

PERSONALITY SURVEY OF PRISON INMATES BY USE
OF THE MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

A Thesis

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PERSONALITY SURVEY OF PRISON INMATES BY USE
OF THE MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

A Thesis

Presented to the Faculty of Sam Houston State
Teachers College in Partial Fulfillment of the
Requirements for the Degree,

Master of Arts

by

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Huntsville, Texas

Huntsville, Texas
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Alvin Cummings

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The conception of a penitentiary and its purposes has undergone many changes down through the history of our country. In early penology, there appeared to be no basic philosophy back of the confinement, no idea of trying to do anything for the prisoner while he served his sentence. It was merely the only way that could be thought of, after the possibility for minor offenses became distasteful to the public, for getting the lawless person away from society.

Then, for over half a century preceding the Civil War, the theory became popular that prison should be a place for forced penitence, through solitude. Since that time, the idea of rehabilitating the inmate has been accepted as a theory, but not much has been done to put the theory into practice.

The state Penitentiary at Huntsville, Texas, with its broad green lawn sloping up to the highest, does stand out, however, in striking contrast with the early description of a prison as a "dark house". Even more in contrast to the ideology of the early prison leaders is the individual attention given each prisoner coming to this institution, the effort put forth to treat each

1 Edwin H. Sutherland, *Principles of Criminology*, 4d.

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Chapter I

Introduction

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1 Edwin H. Sutherland, Principles of Criminology, 411.

one as a man with a problem, and the desire to re-educate him before he is returned to society.

When a prisoner first enters the walls of the Texas Prison System, he is given an educational test. The Stanford Achievement test is used, which purports to indicate the school grade level of a person in several subjects; among them: reading, spelling, English, science, social science, and arithmetic. An interview is held with each incoming inmate and with the information obtained by use of the Stanford Achievement test and interview, classification of the person is made.

Classification begins with the segregation process. There are four divisions: the rehabilitative group, sub-divided into (A), those under twenty-five and (B), those over twenty-five; the intermediate group, "doubtful prospects for rehabilitation"; and the maximum risk group, "those who have indicated extreme viciousness".

After the classification is made the question then arises: How much is actually known about the individual? The chances are that very little or nothing is known concerning the individual's personality: what the person is thinking, or how he will react to life as an inmate. There is, perhaps, little definite knowledge as to whether or not the person is apt to inflict harm upon the other inmates. And in most cases there is little information concerning the person as rehabilitative material. There are some types of personalities believed to be beyond rehabilitation; and a good job is being done in spotting such persons, even though the method used in determining such cases is more or less the trial and error method.

There is, therefore, a need for some system of classification which will give the officials in charge of rehabilitating the inmates this information. There is a need to know the inmates who are more apt to be trouble makers and, therefore, less likely to be good rehabilitative material. Some method is needed which would indicate the more normal individuals who offer good possibilities for rehabilitation. Even greater, perhaps, is the need for a device by which those can be spotted who should be isolated from the other inmates.

O. B. Ellis, General Manager of the Texas Prison System, stated: "These criminally insane are people who should never be in prison. It creates too many problems. We can't train personnel to take care of them and at the same time expect them to take care of the other inmates that are not mentally ill. What's more we can't discipline them.

"They should be housed in special buildings at some state institution for the insane. Right now we have four such cases who have served all of their time, but because they are insane, we can
2
not discharge them."

Mr. Ellis has demonstrated excellent ability and knowledge of the situation in the Report and Recommendations which he submitted to the members of The Texas Prison Board. He recommended the establishing of a modern building inside the Penitentiary at Huntsville

2 Don Reid, Jr., "Legislators See Penal Progress in Huntsville Tour", The Houston Post, March 12, 1949, 3.

4

for the purpose of housing the incorrigibles and psychopathic patients.³ Another very fine point in his plan is the obtaining of modern equipment and modern methods for rehabilitating those who are good rehabilitative material. The value of such a plan, if executed, is beyond estimation.

As a possible instrument which might help in the process of classification,⁴ The Minnesota Multiphasic Personality Inventory (to be designated in this thesis as the MMPI) was selected for this study; the test to be administered to inmates of the Texas State Penitentiary and results noted. The instrument itself was never considered in the study as an answer to the problem of classification, but rather as one of several devices for understanding the persons who enter penal institutions. It is hoped that as a result of this study another step will be made in the direction of proper rehabilitation, belief of those making the study being that a person can only be helped when the teacher knows his pupil.

Also, it is hoped that by this and other studies the general public may be led to form a sound philosophy as to the purpose of the penal institutions; that they may be led to believe as Wilson and Pescor that: "The modern conception of the prison is a place where society not only is protected by the fact that the criminal is locked up and, therefore, incapable of inflicting further injury during the

3 O. B. Ellis, A Program for the Improvement of the Texas Prison System, 12-13.

4 S. R. Hathaway and J. C. McKinley, The Minnesota Multiphasic Personality Inventory.

period of his incarceration, but also a place where he can be reformed, so that when he is released, the desire to commit anti-social acts will no longer dominate him".⁵

5 J. G. Wilson and M. J. Pescor, Problems in Prison Psychiatry, 25-26.

Chapter II

Reliability and Validity of The Minnesota Multiphasic Personality Inventory

The psychologist, the teacher, and the layman are all interested in the constellation of traits that form an individual's personality. Many efforts have been made to classify personalities into types, but no scheme to date has been wholly satisfactory. Some of the more common approaches have been by means of inventories, rating scales, tests of attitude and interest, and tests of personality.

The Minnesota Multiphasic Personality Inventory which was chosen for use in this study is made up of 566 statements. The items have been classified arbitrarily under twenty-six headings, though it was not assumed necessarily that an item was properly classified merely because it had been placed in a given category. The arrangements are as follows:

1. General health (9 items)
2. General neurologic (19 items)
3. Cranial nerves (11 items)
4. Motility and coordination (6 items)
5. Sensibility (5 items)
6. Vasomotor, trophic, speech, secretory
(10 items)

⁶ S. R. Hathaway and J. C. McKinley, Manual for the Minnesota Multiphasic Personality Inventory, 2.

7. Cardiorespiratory system (5 items)
8. Gastrointestinal system (11 items)
9. Genitourinary system (5 items)
10. Habits (19 items)
11. Family and marital (26 items)
12. Occupational (18 items)
13. Educational (12 items)
14. Sexual attitudes (16 items)
15. Religious attitudes (19 items)
16. Political attitudes--law and order
(46 items)
17. Social attitudes (72 items)
18. Affect, depressive (32 items)
19. Affect, manic (24 items)
20. Obsessive and compulsive states
(15 items)
21. Delusions, hallucinations, illusions,
ideas of reference (31 items)
22. Phobias (29 items)
23. Sadistic, Masochistic trends (7 items)
24. Morale (33 items)
25. Items primarily related to masculinity-
femininity (55 items)
26. Items to indicate whether the individual is
trying to place himself in an improbably
acceptable light (15 items)

Personality traits which have been worked out by the authors and are now in available form for scoring include: hypochondriasis, depression, hysteria, psychopathic personality, masculinity-femininity, paranoia, psychasthenia, schizophrenia, and hypomania. These characteristics will be explained in detail in Chapter III.

Research has been done and many comments have been made on the inventory created by Hathaway and McKinley. "A most relevant study of the validity of the MMPI diagnostic profiles was recently reported by Meehl. Employing explicit profile standards and a rapid inspectional method of 'blind' diagnostic sorting, he was able to categorize approximately two-thirds of the abnormal profiles of abnormal patients correctly. He reports statistically significant agreement between MMPI 'diagnosis' and the independent criterion of hospital diagnosis of psychosis, psychoneurosis, or conduct disorder."⁷

The MMPI has a great possibility for screening patients to give the psychiatrist a starting point from which to make a diagnosis of each case. "The inventory was also found to reveal special aids for differential diagnosis, for the detection of exaggeration and malingering, and for identification of lesser clinical entities. Some reports, however, have criticized the inventory method, and personal experience has revealed that many military psychiatrists and clinical psychologists are disinclined to accept the inventory

⁷ Howard Hunt, "A Study of the Differential Diagnostic Efficiency of the Minnesota Multiphasic Personality Inventory", Journal of Consulting Psychology, Vol. XII, No. 5, Sept.-Oct., 1948, 332.

as a useful and valid instrument. It is our opinion that much of the hesitance in utilizing the inventory is due to difficulty in its use and interpretation".⁸

In a study made by Arthur L. Benton, Lieut. Comdr., H(S), USNR, and Kathryn A. Probst, Lieut., W(H), USNR⁹ which was concerned with the analytic-diagnostic features of the MMPI, it was noted that there was a significant degree of agreement between the psychiatrists and the test in regard to the strength of certain trends in patients. The Psychopathic Deviate, Paranoia, and Schizophrenia scales were the most diagnostically accurate.

Another study made by Harold Rubin¹⁰ of Ohio State University as to the value of the MMPI as a diagnostic aid in a Veterans Hospital at Chillicothe, Ohio, indicates that the Psychopathic Deviate scale may have some significance in detecting those individuals referred to as "psychopathic". The report went further to state that the Schizophrenia scale is the only scale which statistically differentiates the four diagnostic groups used in the study.

The conclusions reached by Harold Rubin cannot be accepted as a highly reliable measurement for the MMPI because of the small

8 Harrison G. Gough, Journal of Clinical Psychology, January, 1946, Vol. II, No. 1, 23.

9 A. L. Benton and K. A. Probst, "A Comparison of Psychiatric Ratings with Minnesota Multiphasic Personality Inventory Scores", The Journal of Abnormal and Social Psychology, Vol. 41, No. 1, January, 1946, 75-76.

10 Harold Rubin, Journal of Consulting Psychology, July-Aug., 1948, 254.

number of persons tested. "There were eight chronic alcoholics without psychosis; twenty-four psychopaths; thirty-three cases of dementia¹¹ praecox or schizophrenia; twenty-eight cases of psychoneurosis."

Other studies and evaluations of the MMPI are being made in various situations throughout the country as time goes on, pointing out the possibilities and limitations of the inventory.

¹¹ Harold Rubin, op. cit., 251.

Chapter III

Explanation and Characteristics of the Personality Traits Measured by the MMPI

The following descriptions are intended to give a clear meaning to each of the personality traits measured by the MMPI including the meaning of the validating scales. More emphasis will be placed upon the Psychopathic Deviate than any of the other traits since the primary interest of this study is with this type of personality.

The Validating scores consist of four validity scales, the question score (?), the lie score (L), the K score and the validity score F. Any one of the scores ranging above seventy may cause the particular test score to be invalid. High validating scores, however, may be of clinical significance.

The Question Score is a validating score consisting simply of the total number of statements not answered. Naturally the size of this score affects the significance of the other scores. High scores often have been observed to occur in psychasthenic and re-
12
tarded depression patients.

The Lie score is also a validating score that affords a measure of the degree to which the subject may be attempting to falsify his scores by choosing the response that places him in the most

acceptable social light. The following statements in the MMPI go to make up the lie indicators. If the statements are answered false the answer is considered a lie thus indicating the probability of lying answers to other questions:

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1. Once in a while I think of things too bad to talk about.
2. At times I feel like swearing.
3. I do not always tell the truth.
4. I do not read every editorial in the newspaper every day.
5. I get angry sometimes.
6. Once in a while I put off until tomorrow what I ought to do today.
7. Sometimes when I am not feeling well I am cross.
8. My table manners are not quite as good at home as when I am out in company.
9. If I could get into a movie without paying and be sure I was not seen I would probably do it.
10. I would rather win than lose in a game.

A high L score does not entirely invalidate the other scores but indicates that the true values are probably higher than those actually obtained. In many cases the L score may be of interest in its own right as a measure of a special personality trend.

The K score is essentially a correction factor which has been found to be of value in sharpening the discriminatory power of

13 S. R. Hathaway and J. C. McKinley, Booklet for the Minnesota Multiphasic Personality Inventory, 1-4.

the clinical variables measured by the MMPI. K is not known to have much clinical significance in itself. Its use with the MMPI does not add another variable in the clinical profile. Its effect is only to accentuate the validity of five of the nine existing clinical scales and to make normal appear more normal.

A subject's score on the K factor is probably quite variable according to the influences operating upon him at the time of answering the inventory. His particular motivation with respect to his desire to make a good or bad record at the time will affect his K score. Usually a high K score indicates that the personality traits are higher than actually shown on the profile chart.

The F score is not a personality scale but serves as a check on the validity of the whole record. If the F score is high, the other scales are likely to be invalid either because the subject was careless or unable to comprehend the items, or because someone made extensive errors in entering the items on the record sheet. A low F score is a reliable indication that the subject's responses were rational and relatively pertinent.

A somewhat high F score will be valid for certain persons.
14
These are usually of two types. First, some people who are highly individual and independent may honestly make unusually correct responses to items making up the F score. For example, they may admit to disliking children and not believing their mother was a good woman.

14 S. R. Hathaway and J. C. McKinley, op. cit., 8.

Second, a number of rather badly neurotic or psychotic subjects obtain high F scores validly.

The nine personality traits which are measured by the MMPI will be discussed in the order in which they appear on the profile chart.

The Hypochondriasis Scale (Hs) measures the abnormal concern about bodily functions. Hathaway and McKinley state that "Persons with high Hs scores are unduly worried over their health. They frequently complain of pains and disorders which are difficult to identify and for which no clear organic basis can be found.

"Common organic sickness does not raise a person's score appreciably, for the scale detects a difference between the organically sick person and the hypochondriac."

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16

Page points out that hypochondriacal delusions are concerned with an excessive preoccupation with imaginary physical or mental diseases. "Even in the presence of contradictory evidence, there are persistent complaints of incurable ailments such as cancer or tuberculosis. Some patients state that their brain is wasting away, their stomach is gone, their blood is turning to water, or their bones are becoming fragile." Page continues, "Fear of going insane, losing one's mind, or undergoing a change in personality are common symptoms in borderline cases. Hypochondriasis is usually interpreted as an escape from life's difficulties by a flight into disease. It is also

15 Ibid., 4.

16 James D. Page, Abnormal Psychology, 52.

a convenient method of rationalizing threatening defeat or lack of achievement. In some cases an element of self-punishment is discernible."

Henderson and Gillespie states that "hypochondria consists in a settled conviction of physical disease in the absence of any evidence thereof. As a symptom it occurs in many forms of mental illness. It is most common in depressions, especially in the de-
17
pressions of the involutional period."

