

Unmitigated Agency and Unmitigated Communion: Distinctions from Agency and Communion

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The purpose of this paper is to establish the importance of distinguishing unmitigated agency and unmitigated communion from agency and communion. First, we examine the empirical overlap and distinctions among the four constructs. Then, we demonstrate the differential association of unmitigated agency, unmitigated communion, agency, and communion to relationship and health outcomes. We conclude that only unmitigated agency and unmitigated communion are associated with relationship difficulties and poor health. Finally, we distinguish between the difficulties of the unmitigated agency and the unmitigated communion individual by focusing on interpersonal problems. © 1999 Academic Press

Agency and communion were constructs developed by Bakan (1966) to reflect two fundamental modalities of human existence. Agency was linked to a focus on the self and separation, whereas communion was linked to a focus on others and connection. Agency reflects one's existence as an individual, and communion reflects the participation of the individual in a larger organism of which the individual is a part.

These two psychological forces—achieving one's own goals by focusing on the self and helping others to achieve their goals—pervade the psychological literature. These forces are captured in Bakan's (1966) constructs of agency and communion as well as Parson and Bales' (1955) distinctions between instrumental versus expressive roles, the need for achievement (McClelland, Atkinson, Clark, & Lowell, 1976), the need for intimacy (McAdams & Vaillant, 1982), the dominance and nurturance dimensions of the Interpersonal Circle (Wiggins & Trapnell (1996), the anaclitic versus introjective orientations (Blatt & Shichman, 1983), and the instrumentality and expressiveness scales from the Bem Sex Role Inventory (BSRI; Bem,

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1974) and the Personal Attributes Questionnaire (PAQ; Spence, Helmreich, & Stapp, 1974). We acknowledge that Bakan's ideas about agency and communion as broad organizing principles of human existence cannot be completely captured by the operationalization of any of these constructs. However, each of these constructs is consistent with some aspects of Bakan's notions about agency and communion.

Although the constructs of agency and communion have been discussed for several decades, the two related constructs—unmitigated agency and unmitigated communion—have not received nearly as much attention until recently. Bakan (1966) argued that it was important for agency to be mitigated by communion and that “unmitigated agency” would lead to a wide range of health hazards, such as infanticide, cancer, and suicide. Unmitigated agency is a focus on the self to the exclusion of others. It includes being hostile, cynical, greedy, and arrogant. This individual has a negative view of the world and of other people. Hostility is one component of unmitigated agency and a vast literature exists demonstrating the health hazards of hostility. In particular, hostility has been associated with cardiovascular disease and other major life-threatening illnesses (see Smith, 1992, for a review). However, hostility may be one component of a broader propensity to place one's own needs before those of others. In the present article, we explore the health implications of this general category of traits called unmitigated agency.

Similarly, the alternative imbalance of focus—focusing on others to the exclusion of the self or unmitigated communion—could be detrimental to health. Unmitigated communion involves placing others' needs before one's own, worrying excessively about others' problems, and helping others to one's own detriment. Bakan (1966) implied that communion ought to be mitigated by agency but he never directly discussed the implications of unmitigated communion.

Attention to the constructs of unmitigated agency and unmitigated communion may help to clarify a contradictory literature on the associations of agency and communion, as operationalized by the PAQ and BSRI, to relationship and health outcomes. For example, the relations of agency to social support are inconsistent. Agency has been related to greater support satisfaction (Zeldow, Clark, & Daugherty, 1985) and more social contacts (Helgeson, 1990), but also has been unrelated to support satisfaction (Krames, England, & Flett, 1988), unrelated to support receipt (Butler, Giordano, & Neren, 1985), and inversely associated with perceived support (Burda, Vaux, & Schill, 1984). We believe this is due to the failure to disentangle agency from unmitigated agency. The theoretical predictions for the relations of agency to social support outcomes are not clear, whereas the predictions for unmitigated agency are clear. A person who is focused on the self to the

exclusion of others is unlikely to have satisfactory relationships with other people.

Similarly, the relations of communion to psychological distress are inconsistent. We believe this is due to the failure to disentangle communion from unmitigated communion. Communion is usually not related to psychological distress or has a small negative relation to distress (see Helgeson, 1994, for a review). By contrast, unmitigated communion is related to greater distress, partly because such people become overly involved in others' problems, taking on others' distress as their own (Fritz & Helgeson, 1998; Helgeson & Fritz, 1998).

The constructs of unmitigated agency and unmitigated communion are distinct from agency and communion and cannot be reduced to some combination of agency and communion. That is, unmitigated agency is not merely high agency and low communion. A person who scores high on agency and low on communion could be independent and self-confident but not particularly emotional or helpful. This is not equivalent to the features of unmitigated agency—arrogant, greedy, and hostile. Whereas agency and communion are broad dimensions of personality, unmitigated agency is a specific personality trait that incorporates some aspects of agency (focus on the self) while actively dismissing communal traits (focusing on others). Similarly, unmitigated communion is not merely high communion and low agency. For example, high communion and low agency implies an emotional and helpful person who is not independent or self-confident. This is not equivalent to someone who places others' needs before one's own or gets overly involved in others' problems. Do not misunderstand our point: someone who scores high on communion and low on agency could score high on unmitigated communion, but it is not necessarily the case.

There is relatively little work that has examined the relations among the four constructs—agency, communion, unmitigated agency, and unmitigated communion—and their differential implications for relationship and health outcomes. We hope to convince the reader of the necessity of distinguishing unmitigated agency and unmitigated communion from agency and communion. It is only the unmitigated traits that are associated with relationship difficulties and poor health outcomes.

In the first study, we examine the correlations among the four constructs across a series of diverse samples to determine the extent to which these measures are empirically distinct. In the second study, we distinguish unmitigated agency from agency and unmitigated communion from communion by showing that only unmitigated agency and unmitigated communion are associated with problematic relationships and poor health. In this study, we also show that unmitigated agency and unmitigated communion cannot be reduced to some combination of agency and communion. The last two stud-

ies focus on specific issues of divergent validity. In the third study, we show that high unmitigated communion and low agency are linked to depression for different reasons. In the fourth study, we demonstrate that the problems of the unmitigated agency individual and the unmitigated communion individual are distinct by showing differential associations to interpersonal difficulties.

STUDY 1

The first issue we address is the empirical relations among the constructs of agency, communion, and their unmitigated counterparts. Data from six diverse samples are used to address this question. Our predictions are as follows:

1. We predict that agency and communion will be uncorrelated, which is consistent with past research (Spence et al., 1974, 1979).

2. We predict that unmitigated agency and agency will reveal a small positive relation because they both reflect a focus on the self. It is most important that the two are not negatively correlated, as this would suggest that the difference between the two constructs could be one of social desirability alone (i.e., positive versus negative agentic traits).

3. We predict that unmitigated agency will be negatively correlated with communion because it reflects a focus on the self *to the exclusion of others*. Consistent with Bakan's (1966) theory, it is a specific kind of agency that is not independent of communion; it involves a predictable absence of positive communal traits.

4. We expect unmitigated communion and communion to be positively related because both reflect an orientation toward or focus on others. Again, it is most important that the two are not negatively correlated as this would suggest a difference based on social desirability alone.

5. We predict that unmitigated communion will be inversely associated with agency as it reflects a focus on others *to the exclusion of the self*. Unmitigated communion is a specific kind of communion that is not independent of agency; it involves a predictable absence of positive agentic traits.

6. Finally, we expect unmitigated communion and unmitigated agency to be either uncorrelated or negatively correlated. Because the two constructs are conceptually incompatible (i.e., one cannot focus on the self to the exclusion of others and focus on others to the exclusion of the self at the same time), they should never be positively related. If a positive correlation was found, it would suggest that the common core of the two traits could be negativity.

Agency, communion, unmitigated agency, and unmitigated communion are gender-related traits. Typically, men score higher on agency and unmitigated agency, whereas women score higher on communion and unmitigated

communion. This is consistent with Bakan's (1966) ideas that agency is the male principle and communion is the female principle of human existence. Regardless of these sex differences, we expect the traits to have similar associations (or lack thereof) to one another and similar associations to relationship and health outcomes for both men and women. Spence and colleagues (Spence & Helmreich, 1978; Spence et al., 1979) found that the relations among the agency and communion scales hold across men and women. We examined whether the pattern of findings we report below are similar for males and females to increase the generalizability of our conclusions.

