Therapeutic Feedback with the MMPI-2
A Positive Psychology Approach

Richard W. Levak, Liza Siegel, and David S. Nichols
(also known as Richard Lewak)
with Ronald A. Stolberg

Contents

Foreword ........................................................................................................................................... xix
Acknowledgments .......................................................................................................................... xxi

1 Introduction: History of the MMPI/MMPI-2 ............................................................................ 1
   Evolution of the MMPI/MMPI-2 .................................................................................................. 1
   Traditional Uses of the MMPI/MMPI-2 .................................................................................... 3
   The MMPI/MMPI-2 and Feedback ........................................................................................... 3
   The Influence of Positive Psychology...................................................................................... 5
   History of Therapeutic Models of Assessment .................................................................. 6
   Basics of the Therapeutic Assessment .................................................................................. 7
   Therapeutic Feedback With the MMPI-2 ............................................................................... 8
   Code Types, Conditioning Experiences, and Feedback ...................................................... 10
   Organization of This Handbook ......................................................................................... 13

2 Steps of a Therapeutic Assessment and Feedback ................................................................. 17
   Preassessment ...................................................................................................................... 18
      Developing Rapport ............................................................................................................. 18
      Taking a Therapeutic History ............................................................................................ 19
   Therapeutic History Form ................................................................................................. 20
   Preparing the Test Results for Therapeutic Feedback ......................................................... 28
      Scoring ............................................................................................................................... 28
      Validity .............................................................................................................................. 28
      Composing a Feedback Report .......................................................................................... 29
   Therapeutic Feedback and the Collaborative Process .......................................................... 33

3 Validity ........................................................................................................................................ 35
   Lie Scale (L) .......................................................................................................................... 35
   Feedback Statements—Elevated Profiles (T-Score > 65) ..................................................... 37
      Feeling Judged or Unfairly Accused .................................................................................. 37
      Conventional ...................................................................................................................... 37
      Judgmental or Moralistic .................................................................................................. 38
      Conscientious or Self-Controlled ..................................................................................... 38
      Lacking Insight .................................................................................................................. 38
      Defensive ........................................................................................................................... 38
      Rigid or Perfectionist ........................................................................................................ 38

The Infrequency Scale (F)........................................................................................................40
Feedback Statements—Elevated Profiles (T-Score > 65)..................................................42
  Stress, Panic, or Feeling Alienated..................................................................................42
  Pleading for Help...........................................................................................................42
  Confused or Disorganized.............................................................................................42
  Unconventional.............................................................................................................42
  Moody or Unstable........................................................................................................43
Correction Scale (K)............................................................................................................44
Feedback Statements—Low T-Score Profiles......................................................................46
  Underregulated............................................................................................................46
  Easily Overwhelmed....................................................................................................46
  Self-Doubting or Self-Critical......................................................................................46
  Anxious or Fearful........................................................................................................46
  Direct or Nondefensive...............................................................................................47
Correction Scale (K)............................................................................................................48
Feedback Statements—Elevated Profiles (T-Score > 65)..................................................50
  Conventional, Rational, Logical..................................................................................50
  Defensive....................................................................................................................50
  Emotionally Constricted.............................................................................................50
  Lacking Self-Awareness..............................................................................................50
  Resilience....................................................................................................................50
Back Infrequency Scale (Fb)...............................................................................................52
Scale: The Infrequency Psychopathology Scale (Fp)..........................................................55
Superlative Self-Presentation Scale (S)................................................................................57
Feedback Statements—Elevated Profiles (T-Score > 65)..................................................59
  Rational or Logical......................................................................................................59
  Belief in People’s Goodness.........................................................................................59
  Moral............................................................................................................................59
  Content.......................................................................................................................59
  Controlled or Poised....................................................................................................59
4 Scale 1................................................................................................................................61
Scale 1: Hypochondriasis (HS)..........................................................................................61
Feedback Statements—Elevated Profiles (T-Score > 65)..................................................64
  Strengths....................................................................................................................64
  Physical Illness or Pain...............................................................................................65
  Fatigue or Irritability....................................................................................................65
  Low Sex Drive.............................................................................................................65
  Rigid or Critical..........................................................................................................65
  Unhappy or Pessimistic..............................................................................................66
  Expressing Anger Indirectly.......................................................................................66
  Self-Centered or Demanding.....................................................................................66
  Complaining...............................................................................................................66

Guilty ................................................................................................................... 91
Brave in the Face of Pain ................................................................................... 91
Responsible, Conscientious, Self-Sacrificing ...................................................... 92
Code-Type 2-4/4-2 ....................................................................................................... 94
Feedback Statements—Elevated Profiles (T-Score > 65) .......................................... 97
Depressed or Trapped ........................................................................................ 97
Alienated or Relationship Problems ............................................................... 97
Feeling Victimized or Resentful ......................................................................... 97
Possible Legal Problems ..................................................................................... 98
Self-Defeating ...................................................................................................... 98
Hostile, Sarcastic, Argumentative ....................................................................... 98
Impulsive or Addictive Personality ................................................................... 98
Manipulative or Demanding ............................................................................... 98
Treatment and Self-Help Suggestions ......................................................................... 99
Code-Type 2-4-6 ........................................................................................................ 101
Feedback Statements—Elevated Profiles (T-Score > 65) .........................................104
Depression or Hopelessness ............................................................................104
Fatigue or Weight Changes ...........................................................................104
Anxious ..............................................................................................................104
Relationship Problems or Alienation ..............................................................104
Resentful or Trapped ........................................................................................105
Critical or Blaming ............................................................................................105
Guilty or Withdrawn ........................................................................................105
Irritable, Angry, Argumentative ........................................................................105
Impulsive or Addictive Behaviors ....................................................................106
Treatment and Self-Help Suggestions .......................................................................106
Code-Type 2-4-7 ........................................................................................................ 108
Feedback Statements—Elevated Profiles (T-Score > 65) .........................................112
Worried, Panicked, Depressed .........................................................................112
Phobias ..............................................................................................................112
Sleep Problems or Substance Abuse ...............................................................112
Concentration or Memory Problems ................................................................112
Weakness, Fatigue, Somatic Symptoms ........................................................113
Ruminations or Obsessions ..............................................................................113
Impulsive ...........................................................................................................113
Suicidal Ideation ................................................................................................113
Treatment and Self-Help Suggestions .......................................................................114
Code-Type 2-4-8 ........................................................................................................ 116
Feedback Statements—Elevated Profiles (T-Score > 65) .........................................120
Depression .........................................................................................................120
Distrust ...............................................................................................................121
Alienation, Disconnection, Emptiness ............................................................121
Family, Marital, or Sexual Problems ...............................................................121

