

Scale for the Assessment of Motivation for Change

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Abstract

The study focusses on the scale developed by the author that measures motivation for change. This scale has been administered to alcohol dependent individuals and normals. The results obtained showed that alcohol dependent subjects had deficits in the nature of motivation as compared to normals. The purpose of the paper is to provide the items comprising the scale, the scoring key, and norms. Assessing motivation for change in various clinical conditions is essential so that high risk subjects can be detected and treatment can be focussed to those with a chance for success.

Key words -

Scale,

Norms,

Scoring key

Motivational basis of human behaviour is a subject of much discussion and investigation. Very few attempts have been made in understanding as to what aspects measure motivation. Therefore there has been a growing need for a reliable and valid tool to measure this construct.

The usefulness of this construct has been demonstrated by research in diverse areas more so in various clinical conditions. If one broadly defines motivation as the set of all variables which arise, sustain and direct behaviour [1] then most clinicians would agree that motivation plays some part in patient's attendance and participation in treatment.

In the past two decades there have been numerous studies of the relationship between patient motivation and the process and outcome of psychotherapy but what is meant by the term 'patient motivation' has not become clear. If anything there has been a diffusion of the concept as different authors offer a profusion of elements said to be relevant for psychotherapy.

The article focusses on the items that measure motivation for change in the clinical sample more so in the alcohol dependent individuals, the scoring key and the norms. So far, there is no comprehensive tool to measure this aspect in the alcohol dependent individuals. The need to evaluate motivation is crucial here so that high risk subjects can be detected. Screening for motivation is important if treatment should be focussed to those with a chance for success and also by this assessment of motivation one can plan out treatment programme to enhance person's motivation to change. By knowing an individual's initial response to treatment we can also predict later success.

Method

The face validity of the scale was first established, after which the items evolved were administered to a normal sample of 600 male subjects in whom psychiatric illness was ruled out. The data thus obtained was subjected to factor analysis. Six factors were obtained which accounted for 55.2% of variance. These together formed a 80 item 5 point scale and norms were established on a sample of 600 normal subjects. The readers are directed to refer the previous publication of the authors for the details of standardisation, validity, interpretation of the scale and reliability [2], [3].

Forty-three positively worded items and 37 negatively worded items together formed the 80 items scale.

Refer to Appendices A1 and A2 for the items of the scale, and Tables I-VIII for the factors that have emerged, conversion score and the norms.

Table I - Raw scores and corresponding standard scores on the normative group N=600, for Factor I Self Esteem

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Table II - The raw scores and corresponding standard scores on the normative group N=600, for Factor II Locus of Control - Internal

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Table III - The raw scores and corresponding standard scores on the normative group N=600, for Factor III Drinking related - Locus of Control - Internal

Table III - The raw scores and corresponding standard scores on the normative group N=600, for Factor III Drinking related - Locus of Control - Internal

Table IV - The raw scores and corresponding Standard Scores on the Normative group N=600, Factor IV - Growth Motivation

Table IV - The raw scores and corresponding Standard Scores on the Normative group N=600, Factor IV - Growth Motivation

Table V - The raw scores and corresponding standard scores on the normative group N=600, Factor V - Religious Attitude

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Table VI - The raw scores and corresponding standard scores on the Normative group N=600, Factor VI - Self Criticality

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group N=600, Factor VI - Self Criticality

Table VII - Standard scores equivalent for the total raw scores for 80 items Motivation Scale on Normative Sample of 600 subjects

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Table VIII - The mean and S.D. of the normalized standard scores of the Normative group (N=600) on the 80 item scale. Their age range was 21-50 years, Education 7-18 years

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Scoring

The scoring of the Motivation Scale is as follows:

For the positively recorded items (* denotes positively worded items in the appendix) strongly agree (SA) refers to the agreement of the statement by the examiner, i.e., 100%. The rest refers to the presence in lesser degree where strongly disagree is (not present at all at any time) i.e., 0%: Strongly Agree (SA) gets a score of 4, a score of 3 for agree (A), 2 for undecided (UD), 1 for disagree (DA), 0 for strongly disagree (SD). The reverse is for the negatively worded items (** denotes negatively worded items in the appendix).

The highest possible score, i.e., the first two sub-scale i.e., Factor I Self-Esteem and Factor II Locus of Control - Internal (Intrinsic Motivation) is 80 and minimum score is 20. the highest possible score for the remaining 4 subscales i.e., Factor III - Drinking related Locus of Control (Internal), Factor IV Growth Motivation, Factor V - Religious attitude, Factor VI - Self-criticality is 40 and minimum is 10. Higher the score, higher the motivation to change. subscales II and III i.e., Locus of Control - Internal (Intrinsic Motivation) and drinking related Locus of Control Internal the scoring is higher the score more internal the individual is with regard to Locus of control.

The reliability of the scale was calculated by using split-half method. The reliability quotient was found to be 0.8975 (0.9) which is highly significant and indicates high internal consistency.

Further clinical validation was established on 30 alcohol dependent subjects and 30 normals.

Discussion

This scale would prove to be an adaptive aid in facilitating the understanding of individuals in normal population as well as those requiring psychiatric help.

Since motivation is a significant component in response to therapy in alcohol dependent individuals, this tool helps in estimating the degree of psychopathology like resistance to change for the better, which may provide prognostic indication as well as indicate modes of psychotherapeutic intervention that will facilitate positive change.

The scale is also being tried out on other clinical conditions other than alcohol dependent individuals.

APPENDIX - A1 - Scale for assessment of motivation for change

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A - agree

UD - undecided

DA - Disagree

SD - strongly disagree

APPENDIX - A2 - The 80 item Motivation Scale consist of 6 sub-scales that have emerged as significant factors. They are:

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1.Madsen K B, *Theories of motivation, Kent, Oh: Kent State University press*1968

2.Neeliyara T, Nagalakshmi S V, [Motivation for change in alcohol dependent individuals]
NIMHANS Journal Page: 11(2): 155-9, 1993

3.Neeliyara T, Nagalakshmi S V, Development of Motivation Scale - Clinical Validation with Alcohol dependents

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