

1968

Personality Profiles of a Group of Adult Public Aid Recipients Measured by the Minnesota Multiphasic Personality Inventory

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This research is a product of the graduate program in [Educational Psychology and Guidance](#) at Eastern Illinois University. [Find out more](#) about the program.

Recommended Citation

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**PERSONALITY PROFILES OF A GROUP OF ADULT
PUBLIC AID RECIPIENTS MEASURED BY THE
MINNESOTA MULTIPHASIC PERSONALITY INVENTORY**

(TITLE)

BY

Myra Edman

THESIS

SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
FOR THE DEGREE OF

Master of Science in Education Degree

IN THE GRADUATE SCHOOL, EASTERN ILLINOIS UNIVERSITY
CHARLESTON, ILLINOIS

1968

YEAR

I HEREBY RECOMMEND THIS THESIS BE ACCEPTED AS FULFILLING
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ACKNOWLEDGMENTS

The writer wishes to acknowledge her indebtedness to Mr. Ian Wickramasekera, psychologist at the Mattoon Area Educational Extension Center for his interpretations, in depth, of the results of the Minnesota Multiphasic Personality Inventory, without whose insight this project could not have been attempted; to Dr. Donald Moler for giving direction to this paper; to Mr. Eli Sidwell for sharing his experiences as area director of O.E.O.; to Mrs. Earl Goodman for access to her personal library; to the counselor, secretary, and teachers at the Mattoon Area Educational Extension Center for their help in evaluating the students; and to my family for relieving me of onerous household duties while writing this thesis.

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INTRODUCTION

This study was undertaken because the writer has been engaged for two years in the Anti-Poverty Program, as a teacher in a school designed to prepare public aid recipients to pass the General Educational Development Test, acquiring a diploma equivalent to a high school diploma, and to receive job training. Because it is an area of much concern to the writer, and because it is a project of national scope, the writer felt that the study of the personality disturbances of these welfare students might be a contribution to the solution of their problem. Many studies have been made about the relation of personality to employment (Brewer in 1930, Hunt in 1936, and Gulon in 1967). The consensus is that the two are related. In the book, Men in a World of Work, edited by Borow, seven vocational theories are listed, five of which emphasize personality variables in the form of self concept or life style. In Occupational Information, by Hoppeck, of fourteen theories of vocational development nine stress personality variables.

The Minnesota Multiphasic Personality Inventory was chosen because, of all the testing instruments used, it seemed to be the most suited to detecting personality abnormalities. Super, in his book Appraising Vocational Fitness, calls the M.M.P.I. "the most sophisticated approach to the assessment of personality and adjustment now available." The 5th Mental Measurement Yearbook calls the M.M.P.I. "the most carefully constructed and thoroughly

researched inventory available for personality assessment."

By discovering the personality problems of these recipients, through the use of the M.M.P.I., the writer hoped to open the way for therapy, for self-fulfillment, and for employment for those persons tested.

As a background study of these recipients, the writer read over a dozen books about poverty. She also read several books on the M.M.P.I. Most of these books are listed in the bibliography. The psychologist discussed, at length, the areas tested by the M.M.P.I., the procedure for graphing a profile and the dangers in interpreting any one elevated score alone. He emphasized the fact that it is the whole configuration that counts.

Twenty-eight cases were available. Nine were invalid because of a high F score (unreliable answers). It was decided to limit the study to women, because the scoring is different in some instances between men and women.

The mean, median, and mode were then calculated, as was the standard deviation, for the ten areas measured. These were later discarded, because of the small number of cases. Bar graphs were made to show areas of high elevation.

The writer then coded the profiles. This consisted of writing the numbers (representing the different traits), of those elevations above 54 or below 46, using the T score of 50 as a comparison, and allowing 4 points leeway for flexibility.

The writer then took the codes to the University of Illinois and matched them with codes in The M.M.P.I. Handbook, A Guide to Use in Clinical Practice and Research by Grant Dahlstrom and George Welsh, and with codes in An Atlas for the Clinical Use of M.M.P.I., by Clarke Hathaway and Paul Meehl. It is not possible to match every code exactly, in which case a similar code is used.

The authors of the M.M.P.I. urge that the results of the test be substantiated by supporting evidence. These women who were tested had been observed in the classroom for many months by the writer and other teachers, all of whom had made quarterly written reports evaluating the personality and emotional problems of the students. It was felt that the teachers' observations would be of value, and not influenced by the results of the M.M.P.I. which the writer had seen only at the start of the project, and the other teachers, not at all. An adjective check list was presented to the teachers, as a basis for describing the people in the project.

Little attempt was made to discover why the results of the M.M.P.I. and the observation of the teachers about the characteristics of these people seem, on a superficial analysis, to be at variance. The writer has submitted a brief explanation of her own opinion, based on her knowledge of the change in students' personalities, from the general initial hostility, to a warm and appreciative attitude, by and large. This is not to be accepted as scientific or conclusive evidence.

It was thought that, to give the whole picture, the setting for the project should include a description of the school, its relation to the

national anti-poverty program, and the purpose and philosophy of the overall program. Information about the national, state, and local war on poverty program was obtained from a former head of the Office of Economic Opportunity, in this area.

Several areas of personal information were presented: the students' participation in the program, the students' background, their ages, their marital status, the sizes of their families, their roles as parents and their educational backgrounds. All this seemed pertinent to the thesis and were furnished by the co-ordinator of public welfare and academic areas.

It was obvious, at the end of the project, that there was a need for further research and norms. Several suggestions were formulated for further research.

As a result of the research in preparing this thesis, the writer believes that the area of testing could have tremendous impact in alleviating the problems of the poor by better understanding of their emotional problems leading, hopefully, to treatment of their problems by well-trained people, lessening the paralyzing effect of emotional disturbance, leaving the people freer to learn and to master skills and solve their own problems.

CHAPTER I. MATTOON AREA EDUCATIONAL EXTENSION CENTER

"The young man or woman who grows up without a decent education, in a broken home, in a hostile and squalid environment, in ill health, or in the face of racial injustice, that young man or woman is often trapped in a life of poverty. He faces a mounting sense of despair which drains initiative and ambition and energy."

"Because it is right, because it is wise, and, because, for the first time in history, it is possible to conquer poverty, I submit, for the consideration of the Congress and the country, the Economic Opportunity Act of 1964." So said President Lyndon Johnson, in presenting the proposal for the legislation under which the Mattoon Area Educational Center functions.

The general purpose of the act is stated as follows:

"Although the economic well-being and prosperity of the United States have progressed to a level surpassing any achieved in world history, and although these benefits are widely shared through-out the nation, poverty continues to be the lot of a substantial number of our people. The United States can achieve its full economic and social potential as a nation only if every individual has the opportunity to contribute to the full extent of his capabilities and to participate in the workings of our society. It is therefore the policy of the United States to eliminate the paradox of poverty in the midst of plenty in this nation by opening to everyone the opportunity to live in decency and dignity. It is the purpose of this Act to strengthen, supplement, and coordinate efforts in furtherance of that policy."

Mattoon Area Educational Center was one of the first schools of its kind in Illinois and Illinois was the first state to take advantage of the educational opportunities under the new law. It is supported by federal and state taxes. The academic and skill training is under the supervision of the local school board and the financial needs of the public aid recipients attending the school are under the supervision of the Department of Public Aid.

The school opened its door June 7, 1965. Students attend academic classes for half a day, job training classes for half a day. The academic area prepares them to pass a test entitling them to a General Education Development Diploma, equivalent to a high school diploma. The skill areas are: Power Sewing (for factory work), Nurse's Aides, Homemaking, Check-Out (for supermarkets), Shop (maintenance work), and Business Education (shorthand, typing, bookkeeping, and business machines).

Eight counties are included in the program: Coles, Edgar, Douglas, Moultrie, Shelby, Clark, Effingham and Cumberland. The students are transported by bus. The preschool children, whose parents attend the school, are cared for in a nursery and kindergarten. All public aid recipients in good health are required to attend.

Anyone not on public aid may attend for a small tuition. Night school is also held, especially for the tuition students.

From its first day in session, June 7, 1965, to May 26, 1967, Mattoon Area Educational Center has served 409 students, 305 of whom have been public aid recipients, the rest (104) have paid tuition.

To date, 49 persons have received a G.E.D. diploma, and 78 have been placed in jobs. Of these going to work, 69% have remained on the job.

The ages of the students have ranged from 15 to 58, those under 18 being there by special permission. The average age is 31. The ratio of women to men is about 6:1.

In the group of seventeen women discussed in this paper, two are married, one is single, one is a widow, ten are divorced, three are separated from their husbands. Almost all of those divorced or separated from their husbands were deserted.

The number of grades completed in public schools ranges from one to twelve, with an average of eight.

The number of children in the family ranges from none, to eight, with an average of four.

The rate of learning differs greatly, from one who got his diploma in six weeks, to some who started when the school opened two years ago, and are still in the same level of learning.

Information gleaned from themes, conversations with teachers and counselors, and from panel and group discussions, reveals that the leading reasons for these women dropping out of public school were: a sense of frustration, lack of identity, a feeling of not belonging, and a sense of being rejected because of poverty. Other reasons were: to help support the family, to get married (by choice or necessity), to get away from home, ill health, and inability to learn.

CHAPTER II. MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

The Minnesota Multiphasic Personality Inventory is the most intensively and extensively researched personality test in existence.¹ The utility of the test in clinical practice does not depend on the original presupposition and assumption of its authors but primarily on the vast body of empirical research that has accumulated around the test since 1940, the bulk of which unfortunately seems unknown to current critics of the test (i.e., Albert Ellis' reviews of the M.M.P.I. in the Handbook of Mental Measurements).

Dr. Ellis claims that a competent psychologist can do a better personal evaluation than the M.M.P.I. This statement shows a lack of familiarity with the growing body of experimental research indicating that actuarial predictions are superior to clinical predictions.

"The M.M.P.I. was originally constructed by a psychologist, Starke Hathaway, and a psychiatrist, J. C. McKinley. A collection of 550 items was prepared by borrowing from older inventories and rephrasing diagnostic cues used by psychiatrists."²

"Results of differential diagnosis with questionnaires other than M.M.P.I. have in general been unencouraging, and in recent years the

¹ Meehl, Seaman and Marks, The Actuarial Description of Abnormal Personality, Minnesota Press, 1963.

² Lee Cronbach, Essentials of Psychological Testing, University of Illinois, 1960, p. 470.

M.M.P.I. has displaced all competing questionnaires for this purpose."³

"The M.M.P.I. is very widely used and many clinicians have a considerable body of objective and subjective information about the meaning of profiles which is an invaluable source of indications to be checked by one means or another. There is also extensive literature on the instrument which again provides very frequent suggestions for information or further research."⁴

"The M.M.P.I. holds a place among personality questionnaires comparable to that of the Strong among interest measures. It was constructed in a similar empirical manner and was subjected to exceptionally thorough research by its authors. It appeared at an opportune time, and great reliance was placed upon it during the rapid wartime and postwar expansion of clinical psychology. It contributed to and benefited from the postwar expansion of clinical research, and as a result has been studied more adequately than any other personality test. There are 689 titles included in a bibliography covering M.M.P.I. research through 1954."⁵

The M.M.P.I. was devised with meticulous care in representing all segments of the normal population in its sampling. Over seven hundred test subjects were used, chosen from persons accompanying or visiting relatives and friends at the University of Minnesota Hospital. Most of

³ Ibid., p. 485.

⁴ Hathaway and Monachesi, Analyzing and Predicting Juvenile Delinquency with the M.M.P.I., University of Minnesota Press, 1953, p. 6.

⁵ Cronbach, loc. cit., p. 470.

these were married. Then 265 subjects were used, including 152 single men, between the ages of 16-25, high school graduates (most of them contemplating college) and some university students. Another group included 265 workers in WPA projects (a large proportion white collar) to represent an urban, diverse socio-economic level and a range in ages. Added to this was a group of 254 persons with physical disorders.

To study the difference in reaction to 550 items, answers from the normal population were compared to the answers from diagnosed mentally ill and emotionally disturbed patients in hospitals.

The uniqueness and strength of the M.M.P.I. is that the questions are subtle rather than obvious, and the intent so veiled that even an expert sometimes is in doubt as to what is being tested. Also the questions are put into heterogeneously grouped parts so that the area of testing is not in evidence.

The M.M.P.I. consists of four control keys and ten clinical scales. The person tested has three choices - "true", "false" and "cannot say." If a person answers "cannot say" too many times, his personality cannot be evaluated and the test is invalid. This key is marked "?."

The "L" key, for lying, is evaluated on improbable answers, such as a "false" to the question, "I sometimes put things off." This characteristic behavior is so universally true that any other answer is called, "faking good." If not actually lying, the answers are at least untrustworthy. Many sophisticated people anticipate the answers that will put them in a complimentary light.

TABLE 1
AREAS TESTED BY
MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

	? - "cannot say"
	L - "faking good" (defensiveness, sophisticated insight)
For Validity	F - "faking bad" (random guessing, inability to read, cry for help, psychosis)
	K - "equalizing scores for candor and guardedness"
	1 (Hs) - hypochondriasis
"Neurotic Triad" (3)	2 (D) - depression
	3 (Hy) - hysteria
Character-ological Skills (3)	4 (Pd) - psychopathic deviate
	5 (Mf) - masculine-feminine
	6 (Pa) - paranoia
	7 (Pt) - psychasthenia
Psychotic Tetrad (4)	8 (Sc) - schizophrenia
	9 (Ma) - mania
	0 (Si) - social introversion

The "F" key means false answers, usually putting the testee in a bad light. It is a result of random guessing, inability to read, psychosis with distorted sense of reality or exaggeration to indicate a cry for help.

The "K" key is most important. It is an intricate device to equalize what is known as "plus getting." It is the response of normal people who are extremely candid, or are self-deprecating. These people often score higher than defensive and guarded neurotics or psychopaths.⁶

Hs, D, and Hy are called the "neurotic triad" for obvious reasons. Pd, Mi, and Si are called characterological skills because they are part of the make-up of the character (or lack of it). Ps, Pt, Sc, and Ma are called the psychotic tetrad.⁷

In the "normal" or control groups, so called because they are not under a doctor's care or have not been emotionally disturbed enough to have had psychiatric treatment, there are, of course, many who deviate from the norm in some area. In those areas they may even be less normal than diagnosed mental patients. In the main, however, significant separation occurs to divide the two groups.⁸

Hs, Scale 1, measures the extent to which psychologically based illness manifests itself in physical symptoms, and the disease is said to be

⁶ Drake and Getting, M.M.P.I. Codebook for Counselors, Minnesota Press, 1958.

⁷ Ibid.

⁸ Welsh and Dahlstrom, Basic Readings on the M.M.P.I., University of Minnesota, 1956, p. 71.

psychosomatic. The presence of physical disorders does not greatly raise the scores in normal distribution.⁹

D, Scale 2, is a difficult symptom to test, because the mood of the person often varies from day to day (such as in a cycloid personality) and the score depends upon which phase you hit on the testing day. Other reasons for depression are: poor morale, lack of hope in the future, or dissatisfaction with one's status. It may result from economic or vocational frustration, or from personal problems. It is expected that a person with serious problems will have a higher score, and in a sense it is suspicious if someone who has a serious problem, does not have a high score.¹⁰

Hy, Scale 3, detects conversion symptoms, such as aphonia (loss of voice for psychic causes), occupational cramp, or neurologically irrational anesthetic (loss of feeling for pain or touch). In some cases there remains a doubt as to whether there is a true organic illness, such as multiple sclerosis, present or whether the syndrome reflects hypochondriasis or an early schizophrenic reaction. Persons who have high scores on Scale 3 defend the psychological elaborations against recognition of their neurotic character, by himself or others. They are likely to avoid or run from crises. When pushed too far, they develop physical or psychological illness as a solution. Allergy and heart trouble are often the result.¹¹

⁹ Ibid., p. 73.

