# PERSONALITY CHARACTERISTICS

# OF SEX OFFENDERS

By

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# CHAPTER I

## INTRODUCTION

While the literature has in recent years become replete with studies addressing effects of offenses of a sexual nature, relatively few have focused on comprehending the personality dynamics of the offender, particularly as measured by standardized psychodiagnostic instruments such as the Minnesota Multiphasic Personality Inventory (Hathaway & McKinley, 1940). A major reason appears to be that attempts to develop a valid taxonomy are confounded by (1) the diversity of behaviors included under the category of sex crime, (2) the complexity and diversity of personality characteristics of perpetrators, and (3) the tendency of sex offenders to psychologically distance themselves from their behaviors through denial and other defenses, effectively confounding the interpretation of standardized testing instruments.

Research into victim impact and recovery, and primary prevention (avoidance of vulnerability) dominates the related literature. Such efforts are certainly of great value. As noted by Swift (1979), however, primary prevention efforts may result in displacement rather than prevention. Moreover,

assessment of victim impact is necessarily a post hoc endeavor. Swift (1979) further asserted that prevention programs directed toward alteration of the behaviors of adult perpetrators are the most viable of strategies intended to reduce the occurrence of sex crimes.

Reports of treatment programs designed to rehabilitate offenders have increased in number and in popular appeal. The emphasis in the literature has shifted from case studies and anecdotal observations to behavioral paradigms (e.g. Able, Blanchard, & Becker, 1978, Kelly, 1982;) and treatment with antiandrogenic chemicals (e.g. Gagne, 1981; Cordoba & Chapel, 1983; Berlin & Meinecke, 1981). In the latter instance, treatment typically involves chemical castration and regular monitoring, while the behavioral approaches generally include identification of deviant fantasies by measurement of penile tumescence under stimulus presentation and subsequent application of extinction procedures such as masturbatory satiation. Chemical approaches in particular tend to view sex offenders as a near homogeneous group that may be expected to react to therapeutic efforts similarly. Traditional behaviorists would expect individual differences in response, but it appears that this philosophy may be minimized in the current atmosphere that emphesizes a unilateral approach to treatment. In many cases, such methods are effective, especially if the population is

homogeneous (Malamuth & Check, 1983). Other studies have produced conflicting results. Baxter, Marshall, Barbaree, Davidson, & Malcolm (1984) reported that only in pedophiles is deviant sexual arousal a significant indicator of deviant sexual behavior. Further, Kelly (1982), in evaluating published reports based on 20 different treatment programs, found a wide range of treatment effectiveness and deficiencies, and concluded that successful reorientation of arousal to more socially appropriate stimuli may not constitute successful treatment.

In both behavioral and chemical approaches, the variability of personality dynamics as a mediating or predisposing factor among offenders, and particularly among offender subgroups, is minimized. This minimization may well serve to attenuate the potential for appropriate classification and effective treatment. Numerous studies report diverse personality characteristics among offenders (e.g. Groth, 1981; Meyer 1983), and one study (Malamuth & Check, 1983) suggested that arousal to rape depiction (a major criterion of behavioral studies) was independent of sexual deviancy and aggression but was associated with personality factors. Since most treatment paradigms already appropriately include monitoring for specific regressive tendencies, it is reasonable to suggest that the efficacy of treatment will improve as methodology

increasingly incorporates additional discriminating factors, including knowledge of personality dynamics.

Classification systems of sexual offenders do exist, but the diversity of dynamics within the population of sex offenders precludes direct asessment with standardized instruments. Lanyon (1968) demonstrated significant diversity in both profile pattern and scale elevation of MMPIs completed by felony sex offenders. Overholser and Beck (1985) suggested that differences among rapists and other offenders are blurred by the features they have in common. Meyers (1984) identified rapists and pedophiles according to age of victim and perceived need satisfied by the particular crime, but was unable to infer further distinctions with standardized instruments (MMPI, 16 PF). Anderson and Cook (1983) reported that there was no specific MMPI profile associated with sex offenders. This is not surprising when the diversity of crime as well as the diversity of offender is considered. The various offenses for which a person may be included in the group of sex offenders include rape, lewd molestation, frotturism, exhibitionism, pedophilia, and incest. Further, the act may be homosexual or heterosexual in nature, involve varying degrees of violence, and serve a wide range of purposes.

To better conceptualize sex offenders, within the constraints of a widely-used psychodiagnostic instrument (in this case, the Minnesota Multiphasic Personality Inventory), it seems appropriate to expressly consider the factor that intuitively contributes most to the lack of discriminating ability in other classification efforts, i.e., denial. Sex offenders typically demonstrate a marked tendency to deny in part or wholly the behaviors for which they were convicted (Meisilman, 1978). Since denial does affect personality profiles such as those obtained from the MMPI, and is a common phenomenon within the population of sex offenders, distortion of obtained profiles may be expected in a significant number of cases.

Lanyon and Lutz (1984) demonstrated that denial in a group of offenders (primarily convicted child molesters) can be readily identified through examination of validity scales, and that validity indices can distinguish denial from non-denial groups with a high degree of accuracy. Their method involved categorizing offenders according to the relative magnitude of a variable constructed for each subject by subtracting the F scale elevation from the sum of the L and K scale elevations. In effect, the procedure balances the number of items indicative of unrealistic symptom admission against the total number of items

likely to involve either naive endorsement of laudable characteristics or naive denial of less favorable attributes. The result provides an estimate of the degree of denial with which a particular subject approached the test, with scores nearest zero the least indicative of denial as a pervasive process. Groups were then constructed by using the standard deviation of the distribution as cut off points for high, part, and no denial categories, and the validity of the method was established through comparison to external criteria. This procedure provides a method for examining denial within and across offender groups, and was adopted in the current study.

Further, it is appropriate to consider other potentially discriminating measures that are readily ascertainable by the same diagnostic instrument. Three factors, impulse control, aggression, and social effectiveness are widely held to contribute significantly to the disparity both within and across offender subtypes. Moreover, the relative presence or absence of these factors and their interrelationships suggests different treatment strategies, as each may mediate not only the type of behavior, but the probability of occurrence as well. A tendency toward aggression and poor interpersonal ability may, for example, be inhibited by well developed impulse control. For this reason, concurrent examination may

contribute to the understanding of the complex sexual offender personality type. It is notable that all three factors, as well as denial, are cited as variables effecting or mediating specific sexual behaviors in Meyers' (1983) integrative diagnostic handbook.

Regarding aggression, Howells and Wright (1978) found that the MMPI profiles of aggressive sex offenders are statistically similar to those of offenders convicted of aggressive crimes of a non-sexual nature. Other authors (Megargee, Cook, & Mendelson, 1967; Cohen, Seghorn, & Calmas, 1969) report wide diversity of aggressiveness among subgroups of sex offenders based upon the MMPI and other instruments. In the Cohen et al study, the authors sought to avoid the typical medico-legal typology, focusing on four distinct subtypes within the rapist category (aggressive-sex diffusion, compensatory, displaced aggression, and impulsive), and three distinct subtypes of pedophile (fixated, regressed, aggressive) within the population of a single hospital. A major differentiating factor was adeptness in interpersonal interaction, or social effectiveness. Groth (1981) postulated that rape is a function of hostility, control, and to a lesser degree sexuality, and implied that the two former factors may be mediated to a degree by social effectiveness. Kelly (1982) conceptualized pedophiles as being neither psychotic nor retarded, but

chronically inept in negotiating social relationships. Impulse control is a factor that has been applied to rapists and pedophiles alike (Groth, 1981; Boyer, 1984), again affecting the probability of a particular behavior being realized. Impulse control may be a particularly salient factor in opportunistic rapes of adults and children.