CONTENTS

Paranoia ............................................................................................................. 121
Suicide or Self-Defeating Potential ................................................................. 121
Angry or Moody .............................................................................................. 122
Keep People at a Distance ............................................................................. 122
Manipulative ................................................................................................... 122
Unpredictable or Self-Destructive ................................................................. 122
Treatment and Self-Help Suggestions ............................................................. 123
Code-Type 2-6/6-2 ........................................................................................... 125
Feedback Statements—Elevated Profiles (T-Score > 65) ............................... 128
  Depression ..................................................................................................... 128
  Hypersensitive .............................................................................................. 128
  Feeling Victimized, Unfairly Treated, Trapped ............................................ 128
  Critical .......................................................................................................... 129
  Resentful ....................................................................................................... 129
  Irritable ......................................................................................................... 129
Treatment and Self-Help Suggestions ............................................................. 130
Code-Type 2-7/7-2 ........................................................................................... 132
Feedback Statements—Elevated Profiles (T-Score > 65) ............................... 136
  Depressed or Pessimistic ........................................................................... 136
  Sleeping or Eating Problems ...................................................................... 136
  Somatic Concerns or Memory and Concentration Problems ................... 136
  Hyperresponsible or Serious .................................................................... 136
  Worries, Obsessions, Phobias ................................................................. 137
  Guilt ............................................................................................................. 137
  Hopelessness or Possible Suicidal Ideation ................................................ 137
  Dependent ................................................................................................... 137
  Lacking in Assertiveness .......................................................................... 137
Treatment and Self-Help Suggestions ............................................................. 138
Code-Type 2-7-8 ............................................................................................. 141
Feedback Statements—Elevated Profiles (T-Score > 65) ............................... 145
  Anxiety, Fears, Phobias ........................................................................... 145
  Depression or Anhedonia ......................................................................... 145
  Difficulties With Memory and Concentration ........................................... 146
  Difficulties With Sleep or Fatigue ............................................................ 146
  Somatic Complaints .................................................................................. 146
  Psychotic Thoughts .................................................................................... 146
  Feeling Inferior, Damaged, Unlovable ...................................................... 147
  Self-Defeating or Suicidal ...................................................................... 147
  Compulsive, Perfectionist, Procrastinating .............................................. 147
Treatment and Self-Help Suggestions ............................................................. 148
Code-Type 2-8/8-2 ........................................................................................... 150
Feedback Statements—Elevated Profiles (T-Score > 65) ............................... 153
  Depression or Anhedonia ........................................................................... 153

CONTENTS

Memory or Concentration Difficulties .............................................................. 154
Sleep or Appetite Problems ........................................................................... 154
Sexual Difficulties ....................................................................................... 154
Anxiety .......................................................................................................... 154
Somatic Complaints ..................................................................................... 154
Socially Withdrawn ...................................................................................... 155
Possible Thought Disorder ........................................................................... 155
Blunted or Inappropriate Affect .................................................................... 155
Feelings of Worthlessness ............................................................................ 155
Derealization or Depersonalization ............................................................... 155
Fears of Social Interaction ............................................................................ 156
Possible Suicidal Attempts .......................................................................... 156
Treatment and Self-Help Suggestions .......................................................... 156

Code-Type 2-9/9-2 ...................................................................................... 158

Feedback Statements—Elevated Profiles (T-Score > 65) ................................. 162
Moody or Restless ....................................................................................... 162
Euphoric or Impulsive ............................................................................... 162
Depression .................................................................................................. 162
Irritable or Temper Outbursts ................................................................. 163
Driven ......................................................................................................... 163
Anxious or Worried .................................................................................... 163
Sleep or Eating Problems ........................................................................... 163
Alcohol or Chemical Abuse ........................................................................ 163
Distractible ................................................................................................. 164
Cynical or Suspicious ............................................................................... 164
Stimulus Seeking ......................................................................................... 164
Treatment and Self-Help Suggestions ......................................................... 165

Code-Type 2-0/0-2 ...................................................................................... 167

Feedback Statements—Elevated Profiles (T-Score > 65) ................................. 170
Socially Withdrawn or Quiet ...................................................................... 170
Sad Mood ................................................................................................... 170
Sleeping, Eating, Sexual Difficulties .......................................................... 171
Fearful or Worried ..................................................................................... 171
Self-Critical or Low Self-Esteem ............................................................... 171
Dutiful or Responsible ............................................................................... 171
Nondemanding or Nonassertive ............................................................... 171
Cautious ...................................................................................................... 172
Nonexpressive or Self-Contained .............................................................. 172
Sensitive to Criticism ............................................................................... 172
Alcohol Use ............................................................................................... 172
Treatment and Self-Help Suggestions ......................................................... 173
CONTENTS

6 Scale 3 .................................................................................................................. 175
Scale 3: Hysteria (Hy) ................................................................................................ 175
Feedback Statements—Elevated Profiles (T-Score > 65) ......................................... 178
  Health Concerns ................................................................................................ 178
  Sleep Difficulties or Sexual Concerns ................................................................ 179
  Sadness or Dysphoria ....................................................................................... 179
  Anxious or Overwhelmed ................................................................................ 179
  Positive or Conflict Avoider .............................................................................. 179
  Need for Affection and Attention ..................................................................... 180
  Repression or Denial of Negative Emotions.................................................... 180
  Conversion Disorder ......................................................................................... 180
Treatment and Self-Help Suggestions ....................................................................... 181
Code-Type 3-4/4-3 ..................................................................................................... 184
Feedback Statements—Elevated Profiles (T-Score > 65) ......................................... 188
  Relationship Difficulties .................................................................................... 188
  Anger Problems ................................................................................................. 189
  Role Playing or Conflict Avoiding .................................................................... 189
  Somatic Symptoms ............................................................................................ 189
  Alcohol or Substance Abuse ............................................................................. 189
  Acting Out ......................................................................................................... 189
  Approval Seeking or Conforming .................................................................... 190
  Rebellious or Hate to Be Controlled ................................................................ 190
  Doesn’t Trust ..................................................................................................... 190
  Sensitive to Rejection ........................................................................................ 190
  Dissociative ........................................................................................................ 191
Treatment and Self-Help Suggestions ....................................................................... 191
Code-Type 3-6/6-3 ..................................................................................................... 194
Feedback Statements—Elevated Profiles (T-Score > 65) ......................................... 197
  Strengths ............................................................................................................ 197
  Sensitive to Criticism ......................................................................................... 198
  Perfectionist ....................................................................................................... 198
  Anxious or Somatic ........................................................................................... 198
  Sexual Inhibitions .............................................................................................. 198
  Rigid or Unforgiving ........................................................................................ 199
  Jealous or Possessive ........................................................................................ 199
Treatment and Self-Help Suggestions ....................................................................... 199
Code-Type 3-7/7-3 ..................................................................................................... 201
Feedback Statements—Elevated Profiles (T-Score > 65) ......................................... 204
  Strengths ............................................................................................................ 204
  Anxiety ............................................................................................................... 205
  Approval Seeking ............................................................................................. 205
  Depression or Somatic Symptoms .................................................................... 205
Fears Rejection or Seeks Affection .......................................................... 205
Dependent .................................................................................................. 206
Treatment and Self-Help Suggestions ...................................................... 206
Code-Type 3-8/8-3 ....................................................................................... 209
Feedback Statements—Elevated Profiles (T-Score > 65) ......................... 212
  Strengths ................................................................................................. 212
  Bizarre Preoccupations ......................................................................... 212
  Somatic Symptoms or Forgetfulness ....................................................... 213
  Nonconfrontational ................................................................................ 213
  Episodic Depression or Agitation ............................................................ 213
Treatment and Self-Help Suggestions ...................................................... 214
Code-Type 3-9/9-3 ....................................................................................... 216
Feedback Statements—Elevated Profiles (T-Score > 65) ......................... 219
  Strengths ................................................................................................. 219
  Ambitious or Competitive ...................................................................... 220
  Energetic and Optimistic ........................................................................ 220
  Explosive ................................................................................................ 220
  Hypomanic .............................................................................................. 220
  Extroverted or Talkative ......................................................................... 220
  Somatic or Sometimes Alcoholic ............................................................ 221
  Critical or Perfectionist ......................................................................... 221
  Excitable or Labile .................................................................................. 221
Scale 4 .......................................................................................................... 225
Scale 4: Psychopathic Deviate (Pd) ............................................................ 225
Feedback Statements—Elevated Profiles (T-Score > 65) ......................... 229
  Strengths ................................................................................................. 229
  Manipulative or Alienated ...................................................................... 230
  Numbs Feelings or Excitement Seeking ................................................ 230
  Bored or Restless in Relationships .......................................................... 230
  Rule Breaking ......................................................................................... 230
  Impulsive or Acting Out ......................................................................... 231
Treatment and Self-Help Suggestions ...................................................... 231
Code-Type 4-6/6-4 ....................................................................................... 233
Feedback Statements—Elevated Profiles (T-Score > 65) ......................... 237
  Strengths ................................................................................................. 237
  Argumentative or Defensive ................................................................. 237
  Sensitive to Being Controlled or Unfairly Treated .................................. 237
  Irritable or Slow to Forgive .................................................................... 237
  Sensitive or Paranoid ............................................................................. 238
  Resentful or Demanding ........................................................................ 238
  Substance Abuse or Acting Out ............................................................. 238
Treatment and Self-Help Suggestions ...................................................... 239