Method

Participants

Sample 1. Undergraduate college students ($n = 527$; 289 male, 238 female) who participated in the research requirement that accompanied an introductory level psychology course completed a pretesting questionnaire at the beginning of the semester. Measures of agency, communion, unmitigated agency, and unmitigated communion were included in the pretest packet.

Sample 2. The same procedure was used to accrue the second sample. This sample consisted of 551 undergraduate college students ($n = 551$; 331 male, 220 female).

Sample 3. Undergraduate college students ($n = 85$) participated in a longitudinal study of adjustment to college for course credit. Of the 85, 44 were male and 41 were female. They completed agency, communion, unmitigated agency, and unmitigated communion scales at the start of the experiment.

Sample 4. In a study of adjustment to heart disease, 211 patients (112 male, 99 female) were recruited. Ages ranged from 31 to 80. During the initial in-hospital interview, agency, communion, unmitigated agency, and unmitigated communion were assessed.

Sample 5. An interview study of 91 (43 men, 48 women) university staff was conducted. They completed measures of agency, communion, unmitigated agency, and unmitigated communion prior to the interview.

Sample 6. We interviewed 101 children of women who had been diagnosed with breast cancer within the past 2 years. These women were participating in a randomized trial examining the effects of different support interventions on quality of life (Helgeson, Cohen, Schulz, & Yasko, in press). The children were interviewed by phone and then sent a brief questionnaire. The questionnaire contained the agency, communion, unmitigated agency, and unmitigated communion scales. Of the 101 children, 81 returned the questionnaire. Ages of these participants ranged from 12 to 27, with a mean of 18. The sample was fairly evenly divided by gender (44 female; 37 male).

Instruments

In all six samples, agency, communion, and unmitigated agency were assessed with the three subscales from the Extended Version of the Personal Attributes Questionnaire (Spence et al., 1979). Each subscale consists of eight items, each of which is rated on a 5-point bipolar scale ranging from 1 "not at all" possessing the attribute to 5 "very much" possessing the attribute. Communion items reflect a positive other-orientation, such as "helpful," "aware of other's feelings," "kind," and "understanding of others." Agency items reflect a positive orientation toward the self, such as "independent," "self-confident," "makes decisions easily," and "never gives up." Unmitigated agency items reflect an orientation toward the self to the exclusion of others. Items reflect self-absorption (e.g., arrogant, greedy) and a negative view of others (e.g., hostile, cynical). Across the six samples, the internal consistencies for

the agency scale ranged from .70 to .77, and the internal consistencies for the communion scale ranged from .72 to .81. The internal consistencies for the unmitigated agency scale ranged from .71 to .85, except for sample 3, where it was markedly lower, $\alpha = .60$.

In all six samples, unmitigated communion was assessed with Helgeson's (1993) measure. This scale was originally developed for use with cardiac patients to tap concern for others to the exclusion of the self (Helgeson, 1993). Recently, the scale has been modified by adding one item and altering the wording of several others items to increase generalizability to a wide array of populations (Fritz & Helgeson, 1998). For example, "I have been worried about how my spouse is getting along without me during my hospitalization" was changed to "I worry about how other people get along without me when I am not there." The revised 9-item scale was used in all six samples. Respondents indicated the extent to which they agreed or disagreed with each item on a 5-point scale (sample items include "I always place the needs of others above my own," "I can't say no when someone asks me for help," and "I often worry about other people's problems"). Previous research has shown that this scale demonstrates acceptable internal consistency, ranging from .7 to .8, and high test-retest reliability (Fritz & Helgeson, 1998; Helgeson, 1993, 1994; Helgeson & Fritz, 1998). This scale taps placing others' needs before one's own and distress over concern for others. The internal consistencies across the six samples ranged from .69 to .76.

Results and Discussion

First, we examined sex differences in the four personality traits. As expected, females scored higher than males on communion (p 's ranged from $<.01$ to $<.001$) and females scored higher than males on unmitigated communion (p 's ranged from $<.05$ to $<.001$) in all six samples. As expected, males scored higher than females on agency and unmitigated agency in all six samples, with p 's ranging from $<.05$ to $<.001$.

The intercorrelations among agency, communion, unmitigated agency, and unmitigated communion are shown in Table 1 for males and females separately for each of the six samples. As predicted, agency and communion are typically uncorrelated. However, in three of the samples, agency and communion were positively related for males only.

We expected unmitigated agency and unmitigated communion to be either inversely related or uncorrelated but not positively related. Results confirmed this prediction. In all of the samples, unmitigated agency and unmitigated communion were negatively correlated for both men and women, although the negative correlations reached statistical significance only in the largest samples. When men and women were combined within each sample, unmitigated agency and unmitigated communion were significantly negatively correlated in all six samples. This is probably due to the fact that the ranges of the unmitigated agency and unmitigated communion scales are increased when men and women are combined. Recall that men are more likely than women to score high on unmitigated agency and women are more likely than men to score high on unmitigated communion.

Unmitigated agency was positively correlated with agency for both men and women. These correlations were more likely to be significant in the larger samples. When men and women were combined, the correlations were

TABLE 1
Intercorrelations among Agency, Communion, Unmitigated Agency, and Unmitigated Communion^a

	A & C		UA & A		UA & C		UC & C		UC & A		UC & UA	
	M	F	M	F	M	F	M	F	M	F	M	F
Sample 1 (n = 527, college students)	.18**	-.08	.12*	.27***	-.33***	-.40***	.45***	.53***	-.04	-.19**	-.17**	-.28**
Sample 2 (n = 551, college students)	.13*	-.01	.14**	.15*	-.28***	-.46***	.47***	.59***	-.15**	-.09	-.15**	-.37***
Sample 3 (n = 85, college students)	-.01	-.19	.35*	.48***	-.04	-.44**	.67***	.53***	-.14	-.44**	-.16	-.28+
Sample 4 (n = 211, cardiac patients)	.47**	.03	.06	.11	-.26**	-.48**	.32**	.16	-.17	-.24**	-.04	-.08
Sample 5 (n = 91, university staff)	-.05	.24	.27+	.06	-.45**	-.54***	.34*	.29*	-.09	-.05	-.24	-.14
Sample 6 (n = 81, children)	-.08	-.10	.20	.17	-.09	-.48***	.35*	.18	-.04	-.39**	-.16	-.12

^a A = agency; C = communion; UA = unmitigated agency; UC = unmitigated communion.

+ $p < .10$; * $p < .05$; ** $p < .01$; *** $p < .001$.

significant in all six samples. The fact that the two were not ever negatively correlated refutes the social desirability response bias issue. As predicted, unmitigated agency was negatively correlated with communion for both men and women. In two of the samples, these correlations did not reach statistical significance for males. However, when men and women were combined, the correlation was significant in all six samples. Thus, one important difference between unmitigated agency and agency is that unmitigated agency is negatively correlated with communion, whereas agency has no implications for communion or could be positively correlated with communion.

As predicted, across the six samples, unmitigated communion was positively correlated with communion for both men and women, although the correlation did not reach conventional levels of significance for women in two cases. Again, when men and women were combined, this correlation was always statistically significant. In general, unmitigated communion was negatively correlated with agency for both men and women, but these correlations were significant in only about half of the cases. When men and women were combined, the correlation was statistically significant in all but one of the six samples (sample 5). Thus, one difference between unmitigated communion and communion is that unmitigated communion is typically inversely associated with agency, whereas communion is not.

In summary, the general pattern of predictions was supported across men and women. Agency and communion were unrelated, unmitigated agency and agency were positively related, unmitigated agency and communion were negatively related, unmitigated communion and communion were positively related, and unmitigated communion and agency were negatively related. There was also a trend for unmitigated agency and unmitigated communion to be negatively related. These relations held across a diverse set of samples, healthy people as well as people facing chronic illness and people of different age ranges (adolescents, college students, older adults). In general, the pattern of these associations was stronger when men and women were combined than when they were examined separately. However, there were no general trends for associations to be stronger among one sex compared to the other. The weaker associations observed among males and females separately is likely to be due to two factors. First, the sample size is decreased when the sexes are examined separately. As shown in Table 1, the predicted associations are more likely to be significant for both men and women in the larger samples. Second, men and women differ on these constructs, which restricts the range on the variables. For example, one is more likely to find an inverse association between unmitigated agency and communion when both men and women are combined because the range on these two variables is increased.

