

# Interpretation of MMPI-2 Validity Scales

## Why is it Important to Assess Validity?

- Under certain circumstances impression management or distortion is common
  - Seeking access to costly treatments
  - Employment screening
  - Disability evaluations
  - Personal Injury
  - Court ordered evaluations
    - Competency
    - Mitigating circumstances
    - Not Guilty by reason of diminished capacity
  - Custody

## Advantage of MMPI-2: Validity Scales

- Provide information regarding the accuracy of self-report
- Indicate the extent of distortion
  - Provides a dimensional perspective
  - Relative to others taking the MMPI-2 under similar circumstances or how distorted is the self-report of symptoms and behaviors?
- Specifies the type of distortion or impression management
- Interpretation of Substantive Scales is based on information collected from individuals accurately reporting clinical state
  - Allows confidence in the clinical inferences made from the MMPI-2 based on the substantive scales.

## Threats to Profile Validity

- Non-Content-Based Invalid Responding
  - Non-Responding
    - Leaving items blank or responding both T and F to same item
  - Random Responding
    - Intentional
    - Unintentional
      - » Reading Difficulties
      - » Comprehension
      - » Confusion
  - Fixed Responding
    - Acquiescence (yea saying)
    - Counter-Aquiescence (nay saying)

## Threats to Profile Validity cont.

### – Content-Based Invalid Responding

- Over-Reporting
  - “faking bad” by reporting non existent signs and symptoms or distorting the severity of symptoms.
  - Intentional
    - » Exaggeration versus Fabrication
  - Unintentional
    - » Highly Distressed and seeking help
- Under-Reporting
  - “faking good” or defensiveness
  - Intentional
    - » Minimization versus Denial
  - Unintentional
    - » Ego Defenses
    - » Social Desirability

## Assessing Protocol Validity with the MMPI-2

| <u>Threat</u>            | <u>Scale(s)</u>                          |
|--------------------------|--|
| <i>Non-Content-Based</i> |  |
| Non-responding           | CNS                                      |
| Random Responding        | VRIN                                     |
| Fixed Responding         | TRIN                                     |
| <i>Content-Based</i>     |  |
| Over-Reporting           | F, F <sub>B</sub> , F <sub>p</sub> , FBS |
| Under-Reporting          | L, K, S                                  |

## Cannot Say (CNS)

- A 567-Item “Scale”
- Possible Reasons for Elevation:
  - Lack of cooperation & defensiveness
  - Lack of insight
  - Obsessiveness
  - Reading difficulties
  - Confusion
- Effects on Profile:
  - Deflated score
  - Depend upon location
    - If 90% of items endorsed on a scale, little impact on predictive validity of the scale.

## VRIN (Variable Response Inconsistency)

- Designed to Detect Random Responding
  - Item content either similar or opposite in content
- 47 Item Pairs, 12 Can Be Scored Two Ways
- T-Scores Range from 30 to 120
- Applications
  - Detection of random responding
    - $VRIN \geq 80$       Profile uninterpretable
  - Detection of “hypervigilance”
    - $VRIN < 40$
  - Aid in the interpretation of infrequency scales

## TRIN (True Response Inconsistency)

- Designed to Detect Fixed Responding (Acquiescence or Counter-Acquiescence)
- 20 pairs opposite in content, 3 Symmetrically scored (both T or both F)
- Raw Score Converted to T-Score Which Will Always be Equal to or Greater Than 50
- A T-Score Greater Than 50 Will be Followed by a “T” or an “F”
- A fixed response set indicated if
  - $TRIN \geq 80T$  OR  $TRIN \geq 80F$
- Applications
  - Detection of fixed responding
    - Difficulty reading/comprehension
    - Oppositionality
  - Interpretation of L, K and S

## F

- Used to Identify Over-Reporting
- 60 “infrequently endorsed” items among first 370 items in the booklet
- Possible Reasons for Elevation
  - Intentional Over-reporting
  - Random responding
  - Fixed Responding
  - Severe psychopathology or severe distress
  - Unintentional over-reporting
- Use VRIN to evaluate random responding
- Use TRIN to evaluate fixed responding
- Use  $F_p$  to evaluate intentional over-reporting

## $F_B$

- Designed to detect changes in responding between first and second half of the test
- 40 infrequently endorsed items appearing in second half of booklet
- Possible reasons for elevation
  - Intentional over-reporting
  - Random responding
  - Fixed responding
  - Severe psychopathology or severe distress
  - Unintentional over-reporting
  - Fatigue
- If T-score  $F_B > T\text{-score } F+20$ , significant change in responding occurred

## $F_P$

### (Infrequency-psychopathology)

- Designed to detect intentional over-reporting in individuals with psychopathology
- 27 items endorsed infrequently by a variety of clinical samples including psychiatric inpatients
- Possible Reasons for Elevation:
  - Intentional Over-reporting
  - Random Responding
  - Fixed Responding

## $F_p$ (Infrequency-psychopathology)

- If  $F_p \geq 100$  AND  $VRIN < 70$  AND  $TRIN < 70$ , intentional over-reporting is indicated.
- If F is elevated AND  $F_p < 70$ , the elevated score on F likely reflects severe pathology, distress, or unintentional over-reporting
- $F_p > 70$  and  $< 100$  reflects degree of exaggeration of symptoms

## Symptom Validity Scale (FBS)

- 43 item rationally derived scale based on item endorsement frequencies in individuals undergoing assessment based on disability/personal injury claims.
- The scale assesses somatic concerns, unusual beliefs, and deviant attitudes.
- $T \geq 100$  associated with low false positive rate and indicative of non-credible presentation especially of cognitive impairment.
- Possible reasons for the elevations are inconsistent responding and/or overreporting of somatic or cognitive symptoms.

## Uncommon Virtues (L ) Scale

- Designed to detect intentional under-reporting
  - Claiming an unusual number of uncommon virtues
- 15 obvious items
- All keyed “false”
- Possible reasons for elevation:
  - Intentional under-reporting
  - Lack of insight
  - Very traditional
  - Indiscriminant “false” responding
- If L is elevated can not assume lack of elevation on MMPI-2 substantive scales is associated with the absence of psychopathology

## K Scale

- Designed to detect unintentional under-reporting
  - Claim to be well adjusted and free of psychopathology
- 30 “subtle” items
- All but one keyed “false”
- Possible reasons for elevation
  - Defensiveness
  - Psychological well-being
- In clinical settings if K is elevated, can not assume absence of elevations on substantive scales is associated with absence of psychopathology.



## Superlative Self-Presentation (S)

- Developed by Butcher and Han (1995) to identify under-reporting with the entire MMPI-2 item pool
- 50 items, 44 keyed False
- Contains subscales to assist in identifying specific areas of defensiveness:
  - Belief in human goodness
  - Serenity
  - Contentment with life
  - Patience and denial of irritability and anger
  - Denial of moral flaws