisions. Development of an instrument that would allow for measurement of EA would therefore have usefulness, not only in the clinical setting, but in the research setting as well, in identifying the factors that impact on the individual’s ability to attain EA.

**Literature review**

As has been established, EA has been defined in various ways by various authors. Although no instruments measuring the concept of EA have been identified, measurements of multiple related concepts are found in the literature. Exploration of their definitions and usage is a valuable exercise in enlightening the understanding of EA and broadening the knowledge base of the literature on the subject. Each will be explored in terms of its similarity and dissimilarity to the concept of EA, based on the criteria of a construct that is internally defined, congruent
with the individual’s inner self, relatively continuous, lacking in socially imposed moral or ethical judgments, and in which the individual makes decisions with a clear awareness of the existential givens of human existence and with an absence of shame. Some instruments, in particular those discussed in the general literature review presented, assess constructs that overlap in several ways with the subscales suggested here. This occurs due to the breadth of the instruments. These instruments are listed in only one area for brevity sake (see Table 1, page 67).

Narasimhan, Bhaskar and Prakhya (2010) constructed and administered an instrument measuring what they call existential beliefs and values. This ten-item instrument included a two-item existential beliefs scale and an eight-item values scale. The values scale was composed of the three dimensions of integrity, appropriate action and inner peace while the existential beliefs scale included belief in a supernatural power and belief in the law of action and reaction (Narasimhan, Bhaskar and Prakhya, 2010). The theoretical basis for this work was the ancient Indian texts outlining the Indian traditional wisdom about human nature and evolution. Clearly, although these concepts are existential in the sense of being universal to humans, according to their theoretical basis, they bear little resemblance to EA as defined in this work focusing instead on the nature of reality, morality and religious beliefs, where existential authenticity is internally defined and congruent with the individual’s inner self rather than a belief system.

More comprehensive instruments exist which attempt to measure the entirety of existential existence. Thorne (1973) attempted to operationalize a broad view of existential psychology dealing with high-level functioning that he called Existential Status. This scale included the concepts of existential morale, existential vacuum, existence and destiny, and self-actualization and, as such, offered a much broader and far less specific view of the human psyche which is only distantly related to EA (Thorne, 1973). Likewise, Reker and Peacock (1981) in
their Life Attitude Profile, measured such concepts as life control, death acceptance, goal seeking, and will to meaning. Neither of these instruments offer the specific, here-and-now aspect of EA as was measured in this study, although both offered constructs related to existential philosophy.

Allan and Shearer (2012) developed a scale to measure a construct they identified as existential thinking (ET). Offering an argument to the psychotherapeutic benefit of addressing existential issues, Allan and Shearer (2012) stated that “considering existential issues and making sense of one’s existence may be important for optimal human functioning” (p. 21). Their 11-item scale, the ‘Scale for Existential Thinking’ (SET), was developed based on the work of Howard Gardner (1999) who had proposed existential intelligence as a ninth intelligence in the theory of multiple intelligences (Allan & Shearer, 2012). The concept of ET is described as a meaning-making process that is part of how people establish, discover, or maintain meaning in their lives and likely overlaps with the search for meaning (Allan and Shearer, 2012). It is this aspect of ET that, it is argued, relates to well being, although Allan and Shearer (2012) described the essentially non-existent literature exploring the relationship between ET and mental health.

The concept of ET, as it is theoretically related to life meaning and mental well-being, has the potential to be closely related to EA. However, in examining the items in the scale itself, it is clear that significant differences exist. The items measuring ET are phrased in the infinite, repeatedly utilizing the phrase “have you ever….”; contain religious and ethical constructs including life after death, the human spirit, justice, goodness, and prayer; and contain very general concepts that are not clearly related to Yalom’s specific existential givens, including such concepts as “life’s Big Questions”, “the nature of reality”, a “grand plan”, and “the meaning of life” (Allan and Shearer, 2012). All of these items contrast sharply with the theoretical basis
for the proposed EA index, in which the items are firmly rooted in the present, are without religious/ethical implications, and offer the four specific existential givens of death, isolation, freedom, and meaninglessness.

Another construct similar to EA is the concept of the existential quest (EQ), which is measured in an instrument developed by Van Pachterbeke, Keller, and Saroglou (2012). Existential quest is the willingness of people to reexamine and change their existential beliefs (Allan & Shearer, 2012). As defined by Van Pachterbeke et al. (2012), EQ is a concept developed from a religious quest scale with recognition of the limitation of religious constructs, given that existential views and worldviews are broader than religious views. The resulting nine-item scale includes such constructs as right-wing authoritarianism, empathy, need for closure, and religiousness and, as such, examines substantially different constructs from the proposed EA index (Van Pachterbeke et al., 2012). Tested repeatedly, and found to be both valid and reliable, this instrument may be useful for future work exploring the relationship between the constructs of EA and EQ.

Subscale Development Literature Review

In addition to reviewing the instruments that were identified as testing constructs similar to EA, it was also important to review instruments that may be similar to each of the four subscales identified in this work. The basis for this comparison was the theoretical work of Irvin Yalom and the four existential givens as defined by him. Each subscale was reviewed in turn from the perspective of the awareness of each existential, as was tested in the instrument developed from this work. Again, each was explored in terms of its similarity and dissimilarity to the concept of EA, based on the criteria of a construct that is internally defined, congruent with the individual’s inner self, relatively continuous, lacking in socially imposed moral or ethical
judgments, and in which the individual makes decisions with a clear awareness of the existential
givens of human existence and with an absence of shame (see Table 2, page 69).

**Death**

Yalom (1980) identifies death as an existential given of human existence, based on the
certainty of death for all human beings. For purposes of this instrument this subscale was defined
as awareness of our own mortality or consciousness of the tension between the inevitability of
death and the wish to continue to be (Yalom, 1980). Participants were asked to evaluate a series
of statements regarding awareness of this existential as they go about their day-to-day life.

Templer (1970) constructed and administered an instrument that he identified as the
Death Anxiety Scale (DAS). Building on the work of previous instruments measuring the
feelings surrounding death, Templer (1970) developed the DAS as a fifteen-item scale with items
encompassing the act of dying, the finality of death and corpses and their burial. As
conceptualized, the DAS measures a construct that bears little resemblance to the awareness of
death as defined for this study. The DAS measures feelings and reactions to thoughts about death
as well as the symbols of death – corpses and the burial act. Awareness of death, according to
Yalom (1980) and as applied in this context, is restricted to the concept of one’s own inevitable
death, the awareness of which may or may not impact day-to-day life in individuals. How an
individual feels about that concept is not measured in this proposed instrument.

Terror Management Theory (TMT) served as the theoretical basis for a series of studies
examining the association between meaning in life and awareness of death (Traubman-Ben-Ari,
2011). TMT postulates that the ability to find meaning in life is central to the individual’s ability
to cope with frightening realities, such as death (Traubman-Ben-Ari, 2011). Two basic
hypotheses have been tested based on TMT. One is that reminding people of their own inevitable
death activates terror management mechanisms, including the need for worldview validation and self-esteem enhancement (Traubman-Ben-Ari, 2011). The second hypothesis is that self-esteem moderates death-related anxiety/terror (Simon, Arndt, Greenberg, Pyszczynski & Soloman, 1998). Significant empirical evidence has been gathered over the last two decades in support of these two hypotheses, leading to the further hypothesis that the individual’s cultural worldview functions to offer a form of protection against existential fears (Traubman-Ben-Ari, 2011). While these theoretical relationships, in particular the relationship between worldview and death anxiety, offers much of interest in contemplation of future work with an instrument that measures EA, they are clearly distinct from EA. The constructs examined in TMT relate to conscious and unconscious reactions to fear and anxiety as well as other accompanying feelings and reactions related to the thought of impending death. Authenticity, reflected by the awareness of one’s inevitable demise and the effect of that awareness on day-to-day life, is conceptualized as without value judgment.

**Freedom**

Freedom, identified by Yalom (1980) as one of the four existential givens, was defined for this purpose as awareness of our responsibility for all of our choices; consciousness of our decisions regarding our own world, our life design, our choice and our actions; awareness of a lack of external structure to our lives. Participants were asked to evaluate a series of statements regarding awareness of this existential as they go about their day-to-day life.

Freedom, or freedom of choice, is unique among the subscale existential givens in that no instruments measuring substantially similar constructs were identified. A body of literature, the so-called “Freedom of Choice Literature” (Bavetta & Seta, 2001), describes freedom of choice from multiple perspectives, including the philosophical and informational perspectives, and in
which freedom is identified as either variety of choice or as non-restrictedness of choice. It is clear that this body of literature examines choice from the mathematical and the decision-making perspective rather than personal choice in terms of a fact of existence that all human beings experience. This is a substantial difference from Yalom’s definition of the existential he called freedom, making it clear that this source of information is not useful in development of an instrument measuring existential freedom.

One instrument was identified that exhibited some similarities to existential freedom: the Self-Consciousness Scale (Scheier & Carver, 1985). This instrument measures the tendency to attend to the more hidden parts of the self as well as the more public qualities that are on display to the world (Scheier & Carver, 1985). The instrument relates to existential freedom in so far as it attempts to capture feelings related to the choices made as to what aspects of the self to hide and what aspects to reveal. The concept of revealing the inner self is also clearly related to authenticity. It is also clear, however, that this instrument does not measure the construct of existential freedom.

Isolation

Using Yalom’s work, awareness of isolation was defined as awareness of our isolation both from creatures and the world; an isolation that runs underneath both interpersonal and intrapersonal isolation; awareness of the unbridgeable gap between self and all else (Yalom, 1980). Participants were asked to evaluate a series of statements regarding awareness of this existential as they go about their day-to-day life.

Multiple instruments were found in the literature measuring loneliness, including the Bradley Loneliness Scale (Loucks, 1980), the Loneliness Rating Scale (Scalese, Ginter, & Gerstein, 1984), the Social and Emotional Loneliness Scale for Adults (DiTomasso, Brannen &
Best, 2004), and the UCLA Loneliness Scale (Dogan, Cotok & Tekin, 2011). All four scales define loneliness as a painful effect that is universally experienced, making it, indeed, an existential given. However, the concept of loneliness as utilized in these instruments differs markedly from the concept of existential isolation as defined by Yalom. Cacioppo, Hawkley, Ernst, Burleson, Berntson, Nouriani and Spiegel (2006) make the point that loneliness may be found in some individuals and not others, that it is related to hereditary as well as environmental factors, and that it is associated with a variety of personality traits. The argument is made that loneliness is not similar to existential isolation, for which no instruments were found.

**Meaning**

Yalom’s definition of awareness of the inherent meaninglessness in life is one of the existential givens utilized in this study. Awareness of meaninglessness is defined as awareness of the sum total of the previous concerns; awareness that with the reality of death, isolation and lack of external structure, there is no inherent meaning in life (Yalom, 1980). Participants were asked to evaluate a series of statements regarding awareness of this existential as they go about their day-to-day life.

Multiple instruments measuring meaninglessness exist including the Sources of Meaning and Meaning in Life Questionnaire (Schnell, 2010), the Meaning in Life Questionnaire (Steger, Frazier, Oishi, & Kaler, 2006), the Purpose in Life Test – Short Form (Schulenberg, Schnetzer & Buchanan, 2010), and the Existential Anxiety Questionnaire (Weems, Costa, Dehon & Berman, 2004). These instruments measure meaning in life from a variety of viewpoints, including existential anxiety as it relates to meaning in life, beliefs about meaning and purpose in life, perceived meaning in life and crisis in meaning, meaning as the link between well-being and
religion, and meaningful work as it relates to general well-being. What none of them measure is awareness of the inherent meaninglessness in life, as defined by Yalom (1980).

