MMPI-A: TEST OF BEHAVIORAL CORRELATES ASSOCIATED WITH

ELEVATED SCALES IN A SAMPLE OF FEMALE JUVENILE DELINQUENTS

A Dissertation

by

MICHAEL LEE STEFANOV

Submitted to the Office of Graduate Studies of
Texas A&M University
in partial fulfillment of the requirements for the degree of

DOCTOR OF PHILOSPOHY

August 2005

Major Subject: Psychology

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Approved by:

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ABSTRACT

MMPI-A: Test of Behavioral Correlates Associated with Elevated

Scales in a Sample of Female Juvenile Delinquents. (August 2005)

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The Minnesota Multiphasic Personality Inventory (MMPI) has a long history of identifying adolescents who are at risk of displaying delinquent behaviors. However, MMPI research regarding behaviors observed from adolescents while incarcerated is non-existent. This dissertation examines the usefulness of the adolescent version of the MMPI (MMPI-A; Butcher et al., 1992) in predicting specific unit infractions for female juvenile delinquents incarcerated in a state facility in Texas. Unit infractions were placed into groups based on behavioral relatedness. MMPI-A scales were selected for analyses based on behavioral descriptors related to unit infractions. Logistic regression was performed to test whether elevated MMPI-A scales, dichotomized at 55T, 60T, 65T and 70T could predict behaviorally related groupings. Analyses suggest that the MMPI-A is not very useful in statistically predicting unit infractions.

DEDICATION

This dissertation is dedicated to the life of my son and true superhero, Nikolai Daniel Stefanov. May I some day find a way to show you what my heart is unable to express in words. You are, without a doubt, the best and I love you.

This dissertation is dedicated in the memory of my sons, Jacob Michael Stefanov and Michael Lee Stefanov, Jr. I will never forget holding you, touching you, kissing you and dreaming a dream that was not to be.

This dissertation is also dedicated in the memory of my uncle, Michael Edwin "Chicken Lips" Stefanov, ph.d. and good ol' Nono.

ACKNOWLEDGMENTS

To my father, Daniel: Without a doubt, I have lost many watches in my lifetime, but hopefully I have never lost my name. Thank you for never giving up on me when everyone said you should. I am forever indebted to the lessons you have taught me, minus that stupid pie chart thingy.

To my brother, Nicholas: You are the man I measure myself against. You have exhibited more dedication to the achievement of your goals than any other person I have ever known. Thank you for all of your help. None of this would have been possible without you. Even your incessant, uncanny ability to make a two minute story turn into one two hour story helped give me the excuse and motivation to get back to studying.

To my ex-wife, Ann: We have shared happy time and miserable times. We have exchanged nice words and mean words. We have said, "I do" and "Where the heck do I sign?" We are either the weirdest two people or the best of friends because we remain close. I look forward to the future.

To everyone who helped me: Thank you to all of the people who watched from the sidelines while I was in need of some help and guidance. Your total disregard for others and lack of exhibited leadership helped me realize that I could do it myself. As you know, preaching that you care and referring to yourself as a leader is easy. Actually being that type of person, unfortunately, does not appear to be common in many circles or in specific departments throughout. Semper Fidelis!

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INTRODUCTION

Juvenile delinquency is on the rise. It is commonplace to hear of several crimes, serious ones in nature, committed by juveniles on the daily news or through the local newspaper. Within the past few years, several adolescents have murdered numerous classmates and teachers within their schools. Attempting to identify those adolescents that are most capable of committing these crimes, or identifying those adolescents that are most likely to be threats to others or to the institution they are incarcerated in, is of utmost importance.

The Minnesota Multiphasic Personality Inventory (MMPI) has long been used to assess psychopathology in adolescents (Veneziano & Veneziano, 1986). More importantly, of the many assessment measures used to assess personality characteristics commonly associated with juvenile delinquency, the MMPI has enjoyed the widest application for studying delinquency and associated crimes (Veneziano & Veneziano, 1986).

