

# Profiles

PUTTING ASSESSMENTS TO WORK

## MCMI-III™ TEST

### Five-year Study Lays Foundation for Innovative Corrections Management Strategies MCMI-III™

#### Test in Corrections Settings

*"The MCMI-III has added a whole new dimension to the body of information our prison psychologists and officers can use to support their decision-making."*

#### Background

After 25 years in private practice, John Stoner, PhD, entered the corrections arena in 1993, taking a position with the Colorado State Penitentiary. Shortly thereafter, he was asked to review and recommend changes to Colorado's prisoner intake process. The goal was to make screening procedures more efficient, relevant and cost-effective.

After reviewing the current situation, Stoner determined that the psychological tests used in the Colorado system were outdated. In search of better instruments, he found that the MCMI-III™ (Millon™ Clinical Multiaxial Inventory-III) test by Theodore Millon, PhD, DSc, came closest to meeting their needs because it provided the most complete assessment of personality disorders—a major issue among the individuals who are incarcerated.

Because the MCMI-III report was designed for use with clinical populations, there were opportunities to improve it for use with prison populations. In 1995, Stoner approached Pearson and Millon about the potential to create a new report that would offer psychologists and prison officers a solid basis for determining management and treatment strategies in correctional institutions. A collaborative effort by Stoner, Millon and Pearson resulted in the publication of the MCMI-III Corrections Report in 1998.

Stoner has continued to participate in a five-year research project on the MCMI-III test's usefulness in correctional settings. The following article provides an overview of the study, key results, and how the findings may change the way psychologists and prison personnel approach prisoner treatment and management.

The Study: Five-year Study Lays Foundation for Innovative Corrections Management Strategies

## Correctional experts provide basis for prototype report

As the first step in creating a corrections-specific report for the MCMI-III test, Millon gathered recommendations from 48 correctional psychologists and seven chiefs of correctional psychology from several state systems. He asked them to identify report features that would be especially helpful to them in appraising inmates. He also slightly adjusted the test's base rates to reflect the frequency of certain kinds of problems in prison populations, using input from the correctional psychologists. Data for the correctional norms were gathered on 1,676 male and female inmates. Based on this and other information, Millon created the MCMI-III Corrections Report, a clinically valid tool that addresses corrections-relevant issues such as sexual predation, violence potential, reaction to authority, escape risk and suicidal inclinations.

From 1995 to present, the Colorado Department of Corrections has administered the MCMI-III tests to approximately 10,000 inmates. Stoner notes that the Colorado system was of an ideal size for the research. It provided a large enough corrections population to yield significant data—yet it was small enough that the test could be given to nearly all incoming prisoners, who enter the state system through a single intake center. The MCMI-III test was given to inmates as part of a battery of assessments that includes the McGraw-Hill Test of Adult Basic Education, the Culture Fair Test of Intelligence and the Level of Services Inventory (LSI).

## Empirical results enable predictions of inmate behavior

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To help validate and analyze the collected data, Paul Retzlaff, PhD, a national expert on the Millon tests, was brought on as a consultant to the project. From the results of the study, the team created a dataset of 10,000 inmates, with 200 other variables that cover such factors as intake demographics, severity of crime, hours of mental health treatment received, number of disciplinary write-ups and LSI results.

A key discovery of the study is that the single most common personality type among inmates is the narcissistic personality type—not the antisocial personality type, as was previously believed. The latter type ranks second in frequency, with histrionic personality type ranking third.

With nearly five years' worth of data available, the team has begun to look at the correlation between MCMI-III test results at intake and individuals' behavior while incarcerated.

“The current report is based on a set of clinical hypotheses about what we might expect of an incarcerated person,” says Stoner. “The research has given us empirical data about what actually has happened with inmates. While the findings generally support the initial hypotheses, they allow us to create much more focused behavioral projections.”

The study has shown some dramatic results in the test's ability to predict mental health events. An individual with an elevated score (75 or above) on the MCMI-III Major Depression scale, for example, has a 790% increased likelihood of being given a psychological diagnosis within a year, which may be for depression or other mental health issues. An individual with an elevated score on the Drug Abuse scale has a 1130% increased risk of being assessed as having a substance abuse problem. Stoner points out the usefulness of these predictors in enabling prison psychologists to arrange appropriate treatment early on for such individuals.

The predictive capability of the test for criminal or violent behaviors, while not as dramatic as for mental health events, is still notable. For an individual with an elevated score on the Delusional scale, for example, the likelihood of an assault charge during incarceration within two years is 280% greater than for individuals with scores of 74 or below on the same scale. An individual with an elevated score on the Sadistic scale has a 150% increased risk of being involved in a fighting incident within a year.

“The MCMI-III assessment has added a whole new dimension to the body of information our prison psychologists and officers can use to support their decision-making,” says Stoner.

## Wealth of data leads to multiple applications

For mental health professionals at the Colorado facilities, the introduction of the MCMI-III test for intake screening has created a baseline for tracking individuals’ adjustment during incarceration.

In addition, the research team has begun incorporating the study’s collective data into the formulas for the shorthand risk codes that are entered into the inmate’s file at intake. These codes alert prison personnel to potential issues such as psychiatric, educational or medical needs as well as projected behaviors such as violence or sex offense.

By the end of the year, Stoner and Retzlaff plan to train all primary users of the data in the Colorado system on the preliminary results of the study, including mental health staff, clinicians, social workers, case managers, security personnel and line staff workers.

Plus, the team is developing training for new officers on at least three distinct management styles tied to inmate personality types.

“Traditionally, there’s been a ‘one size fits all’ management strategy for prisoners: be fair, firm and consistent,” says Stoner. “With the benefit of this research, we’re seeking to make our staff much more sophisticated in adjusting their response style to the specific character traits of the inmate.”

Given the extensive data yielded by the project, Stoner expects that they’ll be mining the results for years. “What the study tells me,” he says, “is that the MCMI-III Corrections Report is clearly identifying factors at intake that can have a powerful impact on the management and treatment decisions we make in correctional systems.”

John Stoner, PhD, has written numerous articles for professional journals and presented national workshops on the use of psychological tests in correctional settings. He received a Bachelor’s degree in psychology from the College of Idaho and a Doctor of Philosophy from the University of Utah. His career has spanned private practice as well as faculty positions with the Boise State University and the College of Idaho. With the Colorado State Penitentiary system since 1993, he has held various positions, including Mental Health Coordinator, and Director of the Diagnostic Unit at the Denver Reception and Diagnostic Center.

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