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**Introduction**

Many researchers administer the MMPI-2 but reserve items for MMPI-2-RF scales. Previous studies have supported the comparability of MMPI-2-RF scores culled from MMPI-2-RF booklets with similar scores from MMPI-2 and MMPI-2-RF booklets. However, no studies have compared the predictive utility of MMPI-2-RF scales culled from MMPI-2 versus MMPI-2-RF booklets.

**Aims & Hypotheses**

We hypothesized we would find minimal differences for most scales. However, we hypothesized VRIN-r and TRIN-r inconsistency scale mean scores would be higher when the longer MMPI-2 was administered due to the greater potential for fatigue.

**Method**

**Participants**
- Deidentified archival dataset of psychiatric inpatients (926 [83.8%] administered MMPI-2 booklet & 178 [16.2%] administered MMPI-2-RF booklet).
- MMPI-2: a 567-item True/False personality inventory.
- MMPI-2-RF: a 338-item restructured version of the MMPI-2 with 51 scales.

**Procedure**
- We examined independent samples t-tests and Hedges’ g values comparing mean scores across booklet type.
- For predictive utility, we calculated differences in g size across groups with and without relevant diagnoses. We compared confidence intervals for each booklet’s g values by scale.

**Results & Discussion**

**Scale Mean Score Comparability**
- Statistically significant mean score differences across MMPI-2 versus MMPI-2-RF booklets were observed for five of 51 scales: C5, TRIN-r, L-r, RC1, and RC2.
- Our hypothesis regarding VRIN-r was not supported. There was a notable difference in TRIN-r scores in the unanticipated direction with a small effect.

**Predictive Utility Comparability**
- A statistically significant difference in predictive utility was found for AGG-r when comparing patients with vs. without externalizing diagnoses.

**Conclusions**
- This study replicated previous research on mean score differences and uniquely compared the predictive utility of MMPI-2-RF scales culled from MMPI-2 versus MMPI-2-RF booklets.
- Results coincide with previous research, confirming the acceptability of using MMPI-2-RF booklet results to examine MMPI-2-RF scale scores.

**Limitations & Future Directions**
- Limitations include unequal sample sizes and a small sample of patients not diagnosed with thought disorders who completed the MMPI-2-RF booklet (n = 8).
- Future studies should compare scale intercorrelations across booklets and utilize equal sample sizes.

**Table 1: Mean MMPI-2-RF Scale Scores by Booklet Type**

<table>
<thead>
<tr>
<th>Scale Name</th>
<th>MMPI-2 Booklet</th>
<th>MMPI-2-RF Booklet</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>Validity Scores</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cannot Say (CNS)</td>
<td>3.08</td>
<td>1.58</td>
</tr>
<tr>
<td>Variable Response Inconsistency (VRIN-r)</td>
<td>57.89</td>
<td>14.76</td>
</tr>
<tr>
<td>True Response Inconsistency (TRIN-r)</td>
<td>61.51</td>
<td>12.73</td>
</tr>
<tr>
<td>Infrequent Responses (F-r)</td>
<td>68.81</td>
<td>25.61</td>
</tr>
<tr>
<td>Infrequent Psychopathological Responses (Fp-r)</td>
<td>64.18</td>
<td>22.81</td>
</tr>
<tr>
<td>Infrequent Somatic Responses (Fs-r)</td>
<td>60.93</td>
<td>20.14</td>
</tr>
<tr>
<td>Symptom Validity (FBS-r)</td>
<td>56.86</td>
<td>14.18</td>
</tr>
<tr>
<td>Response Bias Scale (RBS)</td>
<td>62.27</td>
<td>19.13</td>
</tr>
<tr>
<td>Uncommon Virtues (L-r)</td>
<td>61.31</td>
<td>13.29</td>
</tr>
<tr>
<td>Adjustment Validity (K-r)</td>
<td>51.36</td>
<td>12.50</td>
</tr>
</tbody>
</table>

**Higher-Order Scales**
- Emotional/Internalizing Dysfunction (EID)
- Theorizing/Abnormal Function (THF)
- Behavioral/Externalizing Dysfunction (BxD)

**Restructured Clinical Scales**
- Demoralization (RCD)
- Somatic Complaints (RC1)
- Low Positive Emotions (RC2)
- Cynicism (RCS)
- Antisocial Behavior (RC4)
- Ideas of Persecution (RRC)
- Dysfunctional Negative Emotions (RCT)
- Aberrant Experiences (RRC2)
- Hypomanic Behavior (RCH)

**Specific Probes Scales**
- Malaise (MLS)
- Gastrointestinal Complaints (GIC)
- Head Pain Complaints (HPC)
- Neurological Complaints (NLC)
- Cognitive Complaints (CCD)
- Suicidal Ideation (SUJ)
- Helplessness/Hopelessness (HLP)
- Self-Doubt (SFD)
- Inefficacy (NFC)
- Stress/Worry (STW)
- Anxiety (AXY)
- Anger Proneness (ANP)
- Behavior Restricting Fears (BRF)
- Multiple Specific Fears (MSF)
- Juvenile Conduct Problems (JCP)
- Substance Abuse (SUB)
- Aggression (AGG)
- Activation (ACT)
- Family Problems (FML)
- Interpersonal Passivity (IPP)
- Social Avoidance (SAV)
- Shyness (SHY)
- Disaffiliativeness (DSF)

**References**