

# PSYCHOLOGY

## THE RESEARCH OF PERSONALITY LIFE SUPPORT SYSTEM

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### **DEVELOPMENT AND APPROBATION OF THE PROJECTIVE VERSION OF "PERSONALITY LIFE SUPPORT LOCUS" TEST\***

*SUMMARY. The development of a projective version of the methodology for determining the locus of a personality life-support is described, and the variants of the stimulus material methods are considered. The situation in the sphere of psychodiagnostics in Russian psychology is analyzed, and the problems connected with the outdated psychometric instruments usage as well as the problem of the protective-adaptive mechanisms diagnostics are highlighted. The preliminary results of the first developmental stage are given. The comparison of the results concerning the projective and the questionnaire versions of "Locus of life-support" is made. Poor correlations between the levels of a personality life-support system diagnosed with the help of different methodical versions are explained. The significance of both personality life-support levels (the main as well as the secondary) was found using the projective methodological version. The specific dynamics of protective responses and strategies is investigated at different stages of frustrating situation deployment. Different kinds of dynamics (direct, inverse, inconsistent and missing) are revealed. The further steps for the methods versions development concerning "Locus of life-support" (questionnaire, projective and psychosemantical versions) are planned.*

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**KEY WORDS.** *The personality life-support, diagnostics of the life-support locus, psychometric test, a projective test.*

Russian psychologists have to apply the diagnostic methods designed or adapted more than 50 years ago. Even though the Internet develops and the good complex methods become wide-spread (for example, Kettle's (16-PF), MMPI and others), their reliability decreases. Modern quality psychometric tools leave much to be desired [1].

There is the lack of the methods to research the defensive-adaptive mechanisms and personality resources. It surely influences the ways these phenomena are interpreted and studied. There is no convenient and reliable methodology of the integral defensive-adaptive diagnostics of the personality resources: the existing approaches research separate resources or their complexes to define the intensity of a certain level [2, 3].

The questionnaire «Life Support Locus» by M.V. Bogdanova and V.A. Dudin presents the methodology which makes it possible to carry out an integral diagnostics [4]. The methodology results confirmed the necessity of getting more complete characteristics for each level of the life support system of a person (LSSP) [5] in order to differentiate these levels more exactly. To achieve this goal, a special projective method is believed to be perfect. It allows to empirically verify the theoretical concept of LSSP. The questionnaire “reveals” only the surface level of a person's perception of his\her life support techniques and resources; while the projective method uncovers the deepest («nuclear») life support processes [6, 7].

Besides, the researchers of the coping behaviour (N.A. Sirota, V.M. Yaltonskiy) [8] put up a question about the peculiarities of the defensive-adaptive processes dynamics and their diagnostic complexity. While studying coping with the questionnaire methods, *it is hard to define the sequence of reactions and coping behavior*. Faced with a challenge, a person reacts anyway; then the situation unfolds within oneself — it is lived through, endured and remains relevant until a sustainable attitude to it is being worked out. It is important to consider this process in detail. For example, its length is an indicator of a person's inner work. One can not develop a new attitude to the situation if his\her reactions are mainly physical (at the bottom LSSP level), that's why the situation is endured for a long time. Meanwhile, the upper level of understanding of one's emotional state contributes to a faster change of a person's attitude to the situation; and the transition to the higher levels of response happens. *The evaluation of the defensive-adaptive mechanisms with the consideration of time dynamics, not the first reaction to the situation, seems to be more exact and informative.*

**The objective of the research:** to develop and test the projective version of the personality life support locus diagnostic method.

**The Hypothesis:**

1. There is a main and a secondary LSSP levels. They can be diagnosed with the projective method «Life Support Locus».

2. The data received with the projective method can be correlated with the data of the questionnaire«Life Support Locus».

3. The projective method «Life Support Locus» allows revealing the dynamics of the defensive-adaptive mechanisms.

**The methods of the research:** the social-demographic data questionnaire, the questionnaire «Life Support Locus», the projective method «Life Support Locus». To analyze the data the expert evaluation method, the comparative and the correlation analysis were used.