The purpose of the current study was to examine personality profiles of three distinct classifications of sex offenders and a group of felons convicted of non-sexual offenses, and in so doing contribute to the development of a taxonomic system of sex offenders with regard to the standard 13 scales of the MMPI and special scales measuring aggression, impulse control, and social effectiveness. In addition, the influence of denial on observed personality profiles and as a personality factor was expressly considered.

The rationale for the current design is based on the observation that sex offender and sex offense are broad terms that may encompass different behaviors, motivations, and personality types. Due to this diversity, assessment techniques have been unable to differentiate among sub-groups. It was anticipated that by focusing on additional factors and the influence of denial, the discriminating power of the MMPI would be increased, as would the understanding of the personality characteristics of sub-groups of sex

offenders. While specific hypotheses regarding differences in observed personality profiles according to type of offense were not explicitly made, it was anticipated that differences would be observed, ultimately contributing to a more comprehensive understanding of the perpretators of offenses of a sexual nature.

The Minnesota Multiphasic Personality Inventory (Hathaway & McKinley, 1940) was selected as the measurement instrument of choice due its widespread usage and discriminating ability. Kassebaum, Couch, & Slater (1959) demonstrated that the test has a high degree of internal consistancy when relatively large sample sizes are employed, and Nunnally (1962) showed that test profiles of two or more groups can be readily discriminated through the application of discriminate function analysis. The 566-item true-false self-endorsed inventory includes three validity scales (Lie, Frequency, Correction) and ten clinical scales (Hypochondriasis, Depression, Hysteria, Psychopathological deviant, Masculinity-femiminity, Paranoia, Psychasthenia, Schizophrenia, Hypomania, Social Introversion). The special scales employed in the current study are not routinely scored. They, along with many other special scales, were developed by researchers over the years as adjuncts to the basic MMPI scales. Those considered in the current study were

selected due to their appropriateness to sex offenders. The first of the three factors considered, aggression, was inferred from a special scale developed by Wiggins (1966). The 27 item scale is labeled Manifest Hostility. Impulsivity was estimated from a special scale developed by Harris and Lingoes (1955). Labeled Scale 2C, it is an 11-item scale reflecting lack of ego mastery, defective inhibition. The third special factor, social effectiveness, was inferred from Wiggins' (1966) 27-item Social Maladjustment scale. Denial was estimated from observation of records, i.e. by recording purpetrator statements of responsibility at the time of arrest, and in the manner described by Lanyon and Lutz (1984). Their best discriminator was found to be the L+K-F raw score. Appendix 1 provides a more comprehensive discussion of the MMPI and of special scales. Appendix 2 lists the individual items that make up the special scales.

Construction of groups of offenders for comparison was based on victim age rather than on specific behavior in the manner suggested by Gebhard, Gagnon, Pomeroy, and Christenson (1965). This method eliminates the need to rely on either purpetrator or victim accounts of specifics of a crime. Groups then included child molesters, hebephiles (men who have sexually molested pubescent or young post-pubescent females), and rapists of adult females. Neither female nor

homosexual perpetrators were included in the study due to low frequencies of occurrence, prosecution, and conviction.

# CHAPTER II

# METHOD

## Subjects

Subjects in the study included 146 felony offenders currently incarcerated in one of four institutions within the Oklahoma Department of Corrections. There was no active subject involvement. Rather, data was taken from prison records. In accordance with Department of Corrections policy, permission to conduct research from records is a decision of the department rather than of the individuals whose records are used. Hence, informed consent was not a requirement, nor was it pursued. Of the total number of participants, 66 were convicted of rape of adult females (victim age greater than 17), 34 were convicted of rape and/or lewd molestation of pubescent and immediately post-pubescent females (victim age 11 through 17 inclusive), 29 were convicted of sexual crimes against female children (victim age less than 11) and 21 were convicted of non-violent, non-sexual crimes (bogus checks or automobile theft). In all cases, inclusion in the study was based soley on utility, that is, complete and valid records.

Demographic characteristics of the offender population were not considered.

The data from an additional 28 subjects were eliminated due to the high probability of their having intentionally biased the test (F-K > 12). The criterion for eliminating a profile from the analysis for intentional bias in the fake-bad direction was an F-K index of 12 or greater (computed from raw scores). This method was developed by Gough (1950), and consists of subtracting the number of endorsed subtle-lie items (K) from the number of endorsed items indicative of unrealistic symptom admission (F). The ability of the method to identify fake-bad profiles has been well established (Greene, 1980). This procedure was also used as a screening device in the Lanyon & Lutz (1984) study of defensiveness among sex offenders that provided the impetus for denial being expressly considered in the current study; thus its use provides for comparability as well as utility in identifying invalid profiles.

All subjects had been administered the MMPI within 90 days of being received into the prison system. No subject had previously been incarcerated in Oklahoma for sex offenses.

## Procedure

Elevations of all scales were recorded. Many of the test results had been computer generated, and were available only as T scores. For consistency then, as well as standard clinical procedure, all MMPI data were similarly converted (K-corrected where appropriate). Additionally, data for each subject was recorded concerning stated denial at the time of arrest (pre-conviction).

An attempt was made to estimate the degree of impulsivity associated with each crime; however, since arrest records were found to be incomplete and unreliable with regard to this factor, the strategy was abandoned. Further, the lack of reliable data regarding violence precluded examination of this secondary variable. Of the 148 valid subject records, only 93 were complete. Of those with missing data, one or more of the special scales were lacking, but the records were valid and complete with regard to the 13 basic scales.

# CHAPTER III

## RESULTS

The initial analysis was designed to test for differences on MMPI scale elevations among the four offender groups and three denial classifications. Since consideration of the special scales (Sc2c, Soc, Hos) was of secondary interest and the small number of subjects in associated cells reduced the power of the statistical tests, only the 13 basic MMPI scales were included in the primary analysis. Special scales and corollary information were considered subsequently.

With the data sorted by offender group and denial classification, multivariate analysis of variance procedures were applied to scale elevations. Denial was calculated for each subject by subtracting the raw F score from the raw L+K sum in the manner after Lanyon and Lutz (1984). The no-denial classification included all subjects with denial indices less than six. The part-denial classification included subjects with indices ranging from six through 13. Full-denial inclusion was for subjects with indices greater than fourteen. The tests indicated that significant overall differences existed for offender group,

$F(39, 368) = 1.51$, $p<.05$, and for denial classification, $F(26, 246) = 15.71$, $p<.01$. The group by denial overall interaction did not reach statistical significance, $F(78, 734) = .76$, $p>.90$. The $F$ statistic in these instances was derived and tested through the use of the Hotelling-Lawley Trace procedure for multivariate comparisons (SAS, 1982).

The data for each of the 13 MMPI scales were next tested through two way univariate analysis of variance procedures. The only significant offender group main effect was observed with regard to the Hypochondriasis (Hs) scale, $F(3, 136) = 4.25$, $p<.01$. An a posteriori orthogonal procedure for examining differences among several means (Tukey's Studentized Range Test, SAS, 1982), indicated that the mean Hs scale elevation was greater for child molesters than for non-violent control subjects, $q(136) = 11.18$, $p<.05$. Table 1 includes group means and standard deviations for each of the 13 MMPI scales.