Code-Type 4-7/7-4 .....................................................................................................242
Feedback Statements—Elevated Profiles (T-Score > 65) ........................................ 245
   Strengths ............................................................................................................ 245
   Guilt, Anxiety, Impulsivity ................................................................................ 245
   Self-Critical or Insecure .....................................................................................246
   Manipulative or Difficulty Making Decisions ..................................................246
Treatment and Self-Help Suggestions ....................................................................247
Code-Type 4-8/8-4 .....................................................................................................249
Feedback Statements—Elevated Profiles (T-Score > 65) ......................................... 252
   Strengths ............................................................................................................ 252
  Disconnected or Fears of Trusting ...................................................................253
   Self-Defeating or Self-Destructive ...................................................................253
   Inappropriate Affect ..........................................................................................253
   Sexual and Aggressive Fantasies ......................................................................253
   Poor Relationship Adjustment or Unable to Trust .........................................253
   Paranoid .............................................................................................................254
Treatment and Self-Help Suggestions ....................................................................254
Code-Type 4-8-9/8-9-4 ..............................................................................................257
Feedback Statements—Elevated Profiles (T-Score > 65) .........................................260
   Strengths ............................................................................................................260
   Manipulative or Angry ......................................................................................260
   Problems With Trust .........................................................................................261
   Aggressive Sexual Fantasies or Hostility ..........................................................261
   Substance Abuse ...............................................................................................261
   Cold or Apathetic ..............................................................................................262
   Moody or Vindictive ...........................................................................................262
   Nonconformist ...................................................................................................262
Treatment and Self-Help Suggestions ....................................................................263
Code-Type 4-9/9-4 .....................................................................................................266
Feedback Statements—Elevated Profiles (T-Score > 65) .........................................271
   Strengths ............................................................................................................271
   Difficulty Trusting ..............................................................................................271
   Manipulating ......................................................................................................271
   Charismatic or Self-Serving ...............................................................................272
   Impulsive, Reckless, Substance Abuse .............................................................272
   Numbing Out or Difficulty Learning From Experience ..................................272
   Rebellious or Problems With Authority ...........................................................272
   Irritable or Angry ..............................................................................................273
Treatment and Self-Help Suggestions ....................................................................273

8 Scale 5 .................................................................................................................277
Scale 5: Masculinity–Feminity (MF) .........................................................................277
Feedback Statements—Elevated Profiles (T-Score > 65) .........................................279
Strengths ............................................................................................................ 279
Aesthetic ............................................................................................................ 279
Passive or Nonaggressive .................................................................................. 279
Nonassertive or Peaceable ................................................................................ 280
Treatment and Self-Help Suggestions ................................................................. 280
Males: T-Score Below 45 ..................................................................................... 281
Feedback Statements (T-Score < 45) .................................................................... 283
Independent or Action Oriented ......................................................................... 283
Complaints by Loved Ones About Lack of Emotional Response ....................... 283
Traditional Masculine Interests ......................................................................... 283
Treatment and Self-Help Suggestions ................................................................. 284
Females: T-Score Below 45 ................................................................................... 285
Feedback Statements (T-Score < 45) .................................................................... 286
Sensitive, Nurturing, Empathic .......................................................................... 286
Nonassertive or Noncompetitive ........................................................................ 286
Treatment and Self-Help Suggestions ................................................................. 287
Females: T-Score Above 60 ................................................................................... 288
Feedback Statements (T-Score > 65) .................................................................... 289
Strengths ............................................................................................................ 289
Practical, Sensible, Competitive ........................................................................ 290
Logical or Business Oriented ............................................................................. 290
Adventurous ........................................................................................................ 290
Treatment and Self-Help Suggestions ................................................................. 290

9 Scale 6............................................................................................................... 293
Scale 6: Paranoia (Pa) .......................................................................................... 293
Feedback Statements—Elevated Profiles (T-Score > 65) ....................................... 296
Strengths ............................................................................................................ 296
Sensitive to Criticism and Judgment or Paranoia ................................................. 296
High Personal Standards or Feels Unfairly Treated ............................................. 296
Rationalized Resentments ................................................................................... 297
Slow to Forgive .................................................................................................. 297
Treatment and Self-Help Suggestions ................................................................. 297
Code-Type 6-8/8-6.................................................................................................. 300
Feedback Statements—Elevated Profiles (T-Score > 65) ....................................... 303
Strengths ............................................................................................................ 303
Anxiety or Paranoia ............................................................................................. 303
Confusion or Difficulty Concentrating ............................................................... 303
Angry or Aggressive and Sexual Fantasies .......................................................... 304
Feels Misunderstood and Mistreated or Resentful ............................................. 304
Alienated, Depressed, Inappropriate Emotional Responses ............................... 304
Possible Hallucinations or Delusions ................................................................. 304
Treatment and Self-Help Suggestions ................................................................. 305
Code-Type 6-9/9-6.....................................................................................................307
Feedback Statements—Elevated Profiles (T-Score > 65) ........................................ 310
  Strengths ...........................................................................................................310
  High Standards or Fears of Being Criticized ....................................................310
  Manic .................................................................................................................311
  Paranoid or Suspicious .....................................................................................311
  Anger or Resentment ........................................................................................311
  Hyperrational .....................................................................................................311
  Jealous or Possessive ........................................................................................312
Treatment and Self-Help Suggestions ...................................................................312

10 Scale 7 ..................................................................................................................315
Scale 7: Psychasthenia (Pt) .......................................................................................315
Feedback Statements—Elevated Profiles (T-Score > 65) ......................................... 319
  Strengths ...........................................................................................................319
  Anxious or Worried ...........................................................................................319
  Analytical, Obsessive, Guilt Prone .................................................................319
  Self-Critical .........................................................................................................320
  Difficulty With Concentration or Memory .......................................................320
  Difficulties With Sleep or Substance Abuse .....................................................320
  Compulsions or Phobias ...................................................................................320
Treatment and Self-Help Suggestions ...................................................................321
Code-Type 7-8/8-7 .....................................................................................................324
Feedback Statements—Elevated Profiles (T-Score > 65) ......................................... 328
  Strengths ...........................................................................................................328
  Anxious or Paranoid .........................................................................................328
  Overly Analytical or Self-Critical ......................................................................328
  Somatic Complaints ...........................................................................................329
  Rich Fantasy Life ...............................................................................................329
  Difficulties Expressing Anger ...........................................................................329
  Guilt Prone, Difficulty With Memory and Concentration ..................................329
  Responsible, Dutiful, Procrastinates .................................................................329
  Self-Conscious ...................................................................................................330
Treatment and Self-Help Suggestions ...................................................................330

11 Scale 8 ..................................................................................................................333
Scale 8: Schizophrenia (SC).......................................................................................333
Feedback Statements—Elevated Profiles (T-Score > 65) ......................................... 337
  Strengths ...........................................................................................................337
  Confused, Depersonalization, Derealization ...................................................337
  Isolated From Affect or Dark Moods ...............................................................337
  Difficulty Trusting or Paranoid .........................................................................338
  Difficulty Concentrating ...................................................................................338
  Preoccupied With Fantasies/Anhedonia ............................................................338
CONTENTS