Summary of Instruments

There are many instruments in the literature whose purpose is to measure constructs related to existential philosophy, existential psychology, the feelings, thoughts, fears and anxieties related to the nature of existence, and the judgments formed by individuals regarding these constructs and experiences. None of these instruments measure existential authenticity – the authenticity exhibited in living day-to-day life with awareness of the existential givens defined by Yalom. It was the goal of this work to create such an instrument.
Chapter Three

The following outline of steps in the development of a psychometric instrument were derived from DeVellis (2012), with the works of Anastasi and Urbina (1997), Nunnally (1967), Nunnally and Bernstein (1994), and Loehlin (2004) applied as appropriate throughout the analysis sections of the proposal.

Step 1: Determine Clearly What it is You Want to Measure

DeVellis (2012) defined an index as a set of cause indicators, or items that determine the level of a construct. In this case the construct being measured was authenticity and the cause indicators, the items that determine the level of authenticity, were the subscales where awareness of the Yalom’s existential givens (death, freedom, isolation and meaninglessness) were measured (1980).

DeVellis (2012) was specific as to the importance of theory as an aid to clarity in identifying the content for the index being developed. The theoretical basis for the definition of EA used in this study is the understanding of authenticity as conceptualized by existential psychotherapists and as discussed above, with heavy emphasis on the work of Yalom (1980).

As stated previously, EA, as defined for this study, is the individual’s understanding and consciousness of the existential givens as exhibited by incorporation of the existential givens into their worldview and daily life. Miars (2002) shed further light on the practical considerations of measuring awareness by pointing out that the application of existential theory in counseling is primarily concerned with how the client has developed a self-and-world construct system to function in life. It is from this perspective of the practical day-to-day functioning of individuals that EA via awareness was measured in this proposed instrument.
DeVellis (2012) also emphasized the need for specificity as an aid to clarity in instrument development. The definitions for each of the concepts identified as latent variables used in this study were articulated and conceived as follows:

- **Awareness of death** was defined as awareness of our own mortality or consciousness of the tension between the inevitability of death and the wish to continue to be (Yalom, 1980).

- **Awareness of freedom** was defined as awareness of our responsibility for all of our choices; consciousness of our decisions regarding our own world, our life design, our choice and our actions; awareness of a lack of external structure to our lives (Yalom, 1980).

- **Awareness of isolation** was defined as awareness of our isolation both from creatures and the world; an isolation that runs underneath both interpersonal and intrapersonal isolation; awareness of the unbridgeable gap between self and all else (Yalom, 1980).

- **Awareness of meaninglessness** was defined as awareness of the sum total of the previous concerns; awareness that with the reality of death, loneliness and lack of external structure, there is no inherent meaning in life (Yalom, 1980).

It is noted that the definition for meaninglessness, as proposed by Yalom, presents a potential difficulty. Yalom defines meaninglessness in terms of the other three existential givens. The implications of this will be explored during the statistical analysis of the index.

**Step 2: Generate Item Pool**

DeVellis (2012) recommended generating a pool of items that included three to four times as many items as the final tool was expected to include. The initial goal for the final form
of this tool was an index that included four subscales with eight to ten items in each subscale. The pool of items therefore needed to include thirty to forty items per subscale, for a total item pool of one hundred-twenty to one hundred-sixty items. Each item in the pool was considered a candidate for inclusion in the final tool (DeVellis, 2012).

Each of the subscales needed to contain items that were selected with the goal of reflecting the latent variable underneath them (DeVellis, 2012), in this case, awareness of death, freedom, isolation, and meaninglessness. DeVellis advised the use of creativity in generating the items, with the underlying purpose of the measurement of EA, while also reflecting the concept specific to the subscale at all times. Redundancy was encouraged at this stage, to allow for later pruning of items. Other issues considered when constructing the items included conscientiousness of the item length, reading level, the avoidance of double barrel questions, the use of unclear pronouns, and the use of reverse items which may be confusing to the test takers (DeVellis, 2012). Generation of the item pool was a lengthy and time-consuming process in which attentiveness to the nuances of the underlying latent variable was crucial.

Internal consistency reliability is a measure of how well items correlate with each other as well as how many items are in a scale (DeVellis, 2012). Anastasi and Urbina (1997) stated that the principal basis for item selection is internal consistency, although external criteria, such as the expert opinion used in this work, should also be employed when available. It is possible to have too many items in the final instrument that is produced, resulting in a survey that is too time consuming to administer. However, early in the instrument development it was expected that more items would be included than were eventually used in the survey.
Step 3: Determine the Format for Measurement

Anastasi and Urbina (1997), in their discussion of the three main types of attitude scales used in psychological testing, stated that the Likert scale, compared to the Thurstone and Guttman scales, is easier to construct while yielding satisfactory reliability. DeVellis (2012) described a number of formats that can be used for the items, as well as a number of variables to consider, including the number of response categories and the specific type of response format. He described the Likert scale as being useful for instruments measuring opinion, beliefs, and attitudes. As part of the iterative process of item pool generation and format application, declarative statements were produced. They were evaluated by the respondents of the survey using a modified six-point Likert-type scale with responses ranging from very much agree (6), somewhat agree (5), and slightly agree (4) to slightly disagree (3), somewhat disagree (2), and very much disagree (1). There was no neutral response provided in order to require respondents to choose one direction or the other. All of the items were placed in the present time with no past or future references included, in keeping with the ‘here and now’ aspect of EP (Yalom, 2002). A minimum of thirty declarative statements were generated for each of the subscales in the instrument with a maximum 8th grade reading level for each item.

Step 4: Expert Review

Once the pool of items was generated in the proper format, experts were asked to review the pool and provide feedback on the items as a means of measuring content validity (DeVellis, 2012). These experts were chosen based on their experience and training as existential psychotherapists. Five experts were included in this process, with two of them American therapists, in order to minimize cultural differences in conceptualization of the latent variables. It
was expected that at least two of the experts, more if the number of experts had exceeded five, would be from Europe and/or Australia, given the predominance of EP there.

The experts were provided with the theoretical definitions of awareness and the four latent variables that were used for the subscales, the conceptual map indicating the relationship between the latent variables and the concept of EA, and the entire item pool. They were asked to rate how relevant each item was to the construct the subscale intended to measure, to evaluate the items’ clarity and conciseness, and to suggest ways to tap into the phenomenon of EA that were not included in the pool (DeVellis, 2012). Exchange of these materials took place electronically, including sending the item pool, map and definitions, and return of the written responses. Direct discussion of the pool items and the concepts was desirable. For this reason, computer software/equipment that will allow for video conferencing was utilized so that real-time discussion could take place with experts in geographically remote locations.

Decisions regarding the weight given to the input of the experts were made by the researcher and were based on their apparent understanding of the purpose of the survey, the latent variables as defined, and the theoretical underpinnings of the study itself. Items were removed from the pool, and additional items added, based on this input.

Step 5: Validation Items

DeVellis recommended consideration of two types of validation items in the surveys to be distributed (2012). The first regards the motivation of the respondents when answering the survey questions. For example, a series of questions might be inserted to measure the degree to which the respondent is concerned with answering in a socially desirable way (DeVellis, 2012). Given that awareness of existential givens is presumably not viewed as a socially desirable
characteristic, and due to the fact that it is not a construct that the general public is likely to be familiar with, questions of this nature were not included in the survey.

The second type of item validation that DeVellis (2012) recommended considering included measures of relevant constructs to help improve construct validity. Theory does not dictate, in this instance, that another concept related to the latent variables in each of the four subscales exists, other than those that have already been included in the item pool. It was therefore not necessary to add these constructs at this point. However, this is an issue that was thoroughly discussed in the expert review phase of the survey development.

**Step 6: Administer Items**

After review by the dissertation committee and approval by the University of Cincinnati Institutional Review Board (IRB), the expertly modified items were administered to test subjects via an anonymous online survey. In order to fully complete the development of this instrument, it must be administered a second time, after modifications based on the analysis of the first test have been completed. That work, however, is beyond the scope of this proposal and will be completed at a future date. Only the initial administration of the instrument was conducted via this proposal.

The ultimate target population for this instrument consists of adults living in the United States. For purposes of this phase of the instrument development, however, the target population was restricted to adults living in the Cincinnati OH-KY-IN Metropolitan Statistical Area 17140, as defined by Executive Office of the President, Office of Management and Budget (2013) and as used for the US Census 2010 materials. Participants were over eighteen years of age, able to read and write English, a high school graduate or GED equivalent, and residents of the defined geographic area. These inclusion criteria were validated on the survey itself, via self-report.
Demographic information, including age, gender, marital status, ethnicity, education, religion, general geographic location (zip code), and household income were gathered to allow for those items to be controlled during data analysis. Categories for each of the demographic items was drawn from the categories used in the US Census 2010 data, which was used as the normative source during analysis.

Both Nunnally and Bernstein (1994) and DeVellis (2012) suggested that a minimum of three hundred participants be recruited, with no upper limit. A response rate of ten percent was assumed for this study, requiring distribution to a minimum of three thousand individuals in order to obtain three hundred participants. Five thousand mailing addresses for a representative sample of the geographic area was purchased from ACRUX Data and a recruitment postcard mailed to them via the US Postal Service. This postcard included instructions for accessing the online survey, which was placed on SurveyMonkey® using a simple web address. A small incentive, in the form of a $5 gift card, was mailed to all participants upon completion of the survey, provided they supplied a mailing address, up to a maximum of five hundred participants. In order to maintain anonymity, after completion of the electronic survey, participants were directed to a new page where they could enter a mailing address for receipt of the gift card. Names were not requested for this purpose. Incentives were mailed addressed to ‘Survey Participant’ at the address provided. This information was included on the page requesting a mailing address.

In keeping with the laws governing human subjects experiments all materials were approved by the IRB prior to use. The recruitment postcard included minimal information: that a study was being done regarding the thoughts and feelings of adults regarding decisions they make in their day-to-day lives, the fact that an incentive would be mailed upon completion of the
study, a web address to visit if they were interested in participating, and a list of the devices that could be used for completion of the survey (See Appendix B on page 71). Information regarding the purpose of the study, intended use of the study findings, the voluntary nature of the study and assurances regarding confidentiality of the study data appeared on the first page of the website. Contact information for the research team was included on that page. Consent was implied by completion of the survey, which was explicitly stated on the information page. No personal identifying information was gathered on the survey itself and individual surveys were not connected to a specific individual at any time. Online survey measures were put in place to ensure that only one survey was accepted from any one internet IP address; although collected they were not at any time connected with an individual survey. Study findings were reported in aggregate form only to protect the privacy of the participants. All data were downloaded and stored on an encrypted research share drive provided and maintained by the university. Mailing addresses for both recruitment and incentives were destroyed upon completion of data collection. Research materials, including completed surveys and electronic copies of data, have been retained for future research use.

**Step 7: Evaluate the Items**

Initial examination of the item performance, as suggested by DeVellis (2012), included calculating the correlation of the items within each scale, the item mean, and the item variance. The first goal sought in a new scale is that the items be highly inter-correlated (DeVellis, 2012; Anastasi & Urbina, 1997). For items found to be negatively correlated, reverse scoring was considered although caution was used to prevent confusion among test-takers by changing the item response pattern (DeVellis, 2012). Item-scale correlations and inter-item correlations were also performed. The item mean should be close to the center of the range of possible scores, or
between three and four in this six-point scale. The item variance should be relatively high to indicate the ability of the item to differentiate between people with varying degrees of the construct being measured (DeVellis, 2012). Items with low variance were considered for removal from the subscale.