¹⁰ Hathaway and Monachesi, loc. cit., p. 17.

¹¹ Ibid.

Pd, Scale 4, tests for the psychopathic deviate, who is amoral, shallow emotionally, high in initiative, insensitive to the feelings of others, socially active, aggressive, rigid, arrogant, hostile, cynical, self-centered, lacking in self-control, unreliable, lacking in respect for the rights of others, lacking in social conformity, rebellious, tending to express hostility directly, and unable to profit from experience. This scale, combined with 9, is the code prevalent in juvenile delinquency. A certain allowance is made for the fact that many of the characteristics go with youth.¹²

Many of the characteristics of the psychopathic deviate could be assets: self-confidence, sociability, verbal skills, enthusiasm, wide range of interests. However, when coupled with amorality, these traits are dangerous. People thus characterized exploit others, using them as tools. When coupled with Scale 9 (hypomania) they "act out" their impulses and crime often results. They are little affected by remorse, nor changed by censure or punishment.¹³

These psychological deviates usually come from families characterized by familial discord and conflict between father and mother with authority conflicts, from which they often carry out their rebellion against authority into society. These people, who lack social anxiety, are bland, and unable to maintain harmonious relation over an extended period of time. They deny dependency needs though it is a lie.¹⁴

¹²Welsh and Dahlstrom, loc. cit.,

¹³Journal of Personnel and Guidance, Feb., 1966, pp. 631-637.

¹⁴Welsh and Dahlstrom, loc. cit.

The Mf, Scale 5, tests masculinity or femininity of interests. In men, a high score shows interests generally associated in our culture with traditionally feminine interests. It is significant to note that those interested in the arts, those more educated and intelligent, score higher on the Mf than those people of opposite interests. Women who score high are more interested in the traditionally masculine pursuits. They tend to be aggressive, rough, unemotional and suffer from role conflict. College women score higher than those of less education. Men scoring low are those excessively preoccupied with their masculinity as aggressive behavior. The "leather jacket" boys score low in this area, usually. A low score for women indicates a passive, submissive, feminine, sensitive behavior. The scale was originally designed to test for homosexuality but it has to be read with great care, to diagnose this quality.¹⁵

Pa, Scale 6, measures undue sensitivity in interpersonal contacts. Those under close social control (such as someone on probation) are liable to have a high score. At the extreme are the paranoid feelings of being threatened or persecuted. They have grandiose concepts of self. Milder symptoms are suspiciousness and rigidity of opinions.¹⁶

Pt, Scale 7, searches for persons characterized by excessive doubt, by compulsions, obsessions, unreasonable fears (such as, for spiders, snakes, storms, etc.). Such persons may be obsessed by certain thoughts that keep occurring, or by constant feelings of impending disaster.¹⁷

¹⁵Ibid.

¹⁶Ibid.

¹⁷Ibid.

Sc, Scale 8, tests for distortions of reality. Those with elevated scores on this scale perceive the world differently and often act in unusual and bizarre ways. At the extreme it indicates mental disorder. In boys the high 8 score goes with truancy, running away from home, etc. Developing into schizophrenia, it may take the form of catatonic, paranoid or simple hebephrenic.¹⁸

Ma, Scale 9, called hypomania, is a mild degree of manic excitement. This quality is characterized by unstable moods although it may not be noticeable. It may take the form of being overly talkative, energetic, enthusiastic but misdirected or easily dissipated energy swinging to depression, with depression predominating. These people are often self-centered, lack an appreciation of the inappropriateness of their behavior in certain settings, with little regard for others. Sometimes, between attacks, they appear normal. In young people this excess energy makes them restless and they hunt for excitement which frequently gets them in trouble.¹⁹

St, Scale 0, was not included in the original test, but has since been added. This test measures how outgoing or how introverted one is. Those oriented to others join clubs and form social connections. Those feeling socially insecure, shy, and easily embarrassed rate high on this test.

¹⁸ Hathaway and Monachesi, An Atlas of Juvenile M.M.P.I. Profiles, University of Minnesota Press, 1961.

¹⁹ Ibid.

²⁰ Ibid.

TABLE II

CODED PROFILES OF SEVENTEEN WOMEN
AT MATTOON AREA EDUCATIONAL EXTENSION CENTER

<u>Student Number</u>	<u>Codes of Elevated Scores with Scale 4 Highest</u>	<u>Validity Scores</u>
(#16)	'423-1"9	(7, 1, 18)
(#15)	4'2367	(13, 3, 24)
(#11)	4'5369-1'''270	(3, 3, 11)
(#12)	'459-1	(4, 1, 14)
(#22)	470"286391-5	(3, 5, 10)
(#26)	'486790-3	(0, 7, 12)
(#17)	'493-1"0'	(7, 1, 18)
<u>Codes with Scale 4 Elevated in First Four Places</u>		
(#10)	3'46128-5	(3, 5, 13)
(#29)	'5406823-91	(4, 6, 14)
(#24)	7624'803	(6, 8, 11)
(#28)	72'346180-5"	(4, 5, 15)
<u>Codes Not in Above Categories</u>		
(#20)	0'17893	(3, 5, 10)
(#13)	'052-6	(4, 0, 8)
(#18)	09-1'65	(3, 4, 11)
(#19)	'072-6'9	(6, 4, 16)
(#14)	12'3506478-9'	(11, 6, 17)
(#23)	7821"06'349	(2, 10, 7)

-
- = Division between elevated and depressed score.
 - ' = Scales to the left of prime indicate about 70 T score or below 30.
 - " = Scales to the left indicate above 80 T score or below 20.
 - ''' = Scales to the left indicate above 90 T score or below 10.
 - ' = Scales within one point of one another.
 - () = L, F, and K scores.

There are three basic principles of interpretation: never interpret scales in isolation, use configuration analysis, and whenever possible, check empirical research.

This service of interpreting the scales in relation to one another, has been provided by specialists in this field -- in atlases and handbooks by Hathaway and Meehl, Drake and Oetting, Dahlstrom and Welsh, and Hathaway and Monachest.^{21, 22, 23, 24.} The codes of the seventeen women in this research were matched to similar ones in those books, and recorded.

The codes contain the number of all scales elevated above 54, or depressed under 46, to make the norm flexible. Those elevated the highest, are first in the scale, then in descending order of elevation. Scales above 70 are indicated by one prime ('), above 80, by two primes (") and above 90 with ("). Two scales within one number of each other are underlined. A dash indicates the end of the elevated scales. Next, scales below 46 are recorded, beginning with the lowest, and then in ascending order. Below 30 is followed by one prime, below 20 with two, and below 10 with three primes. Scales within one point of one another are underlined.

²¹Starke Hathaway and Paul Meehl, An Atlas for the Clinical Use of M.M.P.I., University of Minnesota Press, Minneapolis, 1951.

²²L. E. Drake and E. R. Oetting, M.M.P.I., Code Book for Counselors, University of Minnesota Press, Minneapolis, 1959.

²³Grant Dahlstrom and George Welsh, M.M.P.I., Handbook, a Guide to Use in Clinical Practice and Research, Univ. of Minn. Press, 1960.

²⁴Starke Hathaway and Elio Monachest, Analyzing and Predicting Juvenile Delinquency with the M.M.P.I., Univ. of Minn. Press, 1953.

In parenthesis at the end of the code, the scores on L, F, and K are recorded.

Special significance is attached to certain combinations of scales such as 49, 46, 123, 78, and 13. The interpretation is included in the personality explanation.

An interesting observation noted at an institution for women was that, of the group making a successful rehabilitation and adjustment to society, the configuration with 8 as the highest peak did not occur a single time. Of the group failing to make a successful adjustment, 8 was the highest peak in half of the cases.²⁵

In this project at MAEEC, because of the prevalences of codes featuring Scale 4 (Pd), either as the highest elevation or one of the four highest, and because of its significance in deviate behavior, the codes are arranged in the following order in this thesis: first, codes with Scale 4 as the highest elevation; second, importance of Scale 4 in descending order; third, other codes not containing Scale 4, in ascending numerical order.

Because Scale 0 (Si) was not devised at the time the atlases were written, and because Scale 5 (Mf) is seldom among the peaks of highest elevation, it is difficult to get a comprehensive interpretation of codes containing one or both.

²⁵Welsh and Dahlstrom, loc. cit.

CHAPTER III RESULTS OF THE STUDY

The elevation of Scale 4 (psychopathic deviate) occurred more often in the personality pattern of these seventeen women than any other elevation. In the seventeen profiles it is the highest elevation in seven cases and occurs in the four highest elevations four other times, making it a prominent part of eleven of the profiles. The highest scales next in frequency are Scales 7 and 0 (psychasthenia and social introversion). Scale 7 occurs three times as the highest point, and twice more among the highest four. Scale 0 occurs three times as the highest elevation and twice more within the four highest points.

As a mean, Scale 2 (depression) was the second highest elevation in any individual profile.

Dr. A. G. Cassorio, one of the foremost authorities on the M.M.P.I., in a series of lectures to psychologists at Washington University in St.

Louis said about Scale 4 (Pd):

"On a systematic level, my interpretive hypotheses are that scores on this scale have relevance to the nature of the identification process, the handling of guilt, and the handling of ambivalences in interpersonal relationships.

If you examine the characteristics of the items which go into this scale, as Harris did in developing the subscales, you find that they tend to cluster around these interpersonal problems: First: Familial Discord. The subject's perception of his early family life is one characterized by discord and conflict. Running through

these perceptions is a characterization of his own role within the family, which is one of chronic struggle against familial control. In terms of my hypotheses above, this would reflect the basic problem of difficulties in identification with parental figures which take many forms, i.e., development of an 'ambivalent or inconsistent superego,' etc.

When the derivatives of the identification problem are kept within the family, so to speak, you are likely to have a person who internalizes the conflict in some way, while attempting to meet social expectations. That is to say, when a Pd elevation involves primarily familial discord items, rather than authority items, you are much more likely to have a person who is responding to identification conflicts through some type of internalizing process. You would expect this type of elevation to be associated with neurotic, psychosomatic, or schizoid symptomatology, rather than with acting out psychopathy or overt-psychosis. The generalization of patterns of familial conflict through the development of behavior patterns which define the diagnostic term 'character disorder.'"

Individually, the profiles can be interpreted by type of disorder, according to Starke Hathaway and Paul Meehl's An Atlas for the Clinical Use of the M.M.P.I. This must be done with a great deal of training and sensitivity and a knowledge of the limitation of tests. Most of the codes cannot be matched exactly in the Atlas as the possible combination of scales is endless and it can not be too strongly emphasized that interpretations show only tendency. The amount of elevation, of course, shows intensity of a trait. Those traits occurring in the first sigma have little significance, those occurring in the second sigma, are still within the 68% of the normal population. So the interpretations should be studied with discrimination.

Descriptive adjectives are used to interpret the codes according to L. E. Drake and E. R. Oetting in M.M.P.I. Code Book for Counselors.

The codes of the persons tested at MAEEC or very similar ones are interpreted by the Atlas and Code Book as follows:

- # 16 - 4'23-1"9 (7, 1, 18)
Alcoholism, deteriorated
Socially extroverted, disturbed in the areas of stealing, violence and sex
- # 15 - 4'2367 (13, 3, 24)
Psychosis
Involuntional melancholia
Socially extroverted, insomnia, restless headaches, rebellious toward home, sibling conflict
- # 11 - 4'5369-1""270(3, 3, 11)
Psychosis, schizophrenia -- long history of inadequate personality
Socially extroverted, vague goals, verbal, home conflict
- # 12 - '459-1 (4, 1, 14)
Psychopathic personality, asocial, amoral
Vague goals, verbal, home conflict, socially extroverted
- # 22 - 470"286391-5 (3, 5, 10)
Psychopathic personality -- asocial, amoral, free from psychosis -- shallow
Insomnia, depressed, nervous, anxieties, headaches, exhaustion, rebellious, toward home, over-protective mother, lacks skill with opposite sex, socially insecure, indecisive, lacks self-confidence.
- # 26 - '486790-3 (4, 7, 12)
Psychopathic personality
Possibility of pathologic sexuality
Depressed, insomnia, restless, confused, over-protective mother, home conflict, socially extroverted, vague goals, verbal, resistant in interview.

- # 17 - '492-140' (7, 1, 18)
Psychosis, schizophrenia, paranoid manic-depressive
Vague goals, lacks academic drive, marriage oriented,
verbal, home conflict, socially extroverted.
- # 10 - 3'46128-5 (3, 5, 13)
Psychosis
Involuntional melancholy
Paranoid
Home conflict, rebellious toward home, lacks
academic drive, distractible in study, anxieties,
exhaustion, insomnia, headaches, lacks skill with
the opposite sex, indecisive, physical inferiority.
- # 29 - '5406823-91 (4, 6, 14)
No description since neither 0 or 5 were included in
codes in Atlas
- # 24 - 7624'803 (6, 8, 11)
Psychosis, schizophrenia
Suicidal
Headaches, sibling conflict
- # 28 - 72'346180-5" (4, 5, 15)
Anxieties, nervous, insomnia, headaches, lacks
confidence, indecisive, socially insecure
- # 20 - 0'17893 (3, 5, 10)
Psychoneurotic pattern mixed
Socially shy, socially insecure, lacks skill with
the opposite sex, lacks self-confidence, sibling
conflict, nonverbal, headaches.
- # 13 - '052-6 (4, 0, 8)
Socially insecure
- # 18 - 09-1'65 (3, 4, 11)
Nervous, restless, non-verbal
- # 19 - '072-6'9 (6, 4, 16)
Psychosis -- involuntional melancholy
Paranoid
Socially shy, socially insecure, lacks self-
confidence

14 - 12'3506578-9' (11, 6, 17)

Psychoneurosis, hypochondrias
Vague, indefinite, multiple complaints
Mother conflict

23 - 7821"06'349 (2, 10, 7)

Anxiety state
Psychos
Headaches, insomnia, nervous, exhaustion,
depressed, lacks confidence, father-mother-
sibling conflict, lacks skill with opposite sex.

Certain traits occur more often in the group studied for this paper than other traits obviously. Scale 4 occurs most often as the highest elevation, but only twice does it occur coupled with 9. The indication is that the hostility suggested by a high Scale 4, is not "acted out." But, instead, these people take their hostility out in neurosis (423, 34, 24), in depression, or hysteria. Social introversion leads four scores.

The implication is that the leading characteristic is amoral and asocial hostility produced by familial discord. In other words, over half these women grew up in homes which lacked harmony. They appear to take out their hostilities in most cases by turning them in, in the form of depression and hysteria and by withdrawing from people to protect themselves from getting hurt. It is extremely significant, that in eleven of the seventeen descriptions of the personalities coded according to Drake and Getting, home conflict was mentioned. The descriptions name "mother conflict," "father conflict," "sibling conflict," "rebellion toward home," "over-protective mother" and "home conflict."