Hallucinations .................................................................................................... 338
Treatment and Self-Help Suggestions .............................................................. 339
Code-Type 8-9/9-8 ............................................................................................ 341
Feedback Statements—Elevated Profiles (T-Score > 65) .................................. 344
  Strengths .......................................................................................................... 344
  Confused, Disorganized, Hypomanic .............................................................. 344
  Agitated, Explosive, Paranoid ......................................................................... 344
  Perfectionist or Needs for Achievement ......................................................... 345
  Self-Doubt ........................................................................................................ 345
  Overly Active or High-Strung ......................................................................... 345
  Treatment and Self-Help Suggestions .............................................................. 345

12 Scale 9 ......................................................................................................... 349
  Scale 9: Hypomania (Ma) .................................................................................. 349
  Feedback Statements—Elevated Profiles (T-Score > 65) ............................... 353
    Strengths ........................................................................................................ 353
    Overcommitted or High Energy ..................................................................... 353
    Euphoric or Unrealistic .................................................................................. 353
    Irritable, Explosive, Aggressive .................................................................... 354
    Adventurous, Excitement Seeking, Hypomanic .......................................... 354
    Possible Delusions or Hallucinations ............................................................ 354
    Possible Substance Abuse ............................................................................. 354
  Treatment and Self-Help Suggestions .............................................................. 355

13 Scale 0 ......................................................................................................... 357
  Scale 0: Social Introversion (Si) ........................................................................ 357
  Feedback Statements—Elevated Profiles (T-Scores > 65) ............................... 361
    Strengths ........................................................................................................ 361
    Shy, Easily Embarrassed, Awkward ............................................................. 361
    Self- Conscious or Social Anxiety ................................................................. 362
  Treatment and Self-Help Suggestions (T-Scores > 65) ..................................... 362
  Feedback Statements (T-Scores < 45) ............................................................ 363
  Lifestyle and Background Feedback (T-Score < 45) ........................................ 363
  Treatment and Self-Help Suggestions (T-Scores < 40) ..................................... 364

Bibliography ...................................................................................................... 365

Index .................................................................................................................. 383

Characteristics associated with elevations on the L scale include not only defensiveness but also rigidity and a need to “put up a good front” (Butcher & Perry, 2008, p. 31). The original Minnesota normals had on average between eight and 10 years of formal education (Dahlstrom, Welsh, & Dahlstrom, 1972). A large portion, about 80%, of the 1989 restandardization sample normals had a college education, so they tended to obtain low L scale scores because they were sophisticated enough to see through the questions. Consequently, non-college educated individuals now score higher on the MMPI-2 L scale than they would have on the original MMPI when they were compared to other high school graduates. Elevations on the L scale can occur for a number of reasons. People who feel unfairly accused or judged can exhibit an understandable defensive response and attempt to present themselves as virtuous and above moral
reproach. Studies show that it is not uncommon, for example, for the L scores among individuals involved in child custody evaluations to be 1½ to 2½ raw scores higher than for the general normal population (Bagby, Nicholson, Buis, Radovanovic, & Fidler, 1999; Posthuma & Harper, 1998). On the other hand, individuals who are psychologically naïve, black-and-white thinkers or who are rigid in their belief systems can also obtain high scores on the L scale. In this latter case, the L scale elevation reflects a rigid and judgmental personality style with values that don’t allow for shades of gray.

In other cases, the L scale may be elevated as a result of psychological constriction due to a psychotic disorder with prominent paranoid features (Coyle & Heap, 1965; Fjordbak, 1985). The L scale may also be elevated with individuals who have not carefully considered the items but are attempting to “pass” the test, answering the questions with a view to looking their best. It is important for the clinician to use the feedback statements with clients to explore and determine the source of L scale elevation variance. In cases where the high L scale elevation is the result of emotional constriction, denial, lack of insight, and a judgmental, critical personality structure, look for childhood histories of disapproving, fault-finding parents who imparted inflexible values. If the therapist determines that the L scale elevation is due to defensiveness, then the clinician needs to explore whether this reflects a repressing and conscious form of positive impression management or, less commonly, an unconscious defensiveness. Generally, the higher the elevation on the L scale, the lower the elevations to be on the clinical scales. In some cases, however (e.g., workers’ compensation cases), it would not be unusual for the L scale to be elevated with clinical scale elevations revealing a repressed, inhibited, somatizing depression. In such instances, the L elevation could reflect conscious positive impression management as well as a rigid, naïve personality organization congruent with the elevations on Scales 1, 2, and 3. Exploration of clients’ childhood experiences around value indoctrination, their level of psychological sophistication, and their motivation to appear unusually virtuous can help determine whether the L scale elevation reflects unconscious psychological rigidity, conscious distortion, or some combination of the two.

**LIFESTYLE AND FAMILY BACKGROUND**

It is hard to know without an interview if the high L score is due to conscious defensiveness or unconscious rigidity of values and a lack of psychological sophistication. High L scores can be obtained from bright and educated people who nevertheless have very rigid values. In the presence of a lifestyle of rigid and judgmental attitudes, look for a history of strict and uncompromising parental values. If the high L is due to fears of being judged and reflects a conscious attempt to “pass” the test, explore the clients’ fears about how the results of the test may be used as well as the possibility of a future retest.
MODIFYING SCALES

- When the Correction (K), Positive Malingering (Mp), or Social Desirability (Sd) scales are also elevated, the high L is likely due to conscious positive impression management. If these other scales are within normal limits, the L elevation may be reflecting a rigid black-and-white personality style.
- When Scale 6 is elevated, the L score may indicate fears of being judged and criticized as in a criminal defense case or a paranoid disorder.

THERAPY AND THERAPEUTIC PITFALLS

Validating the clients’ desire to be above moral reproach would be an important initial alliance-building strategy. Beware of clients feeling judged by the therapist and eliciting countertransference because of their defensiveness and judgmental attitude. Educating clients about how people have different values and how the rigidity of their own may make others defensive around them could help them to become more flexible. Also explore early parental demands for strict “goodness” and the pressure to perform and be pleasing to avoid criticism.

NORMAL-RANGE FEEDBACK (T-SCORE 50 TO 65)

Your score on this scale is in the normal range. You were able to achieve an appropriate balance between being honest and the temptation to create an overly favorable impression of yourself. You admitted to normal human fail- ings, showing you have good self-awareness and the confidence to be yourself. You were honest about your strengths and vulnerabilities.

FEEDBACK STATEMENTS—ELEVATED PROFILES (T-SCORE > 65)

Feeling Judged or Unfairly Accused

Your profile suggests that you may be feeling vulnerable to being judged. Perhaps you took the test against your will, or you may think the results are going to be used against you. You answered a number of questions that indi- cate you want the psychologist to know that you are a person who is above criticism and has high moral standards.

Conventional

People with your profile tend to have conventional values and a strong belief about the right and wrong way of doing things. People may see you as straight- laced and uncomfortable with people who don’t share your values.

Judgmental or Moralistic

Because you have high personal standards and such a strong sense of the right and wrong way to behave, others may see you as somewhat judgmental or critical of them.

People with your profile can be seen by others as having a tendency to scrutinize others’ moral behavior.

Conscientious or Self-Controlled

You work hard to follow the rules and do the right thing. You answered the test in a manner that suggests that you control your emotions to make sure your feelings and behaviors are above moral reproach.

Lacking Insight

The way you answered the test items suggests that you tend to see the world in somewhat black-and-white terms. Because of this, people may see you as lacking insight into normal human frailties. Because of your strong sense of values and morals, you may come across as unaware of the shades of gray that typify most people’s moral judgment.

Defensive

It’s possible that you answered the test cautiously, putting your best foot forward and wanting to minimize the possibility of others judging or criticizing you. It may be that you are the kind of person who goes through life guarded about doing anything that could lead others to find fault with you.

Rigid or Perfectionist

People may see the fact that you are so cautious about doing the right thing as somewhat rigid and inflexible. Your high standards may lead others to see you as demanding perfection and as being unreasonably critical of others. People may find it hard to live up to your high standards and may want to argue with you or resist your values.