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Insert Table 1 about here

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A significant main effect of denial was observed with regard to scales L, F, K, Pa, Pt, Sc, Ma, and Si. Table 2 lists means and standard deviations for subjects within the three denial categories for each of

the 13 MMPI scales. Table 3 includes ANOVA statistics and orthogonal comparisons for the denial main effects.

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Insert Tables 2 and 3 about here

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In none of the two way univariate analyses was the offender group by denial classification interaction observed to be statistically significant. Table 4 lists means and standard deviations of offender groups by denial category.

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Insert Table 4 about here

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The data were subsequently subjected to discriminant function analysis (SAS, 1982) in an effort to predict offender group membership and denial category membership from elevations of the 13 basic MMPI scales. In the former case, with the 13 scales entered as predictor variables and group membership as the criterion, 113 of 148 subjects were correctly classified for a hit rate of .76. When the constructed variable denial was added as a predictor variable, the hit rate improved to .81.

With the 13 MMPI scales as predictors and denial category as the criterion, 143 of 148 subjects were correctly classified for a hit rate of .96. It should be noted that since the denial variable was constructed

from MMPI validity scales (L+F-K) also used as predictor variables, the observed hit rate in the latter discriminant function analysis was likely somewhat inflated. Table 5 summarizes the discriminant function analyses and specifies misclassifications.

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Insert Table 5 about here

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The special scales were next specifically considered. As previously noted, the number of valid protocols with complete data was limited, especially with regard to the special scales. This circumstance, together with selection by offender group and denial category, attenuated the number of subjects in some cells and as a result would have seriously reduced the power of the statistical tests if included in the primary analyses. Therefore special scales were considered separately from the 13 basic MMPI scales. Two way analysis of variance revealed a main effect of denial for each of the three special scales: Sc2c, $F(2, 81) = 18.92$, $p<.01$; Soc, $F(2, 81) = 12.92$, $p<.01$; Hos, $F(2, 81) = 29.68$, $p<.01$. In each case, a posteriori inspection indicated that the mean scale elevation of the no denial subjects was significantly higher than mean elevations of both the part denial and full denial subjects, and that the mean scale elevations of part denial subjects was significantly greater than

comparable elevations of full denial subjects. There were no significant offender group main effects, nor was the offender group by denial category interaction significant for any of the special scales. Table 6 lists means and standard deviations for the special scales.

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Insert Table 6 about here

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It was of interest to examine criminal responsibility as stated at the time of arrest with regard to the different offender types and with regard to the relationship between stated responsibility and the constructed denial variable employed in several analyses. The $\underline{X}2$ test for independent samples was the appropriate method of analysis (Siegel, 1956). Stated responsibility fell conveniently into one of three categories: no responsibility (no involvement in crime), full responsibility (admitted to the alleged criminal behavior), and some responsibility (admitted some involvement, e.g. the victim was willing, offender's memory somewhat impaired due to substance abuse). The data were first analyzed with regard to the frequency of individuals in the four offender groups as classified according to stated responsibility. Considering just the three groups of sex offenders, results indicated that the two factors were not

independent, $\underline{X}2(4) = 38.70, \underline{p} < .01$. The interpretation was that child molesters were more likely to admit responsibility than would be statistically expected, and that violators of adult females were more inclined to deny responsibility. Stated responsibility and the constructed denial variable were found to be independent, $\underline{X}2\ (4) = 4.99, \underline{p} > .05$. The implication is that stated denial at the time of arrest is not related to a tendency toward denial as calculated from MMPI scores.

Table 1

Means and Standard Deviations of 13 MMPI Variables by Offender Group

| Group | n | | Variable | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| | | | L | F | K | Hs | D | Hy | Pd |
| Hebephile | 33 | M | 53.61 | 63.06 | 56.00 | 57.70 | 62.18 | 61.09 | 72.49 |
| | | SD | 10.02 | 12.16 | 10.85 | 12.11 | 11.19 | 8.98 | 12.46 |
| Child molester | 28 | M | 55.21 | 61.36 | 55.50 | 64.32 | 59.68 | 60.28 | 74.90 |
| | | SD | 9.90 | 9.42 | 8.77 | 13.66 | 16.90 | 11.72 | 11.65 |
| Adult rapist | 66 | M | 55.02 | 63.64 | 54.18 | 59.47 | 59.93 | 59.18 | 71.73 |
| | | SD | 7.73 | 10.49 | 10.89 | 12.83 | 11.47 | 10.06 | 13.60 |
| Control | 21 | M | 56.03 | 59.24 | 51.33 | 53.14 | 57.62 | 55.01 | 70.81 |
| | | SD | 7.78 | 8.44 | 8.12 | 11.03 | 9.13 | 9.39 | 6.19 |
| Total | 148 | M | 54.33 | 62.45 | 54.43 | 59.09 | 60.05 | 59.22 | 72.36 |
| | | SD | 8.70 | 10.45 | 10.17 | 12.89 | 12.30 | 10.51 | 12.14 |

(table continues)

| Group | n | | Variable | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | | MF | Pa | Pt | Sc | Ma | Si |
| Hebephile | 33 | M | 59.18 | 65.09 | 58.33 | 65.76 | 60.70 | 53.64 |
| | | SD | 9.02 | 11.30 | 11.34 | 12.02 | 10.97 | 9.07 |
| Child molester | 28 | M | 57.00 | 59.32 | 62.75 | 65.64 | 61.07 | 54.61 |
| | | SD | 8.57 | 14.01 | 17.47 | 17.90 | 8.23 | 10.84 |
| Adult rapist | 66 | M | 56.03 | 64.46 | 60.89 | 67.61 | 66.03 | 54.58 |
| | | SD | 10.14 | 11.53 | 11.53 | 14.42 | 11.44 | 8.61 |
| Control | 21 | M | 57.38 | 62.14 | 60.96 | 61.24 | 64.38 | 54.33 |
| | | SD | 11.34 | 8.94 | 8.29 | 9.15 | 9.75 | 8.92 |
| Total | 148 | M | 57.12 | 63.30 | 60.68 | 65.92 | 63.67 | 54.34 |
| | | SD | 9.78 | 11.75 | 12.42 | 14.07 | 10.74 | 9.13 |

Table 2

Means and Standard Deviations of 13 MMPI Variables by Denial Classification

| Group | n | | Variable | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| | | | L | F | K | Hs | D | Hy | Pd |
| No denial | 33 | M | 50.03 | 74.39 | 43.58 | 57.18 | 62.82 | 57.70 | 72.88 |
| | | SD | 6.02 | 11.35 | 6.40 | 14.94 | 13.19 | 11.11 | 13.34 |
| Part denial | 52 | M | 51.71 | 62.58 | 51.64 | 56.77 | 58.56 | 57.04 | 70.04 |
| | | SD | 6.73 | 6.69 | 6.47 | 12.33 | 11.61 | 10.15 | 10.53 |
| Full denial | 63 | M | 58.75 | 56.09 | 62.47 | 62.02 | 59.84 | 61.82 | 74.02 |
| | | SD | 9.39 | 6.21 | 7.30 | 11.77 | 12.32 | 9.15 | 12.62 |
| Total | 148 | M | 54.33 | 62.45 | 54.43 | 59.09 | 60.05 | 59.22 | 72.36 |
| | | SD | 8.70 | 10.45 | 10.17 | 12.89 | 12.30 | 10.51 | 12.14 |