In five profiles, the persons are described as "socially insecure" or "socially shy." In seven profiles, "socially extroverted" is recorded. Four times "lacks skill with the opposite sex" is used. In six instances, headaches and insomnias are ascribed to these people. Two lack academic drive. One is described as alcoholic deteriorated, one as suicidal. Involuntional melancholy is named twice, pathological sexuality once, schizophrenia four times, and paranoid three times.

Table 3 deals with the frequency distribution of this group of seventeen women compared with the normal population. In a normal population more scores would occur at the standard score of 50 or close to it, than any other point, but in only four scales was this true in this testing -- in Hs, Mf, Pa, and Ma. The greatest frequency was in the first standard deviation in D, Hy, Pt, Sc, and Si. This first sigma, or even the second, has little significance as far as deviation is concerned, but all of the scores except Mf and Ma are elevated above 70.

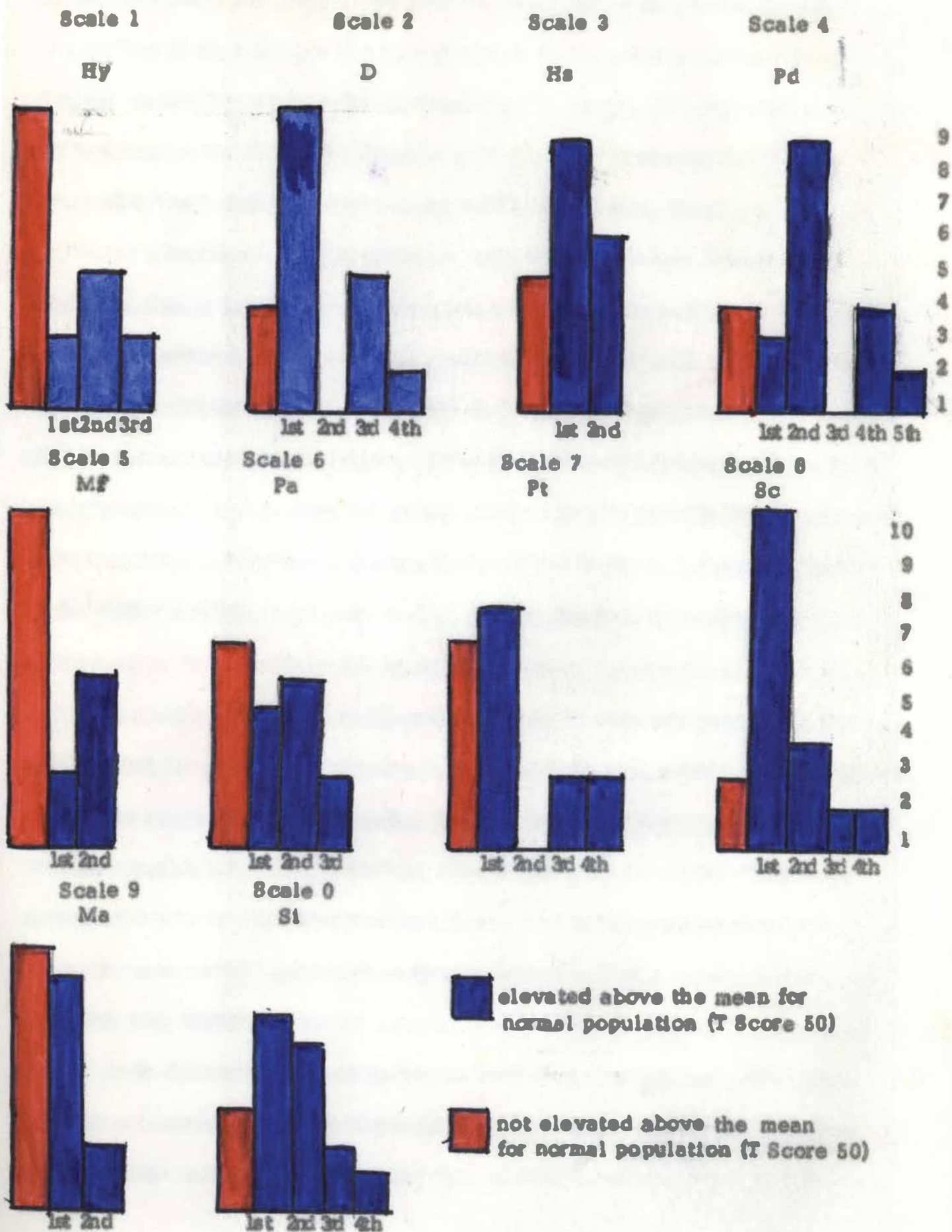
In a normal distribution over 97% of the scores would lie within the third standard deviation. In this experiment instead of the expected 1.5% (one-half of the almost 3% past the third deviation) there are one or two scores beyond the third deviation in five areas: D, Pd, Pt, Sc and Si.

Only in the cases of Hs and Mf are there more cases at or below the T score 50, than cases of elevations.

In general the mean of the scores of the MAEEC group is elevated above the T score of the normal population. Only eight scores in all ten areas were not within two standard deviation. So although most of the

TABLE III

FREQUENCY OF ELEVATED SCORES



scores were elevated, only a few were elevated above the normal range.

One of the rules for the interpretation of the profiles is that the clinical results be tested against supporting evidence. Dr. Ossorio in his lectures on the "Clinical Use of the M.M.P.I." recommends that the interpreter "seek the empirical validity of the subscales."

As a teacher of public aid recipients at Mattoon Area Educational Extension Center for two years, since its establishment on June 7, 1965, this writer was required to make quarterly written reports on each individual in her classes. These reports are on file at the Department of Public Aid office of the separate counties involved. Evaluations were made, not only on academic progress, but on such things as observations of personality disturbances and adjustment difficulties. Since results of the M.M.P.I. were not known to the writer until the beginning of this thesis, the reports were not influenced by the results of the M.M.P.I.

From the beginning, and increasingly so as time progressed, it was evident that the students were very insecure. They had, with a few exceptions, very little sense of personal worth. They were, in the main, convinced that they couldn't learn, wouldn't be able to get or hold a job. They were surprised that a teacher would accept them, like them, respect them and even, in some cases, admire them in their effort to rear a family, alone, and with very little money.

It is difficult for these people to look ahead, plan, and anticipate. They are, however, very ambitious for their children and most of them want them to go to college and get a good job. Often, however, they are not

in touch with reality. They would like to put aside a "thousand dollars" if they had it, for their children's college education. None of them have ever been to Eastern Illinois University's campus although it is quite near them, and their ideas of college are very vague.

Because the money allotted to them is so meager, most of them are engrossed in the ever-present problem of how to live until the next check comes, or how to keep out the money for a new pair of shoes. This leaves little time or energy or motivation to look ahead with joy.

It is difficult to get one of these people to express an opinion about a subject beyond the scope of his personal life -- on politics, religion, goals for the future, appreciation of nature, for instance.

At first, most of these recipients were hostile to the idea of coming to school. Seldom had the case worker done a good job of "selling" the school. In most cases it was a matter of going to school or the aid check would be withheld. The hostility was general, a "mad-at-the-world" kind of thing, when they first attended. The majority of them soon learned to appreciate the opportunity, unless, in some cases, they were disabled and saw no future in their education as far as a job was concerned. Even then many enjoyed the association with others, learning for the sake of learning, and the sense of acceptance they got at the school. This change in attitude is not a Pollyanna, "I LOVE TEACHER" kind of thing, for they remained antagonistic toward teachers and administrators who did not accept them or who were patronizing or overly critical. In other words, they concentrated their hostility on the people who produced it -- on the husbands who deserted them, on

the case workers who acted as policemen instead of counselors, and the teachers who rejected them. Their hostility was no longer displaced.

Now they have, in general, dispensed with scapegoats. Much of the hostility is deep-seated and comes to the surface only after an atmosphere of trust, relaxation and confidence has been established. They need to know that what they say will not "get them in trouble" especially with those who hold the purse strings. In other atmospheres they are apathetic.. In general, they have little insight into the reasons which caused them to be in their present situation.

In clinging to their superstitions, prejudices, and misinformation, they seem to feel a security and a loyalty to their parents and social milieu, instead of seeing that this is partly responsible for their lack of progress.

The lack of confidence, in the cases of the women who have been deserted, is more than an inferiority complex. It is a traumatic experience that has sent several to mental institutions, some to mental health clinics, and some may yet be headed for that experience.

This writer has made reports and called the situation to the attention of the administration from time to time that these people are socially introverted. The job consultant has also reported that the students who go out on jobs that require social relations (such as a secretary), encounter difficulties in acquiring poise. They need more opportunity for social contacts.

Many of these people, having been hurt, shield themselves from vulnerability by withdrawing. Having been rejected in public schools because

of poverty and social standing, feeling the stigma of being on public aid, and lacking the knowledge of the social amenities, they avoid social contacts unless someone develops a climate of acceptance.

Even though these people have learned to appreciate one another, in many instances, this does not pave the way for them to feel comfortable or outgoing among so-called "middle class" people, with whom and for whom they will work in jobs. So the camaraderie that one detects among these people does not negate the description of "socially introverted," because, outside of their own group, they may feel isolated.

On a list of adjectives in which the teachers at Mattoon Area Educational Center were asked to check the ones they ascribed to these people, "cooperative" and "honest" were checked by every teacher. "Passive," "kind," "courteous," and "immature" received the next number of votes. Over half of the teachers checked "good-natured," "generous," "sociable," "talkative," "tense," and "nervous." None marked "irresponsible," "belligerent," "enthusiastic," "shrewd," "vindictive," "selfish," "cynical" or "individualistic." Only one or two votes were recorded for "hostile," "ambitious," "open-hearted," "open-minded," "quiet," "resentful," "moody," and "irritable."

The kindergarten teacher, seeing these people as parents, noted their lack of knowledge of child development concepts and of nutritional, emotional, social, intellectual and sanitation needs. What may appear as irresponsibility is really lack of knowledge. Their biggest problem as parents, she said, is the matter of discipline (to spank or not to spank). In the main, these people

are authoritative toward their children, demanding strict obedience, as against the middle-class tendency to be permissive in discipline. However, on occasion, they can be over-protective and defensive unless they are convinced that the teacher knows what is best for the children. Some children of this age already have found life so traumatic that they can't respond either in laughter or tears.

The nurse reported an unexpected lack of imagined ills -- no more than in a normal population. She observed that they are very uninformed, and misinformed in matters of health but not superstitious.

The homemaking teacher and check-out teacher, being in a skill area that lends itself to informality, reported that the students talk freely among themselves of personal, even intimate, happenings. The homemaking teacher has visited the students' homes this summer, to help in homemaking problems. She found them clean, neat, "lived-in" in most instances, except for a few cases where houses were so sub-standard as to be dismal and depressing.

To summarize, the background and personality of seventeen women on public aid, attending the Mattoon Area Educational Extension Center were explored through statistics gathered through the Department of Public Aid and the results of the Minnesota Multiphasic Personality Inventory. All of these women except four (two are married, one is single, and one is a widow) are divorced or separated from their husbands, in most cases having been deserted. The average of their ages is thirty-four, the average number of children they have is four, and on the average they have had eight years

of schooling in the public schools.

The M.M.P.I. disclosed that, of the seventeen, fourteen had scores elevated above the T Score of 50, in the area of psychopathic deviance. Four of them had scores elevated above the second standard deviation. Elevated scores in the area of psychopathic deviance indicates hostility manifesting itself in amoral and asocial conduct.²⁶ This condition is attributed to a childhood in a family characterized by familial discord.²⁷

Furthermore, the results of the M.M.P.I. shows elevated scores of significance in two other areas -- depression and social introversion. Authorities in the interpretation of the M.M.P.I. explain this configuration as a turning inward of these hostilities, resulting in poor morale, lack of confidence in themselves, lack of hope in the future, socially insecure, and shy.²⁸

The teachers and counselors at the Mattoon Area Educational Extension Center rate these students as being cooperative and friendly. Other adjectives most often used in describing these women, by the faculty, were "honest," "passive," "kind," "courteous," and "immature."

Although these seventeen women, as a result of their testing by the M.M.P.I. can be described as hostile, depressed, and socially introverted, the teachers and counselors who work with them describe them as cooperative, friendly, kind, and courteous.

²⁶Bathaway and Meehl, loc. cit. -

²⁷Drake and Cetting, loc. cit.

²⁸Welsh and Dahlstrom, loc. cit.

Although this seems to be a paradox, it is the opinion of this writer that this is not so. She submits that whereas the M.M.P.I. measures the emotions in depth, the teachers who work with them see the overt reactions to their immediate environment, and because their environment at the school has been one of kindness, friendliness and concern, they have been responsive to it, in kind. It seems to this writer that their demonstrated flexibility of personality points to a favorable prognosis.

Mr. Ian Wickramasekera, the school psychologist, said to the faculty that education alone will not save these people. Except in the cases of deep emotional disturbance, in which case they need professional help, these people need personal involvement.

Because these people have responded to personal involvement, it is the opinion of this writer that this points the way to further improvement by intensive study of ways to lead them from their sense of isolation, back into the "mainstream of life," and involvement with others, especially with the middle class population with whom and for whom they will work when they have completed their study and training at Maunabo Area Educational Extension Center.

In order to better understand the people on public aid, and, ultimately to help them out of their dilemma, it seems to this writer that further testing should be done. In order to investigate how much of their personality disturbance is due to poverty and how much to failures in the personal relations of their private lives, the personality profiles of those who are reasonably happily married and those who have been deserted could be compared, and

norms made of each. Each of these groups could be equated to groups living at the poverty level but not on public aid. The profiles could be studied to see if any personality traits emerge that explain why some are self-sustaining even though at the poverty level, and some are not. And of most urgent concern is the need for a test that will successfully measure the intelligence of the culturally deprived within the context of their own experience.