The hypochondriac actually feels pain, however medical examination reveals no organic illness. This is due to the fact the person refers maladjustment to organic illness.

Hypochondriasis is included in what is termed "the neurotic triad." The other two traits which make up the triad are Depression and Hysteria. Generally when one of the traits is high the others are high also. Psychasthenia, also, usually follows in line with the characteristics of the neurotic triad.

The Depression scale (D) measures the depth of the clinically recognized symptom or symptom complex, depression. "A high D score indicates poor morale of the emotional type with a feeling of uselessness and inability to assume a normal optimism with regard to the future. In certain cases the depression may be well hidden from casual observation. This is the so-called "smiling depression".

17 D. K. Henderson and R. D. Gillespie, A Text-Book of Psychiatry, 110.

Often such persons insist that their attitude is the only realistic one, since death is inevitable and time passes. A high score further suggests a characteristic personality background in that the person who reacts to stress with depression is characterized by lack of self-confidence, tendency to worry, narrowness of interests, and introversion.¹⁸

Depression usually results from frustration and frustration occurs when a wish is not fulfilled. Depression is more likely to occur when the aim of the frustrated tendency is abandoned; anxiety when there is frustration with continued striving. "Depression may also be the conscious accompaniment of a feeling of guilt or remorse, which itself may be derived from an unconscious trend imperfectly repressed. The most important feature of depression in general, from the point of view of care and treatment, is the danger of suicide."¹⁹ The person suffering from depression usually has the feeling that life is not worth living, and in many instances can bring out some very logical reasons for feeling as he does.

Depression is an affective dejection, probably arising from various psychopathological sources. "It is really a symptomatic state and not inherently fundamental. Depression may vary from a mild downheartedness to stupor. Depressions, in respect to their source, may be classified as reactive and autonomous. Reactive depressions are

18 S. R. Hathaway and J. C. McKinley, op. cit., 4.

19 D. K. Henderson and R. D. Gillespie, op. cit., 137 and 238.

those that arise in reaction to obvious external causes that might naturally produce sadness, such as sickness, bereavement, or business difficulties. They are not usually of protracted duration. Autonomous depressions are of endogenous rather than of situational or of experiential origin."

20

The Hysteria scale (Hy) measures the degree to which the subject resembles patients who have developed conversion-type hysteria symptoms. "Subjects with high Hy scores are also especially liable to episodic attacks of weakness, fainting, or even epileptiform convulsions. Definite symptoms may never appear in a person with a high score, but under stress he is likely to become overtly hysterical and solve the problems confronting him by the development of symptoms."

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It is believed that the hysterical cases are more immature psychologically than any other group. The symptoms often reappear if the stress continues or recurs.

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Page points out that the simplicity of the underlying mechanisms and the nature of the symptoms suggest that persons who develop hysteria possess many of the characteristics commonly observed in children. They are usually naive, highly suggestible, egocentric, unstable individuals who crave attention and sympathy. Their emotional reactions, which are often substituted for logical responses, tend to be immature, impulsive, and inconsistent.

20 Arthur P. Noyes, Modern Clinical Psychiatry, 80-81.

21 S. R. Hathaway and J. C. McKinley, op. cit., 4.

22 James D. Page, op. cit., 20.

When thwarted extreme hysteria patients may have temper tantrums. Sudden shocks may precipitate uncontrollable, artificial laughter. Toward their associates they frequently display ambivalent love-hate attitudes. Deficient in character and fortitude, they are posers rather than doers.

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The major mental symptoms, according to Page, are concerned with loss of memory and personality dissociation. The most common manifestation is forgetting one's personal identity. This is a form of amnesia in which the patient is unable to remember his name, his address, his family associations, and his past personal life. The memory loss, however, is not complete.

Almost invariably, hysterical amnesias are precipitated by some distressing emotional situation. Unfortunate love affairs, domestic conflicts, and financial reverses are common precipitating agents.

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Hysterical signs and symptoms have certain general characteristics. The motor symptoms, as stated by Henderson and Gillespie include paralysis with or without contracture, tics, tremors, involving any moving part, for example, the limbs, or vocal organs, the latter as mutism and aphonia. The mental symptoms being chiefly amnesias, somnambulisms, fugues, trances, hallucinations, deliria and dream states and fits. They are all of dissociative type; that is, they are

23 Ibid., 15.

24 D. K. Henderson and R. D. Gillespie, op. cit., 176-182.

all to be regarded as the result of detachment and independent functioning of a part of the mental content.

The Psychopathic Deviate (Pd) which may be termed psychopathic personality, psychopathic state, or constitutional psychopathic inferior, has been used in psychological literature to cover a multitude of slightly abnormal but highly divergent characteristics. In order to clarify the meaning of the personality trait, psychopathic, the writer's first step was to read through a number of studies describing psychopathic personalities and to determine what characteristics seemed fundamental.

Cole refers to the psychopathic personality as: " a sort of mental wastebasket into which one puts those cases that are not neurasthenic, not hysteric, not fanatic, not inferior, not obsessed, and not moody, but who are still not queer enough to be insane." ²⁵

"The psychopathic personality," Cole continues, "is closely associated with the adolescent years, so close, in fact that theories have been advanced to relate the symptoms shown to the glandular readjustments of the period. The first impression one gets of an adolescent with a psychopathic personality is certainly an impression of irresponsibility. These persons cannot be trusted to do anything at a particular time or in a particular way. They may do a task twice as well as expected, half as well, or not at all. They are usually popular with other students, although they do not enjoy the confidence given to

25 Luella Cole, Psychology of Adolescence, 201.

more normal persons. It is generally not difficult to convince them that a particular thing they have done is unacceptable. They will admit they have been at fault and will often take censure in perfectly good nature, but five minutes later they seem to have forgotten all about it. They are childishly unable to control themselves; indeed, much of their behavior is the result of adolescent drives, practically adult mentality, and infantile inhibitions. They simply do not know what responsibility means."

Gurvitz lists some very interesting symptomatic constellations as a result of a study made at the Federal Penitentiary at Lewisburg, Pa. The indices are as follows:

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- Defective relationship with the community.
- Inability to pursue socially acceptable goals.
- Rejection of constituted authority.
- Maladjustment and perversion in the sexual sphere.
- Lack of appropriate emotional response.
- Almost total lack of insight in regard to the self.
- Defective judgment as evidenced by marked unbalance between ego and social goals.
- Verbal rather than emotional acceptance of social precepts.
- Intelligence—as measured by tests—in the range of normal to superior
- Strong migratory tendencies.
- Marked egocentricity.
- Quick ability for rationalization.

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Page makes the statement to the effect that many persons who seem to be psychopathic actually have very pleasing personalities

26 Milton S. Gurvitz, "The Intelligence Factor in Psychopathic Personality", Journal of Clinical Psychology, Vol. III, No. 2, April, 1947, 194.

27 James D. Page, op. cit., 10-11.

and their abnormality is manifested in a lack of inhibitions and an incapacity or unwillingness to conform to ethical and social standards. They are impulsive, selfish, emotionally unstable individuals who, from early childhood, make a practice of immediately satisfying their desires and impulses without regard to the consequences or the means. Since they are unconcerned with future consequences, their judgment appears faulty and they fail to profit from past experiences. They are rebels of society who actively resist discipline and refuse to conform with social demands. As a result, they are in constant conflict with their environment.

Psychopathic personality is defined by Noyes as "a term applied to various inadequacies and deviations in the personality structure of individuals who are neither psychotic nor feeble-minded, yet are unable to participate in satisfactory social relations or to conform to culturally acceptable usages".²⁸

At times, there has been a tendency to include practically all habitual delinquents and criminals in this group, or even to limit it to the antisocial. Neither of these practices is desirable since there are many recidivists who are not psychopathic personalities and many psychopathic personalities who do not come into conflict with the law.

The personality of the psychopath is characterized by Noyes as a person who seems to be dominated by primitive basic drives to the

28 Arthur P. Noyes, op. cit., 410-411.

29 Ibid., 411.

exclusion of rational behavior. Certain lines of conduct particularly of a socialized nature are never learned. Neither persuasion nor punishment is of avail. Some are sensitive, stubborn, given to tantrums or to outbursts of rage. Frequently these preadolescent psychopaths steal, run away, suffer from enuresis, are destructive, quarrelsome, sulky, deceitful, obstinate, defiant, boastful, shameless and erratic.

The psychopath is typically selfish, ungrateful, narcissistic and exhibitionistic. He is egocentric, demanding much and giving little. His excess of demand is, in fact, one of his outstanding characteristics. He has no critical awareness of his motives and lacks foresight and discriminating, reflective judgment. In spite of the fact that his conduct is so inadequate or so hostile from a social standpoint the psychopath is satisfied with it. He lacks definiteness of objective, and his usual state of restlessness may result from a search for the unattainable. Occupational application and efficiency are usually faulty; routine is intolerably irksome. The psychopath lacks purpose and aim, is lacking in sense of responsibility, and lives for the moment. He demands immediate and instant gratification of his desires with no concern as to the feelings and interests of others. He is often plausible and talkative but absolutely unreliable. Frequently the only environment to which he can adjust is the one which he can dominate. Many psychopaths bear alcohol poorly, and under its influence become noisy, quarrelsome and destructive. The psychopath lacks the ability empathically to re-experience the situation of others or to feel himself into the social group. He projects his own insecurity

by blaming others. He often conceals his own motives from himself by a superficial rationalization. Marked defects of judgment coupled with an inability to learn by experience are characteristic.

According to psychiatrists, it is typical of the adolescent psychopath to run away from school because it represents authority and discipline, and the psychopath can not learn to submit to either. But once out and free, the person wants to be back in school because the school represents security; and he wants that, too.

Hathaway and McKinley state that "no therapy is especially effective in improving persons with high Pd scores, but time and careful intelligent guidance may lend to an adequate adaptation. Institutionalization of the more severe cases is probably no more than a means of protecting society and the offender. Some active professional persons have high Pd scores, but their breaks, if any, are either disregarded by others or effectively concealed".³⁰

The Interest Scale (Mf) measures the tendency toward masculinity or femininity of interest pattern. A high score indicates a deviation of the basic interest pattern in the direction of the opposite sex. The items for the inventory were originally selected by a comparison of the two sexes. Some were inspired by Terman and Miles,³¹ and others are original, by Hathaway and McKinley.

Males with very high Mf scores have frequently been found to be either overt or repressed sexual inverts. Homosexual abnormality,

30 S. R. Hathaway and J. C. McKinley, op. cit., 5.

31 Ibid., 5.

however, must not be assumed on the basis of a high score without confirmatory evidence. Among females high scores cannot yet be safely assumed to have clinical significance, and the interpretation must be limited to measurement of the general trait. The Mf score is often important in vocational choice.

Paranoia, schizophrenia, hypomania and perhaps psychasthenia (usually psychasthenia is included in the neurotic personality traits) are factors that are found in patients suffering from psychoses. Since the most difficult situation into which the behavior of the psychopath usually leads himself is confinement, which he bears poorly, the most important of the situation psychoses are the prison psychoses. It must not be concluded that all psychoses developing among prisoners belong to this group; in fact, only a minority of them belong to the true prison psychoses. In them delusional ideas tend to be ones of persecution, innocence or pardon. A majority of the psychoses observed among prisoners are of the usual clinical types, especially schizophrenia and paranoid states, the imprisonment acting
32
merely as the releasing agent.

The Paranoia Scale (Pa), according to Hathaway and McKinley,³³ was derived by contrasting normal persons with a group of clinic patients who were characterized by suspiciousness, oversensitivity, and delusions of persecution, with or without expansive egotism. The diagnoses were usually paranoia, paranoid state, or paranoid schizophrenia.

32 Arthur P. Noyes, op. cit., 421.

33 Ibid, 6.

Persons with an excess amount of paranoid suspiciousness are common and in many situations are not especially handicapped. It is difficult and dangerous to institutionalize or otherwise attempt to protect society from the borderline paranoiac because he appears so normal when he is on guard, and he is so quick to become litigious or otherwise to take action vengefully against anyone who attempts to control him.

34

In paranoia, Mayer has pointed out that the paranoiac constitution forms a personality type which is dominated by a feeling tone of suspicion, mistrust and undue sensitiveness. There are many theories and concepts of paranoia, but the presence of a central unchangeable systematic delusional scheme which is impervious to logical reasoning is generally admitted. Misinterpretation of events serves to strengthen the delusional system and projection is an essential feature. Judgment and wisdom may show some defects.

35

Freud has stressed the homosexual factor in paranoia and believes that paranoia is due to a fixation at the homosexual level of development. Repression and sublimation having partially failed there is consequent projection manifested as symptoms of the repressed homosexuality. The feelings of inferiority and guilt that may arise from unconscious tendencies towards homosexuality are important factors in the development of a paranoid character.

34 John H. Ewen, Mental Health, 29 and 155.

35 Ibid., 155.

According to Ewen,³⁶ paranoia appears to be more common in men than women and particularly in unmarried men. Its onset is insidious and usually occurs between the ages of 35 and 45 years.

Ewen continues that early mental symptoms are: insomnia, depression, irritability and hypochondriacal ideas. Suspicion and feelings of inferiority are prominent. In time, the characteristics of the paranoid personality become intensified and psychotic symptoms make their appearance.

The paranoid disposition has been described as a personality in which there is an innate suspicion of the world and an inborn distrust of the individual's own personality, both arising from a sense of inferiority. The person has the feeling that the world is against him. The person is usually an extreme egotist.

The Psychasthenia Scale (Pt) measures the similarity of the subject to psychiatric patients who are troubled by phobias or compulsive behavior. The compulsive behavior may be explicit, as expressed by excessive hand washing, vacillation, or other ineffectual activity; or it may be implicit, as in the inability to escape useless thinking or obsessive ideas.³⁷ A person suffering from psychasthenia usually is characterized by obsessive phobia behavior or obsessive compulsive behavior. Other characteristics of psychasthenia are doubt and hesitation, fixed ideas, imperative conceptions, peculiar impulses, morbid

36 Ibid., 156.

37 S. R. Hathaway and J. C. McKinley, op. cit., 6.

scruples, agitations (mental and physical), feelings of strangeness, and feelings of changed personality.

The Schizophrenia Scale (Sc) measures the similarity of the subject's responses to those of patients who are characterized by
 38
 bizarre and unusual thoughts or behavior. Schizophrenia or dementia praecox, whichever term one may prefer, is the most common of all psychoses and is also one of the most difficult to understand.