(table continues)

| Group | n | | Variable | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | | MF | Pa | Pt | Sc | Ma | Si |
| No denial | 33 | M | 59.21 | 72.39 | 63.54 | 75.29 | 68.18 | 62.58 |
| | | SD | 10.17 | 10.93 | 13.99 | 15.78 | 13.26 | 7.54 |
| Part denial | 52 | M | 56.54 | 60.89 | 58.02 | 62.17 | 64.46 | 53.60 |
| | | SD | 8.61 | 11.70 | 12.88 | 13.56 | 9.94 | 7.68 |
| Full denial | 63 | M | 56.48 | 60.52 | 59.95 | 63.62 | 60.65 | 50.64 |
| | | SD | 10.46 | 9.81 | 10.84 | 10.79 | 8.99 | 8.31 |
| Total | 148 | M | 57.12 | 63.30 | 60.68 | 65.92 | 63.67 | 54.34 |
| | | SD | 9.78 | 11.75 | 12.42 | 14.07 | 10.74 | 9.13 |

Table 3

Results of ANOVAs and Orthogonal Comparisons for Denial Effect

| ANOVA | | | | A Posteriori Orthogonal Comparison | | |
|---|---|---|---|---|---|---|
| Variable | df | F | p< | df | α | Result |
| L | 2,136 | 15.11 | .01 | 136 | .05 | Full Denial > Part Denial |
| | | | | | | Full Denial > No Denial |
| F | 2,136 | 50.40 | .01 | 136 | .05 | No Denial > Full Denial |
| | | | | | | No Denial > Part Denial |
| K | 2,136 | 69.87 | .01 | 136 | .05 | Full Denial > Part Denial |
| | | | | | | Full Denial > No Denial |
| | | | | | | Part Denial > No Denial |

(table continues)

| | ANOVA | | | A Posteriori Orthogonal Comparison | | |
|---|---|---|---|---|---|---|
| Variable | df | F | p< | df | α | Result |
| Pa | 2,136 | 12.75 | .01 | 136 | .05 | No Denial > Part Denial |
| | | | | | | No Denial > Full Denial |
| Pt | 2,136 | 3.48 | .05 | 136 | .05 | No significant differences |
| Sc | 2,136 | 13.99 | .01 | 136 | .05 | No Denial > Full Denial |
| | | | | | | No Denial > Part Denial |
| | | | | | | Full Denial > Part Denial |
| Ma | 2,136 | 4.64 | .05 | 136 | .05 | No Denial > Full Denial |
| Si | 2,136 | 22.71 | .01 | 136 | .05 | No Denial > Part Denial |
| | | | | | | No Denial > Full Denial |

Table 4

Means and Standard Deviations of 13 MMPI Variables by Offender Group and Denial Classification

| Group | n | | Variable | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| | | | L | F | K | Hs | D | Hy | Pd |
| Hebephile | | | | | | | | | |
| Full denial | 9 | M | 59.00 | 54.20 | 68.80 | 62.47 | 62.47 | 64.00 | 75.87 |
| | | SD | 10.98 | 6.05 | 7.10 | 9.40 | 10.04 | 6.86 | 9.63 |
| Part denial | 9 | M | 50.00 | 64.22 | 51.78 | 54.78 | 59.22 | 59.00 | 70.33 |
| | | SD | 5.27 | 5.43 | 6.45 | 12.66 | 12.17 | 9.06 | 13.77 |
| No denial | 15 | M | 48.22 | 76.67 | 45.56 | 52.67 | 64.67 | 58.33 | 69.00 |
| | | SD | 7.82 | 11.87 | 7.09 | 13.81 | 12.63 | 11.36 | 15.12 |

(table continues)

| Group | n | | Variable | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| | | | L | F | K | Hs | D | Hy | Pd |
| Child molester | | | | | | | | | |
| Full denial | 15 | M | 58.20 | 56.93 | 61.80 | 64.73 | 57.07 | 62.13 | 77.07 |
| | | SD | 9.87 | 6.36 | 6.38 | 12.12 | 16.44 | 9.16 | 13.26 |
| Part denial | 9 | M | 53.33 | 62.67 | 49.33 | 59.00 | 61.00 | 55.00 | 68.67 |
| | | SD | 10.46 | 7.95 | 3.67 | 13.23 | 18.57 | 14.50 | 7.18 |
| No denial | 4 | M | 48.25 | 75.00 | 45.75 | 74.75 | 66.50 | 65.25 | 80.75 |
| | | SD | 4.03 | 9.45 | 5.12 | 17.21 | 17.02 | 12.31 | 8.77 |

(table continues)

| Group | n | | Variable | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| | | | L | F | K | Hs | D | Hy | Pd |
| Adult rapist | | | | | | | | | |
| Full denial | 25 | M | 59.48 | 57.56 | 62.56 | 62.64 | 61.44 | 62.00 | 72.28 |
| | | SD | 8.73 | 6.31 | 8.51 | 12.84 | 11.56 | 10.83 | 15.07 |
| Part denial | 27 | M | 52.78 | 63.41 | 52.67 | 57.74 | 57.56 | 57.11 | 70.56 |
| | | SD | 5.34 | 6.66 | 7.53 | 12.40 | 9.94 | 8.50 | 11.47 |
| No denial | 14 | M | 51.36 | 74.93 | 42.14 | 57.14 | 61.79 | 58.14 | 73.00 |
| | | SD | 6.17 | 13.40 | 7.05 | 13.38 | 13.93 | 10.93 | 15.44 |

(table continues)

| Group | n | | Variable | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| | | | L | F | K | Hs | D | Hy | Pd |
| Control | | | | | | | | | |
| Full denial | 8 | M | 57.00 | 53.50 | 59.12 | 54.12 | 55.12 | 56.62 | 70.25 |
| | | SD | 8.75 | 5.13 | 4.02 | 10.13 | 8.87 | 6.02 | 6.45 |
| Part denial | 7 | M | 47.71 | 57.14 | 50.43 | 52.71 | 58.43 | 56.86 | 69.43 |
| | | SD | 6.85 | 4.91 | 4.31 | 11.93 | 6.75 | 12.72 | 6.78 |
| No denial | 6 | M | 50.83 | 69.33 | 42.00 | 52.33 | 60.00 | 50.67 | 73.17 |
| | | SD | 3.37 | 6.15 | 4.00 | 13.01 | 12.28 | 8.73 | 5.46 |
| Total | | M | 54.33 | 62.45 | 54.43 | 59.09 | 60.05 | 59.22 | 72.36 |
| | | SD | 8.70 | 10.45 | 10.17 | 12.89 | 12.30 | 10.51 | 12.14 |

(table continues)

| Group | n | | Variable | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | | MF | Pa | Pt | Sc | Ma | Si |
| Hebephile | | | | | | | | |
| Full denial | 9 | M | 55.93 | 60.27 | 58.93 | 64.13 | 58.20 | 50.07 |
| | | SD | 8.28 | 8.28 | 8.09 | 8.99 | 7.84 | 7.94 |
| Part denial | 9 | M | 61.33 | 64.78 | 55.44 | 62.00 | 61.33 | 49.22 |
| | | SD | 8.89 | 9.46 | 10.99 | 13.28 | 11.18 | 5.14 |
| No denial | 15 | M | 62.44 | 73.44 | 60.22 | 72.22 | 64.22 | 64.00 |
| | | SD | 9.48 | 13.37 | 16.28 | 13.86 | 14.93 | 5.07 |