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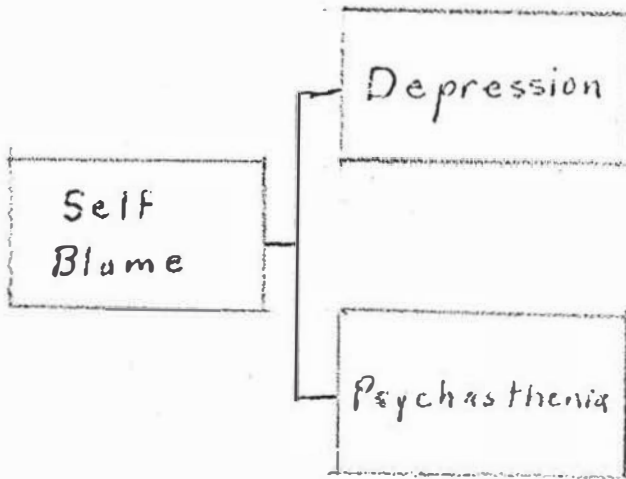
APPENDIX

Organization of the MMPI

TABLE 2

Social Dependency

Hostility



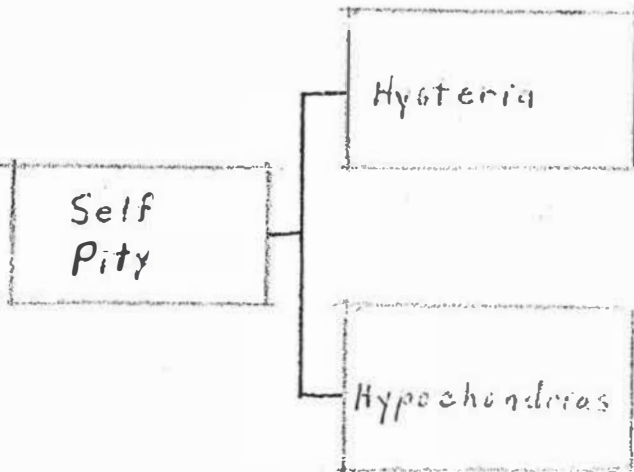
← Activity →

Mania

Self Aggrandizement

← Conscience →

Psychopathic Deviate



← Social Compliance →

Paranoia

Intellectualized Fantasizing

← Social Attachment →

Schizophrenia

The Minnesota Multiphasic Personality Inventory

Starke R. Hathaway and J. Charnley McKinley

TABLE 5

Name 10

Female

Address _____

Scorer's Initials _____

Occupation _____

Date Tested _____

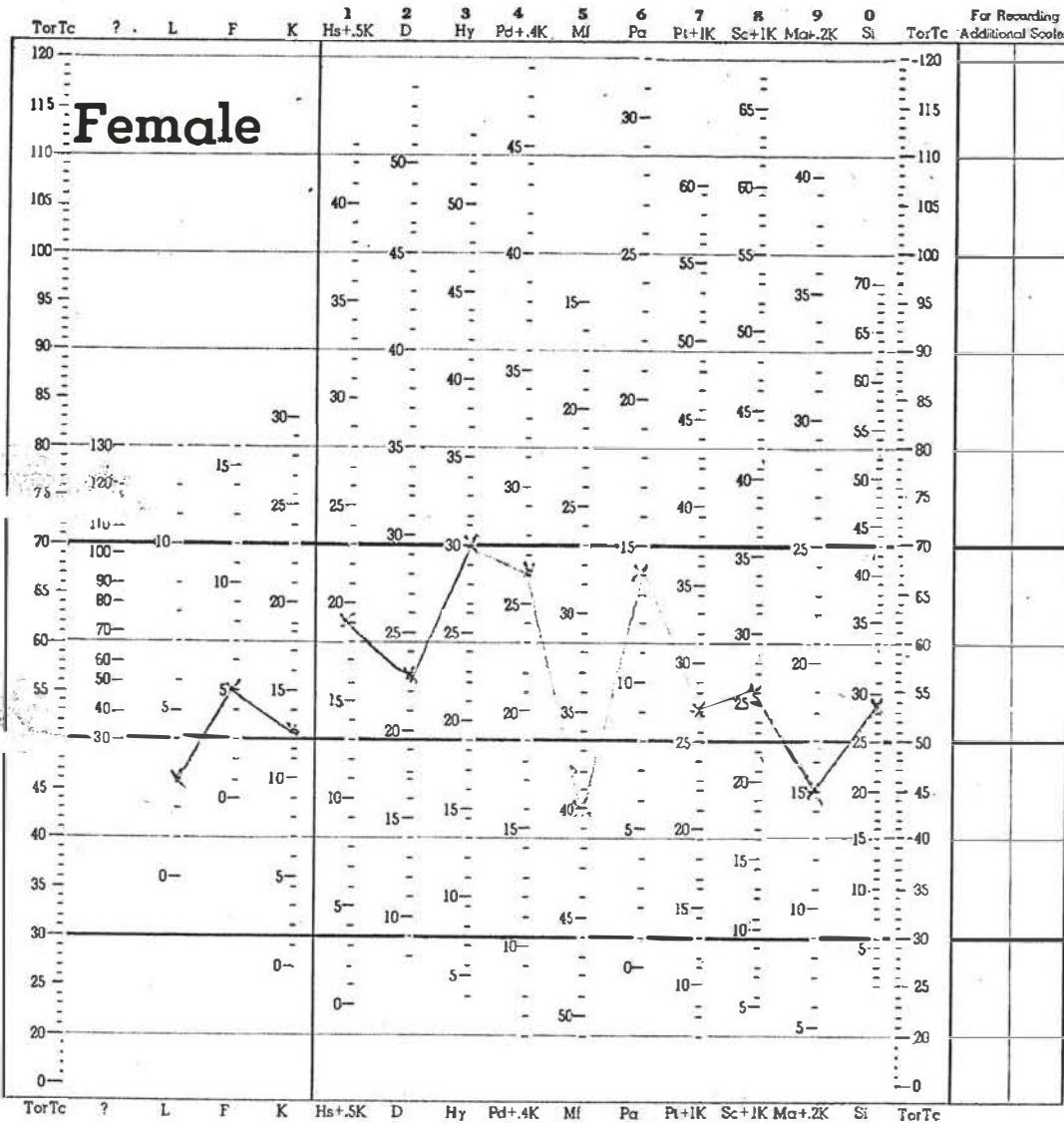
Education _____

Age 46

Marital Status _____

Referred by _____

NOTES



Fractions of K			
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29	15	12	6
28	14	11	6
27	14	11	5
26	13	10	5
25	13	10	5
24	12	10	5
23	12	9	5
22	11	9	4
21	11	8	4
20	10	8	4
19	10	8	4
18	9	7	4
17	9	7	3
16	8	6	3
15	8	6	3
14	7	6	3
13	7	5	3
12	6	5	2
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10	5	4	2
9	5	4	2
8	4	3	2
7	4	3	1
6	3	2	1
5	3	2	1
4	2	2	1
3	2	2	1
2	1	1	0
1	1	1	0
0	0	0	0

Raw Score 2 5 13 12 23 30 21 40 14 14 13 12 29

K to be added 7 5 13 13 3

Raw Score with K 19 26 27 26 15



Signature _____

Date _____

The Minnesota Multiphasic Personality Inventory

Starke R. Hathaway and J. Charnley McKinley

Scorer's Initials _____

Name _____

Female

Address _____

Occupation _____

Date Tested _____

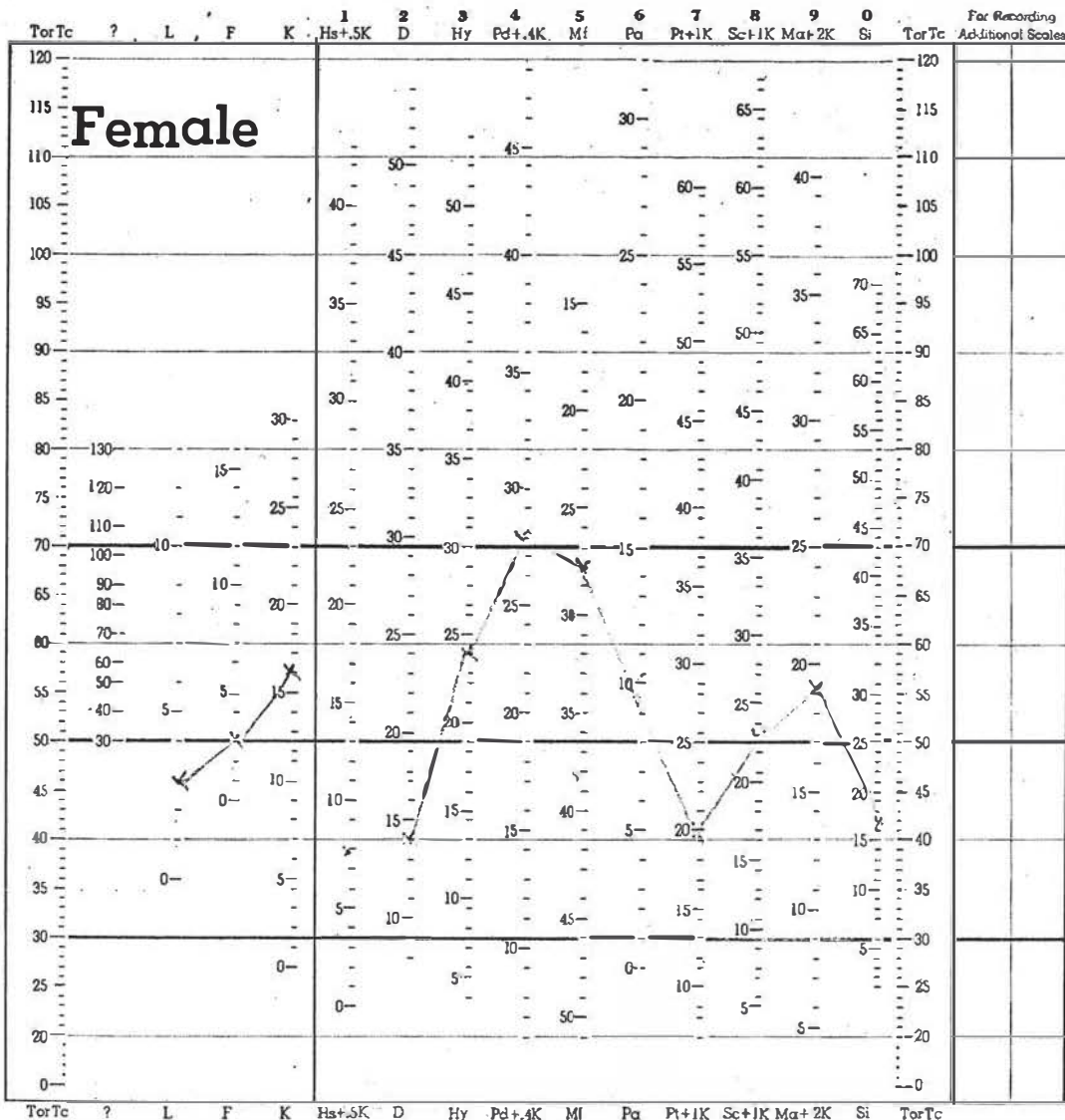
Education _____

Age 37

Marital Status _____

Referred by _____

NOTES



Fractions of K

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26	13	10	5
25	13	10	5
24	12	10	5
23	12	9	5
22	11	9	4
21	11	8	4
20	10	8	4
19	10	8	4
18	9	7	4
17	9	7	3
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15	8	6	3
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7	4	3	1
6	3	2	1
5	3	2	1
4	2	2	1
3	2	2	1
2	1	1	0
1	1	1	0
0	0	0	0

Raw Score 3 3 16 0 14 24 22 28 10 4 7 16 17 — —

K to be added 5 6 16 16 3 — —

Raw Score with K 8 28 20 23 19 — —



Signature _____

Date _____

The Minnesota Multiphasic Personality Inventory

Starke R. Hathaway and J. Charnley McKinley

Name _____

Female

Address _____

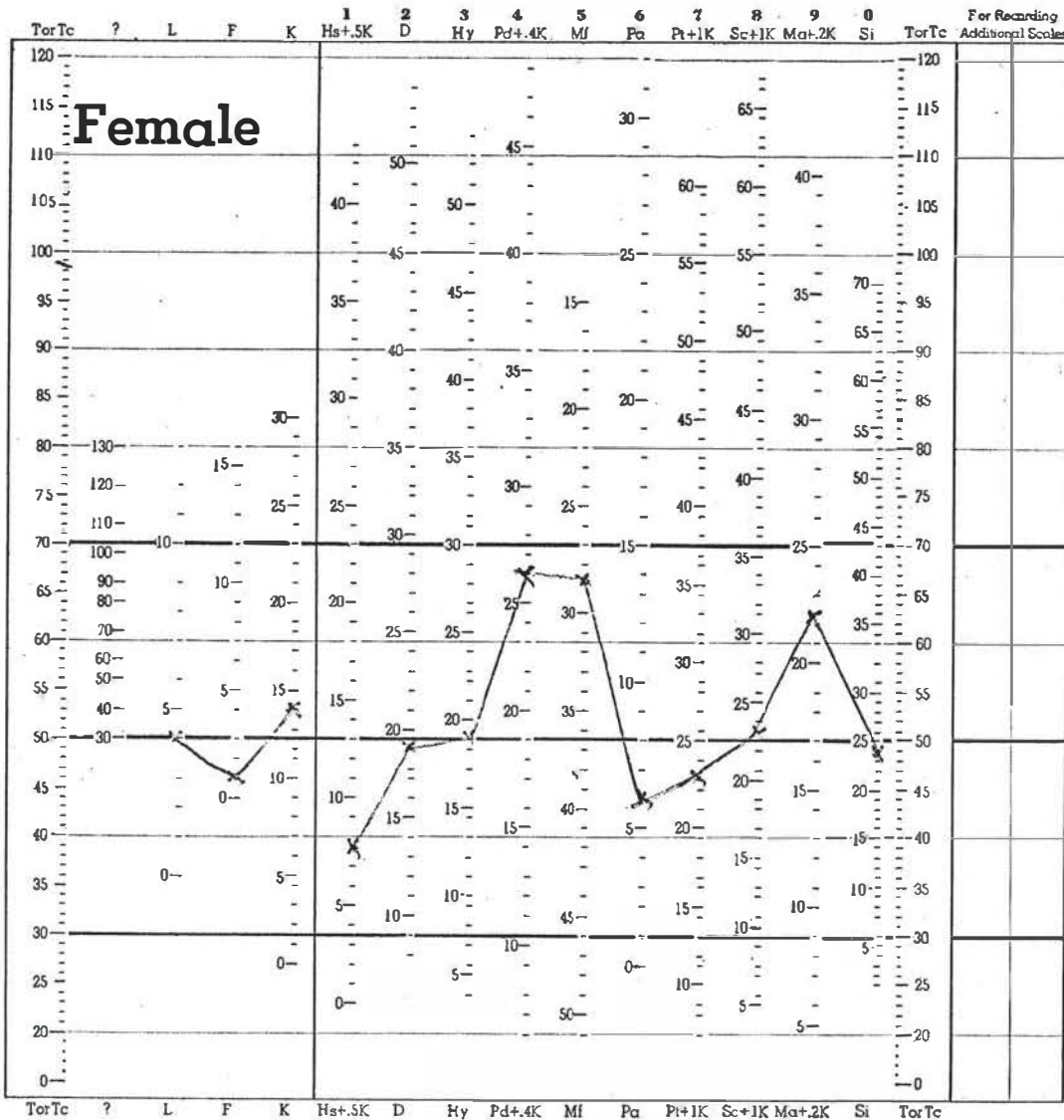
Occupation _____ Date Tested _____

Education _____ Age 27

Marital Status _____ Referred by _____

NOTES

Scorer's Initials _____



Fractions of K

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29	15	12	6
28	14	11	6
27	14	11	5
26	13	10	5
25	13	10	5
24	12	10	5
23	12	9	5
22	11	9	4
21	11	8	4
20	10	8	4
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18	9	7	4
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13	7	5	3
12	6	5	2
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5	3	2	1
4	2	2	1
3	2	2	1
2	1	1	0
1	1	1	0
0	0	0	0