The personality with schizophrenia usually has a different sense of reality from that of a person considered normal; he has a different frame of reference. There are several degrees of schizophrenia ranging from a mild tendency to psychoses. It is rather difficult to give definite characteristics of schizophrenia since many of the individual cases differ greatly one from the other. However, there are a few general characteristics which may be found in most cases of schizophrenia. Usually the person fails to face the reality of life. Introversion, regression and dissociation usually results from such a failure. Emotion is often inadequately expressed or incongruous and inconsistent with the situation. Frequently no emotion is manifested and the patient may relate the most harrowing experiences without displaying any affective changes.
 39
 A marked disharmony between mood and thought is prominent.

The Hypomania Scale (Ma) measures the personality factor characteristic of persons with marked overproductivity in thought and

38 Ibid.

39 John H. Ewen, op. cit., 142.

action. The hypomanic patient usually gets into trouble because of undertaking too many things. He is active and enthusiastic. Contrary⁴⁰ to common expectations, he may also be somewhat depressed at times.

Activities which are carried on by the hypomanic patient may interfere with other people through his attempts to reform social practice, his enthusiastic stirring up of projects in which he then may lose interest, or his disregard of social conventions. In the last named, he may get into trouble with the law.

The patient displays constant activity which is characteristically directed towards a multiplicity of goals which are, in the end, never reached. He is garrulous, shows mild flight of ideas rapidly alternating from topic to topic. He is dogmatic, aggressive, intolerant and quarrelsome. He resents criticism and takes it as a personal affront⁴¹ that his opinions on any topic should be questioned.

Overlapping of the characteristics of the various personality traits can be readily detected. Usually a personality suffers from several of the maladjustments, and all of the inclinations or several of them may overlap and be interwoven one with the other.

⁴⁰ S. R. Hathaway and J. C. McKinley, op. cit., 6.

⁴¹ John H. Ewen, op. cit., 163.

Chapter IV

Procedure in Administration of the Inventory

The Minnesota Multiphasic Personality Inventory is appropriate for administration to any cooperative subject from about sixteen years of age upward. The only intellectual requirement is that the subject be able to read and understand the statements. As explained in the discussion of the validating scales, the Inventory includes an internal check for detecting carelessness or failure to comprehend the items.

Permission was secured through the educational department of the Texas Prison System to test inmates. Tuesday afternoon of each week was set aside by the officials for this purpose. The inmates were selected by use of the Stanford Achievement Test. Anyone making a score of 3.0 (indicates educational background as being equivalent to the third grade) or higher was scheduled to take the test. Race did not affect the selection of the inmates; many Negroes and Mexicans could not take the test, however, due to the fact that they could not read English. In the case of the Mexicans, many could not read English even though they were proficient in Spanish. The inmates who were scheduled for the testing were not always available. Some had been put to work, some were ill, and others unavailable for various reasons. The inmates who were scheduled for the tests were those who had arrived within the previous two weeks, and who were in the process of being

Why?
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classified. The inmates, all male subjects, were housed in the quarantine building, with double-decker single beds without partitions. The whites and Mexicans occupy the upper floor while the Negroes occupy the ground floor.

There is no segregation while in quarantine, regardless of age or offense except in cases of extreme misconduct. In a group of persons as found in such an institution, there usually will be several sex perverts, dope and alcohol addicts, criminally insane persons and other troublesome individuals who are constantly bothering the other inmates. Such an environment certainly is not wholesome for anyone, especially the younger inmates.

When the inmates had been brought into the Educational building for the tests, a short explanation was offered as to the purpose of their taking the tests. They were told that a research was being carried on and sponsored by Sam Houston State Teachers College for the purpose of trying to make a step toward the recognition of a scientific method of classifying the inmates as they enter the walls in the future. It was stated that many persons enter the institution with a sick mind and, therefore, should be spotted upon entrance and be treated accordingly. The inmates were told that they had been selected from the group which had arrived there within the past two weeks, and that they were helping out very much by cooperating in taking the tests.

Occasionally questions were asked by the inmates to find out more about the tests. The men seemed quite interested, however, and worked well on the tests. The general attitude was good.

The men were first given the Otis Quick Scoring IQ test.

A thirty minute time limit is set for the IQ test. Then instructions were given for taking the MMPI which has no time limit. The time for the completion of the MMPI varies from one and one-half hours to about five hours. Usually cigarettes were given the men and they were allowed to smoke during the tests. Notes were made on each day's testing as to the way the men reacted to the tests, questions asked, interest shown and any other incidents which seemed to be of significance. The men were informed that their names and all results of the tests would be kept strictly confidential. Also, they were told that anyone desiring or interested at all in writing an autobiography that it would be welcomed and appreciated, adding much to the study. It was thought that a more complete study could be made of the individual with an autobiography at hand. Very few men agreed to write, some were not interested, some did not have the ability, and others did not want to take the responsibility considering the poor opportunity for writing while in quarantine. Six inmates completed autobiographies.

Scoring of the IQ tests was quite simple and rapid. A perforated scoring sheet is placed over the answers which are multiple choice answers. The correct answers are counted and translated in the IQ.

Scoring of the MMPI (group form) proved a lengthy process. There are fifteen perforated scoring sheets, one for each of the personality traits except Pa, Pt and Sc of which there are two. For scoring the Mf there is a scoring sheet for males and one for females. There is one scoring sheet for the validating scale F and two for the validating

scale K. The number of answers are counted for each trait and kept on the answer sheet. These figures are called the raw score. The Raw scores are then copied on a profile sheet, and with the use of the Supplementary Manual for the Minnesota Multiphasic Personality Inventory the T scores or standard scores are determined by translating the raw scores into T scores. A profile is then drawn on the profile chart using the T scores for determining the degree of each trait. The normal is assigned a value of 50 and any score going above that is considered a tendency toward abnormality. "Experience has indicated that 70 is a borderline score, although useful interpretation will always depend upon the clinician's experience with a given group." ⁴²

⁴² S. R. Hathaway and J. C. McKinley, op. cit., 8.

Chapter V

Results of the Study

The most important phase of any test is the interpretation of the results. This applies even more to the MMPI than to achievement tests. This is due to the fact that none of the scales are wholly dependent on themselves. One of the scales may indicate abnormality and tell which category it would be placed in. For instance, a subject may make a very abnormal score on the Depression scale and Depression not be the chief disability; it could easily be the result of other personality problems. One might think of the individual scales as "indicators", just as a high temperature of a person is an indication that something evidently is wrong physically.

Anyone attempting to analyze and interpret the results of the MMPI, regardless of background or experience, should proceed very cautiously. Many psychological terms carry a bad implication, and since they are not standardized, many terms have different meanings to different people.

To begin with an explanation of the sample of the subjects will be given. For the purpose of this study the incoming male prisoners from November 1, 1948, until March 15, 1949, who were available, were tested. The testing was carried out in the following steps:

1. Each Tuesday afternoon beginning at 1 p. m. was the time set aside for giving the tests.

2. The inmates were called to the Educational building from quarantine (selection already having been made and a list of the qualified inmates prepared by the educational department).

3. A brief explanation was then presented to the inmates as to the purpose of the tests.

4. The prisoners were asked to take two tests: The Otis Quick Scoring I.Q. test and the MMPI. Usually the I.Q. test was administered first.

5. Test sheets for the I.Q. test were distributed and instructions given for taking the test.

6. After the time was up for the I.Q. test, copies of the MMPI test booklet and answer sheets were distributed among the inmates and instructions given for taking the test.

7. Close observation was carried out during each test period and notes were kept for each test period. All reactions and happenings observed during the period were written. Some of the observations noted are presented in the following passages. The notes are written just as they were kept except for the names of the inmates, which are with-held for obvious reasons.

"11-9-48

The first group of men were given the I.Q. test and MMPI. A total of twenty-three men were rounded up from the list of forty-three. Of these twenty completed the two tests.

One had not completed his last test and asked to be excused for the MMPI. He had a hospital pass and returned. Another had first

received a spinal shot and was too sick to take either test. Another coughed and said he was taking pneumonia and asked to return to his cell. He was an older man - 57. There was another of this kind; the man was 54. There were several kids - one a typical 'punk', who did not show any interest or cooperation on the test.

One good looking fellow takes unusual interest and says he likes to write.

They used all the cigarettes.

The over-all picture is good. They work on it. Some will have invalid scores. One man asked what 'seldom' meant. Nine had not finished with the MMPI at 4 p.m. They started at 2:30. One inmate talked about his experiences--wife at S.H.S.T.C. He attended the University of Houston."

"11-10-48

Second group came in for tests: I.Q. and MMPI.

A total of six men came in, two having been in on November 9. The older man who is 57 finished the MMPI, and one Mexican who complained of being too sick on November 9, still complained this day and was sent back. The Mexican seems to be pretending to be sick just to keep from taking the tests.

The four men coming in for the first time for tests seem very cooperative and worked on test as though interested. Two of the men were very neat and clean cut. The remainder of the men who were

to have come in were being examined at hospital. Two of the men wish to talk to Dr. Koeninger."

"12-14-48

A group of twenty-two men, eight of them Negroes, came in for MMPI and I.Q. tests. As the men came into the room they were rather noisy and seemed that it would be a group that would be difficult to quiet down, but the men worked well on the tests with very little unnecessary talking and moving around. The men, generally speaking, are a hardened lot.

The eight Negroes were placed in the rear of the room by an assisting inmate. Captain Byrd called one of the Negroes out of the room.

One man twenty-two years old had an I.Q. of 110 and had spent four years in Gatesville. He stated that he would write an autobiography."

"2-1-49

Twenty men out of possible twenty-one came for I.Q. and MMPI tests. One man said that he could not see well enough without glasses. He will take tests next time.

Seven men were called to complete test from last week. The men work very well. Several questions were asked concerning meanings to words such as librarian, tension, editorial.

Two men were called in concerning autobiographies. One said that he had several pages written. Another said he was just too busy at present but would write soon as he learned his job well enough to have spare time. He likes his job in hospital lab. He told of his wife and baby visiting him the previous Sunday. Also that he had just learned that he had a cousin on the parole board which might be of help to him. He said that he had talked to Dr. Koeninger a while and that he appreciated the interest that was shown in him.

"2-15-49

Thirty-two men came in for I.Q. and MMPI, six were Negroes. Two men were available from last week testing who failed to complete the MMPI. The men have a very clean looking appearance compared to some of the other groups. A large majority are repeaters, having from one to six previous convictions. In one group of these men fourteen out of nineteen are repeaters. Probably the fact that they have been in prison before accounts for their appearance. They accept the idea of being in prison and make the best of it. One man was called for, concerning his autobiography. He had been sent to the farm."

The Sample

During the period that the tests were being administered 1040 persons entered the Texas Prison System. There were 640 inmates qualified and scheduled to take the tests, but only 400 became finished products for study.

The 400 profile charts were divided into two groups, the valid and the invalid. The valid which totaled 271 were those whose validating scores did not exceed sixty-nine. The invalid profiles were those in which one or more of the validating scores reached seventy or above. The fact that a validating score is out of bounds (70 or above) does not always invalidate the entire profile, and in many instances there is much significance in a high validating score, but in this study, only the 271 valid profiles are used. All charts, tables and profiles are calculated on the basis of the 271 valid profiles.

The 271 inmates consisted of 238 whites, twenty-three Negroes, and ten Mexicans. There were 106 married persons, 100 single, sixty-three divorced and two widowers.

The next step was to determine how many of the inmates obtained scores that are considered abnormal in each of the personality traits. To simplify interpretation, all of the scores found in the tables have been computed into T scores or standard scores.

It was found that more abnormal scores appeared in the Psychopathic Deviate scale (see Table VII) than any other scale. The Pd leads with 146 abnormal scores, which is 54.1 per cent of the 271 valid profiles. The Mean score for Pd for the entire group is 70.7, The Median is 71 and the Mode is 76, all of which are above 70 which is considered abnormal. Pd is the only trait in which the averages are above 70. This is an indication that there is definitely psychopathic tendencies possessed by many persons entering prison and in this study over half of the inmates have psychopathic tendencies that are abnormal.

The second highest number of abnormal scores was found to be in Depression (see Table V) with a number totaling ninety-one, which is 33.5 per cent of the 271 valid profiles. The Mean score for D in the entire group is 63.9, the Median 63, both of which are high, but are not considered abnormal. It seems that any normal person would be depressed after being placed in prison, however, the depression could very likely have been prevalent before entering prison and be the basic cause of his trouble. Careful examination of the patient by a psychiatrist could probably determine whether or not the person was suffering from depression before entering prison. Perhaps little trouble would come from the depressed person, however those scoring extremely high should be observed constantly in order to prohibit any attempts of suicide.

The third highest number of abnormal scores was in Hypochondriasis with a total number of fifty-eight (see Table IV), which is 21.4 per cent of the valid profiles. The Mean score for the entire group is 58.9, the Median score is 57 and the Mode is 49. It has been explained that the Hs scale is a measure of the amount of abnormal concern about bodily functions. With psychological treatment a high score may often be improved, but the basic personality is unlikely to change radically.

The fourth highest number of abnormal scores was in Hypomania with a number of fifty-seven (see Table XII), which is 21.8 per cent of the group. The Mean score for the entire group is 60.1, the Median score is 60 and the Mode is 60. A person scoring high in hypomania

usually lacks control of his emotions. In other words a person with a high Ma score is similar to an automobile without brakes, he cannot stop himself easily. This type of personality has many ideas and builds huge "air castles". One day the person may have in mind to become a great writer, the next day he intends to become a famous lawyer and the next day some other outstanding person, etc., but seldom are any of the ideas carried out. The person could be called an introvert or could be an extrovert.

The fifth group of abnormal scores was in Schizophrenia with a number totaling fifty-one, which is 18.8 per cent of the valid profiles (see Table XI). The Mean score for the entire group is 59.6, the Median score is 57 and the Mode is 57. There is a splitting of the subjective life of the schizophrenic person from reality so that the observer cannot follow rationally the shifts in mood and behavior. Their sense of reality isn't the same as that of a normal person. "The clinician should be very hesitant to apply the diagnostic term schizophrenia because of its bad implications."⁴³

The sixth highest number of abnormal scores was found to be in Psychasthenia (see Table X), with a total number of forty-eight, which is 17.7 per cent of the valid profiles. The Mean score for the entire group is 59.3, the Median score is 58 and the Mode is 56. It is believed that the term psychasthenia is gradually going out of use, however there is still some clinical use made of the tendency. A high score on Pt measures the similarity of the subject to psychiatric

43 S. R. Hathaway and J. C. McKinley, op. cit., 6.

patients who are troubled by phobias or compulsive behavior.