The magnitude of the relations observed among agency, communion, unmitigated agency, and unmitigated communion was not large, underscoring

their empirical distinctions. The size of the intercorrelations suggest that unmitigated agency and unmitigated communion are not reducible to some combination of agency and communion. Furthermore, if unmitigated communion were the same as high communion and low agency, or unmitigated agency were the same as high agency and low communion, this would imply that agency and communion would be negatively correlated at their extremes. That is, if unmitigated communion was the same as high communion and low agency, then people who possessed a very high communion score would be lacking in agency, by definition, and score low on the agency scale. If unmitigated agency was the same as high agency and low communion, then people who possessed a very high agency score would be lacking in communion, by definition and score low on the communion scale. In all six samples, correlations between agency and communion were examined for participants who scored in the upper 20th or 25th percentile on one of these constructs. The two scales were not negatively correlated at the extremes.

STUDY 2

In Study 1 we showed that unmitigated agency and agency are typically positively related, as are unmitigated communion and communion. This reflects the focus on the self that is common to unmitigated agency and agency and the focus on others that is common to unmitigated communion and communion. We also showed unmitigated agency is typically negatively related to communion and unmitigated communion is typically negatively related to agency, which underscores the “unmitigated” feature of these two constructs. In the second study, we show that unmitigated agency and unmitigated communion are not reducible to some combination of agency and communion. That is, we distinguish unmitigated agency from high agency and low communion and unmitigated communion from high communion and low agency. To accomplish this task, we evaluated a set of variables for which we could make differential predictions with regard to agency, communion, unmitigated agency, and unmitigated communion. These variables can be broadly construed to reflect health or well-being. Our predictions, below, are based on both conceptual definitions and empirical data on agency, communion, and their unmitigated counterparts.

1. Agency has consistently been related to high self-esteem (see Whitley, 1983, for a review). To our knowledge, the relation of unmitigated agency to self-esteem has only been examined in one study and the association was near zero (Spence et al., 1979). Although unmitigated agency individuals are arrogant and self-absorbed, they do not necessarily have a positive view of themselves. The relation of communion to self-esteem is inconsistent (see Helgeson, 1994, for a review), but unmitigated communion has been related to low self-esteem (Fritz & Helgeson, 1998). We provide data on whether

agency, unmitigated agency, communion, and unmitigated communion are differentially related to self-esteem. We predict that self-esteem will be positively related to agency, negatively related to unmitigated communion, unrelated to communion, and possibly negatively related to unmitigated agency.

2. The relations of agency to dimensions of social support are inconsistent. Because unmitigated agency individuals do not pay attention to the needs of others, we expect unmitigated agency to be related to problematic social relationships, specifically a lack of perceived support availability and greater negative social interactions. We expect both unmitigated communion and communion to be associated with support provision, as individuals who score high on these traits are oriented toward helping others. However, we expect only communion to be related to perceived availability of support. Unmitigated communion individuals may not perceive support to be available because they feel unworthy of others' help, because they do not want to burden others, or because they are intrusive in relationships with others which leads to relationship difficulties. Thus, we expect perceived support to be positively related to communion, inversely related to unmitigated agency, and unrelated to agency and unmitigated communion. We expect negative interactions to be positively related to unmitigated agency and unmitigated communion, inversely related to communion, and unrelated to agency. We expect support provision to be positively related to communion and unmitigated communion, unrelated to agency, and inversely related to unmitigated agency.

3. Agency has consistently been related to reduced psychological distress (see Bassoff & Glass, 1982, and Whitley, 1984, for reviews). The relation of unmitigated agency to psychological distress is not clear. Because the unmitigated agency scale has been associated with Type A behavior (Helgeson, 1990), we expect unmitigated agency—but not agency—to be related to one specific form of psychological distress—hostility. The relation of communion to distress is unclear (see Helgeson, 1994, for a review) but unmitigated communion has been related to greater distress (see Helgeson & Fritz, 1998, for a review). We expect measures of distress to be positively related to unmitigated communion, possibly related to unmitigated agency, unrelated to communion, and inversely related to agency.

4. Unmitigated communion individuals are expected to practice poor health behavior because they attend to the needs of others instead of the self. In a study of adolescent diabetics, unmitigated communion, but not communion, was related to poor metabolic control (Helgeson & Fritz, 1996), which presumably reflects a failure to practice good health behavior. Because communion does not have implications for attending to oneself, we have no reason to predict an association of communion to health behavior. Unmitigated agency individuals are expected to practice poor health behavior because they do not heed others' advice to take care of themselves and rebel

against societal conventions. In a study of cardiac patients, unmitigated agency was related to the failure to adhere to physicians' instructions to reduce household chores (Helgeson, 1993). We expect poor health behavior to be associated with unmitigated agency and unmitigated communion but to be unrelated to agency and communion.

Method

Participants

To test our predictions about the relations of agency, communion, unmitigated agency, and unmitigated communion to self-esteem, aspects of social relationships, psychological distress, and health behavior, we examined the data from sample 4 (cardiac patients) described in Study 1. We used sample 4 because all of the outcomes were examined in this sample and the sample size was large enough to employ an analysis with multiple predictor variables. The following instruments were administered at the same time that the agency, communion, unmitigated agency, and unmitigated communion scales were measured, during the initial in-hospital interview.

Instruments

Self-esteem. The 10-item Rosenberg (1965) self-esteem scale was used. The internal consistency was .81.

Social relations. We measured perceived availability of support, support provision, and negative social interactions with an adapted version of the UCLA Social Support Inventory (Dunkel-Schetter, Feinstein, & Call, 1986). Perceived availability of support was measured by asking patients the extent to which they could turn to their spouse, family and friends, and their physician for (1) information or advice about health-related concerns, (2) assistance with tasks and chores, (3) encouragement and reassurance, and (4) listening and empathy. Responses were made separately for each of the three support sources (spouse, family and friends, physician) on 5-point scales, ranging from "never" to "very often." A total perceived support availability score was created by averaging the items. The internal consistency of the scale was .89. To measure support provision, we asked respondents to indicate the extent to which they provided each of the previously mentioned kinds of support to their spouse and to family and friends. The same rating scale was used. A support provision index was created by averaging across the items. The internal consistency of this scale was .82.

Finally, negative interactions were measured by asking respondents how often their spouse and their family or friends (1) "seemed critical or displeased with you," (2) "disappointed you," (3) "got on your nerves," and (4) "burdened you with their problems." A negative interactions index was created by averaging across the four items for the two sources. Its internal consistency was .85.

Psychological distress. The anxiety, depression, and hostility subscales from the Brief Symptom Inventory (BSI; Derogatis & Spencer, 1982) were administered. The internal consistencies were .80 for anxiety, .86 for depression, and .75 for hostility.

Well-being was measured with the Index of Well-Being Scale (Campbell, Converse, & Rodgers, 1976). Participants rated their present feelings about their life on 7-point scales (e.g., "disappointing" = 1 vs "rewarding" = 7; "brings out the best in me" = 1 vs "doesn't give me much chance" = 7). The internal consistency of this 9-item scale was .87.

Health behavior. We created a composite health behavior index that consisted of five items: (1) adherence to a low-fat, low-cholesterol diet (5-point scale, ranging from "not at all" to "very strict"), (2) currently smoking ("no," "yes"), (3) exercise ("not at all," "exercises

irregularly," "exercises three times a week"), (4) time for relaxation (5-point scale ranging from "never" to "always"), and (5) stressfulness of lifestyle (5-point scale ranging from "not at all" to "extremely"). Because the items were rated on separate scales, we standardized each of the items and then summed them to create a health behavior index. The internal consistency of the index was low, $\alpha = .55$, which is to be expected as health behaviors are often uncorrelated. Nonetheless, the index represents the summation of good health behaviors.

