

A Preliminary Investigation of MMPI-2-RF Scores in Forensically-Committed Inpatients Diagnosed with Pedophilia or other Paraphilic Disorders

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INTRODUCTION

- ▶ Sexual offenders who offend against children tend to exhibit more depression, anxiety, introversion, and somatic concerns, as well as poorer self-esteem, compared to those who offend against older victims¹. However, it remains unclear whether this distinction can be observed within a clinical population of individuals diagnosed with paraphilic disorders.
- ▶ To facilitate diagnosis and inform treatment practice, assessment tools measuring personality traits and psychopathology are utilized (e.g., Minnesota Multiphasic Personality Inventory-2 Restructured Form; MMPI-2-RF²).
- ▶ MMPI measures are widely used by clinicians³. It is therefore imperative to examine their ability to distinguish between different diagnostic groups that share similar symptomatology.

AIMS & HYPOTHESES

- ▶ The present study aimed to determine differences in the magnitude of symptomatology between individuals diagnosed with pedophilic disorder and other paraphilic disorders, based on conceptually derived traits of sexual offenders.
- ▶ It was hypothesized that inpatients diagnosed with pedophilic disorder would report significantly higher levels of depression, somatic concerns, anxiety, and interpersonal deficits/introversion, compared to inpatients diagnosed with other paraphilic disorders.
- ▶ The following scales were expected to exhibit significant differences:
 - Depression: RCd, RC2, EID, SUI, HLP, SFD, NFC
 - Somatic Concerns: RC1, MLS, GIC, HPC, NUC, COG
 - Anxiety: RC7, STW, AXY, ANP, NEGE-r
 - Interpersonal Deficits/Introversion: IPP, SAV, SHY, DSF

(Note. Full scale names and abbreviations are presented in Table 1).

METHOD

Participants

- ▶ Deidentified archival data from 69 male inpatients diagnosed with one or more paraphilic disorders and treated at a large forensic psychiatric facility in the western United States.
- ▶ Mean age of 39.85 years ($SD = 11.27$).
- ▶ **Group 1:** Diagnosed with pedophilic disorder but no other paraphilic disorder ($n = 49$).
- ▶ **Group 2:** Diagnosed with another paraphilic disorder (e.g., voyeuristic disorder, exhibitionistic disorder) but not pedophilic disorder ($n = 15$).
- ▶ **Excluded:** Diagnosed with pedophilic disorder and another paraphilic disorder ($n = 5$).

Measure

- ▶ MMPI-2-RF is a 338-item self-report measure that includes 51 scales measuring protocol validity, psychopathology, and personality constructs².

Procedure

- ▶ Invalid protocols due to non-content-based invalid responding or overreporting were removed using standardized procedures ($n = 15$ cases were excluded).

Final Samples:

- ▶ **Group 1:** Pedophilic Disorder Group ($n = 36$).
- ▶ **Group 2:** Other Paraphilic Disorder Group ($n = 13$).

- ▶ Independent samples t -tests were examined to assess whether differences between the pedophilic disorder and other paraphilic disorders groups were statistically significant.
- ▶ Hedges' g effect sizes were examined to evaluate sizes of differences between the groups on MMPI-2-RF mean scores.