Hysteria ranks seventy (see Table VI) with abnormal scores amounting to forty-five, which is 16.6 per cent of the valid profiles. The hysterical cases are more immature psychologically than any other group. Although their symptoms can often be "miraculously" alleviated by some conversion of faith or by appropriate therapy, there is always the likelihood that the problem will reappear if the stress continues or recurs.

The eighth highest group of abnormal scores was in Paranoia with a total of twenty-seven which is 9.9 per cent of the 271 valid profiles (see Table IX). The Mean score for the entire group is 57.1, the Median score is 56 and the Mode is 56. Persons with an excess amount of paranoid suspiciousness are common and in many situations are not especially handicapped. The person with paranoia usually has the feeling that the world is against him, and in some instances has delusions.

The least number of abnormal scores was made in the Mf scale (see Table VIII) with a total of thirteen which is 4.8 per cent of the valid profiles. The Mean score for the entire group is 54.8, the Median score is 55 and the Mode is 57. As yet very little significance is in the Mf score, however in some extreme tendencies toward masculinity or femininity interests some clinical significance is brought out.

CLASSIFICATION OF PROFILES

The goal of the entire study is in the final classification of each personality profile into a particular type with the aim of rehabilitation in mind. There is perhaps no definite type of any sort, but generalizations have been set up whereby each personality type can be classified as good material for rehabilitation, just about average or appears to be very poor rehabilitation material. The final diagnosis in all cases is being left to a psychiatrist.

Seven classification types have been established with several sub-types under each classification type. The sub-types are merely step downs according to scores, the profile pattern remaining essentially the same under each particular classification type.

The following classification system was worked out by Sociology Class 567 using standards taken from the January, 1948 issue of The American Journal of Psychiatry⁴⁴ and explanations made by Mrs. Willie Verniaud, psychologist at John Sealy Hospital, Galveston, Texas. In each Classification Type the rating for rehabilitation begins with the more abnormal personalities and graduates down to the more normal and therefore better rehabilitation material.

The classifications are as follows:

TYPE I. STABLE PSYCHOPATH

A. Pd and Ma above 70; all other scores below 70.

⁴⁴ Clarence B. Farrar, Editor, The American Journal of Psychiatry, Vol. 104, No. 7, January, 1948.

- B. Pd or Ma above 70; other (Pd or Ma) in 60-69 range.
All other scores below 60.
- C. Pd and Ma in 60-69 range; all other scores below 60.
- D. Pd or Ma in 60-69 range; all other scores below 50.
- E. Pd and Ma in 50-59 range; all other scores below 50.
- F. Pd or Ma in 50-59 range; other (Pd or Ma) in 40-49 range. All other scores below 40.

TYPE II. UNSTABLE PSYCHOPATH (The following ratio applies to all sub-types in this group: Pd exceeds D, Hs, and Hy; Ma exceeds Pt, Pa, and Sc.)

- A. Pd and Ma above 70. At least one other score above 70, but lower than Pd and Ma (see formula above).
- B. Pd or Ma above 70; other (Pd or Ma) in 60-69 range or lower. At least one other score above 60, but lower than Pd and Ma.
- C. Pd and Ma in 60-69 range. At least one other score above 60, but lower than Pd and Ma.
- D. Pd or Ma in 60-69 range; other (Pd or Ma) in 50-59 range or lower. At least one other score above 50.
- E. Pd and Ma in 50-59 range. At least one other score above 50, but lower than Pd and Ma.
- F. Pd or Ma in 50-59 range; other (Pd or Ma) in 40-49 range. At least one other score above 40 but lower than Pd and Ma.

TYPE III. NON-HYPOMANIC STABLE PSYCHOPATH (The following ratio applies to all sub-types in this group: Pa and/or Pt and/or Sc exceed Ma.)

- A. Pd above 70; all other scores below 70. Ma lower than other psychotic score(s), (see formula above).
- B. Pd in 60-69 range; all other scores below 60. Ma lower than other psychotic score(s), (see formula above).
- C. Pd in 50-59 range; all other scores below 50. Ma lower than other psychotic score(s), (see formula above).
- D. Pd in 40-49 range; all other scores below 40. Ma lower than other psychotic score(s), (see formula above).

TYPE IV. NON-HYPOMANIC UNSTABLE PSYCHOPATH (The following ratio applies to all sub-types in this group: Pa and/or Pt and/or Sc exceed Ma.)

- A. Pd above 70; one or more other scores above 70, but less than Pd. Ma lower than other psychotic score(s), (see formula above).
- B. Pd in 60-69 range; one or more other scores above 60, but less than Pd. Ma lower than other psychotic score(s), (see formula above).
- C. Pd in 50-59 range; one or more other scores above 50, but less than Pd. Ma lower than other psychotic score(s), (see formula above).
- D. Pd in 40-49 range; one or more other scores above 40, but less than Pd. Ma lower than other psychotic score(s), (see formula above).

TYPE V. NEUROTIC (The following ratio applies to all sub-types in this group: Hy and/or Hs and/or D exceed Pd.)

- A. (Neurotic with Psychopathic Personality) Pd above 70; one or more neurotic scores above Pd (see formula above).
- B. Pd in 60-69 range; one or more neurotic scores above Pd (see formula above).
- C. Pd in 50-59 range; one or more neurotic scores above Pd (see formula above).
- D. Pd in 40-49 range; one or more neurotic scores above Pd (see formula above).

TYPE VI. PSYCHOTIC (The following ratio applies to all sub-types in this group: Pt and/or Pa and/or Sc exceed Pd.)

- A. (Psychotic with Psychopathic Personality) Pd above 70; psychotic score(s) above Pd (see formula above).
- B. Pd in 60-69 range; one or more psychotic score(s) above Pd (see formula above).
- C. Pd in 50-59 range; one or more psychotic score(s) above Pd (see formula above).
- D. Pd in 40-49 range; one or more psychotic score(s) above Pd (see formula above).

TYPE VII. COMPLEX, Neurotic and Psychotic (The following ratio applies to all sub-types in this group: One or more neurotic (Hs, D and Hy) and one or more psychotic (Pa, Pt, and Sc) scores exceed Pd.)

- A. (With Psychopathic Personality) Pd above 70; one or more psychotic and neurotic scores higher than Pd

(see formula above).

- B. Pd in 60-69 range; one or more psychotic and neurotic scores higher than Pd (see formula above).
- C. Pd in 50-59 range; one or more psychotic and neurotic scores higher than Pd (see formula above).
- D. Pd in 40-49 range; one or more psychotic and neurotic scores higher than Pd (see formula above).

The range in distribution according to the classification system: TYPE V leads with a total of 57 which is 21 per cent of the 271 valid profiles. TYPE II had the second largest number with fifty which is 18.1 per cent of the inmates with valid profiles. TYPE VII ranked third with a total of forty-eight which is 16.9 per cent of the total. TYPE III was fourth with a number of thirty-four which is 12.5 per cent of the profiles. TYPE IV and TYPE I are fifth and sixth with a total of thirty-two, each which is 11.9 per cent of the total number, and TYPE VI was seventh with a total of eighteen which is 6.6 per cent of the profiles.

CORRELATIONS AND COMPARISONS

Two correlations were made, one was the correlation of Pd scores with the I.Q. scores (see Chart No. 1) which gave a result of .128 showing a very low correlation between the Pd score and the I.Q. score. The other correlation was made between Pd scores and the ages of the inmates which proved to be no practical correlation since the result came out zero (see Chart No. 2).

A comparison was made as to previous convictions and the psychopathic tendencies. There were 117 inmates who had no previous convictions, which is 43.7 per cent of the total group of valid profiles. The Mean Pd score for this group was 69.9. The men who had had previous convictions totaled 154, which was 56.3 per cent of the entire group and their Mean Pd score was 71.3. The number of previous convictions for this group ranged from one to ten. The total number of inmates who had from four to ten previous convictions was twenty-one, which is 7.7 per cent of the group. The Mean score is 72.2. The indication is that the greater the number of times a person is sent to prison the greater the psychopathic tendencies (see Table XVII).

Chapter VI

Conclusions and Recommendations

The study proposed to evaluate the Minnesota Multiphasic Personality Inventory for use in assisting in the classification of incoming inmates of the Texas Prison System for the diagnosis of the personality of the inmates. Conclusions were sought in regard to the following questions:

1. What part of the MMPI as a whole is superior for use in classification?
2. What parts are secondary? Which particularly weak?
3. To what extent could the MMPI be recommended for incorporation in the classification system of the Texas Prison System?
4. To what extent is the MMPI valid?
5. What other tests should accompany the MMPI?
6. What improvements in the procedure are needed?

The conclusions which are stated in answer to the above questions have been reached through careful study and consideration. However, it is possible that one or all of the answers are incorrect. The following conclusions have been reached:

1. The goal of the classification system is the pointing out of individuals in regard to rehabilitation, and in order to carry out the plans for the goal, a great amount of knowledge should be known concerning the inmates' personality and background. The MMPI can be

of assistance is screening the incoming inmates as to personality types. To take out any part of the test would damage it: However, the scale for indicating the Psychopathic personality is probably more significant in a prison system than the other scales.

2. All the scales of the MMPI are of value in screening personalities. However the scale which seems to be weakest is the *Mf* scale.

3. The MMPI could be of great help to a psychiatrist for a starting point for treatment in mental diseases and to point out both normal and abnormal tendencies to be observed and assistance given when needed.

4. It is quite difficult to determine the entire validity of the MMPI. In this study of 400 profiles there were 271 considered valid according to the validating scores, although it is believed that much significance is in the remaining 129 profiles. The 271 valid profiles is 67.8 per cent of the group studied.

5. Already the Stanford Achievement test is being used in the classification system of the Texas Prison System with good results and to use an I.Q. with the MMPI and the Stanford Achievement test would give a good knowledge of the educational level of the individual and would give some indication as to the ability of the person.

6. There is seldom any procedure that cannot be improved in some way. Two improvements which would probably aid in administering the MMPI are as follows:

a) A clearer definition of the traits may be formulated for the persons working with the MMPI.

b) A longer period of observation preceded by some instruction in personality testing would probably make for more accurate estimating and consequently a more valid criterion.

SUBJECTIVE IMPRESSIONS AND HYPOTHESES FOR FURTHER INVESTIGATION

Several subjective impressions not based on statistical data are recorded for whatever value they may have in administering tests which will give "indices of possibilities" for the personality of inmates in prison institutions. These may be stated as follows:

First, officials are not able to estimate validly by subjective methods the personality of inmates. This would indicate the need for some type of objective measure. It would also indicate the great need for training of persons in charge of classification in personality diagnosis.

Second, the caution necessary in the interpretation of personality tests are still products for experimentation and can not serve as an instrument for definite conclusions.

Third, it seems possible that several factors such as health and adjustment to prison life must enter into the interpretation of the answers given on the personality test.

It is hoped that this study will be of some help in some way to bring about a better system of classification and also to arouse the interest of others to make other studies and investigations to help us live together more harmoniously as time goes by.

APPENDIX

TABLES AND CHARTS

The following Tables Nos. I through XII contain the various scores made on the validating scores and the scores made on the personality traits along with the number of inmates scoring each particular score.

TABLE I

L SCORES		
Score	No. of inmates	Per Cent
50	164	60.5
53	32	11.8
56	29	10.7
60	17	6.2
63	19	7.0
66	10	3.6
Mean 53.1 Median 50 Mode 50		

TABLE II

K SCORES		
Scores	No. of inmates	Per Cent
30's	11	4.06
40's	113	41.8
50's	102	37.9
60's	45	16.5
Mean 51.5 Median 51 Mode 49		

TABLE III

F SCORES		
Scores	No. of inmates	Per Cent
50's	157	57.9
60's	114	42.1
Mean 55.4		
Median 58		
Mode 50		

TABLE IV

Hs SCORES		
Score	No. of inmates	Per Cent
30's	16	5.9
40's	67	24.7
50's	83	30.6
60's	47	17.3
70's	37	13.6
80's	13	4.8
90's	4	1.4
100's	3	1.1
110's	1	.3
Mean 58.9		
Median 57		
Mode 49		

TABLE V

D SCORES		
Scores	No. of inmates	Per Cent
40's	29	10.7
50's	73	26.9
60's	78	28.8
70's	63	23.3
80's	18	6.6
90's	10	3.6
Mean 63.9 Median 63 Mode		

TABLE VI

Hy SCORES		
Scores	No. of inmates	Per Cent
30's	5	1.4
40's	50	14.2
50's	93	34.4
60's	78	28.8
70's	32	11.9
80's	13	4.8
Mean 59.05 Median 58 Mode		

TABLE VII

Pd SCORES		
Scores	No. of inmates	Per Cent
30's	1	.3
40's	2	.7
50's	27	9.9
60's	95	35.0
70's	91	33.5
80's	44	16.2
90's	12	4.4
Mean 70.7		
Median 71		
Mode 76		

TABLE VIII

Mf SCORES		
Scores	No. of inmates	Per Cent
20's	1	.3
30's	15	5.5
40's	68	25.1
50's	109	40.2
60's	65	23.9
70's	12	4.4
80's	1	.3
Mean 54.8		
Median 55		
Mode 57		

TABLE IX

Pa SCORES		
Scores	No. of inmates	Per Cent
30's	9	3.3
40's	37	13.6
50's	126	46.5
60's	72	26.5
70's	25	9.2
80's	2	.7
Mean 57.1 Median 56 Mode 56		

TABLE X

Pt SCORES		
Scores	No. of inmates	Per Cent
30's	3	1.1
40's	48	17.7
50's	97	35.8
60's	75	27.6
70's	32	11.9
80's	11	4.06
90's	5	1.4
Mean 59.3 Median 58 Mode 56		

TABLE XI

Sc SCORES		
Scores	No. of inmates	Per Cent
30's	6	2.2
40's	43	15.9
50's	103	38.0
60's	68	25.1
70's	30	11.1
80's	17	6.2
90's	4	1.4
Mean 59.6 Median 57 Mode 57		

TABLE XII

Ma SCORES		
Scores	No. of inmates	Per Cent
30's	4	1.4
40's	29	10.7
50's	86	30.9
60's	95	35.0
70's	52	19.2
80's	5	1.6
Mean 60.1 Median 60 Mode 60		

TABLE ON EDUCATIONAL LEVELS

The following Table No. XIII gives the educational level as indicated by the use of the Stanford Achievement Test. The subject may or may not have gone through formal schooling as indicated by the score. The highest possible score is 11.0.