Calculation of the alpha reliability coefficient was performed as a measure of the quality of the scale (DeVellis, 2012). The desired minimum alpha coefficient for this study was 0.75, with an even higher score being desirable. A non-central item mean, poor item variability, negative correlation, low item-scale correlation and weak inter-item correlations all cause a low alpha (DeVellis, 2012). Alpha was recalculated as items were identified for removal based on poor performance, until an acceptable alpha was produced.

Factor analysis (FA) was completed initially on the entire set of items, to have been followed by FA on each of the four subscales of the survey, based on the model provided and if the existence of subscales was validated. FA is a method of examining the amount of error in the variance/covariance matrix and offers a statistical means of identifying items that may need to be removed due to a high degree of error in the matrix with their inclusion. The purpose of the FA was to examine the relationships between each of the items in the scale and to evaluate the amount of variance and covariance between the items for the purpose of evaluating the fit of the model proposed (DeVellis, 2012). The IBM SPSS software package (2013) was used for the univariate and bivariate analyses as well as the FA.

Step 8: Optimize Scale Length

Having removed items with unacceptable reliability in previous steps, the pool consisted of only those items that were reliable indicators of the construct being measured. Therefore, the scale’s alpha coefficient was now influenced by two characteristics: the amount of covariation
between the items and the number of items in the scale (DeVellis, 2012). Consideration was
given to the brevity of the scale versus the reliability, with the understanding that the reliability
of the alpha as a measure of reliability increases with the number of items (DeVellis, 2012).
Consideration was also given to removing items that contributed the least to overall internal
consistency. The final form of the scale, and therefore the overall index was determined by
decisions made in balancing these conflicting factors.

**Limitations of the Proposed Procedures**

The first potential limitation had to do with generation of the items for the item pool. This
was a challenging task that required creativity, careful attention to the definitions of the latent
variables underlying each of the subscales, and consideration of the overall goal of the
instrument. Further immersion into the latent variables, utilizing the work of Irvin Yalom from
which the definitions were drawn, was needed until a sufficient number of items was generated
with the definitions as listed in the study.

Recruiting a sufficient number of participants for the survey was a potential limitation in
this study. Failure to achieve participation in sufficient numbers did result in less than three
hundred participants in the testing process.

Representativeness of the sample was another potential limitation of this process, due to
selection bias. Demographic data from the sample was compared with US Census Bureau data
for the geographic area as defined. Significant differences in the sample population from the
target population were identified as part of the analysis of the data. Significant differences were
identified, bringing into question the representativeness of the sample.

A final limitation of this procedure was that the final form of the instrument will not be
produced until the product from this study has been further tested and re-analyzed. Although the
process used in this work focused on the content validity and the construct validity, further work is needed to substantiate thosevalidities and to establish the external validity, as well as the reliability of the instrument. This will be the basis for further work in the future.

**Timeline**

The timeline for completion of this study was one year with the following breakdown:

- **Development of Question Pool** – two months for development of an item pool based on theoretical definitions of latent variables
- **Expert Review** – three months for distribution, discussion, review and return of input
- **Adjustment of Questions** – one month to review expert input, make changes in item pool and prepare final version for testing
- **Recruitment and Survey of Sample Population** – two months to distribute recruitment letters, run ads, and allow for completion of online surveys
- **Analysis of Results and Refinement of Survey** – two months
- **Dissemination of Findings** – two months
Chapter Four

Findings

As proposed, the steps derived from DeVellis (2013) for the development of a psychometric instrument were followed. The works of Anastasi and Urbina (1997), Nunnally (1967), Nunnally and Bernstein (1994), and Loehlin (2004) were applied as appropriate throughout the analysis section of this work.

Generate Item Pool

Using the definition of awareness as provided in chapter 1 (see page 4), as well as Stolorow’s (2011) discussion of what it means to exist authentically (see page 5), and utilizing the format determined for the scale items, a Logic Train was developed to be used for instrument development for this study (see Appendix C on page 72). Then, using an iterative process, and with frequent reviews of the existential givens as defined by Yalom and the Logic Train as touch points to determine appropriateness, an initial set of items was developed for each subscale (see Appendix D starting on page 73, which is the initial draft of the questions). Repetitiveness being desirable at this point, multiple similar statements were prepared on specific aspects of each subscale. Care was taken to include reverse-scored items (a minimum of nine on each subscale) and to develop a minimum of 30 items for each subscale. In keeping with the format previously discussed (see page 30) each item was phrased in the form of a declarative statement, in the present tense with no reference to future or past. Reading level for each subscale was determined using the Spell-Check feature in Microsoft Word that provides the Flesch-Kincaid reading grade level for any material reviewed. All four subscales tested below the 8th grade reading level maximum suggested by DeVellis (2013). Specifically the reading levels were reported as follows:
• Death subscale = 5.0 grade level
• Isolation subscale = 6.0 grade level
• Freedom subscale = 4.8 grade level
• Meaning subscale = 3.8 grade level

A document was prepared to distribute this pool of items to experts for review. This document included specific instructions for the requested review, definitions of all terms, and the 30+ items per subscale that had been developed (see Appendix D on page 73).

**Expert Review**

Multiple experts were contacted utilizing the speaker’s list from the First World Congress for Existential Therapy that was in the planning stage as this work was moving forward (it was scheduled for May 14-17, 2015 in London). The conference was organized by the Existential Academy and the New School of Psychotherapy, both located in Great Britain, and was supported by the International Collaboration of Existential Counselors and Psychotherapists (ICECAP) and the Society for Existential Analysis.

All seven presenters listed on the event website in September of 2014 were contacted and provided with information about this study and the nature of the input requested. Of that initial group of seven, including all four keynote speakers as well as three invited speakers from the conference, five agreed to serve as experts for this work. An additional three experts were contacted based on recommendations from the initial contacts (recommendations were received from Dr. Yalom, Dr. Schneider and Dr. Cooper), all of whom are prominent in the field and regarded as experts by the individuals who recommended them. All three of these additional individuals agreed to serve as experts for this work.
This field of eight experts was provided with the items that had been developed as well as instructions, definitions for the terms used, and Yalom’s definitions for the subscales (see Appendix D on page 73). Of the group of eight who received these materials, five responded with feedback (see Table 3, below). Three provided specific item-by-item feedback and two provided feedback on the process and the types of items that are appropriate as well as the state of existential psychotherapy at the present time. These conversations were conducted primarily via email, with one expert choosing to converse via Skype and another via the telephone.

Table 3

Experts Utilized in the Study

<table>
<thead>
<tr>
<th>Name</th>
<th>Expertise</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mick Cooper, Ph.D.</td>
<td>Featured speaker for the World Congress on Existential Psychotherapy. Professor of Counseling Psychology at the University of Roehampton and a practicing counseling psychologist and existential psychotherapist.</td>
<td>University of Roehampton, London, England</td>
</tr>
<tr>
<td>Evgenia T. Georganda, D.Psych.</td>
<td>Featured speaker for the World Congress on Existential Psychotherapy. Masters degree in Counseling from Tufts University and a Doctorate in Psychology from Massachusetts School of Professional Psychology. Her primary orientation is Humanistic-Existential.</td>
<td>Private practice, Athens, Greece</td>
</tr>
<tr>
<td>Ruthellen Josselson, Ph.D.</td>
<td>Recommended by Dr. Schneider. Professor of clinical psychology at The Fielding Graduate University and a psychotherapist in practice. She was formerly a Professor at The Hebrew University of Jerusalem and Harvard University and a Visiting Fellow at Cambridge University. She is co-director of the Irvin D. Yalom Institute of Psychotherapy.</td>
<td>Fielding Institute, Santa Barbara, California</td>
</tr>
<tr>
<td>Kirk J. Schneider, Ph.D.</td>
<td>Keynote speaker for the World Congress on Existential Psychotherapy. Licensed psychologist and leading spokesperson for contemporary existential-humanistic psychology. He is adjunct faculty at Saybrook University and Teachers College, Columbia University, and vice-president of the Existential-Humanistic Institute.</td>
<td>Columbia University, New York City</td>
</tr>
</tbody>
</table>
As the initial step in preparing the instrument for use in data collection, and based on the expert input, items on each subscale were narrowed to include only those items that all of the experts agreed were the best. This resulted in subscales with the following number of items per subscale (including reversed items):

- Isolation subscale: 3 items (0 reversed items)
- Freedom subscale: 11 items (5 reversed items)
- Death subscale: 12 items (5 reversed items)
- Meaning subscale: 6 items (2 reversed items)

The goal for this process was a minimum of 10 items per subscale with a minimum of one-third being reversed items. The Freedom and the Death subscales met this goal with the process identified above; the Isolation and Meaning subscales did not. All items that had been judged acceptable by at least two of the experts were then added to those two subscales. In addition, one item was added to the Meaning subscale that had been suggested by an expert, based on his interpretation of Yalom. Finally, two items were included on the Isolation subscale based on the preference of the researcher, in the belief that they reflected Yalom’s meaning. These changes resulted in the following final numbers for the survey:

- Isolation subscale: 14 items (6 reversed items), including 2 researcher added items
- Freedom subscale: 11 items (5 reversed items)
- Death subscale: 12 items (5 reversed items)
- Meaning subscale: 12 items (4 reversed items), including one expert added item
The remaining 49 items were combined with the demographic items, as outlined in chapter 3 (see page 33), to produce the final form of the instrument to be tested (see Appendix E on page 82). The reading level for the instrument as a whole was grade 4.5, as reported in Microsoft Word using the Flesch-Kincaid reading grade level program.

**Administer Items**

In preparation for administering the instrument, a consent form was developed (see Appendix F on page 85) and Institutional Review Board (IRB) approval to administer the final form of the survey was obtained (see Appendix G on page 87). A post card was developed and approved for use in recruitment (see Appendix B on page 71). Using the online survey instrument SurveyMonkey®, both the consent form and the final items were uploaded and the specific scale to evaluate the items was constructed (see Appendix E on page 82). The online survey was constructed so that consent information appeared on page one; demographic information was collected on page two; and the survey responses were collected on page three. Consent was assumed by completion of the survey, which was clearly stated in the consent, and self-report was used to verify inclusion criteria. Non-demographic items were randomized in their presentation to participants.

A separate survey was constructed in SurveyMonkey® to collect information needed to distribute incentives to the study participants. The two surveys were set up so that participants were directed to the incentive survey upon submission of the data collection survey. The incentive survey requested an email address to be used to distribute the gift card incentive and asked participants if they would like to be notified of the study’s findings once they were available, using the contact information they provided.
A random sample of the Greater Cincinnati Geographic Region OH-KY-IN, as defined by the US Census Bureau (Office of Management and Budget, 2010), was obtained from Acrux Data and included 5000 adults ages 18 and over. Demographic information about this sample can be found in Table 4 on page 90. The approved recruitment postcards, which included the web address for the SurveyMonkey survey, were mailed to this sample and the survey site was opened. The site remained open from February 19 through March 20, 2015. During this time a total of 233 individuals entered information in the data collection survey while 214 individuals entered information in the incentive survey. This represented a 4.7% response rate on the data collection survey.

It became clear that there was a problem with the website during the first 5 days of data collection as a total of 10 respondents completed only the demographic information on page two of the data collection survey and completed zero of the survey questions on page three. During this same five-day period a total of 20 participants were apparently not directed to the incentive survey after completing the data collection survey, based on missing data that appears in the incentive survey only during this period. Study participants completed all portions of the surveys submitted after this initial period.

