

COMPARISON OF THE MMPI-2 RESTRUCTURED DEMORALIZATION SCALE, DEPRESSION SCALE, AND MALINGERED MOOD DISORDER SCALE IN IDENTIFYING NON-CREDIBLE SYMPTOM REPORTING IN PERSONAL INJURY LITIGANTS AND DISABILITY CLAIMANTS

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A known groups design compared the ability of the 24-item MMPI-2 Restructured Clinical Demoralization Scale (RCd), the 57-item Depression Scale (Scale 2), and the 15-item Malingered Mood Disorder Scale (MMDS) to identify non-credible symptom response sets in 84 personal injury litigants and disability claimants compared to 77 non-litigating head-injured controls. All three scales showed large effect sizes (>0.80). Scale 2 was associated with the largest effect size (2.19), followed by the MMDS (1.65), and the RCd (0.85). Logistic regression analyses revealed that a cutscore of ≥ 28 on the 57-item Scale 2 was associated with high specificity (96.1%) and sensitivity (76.2%), while a cutscore of ≥ 16 on the 24-item RCd was less accurate (87% specificity and 50% sensitivity). Cutscores for the MMDS were not calculated as they were reported in a previous study. Results indicated that like the 15-item MMDS, the 57-item MMPI-2 Scale 2 may provide another empirically derived index with known error rates upon which examiners may rely to investigate hypotheses relative to exaggeration of illness-related behavior and impression management in forensic contexts involving PI litigants and disability claimants.

Keywords: Demoralization Scale; Depression Scale; Restructured Clinical Scales; Malingered Mood Disorder Scale.

INTRODUCTION

The Minnesota Multiphasic Personality Inventory-2 (MMPI-2) is the most frequently used psychological instrument in the United States for individuals undergoing psychological and neuropsychological assessment. Meta-analyses of the MMPI-2 (Rogers, Sewell, & Salekin, 1994; Rogers, Sewell, Martin, & Vitacco, 2003) have demonstrated its efficacy within the forensic context. It has been especially useful in the forensic context where identification of symptom exaggeration or

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