**Sample:** 30 people aged 20-60. Age and sex distribution within the sample corresponds to the data of the population census in the Russian Federation in 2010. 19 people have higher education, 11 — secondary vocational education.

**The development of the projective version method [9].**

The method is comprised of the descriptions of 20 life crisis situations. The situations were developed by a group of psychologists who used Holmes-Rahe's stress situations scale and the set of the phenomenological descriptions of crisis and frustrating situations. The situations are based on the emotional, cognitive and behavioral manifestations that characterize the LSSP levels (according to the operationalized constructs).

*The level of psychosomatic response is characterized by unawareness of one's own emotions, needs, and motives; as well as by the significant rigidity of the adaptive processes and the inclination «to endure» the situation on the physical level.*

*The level of psychological defenses is characterized by the objective reality distortion, the desire “to get rid of” the source of anxiety and negative emotions.*

*The level of coping-strategies is characterized by a higher degree of the emotional awareness, active position in overcoming hardships.*

*The level of higher personal resources is characterized by the search for personal meaning, by using hardships as incentives for personal development, and by the creative position.*

The projective situations were offered to the testees chronologically in order to diagnose the dynamics of the defensive-adaptive mechanisms. Here is an example of one of the projective situations together with a testee's response and the experts' evaluation.

**The research results.**

**Singling out the main and the secondary levels.** The integral assessment of the distribution of the resources within the LSSP levels showed that during the diagnostic process it is important to take into account the first main level (life support locus, in particular), as well as the secondary levels. So, the experts singled out the variants of the individual results with the similar main locus; however, the secondary level influenced the whole LSSP significantly.

According to Table 1, for the testees from one group (people with higher education, aged 18-35) the coping-strategies level is prevailing. Testees 5 and 8 have the same indicators of the main level of coping-strategies (28), and their secondary level indicators (psychological defenses) are similar (19 и 23). However, testee 5's psychosomatic reaction indicator is 12, and testee 8's indicator of the higher personal resources level is 8. Consequently, these are essentially different profiles; personal adaptive potential is not the same. The applied coping-strategies (productive or non-productive) might be also different, as well as psychological defenses (primary or

secondary), and the flexibility degree (the level of higher personal resources is the most flexible, while the psychosomatic level is the most rigid). That's why it is necessary to consider the adaptive resources integrally, taking into account the correlations of all the indicators.

Table 1

**Comparative Analysis of the Main  
and the Secondary LSSP Levels Indicators**

Level of LSSP	Testees							
	№ 1	№ 2	№ 3	№ 4	№ 5	№ 6	№ 7	№ 8
Level of higher personal resources	3	1	11	3	0	6	0	8
Level of coping-strategies	35	30	35	30	28	22	13	28
Level of psychological defenses	10	18	9	9	19	26	32	23
Psychosomatic level	1	7	2	1	12	2	11	1

**The correlation analysis of the data of the questionnaire and the projective versions of the method.**

According to the correlation analysis, there are weak positive (the level of psychic defenses) and weak negative (the level of copings) connections, as well as no connection at all (the level of psychosomatic response and the level of higher personal resources) (Table 2).

Table 2

**The Results of the Correlation Analysis of the Data of the Questionnaire  
and the Projective Versions**

LSSP levels	<i>p</i> – Spearman
Higher personal resources	0,09
Copings	-0,24
Psychic defenses	0,29
Psychosomatic response	-0,09

The weak connections may be explained by the fact that the questionnaire and the projective versions are meant to diagnose different levels of psychic reality (even though both of them diagnose one and the same phenomenological field). The questionnaire allows evaluating only introspected strategies (realized by a testee after the event — if the levels of psychic defenses or psychosomatic response were activated). While giving answers, a person presents an “averaged” assessment of his\her usual actions and feelings. However, within the projective version one describes his\her actions in a definite situation. The experts noted that if the described situation really happened, the testee's answers correlated with simpler and more primitive reactions (psychosomatic response and defenses). Meanwhile, in the hypothetic

situations, one claimed to use coping behavior or higher personal resources more often. The inclination for socially-approved answers is even stronger within the questionnaire version. It may be partially compensated for by the introduction of a correction scale (by analogy with MMPI). The projective version allows diagnosing not the surface but nuclear, underlying structures of the psychic reality [10]. So, the questionnaire version may be applied in order to screen, to reveal a risk group; while the projective version may be used in the individual work, both diagnostic and consultative one [11].