Incentives were distributed to all study participants who completed the incentive survey with the exception of seven email addresses that were duplicates, per the instructions and the consent information. A total of 208 incentives were mailed out via either email or U.S. Postal Service. Study results were disseminated via a website to the 164 respondents of the incentive survey who asked to be notified of the study findings.
Evaluate the Items

Of the 233 respondents who completed the survey, 10 provided demographic data only; these 10 respondents were removed from the data set. One participant responded to approximately one-half of the survey questions and was removed, resulting in a final sample size of 222. The mean completion time for the survey was 9:18 minutes, with a minimum of 2:50 minutes and a maximum of 44:25 minutes.

Demographic data were examined including frequency and distribution. A summary of the descriptive statistics for the demographic variables can be found in Table 4 on page 90. Additional statistical tests were performed based on these demographic findings, specifically examining the relationship between gender, education, and age and the survey item responses. To assist in interpreting these findings, a listing of the numbered survey items as they are referenced in the analysis is provided (see Appendix H on page 91).

To examine the relationship between the dichotomous variable of gender and the item responses, $t$-tests were performed comparing the mean item scores given by males with the mean scores given by females. Significant differences were found in five items, as listed below in Table 5. Item mean differences were not found to be significant on any other items. To control for gender bias, all five items with significant findings were removed from the scale, reducing the total number of items to 44.

Table 5(8,8),(996,992)

<table>
<thead>
<tr>
<th>Item</th>
<th>Male Mean $n = 50$</th>
<th>Female Mean $n = 172$</th>
<th>2-tailed significance $p &lt; .05$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freedom 9</td>
<td>1.88</td>
<td>1.58</td>
<td>.022</td>
</tr>
</tbody>
</table>
To examine the relationship between the categorical variable of education and the item responses, a one-way analysis of variance (ANOVA) was performed. Between groups significance ($p < .05$) was found for two items, Freedom 6 ($p = .024$) and Death 7 ($p = .015$). There was no significance found for any other items in this test. To control for education bias, both items were removed from the scale reducing the total number of items to 42.

To examine the relationship between the continuous variable of age and the item responses, an ANOVA was performed after the participant responses were grouped by age (see Table 6, below). A total of twelve items were found to have significant relationships with age groups. Four of these items had been removed in previous steps; to control for age-related bias the remaining eight were removed leaving a total of 34 items in the scale. Significant findings from this test can be found in Table 7 on page 93.

Table 6

*Age Groups*

<table>
<thead>
<tr>
<th>Age Groups</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>18 – 29 years old</td>
<td>45</td>
<td>20.3%</td>
</tr>
<tr>
<td>30 – 44 years old</td>
<td>53</td>
<td>23.9%</td>
</tr>
<tr>
<td>45-60 years old</td>
<td>74</td>
<td>33.3%</td>
</tr>
<tr>
<td>61 years and older</td>
<td>50</td>
<td>22.5%</td>
</tr>
</tbody>
</table>
**Missing Data.** Calculations were performed to determine the proportion of missing data per participant and the proportion of participants that had missing data. Total missing data were examined overall as well as per subscale. The findings of these calculations can be found in Tables 8 and 9, below.

Table 8

*Percent of Respondents with Complete Data*

<table>
<thead>
<tr>
<th>Freedom Subscale</th>
<th>Isolation Subscale</th>
<th>Death Subscale</th>
<th>Meaning Subscale</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>96.4%</td>
<td>92.8%</td>
<td>94.6%</td>
<td>89.6%</td>
<td>79.9%</td>
</tr>
</tbody>
</table>

Table 9

*Number of Respondents with Incomplete Data*

<table>
<thead>
<tr>
<th>Freedom Subscale</th>
<th>Isolation Subscale</th>
<th>Death Subscale</th>
<th>Meaning Subscale</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>3.6%</td>
<td>7.2%</td>
<td>5.4%</td>
<td>20.1%</td>
</tr>
</tbody>
</table>

Pearson Chi-Square correlations were performed using the main demographic variables and the calculated dichotomous variable of participants with missing/non-missing data. Independent-samples t-test analysis was also performed comparing the continuous variables of age and education with the same dichotomous variable and no significance was found. Results of this testing can be found in Table 10, below.
Table 10

*Pearson Chi-Square Significance of Demographic Variables*

<table>
<thead>
<tr>
<th></th>
<th>Freedom Subscale</th>
<th>Isolation Subscale</th>
<th>Death Subscale</th>
<th>Meaning Subscale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>.489</td>
<td>.708</td>
<td>.618</td>
<td>.250</td>
</tr>
<tr>
<td>Age</td>
<td>.415</td>
<td>.398</td>
<td>.913</td>
<td>.742</td>
</tr>
<tr>
<td>Education</td>
<td>.641</td>
<td>.259</td>
<td>.804</td>
<td>.326</td>
</tr>
<tr>
<td>Race</td>
<td>.997</td>
<td>.703</td>
<td>.214</td>
<td>.536</td>
</tr>
</tbody>
</table>

Pearson Chi-Square correlation and Independent-samples t-test analysis were also performed comparing the continuous variable of time to test with the dichotomous variable of participants with missing/non-missing data. Significance was found on the Death subscale. Findings are noted in Table 11 below.

Table 11

*Analysis of the Continuous Variable Time to Test*

<table>
<thead>
<tr>
<th></th>
<th>Freedom Subscale</th>
<th>Isolation Subscale</th>
<th>Death Subscale</th>
<th>Meaning Subscale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pearson Chi-Square Significance</td>
<td>.614</td>
<td>.696</td>
<td>.225</td>
<td>.323</td>
</tr>
<tr>
<td>Independent-samples t-test</td>
<td>.623</td>
<td>.611</td>
<td>.008**</td>
<td>.551</td>
</tr>
</tbody>
</table>

48
Sample Size. The initial goal for this study was a sample of 300, a number supported by Tabachnick and Fidell (2013) for factor analysis (FA), who also state that a smaller sample size (150 cases) is sufficient if solutions have several high loading marker variables (above .80). It is suggested that it is not the total number of cases that matter so much as the ratio of cases to items in the FA. Nunnally (1978) recommends a 10:1 ratio, with 10 cases per item to be factor analyzed, while Tabachnick and Fidell (2013) suggest that five cases per item are sufficient. With a total of 34 items and 222 cases, the ratio for the scale is 6:1. Taking into consideration missing data per subscale, each of the subscales also contains an adequate number of cases for FA, demonstrated by the ratios in Table 12, below.

Table 12

<table>
<thead>
<tr>
<th></th>
<th>Freedom Subscale</th>
<th>Isolation Subscale</th>
<th>Death Subscale</th>
<th>Meaning Subscale</th>
</tr>
</thead>
<tbody>
<tr>
<td># Items</td>
<td>8</td>
<td>10</td>
<td>6</td>
<td>10</td>
</tr>
<tr>
<td># Complete Cases</td>
<td>214</td>
<td>206</td>
<td>210</td>
<td>199</td>
</tr>
<tr>
<td>Ratio</td>
<td>27:1</td>
<td>21:1</td>
<td>35:1</td>
<td>20:1</td>
</tr>
</tbody>
</table>

Factor Structure. The scale was evaluated utilizing a common FA using the 222 responses in order to determine the number of underlying factors; missing data was eliminated pairwise. The strength of the intercorrelations among the items was evaluated, with more than a minimal number of coefficients greater than .3, indicating appropriateness for factor analysis (Tabachnick & Fidell, 2013). Bartlett’s test of sphericity (Bartlett, 1954) and the Kaiser-Meyer-Olkin (KMO) measure of sampling adequacy (Kaiser, 1970) were performed to assess the
factorability of the data. Bartlett’s test should be significant \((p < .05)\) and the KMO index should be greater than .6 to be considered appropriate for factor analysis (Tabachnick & Fidell, 2013).

The KMO measure verified sampling adequacy for the analysis (.839). Bartlett’s test of sphericity was significant at .000. FA was therefore judged to be appropriate. A common FA with oblique rotation (direct oblimin) was performed in order to explore the underlying factors of the 34 items included in the subscale. The FA identified nine factors using Kaiser’s recommendation of eigenvalues greater than one (Kaiser, 1960). Eigenvalues for these nine factors ranged from 7.373 to 1.031. A total of 14 items loaded on factor 1, with an eigenvalue of 7.373 and with loadings greater than .500. Information regarding the unrotated loadings of these items along with the specific items themselves can be found in Table 13 on page 94.

The items were reviewed in terms of expert input and internal consistency reliability was evaluated. Cronbach’s alpha for the fourteen items on factor one was .877. Each item was examined in terms of item characteristics including item mean, variability, skew, and kurtosis (see Table 14 on page 95). All of the items had a positive skew, with a mean below the desired mean of 3.5, and with variable kurtosis. The positive skew/low mean is consistent with the likelihood that most individuals have relatively high levels of EA. The item response distribution for each of the fourteen items was compiled and can be found in Table 15 on page 96. All items were also subjected to the Kolmogorov-Smirnov and the Shapiro-Wilk tests of normality and all were found to be significant at the .000 level, indicating non-normal distribution. This is not a surprising finding given that the sample size is greater than 200 (Tabachnick & Fidell, 2013).

**Optimize Scale Length**

The FA did not support the four subscales in this analysis, instead validating Yalom’s assertion (1980) that the existential given of meaning is derived from recognition and
incorporation of the other three givens. This resulted in a scale that measures EA as one construct. Of the fourteen items identified in factor one of the FA only one (Isolation 5) would increase the internal consistency reliability if removed, and was therefore taken out of the scale.

Of the remaining thirteen items, those initially on the Freedom and Death subscales consisted of items that had been identified as good items by all of the experts who gave input. The two items remaining on what was the Isolation subscale were those items added by the researcher. Of the six items on what had been identified as the Meaning subscale, two were items identified as good items by all of the experts who gave input, while the remaining four items were judged as good items by at least one expert. Of this last group of four, one item (Meaning 8) had a skewness of greater than 2 and was considered for removal.

Cronbach’s alpha was calculated for the scale including the Meaning 8 item resulting in a score of .879. Removal of the item resulted in Cronbach’s alpha of .871. Despite the reduction in internal consistency, the decision to remove the Meaning 8 item was based on it having the lowest mean of all of the final items (1.55), along with the highest skewness (2.137) and kurtosis (4.858). The resultant final form of the scale consisted of twelve items with three reversed items, an internal consistency reliability score of .871, a mean of 22.9 (the total scale score ranges from 12 to 72), and a standard deviation of 8.262.

The scale length was optimized through the process of item elimination based on statistical findings, optimization of internal consistency reliability, and recognition of the underlying theoretical foundation, including expert input. The final form of the instrument, with the items randomized and formatted for administration, can be found in Appendix I on page 97. It has been named the Richmond Authenticity Scale.
Chapter Five

Discussion

Factor Structure

The factor analysis of the scale failed to identify the four subscales as predicted by the model based on Yalom’s existential givens. It did identify one factor which includes aspects of all four of the initially identified subscales, consistent with Yalom’s (1980) description of the existential given he called meaning, which he described as derived from, and necessitated by, the other three existential givens. It is therefore argued that EA is a single construct and is captured by the items that comprise the final form of the index.

For future testing of the index, in light of the non-normal distribution of the items demonstrated most notably by the mean score, it is advised that consideration be given to transforming the scores using a logarithm based on the finding of substantial positive skewness (Tabachnick & Fidell, 2013). Following transformation, the distribution of the mean score should again be assessed for normality. Transformation may have the effect of improving analysis as well as reducing the impact of outliers (Tabachnick & Fidell, 2013). Consideration should also be given to the possibility that the skewness represents social desirability on the part of the study participants, despite the online administration of the survey.