TABLE XIII

EDUCATIONAL LEVEL BY USE OF THE STANFORD ACHIEVEMENT TEST		
Grade	No. of inmates	Per Cent
3rd	3	1.1
4th	21	7.7
5th	44	16.2
6th	33	12.1
7th	57	21.0
8th	31	11.4
9th	29	10.7
10th	6	2.2
11th*	47	17.3
Mean 7.7 Median 7.5 Mode		

*11th indicates that the subject has completed high school or the equivalent grade level or higher.

TABLE ON SENTENCES

The following Table No. XIV contains the sentence distribution in frequencies of five years, with the number of inmates in each range and the percentages.

TABLE XIV

SENTENCE DISTRIBUTION		
Sentence in years	No. of inmates	Per Cent
1 - 5	218	80.4
6 -10	31	11.5
11-15	10	3.6
16-20	4	1.4
21-25	1	.3
30-35	1	.3
99	1	.3
Life*	5	1.6
Mean 6.4 years Median 2 years Mode 2 years		

*

The Life sentence is figured at ninety-nine years in calculating the Mean sentence.

TABLE ON I.Q. RATINGS

The following Table No. XV presents I.Q. groupings of 248 inmates (twenty-three unknown) with the number of inmates in each I.Q. rating.

TABLE XV

I.Q. RATINGS BY USE OF THE OTIS QUICK SCORING TEST		
I.Q.	No. of inmates	Per Cent
Unknown	23	8.4
50-59	7	2.5
60-69	23	8.4
70-79	43	15.9
80-89	44	16.2
90-99	61	22.5
100-109	43	15.9
110-119	18	6.6
120-129	6	2.2
130-139 *	3	1.1
Mean 89.4		
Median 90		
Mode 90		

*
The highest possible rating on the Otis
Quick Scoring Test is 133.

CORRELATION OF Pd TO I.Q.

The following chart is a correlation of the Pd scores
to the I.Q. ratings.

↑
○
I.

	-4	-3	-2	-1	0	1	2	3	4	
	7	23	43	44	61	43	18	6	3	
v	50-59	60-69	70-79	80-89	90-99	100-109	110-119	120-129	130-139	
4	110-119									
3	100-109									
2	90-99		1	1	4	2	3		1	18
1	80-89	2	1	6	12	8	4			-14
0	70-79	3	9	18	14	17	8	3	1	-39
-1	60-69	2	11	13	18	14	1	3	1	-56
-2	50-59				8	2	1			-17
-3	40-49									-3
-4	30-39						1			-8
	f(u)	7	23	43	44	61	18	6	3	-118
	uf(u)	-28	-69	-86	-44	0	36	18	12	752
	u ² f(u)	112	207	172	44	0	72	54	48	-80
	v	0	-14	-16	-26	-19	73	-3	4	(95)
	uv	0	42	32	26	0	6	-9	4	

Correlation is .128

← Pd

TABLE ON AGES

The following Table No. XVI is the age grouping which was represented in the 271 valid profiles of the inmates. The number of inmates in each age group is given.

TABLE XVI

AGES OF INMATES		
Age	No. of inmates	Per Cent
17-26	150	55.3
27-36	75	27.6
37-46	31	11.5
47-57	14	5.0
Mean 27.6 Median 25 Mode		

CORRELATION OF Pd TO AGES

The following chart is a correlation of the Pd scores
with the ages of the inmates.

Correlation of Pd to Ages

[illegible]

Correlation is Zero

TABLE ON RECIDIVISM

The following Table No. XVII contains the number of previous convictions and the number of inmates in each group. The previous convictions were in reform schools, Federal institutions as well as the Texas Prison.

TABLE XVII

RECIDIVISM			
No. of Previous Convictions	No. of inmates		Per Cent
*			
0	117	...	43.7
1	79	}	
2	29		
3	25		
4	10	**	56.3
5	8	}	
6	1		
8	1		
10	1	***	7.7
Mean Scores on Pd			
*Mean 69.9			
**Mean 71.3			
***Mean 72.2			

TABLE ON CLASSIFICATION DISTRIBUTION

TABLE XVIII

CLASSIFICATION DISTRIBUTION			
TYPE	SUB-TYPE	No. of inmates	Per Cent
I	A	13	11.8
	B	10	
	C	8	
	D	1	
II	A	7	18.1
	B	32	
	C	4	
	D	6	
	E	1	
III	A	24	12.5
	B	8	
	C	2	
IV	A	27	11.9
	B	4	
	C	1	
V	A	26	21.0
	B	26	
	C	5	
VI	A	10	6.6
	B	8	
VII	A	12	16.9
	B	20	
	C	14	
	D	2	

Center _____

120
110
100
90
80
70
60
50
40
30
20
10



TYPE IA PROFILES (Examples)

Standard

(T) Score

Raw Score

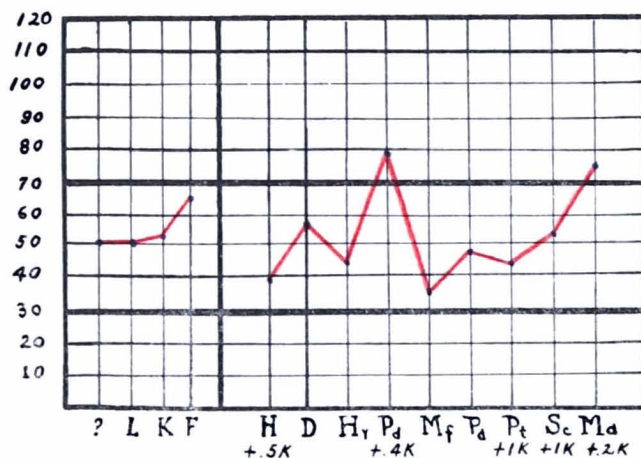
Raw Score

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 143

Name _____

Date _____

Number _____ Age 24 Sex M Educ. 10.0 I. Q. 99 X's 1 Race MEX. M S D W Children 0Charge * _____ Sentence 4 yearsOccupation _____ MMPI Ia

*Burglary and theft.

Standard

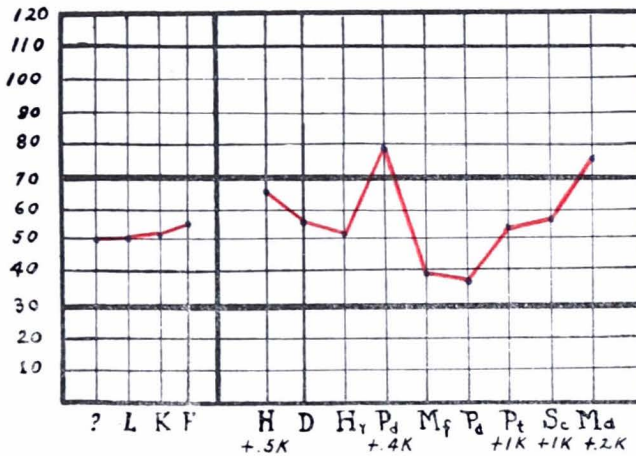
(T) Score 50 50 53 66 39 56 44 79 35 47 44 53 75Raw Score 40 4 14 10 0 19 13 25 13 7 6 10 24K to be added 7 6 14 14 3Raw Score with K 7 31 20 28 27

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 162

Name _____

Date _____

Number _____ Age 39 Sex M Educ. 9.3 I. Q. 78 X's 3 Race W M S D W Children 3Charge* _____ Sentence 3 yearsOccupation _____ MMPI Ia

*Burglary, passing and forgery.

Standard (T) Score 50 50 51 55 67 56 51 79 39 38 54 57 75

Raw Score 05 4 13 5 11 19 17 26 15 4 12 13 24

K to be added 7 5 13 13 3

Raw Score with K 18 31 25 26 27

PERSONALITY INVENTORY

Card No. 232

Name _____

121 K

2

120
110
100
90
80
70
60
50
40
30
20
10

Occupation

*Assistant to R

? L F

+ 3K

TYPE IB PROFILES
(Examples)

Standard

(T) Score 42 52 50 48 47 41 40 34 31

Raw Score 64 1 1 1 1 1 10 10 10

K to be added 2

Raw Score with K 66

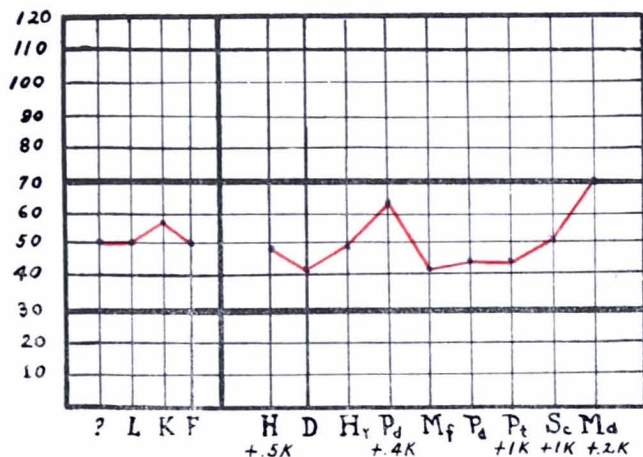
6 10 10 10 10

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 232

Name _____

Date _____

Number _____ Age 26 Sex M Educ. 11.0 I. Q. 121 X's 0 Race W M S D W Children 2Charge* _____ Sentence 2 yearsOccupation _____ MMPI 1b

*Assault to rape.

Standard

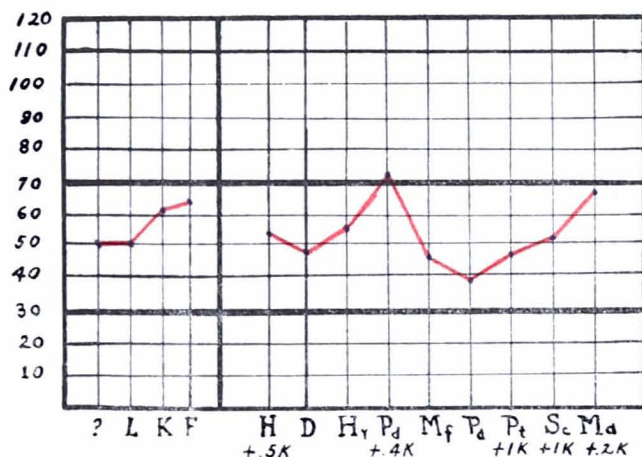
(T) Score 50 50 50 50 47 41 49 64 41 44 44 50 70Raw Score 0K 2 16 2 2 13 16 19 16 6 4 6 22K to be added 8 6 16 16 3Raw Score with K 10 25 20 22 25

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 203

Name _____

Date _____

Number _____ Age 21 Sex M Educ. 11.0 I. Q. 115 X's 0 Race W M S D W Children 0Charge* _____ Sentence 10 yearsOccupation _____ MMPI Ib

*Robbery with firearms.

Standard

(T) Score 50 50 61 64 54 48 55 71 45 38 46 51 68Raw Score 05 3 18 9 4 16 19 21 18 4 3 5 20K to be added 9 7 18 18 4Raw Score with K 13 28 21 23 24

PERSONALITY

Card No.

Name _____

Date _____

S & W Children 1

120

100

80

60

40

20

0

-20

-40

-60

-80

-100

TYPE IC PROFILES (Examples)

Standard
(T) Score 42 42 42 42 42 42
Raw Score 44 44 44 44 44 44
K to be added 1
Raw Score with K 45

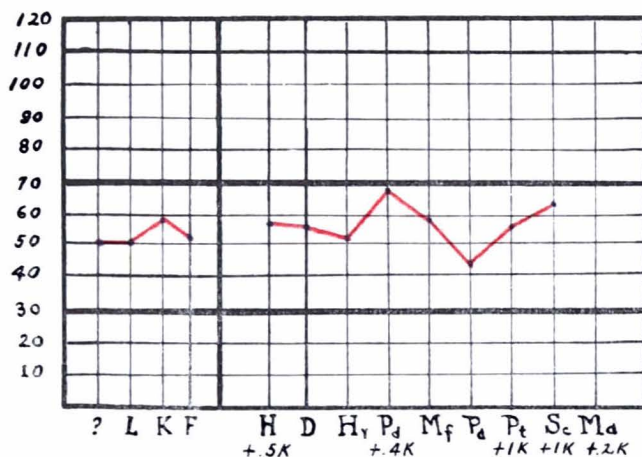
44 44
44 44
44 44 44 44

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 236

Name _____

Date _____

Number _____ Age 38 Sex M Educ. 11.0 I. Q. 96 X's 5 Race W M S D W Children 1Charge Burglary Sentence 6 yearsOccupation _____ MMPI IC

Standard

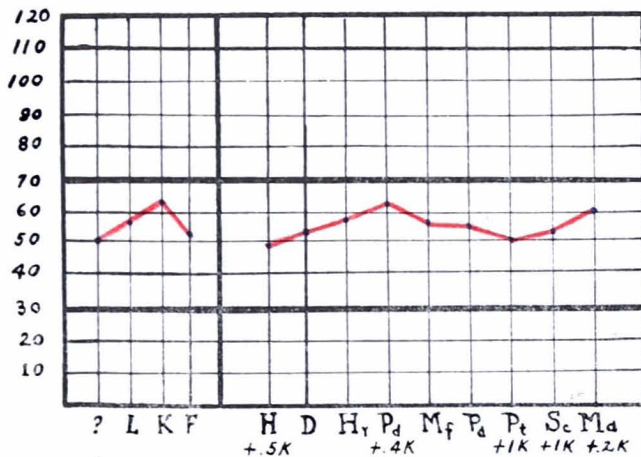
(T) Score 50 50 59 53 57 56 51 69 54 44 56 51 63Raw Score 28 3 17 4 5 19 17 24 25 6 9 9 14K to be added 9 7 17 17 3Raw Score with K 14 26 26 26 22

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 349

Name _____

Date _____

Number _____ Age 21 Sex M Educ. 11.0 I. Q. 108 X's 0 Race W M S D W Children 0Charge Murder Sentence LifeOccupation _____ MMPI IC

Standard

(T) Score 50 56 64 53 49 53 58 62 57 56 50 53 60Raw Score 08 6 20 9 1 18 21 16 24 10 3 4 17K to be added 10 8 20 20 4Raw Score with K 11 24 23 24 21

Card No. -

Name _____

RS
ID110
100
90
80
70
60
50
40
30
20
10

+ 3A

TYPE ID PROFILE
(Example)