LIFESTYLE AND BACKGROUND FEEDBACK

You may have grown up in an environment where parental figures were critical and judgmental and moral standards were hard to live up to. Perhaps you follow a strict religious code of conduct that does not allow for moral shades of gray. It’s also possible you are wary of how the test results could be used against you, so you were careful to reveal your “best side.”
TREATMENT AND SELF-HELP SUGGESTIONS

1. Talk to your therapist about using cognitive-behavioral tools to help modify your “black-and-white” and “all-or-nothing” thinking.

2. Work with your therapist to explore any early experiences where you felt you had to be above criticism. Once you have identified those experiences, you and your therapist can use cognitive-behavioral techniques to challenge and modify those early childhood assumptions.

3. Because you tend to be a perfectionist, “thought-stopping” techniques can help you manage the negative thoughts that you are not doing things “well enough.” Whenever you become aware of critical thoughts about others, forcefully say to yourself, “Stop.” Some people find it helpful to picture a large red stop sign at the same time. Some critical and negative thoughts tend to repeat themselves, so this is a way to recognize and disrupt unhealthy thought patterns. Repeat the technique until the thought is out of your mind. You can then replace it with a more positive and constructive thought (e.g., “I have felt this way before, and I know I can handle this”).

Normal-range scores indicate a willingness to be open and honest about any unusual experiences and freedom from major psychopathology. F scale elevations are one of the best predictors of validity (Berry, Baer, & Harris, 1991). The F scale elevations also reflect clients’ current levels of pain, fear, and their general level of psychological organization and stability. The scale consists of unambiguous content areas of physical symptoms, paranoid ideation, psychotic traits, family enmity, schizoid underinvolvement, psychotic processes, and a compulsion to pathological activity. F scale scores above a T-score of 85 are not always invalid. Although they may indicate overreported psychopathology, they may also reflect severe distress, disorganized, possibly psychotic thinking, or behavior disorders. In some psychiatric settings where clients are extremely disturbed or in cases where young adults have experienced a panic disorder following bad drug reactions, highly elevated, but valid, F scores are not uncommon. However, with F above a T-score of 85, the clinical scale elevations are less likely to be stable on retest.

F scores between a T-score of 55 and 65 reflect the endorsement of some unusual items and, therefore, a certain level of psychological pain and distress. However, elevations of F in this normal range could also reflect eccentricity, nonconformity, or a situational adjustment reaction. The higher the F scale score, the more likely the clients are experiencing disruptions in cognitive and behavioral efficiency and emotional stability. In the presence of elevated clinical scales, T-scores between 55 and 65 suggest a stable, perhaps ego syntonic

---

**THE INFREQUENCY SCALE (F)**

**Descriptors**

**Complaints**
- Stressed, unsatisfied, panicked, pleading for help, confused, possible reality distortions, alienated

**Thoughts**
- Low self-esteem, self-deprecating, identity confusion, disorganized

**Emotions**
- Moody, unstable, mixed, angry, fearful

**Traits and Behaviors**
- Traits and behaviors dependent on the clinical scale elevations

**Strengths**
- Unconventional, challenges the status quo
disturbance. F elevations between 55 and 65 in the presence of a low clinical profile would predict unconventional, although not necessarily disturbed, individuals. F scores below a T-score of 50 could reflect someone who is denying and defensive, especially if the K and L scales are elevated. A low F score may also reflect conventional but stable, psychologically well-balanced individuals who have few complaints and no psychological impairment.

Determining validity is a multivariate process. It involves examining all of the validity scales, taking into consideration the setting and the clients’ motivation to employ positive or negative impression management.

When giving feedback, discuss high F elevations as reflecting clients’ levels of pain and concern about their psychological state. Even when profiles are exaggerated, it may be useful to tell clients that the F scale reflects that they may be panicked and pleading for help from the therapist. In cases where malingering is suspected, discuss that they may have taken the test wanting to make sure that the therapist knew they were experiencing mental problems and, in the process, exaggerated some of their symptoms and disturbed behaviors.

**LIFESTYLE AND FAMILY BACKGROUND**

When the F scale elevation reflects overendorsement due to panic or a need to appear disturbed, there is no consistent lifestyle and family background. In some cases, however, high elevations on the F scale reflect a stable, although disturbed, personality organization. These elevations are associated with a chaotic, emotionally unstable lifestyle and backgrounds of neglect, abuse, or psychological trauma. In situations where the F scale reflects a recent crisis or trauma and subsequent psychological collapse, the lifestyle of these individuals tends to be chaotic, with unstable relationships and general inefficiency and disorganization.

**MODIFYING SCALES**

- When Dissimulation (Ds), Infrequency Psychopathology (Fp), and Back Infrequency (Fb) are elevated above a T-score of 85, consider exaggeration or malingering. If Fp is below a T-score of 80, high F scores may be reflecting a severe mental disturbance.

**THERAPY AND THERAPEUTIC PITFALLS**

As the F scale goes up above a T-score of 65, the goal of therapy is stabilization. Supportive, practical treatment strategies as well as medication referrals are often appropriate for these individuals. When the high F score reflects a panic or plea for help, therapy should include risk assessment, possible hospitalization, and ongoing monitoring of their condition. Avoid insight-oriented therapies that could overload individuals who may already be emotionally and cognitively...
disorganized. Moderate scale elevations between a T-score of 55 and 65 suggest a more stable disorder; the code type will indicate treatment strategies.

NORMAL-RANGE FEEDBACK (T-SCORE 45 TO 55)

The score on this scale is in the normal range. This is where we expect your score to fall when you feel free of psychological distress or have done a good job of minimizing its impact on you.

Your profile suggests moderate distress and discomfort. You have somehow learned to manage its effect.

FEEDBACK STATEMENTS—ELEVATED PROFILES (T-SCORE > 65)

Stress, Panic, or Feeling Alienated

Your profile suggests that currently you are feeling a great deal of stress and emotional turmoil. You may be panicked by how you are feeling, and you may be overwhelmed by unpleasant feelings and thoughts. Sometimes when you feel worse, you may be extremely fearful that your life is out of control. Because you often feel confused and tense, it is hard for you to connect with other people. You may feel others don’t understand the distress you feel, so it leaves you feeling isolated and alone.

Pleading for Help

Sometimes when people feel panicked and out of control, they feel a sense of desperation and want somebody to help them. Your profile suggests that you are asking for psychological help and want your therapist to know that you feel distressed and, at times, desperate.

Confused or Disorganized

Your profile suggests that you may be experiencing a lot of confusion with many competing thoughts and emotions. It may be hard for you to think clearly and to organize your thoughts and label your emotions. This confusion may make you less efficient and may frighten you.

Unconventional

People with your profile generally think differently than others. It may be due to some recent stress or trauma, or it may be that you’ve always looked at things somewhat differently than others.
Moody or Unstable

Your feelings may sweep over you so that you’re caught off guard, and you may experience sudden shifts in your mood. One moment you may find yourself happy and upbeat, perhaps without knowing why, and then you can feel down and unhappy for no apparent cause.

LIFESTYLE AND BACKGROUND FEEDBACK

Your profile suggests you may have experienced some recent trauma or setbacks that are causing you fear, anxiety, and unhappiness. Perhaps growing up you experienced painful losses, unsupportive adults, or even some kind of neglect and abuse. Recent events may have restimulated old psychological scar tissue, making current painful events even more difficult.