Reliability

The internal consistency as measured by Cronbach’s alpha (.871) is above the minimum level of .7 as defined by Nunnally (1978). Scores above .8 are preferable (Anastasi & Urbina, 1997; Pallant, 2013). Individual item correlations with total score produced similar results. Only four of the twelve items had correlations below .5, with none below the minimum of .3 (Pallant,
All of these findings reinforce the statistical likelihood that the scale is measuring one construct.

Future development of this scale will include testing for adequate test-retest reliability, indicating that the scale yields stable results over time. This is a particularly important measurement since the instrument is intended to be used to measure clinical outcomes. Testing should be completed with a variety of time intervals, all generally of a relatively short length and with notation of significant life events that may occur between testing time points. Psychological measures have been shown to have higher reliability over shorter time periods and the potential to have little reliability over years or decades (Anastasi & Urbina, 1997).

Future testing should also include comparison of online administration of the scale versus paper administration, known as alternate form reliability. Paper forms of the scale may be preferable and more convenient when the index is used in the clinical setting. While it is true that online test administration may be less expensive in the long run, it may have the advantages of being faster and of eliminating the effect of the presence of the test administrator on the subject’s responses (Duffy, B., Smith, K., Terhanian & Bremer 2005). If this testing is done over a period of time, information regarding life events in the intervening time period should again be collected (Anastasi & Urbina, 1997).

**Validity**

Content validity of the scale was determined by expert input on the items prior to administration to the test subjects. Of the final twelve items in the scale, six were unanimously determined by expert input to be acceptable measures of the application of the existential givens as defined in this study. Three of the items were evaluated as acceptable measures by at least one expert in the panel and the final two items were added by the researcher. All items were
developed based on the definitions of the existential givens as given by Yalom (1980) and the definition of existential awareness as defined in this study. It is therefore asserted that the construct identified in this index adequately reflects the construct defined in the study.

Future work includes testing other aspects of the validity of the scale, primarily through associations with other variables. Consideration needs to be given to the relationship of the construct of EA with other relevant psychological variables (Furr & Bacharach, 2014). It has been theorized that EA is related to life satisfaction as well as depression and anxiety. It is therefore appropriate to concurrently administer the EA scale with commonly used instruments for testing the other constructs, including the Beck Depression Inventory (Beck, Ward, Mendelson, Mock & Erbaugh, 1961), The Satisfaction with Life Scale (Diener, Emmons, Larsen & Griffen, 1985), and the Hamilton Anxiety Rating Scale (Hamilton, 1959). The purpose of this testing is to establish convergent and divergent evidence of the relationship between the construct of EA and its relationship with the other constructs (Furr & Bacharach, 2014). Ideally testing the EA scale in this way will demonstrate divergent evidence of the difference between EA and the other constructs, as well as convergent evidence of the theoretically predicted relationship between EA and the other constructs.

Testing for convergent and divergent evidence should also be undertaken with constructs determined to be potentially similar to EA (see Table 1 on page 67). Without the predicted subscales there is no need to distinguish between similar constructs that existed only in the individual subscales (see Table 2 on page 69). Additional related constructs for future testing include Existential Thinking (Allan & Shearer, 2012), Existential Beliefs and Values (Narasimhan, Bhaskar, & Prakhya, 2010) and Existential Quest (Van Pachterbeke, Keller and Saroglou, 2012). Ideally this testing will demonstrate divergent evidence of the difference
between EA and the other constructs, as well as convergent evidence of the theoretically predicted relationship between EA and the other constructs.

**Generalizability**

There are areas in which demographic variables in the sample collected in this study did not reflect the population of the geographic region based on 2010 US Census data. Items that had significant relationships with age, gender and education were removed from the scale based on those findings, to control for bias based on those variables. However, the representativeness of the sample remains in question. The index should be tested in the future with a larger sample with steps taken to obtain a sample that is more representative of the population. This should include the use of quotas for the demographic variables of gender, age, and education.

**Clinical Utility**

It is hypothesized that the index will have clinical usefulness in predicting treatment outcomes for clients receiving existential psychotherapy. Additional testing for reliability and validity, as described above, must be completed prior to this use. Prior to clinical use it is important that the index be tested with a larger sample, and a sample that is representative of the clinical population likely to use the index in the clinical setting.

Another concern in applying this instrument to the clinical setting is the variability of the sample. The initial testing of the index was completed with a random sample of adults. It is possible that there may be characteristics of the population of patients in the clinical setting that form a subgroup who are more homogenous than the sample used in this study (Anastasi & Urbina, 1997). It is therefore recommended that the index be evaluated with a sample of the target clinical population to determine the internal consistency reliability for that group.
Research Utility

The index is hypothesized to have research utility in exploring the relationships between EA and the variables outlined in Appendix A (see page 66). These are hypothesized as variables that impact on EA and thereby life satisfaction, along with the constructs of depression and anxiety. Additional testing of the index, as outlined above and including convergent and divergent evidence of the relationships between constructs, is required before the index is useful in this capacity.

Further research should also be conducted regarding the relationship between EA and the items that were removed from the index in this study based on their relationships with demographic variables. This might include the relationship between gender and self-empowerment or between age and awareness of death. Consideration should also be given to theoretical work being done in other fields, including Terror Management Theory and Social Psychology, for examining relationships with these constructs. These items can be found in Table 16 on page 99.

Limitations

There are significant limitations of this study, including sample size and representativeness of the sample, that should be taken into consideration when interpreting the findings. In addition, it is emphasized that these are initial findings and that much work remains to be done with future testing of the validity and reliability of the index.

Conclusions

The findings in this study support an index measuring existential authenticity as a single construct. The scale demonstrates good reliability in the current sample. Content validity was determined by expert input and future testing will be done to elucidate construct validity.
Evaluation of the psychometric properties of this instrument demonstrates a promising index although further development and testing is required. The data are consistent with an instrument in the beginning stages of development.


Appendix A

Theoretical Model

Traits and Experiences Affecting Existential Authenticity

- Thinking/Feeling
- Sensing/Intuiting
- Introversion/Extroversion
- Judging/Perceiving
- Personality
- Instinct
- Intelligence
- Inherent Trait
- Experience
- Social Environment
- Awareness

The 4 Existentials:
- Death
- Freedom
- Isolation
- Meaninglessness

and therefore determine

Authenticity

Appendix A
<table>
<thead>
<tr>
<th>Instrument</th>
<th>Source (year)</th>
<th>Subscales: Concepts (number of items)</th>
<th>Reliability (Cronbach’s alpha)</th>
<th>Sample Population</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Existential Beliefs and Values</td>
<td>Narasimhan, Bhaskar, and Prakhy (2010)</td>
<td>Existential beliefs: belief in a supernatural power (1), belief in the law of action and reaction (1); Values: integrity (3), appropriate action (2), inner peace (3)</td>
<td>Existential Beliefs = 0.743; Values = 0.725</td>
<td>Employees of 20 high-performing business organizations in India; no mention of gender</td>
<td>340</td>
</tr>
<tr>
<td>A Measure of Existential Status</td>
<td>Thorne (1973)</td>
<td>Self Status: positive and negative self-concepts of physical body and personality (24); Self-Actualization: existential success and failure (41); Existential Morale: measures the toll of life on morale, motivation and coping with life (36); Existential Vacuum: meaninglessness, boring life, purposeless (16); Humanistic Identification: social interest (21); Existence and Destiny: attitudes towards the human condition, ability to cope with destiny (26); Suicide: attitudes toward death and suicide (10)</td>
<td>Not reported</td>
<td>Incarcerated felons (193 males), alcoholics committed to the state hospital (89, 58 male, 31 female), students of the objectivist philosophy of Ayn Rand (155, 80 male, 75 female), unmarried mothers living in a research facility (336 females), University of Alberta psychology students (159, unknown gender), psychiatric patients with a primary diagnosis of chronic undifferentiated schizophrenia (388, 236 males, 152 females)</td>
<td>1161</td>
</tr>
<tr>
<td>Life Attitude Profile</td>
<td>Reker and Peacock (1981)</td>
<td>Life Purpose: goodness, excitement, thrill, satisfaction, meaning (9), Existential Vacuum: vague something</td>
<td>Life Purpose = 0.83, Existential Vacuum = 0.75,</td>
<td>Under-graduate students; 156 females, 63 males</td>
<td>219</td>
</tr>
<tr>
<td>Existential Thinking</td>
<td>Allan and Shearer (2012)</td>
<td>Purpose in life, life after death, philosophy, meditation, truth, meaning of life, life’s big questions (11)</td>
<td>0.95</td>
<td>Undergraduate students; 219 females, 160 males</td>
<td></td>
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</tr>
<tr>
<td>Existential Quest</td>
<td>Van Pachterbeke, Keller and Saroglou (2012)</td>
<td>Right wing authoritarianism, empathy, need for closure, religiousness (9)</td>
<td>0.74</td>
<td>First year psychology students at a French-speaking Belgian university; 258 women, 58 men</td>
<td></td>
</tr>
</tbody>
</table>
### Table 2

**Subscale Literature**

<table>
<thead>
<tr>
<th>Instrument</th>
<th>Source</th>
<th><strong>Subscales: Concepts (number of items)</strong></th>
<th><strong>Reliability (Cronbach’s alpha)</strong></th>
<th><strong>Sample Population</strong></th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Death Anxiety Scale</td>
<td>Templar (1970)</td>
<td>Fear of death, anxiety about death, feelings about cancer, pain, life after death, heart attacks, dead bodies (15)</td>
<td>.76 (with 31 subjects)</td>
<td>College students</td>
<td>141</td>
</tr>
<tr>
<td>Self Consciousness Scale</td>
<td>Scheier &amp; Carver (1985)</td>
<td>Public self-consciousness (7), Private self-consciousness (9), Social anxiety (6)</td>
<td>Public 0.84, Private 0.75, Social 0.79</td>
<td>CABG patients, stroke patients and their spouses, middle aged women</td>
<td>298</td>
</tr>
<tr>
<td>Bradley Loneliness Scale</td>
<td>Loucks (1980)</td>
<td>First scale to measure the feeling of loneliness (38)</td>
<td>0.90</td>
<td>Undergraduate college students</td>
<td>250</td>
</tr>
<tr>
<td>Loneliness Rating Scale</td>
<td>Scalese, Ginter &amp; Gerstein (1984)</td>
<td>Depletion: drained, empty, secluded, numb, passive (10); Isolation: unloved, worthless, hopeless, useless (10); Agitation: scarred, sick, hostile, guilty, humiliated (10); Dejection: sad, depressed, discouraged (10)</td>
<td>Depletion 0.86, Isolation 0.89, Agitation 0.82, Dejection .087</td>
<td>University students, 486 females, 277 males</td>
<td>763</td>
</tr>
<tr>
<td>Social and Emotional Loneliness Scale for Adults</td>
<td>DiTomasso, Brannen &amp; Best (2004)</td>
<td>Social: feel understood, part of and able to depend on friends (5); Family: feel loved, understood, close to and part of my family (5); Romantic: feel close to, supported by, cared for by romantic partner (5)</td>
<td>Social 0.88 to 0.90, Family 0.88 to 0.90, Romantic 0.85 to 0.88</td>
<td>University students (817 female, 473 male), spouses of Canadian Forces members (344), and the psychiatric population (22 female, 16)</td>
<td>1572</td>
</tr>
<tr>
<td>Instrument</td>
<td>Authors</td>
<td>Description</td>
<td>Alpha</td>
<td>Sample</td>
<td></td>
</tr>
<tr>
<td>-----------------------------------------------------</td>
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<td>-----------------------------------------------------------------------------</td>
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<td></td>
</tr>
<tr>
<td>UCLA Loneliness Scale</td>
<td>Dogan, Cotok &amp; Teken (2011)</td>
<td>Social-emotional loneliness, depression (8)</td>
<td>0.84</td>
<td>Undergraduate students, 338 females, 213 males</td>
<td></td>
</tr>
<tr>
<td>Sources of Meaning and Meaning in Life Questionnaire</td>
<td>Schnell (2010)</td>
<td><strong>Self-transcendence:</strong> commitment to objectives beyond one’s own needs; <strong>Self-actualization:</strong> using and fostering one’s capacities; <strong>Order:</strong> holding onto values, decency, tried and true; <strong>Well-being and relatedness:</strong> cultivating and enjoying life’s pleasures, pubic and private (151)</td>
<td>0.83 to 0.93</td>
<td>Representative German sample</td>
<td></td>
</tr>
<tr>
<td>Meaning in Life Questionnaire</td>
<td>Steger, Frazier, Oishi, &amp; Kaler (2006)</td>
<td><strong>Presence:</strong> clear meaning in life, satisfying life purpose (5); <strong>Search:</strong> looking for purpose, searching for significance (5)</td>
<td>Presence 0.81, Search 0.84</td>
<td>Undergraduate students</td>
<td></td>
</tr>
<tr>
<td>Purpose in Life Test – Short Form</td>
<td>Schulenberg, Schnetzer &amp; Buchanan (2010)</td>
<td>Goals related to meaning in life, retirement, good things in life, suicidal thoughts, preparation for death, contentment (20)</td>
<td>0.84</td>
<td>Undergraduate students, 185 females and 107 males</td>
<td></td>
</tr>
</tbody>
</table>
Appendix B

