DOCUMENT SUMMARY

This document is the foundational research article by Bagby, Parker, and Taylor (1994) detailing the development and validation of the **twenty-item Toronto Alexithymia Scale (TAS-20)**. The paper outlines the process of revising the original TAS to address psychometric shortcomings. Through two studies with both nonclinical and clinical samples, the authors establish the **TAS-20** as a reliable and valid self-report measure of **alexithymia**. The research confirms a stable three-factor structure for the construct: (1) difficulty identifying feelings, (2) difficulty describing feelings, and (3) externally-oriented thinking.

FILENAME

Bagby 1994 research article toronto alexithymia scale tas20

METADATA

- Primary Category: RESEARCHDocument Type: research article
- Relevance: Core
- Update Frequency: Static
- **Tags**: #alexithymia, #tas-20, #psychometrics, #assessment, #emotional-awareness, #interoception, #self-report-scale
- Related Docs: This paper provides the validation for one of the key instruments mentioned in "Neurodivergent Cognitive Strengths and Dimensional Assessment."

FORMATTED CONTENT

THE TWENTY-ITEM TORONTO ALEXITHYMIA SCALE—I. ITEM SELECTION AND CROSS-VALIDATION OF THE FACTOR STRUCTURE

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Abstract

Addressing shortcomings of the self-report **Toronto Alexithymia Scale (TAS)**, two studies were conducted to reconstruct the item domain of the scale. The first study resulted in the development of a new twenty-item version of the scale—the **TAS-20**. The **TAS-20** demonstrated good internal consistency and test-retest reliability, and a three-factor structure theoretically congruent with the **alexithymia** construct. The stability and replicability of this three-factor structure were demonstrated in the second study with both clinical and nonclinical populations by the use of confirmatory factor analysis.

INTRODUCTION

Formulated during the early 1970s, the **alexithymia** construct is generating increasing interest as a possible personality risk factor for a variety of psychiatric and psychosomatic disorders. Investigations of **alexithymia** have been hampered, however, by problems with the various instruments designed to measure the construct.

Recognizing that previous self-report **alexithymia** scales were developed without concern for construct validation, the authors developed the original twenty-six item **Toronto Alexithymia Scale (TAS)**. Though an improvement, several shortcomings of the original **TAS** became apparent, including high correlation between factors and poor theoretical coherency of the "reduced daydreaming" factor. These issues prompted a re-examination and revision of the scale.

AIMS

The aims of this research were: (1) to extract a new set of items from an expanded item pool; (2) to cross-validate the factor structure of the revised scale with both clinical and non-clinical samples; and (3) to assess the convergent, discriminant, and concurrent validity of the revised scale. This first paper covers the first two aims.

STUDY 1: ITEM SELECTION AND SCALE REDEVELOPMENT

Method

A pool of forty-three items (the original 26 TAS items plus 17 new items) was administered to 965 undergraduate students. Items were systematically eliminated if they had a high correlation with social desirability, low item-total correlations, or did not load significantly and uniquely on one of three rotated factors in an exploratory factor analysis.

Results

All items directly assessing imaginal activity (daydreaming) were eliminated because of low internal consistency or high correlations with social desirability. This process resulted in a final 20-item scale, the **TAS-20**.

Factor analysis of the **TAS-20** yielded three interpretable factors that are congruent with the theoretical construct of **alexithymia**:

- Factor 1: Difficulty Identifying Feelings: Comprised of items assessing the capacity to identify feelings and distinguish them from the bodily sensations of emotional arousal.
- Factor 2: Difficulty Describing Feelings: Reflects the inability to communicate feelings to other people.
- Factor 3: Externally-Oriented Thinking: Comprised entirely of items assessing this cognitive style.

The **TAS-20** demonstrated acceptable internal consistency (Cronbach's alpha = 0.81) and good test-retest reliability over 3 weeks (r = 0.77).

STUDY 2: CROSS-VALIDATION OF THE THREE-FACTOR STRUCTURE

Method

The three-factor structure derived from Study 1 was tested using confirmatory factor analysis in separate samples of 401 university students and 218 psychiatric outpatients.

Results

The goodness-of-fit indices (GFI, AGFI, RMS) for the three-factor model met the criteria standards for both the student sample and the psychiatric out-patient sample, signifying an adequate fit.

Results indicated that the three factor solution was better able to reproduce the data than the unidimensional model for both the university student sample and the psychiatric out-patient sample.

Furthermore, the three-factor solution provided a significantly better fit to the data than a two-factor model where the first two factors were combined.

DISCUSSION

The **TAS-20** was developed to surmount the shortcomings of the original **TAS**. The results of these two studies indicate that the three-factor structure of the **TAS-20** is stable and replicable across clinical and nonclinical populations.

Factor 1 correlates strongly with Factor 2, which is expected since the ability to communicate feelings is obviously contingent on an ability to recognize one's own affects. Similarly, Factors 2 and 3 are correlated, as an externally-oriented cognitive style contains little or no reference to a person's inner feelings. Together Factors 2 and 3 appear to reflect the **pensée opératoire** aspect of the alexithymia construct, namely, a cognitive style that shows a preference for the external details of everyday life rather than thought content related to feelings, fantasies, and other aspects of a person's inner experience.

The high coefficient alphas obtained for the full **TAS-20** across samples indicate excellent internal consistency of the revised scale, representing an improvement over the original **TAS**. While the initial evidence of reliability and factorial validity of the **TAS-20** is encouraging, other kinds of evidence (presented in a subsequent paper) are needed to show that the scale measures the **alexithymia** construct in an adequate way.