Results and Discussion

We examined the relations of agency, communion, unmitigated agency, and unmitigated communion to (1) self-esteem, (2) social relationship measures, (3) psychological distress indices, and (4) health behavior. We used multiple regression analysis to examine the simultaneous contribution of all four personality traits to each of the outcomes. In these analyses, we statistically controlled for participant sex on the first step of the regression so that we could determine how much variance gender-related traits accounted for in the outcome independent of sex. We entered agency and communion on the second step followed by the interaction between the two on the third step. On the fourth step, we entered unmitigated agency and unmitigated communion so that we could see if they predicted outcomes above and beyond agency, communion, and the interaction of the two. Finally, on the fifth step, we tested the interaction of sex with each of the four personality traits to determine if a trait was differentially associated with an outcome for men and women. In no case were these interaction terms significant. Thus, we present the final regression equations in Table 2 without the sex by personality trait interaction terms. Table 2 shows the change in R^2 for each of the four steps of the regression and the standardized betas and their significance levels for each of the predictor variables in the final step of the regression.

Self-Esteem

As shown in Table 2, with statistical controls for sex, agency emerged as a positive predictor and unmitigated agency emerged as a negative predictor of self-esteem. The interaction between agency and communion was not significant. Surprisingly, unmitigated communion was not associated with low self-esteem, as it has been in previous research (Fritz & Helgeson, 1998).

Relationship Outcomes

Perceived support. With statistical controls for sex, only communion emerged as a significant predictor of perceived support availability.

Support provision. Both communion and unmitigated communion emerged as significant predictors of support provision, but the coefficient for unmitigated communion was the larger of the two and clearly unmitigated communion accounted for more variance in support provision than did communion. In addition, unmitigated communion significantly added to the pre-

TABLE 2
 Agency, Communion, Unmitigated Agency, and Unmitigated
 Communion as Predictors of Relationship and Health Outcomes

	β	MR	R^2	Change in R^2
Self-esteem				
Sex	.06			.01
Agency	.52***			
Communion	-.07			.23
Agency/communion	.05			.01
UA	-.15*			
UC	.06	.52	.27	.02
Perceived support				
Sex	-.09			.00
Agency	.00			
Communion	.21*			.06
Agency/communion	.06			.00
UA	-.11			.02
UC	.06	.27	.08	.00
Support provision				
Sex	.10			.04
Agency	-.02			
Communion	.18*			.06
Agency/communion	.09			.00
UA	.00			
UC	.36***	.47	.22	.12
Negative interactions				
Sex	.19*			.01
Agency	.09			
Communion	-.10			.02
Agency/communion	.04			.00
UA	.15*			
UC	.24***	.31	.10	.07
Hostility				
Sex	.18*			.04
Agency	-.05			
Communion	.12			.00
Agency/communion	-.02			.00
UA	.30***			
UC	.23***	.41	.17	.13
Anxiety				
Sex	.24***			.12
Agency	-.21**			
Communion	.14 ⁺			.05
Agency/communion	-.12 ⁺			.01
UA	.21**			
UC	.17**	.49	.24	.06

TABLE 2—Continued

	β	MR	R^2	Change in R^2
Depression				
Sex	.15 ⁺			.05
Agency	-.30***			
Communion	.18*			.06
Agency/communion	.04			.00
UA	.12 ⁺			
UC	.27**	.43	.18	.07
Well-being				
Sex	.01			.00
Agency	.24***			
Communion	.00			.06
Agency/communion	.08			.00
UA	-.32***			
UC	-.15*	.41	.17	.11
Health behavior				
Sex	-.03			.00
Agency	-.01			
Communion	.03			.00
Agency/communion	.07			.01
UA	-.18*			
UC	-.18*	.26	.07	.06

Note. Sex: 1 = male; 2 = female; UA = unmitigated agency; UC = unmitigated communion; ⁺ $p < .10$, * $p < .05$, ** $p < .01$, *** $p < .001$.

diction of support provision when communion was in the equation, but communion did not significantly add to the prediction of support provision when unmitigated communion was in the equation.

Negative interactions. Sex emerged as a significant predictor of negative interactions such that women scored higher than men. Neither agency, communion, nor the interaction between the two predicted negative interactions. However, both unmitigated agency and unmitigated communion were significant predictors of more negative social interactions.

Psychological Distress

Hostility. Sex emerged as a significant predictor of hostility such that women scored higher than men. Neither agency, communion, nor the interaction between the two predicted hostility. However, both unmitigated agency and unmitigated communion emerged as significant predictors of hostility.¹

¹ Because the unmitigated agency scale contains the trait "hostile," we examined the relation of unmitigated agency without this one item to the BSI hostility scale. The modified measure of unmitigated agency remained a significant predictor of BSI hostility ($p < .001$).

The relation of unmitigated communion to hostility was unexpected. We note that the measure of hostility used in this study is one that measures feelings of hostility rather than hostile behavior. It seems more likely that unmitigated communion would be related to feeling angry and hostile rather than displays of overt hostile behavior. Spence et al. (1979) showed that unmitigated agency was uniquely related to hostile behavior.

Anxiety. Sex predicted anxiety such that women scored higher than men. In the final equation, agency predicted less anxiety and communion and the interaction between agency and communion marginally predicted more anxiety. Despite these marginal relations, unmitigated agency and unmitigated communion significantly added to the prediction of greater anxiety.

Depression. The findings for depression were similar to those for anxiety. In the final equation, women scored higher than men, agency was a negative predictor of depression, communion was a positive predictor of depression, unmitigated agency was a marginally positive predictor of depression, and unmitigated communion was a significant positive predictor of depression. The strongest predictors of depression were agency (negative) and unmitigated communion (positive). We will return to the distinction between the relation of these two constructs to depression in Study 3.

Well-being. Agency was a positive predictor of well-being, and communion and the interaction between agency and communion were unrelated to well-being. Both unmitigated agency and unmitigated communion predicted lower levels of well-being.

Health Behavior

Multiple regression analysis showed that agency, communion, and the interaction between the two did not predict health behavior. However, both unmitigated agency and unmitigated communion predicted poor health behavior.

Summary

In summary, across an array of indices, we have clearly distinguished unmitigated agency from agency. Agency is associated with high self-esteem and reduced psychological distress. Thus, *agency appears to represent a "healthy" focus on the self.* Unmitigated agency, however, is associated with negative interactions with other people, low self-esteem, psychological distress—in particular, hostility—and poor health behavior. Thus, the unmitigated agency individual does not appear to have a healthy sense of self or a positive focus on the self. Instead, *unmitigated agency seems to be associated with relationship difficulties and poor psychological well-being.*

We also have clearly distinguished between unmitigated communion and communion. Communion is related to providing support as well as perceiving support to be available but is largely unrelated to self-esteem or indicators of psychological well-being. Thus, *communion appears to represent a*

‘healthy’ focus on others that does not have negative implications for the self. By contrast, unmitigated communion is associated with providing support to others but not necessarily perceiving it to be available. In fact, unmitigated communion is associated with negative interactions with others. Unmitigated communion also is associated with indicators of psychological distress and poor health behavior. Thus, *the unmitigated communion individual seems to have difficulties in relationships with others and poor psychological well-being.*

Evidently, it is important to distinguish unmitigated agency and unmitigated communion from agency and communion because only unmitigated agency and unmitigated communion are associated with problematic social relationships and adverse health outcomes. From these findings, two issues merit further consideration. First, for three measures of well-being (anxiety, depression, well-being), both agency and unmitigated communion emerged as significant predictors, although their associations were in the opposite direction. It is important to distinguish between the relation of low agency and high unmitigated communion to well-being indicators. This was the goal of Study 3. Second, although unmitigated agency and unmitigated communion are not positively related, these two constructs revealed similar relations to the outcomes examined in Study 2. Thus, in Study 4, we distinguish unmitigated agency from unmitigated communion by examining their unique associations to interpersonal problems.

STUDY 3

Because both low agency and high unmitigated communion are associated with psychological distress, we wanted to present some evidence that the mechanisms linking low agency and high unmitigated communion to distress were not the same. In a study of adolescents with diabetes, we found that relationship stressors mediated the association of unmitigated communion to adverse health outcomes, specifically psychological distress and poor metabolic control (Helgeson & Fritz, 1996). That is, unmitigated communion individuals were more strongly affected by relationship events which statistically accounted for their increased distress and worse metabolic control. In that same study, low agency was also associated with greater psychological distress. Relationship stressors, however, did not account for the association of low agency to psychological distress; the correlation between agency and distress remained unchanged with controls for relationship stressors. These results suggest that the reason for the unmitigated communion individual's distress (i.e., overinvolvement in others' problems) is not the same as the low agency person's reason for distress. We expect agency, which is a much broader construct than unmitigated communion, to be associated with reduced depression because high-agency individuals have an overall high self-regard and high feelings of competence. The nature of the experiences that

lead the unmitigated communion and low-agency person to become depressed may shed further light on this issue.

