

# Jenkins Activity Survey (JAS)

Authored by  
**mohammad looti**

September 29, 2025

## RECOMMENDED CITATION

mohammad looti (2025). *Jenkins Activity Survey (JAS)*. PSYCHOLOGICAL SCALES.  
Retrieved from <https://scales.arabpsychology.com/?p=31447>

## Jenkins Activity Survey (JAS)

**Primary Disciplinary Field(s):** Psychology, Health Psychology, Psychometrics

### 1. Core Definition

The Jenkins Activity Survey (JAS) stands as a prominent psychological assessment tool meticulously designed to evaluate the presence and intensity of Type A behavior pattern. This behavioral construct is characterized by a distinctive cluster of personality traits and behavioral tendencies, primarily including intense **competitiveness**, a pervasive sense of **impatience**, a relentless **drive for achievement**, and often a forceful or **loudness in speech**. The JAS is presented as a self-administered, multiple-choice questionnaire, making it a practical and widely applicable instrument for both research and clinical contexts where the assessment of these specific behavioral characteristics is deemed relevant.

At its heart, the JAS aims to quantify the degree to which an individual exhibits these Type A traits, which were historically hypothesized to be associated with an elevated risk of coronary heart disease (CHD). The survey delves into various facets of an individual's daily life, probing responses to time pressure, perceptions of achievement, interpersonal interactions, and general energy levels. By synthesizing responses across numerous items, the JAS generates a composite score, along with scores on specific subscales, providing a nuanced profile of an individual's Type A tendencies rather than a simple categorical classification.

The utility of the JAS extends beyond mere identification; it provides a standardized metric that allows for comparisons across populations, interventions, and longitudinal studies. Its structured format ensures consistency in administration and scoring, a critical factor for scientific research. Furthermore, being a self-report measure, it offers insights into an individual's self-perception of their own behavioral patterns, which can be an important component in understanding their stress responses and coping mechanisms within high-pressure environments, whether academic, professional, or social.

### 2. Etymology and Historical Development

The Jenkins Activity Survey was first formally published in 1979 by its principal architects, C. David Jenkins, Stephen Zyzanski, and Ray Rosenman. Its development was deeply rooted in the groundbreaking research on the Type A behavior pattern, which gained significant traction in the 1950s and 1960s through the pioneering work of cardiologists Meyer Friedman and Ray Rosenman. They observed that many of their cardiac patients exhibited a distinct set of characteristics, which they termed Type A, contrasting them with the more relaxed Type B individuals. This initial conceptualization primarily relied on the Structured Interview (SI), a labor-intensive, clinician-administered assessment designed to elicit Type A behaviors.

As the concept of Type A personality gained widespread attention and generated considerable research interest, there arose a critical need for a more standardized, cost-effective, and easily administrable alternative to the Structured Interview. The SI, despite its perceived validity in capturing behavioral nuances, required extensive training for interviewers and was not practical for large-scale epidemiological studies or routine clinical screening. This pressing demand for a robust, self-report measure spurred Jenkins, Zyzanski, and Rosenman to develop the JAS. Their objective was to create an instrument that could reliably capture the core components of Type A behavior identified by Friedman and Rosenman, while offering greater accessibility and ease of use in diverse research settings.

The development process involved extensive empirical testing and refinement, drawing upon large samples to ensure the psychometric soundness of the instrument. The researchers meticulously selected items that best discriminated between individuals previously classified as Type A or Type B by the Structured Interview, aiming for high convergent validity. The 1979 publication marked a significant milestone, providing the scientific community with a valuable tool that facilitated a rapid expansion of research into Type A behavior, its psychosocial correlates, and its potential links to various health outcomes, particularly cardiovascular disease. The JAS effectively democratized the assessment of Type A, moving it from specialized clinical settings to broader research applications.

### 3. Key Characteristics

The Jenkins Activity Survey is fundamentally characterized by its format as a **self-administered multiple-choice assessment**, typically comprising approximately 52 to 66 items, depending on the specific version. This design allows individuals to complete the survey independently, often without the need for a trained administrator, thereby enhancing its practicality and scalability. The questions are structured to probe various aspects of an individual's daily life, focusing on their typical responses to demands, their pace of life, their drive towards goals, and their interpersonal style. For instance, items might ask about the speed at which one eats, their reactions to waiting in lines, or their level of commitment to work activities, all designed to reveal underlying Type A traits.

A crucial characteristic of the JAS is its capacity to yield not only an overall Type A score but also scores on several distinct subscales, providing a more detailed profile of an individual's specific behavioral tendencies. While the exact number and naming of subscales can vary slightly across different versions or scoring methodologies, common subscales often include **Speed and Impatience** (reflecting a sense of urgency and discomfort with delays), **Hard-Driving and Competitiveness** (indicating a strong achievement orientation and desire to outperform others), and **Job Involvement** (measuring dedication and preoccupation with work). These subscales allow researchers and clinicians to pinpoint which specific components of the broad Type A pattern are most salient for an individual, offering insights beyond a global categorization.

