The objective of the present study was to evolve a comprehensive scale for assessing the multiple aspects of the self-concept to be used on the general adult population in the Indian setup; and to test its utility in the clinical situation.

An attempt was made to scrutinise more than 55 available empirical tools on various aspects of self. All those aspects of self that were considered important in understanding the clinical population, along with the key concepts used in the literature, were considered in the present study i.e., aspects of Personal Self, Family Self, Social Self, Self Acceptance, Self Confidence, Self Actualisation, Causal Attribution to self or External Forces and Social Desirability.

Two hundred and twenty items selected for the present study from 10 different tools were examined carefully to eliminate overlapping, culturally irrelevant and ambiguous items. Some of the complex items were edited and reworded, and a fairly uniform set of items were arrived at. 50% of the items were positively worded and 50% negatively worded for each aspect of the self-concept to control for acquiescence response set. The items were then scrutinised by a professor of English. A Likert type, 5 point scale was decided upon.

The selected items for the 8 subscales were given
to 5 judges with more than 10 years of academic and clinical experience for judging their meaningfulness, comprehensibility, representation of the claimed aspects of self, suitability of the format of the statement to the response categories and checking whether the changes effected in the items were appropriate. Two hundred and fourteen items having an agreement among 3 or more judges were retained for the scale which was to be called the Self-Concept Scale. The content validity was thus established.

A pilot study was undertaken where the scale along with a Demographic Data Sheet was administered to 30 subjects with an equal representation of sexes, who were within the age range of 20-39 years, had an education of 10 years and above and were conversant in English. As a result of the pilot study, the inclusion criterion of education was increased to 12 years.

The Self-Concept Scale was administered to a larger sample (N = 328) fulfilling the same criteria as in the pilot study. The protocols were scored. Correlation matrices prepared for the subscales separately resulted in the rejection of 4 subscales due to rejection of 4 subscales due to poor significant intercorrelations among the items in their respective subscales. The subscales retained were Personal Self, Family Self, Social Self and Self Confidence. The first 20 items having the highest number of significant intercorrelations with other items were retained in all the 4 subscales. In total, 80 items constituted the Self-Concept Scale.
The data on the 4 subscales were subjected to principal factor analysis with orthogonal varimax rotation, for purposes of validating the Self Concept Scale. Twenty-two factors emerged covering 62.7% of the variance. The first 4 factors covered the largest part of the variance (31.9%) and were retained. They were named Personal Self Esteem 'negative', Personal Self Esteem 'positive', Family Self Esteem and Social Self Esteem respectively. Factors III and IV directly concurred with the aspects validated by the judges. Factors I and II together represented the subscales of Personal Self-Esteem and Self Confidence. The scale was thus factorially validated.

The Self-Concept Scale was then administered to a larger sample (N=430) fulfilling similar criteria employed in the first try out. Here again 22 factors emerged covering 63.45% of the variance. The first 4 factors covered the largest part of the variance (33.45%) and were termed as Social-Self Esteem, Personal Self-Esteem 'negative', Family Self Esteem and Personal Self Esteem 'positive'. The factors directly concurred with those that emerged in the first try out though the order of emergence differed slightly, revealing the stability of factors across samples. The subscales were thus factorially revalidated.

The data from the 2nd try out served as the normative data. T scores were calculated for each of the raw score of the 4 subscales. Higher scores are indicative of high self
Esteem.

Test-retest reliability coefficients (N=45) for the subscales of Personal Self-Esteem, Family Self-Esteem, Social Self-Esteem and Self confidence was .81, .86, .79 and .80 respectively.

The Self-Concept Scale when administered to 30 neurotic and 30 schizophrenic subjects, was successful in differentiating the clinical from the normative group with the neurotics presenting with the poorest self picture and the schizophrenics falling in between the normative and the neurotic groups, indicating the utility and clinical validity.