Introduction to MMPI-2

What is the MMPI-2?

• Most widely used psychological test in the world
• 567 true-false self-report items
• Original MMPI published in 1943
  — To assist in psychiatric diagnosis
  — Empirical keying approach for clinical scales
  — Validity scales
  — Patient responses compared to visitors to the University of Minnesota hospitals
  — Change to empirical correlates approach; interpret scores based on research

• MMPI-2 published in 1989
  — Item additions, deletions, changes
  — Contemporary norms; Uniform T scores
  — K-correction maintained
  — New scales

• MMPI-A published in 1992 (14-18 years of age)
• Revised manual published in 2001
• MMPI-2-RF published in 2008
Who Can Use the MMPI-2?

- Can be administered by trained secretary, clerk, or technician
- Should be interpreted by clinician who meets test distributor qualifications (Level 3) (pearsonassessments.com)
  - License to practice psychology independently;
  - Full member of American Psychological Association or National Association of School Psychologists;
  - Doctoral (or in some cases master’s) degree in one of the fields of study indicated for the test that included training (through coursework and supervised practical experience) in the administration and interpretation of clinical instruments;
  - Proof of right to administer tests at this level in specific jurisdiction

Who can take the MMPI-2?

- 18 years of age and older
- 6th grade reading level
- Ability to follow standard instructions
- Official English, Spanish for North America, Hmong, French for Canada versions
- Other languages; consult Pearson Assessments
- Cultural and subcultural factors; interpretation shown to be same for many groups
Administering the MMPI-2

- Establish rapport before administration
- Administer under supervision
- Follow standard instructions
- Avoid defining words or helping interpret meaning of items
- Forms
  - Printed booklet
  - Standard audio tape/CD; avoid reading items aloud
  - Computerized administration
- Time – 60-90 minutes is typical for paper and pencil administration; may break into several sessions if necessary; computer administration takes less time

MMPI-2 Restructured Form (RF)

- Published 2008
- 338 items
- 35-55 minutes for booklet; 25-40 minutes for computer
- 51 scales: 42 new scales replace the MMPI-2 Clinical Scales, MMPI-2 Content Scales, and MMPI-2 Supplemental Scales
  - 7 revised validity scales; new F5
  - 3 higher order scales (Emotional, Thought, Behavioral)
  - 9 Restructured Clinical (RC) scales
  - 5 revised PSY-5 scales
  - 25 new specific problem and interest scales (e.g., suicide/death, substance abuse, aesthetic-literary interests)
Scoring the MMPI-2

- Hand scoring
- Computer scoring
  - Following computerized administration
  - Keyboard entry
  - Scanning
- Mail to Pearson Assessments
- Converting raw scores to T scores
  - Uniform T scores: Clinical, RC, Content, Content Component, PSY-5
  - Linear T scores: all other scales
  - Sample profile on next slide
• Percentile Equivalents for Uniform T Scores

- 30   <1
- 35   4
- 40   15
- 45   34
- 50   55
- 60   85
- 65   92
- 70   96
- 75   98
- 80   >99

• The following slides list MMPI-2 scales that can be scored
## Validity Scales

- CNS Cannot Say
- VRIN Variable Response Inconsistency
- TRIN True Response Inconsistency
- F Infrequency
- F_B Back Side Infrequency
- F_p Infrequency-Psychopathology
- FBS Symptom Validity Scale
- L Lie
- K Correction
- S Superlative Self-Presentation

## Clinical Scales

- 1 Hs Hypochondriasis
- 2 D Depression
- 3 Hy Hysteria
- 4 Pd Psychopathic Deviate
- 5 Mf Masculinity-Femininity
- 6 Pa Paranoia
- 7 Pt Psychasthenia
- 8 Sc Schizophrenia
- 9 Ma Hypomania
- 0 Si Social Introversion
Restructured Clinical (RC) Scales

- RCd - dem  Demoralization
- RC1 - som  Somatic Complaints
- RC2 - lpe  Low Positive Emotions
- RC3 - cyn  Cynicism
- RC4 - asb  Antisocial Behavior
- RC6 - per  Ideas of Persecution
- RC7 - dne  Dysfunctional Negative Emotions
- RC8 - abx  Aberrant Experiences
- RC9 - hpm  Hypomanic Activation