TREATMENT AND SELF-HELP SUGGESTIONS

1. Discuss with your doctor whether medications might help you feel better and more in control. Avoid alcohol or illegal chemical agents as a way of feeling better, as this can actually make you feel worse.
2. People with your profile feel better in structured, safe environments. Until you feel better, avoid stressful situations, and try to take good care of yourself by being with people around whom you feel safe.
3. If you do feel panic, there are things you can do to minimize the likelihood that you will experience a panic attack. Start by decreasing or eliminating caffeine, as some people are sensitive to its effects. Your therapist can also help you with deep breathing and relaxation exercises.
Low scores on Scale K suggest directness, nondefensiveness, vulnerability, and emotional undercontrol. When the clinical scales are elevated in the presence of low K, this suggests that the personality characteristics associated with the clinical scales will be palpable and robust. In some cases, the low K score can point to exaggeration and a “cry for help,” especially in highly elevated clinical profiles (clinical scales with a T-score of 80 or above). Early research (Heilbrun, 1961; Smith, 1959; Sweetland & Quay, 1953) suggested that low K scores measured defective personality integration and poor adjustment. When the clinical scales suggest a severe disturbance, low K scores indicate difficulty coping and the need for concrete supportive, nurturing therapeutic help; in such cases, avoid insight therapy initially until clients are stabilized. In the absence of clinical scale elevations, low K scores need not reflect emotional disturbance but, rather, emotional directness and a lack of regard for social niceties. Individuals with low K scores tend to disregard or rise above others’ judgments about their emotional expressiveness.
LIFESTYLE AND FAMILY BACKGROUND

Lower K elevations are associated with lower educational levels and lower emotional sophistication. The lifestyle of people with low scores on K tends to be one in which emotions and stress are likely to cause disruptions in efficiency and productivity. In the absence of any elevations on the clinical scales, however, the low K could reflect open, emotionally spontaneous, and uninhibited individuals. Typically, the lower the K, the more likely it is that the person feels she or he is at the mercy of the emotional states revealed by her or his clinical scale scores, and this may be associated with family backgrounds of emotional disturbance and trauma. However, this kind of disturbance and possible family background would be revealed by the clinical scale elevations and a comprehensive history.

MODIFYING SCALE

- When the Dissimulation (Ds) and Infrequency Psychopathology (Fp) scales are elevated above T-scores of 80 and 100, and the F scale is above a T-score of 85, the low K would confirm a pattern of exaggeration.
- When the clinical scales are below a T-score of 65 and the F score is below a T-score of 65, the low K may reflect a brash emotional directness.
- When the Ego Strength scale is elevated above a T-score of 65, the low K may reflect individuals who are unencumbered by restrictions of social appropriateness and are unusually comfortable with emotional spontaneity.

THERAPY AND THERAPEUTIC PITFALLS

In the presence of elevations on the clinical scales, a low K score would suggest a need for immediate, concrete support and ego strength-building exercises. Self-soothing and thought-stopping to deal with the emotional turmoil associated with clinical scale elevations are recommended. In the presence of a severe disturbance, a low K, combined with an Ego Strength (Es) scale that is below a T-score of 40, may indicate a collapse of ego defenses, so insight therapy is contraindicated. In such cases, suicide threats and the possibility of even minor stress being disorganizing should be considered.

NORMAL-RANGE FEEDBACK (T-Score 45 TO 65)

Your score on this scale is in the normal range. This score reflects that you answered the questions openly without trying to be too self-critical. Your approach was honest and accurate to the best of your abilities. You are likely
to be self-reliant and enterprising and to have good coping skills. You have a wide range of interests and adequate resources. We appreciate your willingness to make yourself vulnerable to this process.

**FEEDBACK STATEMENTS—LOW T-SCORE PROFILES**

Typically, the descriptors and feedback statements associated with elevations on the clinical scales will supersede the following. Some of these feedback statements could be used to supplement feedback from the clinical code-type scales. These statements are also not appropriate if the clinical scales are all below a T-score of 60.

**Underregulated**

Your profile suggests that you wear your feelings on your sleeve and that you are easy to read as far as emotions are concerned. If you’re feeling upset, angry, or happy, others can easily see it. At the same time, if you’re feeling angry or upset, the intensity of your emotions may be seen by others as excessive or inappropriate.

**Easily Overwhelmed**

Currently, you may be feeling overwhelmed emotionally so that your feelings overpower you and make it hard for you to function effectively. When stress arises, it may disorganize you so that you find it hard to be effective and get much done. The intensity of your emotions may even frighten you.

**Self-Doubting or Self-Critical**

Because you feel so knocked off balance, you may doubt yourself and, therefore, have difficulty making decisions or demands on others. It’s hard for you to trust what you’re feeling and what you’re thinking. You tend to be your own worst critic, and you’re always observing yourself from a very critical standpoint.

**Anxious or Fearful**

Some of your thoughts may frighten you, and you may find it hard to “switch them off,” even though you try to do so. Currently, you may find yourself always on edge, anxious, and fearful that something bad is going to happen.
Direct or Nondefensive

People with your profile find it hard to control what they’re thinking and feeling so they tend to be direct and even blunt, which sometimes may backfire. The way you approached the test shows that you are very open and nondefensive, willing to talk about what you’re feeling.

TREATMENT AND SELF-HELP SUGGESTIONS

1. Find ways to switch off your mind; perhaps learn to meditate so that you can have moments where you do not feel overwhelmed.
2. Every evening, write down a list of a few things you want to get done the next day. When you wake up, begin to work on your list so that you feel some sense of accomplishment. A list will help you feel like you have some control over your thinking and behavior.
3. Learning various types of intentional relaxation can help calm your automatic reactions to stressful situations. One type of relaxation, diaphragmatic breathing, exerts a powerful effect on your physical response to stress. When you feel stressed your breathing is rapid and shallow, but this exercise can calm the automatic response of your nervous system and reduce reactive thinking and destructive emotions. Work with your therapist to learn the diaphragmatic breathing, practice twice daily for 2 weeks, and then continue to practice on a regular basis.
Therapeutic Feedback with MMPI-2

**CORRECTION SCALE (K)**

High K (T-score > 65)

**Descriptors**

**Complaints**

- Few or no complaints

**Thoughts**

- Denying, conventional, rational, logical

**Emotions**

- Defensive, emotionally constricted, underreporting of feelings, guarded, controlled, “stiff upper lip”

**Traits and Behaviors**

- Controlling, uncomfortable with emotionality, conventional, conforming, socially appropriate, lacking self-awareness

**Strengths**

- Socially appropriate, self-reliant, positive self-concept, resilient, strong capacity to manage emotional stress

**THERAPIST’S NOTES**

High K scores are associated with defensiveness, emotional constriction, and conventionality. As a result, the therapist will have to multiply the intensity of what the clients are saying to gain a true sense of empathy for them (Caldwell, 2008). High K scores can occur for a number of reasons. Clients who are consciously defensive and are attempting to “pass” the test may obtain high K scores. However, in other cases, a high K score occurs as a reflection of these individuals’ upper socioeconomic status. People from wealthier backgrounds tend to espouse a cultural value of control, constraint, and social appropriateness (Caldwell). In some cultures, for example, British culture, expressing emotions publicly is frowned upon and seen as inappropriate (Wagstaff & Rowledge, 1995). Approaching emotionally upsetting situations with a “stiff upper lip” and denying extreme emotions is seen as appropriate and desirable. In such individuals, high K scores reflect a cultural bias toward control and poise (Reynolds & Fletcher-Janzen, 2002). In some situations, high K scores may be better understood as reflecting personality variables rather than test-taking defensiveness. These individuals are likely to be poised, emotionally controlled, and able to manage stressful situations unusually well. It is important for the psychologist to determine the source of defensiveness.
high K variance. Is the high K score due to conscious attempts to look good and “pass” the test, or is it an unconscious manifestation of socioeconomic and cultural influences? It would be misguided to rule a high K profile invalid if it, in fact, reflects an emotionally controlled, tightly wound, and constricted personality type.

**LIFESTYLE AND FAMILY BACKGROUND**

Elevations on K, whether high or low, are probably not associated with any particular lifestyle or family background. In some cases, when high K elevations are associated with upper socioeconomic status, the lifestyle reflects upwardly mobile individuals, usually of above-average education, whose emotions are rarely out of control.