Table 1. Mean Scores, SDs, and Effect Sizes for Examined Diagnostic Groups

	Pedophilic Disorder ($n = 36$)		Other Paraphilic Disorders ($n = 13$)		Hedges' g Effect Sizes
	M	SD	M	SD	g
Higher-Order Scales					
EID: Emotional/Internalizing Dysfunction	54.31	13.29	46.69	7.31	0.63*
Restructured Clinical Scales					
RCd: Demoralization	54.33	12.91	50.54	10.34	0.31
RC1: Somatic Complaints	56.25	12.62	52.69	8.54	0.30
RC2: Low Positive Emotions	55.69	16.73	44.92	9.39	0.71*
RC7: Dysfunctional Negative Emotions	50.33	11.67	45.23	8.96	0.46
Somatic/Cognitive Specific Problems Scales					
MLS: Malaise	52.19	10.29	44.54	6.98	0.80*
GIC: Gastrointestinal Complaints	51.61	10.42	51.38	10.40	0.02
HPC: Head Pain Complaints	54.97	13.93	45.92	7.85	0.72*
NUC: Neurological Complaints	59.39	11.96	53.08	14.56	0.49
COG: Cognitive Complaints	52.92	11.85	49.08	8.39	0.35
Internalizing Specific Problems Scales					
SUI: Suicidal/Death Ideation	49.08	8.43	52.46	12.09	-0.35
HLP: Helplessness/Hopelessness	52.19	14.52	47.15	10.26	0.37
SFD: Self-Doubt	51.61	12.06	47.23	6.03	0.40
NFC: Inefficacy	52.75	10.73	48.85	8.64	0.38
STW: Stress / Worry	49.75	10.31	44.69	6.24	0.54
AXY: Anxiety	53.33	12.53	49.46	8.96	0.33
ANP: Anger-Proneness	53.89	13.94	47.38	10.34	0.49
Interpersonal Specific Problems Scales					
IPP: Interpersonal Passivity	52.69	12.24	47.54	7.98	0.45
SAV: Social Avoidance	51.83	12.04	48.38	10.05	0.30
SHY: Shyness	49.53	8.71	44.54	5.58	0.62
DSF: Disaffiliativeness	54.28	13.75	53.85	11.00	0.03
Interest Scales					
AES: Aesthetic-Literary Interests	47.19	10.75	55.62	9.22	-0.81*
MEC: Mechanical-Physical Interests	51.81	8.91	58.85	7.24	-0.82*
Personality Psychopathology Five Scales (Revised)					
NEGE-r: Negative Emotionality	52.25	12.61	46.15	7.72	0.53

Note. * = statistically significant t -tests; $p < .05$. Small, ($|0.20|$ - $|0.49|$) medium ($|0.50|$ - $|0.79|$), and large ($|0.80+$) Hedges' g values are bolded.

RESULTS

- ▶ Of the scales measuring depressive symptomatology, EID and RC2 exhibited both statistical and practical significance ($gs = 0.63$ and 0.71 , respectively). Therefore, the pedophilic disorder group had moderately higher scores on these scales compared to the other paraphilic disorder group.
- ▶ In addition, individuals diagnosed with pedophilic disorder reported more somatic concerns compared to the other group. Specifically, the MLS and HPC scales exhibited both statistical and practical significance ($gs = 0.80$ and 0.72 , respectively).
- ▶ Although the anxiety scales and introversion/interpersonal deficits scales did not exhibit statistical significance, the effects were notable, indicating practical significance. For the scales measuring anxiety, the largest effects were seen for STW ($g = 0.54$) and NEGE-r ($g = 0.53$). Therefore, those with pedophilic disorder appear to have somewhat more anxiety than those with other paraphilic disorders.
- ▶ Additionally, for the introversion/interpersonal deficits scales, those diagnosed with pedophilic disorder reported more interpersonal passivity ($g = 0.45$), social avoidance ($g = 0.30$), and shyness ($g = 0.62$) than those with other paraphilic disorders.
- ▶ Although no hypotheses were made about the interest scales, AES and MEC exhibited both statistical and practical significance ($gs = -0.81$ and -0.82 , respectively). Therefore, those diagnosed with pedophilic disorder group tended to report fewer hobbies compared to those in the other paraphilic disorder group.

DISCUSSION

- ▶ The present study extended the empirical literature demonstrating the ability of the MMPI-2-RF to differentiate between paraphilic disorder diagnostic groups. Specifically, the MMPI-2-RF demonstrated utility in differentiating between forensically committed groups of individuals diagnosed with pedophilic disorder versus other paraphilic disorders, based on their self-reported symptomatology.
- ▶ In line with existing literature, individuals diagnosed with pedophilic disorder tended to report higher levels of depression, somatic concerns, anxiety, and interpersonal deficits/introversion compared to those in the other paraphilic disorder group.
- ▶ The unanticipated differences in interest scale scores suggest that depressive symptomatology may contribute to fewer hobbies/interests. Therefore, behavioral activation may be an effective strategy in increasing non-sexual pleasure-seeking and reducing depressive/somatic symptomatology.
- ▶ Despite small sample sizes, this preliminary study derived notable findings, with most scales exhibiting a range of small to large levels of practical significance and a few exhibiting statistical significance. Nevertheless, future studies should examine the replicability and generalizability of these findings in larger samples.
- ▶ Moreover, future studies should compare different paraphilic disorders rather than cluster them into an other paraphilic disorders group.

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