Recruitment Postcard

Volunteers Needed for a Research Study
Development of a Psychological Instrument

The purpose of the study is to develop an instrument that will be used to evaluate the thoughts and feelings of adults regarding specific aspects of their day-to-day life.

Participation involves responding to an online survey.

The survey will take approximately 15 minutes to complete.

Participants will receive a $5 Starbucks gift card as a thank you.

The survey can be accessed at: www.surveymonkey.com/r/UCCON

Principal Investigator:
Misty Richmond, doctoral candidate
University of Cincinnati, College of Nursing

This study is open to adults 18 years and older.

Only one participant per address, please.

For additional information please direct your email to: mistym.richmond@uc.edu or call 513.284.4659 and leave a message.
Appendix C

Logic Train
For Item Development

Definitions:
To be existentially authentic is to live life by looking at the basic life conditions that exist for all people and dealing with them constructively (effectively), rather than creating a world in the mind in which those conditions do not exist.

The formulating criteria for existential authenticity are that it is a state of being that is internally defined, congruent with the individual’s inner self, relatively continuous, lacking in socially imposed moral or ethical judgments, and in which the individual makes decisions with a clear awareness of the existentials of human existence and with an absence of shame.

Existential awareness is the process of facing the existentials of human existence; it is the individual’s understanding and consciousness of the existentials as exhibited by incorporation of the existentials into their world-view and daily life.

Subscales:
The death subscale is defined as awareness of our own mortality or consciousness of the tension between the inevitability of death and the wish to continue to be.

The freedom subscale is defined as awareness of our responsibility for all of our choices; consciousness of our decisions regarding our own world, our life design, our choice and our actions; awareness of a lack of external structure to our lives.

The isolation subscale is defined as awareness of our isolation both from creatures and the world; an isolation that runs underneath both interpersonal and intrapersonal isolation; awareness of the unbridgeable gap between self and all else.

The meaninglessness subscale is defined as awareness of the sum total of the previous concerns; awareness that with the reality of death, loneliness and lack of external structure, there is no inherent meaning in life.

Declarative statements will be produced to be evaluated by the respondents of the survey using a modified six-point Likert-type scale with responses ranging from very much agree (6), somewhat agree (5), and slightly agree (4) to slightly disagree (3), somewhat disagree (2), and very much disagree (1).

All of the items will be placed in the present time with no past or future references.

Introductory statement for the index: “Please rate each of the following statements based on how you see the world today.”
Appendix D

Item Development Tool

Item Feedback Instructions

Please read the following overview carefully and contact me if the meaning and intent of the index are not clear. What you are being asked to provide is feedback on the content validity of the statements. That is, whether you believe, based on your education, experience, and understanding of existential authenticity (below) and Yalom’s existential givens, that each particular item listed on each of the subscales accurately captures the essence, or part of the essence, of the concepts so defined. Specific feedback is appreciated.

Each subscale is presented in a separate document along with definitions of the existential given intended to be captured in that subscale. There are many more items on each subscale than will be used and some of the items may poorly capture the defined content. It is the goal of the expert feedback process to winnow the items to 10-15 per scale that will be tested with participants. Please feel free to use track changes in Word to cross out items you feel are invalid or to make comments on specific items. If possible it is my preference to have either a phone call or a Skype conversation about your feedback once you have completed it but this is preferred, not required. I also ask that you please not share any of these documents with anyone.

Please know that this work is simply not possible without your input and expertise. I am extremely appreciative of whatever time you have to commit to the project.

An Index Measuring Existential Authenticity

The purpose of this work is to create an index that measures existential authenticity using the existential givens as defined by Irvin Yalom (1980). To be existentially authentic is to live life by looking at the basic life conditions that exist for all people and dealing with them constructively (effectively), rather than creating a world in the mind in which those conditions do not exist. It is the process of facing the existentials of human existence; it is the individual’s understanding and consciousness of the existentials as exhibited by incorporation of the existentials into their world-view and daily life.

Introductory statement for the index: “Please rate each of the following statements based on how you see the world today.” All of the items are placed in the present time with no past or future references. The declarative statements will be evaluated by the respondents using a modified six-point Likert-type scale with responses ranging from very much agree (6), somewhat agree (5), and slightly agree (4) to slightly disagree (3), somewhat disagree (2), and very much disagree (1).

A number of items have been created as reverse-scale items and are indicated by an asterisk and bold font.
Subscale 1

Existential isolation is defined as awareness of our isolation both from creatures and the world; an isolation that runs underneath both interpersonal and intrapersonal isolation; awareness of the unbridgeable gap between self and all else (Yalom, 1980). Existentially authentic individuals have learned to enjoy solitary time, to engage in relationships that are satisfying, and incorporate their awareness of existential isolation into their life choices.

1. I make plans with others so I don’t have to be alone.*

2. We are all ultimately alone but I think I cope well with that.

3. I enjoy alone time.

4. Spending time with friends and family helps me feel less alone in the world.

5. I am not aware of my essential aloneness when I am with family and friends.

6. I am comfortable spending time alone.

7. I reach out to others because we need to help each other cope with our aloneness.

8. We are all alone but work to cope with it every day.

9. I cannot stand to be alone.*

10. My beliefs help me cope with how isolated I feel.

11. I wish other people understood how I feel inside.

12. When I am alone all I can think about is how I wish I was not alone.*

13. We are each alone and maintain relationships to cope with this.

14. We can never understand what happens in each other’s minds.

15. Even though I feel close to my family and friends, I know they cannot see into my mind and that’s ok.

16. I spend all of my time in relationships trying to get closer to others.*

17. I wish someone could understand how I feel, just once.*

18. When you are really close to someone you can tell how they feel and what they think.*
19. When you find your true soul-mate you will understand each other completely.*

20. If my family and friends really loved me, they would understand how I feel and think.*

21. I can never really connect with others deep inside but my relationships with them gives me comfort.

22. Life can be an isolating experience but I find comfort in relationships.

23. Learning to enjoy alone time is a good way to cope with life.

24. I feel panicky when I am alone for too long.*

25. We all need to learn to cope with being alone in life.

26. I try to get close to other people but I fail every time.*

27. I cannot seem to get close to other people.*

28. It is normal to feel alone in life because it is a singular experience.

29. Being alone is what I fear most in life.*

30. I am aware of how alone we are when I am with other people.

31. My relationships are satisfying.
Subscale 2

Existential freedom is defined as awareness of our responsibility for all of our choices; consciousness of our decisions regarding our own world, our life design, our choice and our actions; awareness of a lack of external structure to our lives (Yalom, 1980). Existentially authentic individuals have successfully identified their life choices, including taking responsibility for those choices, and have identified that there are aspects of life over which they have no control.

1. I am at peace with the fact that there are some things in life that I cannot change.

2. I work hard to make myself into the kind of person I want to be.

3. I let other people make decisions for me.*

4. People should make life decisions for themselves.

5. Some things just happen and there is nothing you can do about it.

6. Everything happens for a reason – you just have to figure out the reason.*

7. Bad things happen to good people.

8. I make mistakes in life. It is unavoidable.

9. I take responsibility for the mistakes I make.

10. If I am careful, I can stop bad things from happening.*

11. Every life event happens for a reason.*

12. I am powerless in my life.*

13. I try to make good choices in my life.

14. I live my life as it comes by letting what will happen, happen.*

15. I have no control over what happens to me in my life.*

16. Some things happen that I cannot control, but most of the time I make decisions to move my life in the direction I choose.

17. I live the life others expect me to live.*

18. I am trapped in my life and unable to change it.*
19. Others have more control over my life than I do.*

20. It is up to me to make of my life what I can.

21. I do not think about the choices I make in life. I just let things happen.*

22. I make choices in life even though I know some things happen that I cannot control.

23. I fear making the wrong choice in life so I don’t make them.*

24. Even when you make good choices, some things just don’t work out.

25. Bad things happen to people in life as punishment.*

26. I do what other people tell me to do so I don’t have to take responsibility for mistakes.*

27. When I have a life decision to make, I do my best to make the best possible choice and learn to live with the results, good or bad.

28. Luck has more to do with success in life than making good choices.*

29. I make bad choices because I get bad advice from other people.*

30. When life throws me a curve I do my best to get my life back on track.
Subscale 3

The death existential given is defined as awareness of our own mortality or consciousness of the tension between the inevitability of death and the wish to continue to be (Yalom, 1980). Existentially authentic individuals, while still experiencing anxiety about death, allow knowledge of that inevitable outcome to enter into their worldview and daily life decisions.

1. I have decided what I believe happens after death.
2. I have come to my own conclusions as to what happens at death.
3. **I do everything I can to avoid thinking about death.***
4. I am at peace with what I believe will happen when I die.
5. I have considered the impact of my death on my loved ones.
6. I understand that death is an inevitable part of life.
7. I think about my own death on occasion.
8. **I push thoughts of death from my mind as soon as I have them.***
9. I don’t like thinking about death, but it is inevitable.
10. **I refuse to think about death.***
11. It is scary to think of dying, but sometimes you have to.
12. If I had children, I would talk to them about death.
13. It is important to prepare yourself for your own inevitable death.
14. I don’t like to think about my own death, but it is silly to pretend it will not happen.
15. I am always aware that I will die someday, at least on some level in my mind.
16. Death is inevitable and I am aware of it every day.
17. **Thinking about dying is to be avoided at all cost.***
18. I don’t like thinking about my own death, but it is important to be realistic.
19. **It does not bother me at all to think about dying.***
20. Thinking about dying is scary but is it always in my mind on some level.
21. Dying is an important part of life.

22. **I only think about my own death when I am forced to.***

23. I know I will die someday so I try to live each day to the fullest.

24. **Thinking about my own death does not bother me at all.***

25. It is upsetting to think about dying but it can’t be escaped.

26. It is important to remember that we will all die some day because it makes a difference in how we live our lives.

27. **I prefer to avoid thinking about dying.***

28. I have made peace with the fact that I will die some day.

29. I don’t want to die, but it is part of life.

30. I know I will die. I don’t like it but it cannot be escaped.

31. **I prefer to pretend that I will never die.***
Subscale 4

Existential meaninglessness is defined as awareness that with the reality of death, loneliness and lack of external structure, there is no inherent meaning in life (Yalom, 1980). Existentially authentic individuals have successfully constructed a meaningful worldview for themselves and make life choices that incorporate the meaning they construct for their life.