**MODIFYING SCALES**

- When Positive Malingering (Mp) and Social Desirability (Sd) are not elevated above a T-score of 65, then the high K score may reflect a personality style of emotional poise and control rather than a conscious attempt to appear emotionally stable. In other words, the K elevation is measuring a personality attribute rather than a pure validity construct.
  If Mp and Sd are above a T-score of 65, then the K elevation may be due to conscious attempts to pass the test by appearing emotionally stable and balanced.

**THERAPY AND THERAPEUTIC PITFALLS**

Typically, individuals with high K elevations are not amenable to cathartic and insight-oriented therapies. This is partially because they are reporting emotional balance and control but also because they may be threatened by emotionality. Therapy with these individuals can start by being intellectual, fostering understanding about how others experience emotions. The therapist can help these clients understand how they have learned to modulate their emotion through cultural or learned inhibitions against emotional expressiveness. Once these clients are comfortable discussing emotions gestalt techniques or role-playing can help free up their emotion. Sometimes taking an improvisation class or acting lessons can help them become more emotionally expressive.

**NORMAL-RANGE FEEDBACK**

See normal-range feedback for low K.
FEEDBACK STATEMENTS—ELEVATED PROFILES (T-SCORE > 65)

Conventional, Rational, Logical
You are a person who could be described as conventional; doing things in a socially appropriate way is important to you. You tend to approach life in a rational or logical way—to analyze emotions and understand them so they don’t knock you off balance.

Defensive
You approached the test putting your best foot forward and being cautious to not come across as socially inappropriate or emotionally unbalanced. People may see you as defensive because you dislike the expression of intense emotions. It is likely that you rarely feel out of control with your feelings.

Emotionally Constricted
You are careful not to wear your feelings “on your sleeve.” People may see you as a little emotionally constricted because you don’t often express extremes of emotions. People will have to multiply the intensity of what you’re saying to get a sense of empathy for you.

Lacking Self-Awareness
People with your profile tend to not spend much time thinking and analyzing their own feelings. They tend to go through life working hard to avoid emotional upset. They may not always be aware of what they are feeling and how their emotions drive some of their behaviors.

Resilience
In a crisis, when others are becoming emotional, you are unlikely to lose your head. You will appear cool, calm, and collected so that others will have difficulty reading how you might be feeling. You appear to manage emotionally upsetting situations well, rarely feeling knocked off balance.

TREATMENT AND SELF-HELP SUGGESTIONS
1. Start by learning to recognize your emotions. You and your therapist can work together to identify any feelings you may be experiencing

during the therapy session. Think of a positive emotional experience, and take some time to identify where in your body you experience the feelings. Do the same for a negative experience. Observe to see if you inhibit emotions from becoming too intense.

2. Explore any childhood or later experiences where you felt the potential for losing emotional control. Revisit and allow yourself to feel those moments, so you can learn the full range of emotional expression.

3. Be mindful that when you express your emotions you may do it in a muted way so others don’t have a full sense of empathy for you. Occasionally ask others how they perceive you are feeling so you don’t lose emotional contact with them.

4. As you begin to feel more comfortable with the idea of expressing feelings, acting classes can help you become more spontaneous and perhaps even more creative.

5. Resilience building: Familiarize yourself with the benefits of “emotional intelligence,” which is the ability to identify, assess, and manage your emotions in a healthy way. There are many good self-help books written about developing emotional intelligence to make improvements in both your personal life and in the workplace.¹

¹ Emotional intelligence has been demonstrated as an effective tool in building competency, fostering successful relationships, and creating enhanced performance in work settings (Boyatzis, Goleman, & Rhee, 2000).
Therapist’s Notes

The Fb scale was developed in the same manner as the F scale; any item on the second half of the test that was marked by fewer than 15% of the new restandardization sample became an Fb item. Individuals scoring high on Fb are reporting unusual symptoms such as feeling disturbed, knocked off balance, unhappy, panicked, and unable to concentrate and operate efficiently. Fb elevations above a T-score of 85 suggest a possible exaggeration and malingering, perhaps as a plea for help or as an attempt at manipulation. Nichols (2011), in examining the content of the F and Fb scales, noted that the F scale contains many psychotic items so that when the F scale is elevated the disturbance could be reflecting a psychotic thought process. However, the Fb scale has few psychotic items and contains many items associated with the collapse of an individual’s lifestyle and associated fearfulness, dysphoria, and drug or alcohol abuse. Fb may be more elevated than the F scale without necessarily suggesting invalidity. In the presence of a history of turmoil associated with drug and alcohol abuse or suicide attempts, the Fb scale may be significantly more elevated than the F scale. As stated previously, validity is a multivariate process, and no one scale elevation should rule out validity. However, as the Fb approaches 90 and above, invalidity of the content and supplementary scales should be suspected, either due to panic, plea for help, or conscious malingering.

LIFESTYLE AND FAMILY BACKGROUND

Typically, the Fb scale is associated with mental disturbance, drug or alcohol abuse, depression, anxiety, and general inefficiency. A comprehensive history can determine whether it is the result of an acute disorder due to recent trauma or a lifestyle of marginal adjustment.

MODIFYING SCALES

- When Fb, Infrequency Psychopathology (Fp), Infrequency (F), and the supplementary scale Dissimulation (Ds) are all above a T-score of 85, then the profile may be exaggerated. If all of these validity scales are above a T-score of 90, the profile is probably exaggerated and invalid. However, if Fb is at a T-score of 90 or even 95, the F scale T-score is 85 or below, and the Fp is below a T-score of 85, the profile may be valid but reflecting a recent collapse of ego strength and lifestyle due to a serious disturbance.

THERAPY AND THERAPEUTIC PITFALLS

As with the other validity indicators of acute distress, stabilizing these clients is the immediate concern. Assessing for self-harm and drug use would be the immediate focus of intervention. Long-term therapy would involve a medication evaluation, behavior modification, or cognitive-behavioral therapy (CBT) to address panic and fear and basic self-care skills and to help these individuals manage impulsive behavior, such as substance abuse. Learning self-efficacy is usually more relevant than dynamically oriented insight therapy.

FEEDBACK STATEMENTS

There are no feedback statements for this validity scale.

TREATMENT AND SELF-HELP SUGGESTIONS

1. Work with your therapist to switch off panic and negative thoughts by examining any automatic self-negating and catastrophizing thoughts that are contributing to your anxiety.

2. Work on relaxation techniques, meditation, and yoga as a way of relieving stress. These techniques are tools that, when practiced regularly, have been shown to reduce heart rate, muscle tension, and blood
pressure and also to increase well-being.\(^1\) Your therapist can help you choose the method that will be best for you.

3. You and your therapist may decide you could benefit from medication so you can give your nervous system a temporary rest. Sleeping and eating well and avoiding chemical agents would also be important to help you feel more in control.

4. You may have moments when you feel so overwhelmed you may want to act impulsively and do something that could be self-destructive. Try to stand back as if you are watching yourself from above; take a deep breath, seeing the bigger picture of your life and knowing the stress will pass.

\(^1\) Relaxation techniques have been used for many years to combat the effects of stress, anxiety, and depression. These techniques can be easily incorporated into everyday routines, can be quickly taught, and can give fast relief. Meditation is a promising intervention for anxiety and depression (Hoffman, Sawyer, Wit, & Oh, 2010).
**THERAPIST’S NOTES**

Elevations on the Fp scale suggest someone who has answered the test in a highly unusual fashion. In some cases of extreme disturbance, an Fp score with a T-score of 90 can still be valid, especially if elevated due to four items overlapping L (items 51F, 77F, 93F, and 102F) or the four items related to family enmity and discord (90F, 192F, 276F, and 478T). However, if the F, Fb, and other measures of exaggeration are severely elevated, then an Fp score above a T-score of 90 suggests invalidity. In some rare cases, the Fp scale can be elevated in the absence of severe psychopathology, reflecting unconventional, unusual individuals with eccentricities and amoral attitudes but not mental disorder. When Fp is below a T-score of 65 and other measures of validity suggest a severe disturbance, the Fp score would imply that the profile reflects real pathology rather than exaggeration. Fp T-scores in excess of 100, together with Variable Response Inconsistency (VRIN) T-scores above 80, may be indicative of random responding to the test questions.