(table continues)

| Group | n | | Variable | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | | MF | Pa | Pt | Sc | Ma | Si |
| Child molester | | | | | | | | |
| Full denial | 15 | M | 57.13 | 57.73 | 66.07 | 65.67 | 59.20 | 52.00 |
| | | SD | 9.66 | 10.12 | 15.37 | 15.96 | 6.12 | 9.64 |
| Part denial | 9 | M | 55.89 | 55.44 | 53.44 | 56.44 | 61.44 | 55.44 |
| | | SD | 4.26 | 16.78 | 19.93 | 16.06 | 8.44 | 11.77 |
| No denial | 4 | M | 59.00 | 74.00 | 71.25 | 86.25 | 67.25 | 62.50 |
| | | SD | 12.96 | 13.86 | 13.20 | 13.65 | 13.25 | 11.68 |

(table continues)

| Group | n | | Variable | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | | MF | Pa | Pt | Sc | Ma | Si |
| Adult rapist | | | | | | | | |
| Full denial | 25 | M | 55.64 | 62.44 | 61.00 | 64.28 | 63.16 | 50.96 |
| | | SD | 11.24 | 10.46 | 9.39 | 8.40 | 11.33 | 8.51 |
| Part denial | 27 | M | 54.93 | 61.93 | 60.15 | 64.85 | 65.96 | 54.63 |
| | | SD | 8.94 | 11.47 | 11.87 | 13.76 | 10.07 | 6.75 |
| No denial | 14 | M | 58.86 | 72.93 | 62.14 | 78.86 | 71.28 | 60.93 |
| | | SD | 10.78 | 10.07 | 14.73 | 18.91 | 13.01 | 8.81 |

(table continues)

| Group | n | | Variable | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | | MF | Pa | Pt | Sc | Ma | Si |
| Control | | | | | | | | |
| Full denial | 8 | M | 58.88 | 60.25 | 58.38 | 56.75 | 60.12 | 48.12 |
| | | SD | 14.21 | 10.28 | 7.96 | 7.27 | 6.13 | 6.29 |
| Part denial | 7 | M | 57.43 | 58.86 | 59.00 | 59.43 | 66.57 | 52.86 |
| | | SD | 10.33 | 4.60 | 6.83 | 8.56 | 9.71 | 6.69 |
| No denial | 6 | M | 55.33 | 68.50 | 66.67 | 69.33 | 67.50 | 64.33 |
| | | SD | 9.75 | 8.78 | 8.64 | 7.61 | 12.93 | 4.93 |
| Total | | M | 57.12 | 63.30 | 60.68 | 65.92 | 63.67 | 54.34 |
| | | SD | 9.78 | 11.75 | 12.42 | 14.07 | 10.74 | 9.13 |

Table 5

Hit Rates and Misclassifications of Three Discriminant Function Analyses

Predictors: L, F, K, Hs, D, Hy, Pd, MF, Pa, Pt, Sc, Ma, Si

Criterion: Offender group membership[a]

Hit rate: .76

Number of Classifications into Group

| | From | | | | |
|---|---|---|---|---|---|
| Group | 1 | 2 | 3 | 4 | Total Errors |
| 1 | 27 | 0 | 2 | 4 | 6 |
| 2 | 4 | 19 | 2 | 3 | 9 |
| 3 | 10 | 6 | 47 | 3 | 19 |
| 4 | 1 | 0 | 0 | 20 | 1 |
| Total Errors | 15 | 6 | 4 | 10 | 35 |

(table continues)

Predictors: L, F, K, Hs, D, Hy, Pd, MF, Pa, Pt, Sc, Ma, Si, Denial

Criterion: Offender group membership[a]

Hit rate: .81

Number of Classifications into Group

| | From | | | | |
|---|---|---|---|---|---|
| Group | 1 | 2 | 3 | 4 | Total Errors |
| 1 | 28 | 0 | 3 | 2 | 5 |
| 2 | 2 | 24 | 0 | 2 | 4 |
| 3 | 8 | 8 | 48 | 2 | 18 |
| 4 | 1 | 0 | 0 | 20 | 1 |
| Total Errors | 11 | 8 | 3 | 6 | 28 |

(table continues)

Predictors: L, F, K, Hs, D, Hy, Pd, MF, Pa, Pt, Sc, Ma, Si

Criterion: Denial Classification[b]

Hit rate: .96

Number of Classifications into Denial Classification

| | From | | | |
|---|---|---|---|---|
| Group | 1 | 2 | 3 | Total Errors |
| 1 | 33 | 0 | 0 | 0 |
| 2 | 1 | 50 | 1 | 2 |
| 3 | 0 | 3 | 60 | 3 |
| Total Errors | 1 | 3 | 1 | 5 |

[a]1 = hebephile
2 = child molester
3 = adult rapist
4 = control

[b]1 = no denial
2 = part denial
3 = full denial

Table 6

Means and Standard Deviations of Special Scales by Offender Group and Denial Classification

| Group | | Variable | | | | | |
|---|---|---|---|---|---|---|---|
| | | Sc2c | n | Soc | n | Hos | n |
| Hebephile | | | | | | | |
| Full denial | M | 48.88 | 8 | 49.45 | 11 | 43.55 | 11 |
| | SD | 8.17 | | 7.74 | | 11.73 | |
| Part denial | M | 52.86 | 7 | 51.22 | 9 | 50.50 | 8 |
| | SD | 11.36 | | 3.23 | | 9.90 | |
| No denial | M | 70.43 | 7 | 63.00 | 8 | 61.75 | 8 |
| | SD | 14.33 | | 8.26 | | 12.78 | |
| Total | M | 57.10 | 22 | 53.89 | 28 | 51.00 | 27 |
| | SD | 11.14 | | 6.44 | | 11.50 | |

(table continues)

| Group | | Variable | | | | | |
|---|---|---|---|---|---|---|---|
| | | Sc2c | n | Soc | n | Hos | n |
| Child molester | | | | | | | |
| Full denial | M | 45.55 | 11 | 51.93 | 14 | 41.71 | 14 |
| | SD | 7.53 | | 8.84 | | 6.54 | |
| Part denial | M | 53.83 | 6 | 54.86 | 7 | 46.67 | 6 |
| | SD | 9.20 | | 14.45 | | 8.89 | |
| No denial | M | 66.50 | 2 | 60.00 | 3 | 65.67 | 3 |
| | SD | 9.19 | | 8.89 | | 8.33 | |
| Total | M | 50.37 | 19 | 53.79 | 24 | 46.13 | 23 |
| | SD | 8.23 | | 10.48 | | 7.39 | |

(table continues)

| Group | | Variable | | | | | |
|---|---|---|---|---|---|---|---|
| | | Sc2c | n | Soc | n | Hos | n |
| Adult rapist | | | | | | | |
| Full denial | M | 51.23 | 13 | 50.11 | 18 | 43.12 | 17 |
| | SD | 18.78 | | 10.29 | | 9.78 | |
| Part denial | M | 55.53 | 15 | 54.52 | 25 | 51.46 | 24 |
| | SD | 8.31 | | 9.88 | | 11.01 | |
| No denial | M | 73.38 | 8 | 63.78 | 9 | 58.11 | 9 |
| | SD | 10.34 | | 11.21 | | 8.95 | |
| Total | M | 57.94 | 36 | 55.60 | 52 | 49.82 | 50 |
| | SD | 12.54 | | 10.25 | | 10.22 | |