1. I have a clear purpose in life that I think about most every day.

2. I don’t have to think about meaning in life because my religion does that for me.*

3. I wish someone would just tell me what the point of life is.*

4. I find something meaningful to savor about each day.

5. I find meaning in life every day.

6. I have worked out why I am here on earth.

7. Even though life itself may have no meaning, we can give it meaning.

8. I have beliefs that sustain me and give my life meaning.

9. My daily life is pointless and I struggle to find meaning in it.*

10. Life is hard but if you try, you can find meaning and beauty in it.

11. I think life is pointless.*

12. I make life choices based on the important things in my life.

13. Life does not have a meaning of its own, but I have found meaning in mine.

14. We are born and we die – there is no meaning in that.*

15. I view life in a way that gives it meaning and purpose.

16. Sometimes it is a struggle, but I find meaning in life every day.

17. Life would have more meaning if I was sure why I am here.*

18. I am actively looking for a way to find meaning in life.*

19. My philosophy of life is that life is what we make of it.

20. My beliefs give meaning to my life, even when nothing else does.
21. My life has no real meaning and I don’t care about that.*

22. We each need to find our own meaning in life and I work hard to do that.

23. I wish I knew the meaning of life – it would make life so much easier.*

24. I find meaning and purpose in life most every day.

25. It is important to find meaning in life because it is not there unless you do.

26. I would try harder in life if there was some meaning to it all.*

27. I count on the meaning I have found in life to get me through the rough days.

28. Life has no meaning of its own, but we can give it meaning.

29. Others have found meaning in life but I don’t seem to be able to.*

30. My worldview helps me find meaning in life.
1. What year were you born? ____________

2. Are you male or female?
   a. Female
   b. Male

3. Are you of Hispanic, Latino, or Spanish origin?
   a. No, I am not of Hispanic, Latino, or Spanish origin
   b. Yes, Mexican, Mexican American, Chicano
   c. Yes, Puerto Rican
   d. Yes, Cuban
   e. Yes, another Hispanic, Latino, or Spanish origin

4. What is your race? (check one or more)
   a. White
   b. Black, African American or Negro
   c. American Indian or Alaska Native
   d. Asian Indian
   e. Chinese
   f. Filipino
   g. Japanese
   h. Korean
   i. Vietnamese
   j. Other Asian
   k. Native Hawaiian
   l. Guamanian or Chamorro
   m. Samoan
   n. Other Pacific Islander
   o. Some other race

5. Which of the following best describes your current relationship status?
   a. Married
   b. Widowed
   c. Divorced
   d. Separated
   e. In a domestic partnership or civil union
   f. Single but cohabitating with a significant other
   g. Single, never married

6. Do you identify with any of the following religions? (Please select all that apply.)
   a. Protestantism
b. Catholicism  
c. Christianity  
d. Judaism  
e. Islam  
f. Buddhism  
g. Hinduism  
h. Native American  
i. Inter/Non-denomination  
j. No religion  
k. Other  

7. What is the highest level of school you have completed or the highest degree you have received?  
a. Less than high school degree  
b. High school degree or equivalent (e.g., GED)  
c. Some college but no degree  
e. Associate degree  
f. Bachelor degree  
g. Master degree  
h. Doctoral degree  

8. Please provide the zip code for your mailing address. _____________  

SECTION 2  
Please rate each of the following statements based on how you see the world today.  

(Each question will include a Likert Scale with the following choices:  
Very Much Agree  
Somewhat Agree  
Slightly Agree  
Slightly Disagree  
Somewhat Disagree  
Very Much Disagree)  

(All of the following questions will be randomized in the order presented)  

9. I make plans with others so I don’t have to be alone.**  
10. We are all ultimately alone but I think I cope well with that.  
11. I reach out to others because we need to help each other cope with our aloneness.  
12. I cannot stand to be alone.**  
13. When I am alone all I can think about is how I wish I was not alone.**  
14. We are each alone and maintain relationships to cope with this.  
15. I spend all of my time in relationships trying to get closer to others.  
16. Life can be an isolating experience but I find comfort in relationships.**  
17. Learning to enjoy alone time is a good way to cope with life.  
18. I feel panicky when I am alone for too long.**
19. We all need to learn to cope with being alone in life.
20. Being alone is what I fear most in life.**
22. In general I find relationships to be satisfying.
23. I work hard to make myself into the kind of person I want to be.
24. I let other people make decisions for me.**
25. I take responsibility for the mistakes I make.
26. I have no control over what happens to me in my life.**
27. Some things happen that I cannot control, but most of the time I make decisions to move my life in the direction I choose.
28. I am trapped in my life and unable to change it.**
29. Others have more control over my life than I do.**
30. It is up to me to make of my life what I can.
31. I make choices in life even though I know some things happen that I cannot control.
32. I do what other people tell me to do so I don’t have to take responsibility for mistakes.**
33. When I have a life decision to make, I do my best to make the best possible choice and learn to live with the results, good or bad.
34. I do everything I can to avoid thinking about death.**
35. I understand that death is an inevitable part of life.
36. I think about my own death on occasion.
37. I push thoughts of death from my mind as soon as I have them.**
38. I refuse to think about death.**
39. It is important to prepare yourself for your own inevitable death.
40. Dying is an important part of life.
41. I only think about my own death when I am forced to.**
42. I know I will die someday so I try to live each day to the fullest.
43. It is important to remember that we will all die some day because it makes a difference in how we live our lives.
44. I have made peace with the fact that I will die some day.
45. I prefer to pretend that I will never die.**
46. I have a clear purpose in life that I think about most every day.
47. I wish someone would just tell me what the point of life is.**
48. Even though life itself may have no meaning, we can give it meaning.
49. My daily life is pointless and I struggle to find meaning in it.**
50. Life is hard but if you try, you can find meaning and beauty in it.
51. Sometimes it is a struggle, but I find meaning in life every day.
52. My philosophy of life is that life is what we make of it.
53. My life has no real meaning and I don’t care about that.**
54. We each need to find our own meaning in life and I work hard to do that.
55. Life has no meaning of its own, but we can give it meaning.
56. Others have found meaning in life but I don’t seem to be able to.**
57. I accept that life has no inherent meaning.
Appendix F

Consent Form

Adult Consent Form for Research
University of Cincinnati
Department: College of Nursing
Principal Investigator: Misty Richmond, doctoral candidate
Faculty Advisor: Denise Gormley, PhD

Title of Study:
Development of an Index for Measuring Existential Authenticity

Introduction:
You are being asked to take part in a research study. Please read this information carefully.

Who is doing this research study?
The person in charge of this research study is Misty Richmond, Doctoral Candidate of the University of Cincinnati (UC) College of Nursing. She is being guided in this research by Denise Gormley, PhD.

What is the purpose of this research study?
The purpose of this research study is to develop an instrument that will be used to evaluate the thoughts and feelings of adults regarding specific aspects of their day-to-day life.

Who will be in this research study?
Between 300 and 400 people will take part in this study. You may be in this study if you are over 18 years of age, read and write English, have a high school diploma or a GED, and live at the address listed on the recruitment postcard. Only one person per household may complete the survey.

What will you be asked to do in this research study, and how long will it take?
You will be asked to answer questions. There will be a few questions about you, such as your age, gender, marital status, ethnicity, and education. Other questions will ask you to evaluate statements and determine how accurately they describe how you think and feel about issues that impact your day-to-day life. It will take about 15 minutes to complete the survey.

Are there any risks to being in this research study?
Some questions may make you uncomfortable. You can refuse to answer any questions that you don't want to answer.

Are there any benefits from being in this research study?
You will probably not get any benefit from taking part in this study but it may help the researchers increase their understanding of human thoughts, feelings and behavior.

What will you get because of being in this research study?
A $5 gift card for Starbucks will be mailed to you as a thank you for participating in the study.
Do you have choices about taking part in this research study?
If you do not want to take part in this research study you should simply close your web browser. You may do this at any time during the survey.

How will your research information be kept confidential?
The researcher cannot promise that information sent by the internet will be private. Access to the research data will be restricted to the research team only. Participant’s names and dates of birth will not be collected. Addresses collected on the website will be used to mail gift cards only and will not be connected to a specific survey at any time. The data from this study may be published but individuals will not be identified. Your responses may be kept for future research.

Agents of the University of Cincinnati may inspect study records for audit or quality assurance purposes.

What are your legal rights in this research study?
Nothing in this consent form waives any legal rights you may have. This consent form also does not release the investigator, the institution, or its agents from liability for negligence.

What if you have questions about this research study?
If you have any questions or concerns about this research study, you should contact Misty Richmond at mistym.richmond@uc.edu or 513-284-4659. You may contact Denise Gormley at gormledk@ucmail.uc.edu.

The UC Institutional Review Board reviews all research projects that involve human participants to be sure the rights and welfare of participants are protected.

If you have questions about your rights as a participant or complaints about the study, you may contact the UC IRB at (513) 558-5259. Or, you may call the UC Research Compliance Hotline at (800) 889-1547, or write to the IRB, 300 University Hall, ML 0567, 51 Goodman Drive, Cincinnati, OH 45221-0567, or email the IRB office at irb@ucmail.uc.edu.

Do you HAVE to take part in this research study?
No one has to be in this research study. Refusing to take part will NOT cause any penalty or loss of benefits that you would otherwise have. You may start and then change your mind and stop at any time. To stop being in the study, you should simply stop responding to the questions and close the browser window.

BY COMPLETING THE SURVEY YOU INDICATE YOUR CONSENT FOR YOUR ANSWERS TO BE USED IN THIS RESEARCH STUDY.

PLEASE DOWNLOAD AND KEEP THIS INFORMATION SHEET FOR YOUR REFERENCE.
Appendix G

Final IRB Approval

Institutional Review Board - Federalwide Assurance #00003152
University of Cincinnati

Date: 2/4/2015
From: UC IRB
To: Principal Investigator: Misty Richmond
CON AD for Nursing Research
Re: Study ID: 2013-5720
Study Title: Development of an Index for Measuring Existential Authenticity

This study expires on: 9/22/2015.

An amendment to the above referenced protocol was reviewed and APPROVED using an EXPEDITED review procedure as set forth in 45 CFR 46.110(b) on 2/4/2015.

Revised Study Documents
Consent form
Postcard

Please note the following requirements:

Consent Requirements
Per 45 CFR 46.117 (21 CFR 56.109) the IRB has waived the requirement to obtain DOCUMENTATION of informed consent for all adult participants.

Parental Permission Requirements
There are no items to display

Assent Requirements
There are no items to display

HIPAA Requirements
There are no items to display

Language
There are no items to display
OTHER APPROVALS: Principal investigators are responsible for maintaining approval from other applicable review committees and performance sites. This includes, but is not limited to, Divisional Scientific Review committee, General Clinical Research Center (GCRC), Radiation Safety, Institutional Biosafety Committee (IBC), Conflict of Interest (COI) Committee, and any sites (i.e. schools, hospitals) where the research may be conducted. Principal investigators are also responsible for maintaining approval from the FDA and a valid contract between the sponsor and this institution, as applicable. If any of these entities require changes to the IRB-approved protocol and/or informed consent/assent document(s), the changes must be submitted to and approved by the IRB prior to implementation.

AMENDMENTS: The principal investigator is responsible for notifying the IRB of any changes in the protocol, participating investigators, procedures, recruitment, consent forms, FDA status, or conflicts of interest. Approval is based on the information as submitted. New procedures cannot be initiated until IRB approval has been given. If you wish to change any aspect of this study, please submit an Amendment via ePAS to the IRB, providing a justification for each requested change.