To distinguish between the relations of low agency and high unmitigated communion to psychological distress, we considered the possibility that the nature of the unmitigated communion person's depression differs from the nature of the low agency person's depression. Thus, we examined the relations of agency and unmitigated communion to the Depressive Experiences Questionnaire (DEQ; Blatt, 1974). The DEQ assesses two kinds of experiences associated with depression: dependency and self-criticism. Dependent depressive experiences are *externally oriented* and focus on interpersonal relations, a desire to be close to others, a fear of abandonment, and a concern with rejection. These experiences should characterize the unmitigated communion person. Self-critical depressive experiences are *internally oriented*, involving guilt, insecurity, negative self-evaluation, and a failure to meet one's own expectations (Blatt, D'Afflitti, & Quinlan, 1976). These experiences should characterize the low agency person. In this study, we examine the relations of agency and unmitigated communion to dependent and self-critical experiences of depression.

Method

Participants

Undergraduate college students ($n = 93$) participated in a laboratory experiment for either course credit or payment. Ages ranged from 17 to 38. Of the 93, 43 were male, 45 were female, and 5 people did not specify their sex. They completed agency, communion, unmitigated agency, and unmitigated communion scales prior to the experiment. They also completed a measure of depression and depressive experiences.

Instruments

Depression was measured with the subscale from the BSI (Derogatis & Spencer, 1982). Its internal consistency was .93.

Depressive experiences were measured with the DEQ (Blatt, 1974). It consists of 66 items which can be used to create three scale scores: depressive experiences associated with dependency, self-criticism, and efficacy. We were only interested in the dependency and self-critical dimensions. Previous researchers who have used the DEQ typically employ a somewhat complex scoring procedure that uses the factor weights derived for men and women separately (Blatt, D'Afflitti, & Quinlan, 1979). The use of factor weights to derive these scores implies an unlikely comparability across samples that use the DEQ. We opted to use a simpler procedure that would employ unit weights to items. Unit weights increase our ability to generalize the findings to future research. Thus, we selected items from Blatt et al.'s (1979) original factor analysis that loaded above .40 for both sexes on either the dependency factor or on the self-criticism factor but not on the other two factors. This led to the selection of 9 dependency items and 7 self-critical items. We then created the self-critical and dependency indices by applying unit weights to each item, summing them, and taking the mean. We note that all of the items we selected appear on Welkowitz, Lish, and Bond's (1985) abbreviated self-critical (20 items) and dependency subscales (12 items), which were created using a similar but more liberal procedure than our own (i.e., they selected items that loaded above .40 for either men

or women). The internal consistencies for our self-critical and dependency depressive experiences were .81 and .65, respectively. The two scales were moderately related, $r = .31$, $p < .01$.

Results and Discussion

First, we examined the relation of agency and unmitigated communion to depression. Unmitigated communion was positively associated with depression, $r = .23$, $p < .05$, whereas agency was inversely associated with depression, $r = -.43$, $p < .001$. Both dependent experiences and self-critical experiences were associated with depression ($r = .24$, $p < .05$; $r = .60$, $p < .001$, respectively). The latter association is clearly the stronger of the two.

Next, we examined the relation of agency and unmitigated communion to the two kinds of depressive experiences: dependency and self-criticism. Unmitigated communion was positively related to dependency ($r = .53$, $p < .001$) and self-critical ($r = .24$, $p < .05$) experiences, whereas agency was negatively related to dependency ($r = -.29$, $p < .01$) and self-critical ($r = -.53$, $p < .001$) experiences. Partial correlational analyses showed that unmitigated communion uniquely predicted greater dependent experiences of depression, and agency uniquely predicted fewer self-critical experiences of depression. When agency was statistically controlled, the relation of unmitigated communion to dependent experiences was the same ($r = .50$, $p < .001$), but the relation of unmitigated communion to self-critical experiences disappeared ($r = .13$, n.s.). Thus, unmitigated communion is associated with dependent experiences of depression, independent of agency, but the relation of unmitigated communion to self-critical depression is completely accounted for by low agency. Taken collectively, these findings suggest that there are at least two reasons that the unmitigated communion individual is distressed, only one of which has to do with low agency.

When unmitigated communion was statistically controlled, the relation of agency to self-critical experiences remained the same ($r = -.50$, $p < .001$), but the relation of agency to dependent experiences became marginally significant ($r = -.19$, $p = .06$). Thus, low agency is associated with self-critical experiences of depression independent of unmitigated communion, but the relation of low agency to dependency experiences is at least partly accounted for by unmitigated communion.

Previous research has shown that typical depression inventories are more likely to capture self-critical depressive experiences than dependent depressive experiences (Blatt et al., 1976), which may explain why the relation of low agency is often stronger than the relation of unmitigated communion to depression scales, such as the BSI. Our data are consistent with previous research. Self-critical experiences were more strongly related than dependent experiences to BSI depression.

STUDY 4

To obtain further construct validity for unmitigated agency and unmitigated communion as well as discriminant validity between the two traits, we examined their relations to interpersonal domains. We expected that unmitigated agency (paying no attention to others) and unmitigated communion (being absorbed in others) would be linked to different sets of interpersonal difficulties. We used the Inventory for Interpersonal Problems (Horowitz, Rosenberg, Baer, Ureno, & Villasenor, 1988) to measure eight interpersonal difficulties. This instrument has eight scales that reflect difficulties people have in relationships with others (Alden, Wiggins, & Pincus, 1990): domineering, vindictive, cold, socially avoidant, nonassertive, exploitable, overly nurturant, and intrusive. We expected that unmitigated agency would be associated with being domineering, vindictive, and cold because all of these behaviors reflect being self-oriented at the expense of others. We expected that unmitigated communion would be strongly associated with being overly nurturant and intrusive, as these are behaviors that reflect an overinvolvement with others. We also expected that unmitigated communion would be associated with being nonassertive and exploitable as these traits reflect a lack of attention to oneself.

Method

Participants

Sample 1. Prior to a laboratory study, 57 undergraduate college students (46 male, 11 female) completed measures of agency, communion, unmitigated agency, unmitigated communion, and the eight circumplex scales from the Inventory for Interpersonal Problems (IIP; Horowitz et al., 1988) derived by Alden et al. (1990).

Sample 2. Sample 2 consisted of 92 college students (45 men, 47 women) who were participating in a laboratory experiment. Prior to the experiment, we administered the previously described unmitigated agency and unmitigated communion scales as well as a subset of the circumplex scales described below. Some of these data are presented in an aggregated form in Fritz and Helgeson (1998, Study 4). We present the specific correlations of unmitigated communion and unmitigated agency to the interpersonal problem scales in this article for the first time.

Instruments

The IIP is an instrument that was developed to measure the difficulties people have in relating to one another. The eight scales are: domineering, vindictive, cold, socially avoidant, nonassertive, exploitable, overly nurturant, and intrusive. All eight scales were administered to sample 1. The internal consistencies were high for all of the scales (ranged from .72 to .88) except intrusive which was .54.

In sample 2, we specifically focused on the interpersonal difficulties of the unmitigated communion individual. We administered the three scales from the circumplex that we expected to be related to unmitigated communion [overly nurturant ($\alpha = .78$), exploitable ($\alpha = .70$), nonassertive ($\alpha = .79$)] and modified two other scales that we expected to be related to unmiti-

gated communion but were not in sample 1 (intrusive, dominant). Because the alpha for the intrusive scale was low in sample 1, we inspected the items. We found that this scale included items that tapped intrusiveness into others' problems as well as items that reflected self-disclosing one's own problems (e.g., telling personal things to other people too much, opening up to other people too much). These latter behaviors are ones in which the unmitigated communion person would *not* engage, perhaps because of their reticence to burden others with their problems. Thus, we administered the only two items that represented the construct of intrusiveness into others' problems (i.e., It is hard for me to stay out of other people's problems; I feel too responsible for solving other people's problems; $r = .41, p < .001$). We also administered only two items from the dominance scale that we expected to be related to unmitigated communion. We considered the possibility that there is a kind of "control" that is compatible with unmitigated communion: control over relationships. Because relationships can be a primary source of self-esteem for unmitigated communion individuals, it may be important to perceive control over this domain. We did not expect unmitigated communion to be associated with the global construct of dominance which consists of items such as "I am too independent" and "I am too aggressive toward other people," but we suspected that it could be related to interpersonal control so we selected the two items from the dominance scale that reflected this (i.e., I try to control other people too much; I try to change other people too much; $r = .60, p < .001$).