(table continues)

| Group | | Variable | | | | | |
|---|---|---|---|---|---|---|---|
| | | Sc2c | n | Soc | n | Hos | n |
| Control | | | | | | | |
| Full denial | M | 48.14 | 7 | 48.57 | 7 | 45.88 | 7 |
| | SD | 6.84 | | 7.35 | | 3.98 | |
| Part denial | M | 60.25 | 4 | 54.50 | 4 | 50.50 | 4 |
| | SD | 5.32 | | 11.24 | | 5.00 | |
| No denial | M | 66.60 | 5 | 62.40 | 5 | 56.60 | 5 |
| | SD | 13.13 | | 5.37 | | 6.23 | |
| Total | M | 56.93 | 16 | 54.37 | 16 | 50.38 | 16 |
| | SD | 8.43 | | 7.70 | | 4.94 | |

(table continues)

| Group | | Variable | | | | | |
|---|---|---|---|---|---|---|---|
| | | Sc2c | n | Soc | n | Hos | n |
| Total full denial | M | 48.59 | 39 | 50.26 | 50 | 52.98 | 49 |
| | SD | 11.28 | | 8.91 | | 8.46 | |
| Total part denial | M | 55.22 | 32 | 53.91 | 45 | 50.50 | 42 |
| | SD | 8.77 | | 9.38 | | 9.92 | |
| Total no denial | M | 70.25 | 22 | 62.80 | 25 | 59.88 | 25 |
| | SD | 10.47 | | 8.82 | | 9.96 | |
| All subjects | M | 56.00 | 93 | 54.24 | 120 | 49.44 | 116 |
| | SD | 13.88 | | 10.19 | | 11.29 | |

# CHAPTER IV

# DISCUSSION

While there was a significant overall difference among offender groups when the 13 MMPI scales were considered collectively, very little consistent variability was observed among the four groups with regard to individual scales. It was noted that the elevation of the Hypochondriasis (Hs) scale was greater for child molesters than for subjects convicted of non-violent, non-sexual crimes. The Hs scale is a stable, trait-type measure (Lachar, 1974) that suggests the operation of somatization defenses. The mean elevation for child molesters did not reach the critical level of 70 T, but the implication is that men in the sample who make sexual victims of children may be more inclined toward such processes. In light of statistical significance on only one of 13 scales, it must be concluded that there was very little consistent difference in personality characteristics of the four types of offenders, as measured with the MMPI.

It was, however, determined that offender group membership could be predicted at a level much greater than chance by using the MMPI scale elevations as predictor variables. This observation suggests that the

differences among the offender groups that contributed to a significant MANOVA statistic did make prediction possible despite the lack of significance considering individual scales other than the one noted. Further analysis, perhaps with a less stringent criterion for rejection of the null hypothesis and an increased number of subjects, would aid in the delineation variables of the that contribute to the ability to discriminate offender types.

More notable differences were observed when groups were constructed according to level of denial as calculated from validity scale configurations (L+K-F). Subjects in the no denial classification had significantly greater mean elevations on validity scale F and clinical scales Pa, Pt, Sc, Ma, and Si. These scales all involve admission of symptoms; endorsements beyond a critical level generally are associated with psychosis or other severe mental disorders. The two denial groups obtained elevations significantly higher than the no denial group on validity scales L and K. Both scales involve unwillingness to admit to symptoms or perceived inadequacies. The relationship between degree of denial and admission of symptoms was linear with regard to validity scales L and K in that the mean elevation of the full denial group was significantly greater than that of the part denial group, and, as noted above, both were significantly greater than the

mean elevations of the no denial group. An exception was observed regarding the Sc scale, in which the mean elevation of the full denial group was significantly greater than the comparable measure for the part denial group.

The ability to predict denial group membership using MMPI scales as predictors was established and was observed to be highly accurate. This was not an unexpected phenomonon, as the validity scales used to construct denial classifications were also used along with the clinical scales as predictors, but does provide a method of ascertaining the prevalence of denial without depending upon a subject's statement of degree of responsibility for a specific behavior.

The three special scales employed to measure social skills (Soc), aggression (Hos), and poor impulse control (Sc2b) respectively, were not observed to differ significantly across offender groups. Regarding denial, however, a linear relationship was again observed on each of the three special scales. Mean elevations of the no denial group were greater than the mean elevations of both the part denial and full denial groups, and the elevations of the part denial group were of greater magnitude than those of the full denial group. As with many of the traditional clinical scales, elevations on the special scales involve admission of symptoms. It would be of interest to associate

elevations on the special scales with external behavioral criteria specific to each scale in order to operationalize and validate their meaning. While such a procedure proved futile in the current study due to the inadequacy of records associated with specific criminal behavior, future research, possibly involving behavioral techniques, could be of value.

One alternative way to examine the group data is the high-point pair method. This practice is less sound statistically than analyses previously described, but is widely used in clinical practice and may help in the conceptualization of different type offenders. High-point pairs are simply the two highest clinical scale elevations that equal or exceed 70 T. For example, a profile with scale elevations of 80 T on Scale 8 (Sc) and 73 T on Scale 2 (D) would be referred to as an 8-2 profile, and interpretation would primarily be in terms of these two scales. In the event that only one scale reaches the criterion of 70 T (profile spikes), interpretation is typically based primarily on the one significant elevation. Extensive research into the clinical interpretation of high-point pairs and single-point elevations has been compiled and reported by several authors (e.g. Greene, 1980; Lachar, 1974) to provide cookbook utility.

The mean profile for all subjects was found to be of the single-point variety, a 4-spike. Correlates of

this Psychopathic Deviate scale include impulsive behavior, rebelliousness, problems with authority figures, impairment in social relationships, poorly controlled anger, substance abuse, and lack of insight (Greene, 1980). Persons obtaining such profiles are generally very poor therapy candidates. In considering whether and in what manner the offender groups vary from this general (and not unexpected) pattern, it is seen that the mean profiles are all highly similar, that is not containing any scale elevations of 70 T with the exception of Scale 4 in each case. Not even in the case of the relatively high mean Hs scale of Child Molesters did the elevation reach the criteria for high-point pair interpretation.

The inital implication from the high-point perspective is that regardless of type of offense, the most prominent personality characteristic of incarcerated felony offenders is a pervasive antisocial inclination. This interpretation is consistent with the applied philosophy of Able et al (1978) that views sex offenders as a near homogeneous group, and can be extended to support the utilization of chemical and other aversive treatment techniques for this resistant population as described by many researchers (Gagne, 1981; Cordoba & Chapel, 1983; Berlin & Meinecke, 1981).

However, more prominent differences are observed in the high-point pair inspection of mean profiles by

degree of denial. Specifically, the mean profiles of no denial and part denial subjects remain 4-spikes, but elevations exceeding 70 T are found on the Sc (8), Pd (4), and Pa (6) scales for subjects in the no denial category. The 8-4 profile clinical interpretation includes chronic schizoid adjustment, social withdrawal, difficulty modulating and/or expressing anger, poor judgment, and problems in logic and thinking (Greene, 1980). This description of personality is considerably different from that offered previously of the typical criminal, and implies that for such offenders alternatives to incarceration such as group and individual psychotherapy, psychosocial education, and treatment with anti-psychotic medications may be both appropriate and effective.

Loking further into high-point pairs according to degree of denial, it is seen from the means listed in Table 4 that for the each of the three sex offender groups, the mean profile for full and part denial subjects approximates the 4-spike configuration, and that in each case, the mean high-point profile for no denial subjects included significant elevations on Schizophrenia (8) and Paranoia (6) scales. The high-point pair interpretation of an 8-6 profile contains more psychotic-like correlates than either the 4-spike or 8-4 profiles, including delusions,

significant personal stress, excessive rumination, and general social inappropriateness (Greene, 1980). The mean profile for the control group was a 4-spike across all levels of denial.

