

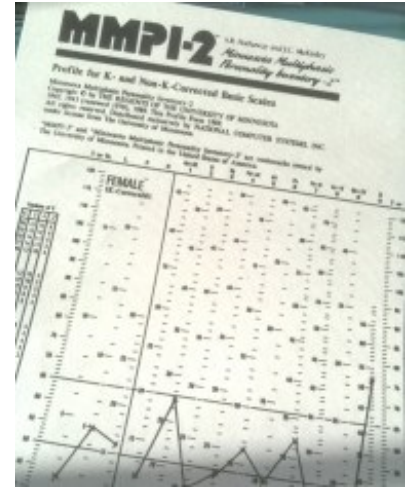
Minnesota Multiphasic Personality Inventory (MMPI)

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Pages: 1 [2](#)[All](#)

The Minnesota Multiphasic Personality Inventory (MMPI) is a psychological test that assesses [personality traits](#) and psychopathology. It is primarily intended to test people who are suspected of having mental health or other clinical issues. Although it was not originally designed to be administered to non-clinical populations, it has found

The MMPI is currently commonly administered in one of two forms — the MMPI-2, which has 567 true/false questions, and the newer MMPI-2-RF, published in 2008 and containing only 338 true/false items. While the MMPI-2-RF is a newer measure and takes about half the time to complete (usually 30 to 50 minutes), the MMPI-2 is still the more widely used test because of its existing large research base and familiarity with psychologists. (Another version of the test — the MMPI-A — is designed exclusively for teenagers.)



The Minnesota Multiphasic Personality Inventory is considered a protected psychological instrument, meaning it can only be given and interpreted by a psychologist trained to do so (you cannot find the test online). While it's commonly administered by computer nowadays (and requires no direct professional involvement during its administration), psychological testing is nearly always preceded by a clinical interview by the psychologist who is doing the testing. After the computer scores the test results, the psychologist writes up a report interpreting the test results in the context of the person's history and current psychological concerns.

What Does the MMPI-2 Test?

The MMPI-2 is designed with 10 clinical scales which assess 10 major categories of abnormal human behavior, and four validity scales, which assess the person's general test-taking attitude and whether they answered the items on the test in a truthful and accurate manner.

The 10 Clinical Subscales

The older MMPI-2 is made up 10 clinical subscales, which are a result of answering certain questions on the test in a specific manner:

1. **Hypochondriasis (Hs)** – The Hypochondriasis scale tapes a wide variety of vague and nonspecific complaints about bodily functioning. These complaints tend to focus on the abdomen and back, and they persist in the face of negative medical tests. There are two primary factors that this subscale measures — poor physical health and gastrointestinal difficulties. The scale contains 32 items.
2. **Depression (D)** – The Depression scale measures clinical depression, which is characterized by poor morale, lack of hope in the future, and a general dissatisfaction with one's life. The scale contains 57 items.
3. **Hysteria (Hy)** – The Hysteria scale primarily measures five components — poor physical health, shyness, cynicism, headaches and neuroticism. The subscale contains 60 items.
4. **Psychopathic Deviate (Pd)** – The Psychopathic Deviate scale measures general social maladjustment and the absence of strongly pleasant experiences. The items on this scale tap into complaints about family and authority figures in general, self alienation, social alienation and boredom. The scale contains 50 items.

5. **Masculinity/Femininity (Mf)** – The Masculinity/Femininity scale measures interests in vocations and hobbies, aesthetic preferences, activity-passivity and personal sensitivity. It measures in a general sense how rigidly a person conforms to very stereotypical masculine or feminine roles. The scale contains 56 items.
6. **Paranoia (Pa)** – The Paranoia scale primarily measures interpersonal sensitivity, moral self-righteousness and suspiciousness. Some of the items used to score this scale are clearly psychotic in that they acknowledge the existence of paranoid and delusional thoughts. This scale has 40 items.
7. **Psychasthenia (Pt)** -The Psychasthenia scale is intended to measure a person's inability to resist specific actions or thoughts, regardless of their maladaptive nature. "Psychasthenia" is an old term used to describe what we now call [obsessive-compulsive disorder \(OCD\)](#), or having obsessive-compulsive thoughts and behaviors. This scale also taps into abnormal fears, self-criticisms, difficulties in concentration and guilt feelings. This scale contains 48 items.
8. **Schizophrenia (Sc)** – The Schizophrenia scale measures bizarre thoughts, peculiar perceptions, social alienation, poor familial relationships, difficulties in concentration and impulse control, lack of deep interests, disturbing question of self-worth and self-identity, and sexual difficulties. This scale has 78 items, more than any other scale on the test.
9. **Hypomania (Ma)** – The Hypomania scale is intended to measure milder degrees of excitement, characterized by an elated but unstable mood, psychomotor excitement (e.g., shaky hands) and flight of ideas (e.g., an unstoppable string of ideas). The scale taps into overactivity — both behaviorally and cognitively — grandiosity, irritability and egocentricity. This scale contains 46 items.
0. **Social Introversion (Si)** – The Social Introversion scale measures the social introversion and extroversion of a person. A person who is a social introvert is uncomfortable in social interactions and typically withdraws from such interactions whenever possible. They may have limited social skills, or simply prefer to be alone or with a small group of friends. This scale has 69 items.

While there are dozens of additional content scales that have been independently developed around the MMPI-2, these are the core 10 scales used by the test.