To summarize, we measured the full set of interpersonal problems from the circumplex analysis of the IIP in sample 1 and a reduced set of interpersonal problems that we expected to be related to unmitigated communion in sample 2.

Results and Discussion

Among the eight scales, we expected unmitigated agency to be most strongly related to domineering, vindictive, and cold. In sample 1, results supported this hypothesis ($r = .45, p < .001$; $r = .31, p < .05$; $r = .27, p < .05$; respectively). Unmitigated agency also was inversely associated with being nonassertive ($r = -.31, p < .05$) and overly nurturant ($r = -.39, p < .01$). We expected unmitigated communion to be most strongly related to overly nurturant and intrusive but also to be related to exploitable and nonassertive. Unmitigated communion was positively correlated with overly nurturant ($r = .52, p < .001$) and exploitable ($r = .34, p < .01$). There were weak trends for unmitigated communion to be associated with nonassertive ($r = .21, p = .12$) and intrusive ($r = .20, p = .14$). Recall that this intrusive scale had a low internal consistency and was not a pure measure of intrusiveness into others' problems. Unmitigated communion was inversely associated with vindictive and cold ($r = -.33, p < .05$; $r = -.30, p < .05$, respectively).

In sample 2, we explored the relations of unmitigated communion and unmitigated agency to overly nurturant, exploitable, nonassertive, and modified intrusiveness and dominance scales. As expected, unmitigated communion was associated with being overly nurturant ($r = .68, p < .001$), exploitable ($r = .45, p < .001$), and nonassertive ($r = .28, p < .01$). Unmitigated communion also was strongly associated with the modified measure of intrusiveness ($r = .50, p < .001$) and weakly related to the modified dominance

scale that reflects interpersonal control ($r = .19, p = .07$). Unmitigated agency was inversely associated with being overly nurturant ($r = -.28, p < .01$) and exploitable ($r = -.21, p < .05$). Unmitigated agency was positively associated with interpersonal control ($r = .42, p < .001$).

Because we had roughly equal numbers of men and women in this sample (but did not in sample 1), we examined the associations of unmitigated agency and unmitigated communion to the interpersonal problem scales for men and women separately. There was only one relation that differed between men and women. Interpersonal control was strongly related to unmitigated communion among men ($r = .47, p < .001$) but not among women ($r = -.03, n.s.$). The z statistic for testing the difference between two independent correlation coefficients revealed that the difference was significant ($z = 2.50, p < .05$).

The interpersonal difficulties with which unmitigated communion is correlated are consistent with recent research that has shown unmitigated communion individuals have two primary interpersonal problems, those that reflect an overinvolvement with others (i.e., overly nurturant, intrusive) and those that reflect neglecting the self in relationships with others (i.e., exploitable, nonassertive; Fritz & Helgeson, 1998). By contrast, the unmitigated agency individual appears to have an antagonistic attitude toward the world and does not regard other people favorably. Unmitigated agency is associated with interpersonal problems that suggest dominating others and behaving in ways with other that would not foster good relationships (e.g., being vindictive and cold).

GENERAL DISCUSSION

The goal of this article was to establish the importance of distinguishing unmitigated agency and unmitigated communion from agency and communion. First, we presented the intercorrelations among the four traits to show that unmitigated agency and unmitigated communion are empirically distinct from agency and communion but had predictable relations to them. As expected, unmitigated agency and agency were positively correlated due to their shared focus on the self, and unmitigated communion and communion were positively related due to their shared focus on others. Although agency and communion were generally unrelated, unmitigated agency was inversely correlated with communion and unmitigated communion was inversely correlated with agency, confirming Bakan's (1966) ideas that unmitigated agency is not mitigated by communion and unmitigated communion is not mitigated by agency.

Second, we showed that it is important to distinguish unmitigated agency and unmitigated communion from agency and communion, particularly when outcomes involve relationships and health. In this report, agency was associated with decreased distress and high self-esteem, whereas unmitigated

agency was associated with greater distress, low self-esteem, poor health behavior, and negative social interactions. In a previous study of cardiac patients, unmitigated agency predicted more severe heart attacks, whereas agency predicted less severe heart attacks (Helgeson, 1990). In that study, two other divergent relations for unmitigated agency and agency were found. Unmitigated agency was positively related to Type A behavior, whereas agency was not. Agency was positively related to social support, whereas unmitigated agency was not. In a study of men with prostate cancer, agency was related to good adjustment, whereas unmitigated agency was related to adjustment difficulties (Helgeson & Lepore, 1998). In that study, difficulties with experiencing emotions accounted for the relation of unmitigated agency to poor psychological and physical well-being. Thus, it appears that unmitigated agency, but not agency, is associated with relationship difficulties and poor health outcomes.

The present study also established the importance of distinguishing between unmitigated communion and communion. Unmitigated communion, but not communion, was associated with greater distress and poor health behavior. Whereas communion was associated with providing support and perceiving it to be available, unmitigated communion was associated with providing support without necessarily perceiving it to be available and more negative interactions with others. Previous research also has distinguished unmitigated communion from communion, showing that only unmitigated communion is associated with increased psychological distress (Fritz & Helgeson, 1998).

Despite these distinctions, researchers have continued to measure agency and communion alone and ignore the unmitigated counterparts. For example, when researchers examine whether sex differences in depression (i.e., women greater than men) are due to gender-related traits, they typically only measure communion and agency and ignore the construct of unmitigated communion (e.g., Allgood-Merten, Lewinsohn, & Hops, 1990; Bromberger & Matthews, 1996; Ingram, Cruet, Johnson, & Wisnicki, 1988). Not surprisingly, these studies find that low agency is associated with depression but communion—the female gender-related trait—is not. These studies would benefit by taking into consideration the construct of unmitigated communion. We showed in Study 3 that there are different reasons for the relations of high unmitigated communion and low agency to depression. Agency, alone, does not capture the sex difference in depression. Helgeson and Fritz (1996) showed in a study of adolescents that unmitigated communion, but not communion, accounted for sex differences in depression.

Research also would benefit by distinguishing unmitigated agency from agency. For example, researchers who study male gender-role stress have shown that these stress measures are unrelated to the construct of agency (e.g., Eisler & Skidmore, 1987) but fail to examine relations to unmitigated

agency. In a study of men with prostate cancer, unmitigated agency, but not agency, was related to a domain of male gender-role stress, difficulties expressing emotions to others (Helgeson & Lepore, 1998).

Finally, research on gender and cardiovascular reactivity has made the claim that men and women may react differently to stressors depending on the relevance of the stressor to participants' gender-related self-concepts. That is, men may react more strongly to threats to achievement or challenges to agentic traits, whereas women may react more strongly to threats to relationships or challenges to communal traits. The experiments that have thus far been conducted have only measured the constructs of agency and communion and yielded contradictory findings (e.g., Allen, Stoney, Owens, & Matthews, 1993; Davis & Matthews, 1996). This literature may benefit by measuring unmitigated agency and unmitigated communion, as it is people with these traits that may be the most threatened by challenges to their sense of self or relationships.