Implications from the high-point inspection are that while sex offenders may be homogeneous in some aspects of personality, they may operate with more psychotic-like characteristics than other types of offenders and these processes may be masked by the pervasive tendency toward denial. Further research is needed in order to ascertain the masking role of denial on MMPI profiles in general as well as for sex offenders specifically. Moreover, further differences among sex offenders may be discovered by analyzing a greater number of profiles with very low denial indexes.

The data suggest that the overall hypothesis that different types of sex offenders would display different personality profiles was not supported as measured by standard or special scales of the MMPI. However, the observation that offender group membership could be predicted accurately through discriminate function analysis indicates clearly that there were distinctive, consistent differences that were not detectable with analysis of variance procedures. Increasing the power of statistical tests by including a greater number of subjects in the sample would likely

produce more readily interpretable results. For current purposes, reinspection of the data with an eye for trends reveals that significant differences would have been observed on scales F, Hy, Sc and Ma had alpha been set at .25 rather than .05. One particularly noteworthy observation is that the Child Molester group obtained the highest elevation on the Hysteria (Hy) scale. This group also had the highest Hypochondriasis (Hs) elevation. Considered together, the two scales are often thought to be descriptive of a psychological process characterized by somatic complaints, anxiety, and emotional lability (Green, 1980). Further conjecture is not warranted. However, it is suggested that future research focus on the scales noted, and special attention be given to the possibility of a psychological process typified by chronic characterological distress including somatization, anxiety, and depression distinguishing Child Molesters from other sex offenders.

The saliency of the constructed denial variable was not wholly expected, and does have implications. The lack of a significant interaction between offender group and degree of denial indicates that the tendency toward denial applies to each of the four classifications of offenders in the current study. That is, denial appears to be independent of type of offense, but may represent a valuable way of

conceptualizing offenders in general. The observation that degree of denial and nonadmission of symptoms are strongly related is predictable; it was the pervasiveness of the the near linear effect of denial on several scales, while profile validity as derived by established clinical procedure ($\underline{F}-\underline{K} < 12$) was maintained that is noteworthy. The implication is that denial represents a readily quantifiable personality characteristic rather than being simply the nonadmission of a specific behavior. It was noted previously that stated denial at time of arrest and the constructed denial variable are independent. It is not reasonable to expect honesty from persons accused of felony crimes, especially when the judical appeal process may involve the original plea. Examination of validity scale configuration as currently described may provide a method of establishing whether an individual's statement represents specific denial or denial as a pervasive personality characteristic. Certainly, a self-image not clouded by denial of inadequacies is important therapeutically. Periodic readministration of the MMPI with examination of the validity configuration would be valuable in monitoring progress unobtrusively and without relying on subjective reports.

It is acknowledged that the MMPI as an inventory of personality characteristics and as a research tool

has drawbacks. Specifically, it is a long, unwieldy instrument that requires consistency and sustained attention to complete. Further, validity procedures notwithstanding, the test is susceptible to some degree of intentional bias, and interpretations of scale elevations are not always consistent with observed behavior. The test is among the best available to behavioral scientists, however, and is in widespread use. Its practicality and utility may be enhanced in future research efforts by establishing external criteria of scale interpretations in the manner after Lanyon and Lutz (1984), and by using it in conjunction with behavioral observation techniques. Future research intended to identify specific personality characteristics and patterns among offenders might find alternative measurement instruments such as projective tests and behaviorally defined manifestations of particular personality traits as external criteria valuable additions to self-report questionnaires. These additions would help to negate response bias and likely could identify some characteristics among even the most oppositional and defensive of subjects.

A note on generalizability is also in order. The current study involved subjects that were special in several aspects. First, the subject pool was limited to men in one of four Oklahoma prisons. In addition to bias in geographic origin this limits the subject pool

to men who were apprehended, convicted, and incarcerated. Sex criminals with more resourses, whether emotional, cognitive, or fiscal, may not behave or endorse personality inventories in a similar manner. Further, incomplete and invalid profiles were not included in the analysis, so only the data from individuals willing to consciously apply thenselves contributed to the interpretations that were offered. For these reasons, it is suggested that generalizations to other populations of sex offenders should be made conservatively.

Results of the current study imply that there is practical value in focusing research and ultimately prevention efforts on the source of the sex crimes as suggested by Swift (1979), but that the theoretical approach and methodology involved are in need of refinement and expansion. Regarding theory, it may be the case that a major source of variability is within rather than across offender groups, which suggests that assessment and consideration of individual differences be integral components of treatment plans. Generally, it is concluded that there are measurable differences in personality characteristics of different types of sex offenders, but further research is necessary to clearly ascertain the exact nature of the differences. This interpretation may explain both why taxonomy efforts and treatment paradigms have been generally

nonproductive, in that the differences among offenders do exist, but are subtle and difficult to ferret out.

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# APPENDIX A

## DESCRIPTION OF THE STANDARD AND SPECIAL SCALES OF THE MINNESOTA MULTIPHASIC PERSONALITY INVENTORY

The Minnesota Multiphasic Personality Inventory (MMPI) was developed in 1940 by Hathaway and McKinley in an effort to produce an empirically-based self-endorsed instrument for personality assessment. Since that time, more than 6000 references on MMPI research and clinical applications have been produced (Greene, 1980), making it one of the most widely used psychometric instruments in existence.

The inventory consists of 566 simple declarative statements, each of which is endorsed true or false as applied to the respondent. Omissions are discouraged, but are not considered significant if less than 30 in number occur in a given profile. Each true or false endorsement may contribute to one or more of three validity scales or one or more of ten clinical scales. Validity scales, in addition to Cannot say (?) or the ommission scale, include Lie (L) Frequency (F), and Correction (K).

Validity, in this case, actually refers to the type of reliability known as internal consistency, or

the degree to which a respondent endorses statements in a consistent manner throughout the test. The Lie scale consists of 15 items that emphasize culturally laudable but rarely attained characteristics, and tends to identify individuals deliberately trying to present the most socially desirable image. The Frequency scale is made up of 64 items rarely endorsed in one direction by non-psychiatric subjects, but often so scored by mental hospital inpatients. The Correction scale consists of 30 items that are thought to estimate defensiveness, and is used to adjust other scales upward in addition to its use as part of the validity configuration. A profile is considered invalid if the L scale exceeds a raw score of ten or if raw F minus K is greater than or equal to 12.

The first of the ten clinical scales, Hypochondriasis (Hs), consists of 33 items reflecting somatic complaints and the operation of somatic defenses. Depression (D), is a 60-item scale that measures poor morale, moodiness, and feelings of hopelessness and despair. The 60 items in the Hysteria (Hs) scale measure the prevalence of conversion symptoms. The Psychological deviate (Pd) scale identifies persons with characterological problems including inadequate impulse control, social adjustment, and frustration tolerance. The Masculinity-Femininity (M-F) scale, 60 items, was

constructed to identify homoerotic tendencies, but is a better measure of range of interests and of identification with gender stereotypes (Lachar, 1974). Paranoia (Pa) is an actuaraly-based 40-item scale that measures prominent paranoid features including ideas of reference, delusional beliefs, and feelings of persecution and grandiosity. The Psychasthenia (Pt) scale consists of 48 items related to anxiety, extreme sensitivity, and obsessive/compulsive tendencies. The Schizophrenia (Sc) scale, 78 items, measures characteristics that discriminate normal persons from schizophrenics, such as unusual thought processes, feelings of social alienation, peculiar perceptions, and lack of ego mastery. The Hypomania (Ma) scale consists of 46 items that reflect expansiveness, activity level, and excitability. The final scale, Social Introversion (Si), includes 70 items that estimate comfort in interpersonal relationships, or an introversion/extroversion component of social orientation. Scores for all scales are typically converted to T scores with a mean of 50 and standard deviation of 10 for interpretation. Scales Hs, Pd, Pt, Sc, and Ma are adjusted upward for defensiveness by adding a percentage of K prior to conversion to T scores. Clinical interpretation is based upon scale elevations. Those scales which deviate from established means by two standard deviations (20 T) are considered

highly significant. Often, the configuration of two or more scale elevations is the basis for interpretation or diagnosis, with the higher elevation scale considered as being mediated by the next highest.