CONTINUING REVIEW: The investigator is responsible for notifying the IRB of any changes in the protocol, participating investigators, procedures, recruitment, consent forms, FDA status, or conflicts of interest. Approval is based on the information as submitted. New procedures cannot be initiated until IRB approval has been given. If you wish to change any aspect of this study, please submit an Amendment via ePAS to the IRB, providing a justification for each requested change.

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CONTINUING REVIEW: The investigator is responsible for notifying the IRB of any changes in the protocol, participating investigators, procedures, recruitment, consent forms, FDA status, or conflicts of interest. Approval is based on the information as submitted. New procedures cannot be initiated until IRB approval has been given. If you wish to change any aspect of this study, please submit an Amendment via ePAS to the IRB, providing a justification for each requested change.

UNANTICIPATED PROBLEMS: The investigator is responsible for reporting unanticipated problems promptly to the IRB via ePAS according to current CCHMC reporting policy found on CenterLink.

STUDY COMPLETION: The investigator is responsible for notifying the IRB by submitting a Request to Close via ePAS when the research, including data analysis, has completed.

Statement regarding International conference on Harmonization and Good Clinical Practices: The Institutional Review Board is duly constituted (fulfilling FDA requirements for diversity), has written procedures for initial and continuing review of clinical trials; prepares written minutes of convened meetings, and retains records pertaining to the review and approval process; all in compliance with requirements defined in 21 CFR Parts 50, 56 and 312 Code of Federal Regulations. This institution is in compliance with the ICH GCP as adopted by FDA/DHHS.

Thank you for your cooperation during the review process.

§46.110. Expedited review procedures for certain kinds of research involving no more than minimal risk, and for minor changes in approved research.

§46.108(b) An IRB may use the expedited review procedure to review either or both of the
following:

1. some or all of the research appearing on the list and found by the reviewer(s) to involve no more than minimal risk,
2. minor changes in previously approved research during the period (of one year or less) for which approval is authorized.

Under an expedited review procedure, the review may be carried out by the IRB chairperson or by one or more experienced reviewers designated by the chairperson from among members of the IRB. In reviewing the research, the reviewers may exercise all of the authorities of the IRB except that the reviewers may not disapprove the research. A research activity may be disapproved only after review in accordance with the non-expedited procedure set forth in §46.108(b).
Table 4

Demographic Data

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<th></th>
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<th>Survey Respondents n=222</th>
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<td>48.3% c</td>
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<td>- Widowed</td>
<td>5.9% b</td>
<td></td>
<td>4.1% c</td>
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<td>- Divorced</td>
<td>11.1% b</td>
<td></td>
<td>9.6% c</td>
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<td>- Some college</td>
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<td>11.3% c</td>
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<td>- Bachelors degree</td>
<td>18.0% d</td>
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<td>31.5% c</td>
</tr>
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<td>- Graduate or professional degree</td>
<td>10.4% d</td>
<td></td>
<td>23.9% c</td>
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<tr>
<td>Hispanic/Latino</td>
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<td>1.9% c</td>
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<td></td>
<td></td>
<td></td>
<td>n=221</td>
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<tr>
<td>Race</td>
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<tr>
<td>- White</td>
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<td>9.5% c</td>
</tr>
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<td>- Native American</td>
<td>0.2% a</td>
<td></td>
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</tr>
<tr>
<td>- Other/Mixed race</td>
<td>2.9% a</td>
<td></td>
<td>5.9% c</td>
</tr>
</tbody>
</table>

a = entire population
b = age 15 and over
c = age 18 and over
d = age 25 and over
Appendix H

Numbered Survey Items

Isolation Items

1. I make plans with others so I don’t have to be alone.**
2. We are all ultimately alone but I think I cope well with that.
3. I reach out to others because we need to help each other cope with our aloneness.
4. I cannot stand to be alone.**
5. When I am alone all I can think about is how I wish I was not alone.**
6. We are each alone and maintain relationships to cope with this.
7. I spend all of my time in relationships trying to get closer to others.
8. Life can be an isolating experience but I find comfort in relationships.**
9. Learning to enjoy alone time is a good way to cope with life.
10. I feel panicky when I am alone for too long.**
11. We all need to learn to cope with being alone in life.
12. Being alone is what I fear most in life.**
13. I enjoy alone time.
14. In general I find relationships to be satisfying.

Freedom Items

1. I work hard to make myself into the kind of person I want to be.
2. I let other people make decisions for me.**
3. I take responsibility for the mistakes I make.
4. I have no control over what happens to me in my life.**
5. Some things happen that I cannot control, but most of the time I make decisions to move my life in the direction I choose.
6. I am trapped in my life and unable to change it.**
7. Others have more control over my life than I do.**
8. It is up to me to make of my life what I can.
9. I make choices in life even though I know some things happen that I cannot control.
10. I do what other people tell me to do so I don’t have to take responsibility for mistakes.**
11. When I have a life decision to make, I do my best to make the best possible choice and learn to live with the results, good or bad.
Death Items

1. I do everything I can to avoid thinking about death.**
2. I understand that death is an inevitable part of life.
3. I think about my own death on occasion.
4. I push thoughts of death from my mind as soon as I have them.**
5. I refuse to think about death.**
6. It is important to prepare yourself for your own inevitable death.
7. Dying is an important part of life.
8. I only think about my own death when I am forced to.**
9. I know I will die someday so I try to live each day to the fullest.
10. It is important to remember that we will all die some day because it makes a difference in how we live our lives.
11. I have made peace with the fact that I will die some day.
12. I prefer to pretend that I will never die.**

** = reverse scored items

Meaning Items

1. I have a clear purpose in life that I think about most every day.
2. I wish someone would just tell me what the point of life is.**
3. Even though life itself may have no meaning, we can give it meaning.
4. My daily life is pointless and I struggle to find meaning in it.**
5. Life is hard but if you try, you can find meaning and beauty in it.
6. Sometimes it is a struggle, but I find meaning in life every day.
7. My philosophy of life is that life is what we make of it.
8. My life has no real meaning and I don’t care about that.**
9. We each need to find our own meaning in life and I work hard to do that.
10. Life has no meaning of its own, but we can give it meaning.
11. Others have found meaning in life but I don’t seem to be able to.**
12. I accept that life has no inherent meaning.

** = reverse scored items
Table 7

*Age Group ANOVA Findings*

<table>
<thead>
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<td>Death 1</td>
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<tr>
<td>Death 6 a</td>
<td>.000</td>
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<tr>
<td>Death 7 a</td>
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<td>Death 12</td>
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*a = Items already removed based on other findings

*p < .05*
Table 13

*Factor Analysis for Unrotated Loadings > .5 on Factor One*

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<th>Item ID</th>
<th>Statement</th>
<th>Loadings</th>
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<td>Meaning 11</td>
<td>Others have found meaning in life but I don’t seem to be able to. <strong>b</strong></td>
<td>.696</td>
</tr>
<tr>
<td>Meaning 4</td>
<td>My daily life is pointless and I struggle to find meaning in it. <strong>b</strong></td>
<td>.687</td>
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<td>Death 9</td>
<td>I know I will die someday so I try to live each day to the fullest.</td>
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<td>Some things happen in life that I cannot control but most of the time I make decisions to move my life in the direction I choose.</td>
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<tr>
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<td>We each need to find our own meaning in life and I work hard to do that.</td>
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</tr>
<tr>
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<td>My life has no real meaning and I don’t care about that. <strong>b</strong></td>
<td>.581</td>
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<tr>
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<td>I do what others tell me to do so I don’t have to take responsibility for mistakes. <strong>b</strong></td>
<td>.574</td>
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<tr>
<td>Isolation 14</td>
<td>In general I find relationships satisfying.</td>
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<tr>
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<td>I work hard to make myself into the kind of person I want to be.</td>
<td>.560</td>
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<td>My philosophy of life is that life is what we make of it.</td>
<td>.559</td>
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<td>I enjoy alone time.</td>
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**a** - items removed from the final form of the scale  

**b** - reverse items
Table 14

*Item Distribution Characteristics*

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* - items removed from the final form of the index
Table 15

*Item Response Distribution*

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* - items removed from the final form of the index
Appendix H
Richmond Authenticity Scale

Please rate each of the following statements based on how you see the world today.

1. I have a clear purpose in life that I think about most every day.

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<th>Very Much Agree</th>
<th>Somewhat Agree</th>
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<td>4</td>
<td>5</td>
<td>6</td>
</tr>
</tbody>
</table>

2. I do what others tell me to do so I don’t have to take responsibility for mistakes.

<table>
<thead>
<tr>
<th>Very Much Agree</th>
<th>Somewhat Agree</th>
<th>Slightly Agree</th>
<th>Slightly Disagree</th>
<th>Somewhat Disagree</th>
<th>Very Much Disagree</th>
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</thead>
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<td>4</td>
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<td>6</td>
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</table>

3. In general I find relationships satisfying.

<table>
<thead>
<tr>
<th>Very Much Agree</th>
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<th>Slightly Agree</th>
<th>Slightly Disagree</th>
<th>Somewhat Disagree</th>
<th>Very Much Disagree</th>
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</tr>
</tbody>
</table>

4. Others have found meaning in life but I don’t seem to be able to.

<table>
<thead>
<tr>
<th>Very Much Agree</th>
<th>Somewhat Agree</th>
<th>Slightly Agree</th>
<th>Slightly Disagree</th>
<th>Somewhat Disagree</th>
<th>Very Much Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
</tbody>
</table>

5. My philosophy of life is that life is what we make of it.

<table>
<thead>
<tr>
<th>Very Much Agree</th>
<th>Somewhat Agree</th>
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</tr>
</tbody>
</table>

6. I know I will die someday so I try to live each day to the fullest.

<table>
<thead>
<tr>
<th>Very Much Agree</th>
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7. I enjoy alone time.

<table>
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<tr>
<th>Very Much Agree</th>
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</table>
8. My daily life is pointless and I struggle to find meaning in it.

<table>
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</table>

9. Some things happen in life that I cannot control but most of the time I make decisions to move my life in the direction I choose.

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10. I work hard to make myself into the kind of person I want to be.

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</tbody>
</table>

11. When I have a life decision to make I do my best to make the best possible choice and learn to live with the results, good or bad.

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</table>

12. We each need to find our own meaning in life and I work hard to do that.

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</tr>
</tbody>
</table>
Table 16

*Items Removed Based on Demographic Variables*

<table>
<thead>
<tr>
<th>Gender</th>
<th>Education</th>
<th>Age Groups</th>
</tr>
</thead>
<tbody>
<tr>
<td>Isolation 2</td>
<td></td>
<td>*</td>
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<tr>
<td>Isolation 7</td>
<td></td>
<td>*</td>
</tr>
<tr>
<td>Isolation 10</td>
<td></td>
<td>*</td>
</tr>
<tr>
<td>Isolation 11</td>
<td></td>
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</tr>
<tr>
<td>Death 1</td>
<td></td>
<td>*</td>
</tr>
<tr>
<td>Death 2</td>
<td></td>
<td>*</td>
</tr>
<tr>
<td>Death 3</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Death 6</td>
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<td>Death 12</td>
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<tr>
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</tr>
<tr>
<td>Freedom 9</td>
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<td>*</td>
</tr>
<tr>
<td>Meaning 2</td>
<td></td>
<td>*</td>
</tr>
<tr>
<td>Meaning 5</td>
<td></td>
<td>*</td>
</tr>
</tbody>
</table>

* = significant relationship, \( p < .05 \)