Raw Score 4 1 14 1 19 19 20 31 6 7 9 17 24

K to be added 7 6 14 14 3

Raw Score with K 8 7 26 23 23 27



Signature _____ Date _____

The Minnesota Multiphasic Personality Inventory

Starke R. Hathaway and J. Charnley McKinley

Name 13 Female

Address _____

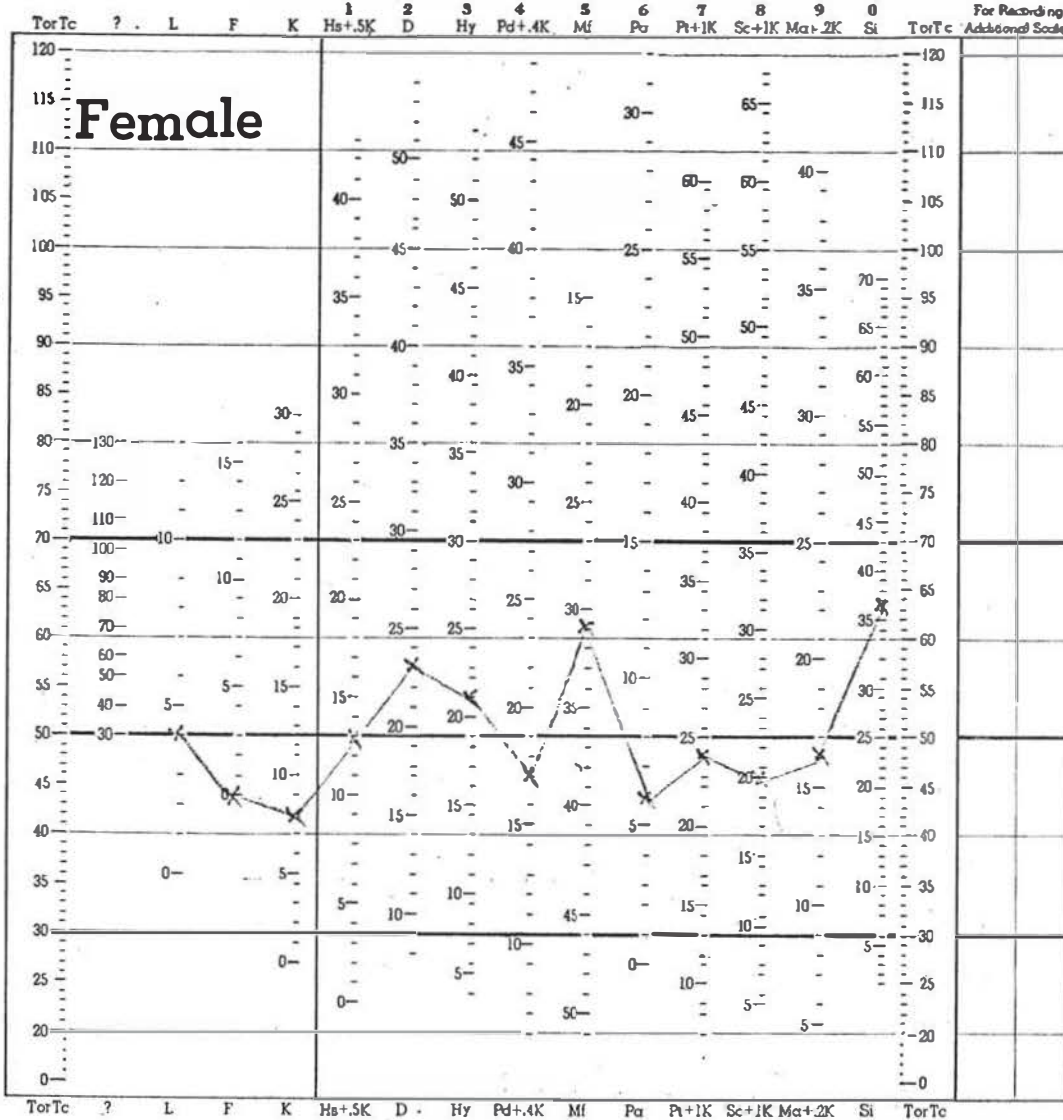
Occupation _____ Date Tested _____

Education _____ Age 41

Marital Status _____ Referred by _____

NOTES

Scorer's Initials _____



Fractions of K			
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28	14	11	6
27	14	11	5
26	13	10	5
25	13	10	5
24	12	10	5
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1	1	1	0
0	0	0	0

Raw Score 4 0 5 13 23 21 14 29 6 16 12 14 36 — —

K to be added 4 3 8 8 2 — —

Raw Score with K 17 17 24 20 16 — —



Signature _____ Date _____

The Minnesota Multiphasic Personality Inventory

Starke R. Hathaway and J. Charnley McKinley

Scorer's Initials _____

Name _____ Female

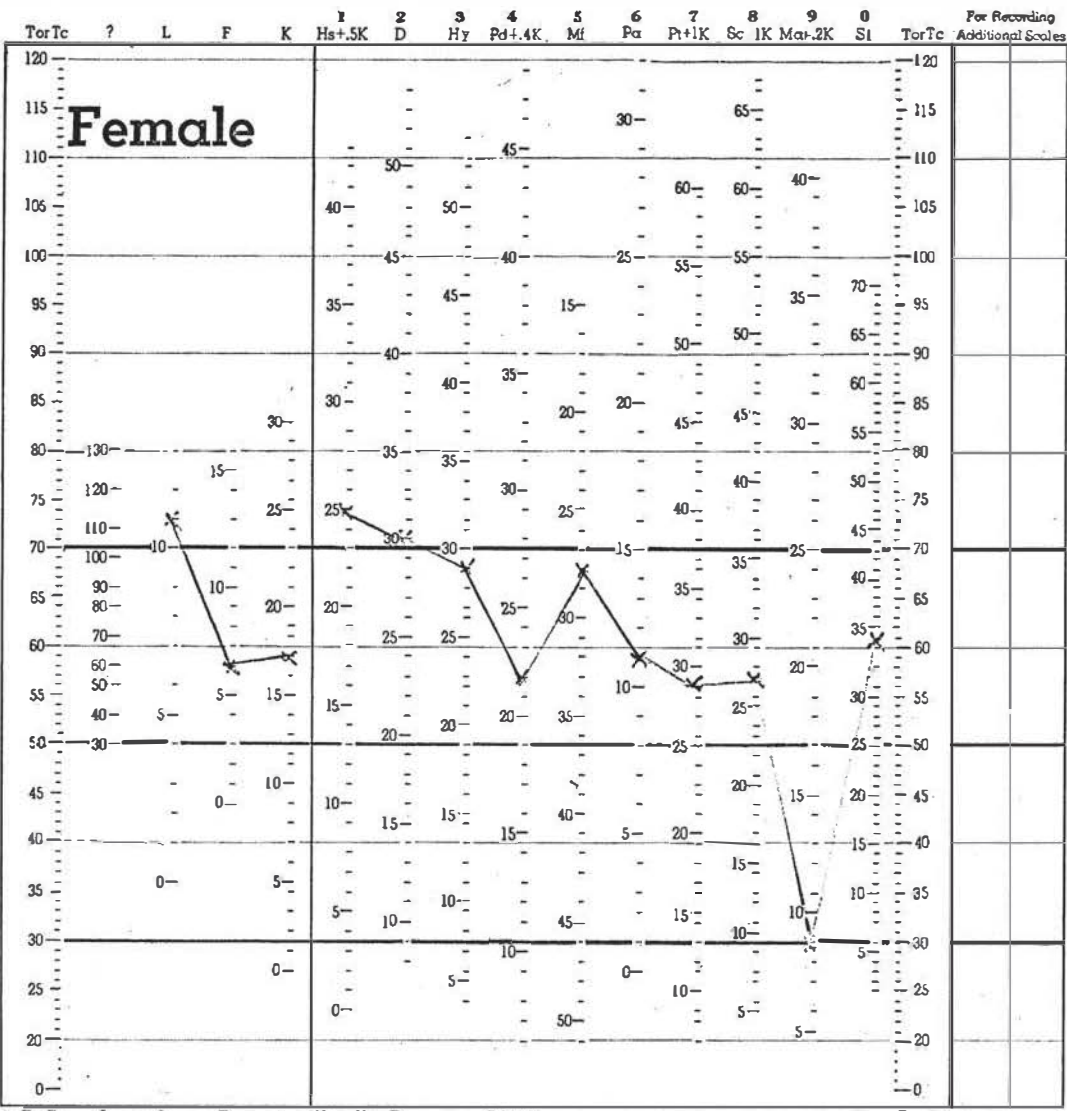
Address _____

Occupation _____ Date Tested _____

Education _____ Age 58

Marital Status _____ Referred by _____

NOTES



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29	15	12	6
28	14	11	6
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7	4	3	1
6	3	2	1
5	3	2	1
4	2	2	1
3	2	2	1
2	1	1	0
1	1	1	0
0	0	0	0

Raw Score 11 6 17 16 30 29 15 28 11 12 10 6 34

K to be added 9 7 17 17 2

Raw Score with K 25 22 29 27 9



Signature _____ Date _____

The Minnesota Multiphasic Personality Inventory

Starke R. Hathaway and J. Charnley McKinley

Scorer's Initials _____

Name 13

Female

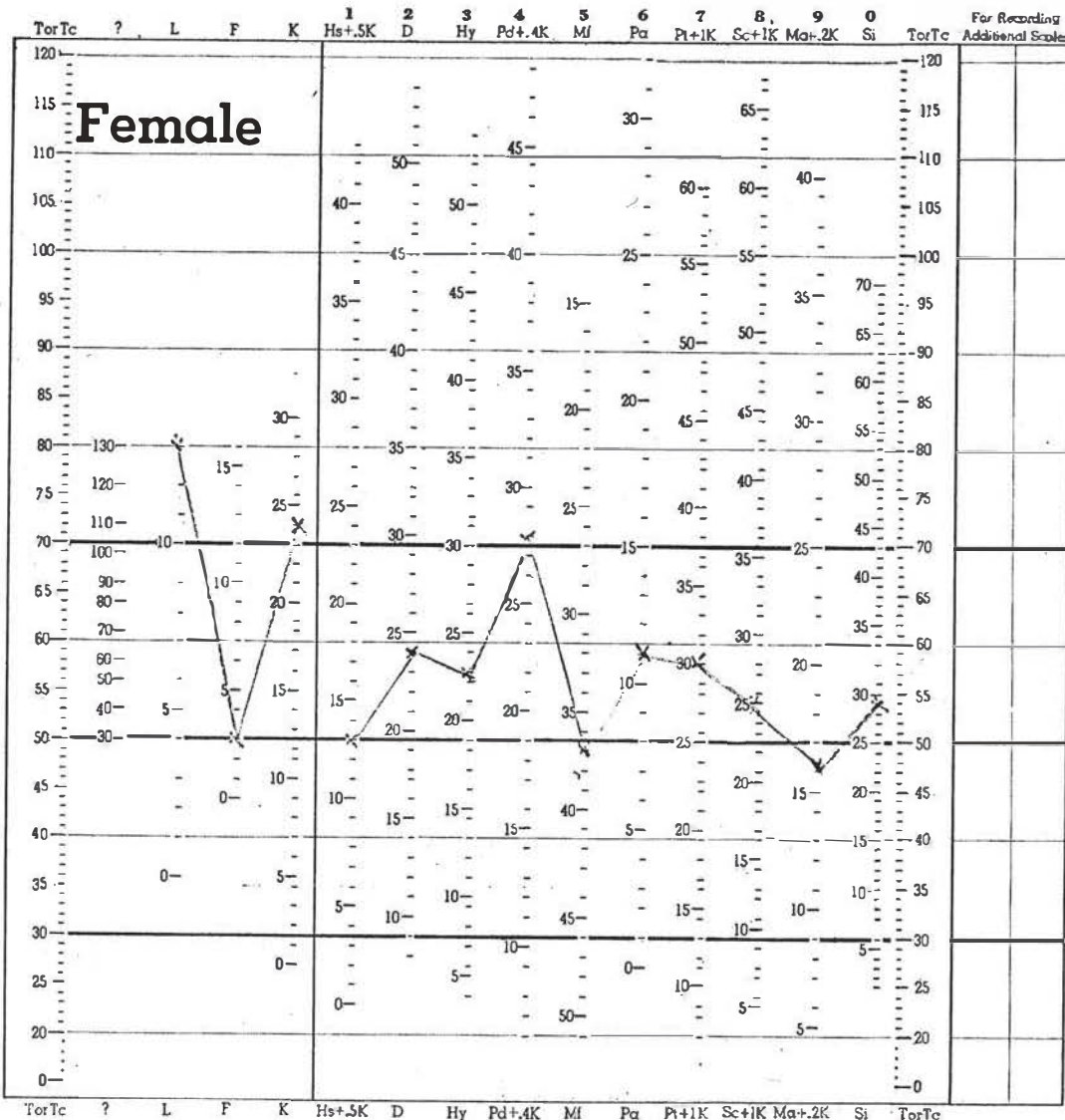
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Occupation _____ Date Tested _____

Education _____ Age 32

Marital Status _____ Referred by _____

NOTES



Fractions of K				
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28	14	11	6	6
27	14	11	5	5
26	13	10	5	5
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24	12	10	5	5
23	12	9	5	5
22	11	9	4	4
21	11	8	4	4
20	10	8	4	4
19	10	8	4	4
18	9	7	4	4
17	9	7	3	3
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5	3	2	1	1
4	2	2	1	1
3	2	2	1	1
2	1	1	0	0
1	1	1	0	0
0	0	0	0	0

Raw Score 13 3 24 1 24 25 18 27 11 6 1 4 19

K to be added 12 10 24 24 5

Raw Score with K 25 13 48 13 29 30 23 32 16 11 6 9 24



Signature _____ Date _____

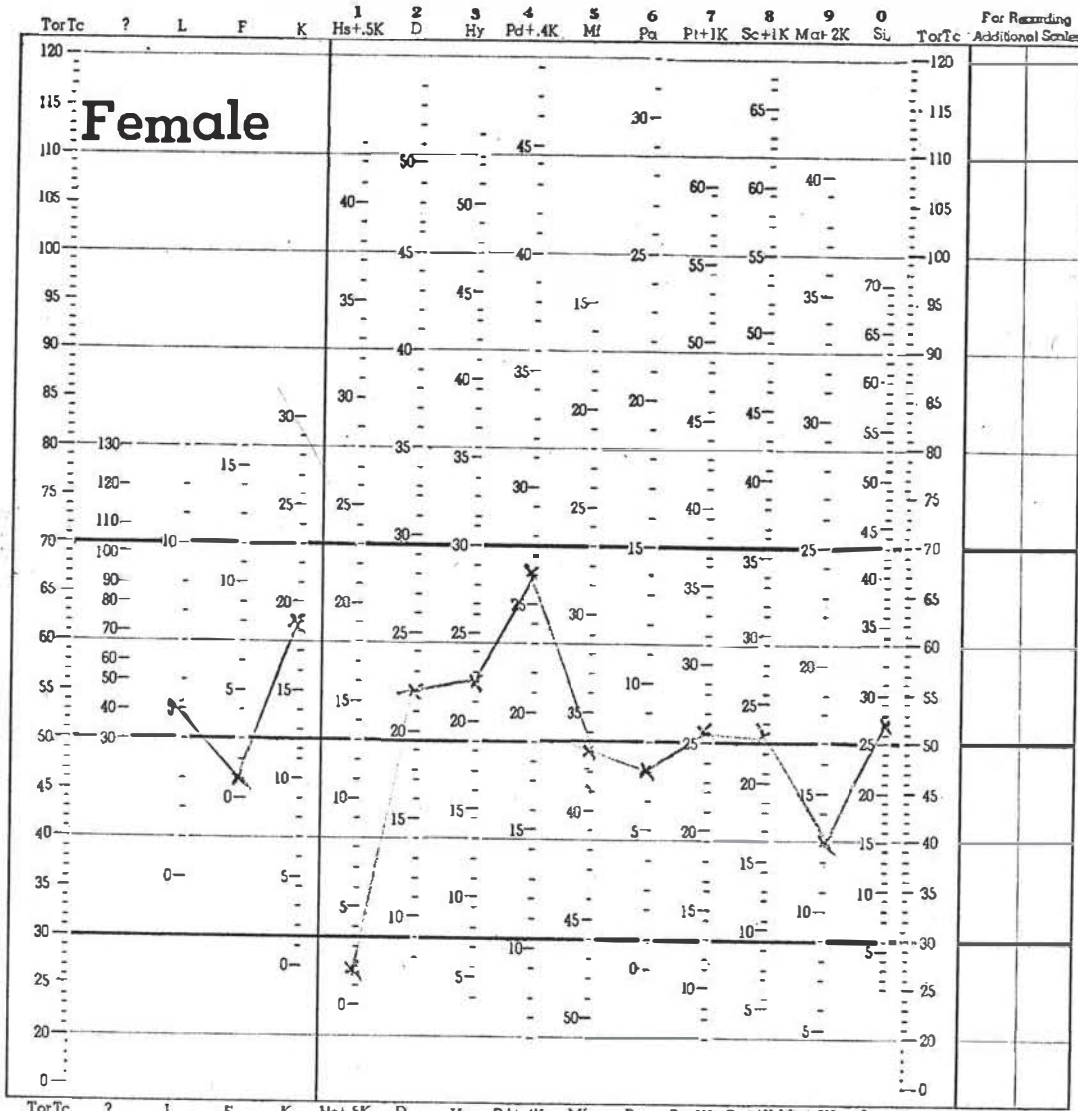
Starke R. Hathaway and J. Charnley McKinley