***The dynamics of the defensive-adaptive resources in a crisis situation***

The method was supposed to reveal a direct dynamics of the defensive-adaptive resources — a transition of the implemented LSSP level from the lowest to the highest one. Here is an example of the direct dynamics:

*Situation 4*

*A. Your relative (a son, a spouse, a parent) took a bank loan. You didn't know about it. He/she didn't pay back for a long time. After a while, the bailiffs came and named the sum to be paid off. It was a huge sum for you. Your relative didn't have this money. Describe your thoughts, actions, feelings in such a situation.*

*The testee answered: «I had a similar situation; at least it was very much alike. I felt puzzled: "How could he do this?" I also had many other mixed feelings: offence, anger, despair, self-pity and so on. At the beginning it seemed to be a dead end. We had to pay back, and we lost a lot of money and even our apartment. So, we had to live in a rented apartment for two years, even though we had a little baby».*

*The expert's assessment - it is the level of psychosomatic response.*

*B. How long will it take you to change your attitude to the situation?*

*The testee answered: "It took me long to change my attitude to the situation. It started to change after I had accepted the situation as inevitable, but first it was more like a psychological defense, I persuaded myself that «everything done is for the better», but gradually I really understood it, though it took me long".*

*Imagine that your attitude has already changed. Describe your thoughts, actions, feelings.*

*The testee answered: "I felt that it was unfair. This feeling prevailed. And I also felt despair. The only possible action was to solve the problem – to pay the money back".*

*The expert's assessment – first, the level of psychological defenses is activated, and then the level of coping-resources is on.*

*C. The situation is over. What are your actions, thoughts, feelings?*

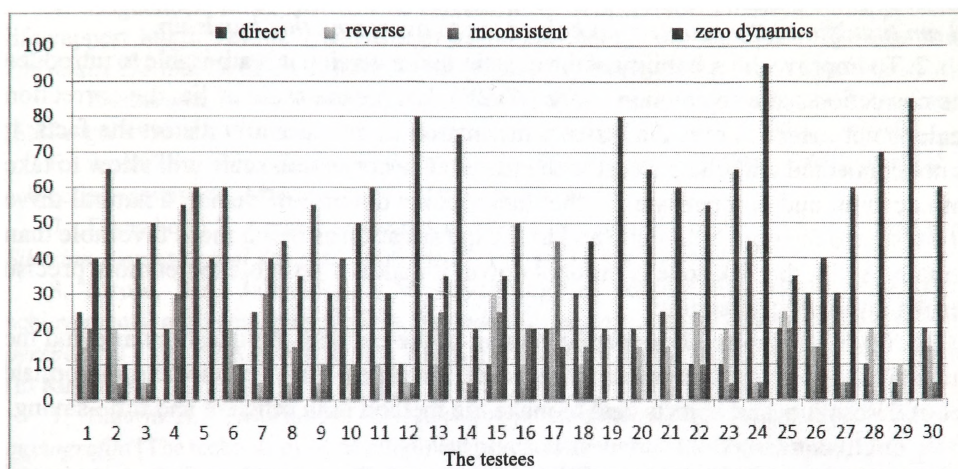
*The testee answered: "It's a valuable experience! And I appreciate it. I know that I am strong, and I don't feel offended, though at first I really was! But optimism, self-confidence, and the ability to look on the bright side of things make it possible to cope with almost any challenges. I have reappraised my values. So now I am absolutely sure that any standoff might be resolved". This is the level of the higher personal resources.*

Except the direct one, other types of dynamics are possible. The experts determined that the LSSP levels dynamics is defined by the individual style of reacting. The

specificity of dynamics is of importance. The experts offered the following classification of the LSSP levels dynamics:

- 1) direct — the transition from the lower levels to the higher ones;
- 2) reverse — the transition from the higher levels to the lower ones (“folding up” of the dynamics),
- 3) inconsistent — different sequence of the level change;
- 4) “zero dynamics” — no change of the adaptive resources level.