**LIFESTYLE AND FAMILY BACKGROUND**

This is not applicable.

---

**SCALE: THE INFREQUENCY PSYCHOPATHOLOGY SCALE (FP)**

<table>
<thead>
<tr>
<th>Descriptors</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Complaints</strong></td>
</tr>
<tr>
<td>Disturbed thinking, alienated distress, possible chemical abuse/addiction, inefficiency, family problems</td>
</tr>
<tr>
<td><strong>Thoughts</strong></td>
</tr>
<tr>
<td>Confused, self-depreciating, ambivalent, indecisive</td>
</tr>
<tr>
<td><strong>Emotions</strong></td>
</tr>
<tr>
<td>Emotional turmoil, depression, anxiety, conflicted</td>
</tr>
<tr>
<td><strong>Traits and Behaviors</strong></td>
</tr>
<tr>
<td>Possible exaggeration and overreporting of symptoms, ineffective, disorganized, self-defeating, possibly suicidal</td>
</tr>
<tr>
<td><strong>Strengths</strong></td>
</tr>
<tr>
<td>This scale measures distress and disturbance. Possible strengths can be determined through the clinical scale elevations.</td>
</tr>
</tbody>
</table>

---

MODIFYING SCALES

When the traditional validity scales Infrequency (F), Back Infrequency (Fb), and Dissimulation (Ds) are in valid range, elevations on Fp should not invalidate the profile. However, the source of the elevation on Fp should be explored.

THERAPY AND THERAPEUTIC PITFALLS

This is not applicable.

FEEDBACK STATEMENTS

There are no feedback statements for this validity scale.

TREATMENT AND SELF-HELP SUGGESTIONS

This is not applicable.
The Superlative (S) scale was developed as an adjunct to the Correction (K) scale to assess the tendency to present oneself in an overly favorable manner. Although the K scale appears to function effectively as a measure of unconscious self-deception, the presence of a large sample of online pilot applicants allowed Butcher and Han (1995) to compare the response of pilot applicants with the MMPI-2 normative sample. In this group of all-male, mostly Caucasian, and college-educated pilots, their MMPI-2 protocols were relatively normal and, as a group, they tended to report few psychological symptoms and disturbing behaviors. They generally saw themselves as calm, emotionally stable, reasonable people with a clear value system; they reported feeling content with life and generally untroubled by irritability, anger, and conflict with others. The S scale thus acts as a “super” K scale, with which it is highly correlated. It is unlikely, therefore, that individuals scoring low on the K scale will score high on S. As S exceeds a T-score of 65 or 70, the factor analytically derived S subscales are almost always elevated. As the Content scales are face valid, elevations on the K and S scales suppress content scale elevations. Clinicians find difficulty determining when high S and K elevations are the result of genuine mental health, poise, and emotional stability, and when they reflect self-deceptive efforts to simulate these characteristics. Some job applicants and individuals undergoing child custody evaluations are genuinely emotionally stable and free of severe symptomatology, whereas others are highly motivated to appear so. For a more complete

---

**SUPERLATIVE SELF-PRESENTATION SCALE (S)**

**Descriptors**

**Complaints**
- None (superlative adjustment is being claimed)

**Thoughts**
- Coherent, rational, or logical; belief in people’s goodness

**Emotions**
- Serene, content, controlled or poised

**Traits and Behaviors**
- Poised, controlled, resilient, trusting, unflappable

**Strengths**
- Serene, content, controlled or poised, solid values

---

**THERAPIST’S NOTES**

understanding of the S scale and how to use it with the other supplementary scales to determine validity, see Nichols (2001) and Friedman, Levak, Nichols, and Webb (2001).

**LIFESTYLE AND FAMILY BACKGROUND**

When S scale elevations reflect a genuine self-presentation, then, typically, high scorers tend to come from stable and psychologically well-balanced backgrounds. As evidenced in the 274 male airline pilot applicants, lifestyles that reflect discipline, order, the pursuit of goals, and a general calm and controlled demeanor are associated with S scale elevations.

**MODIFYING SCALES**

Elevations on other scales can determine the source of S scale variance.

- When the Lie scale (L) is also elevated, it would suggest that they are rigid, self-righteous, and judgmental. They are presenting themselves as moral and ethical. This would confirm the repressed and inhibited qualities already associated with high S scales.
- When Naïveté (Pa3) is elevated, it would aggravate the tendency to be moralistically rigid and lacking in insight.
- Given the suppressing effect of high S scores on the content scales, even moderate elevations (T-score 60 or above) on one or more of the content scales would warrant further investigation in that area.

**THERAPY AND THERAPEUTIC PITFALLS**

When individuals with a high S score seek therapy, they usually do so on the basis of someone else’s complaints about their being emotionally underexpressive. Should they find themselves in situations where emotional expressiveness and connectedness is valued, they may experience difficulties. Teaching them to identify and label emotional states and to learn to be more open and responsive to others’ feelings could be an important therapeutic goal in helping them in their relationships. Avoid too much emotionality and catharsis in the initial stages of therapy as they may find this threatening.

**NORMAL-RANGE FEEDBACK (T-SCORE 50 TO 65)**

Your scores on this scale were in the average range. This indicates to us that you took the test in an open and honest manner. You endorsed the items...
accurately and presented yourself in a nondefensive light. These scores also suggest that you are generally free of debilitating emotional stress and have few unusual symptoms or behaviors.

**FEEDBACK STATEMENTS—ELEVATED PROFILES (T-SCORE > 65)**

**Rational or Logical**

People with your profile tend to be clear-thinking, logical, rational, analytical, and not easily knocked off balance by emotions.

**Belief in People's Goodness**

You generally see people as decent and trustworthy. When you meet new people, you give them the benefit of the doubt, and you tend to trust others as being like yourself: reasonable and reliable.

**Moral**

It is important for you to be seen as someone with strong values, and you want others to see you as doing the right thing. Following the rules is an important part of your self-image.

**Content**

You are likely to come across as content and happy, feeling that your life is on track, balanced, and going the way you would like it to go. While you may be dissatisfied in certain areas, generally your profile suggests that you are quite content with the direction of your life, and you see life as generally rewarding.

**Controlled or Poised**

People see you as keeping good control over your impulses and as being in control of your life. People likely see you as poised and sophisticated, able to get what you want in a logical, rational way.

**LIFESTYLE AND BACKGROUND FEEDBACK**

Typically, people with your profile do not seek psychotherapy unless others see them as somewhat hard to read or emotionally unavailable.
Psychologically you are like a pilot able to fly in heavy weather without becoming knocked off balance. If you are seeking help it may be because you are seen as emotionally distant or aloof by somebody you care about. People may see your contentment and unflappability as being emotionally distant, or they may view your coolness under pressure as a lack of emotional involvement.

TREATMENT AND SELF-HELP SUGGESTIONS

1. Practice recognizing what you are feeling. Take a moment during the day at different times to pay attention to these sensations. See if you can attach a label to the experience, and then find opportunities to talk about how you are feeling with those closest to you.
2. Familiarize yourself with the benefits of “emotional intelligence,” which is the ability to identify, assess, and relate to other's emotions in a healthy way. There are many good self-help books written about developing emotional intelligence to make improvements in both your personal life and in the workplace.¹
3. In many ways your coolness under pressure and your ability to see the positives in life is a sign of mental health and resiliency.

¹ Two widely respected books are Emotional Intelligence: Why It Can Matter More Than IQ (Goleman, 1997) and Primal Leadership: Learning to Lead With Emotional Intelligence (Goleman, Boyatzis, & McKee, 2002).