Scorer's Initials _____

Name _____
 Address _____
 Occupation _____ Date Tested _____
 Education _____ Age 26
 Marital Status _____ Referred by _____

Female

NOTES



Fractions of K			
K	J	A	J
30	15	12	6
29	15	12	6
28	14	11	6
27	14	11	5
26	13	10	5
25	13	10	5
24	12	10	5
23	12	9	5
22	11	9	4
21	11	8	4
20	10	8	4
19	10	8	4
18	9	7	4
17	9	7	3
16	8	6	3
15	8	6	3
14	7	6	3
13	7	5	3
12	6	5	2
11	6	4	2
10	5	4	2
9	5	4	2
8	4	3	2
7	4	3	1
6	3	2	1
5	3	2	1
4	2	2	1
3	2	2	1
2	1	1	0
1	1	1	0
0	0	0	0

TorTc ? L F K Hs+5K 1 2 D 3 Hy 4 Pd+4K 5 Mf 6 Pa 7 Pt+1K 8 Sc+1K 9 Ma+2K 0 Si TorTc

Raw Score 5 1 19 2 22 22 12 37 7 7 4 9 22

K to be added 10 8 19 19 4

Raw Score with K 12 26 26 23 13



Signature _____ Date _____

The Minnesota Multiphasic Personality Inventory

Starke R. Hathaway and J. Charnley McKinley

Scorer's Initials _____

Name _____

Female

Address _____

Occupation _____

Date Tested _____

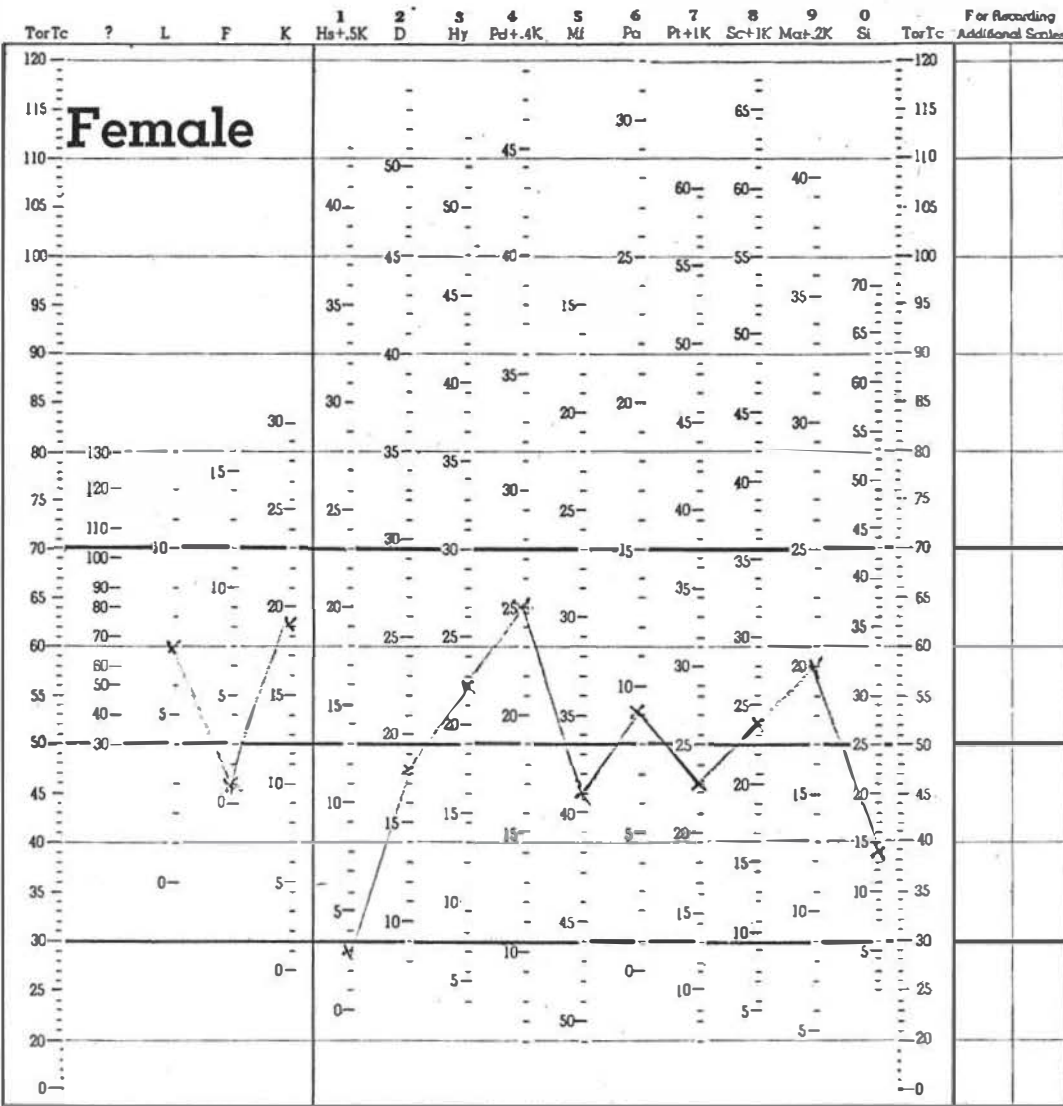
Education _____

Age 38

Marital Status _____

Referred by _____

NOTES _____



Fractions of K

K	3	4	5
30	15	12	6
29	15	12	6
28	14	11	6
27	14	11	5
26	13	10	5
25	13	10	5
24	12	10	5
23	12	9	5
22	11	9	4
21	11	8	4
20	10	8	4
19	10	8	4
18	9	7	4
17	9	7	3
16	8	6	3
15	8	6	3
14	7	6	3
13	7	5	3
12	6	5	2
11	6	4	2
10	5	4	2
9	5	4	2
8	4	3	2
7	4	3	1
6	3	2	1
5	3	2	1
4	2	2	1
3	2	2	1
2	1	1	0
1	1	1	0
0	0	0	0

TorTc ? L F K Hs+5K D Hy Pd+4K MI Pa Pt+1K Sc+1K Ma+2K Si TorTc

Raw Score 7 1 19 3 18 22 17 39 9 4 5 16 14

K to be added 17 8 19 19 4

Raw Score with K 13 26 33 21 20



Signature _____

Date _____

The Minnesota Multiphasic Personality Inventory

Starke R. Hathaway and J. Charnley McKinley

Name

Female

Address

Occupation

Date Tested

Education

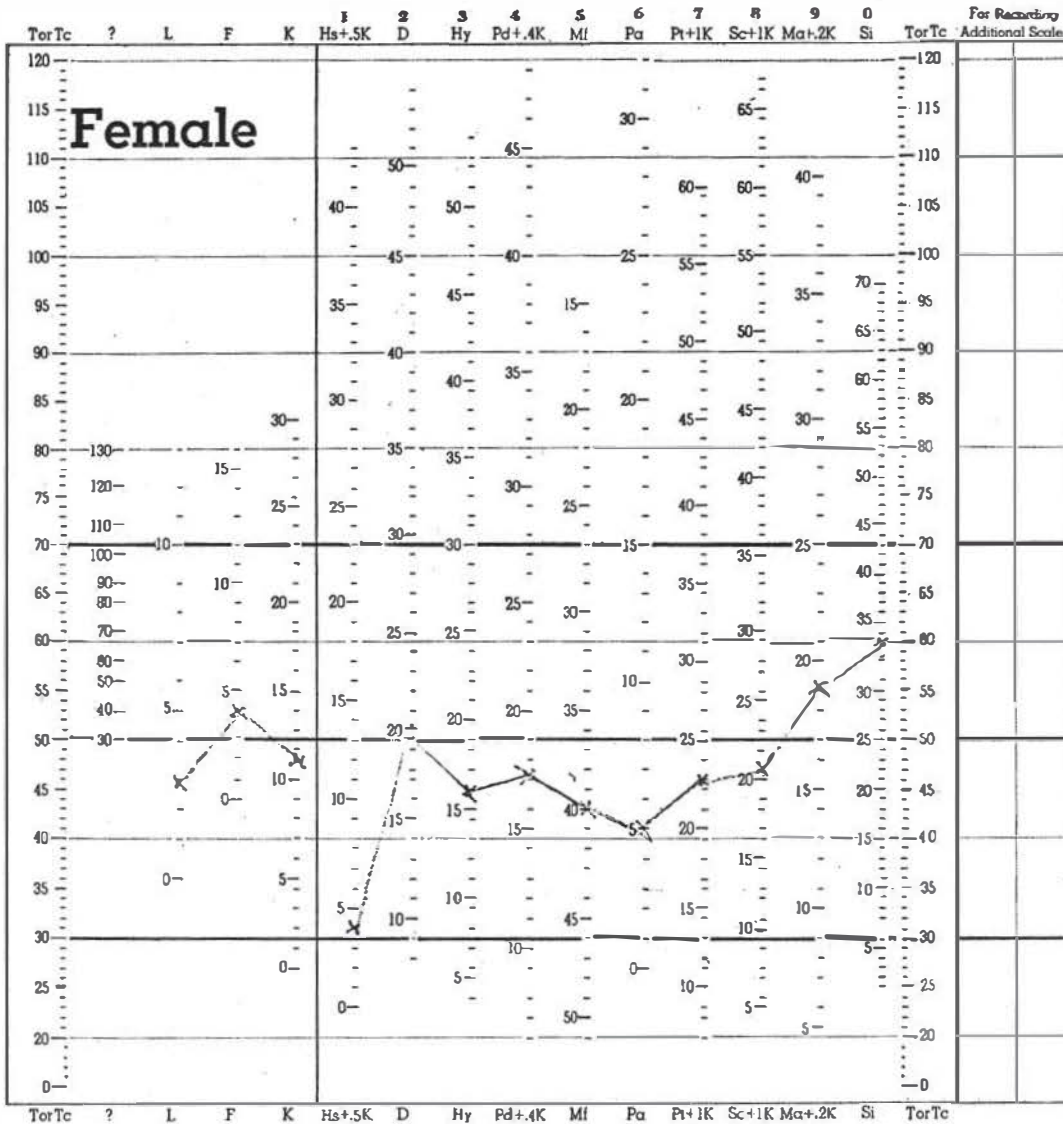
Age 29

Marital Status

Referred by

NOTES

Scorer's Initials



Fractions of 1			
K	5	A	3
30	15	12	6
29	15	12	6
28	14	11	6
27	14	11	5
26	13	10	5
25	13	10	5
24	12	10	5
23	12	9	5
22	11	9	4
21	11	8	4
20	10	8	4
19	10	8	4
18	9	7	4
17	9	7	3
16	8	6	3
15	8	6	3
14	7	6	3
13	7	5	3
12	6	5	2
11	6	4	2
10	5	4	2
9	5	4	2
8	4	3	2
7	4	3	1
6	3	2	1
5	3	2	1
4	2	2	1
3	2	2	1
2	1	1	0
1	1	1	0
0	0	0	0

TorTc ? L F K Hs+5K 1 D 2 Hy 3 Pd+4K 4 Mf 5 Pa 6 Pt+1K 7 Sc+1K 8 Ma+2K 9 Si 10 TorTc

Raw Score 3 4 11 4 20 13 13 20 5 12 10 17 33

K to be added 12

Raw Score with K 10 12 23 21 19



Signature

Date

Starke R. Hathaway and J. Charnley McKinley

Scorer's Initials _____

Address _____

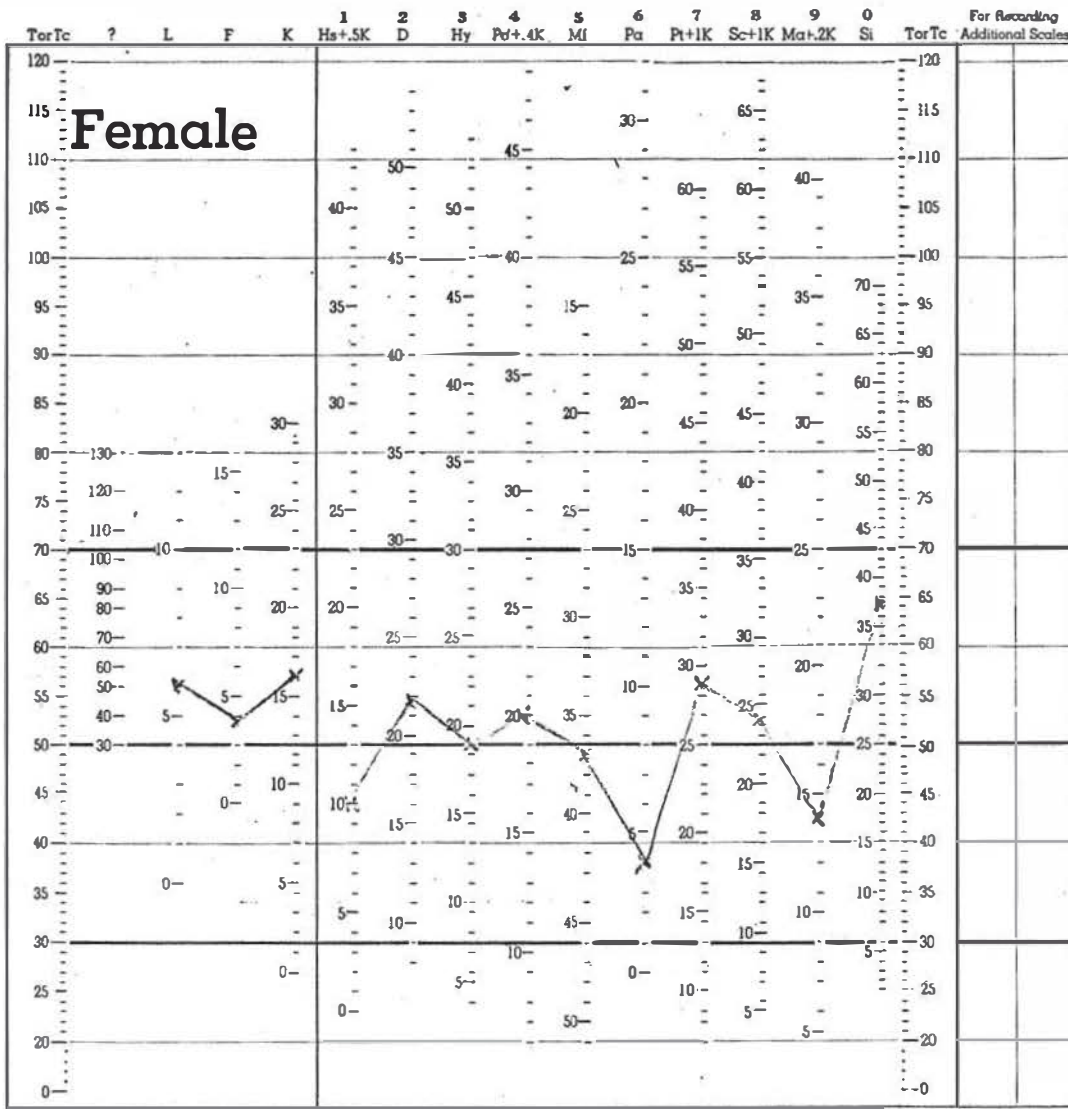
Female

Occupation _____ Date Tested _____

Education _____ Age 23

Marital Status _____ Referred by _____

NOTES



Fractions of K			
K	3	4	5
30	15	12	6
29	15	12	6
28	14	11	6
27	14	11	5
26	13	10	5
25	13	10	5
24	12	10	5
23	12	9	5
22	11	9	4
21	11	8	4
20	10	8	4
19	10	8	4
18	9	7	4
17	9	7	3
16	8	6	3
15	8	6	3
14	7	6	3
13	7	5	3
12	6	5	2
11	6	4	2
10	5	4	2
9	5	4	2
8	4	3	2
7	4	3	1
6	3	2	1
5	3	2	1
4	2	2	1
3	2	2	1
2	1	1	0
1	1	1	0
0	0	0	0