Both unmitigated agency and unmitigated communion appear to be associated with relationship and health difficulties. How do we know that unmitigated agency and unmitigated communion are *distinct* sets of negative characteristics? First, the two constructs are never positively related, as shown by the six samples examined in Study 1. Conceptually, one could not be focused on the self to the exclusion of others and be focused on others to the exclusion of the self at the same time. Second, the two constructs are associated with different interpersonal difficulties. There are some outcomes that both unmitigated agency and unmitigated communion predict, but the pathways are likely to differ. For example, in Study 2 we showed that both unmitigated agency and unmitigated communion were associated with negative social interactions. However, the nature of the unmitigated agency and unmitigated communion individual's interpersonal difficulties may explain how the negative interactions of people who possess the two traits could differ. The unmitigated agency individual has a negative view of other people and is cold, dominant, and vindictive. The unmitigated communion individual is overly nurturant, intrusive, easily exploitable, and not assertive of one's own needs. Thus, the unmitigated agency person may have negative interactions with others because he or she is cruel or uncaring in relationships, whereas the unmitigated communion person's negative interactions with others may stem from his or her tendency to intrude on others' private matters. Similarly, both unmitigated agency and unmitigated communion are associated with poor health behaviors, greater psychological distress, and lower levels of well-being. However, unmitigated agency individuals' health problems may arise because they are too arrogant or hostile to follow a doctor's orders or advice from loved ones, whereas unmitigated communion individuals' health problems may stem from the fact that they are so involved with others that they fail to take care of themselves. The specific pathways by

which unmitigated agency and unmitigated communion lead to negative outcomes merits further research.

Another broad question for future research is the relations of agency, communion, and their unmitigated counterparts to basic models of personality structure, such as the Interpersonal Circle (Wiggins & Trapnell, 1996). The interpersonal circle is a broad conceptual framework for understanding the representation of interpersonal behavior along two dimensions, dominance and nurturance. The Interpersonal Adjective Scales (IAS; Wiggins, 1979) were developed to provide geometrically precise semantic markers of the eight vectors of interpersonal traits that comprise the octants of the circle. Many other frameworks for categorizing personality map onto the IAS, such as the Adjective Check List (Gough & Heilbrun, 1980), the Extended Personal Attributes Questionnaire (Spence et al., 1979), the Murray Need Scales (Campbell, 1959), the Hogan Personality Inventory (1986), the Minnesota Multiphasic Personality Inventory (Hathaway & McKinley, 1983), and Costa and McCrae's (1985) NEO Personality Inventory (see Wiggins & Broughton, 1985, 1991, for reviews).

Recently, researchers have begun to describe the two dimensions of the interpersonal circle—dominance and nurturance—as agency and communion, respectively (Wiggins, 1991; Wiggins & Broughton, 1985; Wiggins & Trapnell, 1996). The agency dimension reflects ambition and dominance, and this dimension correlates .69 with Spence et al.'s (1974) measure of agency (Wiggins & Broughton, 1985). The communion dimension reflects warmth and agreeableness, and this dimension correlates .84 with Spence et al.'s (1974) communion measure (Wiggins & Broughton, 1985). High agency and high communion are represented as the gregarious-extroverted dimension; high agency and low communion are represented as the arrogant-calculating dimension; low agency and high communion are represented as the unassuming-ingenuous dimension; and low agency and low communion are represented as the aloof-introverted dimension.

Unmitigated agency appears to be best represented by the arrogant-calculating dimension. In fact, Wiggins and Broughton (1985) have stated that the best marker of the arrogant-calculating category is Spence et al.'s unmitigated agency scale, noting that the two constructs are correlated .63. Further evidence of the similarity between unmitigated agency and the arrogant-calculating dimension comes from the fact that the arrogant-calculating dimension has been associated with the MMPI authority conflict scale, Machiavellianism, and several aggression scales with r 's ranging from .38 to .58 (see Wiggins & Broughton, 1985).

The placement of unmitigated communion on the interpersonal circle is less clear. It appears to be most like the unassuming dimension. The unassuming dimension is correlated $-.37$ with self-acceptance and $.50$ with deference (Wiggins & Broughton, 1985), which would be compatible with pre-

dictions for unmitigated communion. However, the unassuming dimension does not quite capture the construct of unmitigated communion. Unmitigated communion individuals become overly involved with others at the expense of themselves. Thus, it should share some overlap with the dimension that captures nurturance, which is the warmth-agreeableness dimension, as well as the dimension that captures setting one's own needs aside, which is the unassured-submissive dimension (Wiggins & Broughton, 1985).

It may be difficult to locate unmitigated communion on the interpersonal circle because unmitigated communion is theoretically associated with a lack of personal agency (i.e., focus on the self) rather than a lack of *interpersonal agency*, which is what the interpersonal circle measures. Agency, as conceptualized by Bakan, represented the existence of the organism as an individual. Agency, on the interpersonal circle, is represented by the dominance factor which implies dominance over others. Although the agency and communion dimensions of the interpersonal circle are independent, they are both "interpersonal" dimensions. Unmitigated communion implies a lack of personal agency (e.g., not independent) but levels of interpersonal agency may vary. For example, some unmitigated communion individuals' involvement in other people's problems may be motivated by a need to have control over relationships, as relationships can be a source of self-esteem. Recall that unmitigated communion was positively related to interpersonal control for males in Study 4. Some of the contradictory relations of unmitigated communion to Spence et al.'s agency scale also may reflect a failure to measure pure personal agency. The inverse association between unmitigated communion and agency was less likely to be observed among males in Study 1. The PAQ agency scale contains some items that clearly reflect personal agency (independent, self-confident, makes decisions easily, never gives up), some items that reflect interpersonal agency (competitive, feels superior), and some items that are ambiguous (active, stands up well under pressure). In each of the six samples presented in Study 1, unmitigated communion is significantly inversely associated with the personal agency trait "independent" but is never associated with the interpersonal agency trait "competitive." Future research on unmitigated communion would benefit by distinguishing personal agency from interpersonal agency.

CONCLUSION

In summary, there is substantial correlational evidence that agency, communion, unmitigated agency, and unmitigated communion are related to one another in predictable ways that reaffirm their content validity. Yet, the magnitude of these correlations suggest the constructs are distinct. The constructs of agency and communion are broad dimensions of personality, whereas the constructs of unmitigated agency and unmitigated communion are more specific constellations of traits that have clear negative associations to relation-

ship and health outcomes. Researchers in these areas would benefit by distinguishing unmitigated agency and unmitigated communion from agency and communion.

REFERENCES

- Alden, L. E., Wiggins, J. S., & Pincus, A. L. (1990). Construction of circumplex scales for the Inventory of Interpersonal Problems. *Journal of Personality Assessment*, **55**, 521–536.
- Allen, M. T., Stoney, C. M., Owens, J. F., & Matthews, K. A. (1993). Hemodynamic adjustments to laboratory stress: The influence of gender and personality. *Psychosomatic Medicine*, **55**, 505–517.
- Allgood-Merten, B., Lewinsohn, P. M., & Hops, H. (1990). Sex differences and adolescent depression. *Journal of Abnormal Psychology*, **99**, 55–63.
- Bakan, D. (1966). *The duality of human existence*. Chicago: Rand McNally.
- Bassoff, E., & Glass, G. (1982). The relationship between sex roles and mental health: A meta-analysis of 26 studies. *The Counseling Psychologist*, **10**, 105–112.
- Bem, S. L. (1974). The measurement of psychological androgyny. *Journal of Consulting and Clinical Psychology*, **42**, 155–162.
- Blatt, S. J. (1974). Levels of object representation in anaclitic and introjective depression. *Psychoanalytic Study of the Child*, **29**, 107–157.
- Blatt, S. J., D'Afflitti, J. P., & Quinlan, D. M. (1976). Experiences of depression in normal young adults. *Journal of Abnormal Psychology*, **85**, 383–389.
- Blatt, S. J., D'Afflitti, J. P., & Quinlan, D. M. (1979). *Depressive experiences questionnaire*. Unpublished manual, Yale University, New Haven, CT.
- Blatt, S. J., & Shichman, S. (1983). Two primary configurations of psychopathology. *Psychoanalysis and Contemporary Thought*, **6**, 187–254.
- Bromberger, J. T., & Matthews, K. A. (1996). A "Feminine" model of vulnerability to depressive symptoms: A longitudinal investigation of middle-aged women. *Journal of Personality and Social Psychology*, **70**, 591–598.
- Burda, P. C., Vaux, A., & Schill, T. (1984). Social support resources: Variation across sex and sex role. *Personality and Social Psychology Bulletin*, **10**, 119–126.
- Buss, D. M. (1990). Unmitigated agency and unmitigated communion: An analysis of the negative components of masculinity and femininity. *Sex Roles*, **22**, 555–568.
- Butler, T., Giordano, S., & Neren, S. (1985). Gender and sex-role attributes as predictors of utilization of natural support systems during personal stress events. *Sex Roles*, **13**, 515–524.
- Campbell, A., Converse, P. E., & Rodgers, W. L. (1976). *The quality of American life: Perceptions, evaluations, and satisfactions*. New York: Russell Sage Foundation.
- Campbell, M. M. (1959). *The primary dimensions of item ratings on scales designed to measure 24 of Murray's manifest needs*. Unpublished manuscript, University of Washington, Seattle.
- Costa, P. T., Jr., & McCrae, R. R. (1985). *The NEO Personality Inventory manual*. Odessa, FL: Psychological Assessment Resources.
- Cutrona, C. E. (1989). Ratings of social support by adolescents and adult informants: Degree of correspondence and prediction of depressive symptoms. *Journal of Personality and Social Psychology*, **57**, 723–730.
- Davis, M. C., & Matthews, K. A. (1996). Do gender-relevant characteristics determine cardio-