Standard
(T) Score 50 60 50 50 30 40

Raw Score 15 2 12 3 0 20

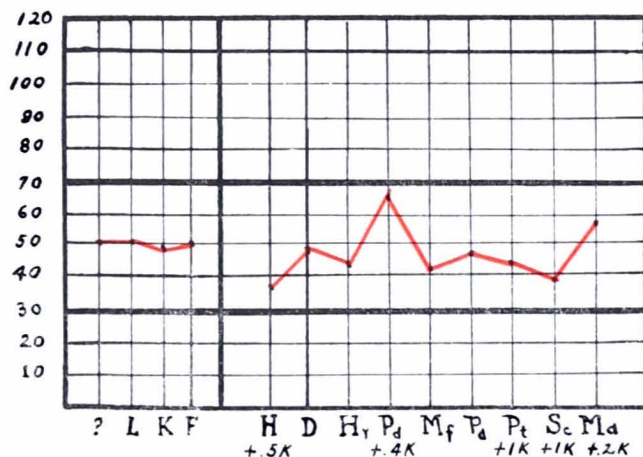
K to be added 6Raw Score with K 6

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 196

Name _____

Date _____

Number _____ Age 17 Sex M Educ. 8.4 I. Q. 83 X's 0 Race W M S D W Children 0Charge Burglary Sentence 2 yearsOccupation _____ MMPI ID

Standard													
(T) Score	<u>50</u>	<u>50</u>	<u>49</u>	<u>50</u>	<u>36</u>	<u>48</u>	<u>44</u>	<u>67</u>	<u>41</u>	<u>47</u>	<u>44</u>	<u>38</u>	<u>58</u>
Raw Score	<u>8K</u>	<u>2</u>	<u>12</u>	<u>2</u>	<u>0</u>	<u>16</u>	<u>13</u>	<u>21</u>	<u>16</u>	<u>7</u>	<u>8</u>	<u>4</u>	<u>18</u>
K to be added					<u>6</u>			<u>5</u>			<u>12</u>	<u>12</u>	<u>2</u>
Raw Score with K					<u>6</u>			<u>26</u>			<u>20</u>	<u>16</u>	<u>20</u>

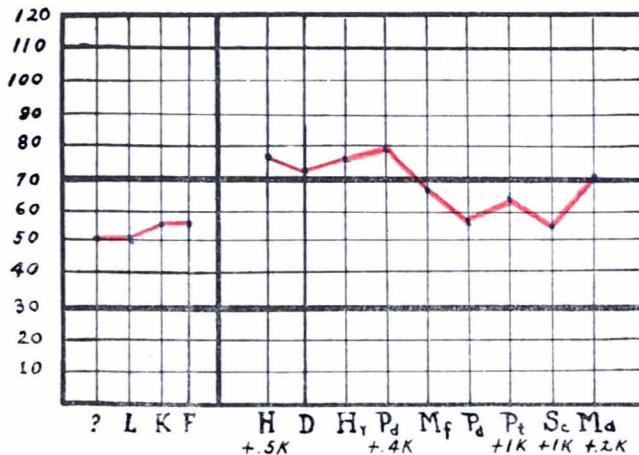
TYPE IIA PROFILES (Examples)

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 121

Name _____

Date _____

Number _____ Age 27 Sex M Educ. 11.0 I. Q. 119 X's 2 Race W M S D W Children 2Charge* _____ Sentence 5 yearsOccupation _____ MMPI IIA

*Attempted robbery by assault.

Standard (T) Score 50 50 55 55 77 72 75 79 67 56 44 55 20

Raw Score 48 52 55 55 27 22 25 29 10 15 10 22

K to be added 8 6 15 15 3

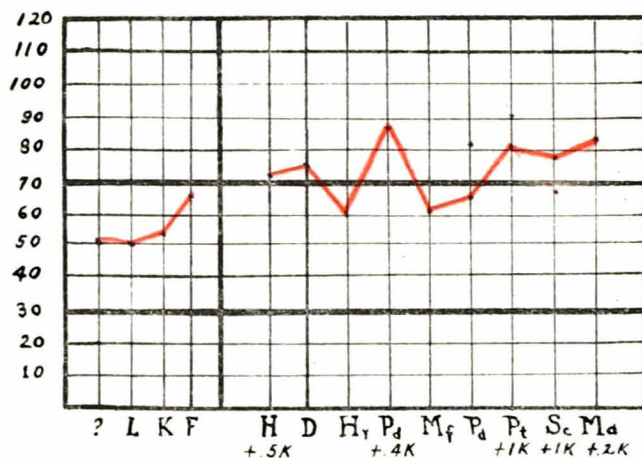
Raw Score with K 22 31 30 25 25

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 476

Name _____

Date _____

Number _____ Age 35 Sex M Educ. 3.3 I. Q. 55 X's 3 Race N M S D W Children 0Charge Burglary Sentence 5 yearsOccupation _____ MMPI II A

Standard

(T) Score 50 50 53 66 72 75 60 86 61 67 81 78 83Raw Score 25 4 14 10 13 27 22 28 26 14 24 23 27K to be added 7 6 14 14 3Raw Score with K 20 34 38 37 30

Card No.

Date

6 W Children

110
100
90
80
70
60
50
40
30
20
10

check.

TYPE IIB PROFILES (Examples)

Standard
(T) Score 40 45 50 55

Raw Score 1 2 3 4

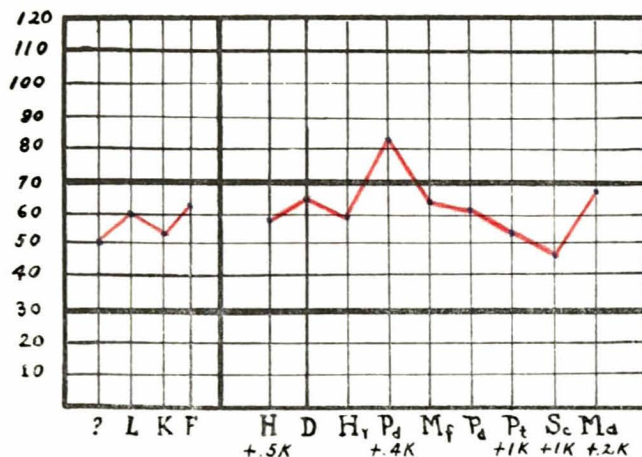
be added 2
with K 4

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 245

Name _____

Date _____

Number _____ Age 20 Sex M Educ. 9.2 I. Q. 106 X's 1 Race W M S D W Children 0Charge* _____ Sentence 2 yearsOccupation _____ MMPI IIB

*Swindle by check.

Standard
(T) Score 50 60 52 62 59 65 60 83 65 62 54 46 68

Raw Score 0K 7 14 8 8 23 22 27 28 12 11 6 21

K to be added 7 6 14 14 3

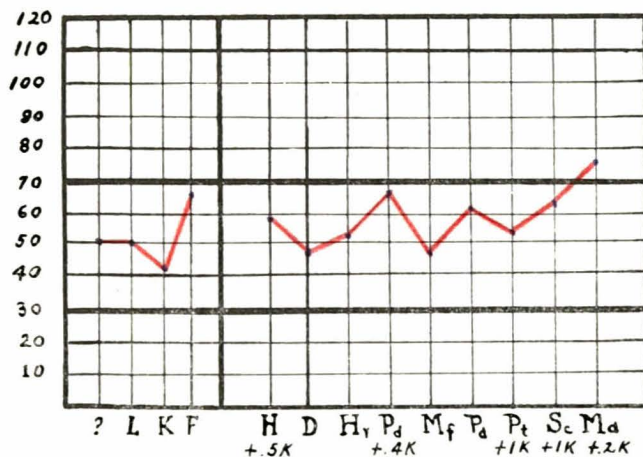
Raw Score with K 15 33 25 20 24

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 222

Name _____

Date _____

Number _____ Age 19 Sex M Educ. 5.2 I. Q. 79 X's 1 Race W M S D W Children 1Charge* _____ Sentence 2 yearsOccupation _____ MMPI II B

*T/O \$50; Forgery.

Standard

(T) Score 50 50 42 66 59 46 51 67 47 62 52 63 75Raw Score 14 3 8 10 11 15 17 23 19 12 16 21 25K to be added 4 3 8 8 2Raw Score with K 15 26 29 29 27

PERSONALITY

Card No.

Name _____

10-x

0

2

100
90
80
70
60
50
40
30
20
10

TYPE IIC PROFILE
(Example)

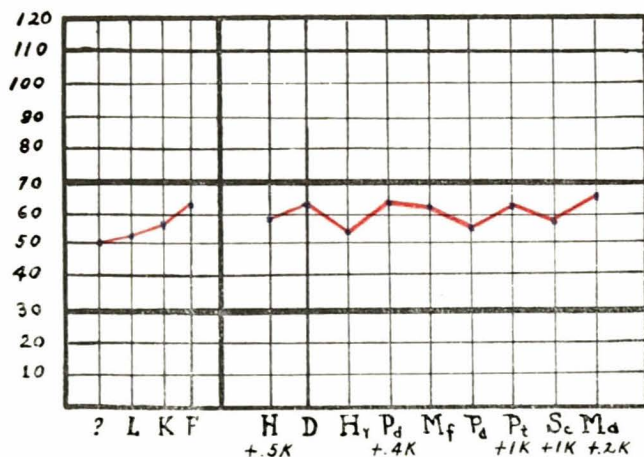
Standard
(T) Score 10 10 10 10 10 10
Raw Score 44 44 44 44 44 44
K to be added 2
Raw Score with K 46

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 112

Name _____

Date _____

Number _____ Age 20 Sex M Educ. 8.2 I. Q. 90 X's 0 Race MLX M S D W Children 0Charge Burglary Sentence 2 yearsOccupation _____ MMPI II CStandard
(T) Score50 53 57 62 59 63 53 64 63 56 62 57 65

Raw Score

05 5 16 8 7 22 18 19 27 10 13 18 20

K to be added

8616163

Raw Score with K

1525292623

Name _____

100
90
80
70
60
50
40
30
20
10

L

+50

TYPE IID PROFILE
(Example)

Standard
(T) Score 32 43 47 40
Raw Score 65 53 44 44

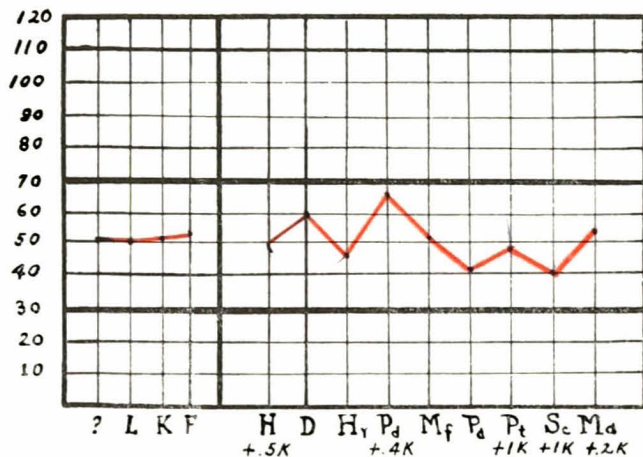
K to be added 7
Raw Score with K 41

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 164

Name _____

Date _____

Number _____ Age 27 Sex M Educ. 7.5 I. Q. 91 X's 1 Race W M S D W Children 0Charge Forgery Sentence 5 years
Occupation _____ MMPI II D

Standard

(T) Score	<u>50</u> <u>50</u> <u>51</u> <u>53</u>	<u>49</u> <u>60</u> <u>47</u> <u>67</u> <u>51</u> <u>41</u> <u>48</u> <u>40</u> <u>53</u>
Raw Score	<u>05</u> <u>3</u> <u>13</u> <u>4</u>	<u>4</u> <u>21</u> <u>15</u> <u>21</u> <u>21</u> <u>5</u> <u>9</u> <u>4</u> <u>15</u>
K to be added	<u>7</u>	<u>5</u> <u>13</u> <u>13</u> <u>3</u>
Raw Score with K	<u>11</u>	<u>26</u> <u>22</u> <u>17</u> <u>18</u>

Card No.

Name _____

80

70

60

50

TYPE IIE PROFILE
(Example)

Raw Score 2 2 1 1 1

K to be added 1

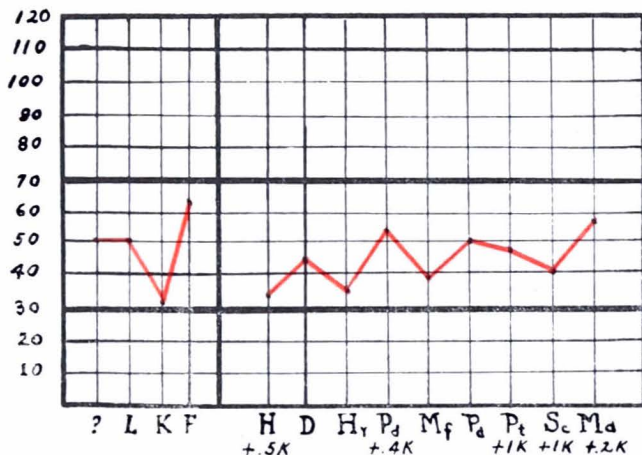
Raw Score with K 3

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 200

Name _____

Date _____

Number _____ Age 32 Sex M Educ. 6.7 I. Q. 90 X's 3 Race W M S D W Children 1Charge Forgery Sentence 2 yearsOccupation _____ MMPI II E

Standard

(T) Score 50 50 31 64 34 44 35 53 39 50 48 40 58Raw Score 50 50 31 64 34 44 35 53 39 50 48 40 58K to be added 1 1 2 2 0Raw Score with K 5 20 22 17 20

Card No.