Another significant feature is its psychometric foundation, built to ensure reliability and validity. The multiple-choice format, often employing Likert-type scales or forced-choice options, contributes to standardized scoring, minimizing subjective interpretation. The initial development involved rigorous statistical analyses to ensure internal consistency and test-retest reliability, demonstrating that the JAS consistently measures what it purports to measure. Furthermore, efforts were made to establish its validity by demonstrating correlations with other measures of Type A behavior, such as the Structured Interview, and predicting health outcomes in prospective studies. This systematic approach to its construction solidified its standing as a credible instrument within psychological and medical research, providing a quantifiable and consistent method for assessing this complex behavioral pattern.

#### 4. Significance and Impact

The Jenkins Activity Survey has had a profound and multifaceted impact on various scientific disciplines, most notably within **health psychology**, **occupational psychology**, and **stress research**. Its primary significance lies in providing a standardized, easily administrable, and quantifiable measure of the Type A behavior pattern, thereby democratizing research into this important construct. Prior to the JAS, the assessment of Type A largely relied on the time-consuming and interviewer-dependent Structured Interview. The advent of the JAS enabled large-scale epidemiological studies, facilitated meta-analyses, and allowed for the integration of Type A assessment into broader research protocols, significantly accelerating the pace of discovery regarding personality and health linkages.

In the realm of health psychology, the JAS played a pivotal role in exploring the relationship between Type A behavior and coronary heart disease (CHD). While initial research, including the seminal Western Collaborative Group Study, suggested a strong link between global Type A and increased CHD risk, the JAS allowed for a more nuanced investigation. It helped researchers disentangle the various components of Type A, leading to the identification of hostility and anger as particularly potent predictors of adverse cardiovascular outcomes, rather than the entire constellation of Type A traits. This refinement shifted the focus of both research and intervention strategies, moving towards addressing specific maladaptive components of Type A rather than the global pattern. The JAS, therefore, significantly contributed to the understanding of behavioral risk factors for chronic diseases, paving the way for more targeted psychological interventions.

Beyond health research, the JAS has been widely utilized in occupational psychology to understand how Type A traits manifest in workplace settings and their implications for job performance, stress levels, and burnout. Researchers have employed the JAS to study the relationship between Type A behavior and career success, leadership styles, and reactions to organizational stressors. Its application has provided insights into how individual differences in personality predispose individuals to different coping mechanisms and stress vulnerabilities in

demanding professional environments. The impact of the JAS extends to informing stress management programs and organizational development strategies aimed at fostering healthier work-life balances and mitigating the negative consequences associated with maladaptive Type A characteristics, solidifying its place as a cornerstone in the study of personality and its far-reaching implications for well-being and adaptation.

## 5. Debates and Criticisms

Despite its widespread use and historical significance, the Jenkins Activity Survey, much like the broader Type A behavior pattern construct, has been subject to considerable debates and criticisms within the scientific community. A primary area of critique revolves around its **psychometric properties**, particularly concerns regarding its predictive validity in consistently linking global Type A scores to cardiovascular disease outcomes. While initial studies, especially those involving the Structured Interview, showed strong associations, subsequent research using self-report measures like the JAS yielded more mixed or weaker results. This discrepancy led to questions about whether self-report measures adequately capture the complex, often non-verbal and context-dependent, behavioral manifestations of Type A as effectively as a direct behavioral assessment.

Another significant criticism centers on the **multidimensionality of the Type A construct**. The JAS, by providing subscale scores, attempts to address this, but debates persist regarding which specific components of Type A are truly pathogenic. Critics argue that the global Type A construct, as measured by the JAS, might dilute the predictive power of its more toxic elements, such as hostility, anger, and cynical mistrust, which subsequent research identified as stronger independent risk factors for CHD. This led to a shift in focus from the overall Type A pattern to its more specific, overt components. The aggregation of various traits into a single global score or even a few subscales might obscure the unique contributions and mechanisms of each trait, limiting the instrument's precision in identifying specific behavioral targets for intervention.

Furthermore, the generalizability and potential for **cultural applicability** of the JAS have also been subjects of discussion. The Type A behavior pattern was originally conceptualized and studied predominantly in Western, particularly American, male populations. Questions have been raised about whether the specific behaviors and attitudes captured by the JAS are universally applicable across different cultures, genders, and socioeconomic groups. Cultural variations in expressing competitiveness, time urgency, and emotional responses could impact the validity of the survey in diverse populations, potentially leading to misinterpretations or biased assessments. These criticisms highlight the ongoing evolution of understanding personality-health linkages and the continuous challenge of developing culturally sensitive and precisely targeted psychological assessment tools, prompting researchers to refine their conceptualizations and measurement approaches beyond the initial broad strokes of the Type A theory.

## Further Reading

[Type A and Type B personality theory - Wikipedia](#)

[Psychological assessment - Wikipedia](#)

[C. David Jenkins - Google Scholar Profile](#)

[Jenkins, C. D., Zyzanski, S. J., & Rosenman, R. H. \(1979\). Jenkins Activity Survey Manual. The Psychological Corporation.](#)

[Western Collaborative Group Study - Wikipedia](#)

ARABPSYCHOLOGY.COM