Since the development of the MMPI, there has been extensive interest in the derivation of additional scales, with the rationale that if grouped appropriately, items in the inventory could predict or identify specific behaviors or characteristics. Dahlstrom, Welsh, and Dahlstrom (1975) catalogued 454 such scales. The original MMPI was empirically constructed with only minimal regard to item content; many researchers believed that attending to specific content would provide for additional applications. Examples of this type approach are the Wiggins Content Scales (Wiggins, 1966), in which the 566 MMPI items were grouped into 13 independent scales based solely on item content. Other special scales have been derived from cluster analysis (Stein, 1968), factor analysis (Welsh, 1965), and correlation with specific syndromes such as overcontrolled hostility (Megargee & Mendelsohn, 1962) and lower back pain (Hanvik, 1951).

The special scales employed in the current study were selected for their relevance to sex offenders. They include two of the Wiggins content scales, Social Maladjustment (SOC) and Manifest Hostility (HOS), and one of the impulse-related scales developed by Harris

and Lingoes (1955, 1968), Lack of ego mastery, defective inhibition (Sc2c).

Social Maladjustment (Wiggins, 1966) is a 27-item scale in which the endorsed item content suggests lack of social skill and poise in social situations. Individuals with high scores on this scale are often socially isolated and defensive. The Manifest Hostility scale is made up of 27 items that measure admission of anger, resentment, limited self-control, and similar characteristics associated with antisocial behavior. Both scales were validated on normal and psychiatric samples (Wigins, 1966), and have been shown to generalize to other populations (Wiggins, Goldberg, & Applebaum, 1971; Mezzich, Damarin, & Erikson, 1974). It is important to note, however, that content scales rely on the admission of symptoms, and thus are susceptible to manipulation in either a fake-good or fake-bad direction.

The impulsivity measure, Sc2c (Harris & Lingoes, 1955, 1968), is a subscale of the Schizophrenia scale that relates to lack of ego mastery. The scale is judged to be indicative of defective inhibition of impulse. Harris and Lingoes (1955) reported that outcome research supported their hypotheses of the reliability of this measure. Further, Lingoes (1960) reported in a factor analytic study that Sc2b was strongly related to loss of emotional and impulse

control and inadequate control mechanisms. Similar interpretations were reported by Graham (1977). The scale was based upon cluster analysis of item content. The susceptibility to intentional response set is applicable.

## APPENDIX B

## ITEMS INCLUDED IN THE MMPI SPECIAL SCALES

I. Social maladjustment (Wiggins, 1966).

True (13 items)

52. I prefer to pass by school friends, or people I know but have not seen for a long time, unless they speak to me first.

171. It makes me uncomfortable to put on a stunt at a party even when others are doing the same sort of things.

172. I frequently have to fight against showing that I am bashful.

180. I find it hard to talk when I meet new people.

201. I wish I were not so shy.

267. When in a group of people I have trouble thinking of the right things to talk about.

292. I am likely not to speak to people until they speak to me.

304. In school I found it very hard to talk before the class.

377. At parties I am more likely to sit by myself or with just one other person than to join in with the crowd.

384. I feel unable to tell anyone all about myself.

453. When I was a child I didn't care to be a member of a crowd or gang.

455. I am quite often not in on the the gossip and talk of the group I belong to.

509. I sometimes finnd it hard to stick up for my rights because I am so reserved.

False (14 items)

57. I am a good mixer.

91. I do not mind being made fun of.

99. I like to go to parties and other affairs where there is lots of loud fun.

309. I seem to make friends about as quickly as others do.

371. I am not unusually self-conscious.

391. I love to go to dances.

449. I enjoy social gatherings just to be with people.

450. I enjoy the excitment of a crowd.

479. I do not mind meeting strangers.

482. While in trains, busses, etc., I often talk to strangers.

502. I like to let people know where I stand on things.

520. I strongly defend my own opinions as a rule.

521. In a group of people I would not be embarrassed to be called upon to start a discussion or give an opinion about something I know well.

547. I like parties and socials.

II. Manifest hostility (Wiggins, 1966).

True (27 items)

28. When someone does me a wrong I feel I should pay him back if I can, just for the priniciple of the thing.
39. At times I feel like smashing things.
80. I sometimes tease animals.
89. It takes a lot of argument to convince most people of the truth.
109. Some people are so bossy that I feel like doing the opposite of what they request, even though I know they are right.
129. Often I can't understand why I have been so cross and grouchy.
139. Sometimes I feel as if I must injure either myself or someone else.
145. At times I feel like picking a fist fight with someone.
162. I resent having anyone take me in so cleverly that I have had to admit that it was one on me.
218. It does not bother me particularly to see animals suffer.
269. I can easily make other people afraid of me, and sometimes do for the fun of it.

282. Once in a while I feel hate toward members of my family whom I usually love.

336. I easily become impatient with people.

355. Sometimes I enjoy hurting persons I love.

363. At times I have enjoyed being hurt by someone I loved.

368. I have sometimes stayed away from another person because I feared doing or saying something that I might regret afterwards.

393. Horses that don't pull should be beaten or kicked.

410. I would certainly enjoy beating a crook at his own game.

417. I am often so annoyed when someone tries to get ahead of me in a line of people that I speak to him about it.

426. I have at times had to be rough with people who were rude or annoying.

438. There are certain people whom I dislike so much that I am inwardly pleased when they are catching it for something they have done.

447. I am often inclined to go out of my way to win a point with someone who has opposed me.

452. I like to poke fun at people.

468. I am often sorry because I am so cross and grouchy.

469. I have often found people jealous of my good ideas, just because they had not thought of them first.

495. I usually "lay my cards on the table" with people I am trying to correct or improve.
536. It makes me angry to have people hurry me.

False (none)

III. Scale 2c, Lack of ego mastery, defective inhibition (Harris & Lingoes, 1955, 1968).

True (11 items)

22. At times I have fits of laughing and crying that I cannot control.
97. At times I have a strong urge to do something harmful or shocking.
156. I have had periods in which I carried on activities without knowing later what I had been doing.
194. I have had attacks in which I could not control my movements or speech but in which I knew what was going on around me.
238. I have periods of such great restlessness that I cannot sit long in a chair.
266. Once a week or oftener I become very excited.
291. At one or more times in my life I felt that someone was making me do things by hypnotizing me.
303. I am so touchy on some subjects that I can't talk about them.

352. I have been afraid of things or people that I knew could not hurt me.

354. I am afraid of using a knife or anything very sharp or pointed.

360. Almost very day something happens to frighten me.

False (none)

# VITA

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