Name _____

D W CAI

2

110
100
90
80
70
60
50
40
30
20
10

L

+ .5K

TYPE IIIA PROFILES (Examples)

Standard
(T) Score ~~48 42 37 33~~ ~~42 38~~
Raw Score ~~48 42 37 33~~ ~~42 38~~
K to be added 10
Raw Score with K 58 52 47 43

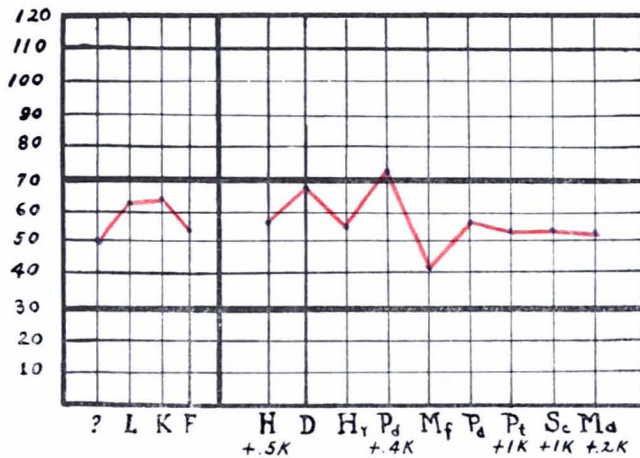
~~48 42~~
~~42 38~~
~~42 38~~
~~42 38~~

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 354

Name _____

Date _____

Number _____ Age 37 Sex M Educ. 5.3 I. Q. ? X's 0 Race W M S D W Children 5Charge Incest Sentence 2 years
Occupation _____ MMPI IIIa

Standard

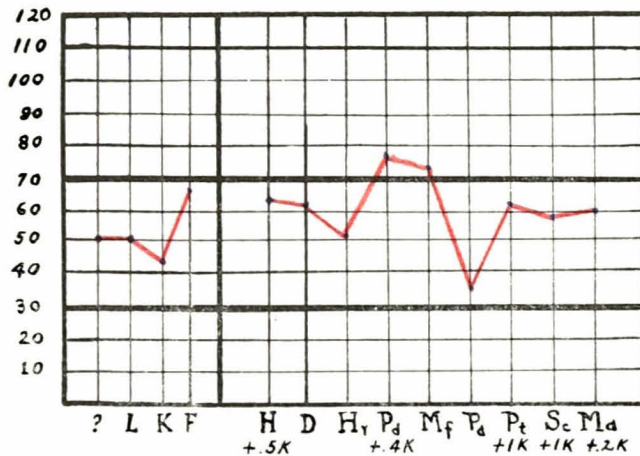
(T) Score 50 63 64 53 57 68 55 71 41 56 54 54 53Raw Score 0K 8 20 4 4 24 14 20 16 10 5 5 14K to be added 10 8 20 20 4Raw Score with K 14 28 25 25 18

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 154

Name _____

Date _____

Number _____ Age 49 Sex M Educ. 11.0 I. Q. 113 X's 3 Race W M S D W Children 2Charge T/O \$50 Sentence 4 yearsOccupation _____ MMPI IIIa

Standard													
(T) Score	<u>50</u>	<u>50</u>	<u>44</u>	<u>68</u>	<u>65</u>	<u>63</u>	<u>51</u>	<u>76</u>	<u>73</u>	<u>35</u>	<u>62</u>	<u>59</u>	<u>60</u>
Raw Score	<u>0K</u>	<u>2</u>	<u>9</u>	<u>11</u>	<u>12</u>	<u>22</u>	<u>17</u>	<u>26</u>	<u>32</u>	<u>3</u>	<u>20</u>	<u>18</u>	<u>19</u>
K to be added				<u>5</u>				<u>4</u>		<u>9</u>	<u>9</u>	<u>2</u>	
Raw Score with K				<u>17</u>				<u>30</u>		<u>29</u>	<u>27</u>	<u>21</u>	

MULTIPHASIC PERSONALITY

Card No.

Name _____

Date _____

Number _____ Age 34Q 92 R 2Children 0

1 para

100
90
80
70
60
50
40
30
20
10

?

+34

TYPE IIIB PROFILES
(Examples)

Raw Score 50 56 52 53 45 46
46 44 44 44 41 41

K to be added 6Raw Score with K 56 62 58 59 51 57

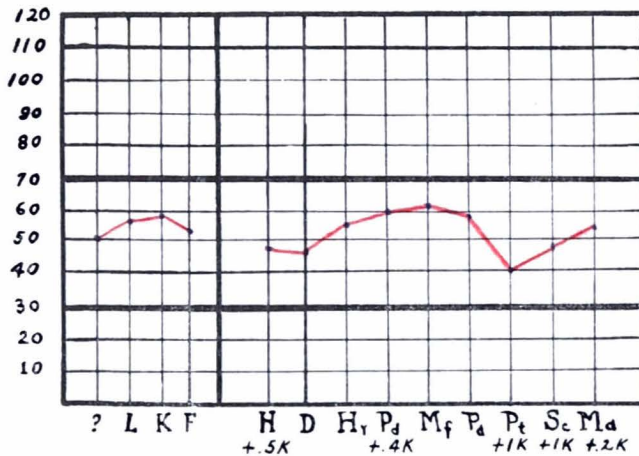
57 59 58
44 44 44 44
46 46 46
48 48 48

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 412

Name _____

Date _____

Number _____ Age 34 Sex M Educ. 7.6 I. Q. 92 X's 4 Race W M S D W Children 0Charge* _____ Sentence 15 yearsOccupation _____ MMPI IIIb*Burglary (3 charges)
Theft (2 charges)

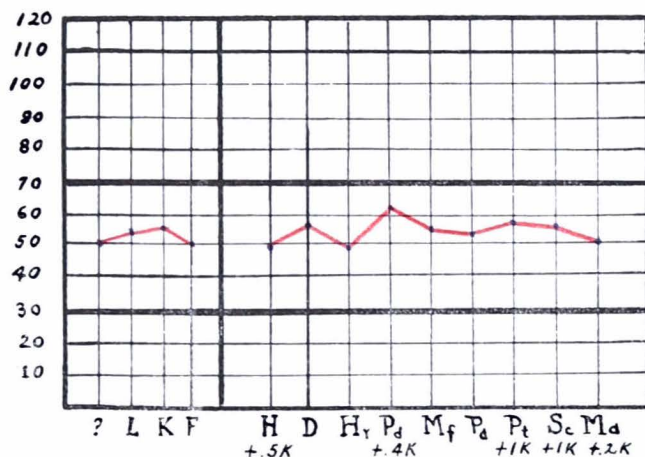
Standard													
(T) Score	<u>50</u>	<u>56</u>	<u>59</u>	<u>53</u>	<u>47</u>	<u>46</u>	<u>55</u>	<u>60</u>	<u>61</u>	<u>59</u>	<u>40</u>	<u>48</u>	<u>53</u>
Raw Score	<u>0K</u>	<u>6</u>	<u>12</u>	<u>5</u>	<u>4</u>	<u>15</u>	<u>19</u>	<u>18</u>	<u>26</u>	<u>11</u>	<u>6</u>	<u>9</u>	<u>16</u>
K to be added				<u>6</u>			<u>5</u>			<u>12</u>	<u>12</u>	<u>2</u>	
Raw Score with K				<u>10</u>			<u>23</u>			<u>18</u>	<u>21</u>	<u>18</u>	

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 361

Name _____

Date _____

Number _____ Age 19 Sex M Educ. 7.0 I. Q. 88 X's 1 Race W M S D W Children 0Charge Burglary Sentence 2 yearsOccupation _____ MMPI IIIb

Standard

(T) Score 50 53 55 50 49 56 49 62 53 53 58 57 50Raw Score 24 5 15 2 3 19 16 8 23 9 12 11 14K to be added 8 6 15 15 3Raw Score with K 1 24 27 26 17

Card No.

Name _____

80 - X

D W Children 0

70
60
50
40
30
20

F

+ .5X

TYPE IIIC PROFILE
(Example)

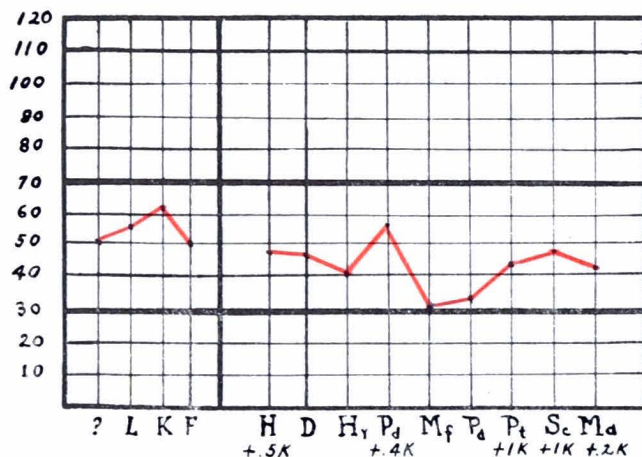
Standard
(T) Score 42 45 61 60 47 46
Raw Score 25 24 28 1 1 25 11
K to be added 9
Raw Score with K 10

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 135

Name _____

Date _____

Number _____ Age 20 Sex M Educ. 8.4 I. Q. 80 X's 0 Race W S D W Children 0Charge Burglary Sentence 2 years
Occupation _____ MMPI III C

Standard
(T) Score 50 56 61 50 47 46 40 57 30 33 44 48 43

Raw Score 28 56 18 1 1 15 11 15 10 2 2 3 10

K to be added 9 7 18 18 4

Raw Score with K 10 22 20 21 14

Card No.

Name _____

Date _____

D.V.

7

*Anschütz

70

60

30

20

TYPE IVA PROFILES (Examples)

Standard
(T) Score 50 43 34 26 22
Raw Score 24 14 11 11 11

K to be added 2

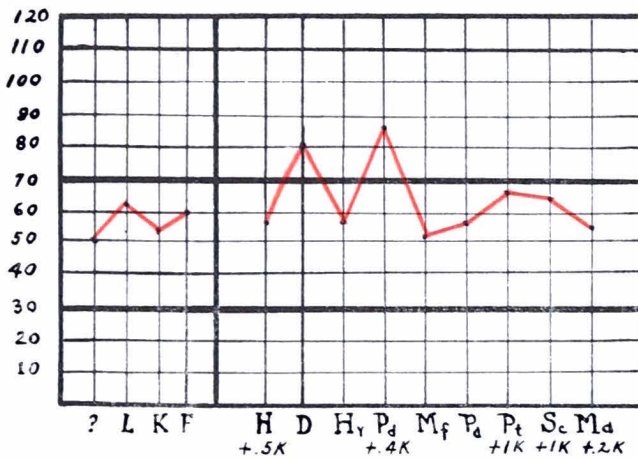
Raw Score with K 26 16 13 13 13

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 304----

Name-----

Date-----

Number-----Age 17 Sex M Educ. 9.5 I. Q. 86 X's 3 Race W M S D W Children 0-----Charge*-----Sentence 7 years-----Occupation-----MMPI IV 1-----

*Assault to Robbery.

Standard

(T) Score 50 63 53 60 57 80 58 86 51 56 66 65 55Raw Score 05 8 14 7 7 29 21 28 21 10 17 16 16K to be added 7 6 14 14 3Raw Score with K 14 34 31 30 19

MULTIPHASIC PERSONALITY INVENTORY

Card No. --

Name _____

Date _____

I. Q. 105 X's 2 Race W M S. H. W Children 1

120

110

100

90

80

70

60

50

40

30

20

10

2 ears

IV B

F L K F

+ 3K

M.

TYPE IVB PROFILE
(Example)

Standard

(T) Score

50 48 61 5049 40 6243 48 41 45

Raw Score

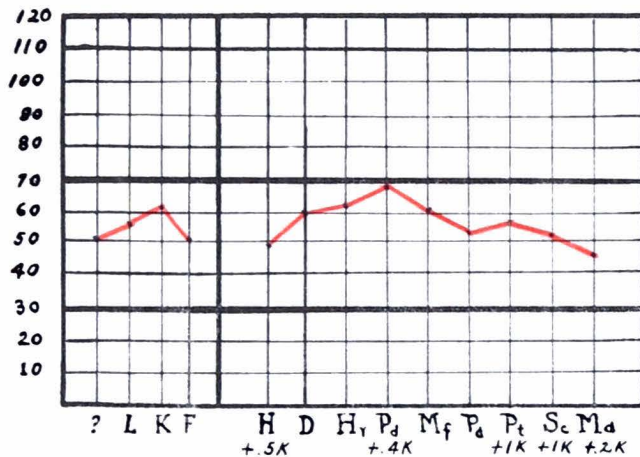
25 4 12 22 21 132 2 5 4K to be added 718 4Raw Score with K 112723 4

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 468

Name _____

Date _____

Number _____ Age 27 Sex M Educ. 7.9 I. Q. 105 X's 2 Race W M S D W Children 1Charge Forgery Sentence 2 years
Occupation _____ MMPI IV B

Standard

(T) Score 50 56 61 50 49 60 62 69 61 53 56 51 45Raw Score 0K 6 18 2 2 21 23 20 26 9 8 5 11K to be added 9 7 18 18 4Raw Score with K 11 27 26 23 15

Card No.

Name _____

Date _____

Children 0

5

90
80
70
60

*Hobby

alt.

20
10

TYPE IVC PROFILE (Example)

Standard
(7) Score 42 42 42 42 42 42 42
Raw Score 42 42 42 42 42 42 42

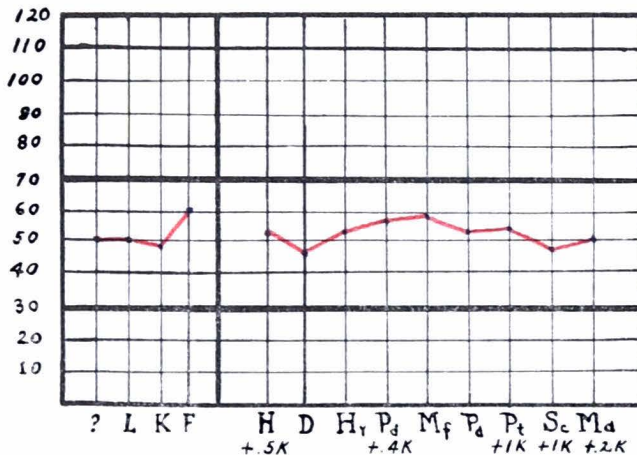
K to be added 2 2 2
Raw Score with K 44 44 44

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 338

Name _____

Date _____

Number _____ Age 28 Sex M Educ. 4.8 I. Q. 76 X's 0 Race W M S D W Children 0Charge* _____ Sentence 5 yearsOccupation _____ MMPI IV C

*Robbery by assault.