Harris-Lingoes Subscales

- D₁  Subjective Depression
- D₂  Psychomotor Retardation
- D₃  Physical Malfunctioning
- D₄  Mental Dullness
- D₅  Brooding
- Hy₁  Denial of Social Anxiety
- Hy₂  Need for Affection
- Hy₃  Lassitude-Malaise
- Hy₄  Somatic Complaints
- Hy₅  Inhibition of Aggression
Harris-Lingoes Subscales (continued)

- Pd₁ Familial Discord
- Pd₂ Authority Problems
- Pd₃ Social Imperturbability
- Pd₄ Social Alienation
- Pd₅ Self Alienation

- Pa₁ Persecutory Ideas
- Pa₂ Poignancy
- Pa₃ Naivete

Harris-Lingoes Subscales (continued)

- Sc₁ Social Alienation
- Sc₂ Emotional Alienation
- Sc₃ Lack of Ego Mastery, Cognitive
- Sc₄ Lack of Ego Mastery, Conative
- Sc₅ Lack of Ego Mastery, Defective Inhibition
- Sc₆ Bizarre Sensory Experiences
Harris-Lingoes Subscales (continued)

- Ma₁ Amorality
- Ma₂ Psychomotor Acceleration
- Ma₃ Imperturbability
- Ma₄ Ego Inflation

Si Subscales

- Si₁ Shyness/Self-Consciousness
- Si₂ Social Avoidance
- Si₃ Self/Other Alienation
## Content Scales

- ANX  Anxiety
- FRS  Fears
- OBS  Obsessiveness
- DEP  Depression
- HEA  Health Concerns
- BIZ  Bizarre Mentation
- ANG  Anger
- ASP  Antisocial Practices
- TPA  Type A Behavior
- LSE  Low Self-esteem
- SOD  Social Discomfort
- FAM  Family Problems
- WRK  Work Interference
- TRT  Negative Treatment Indicators
- CYN  Cynicism

## Content Component Scales

- Fears (FRS)
  - FRS1 – Generalized Fearfulness
  - FRS2 – Multiple Fears
- Depression (DEP)
  - DEP1 – Lack of Drive
  - DEP2 – Dysphoria
  - DEP3 – Self-Depreciation
  - DEP4 – Suicidal Ideation
- Health Concerns (HEA)
  - HEA1 – Gastrointestinal Symptoms
  - HEA2 – Neurological Symptoms
- Bizarre Mentation (BIZ)
  - BIZ1 – Psychotic Symptomatology
  - BIZ2 – Schizotypal Characteristics
- Anger (ANG)
  - ANG1 – Explosive Behavior
  - ANG2 – Irritability
Content Component Scales (continued)

- Cynicism (CYN)
  - CYN1 – Misanthropic Beliefs
  - CYN2 – Interpersonal Suspiciousness

- Antisocial Practices (ASP)
  - ASP1 – Antisocial Attitudes
  - ASP2 – Antisocial Behavior

- Type A Behavior (TPA)
  - TPA1 – Impatience
  - TPA2 – Competitive Drive

- Low Self-Esteem (LSE)
  - LSE1 – Self-doubt
  - LSE2 – Submissiveness

- Social Discomfort (SOD)
  - SOD1 – Introversion
  - SOD2 – Shyness

- Family Problems (FAM)
  - FAM1 – Family Discord
  - FAM2 – Familial Alienation

- Negative Treatment Indicators (TRT)
  - TRT1 – Low Motivation
  - TRT2 – Inability to Disclose
Supplementary Scales

- MAC-R  MacAndrew Alcoholism Scale-Revised
- AAS  Addiction Admission Scale
- APS  Addiction Potential Scale
- Es  Ego Strength
- A  Anxiety
- R  Repression
- MDS  Marital Distress Scale
- Ho  Hostility
- O-H  Overcontrolled Hostility
- Do  Dominance
- Re  Social Responsibility
- Mt  College Maladjustment
- GM  Masculine Gender Role
- GF  Feminine Gender Role
- PK  Posttraumatic Stress Disorder

Personality Psychopathology Five (PSY-5) Scales

- AGGR  Aggressiveness
- PSYC  Psychoticism
- DISC  Disconstraint
- NEGE  Negative Emotionality/Neuroticism
- INTR  Introversion/Low Positive Emotionality
Recent MMPI-2 Textbooks