The 4 Validity Scales

The MMPI-2 is not a valid measure of a person's psychopathology or behavior if the person taking the test does so in a way that is not honest or frank. A person may decide, for whatever reasons, to overreport (exaggerate) or underreport (deny) the behavior being assessed by the test.

The Minnesota Multiphasic Personality Inventory-2 (MMPI-2) contains four validity scales designed to measure a person's test-taking attitude and approach to the test:

- **Lie (L)** – The Lie scale is intended to identify individuals who are deliberately trying to avoid answering the MMPI honestly and in a frank manner. The scale measures attitudes and practices that are culturally laudable, but rarely found in most people. In other words, people who make these items are often trying to make themselves look like a better person than they really are (or that anybody is). The scale contains 15 items.
- **F** – The F scale (the "F" does not stand for anything, although it is mistakenly sometimes referred to as the Infrequency or Frequency scale) is intended to detect unusual or atypical ways of answering the test items, like if a person were to randomly fill out the test. It taps a number of strange thoughts, peculiar experiences, feelings of isolation and alienation, and a number of unlikely or contradictory beliefs, expectations and self-descriptions. If a person answers too many of the F and Fb scale items incorrectly, it will invalidate the entire test. Contrary to some descriptions of the scale, F scale items are scattered throughout the entire test up until around item 360. The scale contains 60 items.

- **Back F (F^b)** – The Back F scale measures the same issues as the F scale, except only during the last half of the test. The scale has 40 items.
- **K** – The K scale is designed to identify psychopathology in people who otherwise would have profiles within the normal range. It measures self-control, and family and interpersonal relationships, and people who score highly on this scale are often seen as being defensive. The scale contains 30 items.

There are additional content and validity scales that have been developed independently from the core MMPI, but often scored by a psychologist who is administering the test. This article describes only these core scales used in the MMPI-2.

MMPI-2 Scoring and Interpretation

After the MMPI-2 is taken and scored, an interpretive report is constructed by the psychologist. Scores are converted to what are called normalized “T scores” on a scale ranging from 30 to 120. The “normal” range of T scores is from 50 to 65. Anything above 65 and anything below 50 is considered clinically significant and open for interpretation by the psychologist.

Throughout the years and over numerous research studies, a set of standard clinical profiles have emerged on the MMPI-2 which professionals call “codetypes.” A codetype is simply when two scales demonstrate significantly high T scores, with one being higher than the other. For instance, a 2-3 codetype (meaning that both Scale 2 and Scale 3 are significantly elevated) suggests significant depression, lowered activity levels and helplessness; furthermore the person may have become accustomed to their chronic problems and often have physical complaints.

Dozens of clinical codetypes are well-known and understood, as well as T scores that “spike” on a single Scale (such as a “Spike 4”, which would be a sign of a person who shows impulsive behavior, rebelliousness and poor relationships with authority figures). People with little or no psychopathology or personality concerns will not reach significance for any particular codetype. Most people with personality or mental health issues will usually have only one codetype, or a single codetype with a spike on a third scale.

Like all psychological interpretation, scores are analyzed in context of the individual being tested — not in a vacuum. For instance, we might expect a higher score in Hypomania (a measure of energy levels) in a teen, but it might be more unusual to see such a score in a senior citizen. Ideally, the MMPI-2 is being administered as a part of a battery of psychological tests, so that other testing can either confirm or deny the hypotheses the MMPI-2 may suggest.

Development of the MMPI

A lot of people comment on the fact that the questions on the MMPI don’t seem to make a lot of sense. On their own, they don’t. That’s because the questions don’t directly measure mental health problems or psychopathology. The items were derived from an original set of over 1,000 items the researchers collected in the 1930s from psychiatric textbooks of the time, personality inventories and clinical experience.

For an item to appear on a specific scale, it had to be answered significantly differently by a group of patients who were independently determined to have the problem of the scale’s focus. For instance, for the hypochondriasis scale, the researchers looked at a group of 50 hypochondriacs. They then had to compare this group with a group of people who had no psychiatric problems — a normal population that served as a reference group. The original MMPI was normed on 724 individuals who were friends or relatives of patients in the University Hospitals in Minneapolis, and who were not currently receiving treatment from a doctor.

The MMPI-2 is the result of an effort to update the MMPI, including rewording of many of the items (to reflect language changes), removing items that no longer were good scale predictors, and adding new items. It was then

standardized on a new sample of 2,600 individuals from seven geographically diverse states and reflective of the U.S. Census. The MMPI-2 does not differ significantly from the MMPI in terms of how the test is administered, its clinical or validity scales.

MMPI-2-RF

The MMPI-2-RF (MMPI-2 Restructured Form) was published in 2008 and is an update to the MMPI-2; however it is not a replacement to the MMPI-2 because it was designed to better address current models of psychopathology and personality. The Restructured Clinical (RC) scales — which bear no connection to the MMPI-2’s original clinical scales (above) are:

- 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

A future article will discuss the MMPI-2-RF in greater depth.

Related Articles

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Pages: [1](#) [2](#)[All](#)



NAME (K Corrected)	
Not Say.....	Raw
Frequency.....	0
Attention.....	2
Schizophrenia.....	5
Obsession.....	16
Manic Hypertension.....	12
Oppathic Deviate.....	27
Intity-Femininity.....	20
Us.....	23
sthenia.....	34
sthenia.....	12