- vascular reactivity? Match versus mismatch of traits and situation. *Journal of Personality and Social Psychology*, **71**, 527–535.
- Derogatis, L. R., & Spencer, P. M. (1982). *The Brief Symptom Inventory (BSI): Administration, scoring, and procedures manual-I*. Baltimore: Johns Hopkins University, School of Medicine.
- Dunkel-Schetter, C., Feinstein, L., & Call, J. (1986). *UCLA Social Support Inventory*. Los Angeles: University of California.
- Eisler, R. M., & Skidmore, J. R. (1987). Masculine gender role stress: Scale development and component factors in the appraisal of stressful situations. *Behavior Modification*, **11**, 123–136.
- Fey, W. F. (1953). Acceptance by others and its relation to acceptance of self and others: A reevaluation. *Journal of Abnormal and Social Psychology*, **50**, 274–276.
- Fritz, H. L., & Helgeson, V. S. (1998). Distinctions of unmitigated communion from communion: Self-neglect and overinvolvement with others. *Journal of Personality and Social Psychology*, **75**, 121–140.
- Glass, G. V., & Hopkins, K. D. (1984). *Statistical methods in education and psychology* (pp. 310–311). Englewood, NJ: Prentice-Hall.
- Gough, H. G., & Heilbrun, A. B., Jr. (1980). *The Adjective Check List manual*. Palo Alto, CA: Consulting Psychologist Press.
- Hathaway, S. R., & McKinley, J. C. (1983). *The Minnesota Multiphasic Personality Inventory manual*. New York: Psychological Corporation.
- Helgeson, V. S. (1990). The role of masculinity in a prognostic predictor of heart attack severity. *Sex Roles*, **22**, 755–774.
- Helgeson, V. S. (1993). Implications of agency and communion for patient and spouse adjustment to a first coronary event. *Journal of Personality and Social Psychology*, **64**, 807–816.
- Helgeson, V. S. (1994). Relation of agency and communion to well-being: Evidence and potential explanations. *Psychological Bulletin*, **116**, 412–428.
- Helgeson, V. S., & Fritz, H. L. (1996). Implications of unmitigated communion and communion for adolescent adjustment to type I diabetes. *Women's Health: Research on Gender, Behavior, and Policy*, **2**, 163–188.
- Helgeson, V. S., & Fritz, H. L. (1998). A theory of unmitigated communion. *Personality and Social Psychology Review*, **2**, 173–183.
- Helgeson, V. S., & Lepore, S. J. (1998). The role of agency and unmitigated agency in adjustment to prostate cancer. *Sex Roles*, **37**, 251–267.
- Helgeson, V. S., Cohen, S., Schulz, R., & Yasko, J. (1999). Effects of education and peer discussion group interventions on 6-month adjustment to breast cancer. *Archives of General Psychiatry*, in press.
- Hogan, R. (1986). *Hogan Personality Inventory manual*. Minneapolis, MN: National Computer Systems.
- Horowitz, L. M., Rosenberg, S. E., Baer, B. A., Ureno, G., & Villasenor, V. S. (1988). Inventory of Interpersonal Problems: Psychometric properties and clinical applications. *Journal of Consulting and Clinical Psychology*, **56**, 885–892.
- Ingram, R. E., Cruet, D., Johnson, B. R., & Wisnicki, K. S. (1988). Self-focused attention, gender, gender role, and vulnerability to negative affect. *Journal of Personality and Social Psychology*, **55**, 967–978.
- Krames, L., England, R., & Flett, G. L. (1988). The role of masculinity and femininity in depression and social satisfaction in elderly females. *Sex Roles*, **19**, 713–721.

- McAdams, D. P., & Vaillant, G. E. (1982). Intimacy motivation and psychosocial adjustment: A longitudinal study. *Journal of Personality Assessment*, **46**, 586–593.
- McClelland, D. C., Atkinson, J. W., Clark, R. A., & Lowell, E. L. (1976). *The achievement motive*. New York: Irvington.
- Parsons, T., & Bales, R. F. (Eds.). (1955). *Family: Socialization and interaction process*. New York: Free Press of Glencoe.
- Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton, NJ: Princeton University Press.
- Smith, T. W. (1992). Hostility and health: Current status of a psychosomatic hypothesis. *Health Psychology*, **11**, 139–150.
- Snell, W. E., Belk, S. S., & Hawkins, R. C., II (1987). Alcohol and drug use in stressful times: The influence of the masculine role and sex-related personality attributes. *Sex Roles*, **16**, 359–373.
- Spence, J. T. (1984). Masculinity, femininity, and gender-related traits: A conceptual analysis and critique of current research. In B. A. Maher & W. B. Maher (Eds.), *Progress in experimental personality research* (Vol. 13, pp. 1–97). San Diego, CA: Academic Press.
- Spence, J. T., & Helmreich, R. L. (1978). *Masculinity and femininity: Their psychological dimensions, correlates, and antecedents*. Austin: University of Texas Press.
- Spence, J. T., Helmreich, R. L., & Holahan, C. K. (1979). Negative and positive components of psychological masculinity and femininity and their relationship to self-reports of neurotic and acting out behaviors. *Journal of Personality and Social Psychology*, **37**, 1673–1682.
- Spence, J. T., Helmreich, R. L., & Stapp, J. (1974). The Personal Attributes Questionnaire: A measure of sex-role stereotypes and masculinity-femininity. *JSAS: Catalog of Selected Documents in Psychology*, **4**, 43–44.
- Welkowitz, J., Lish, J. D., & Bond, R. N. (1985). The Depressive Experiences Questionnaire: Revision and validation. *Journal of Personality Assessment*, **49**, 89–94.
- Whitley, B. E. (1983). Sex role orientation and self-esteem: A critical meta-analytic review. *Journal of Personality and Social Psychology*, **44**, 765–778.
- Whitley, B. E. (1984). Sex role orientation and psychological well-being: Two meta-analyses. *Sex Roles*, **12**, 207–225.
- Wiggins, J. S. (1979). A psychological taxonomy of trait-descriptive terms: The interpersonal domain. *Journal of Personality and Social Psychology*, **37**, 395–412.
- Wiggins, J. S. (1991). Thinking clearly about psychology: In W. M. Grove & D. Cicchetti (Eds.), *Agency and communion as conceptual coordinates for the understanding and measurement of interpersonal behavior* (pp. 89–113). Minneapolis: Minnesota Press.
- Wiggins, J. S. & Broughton, R. (1985). The interpersonal circle: A structural model for the integration of personality research. *Perspectives in Personality*, **1**, 1–47.
- Wiggins, J. S., & Broughton, R. (1991). A geometric taxonomy of personality scales. *European Journal of Personality*, **5**, 343–365.
- Wiggins, J. S., & Trapnell, P. D. (1996). A dyadic-interactional perspective on the five-factor model. In J. S. Wiggins (Ed.), *The five-factor model of personality: Theoretical perspective* (pp. 88–162). New York: The Guilford Press.
- Zeldow, P. B., Clark, D., & Daugherty, S. R. (1985). Masculinity, femininity, Type A behavior, and psychosocial adjustment in medical students. *Journal of Personality and Social Psychology*, **48**, 481–492.