The offered classification underlay the qualitative analysis of the dynamics. It allowed to define the type of the dynamics typical for each testee: the number of the situations with each type of the dynamics was evaluated. Then the percentage of different types for each testee was calculated. The results are shown in picture 1.



Pic. 1. The Indicators of the Testees' Dynamics

The prevailing types of the dynamics are distributed as follows. The direct dynamics is prevailing for 48% of the testees. The «zero» dynamics is prevailing for 49% of the testees; the inconsistent dynamics is dominant for 3%.

**The prospects for further improvement** of the projective and the questionnaire versions of the «Life Support Locus» method

1. When creating a new form of the method, it is recommended to offer the answer options chosen by the experts. As a rule, these answers diagnose the LSSP level most accurately. Most experts evaluate these answers in the same way. For example, the following answers were offered for a situation from the projective method (they are presented sequentially from the low level to the upper one: 1 — psychosomatic, 2 — psychological defenses and so on):

*“Imagine that you’ve got seriously injured and are confined to bed. You cannot go on with your previous life style and you do not know how long it will last». Describe your feelings, actions and thoughts in this situation”:*

1. *Despair. Fear. Self-pity.*

2. *I can not believe it has happened to me.*
3. *I try to find some advantages of this situation.*
4. *I am glad that I am alive.*

*How long will it take you to change your attitude to the situation? Imagine that your attitude has already changed. Describe your actions, thoughts, feelings:*

1. *I understand that this is awful — to be confined to bed, to be helpless and dependent on other people / I am angry with myself. I feel that I am a burden for others. I feel offended.*

2. *I feel that this is unfair. "Why me?"*

3. *I think I can take up some interesting activity in spite of any hardships. / My relatives and also my friends helped me.*

4. *I need this situation for some reason; I need to review some aspects of my life. / I am thankful to the people who helped me to overcome this hardship.*

2. To improve the reliability of the questionnaire version it is advisable to introduce the correction scale (by analogy with MMPI). Unlike the scale of lie, the correction scale is not meant to reveal a testee's inclination to intentionally distort the facts; it is not connected with the distrust to the testee. The correction scale will allow to take into account and compensate for the unconscious defense of denial, a natural drive of a testee to be more optimistic and to see the situation as being more favorable than it really is. So, the risk zone is brought down; it makes it possible to get more precise results during the screening.

3. To develop a psychosemantic version of the method, the questionnaire and the projective versions might be taken into account. It will help form a precise and appropriate set of descriptors and objects, and to make the method both efficient and time-saving.

### **Conclusions**

1. The stimulating situations of the projective version have proved to possess good diagnostic capabilities for revealing the relevant LSSP level, both statistically and dynamically.

2. The weak correlative connections between the results of the projective and the questionnaire versions are explained by the specifics and the intensity of the defined constructs: the questionnaire version diagnoses the surface layer of one's self-perception ("as I'm used to act"), distorted by social attitudes and defensive optimism; meanwhile, the projective version diagnoses the underlying (nuclear) structures of the defensive-adaptive resources and also reveals the dynamics of the resources at the different levels of a crisis situation.

3. It has been discovered that the main level is not the only one to define the individual differences in the personal life-support; the secondary levels are also significant. The projective version helps diagnose all the LSSP levels accurately.

4. The research of the adaptive resources dynamics has confirmed the specifics of the individual dynamics. The following types of the dynamics have been singled out: direct (prevailing for 48% of the subjects), reversed (it is not prevailing), inconsistent dynamics (dominant for 49% of the subjects) and «zero» dynamics (dominant for 3% of the subjects).

5. The prospects for further improvement of the projective, questionnaire and psychosemantic versions of the «Life-support locus» method have been designed.

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