Raw Score 6 4 16 20 20 17 19 27 4 12 8 11 37

K to be added 8 6 16 16 3

Raw Score with K 14 20 29 28 14



Signature _____ Date _____

The Minnesota Multiphasic Personality Inventory

Starke R. Hathaway and J. Charnley McKinley

Scorer's Initials _____

Name SC

Female

Address _____

Occupation _____

Date Tested _____

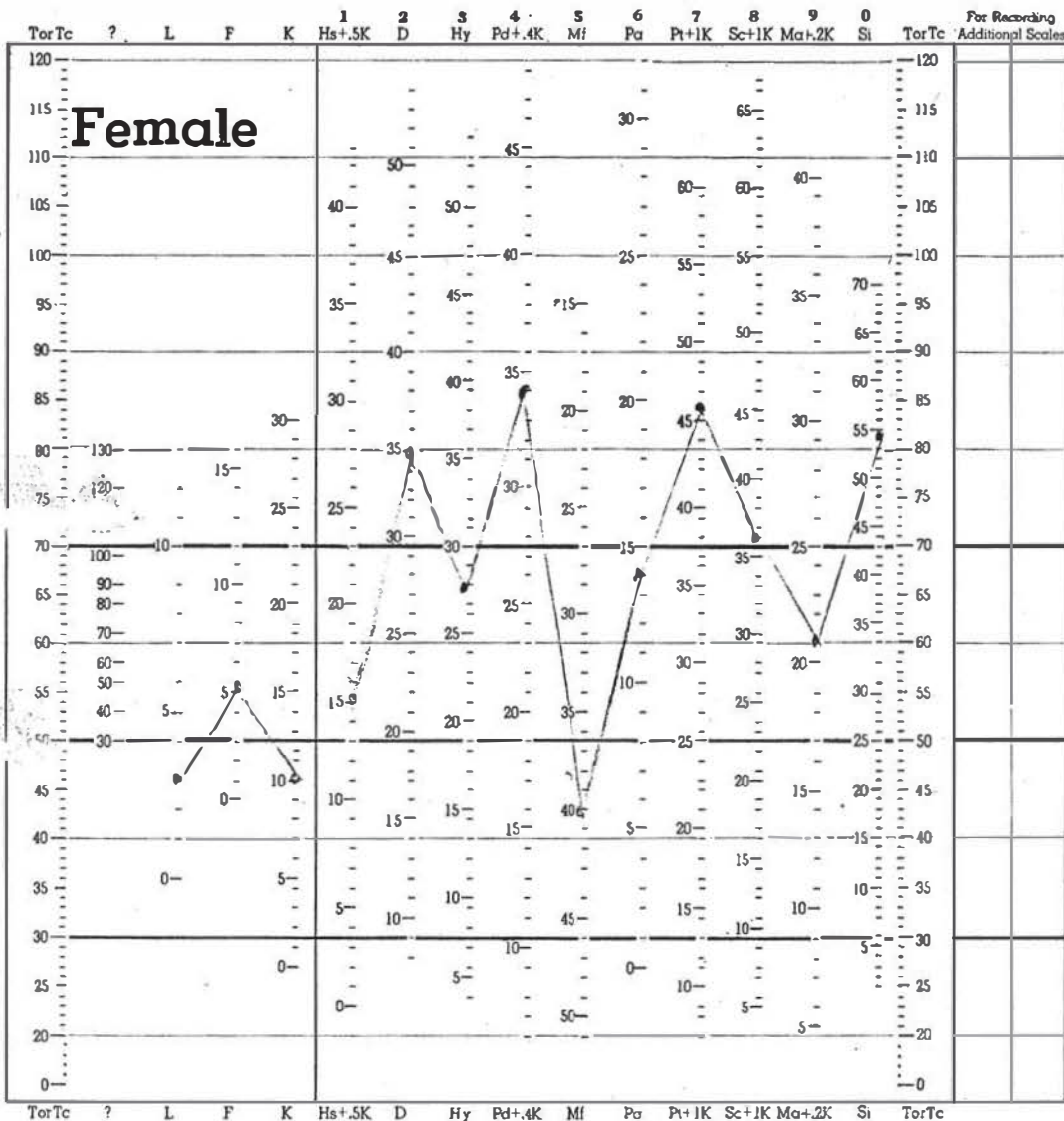
Education _____

Age 42

Marital Status _____

Referred by _____

NOTES



K	Fractions of K		
	.5	.4	.2
30	15	12	6
29	15	12	6
28	14	11	6
27	14	11	5
26	13	10	5
25	13	10	5
24	12	10	5
23	12	9	5
22	11	9	4
21	11	8	4
20	10	8	4
19	10	8	4
18	9	7	4
17	9	7	3
16	8	6	3
15	8	6	3
14	7	6	3
13	7	5	3
12	6	5	2
11	6	4	2
10	5	4	2
9	5	4	2
8	4	3	2
7	4	3	1
6	3	2	1
5	3	2	1
4	2	2	1
3	2	2	1
2	1	1	0
1	1	1	0
0	0	0	0

Raw Score 3 5 10 14 25 28 40 14 36 26 19 54

K to be added 5 4 10 10 2

Raw Score with K 20 24 26 36 21



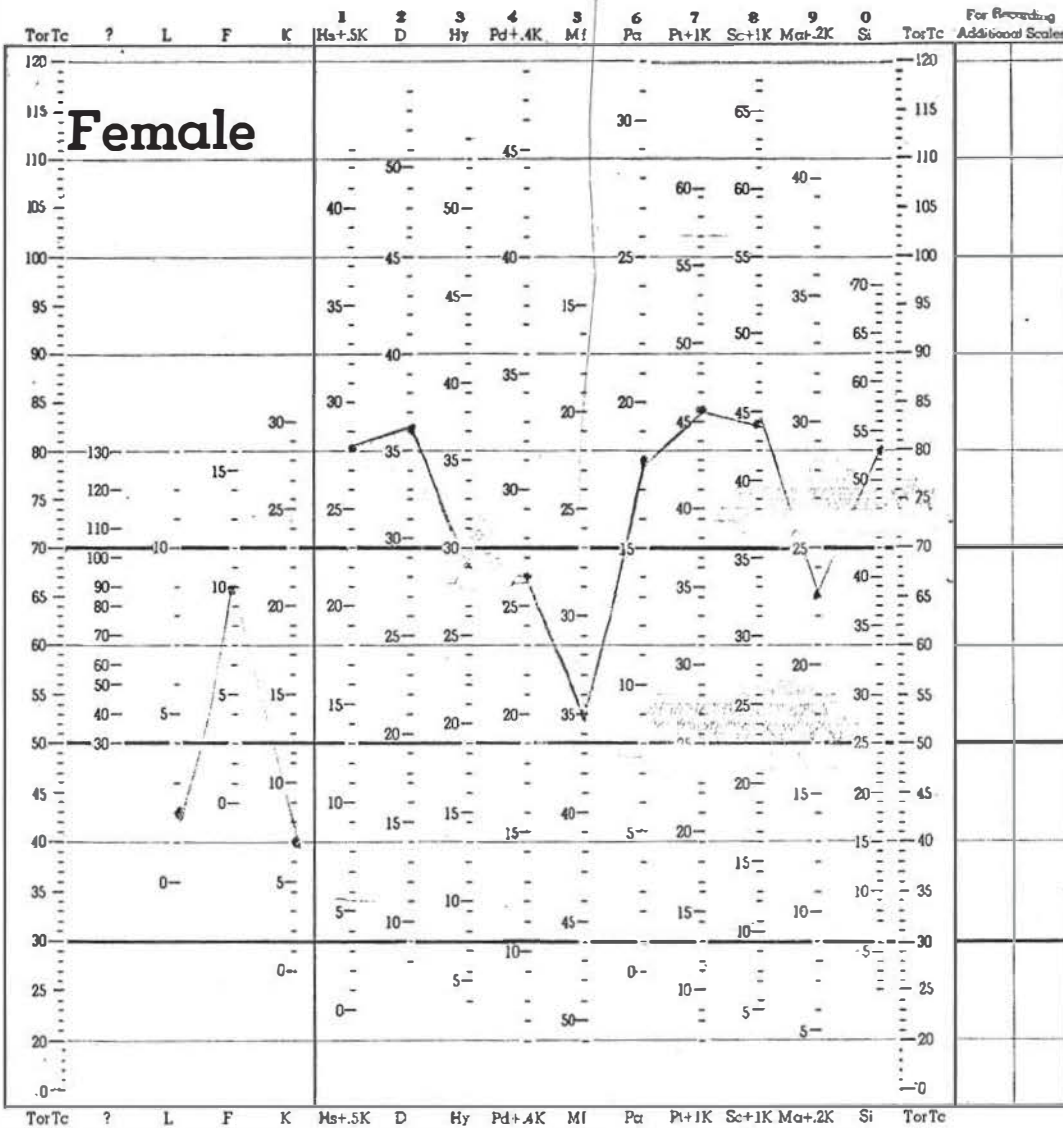
Signature _____

Date _____

~~The~~ Minnesota Multiphasic Personality Inventory

Starke R. Hathaway and J. Charnley McKinley

Scorer's Initials _____



Name _____ Female

Address _____

Occupation _____ Date Tested _____

Education _____ Age 22

Marital Status _____ Referred by _____

NOTES

Fractions of K

K	1	2	3	4
30	15	12	6	6
29	15	12	6	6
28	14	11	6	6
27	14	11	5	5
26	13	10	5	5
25	13	10	5	5
24	12	10	5	5
23	12	9	5	5
22	11	9	4	4
21	11	8	4	4
20	10	8	4	4
19	10	8	4	4
18	9	7	4	4
17	9	7	3	3
16	8	6	3	3
15	8	6	3	3
14	7	6	3	3
13	7	5	3	3
12	6	5	2	2
11	6	4	2	2
10	5	4	2	2
9	5	4	2	2
8	4	3	2	2
7	4	3	1	1
6	3	2	1	1
5	3	2	1	1
4	2	2	1	1
3	2	2	1	1
2	1	1	0	0
1	1	1	0	0
0	0	0	0	0

Raw Score 2 10 7 24 26 27 23 20 11 27 27 23 23

K to be added 4 3 7 3 1

Raw Score with K 28 29 14 30 21 34 30 21 12 30 30 24 24



Signature _____ Date _____

Starke R. Hathaway and J. Charnley McKinley

Female

Address _____

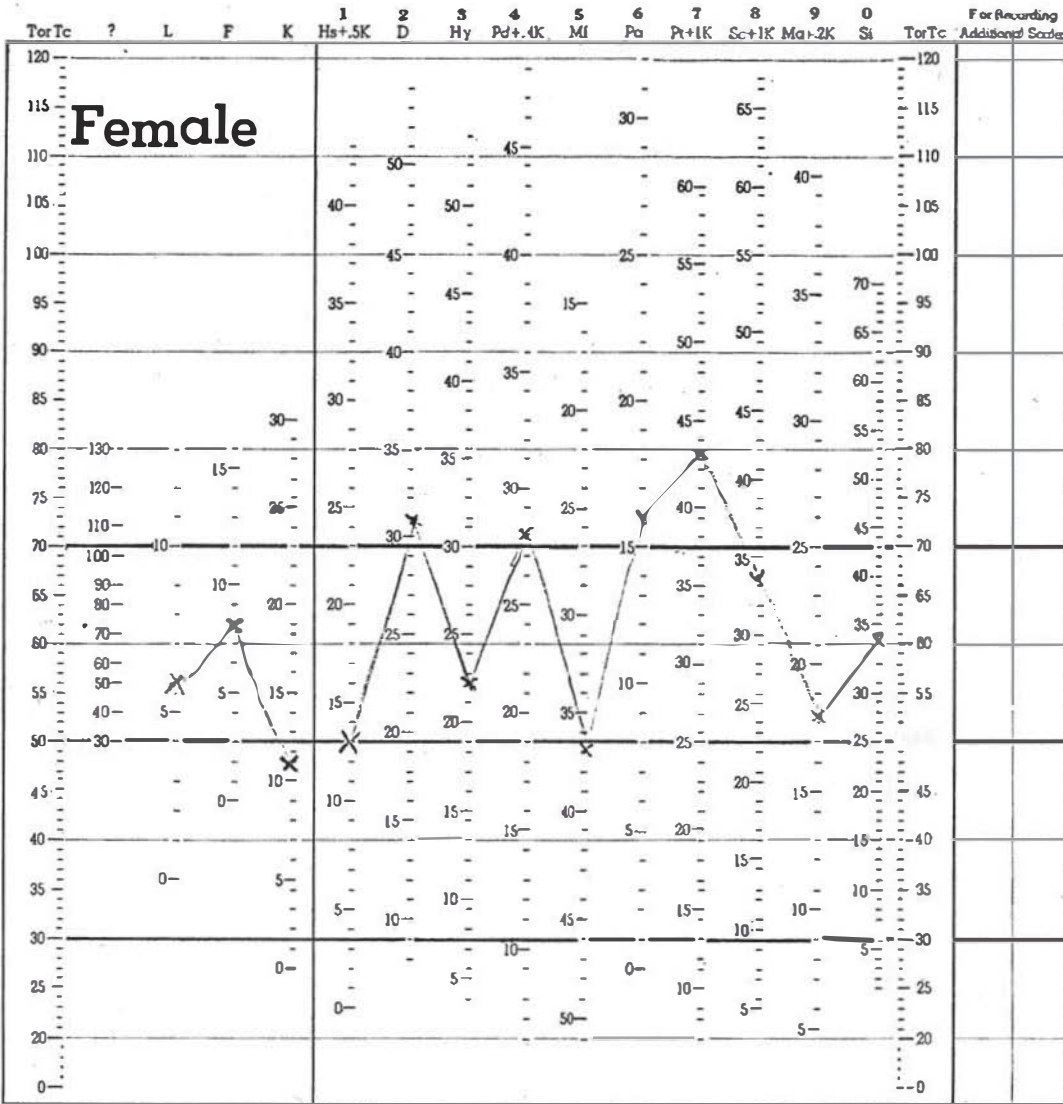
Occupation _____ Date Tested _____

Education _____ Age 21

Marital Status _____ Referred by _____

NOTES

Scorer's Initials _____



Fractions of K			
K	5	4	3
30	15	12	6
29	15	12	6
28	14	11	6
27	14	11	5
26	13	10	5
25	13	10	5
24	12	10	5
23	12	9	5
22	11	9	4
21	11	8	4
20	10	8	4
19	10	8	4
18	9	7	4
17	9	7	3
16	8	6	3
15	8	6	3
14	7	6	3
13	7	5	3
12	6	5	2
11	6	4	2
10	5	4	2
9	5	4	2
8	4	3	2
7	4	3	1
6	3	2	1
5	3	2	1
4	2	2	1
3	2	2	1
2	1	1	0
1	1	1	0
0	0	0	0