Standard
(T) Score 50 50 49 60 52 46 53 57 54 53 54 48 50

Raw Score 28 4 12 7 6 15 18 17 25 9 13 9 15

K to be added 6 5 12 12 2

Raw Score with K 12 22 25 21 17

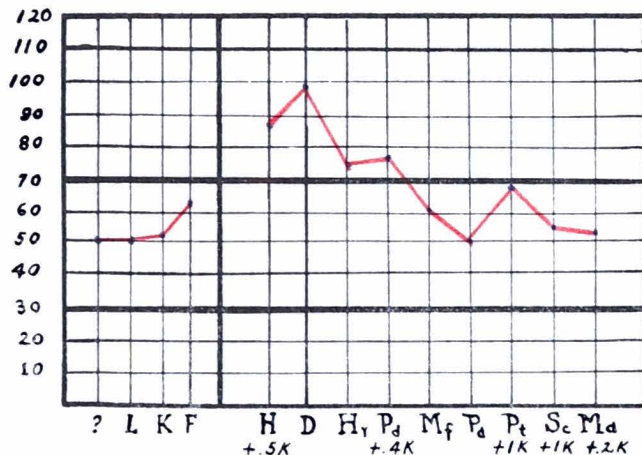
TYPE VA PROFILE
(Example)

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 210

Name _____

Date _____

Number _____ Age 47 Sex M Educ. 9.3 I. Q. 76 X's 2 Race N M S D W Children 3Charge Forgery Sentence 2 years
Occupation _____ MMPI VA

Standard
(T) Score 50 50 51 64 88 99 75 76 61 50 69 55 53

Raw Score 0K 0 13 9 19 31 36 25 26 8 19 12 15

K to be added 7 5 13 13 3

Raw Score with K 26 30 32 25 18

Card No.

Name _____

Date _____

D W Children 0

80

*Assault

Order

70

40

10

TYPE VB PROFILE
(Example)

Standard
(T) Score 50 50 50 50 50 50
Raw Score 25 25 25 25 25 25

K to be added 0

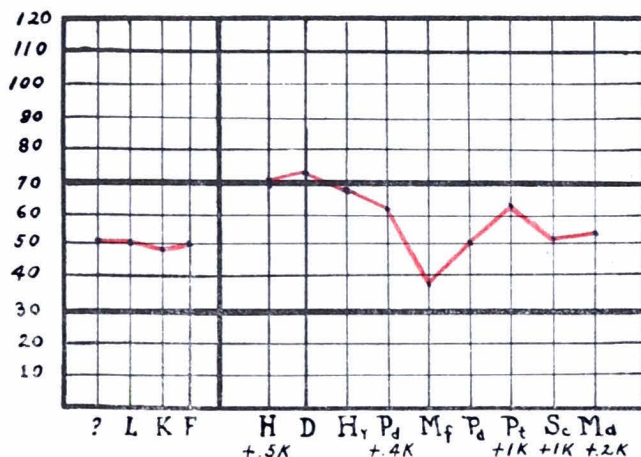
Raw Score with K 25

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 219

Name _____

Date _____

Number _____ Age 31 Sex M Educ. 7.0 I. Q. 93 X's 1 Race W S D W Children 0Charge* _____ Sentence 1 yearOccupation _____ MMPI VB

*Assault to murder

Standard
(T) Score 50 50 49 50 70 72 64 62 37 50 64 51 53

Raw Score 0K 4 12 3 3 26 27 19 14 8 18 11 10

K to be added 6 5 12 12 2

Raw Score with K 14 24 30 23 18

MULTIPHASIC PERSONALITY

Card No.

Date _____

U N Children 1

Charge FORGERY - Gen

V

110
100
90
80
70
60
50
40
30
20
10

K F

+3X

TYPE VC PROFILE
(Example)

Standard
(T) Score 52 50 52 53 47 49
Raw Score 15 14 12 4 13 14 14
K to be added 7
Raw Score with K 22 21

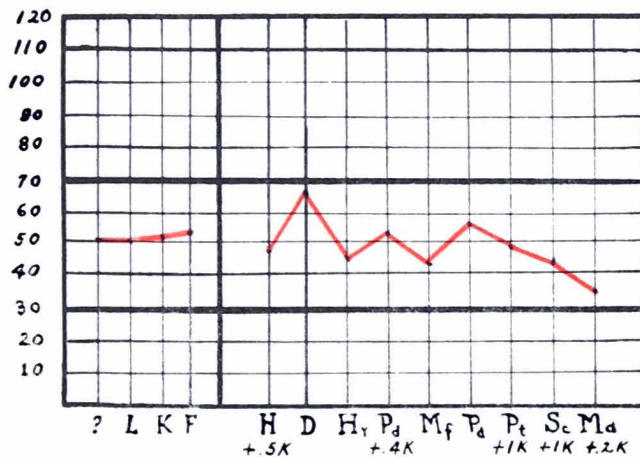
18 15 15
7 6 7
11 7
11

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 161

Name _____

Date _____

Number _____ Age 31 Sex M Educ. 10.0 I. Q. 90 X's 1 Race W M S D W Children 1Charge Forgery Sentence 2 years
Occupation _____ MMPI V C

Standard
(T) Score 50 50 51 53 47 68 45 53 43 56 48 44 35

Raw Score 0K 4 13 4 3 24 14 15 17 10 9 6 8

K to be added 7 5 13 13 3

Raw Score with K 10 20 22 19 11

PERSONALITY

Card No. 337

Number _____ Age 20 Sex _____

D V Children 0

110
100
90
80
70
60
50
40
30
20
10

L K

TYPE VIA PROFILE
(Example)

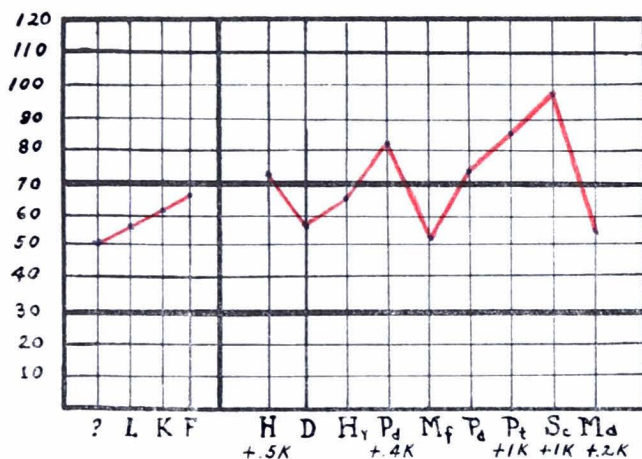
Standard
(T) Score 53 52 46 63 72 56 47
Raw Score 25 6 15 11 12 17 14
K to be added 9
Raw Score with K 34

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 337

Name _____

Date _____

Number _____ Age 20 Sex M Educ. 3.6 I. Q. 50 X's 1 Race W S D W Children 0Charge Theft Sentence 5 years
Occupation _____ MMPI VIA

Standard

(T) Score 50 56 61 68 72 56 67 8 53 73 85 97 55Raw Score 0K 6 18 11 11 19 26 25 22 16 22 29 15K to be added 9 7 18 18 4Raw Score with K 20 32 40 47 19

40

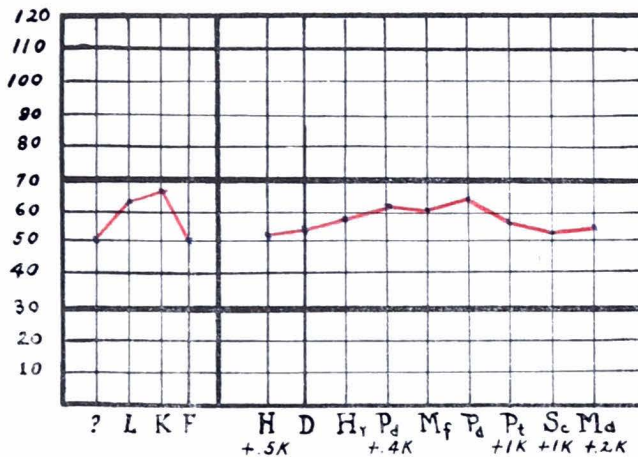
TYPE VII PROFILE
(Example)

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 364

Name _____

Date _____

Number _____ Age 54 Sex M Educ. 11.0 I. Q. 92 X's 0 Race W M S D W Children 2Charge* _____ Sentence 1 yearOccupation _____ MMPI VI B

*Driving intoxicated.

Standard
(T) Score 50 63 68 50 52 53 58 62 61 65 56 63 65

Raw Score 28 8 22 1 1 18 21 15 26 13 4 2 15

K to be added 11 9 22 22 4

Raw Score with K 12 24 26 24 19

PERSONALITY

C

20

30

40

50

TYPE VIIA PROFILE
(Example)

SCOTS

△△

be

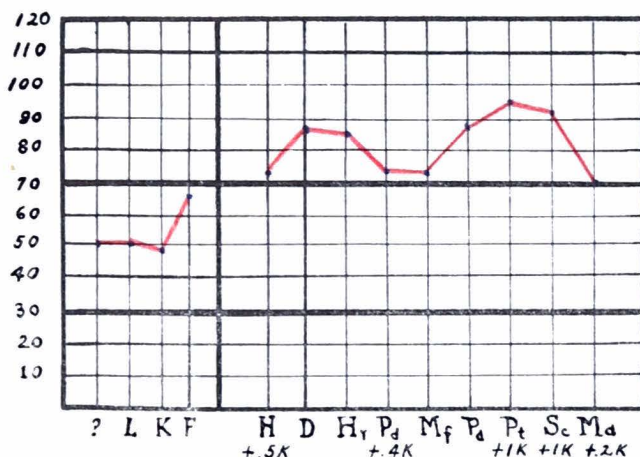
with 1

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 328

Name _____

Date _____

Number _____ Age 24 Sex M Educ. 8.2 I. Q. 103 X's 0 Race W M S D W Children 0Charge* _____ Sentence 5 yearsOccupation _____ MMPI VII A

*Embezzlement and forgery.

Standard

(T) Score 50 50 48 66 72 87 86 74 73 88 95 92 70Raw Score 05 2 12 10 14 32 36 24 32 21 33 32 23K to be added 6Raw Score with K 2052912451244225

Card

Name _____

Q 110 r

100

10

TYPE VIII PROFILE
(Example)

Standard
(T) Score

81 87

60

Raw Score

2

40 32

be added 4

Raw Score with K 26

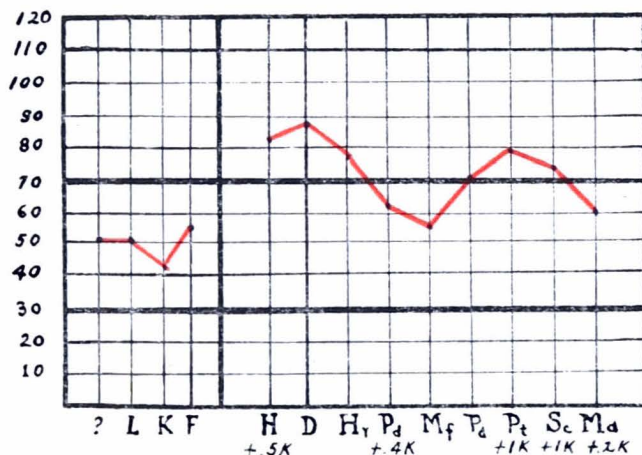
81 87 2
87 35 21

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 169

Name-----

Date-----

Number-----Age 38 Sex M Educ. 11.0 I. Q. 110 X's 2 Race W M S D W Children 1Charge Theft Sentence 2 yearsOccupation-----MMPI VII B

Standard
(T) Score 50 50 42 55 82 87 76 62 55 70 79 74 60

Raw Score 0K 0 8 5 20 32 31 21 23 15 29 27 19

K to be added 4 3 8 8 2

Raw Score with K 24 24 37 35 21

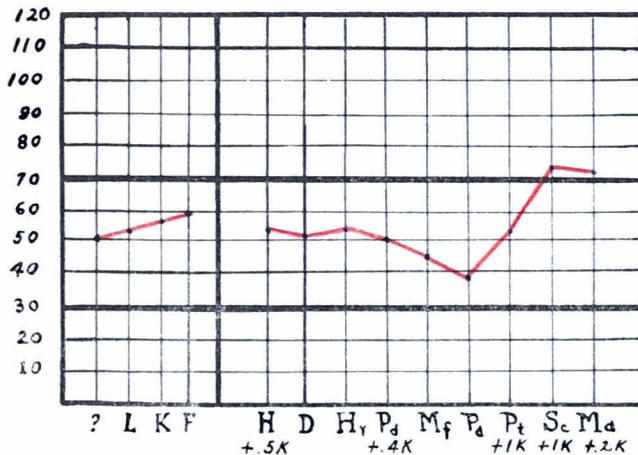
TYPE VIIC PROFILE
(Example)

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

Card No. 238

Name _____

Date _____

Number _____ Age 18 Sex M Educ. 8.1 I. Q. 112 X's 3 Race W M S D W Children 0Charge* _____ Sentence 7 yearsOccupation _____ MMPI VII C*Burglary (2 charges)
T/O \$50

Standard

(T) Score 50 53 57 60 54 51 53 50 45 38 54 74 73Raw Score 04 5 16 7 5 17 18 13 18 4 9 19 23K to be added 8 6 16 16 3Raw Score with K 13 19 25 35 26

S. L. W. Children 12

TYPE VIII PROFILE
(Example)

MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

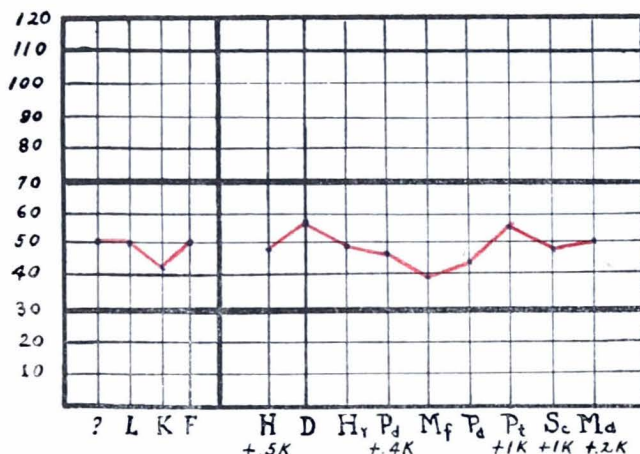
Card No. 288

Name _____

Date _____

Number _____ Age 24 Sex M Educ. 6.8 I. Q. 74 X's 0 Race Mex M S D W Children 2

Auto

Charge theft Sentence 2 yearsOccupation _____ MMPI VII D

Standard

(T) Score 50 50 42 50 47 56 47 40 39 44 56 48 50Raw Score 1K 3 8 3 6 19 16 14 15 6 8 13 15K to be added 4 3 8 8 2Raw Score with K 10 7 26 22 17

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