Raw Score: 6 8 11 2 36 22 24 29 24 30 25 27 27 27 27 27 27 27 27 27

K to be added: 6 4 11 11 2

Raw Score with K: 12 12 22 13 40 26 35 40 26 41 36 38 39 39 39 39 39 39 39 39



Signature _____ Date _____

The Minnesota Multiphasic Personality Inventory

Starke R. Hathaway and J. Charnley McKinley

Scorer's Initials _____

Name _____

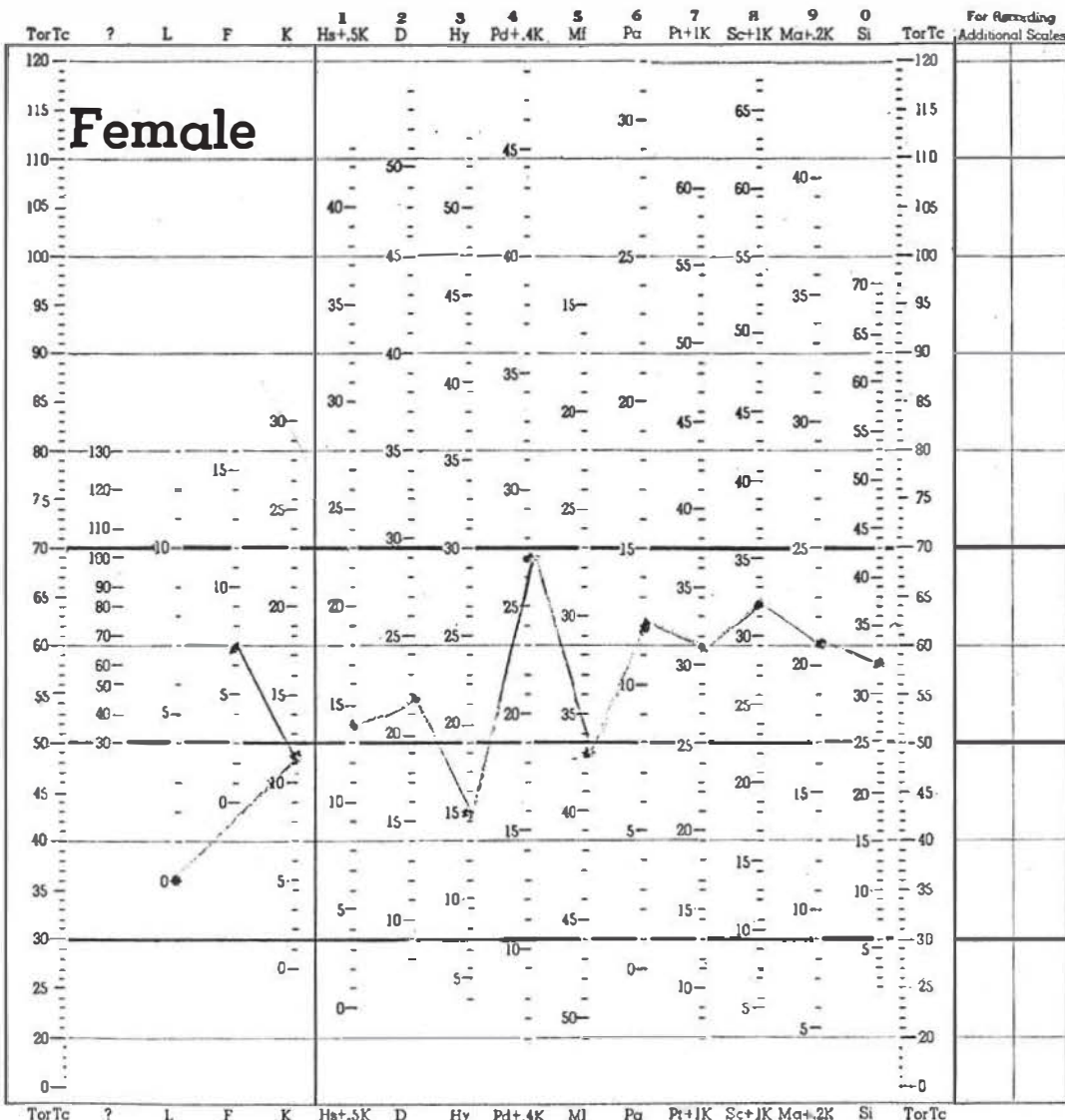
Address _____

Occupation _____ Date Tested _____

Education _____ Age 91

Marital Status _____ Referred by _____

NOTES _____



Fractions of K

K	5	4	3
30	15	12	6
29	15	12	6
28	14	11	6
27	14	11	5
26	13	10	5
25	13	10	5
24	12	10	5
23	12	9	5
22	11	9	4
21	11	8	4
20	10	8	4
19	10	8	4
18	9	7	4
17	9	7	3
16	8	6	3
15	8	6	3
14	7	6	3
13	7	5	3
12	6	5	2
11	6	4	2
10	5	4	2
9	5	4	2
8	4	3	2
7	4	3	1
6	3	2	1
5	3	2	1
4	2	2	1
3	2	2	1
2	1	1	0
1	1	1	0
0	0	0	0

Raw Score 10 8 22 15 32 37 12 19 30 19 33

K to be added 6 5 12 19 2

Raw Score with K 14 27 31 32 21



Signature _____ Date _____

The Minnesota Multiphasic Personality Inventory

Starke R. Hathaway and J. Charnley McKinley

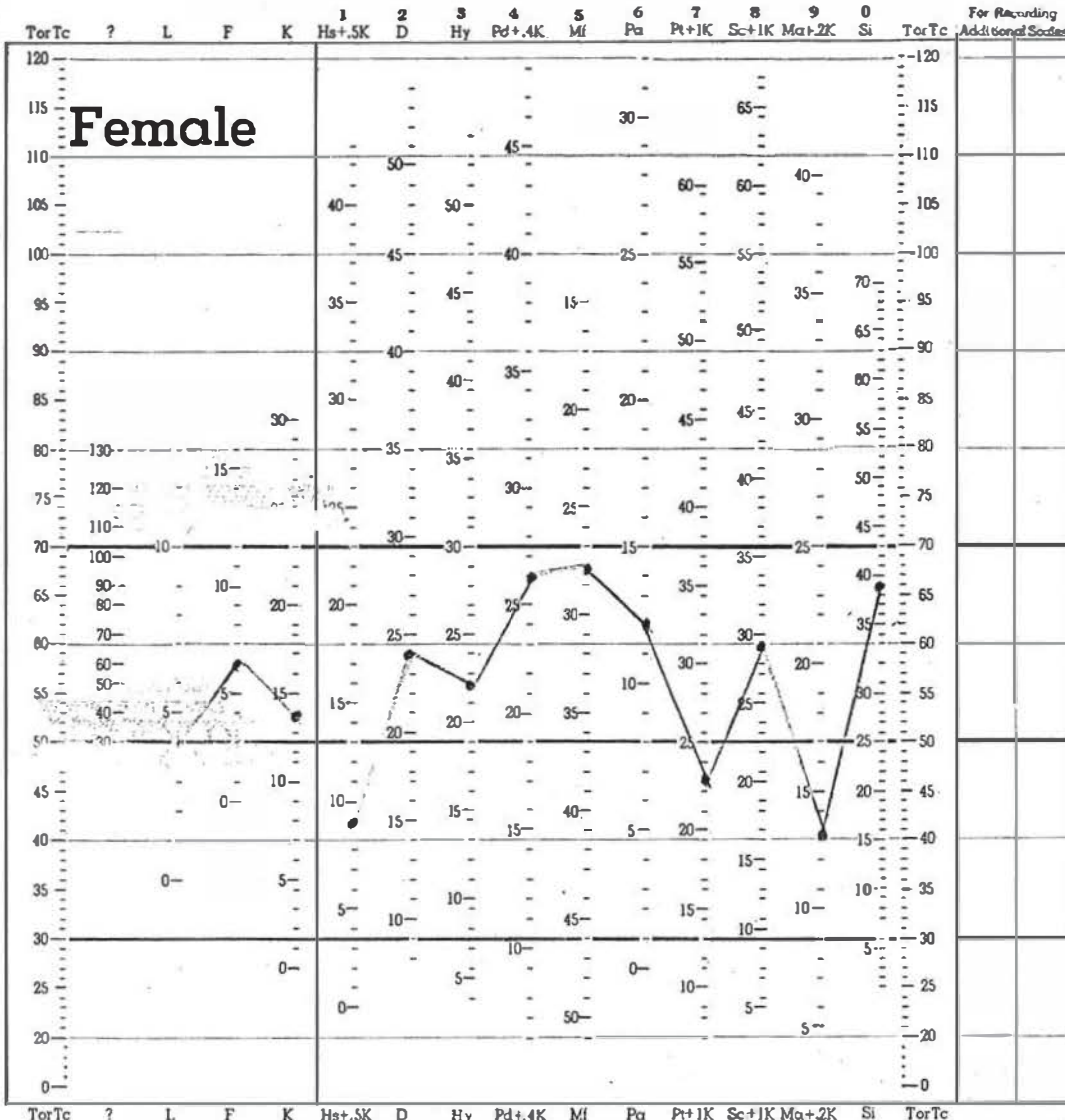
Scorer's Initials _____

Address _____
 Occupation _____ Date Tested _____
 Education _____ Age 28

Female

Marital Status _____ Referred by _____

NOTES



Fractions of K

K	3	4	2
30	15	12	6
29	15	12	6
28	14	11	6
27	14	11	5
26	13	10	5
25	13	10	5
24	12	10	5
23	12	9	5
22	11	9	4
21	11	8	4
20	10	8	4
19	10	8	4
18	9	7	4
17	9	7	3
16	8	6	3
15	8	6	3
14	7	6	3
13	7	5	3
12	6	5	2
11	6	4	2
10	5	4	2
9	5	4	2
8	4	3	2
7	4	3	1
6	3	2	1
5	3	2	1
4	2	2	1
3	2	2	1
2	1	1	0
1	1	1	0
0	0	0	0

Raw Score _____
 K to be added 7
 Raw Score with K 2

4 6 14 2 22 23 20 28 12 9 15 10 29
7 6 14 14 2
2 22 23 29 12



Signature _____ Date _____

The Minnesota Multiphasic Personality Inventory

Starke R. Hathaway and J. Charnley McKinley

Scorer's Initials _____

Name _____

Female

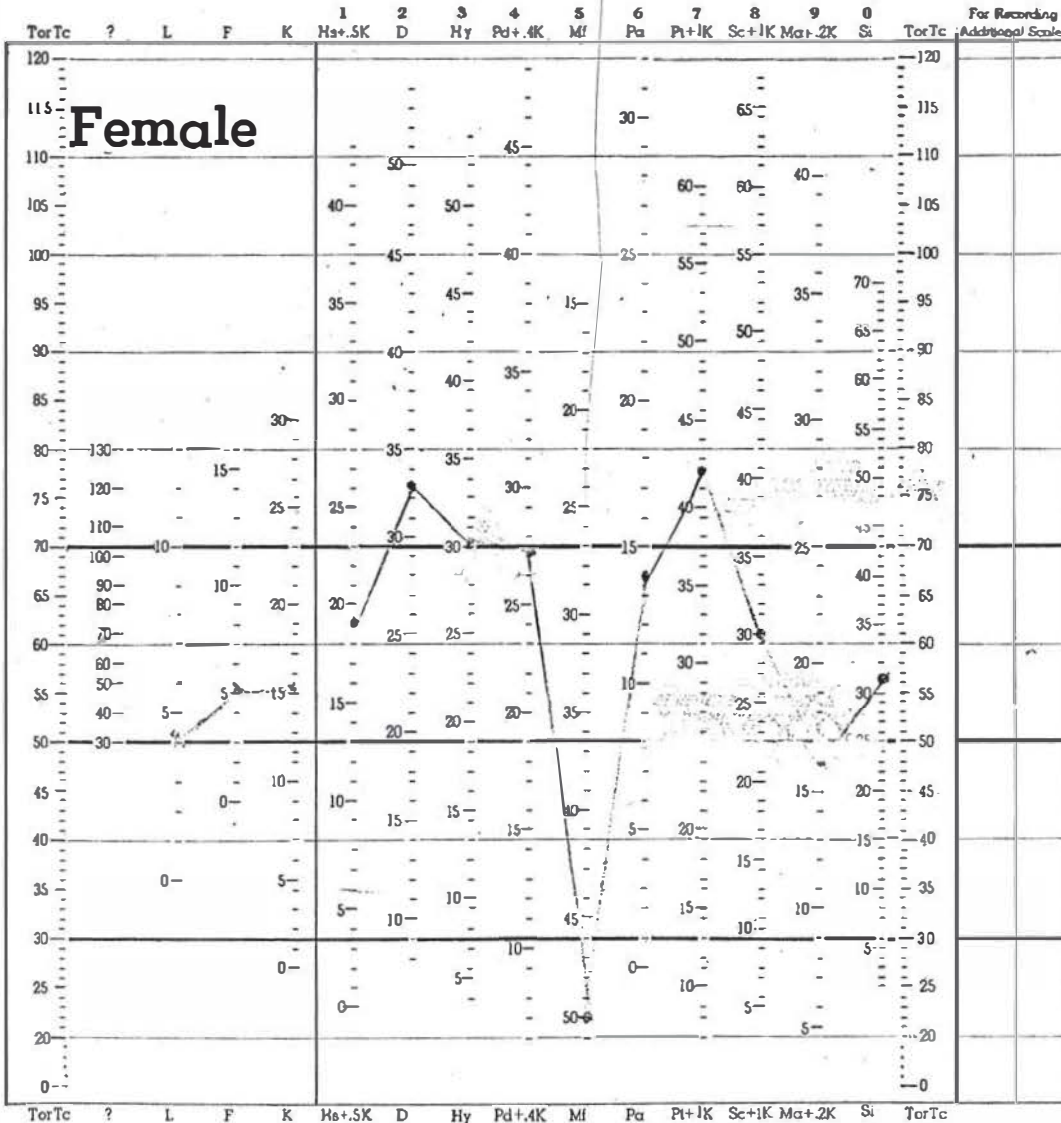
Address _____

Occupation _____ Date Tested _____

Education _____ Age 39

Marital Status _____ Referred by _____

NOTES



Raw Score: 4 5 15 13 33 30 31 56 14 21 15 13 31

K to be added: 8

Raw Score with K: 12 13 25 41 41 38 38 64 22 36 18 16



Signature _____ Date _____