The purpose of this study is to determine whether individual behavioral correlates associated with elevated MMPI-A scales are valid in a sample of incarcerated adolescent females. To test the validity of MMPI-A scale behavioral correlates, individual correlates of several MMPI-A scales will be used to predict behaviorally related documented incident reports for adolescent females incarcerated at the Marlin Unit of the Texas Youth Commission (TYC). This study consists of 228 incarcerated

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This dissertation follows the style of the *Journal of Personality Assessment.*

adolescent females MMPI-A profiles and a combined total of over 20,000 documented

incidents, as recorded by form CCF-225 (Incident Report; see Appendix A). The

MMPI-A was administered and scored immediately when the youths entered the Marlin

Unit of TYC. Incidents were documented over a 2-year period between the years of

1997 through 1999.

<center>*Literature Review*</center>

Adolescents committed to a state facility are subjected to numerous

psychological measures at intake. The results of these measures have implications for

both the adolescents and the facility. The facility, based on the adolescents' scores, may

place adolescents into a specific dorm, assign them a specific social worker, or place

them into a certain group. When numerous psychological tests are administered,

selecting measures that best serve the needs of both the facility and the adolescent is

challenging.

At-Risk Youth

As previously mentioned, identifying adolescents who are at most risk of

harming themselves or others before or after incarceration is imperative. Hume,

Kennedy, Patrick, and Partyka (1996) state that "psychopaths" commit both a larger

number and more heterogeneous types of offenses than any other criminal and are more

likely to engage in violent behavior (e.g., assaulting staff) while incarcerated.

Psychopaths are usually characterized as having unstable interpersonal relations, poor

functioning, and an increased risk to engage in criminal activity (Hume et al., 1996).

Furthermore, the authors operationalize the term psychopath as someone who is egocentric, manipulative, and cold-hearted.

Significantly high scores on MMPI-A scales 4 and 9 [1] (T ≥ 65) are most common among incarcerated male offenders (Lucus & Newmark, 1993) and are also most commonly associated with psychopathy (Green, 1980). Behavioral correlates associated with elevated MMPI-A scale 4 include a relative freedom from regret and remorse, difficulty incorporating the values and standards of society, hostility towards authority figures, and increased probability of aggressive behavior. Behavioral correlates associated with elevated MMPI-A scale 9 are impulsive behaviors, grandiose self-perception, and insensitivity.

Elevations on scales 4 and 9 are not the only elevated MMPI scales commonly associated with incarcerated male juvenile delinquents, just the most common. Sorensen and Johnson (1996) also found that incarcerated male juvenile delinquents exhibit elevations of MMPI-A scales F, 1, 2, 6, 7, and 8. Elevations of scales 1 and 2 is interesting given that this finding has not been observed in other studies of incarcerated adult males and female populations or incarcerated adolescent male and female populations.

Elevations on validity scale F are common in the adolescent population. Adolescents generally have been reported to produce much higher F scales than do adults (Archer, 1997). Significantly elevated F scales, however, are indicative of serious psychopathology or an invalid profile due to various reasons (e.g., reading level).

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[1] 4 = Psychopathic Deviate; 9 = Hypomania

Significant elevations on scale 1 are associated with somatic complaints. For example, these adolescents display excessive somatic and bodily concerns and are likely to display somatic responses to stress. Scale 2 elevations are associated with feelings of dissatisfaction and low self-confidence. Clinical correlates associated with elevated MMPI scale 6 include anger, resentment, delusions of grandeur, and social withdrawal. Significant elevations associated with scale 7 include feelings of insecurity, inadequacy, and inferiority. Lastly, the clinical correlates associated with the last scale found to be significantly elevated in this study, scale 8, includes social deviance, poor school adjustment, being easily upset, feelings of frustration, and nonconforming.

Although the results of previous studies appear promising in identifying MMPI-A scale elevations in incarcerated adolescent male populations, only one study exists on specific incarcerated female adolescent profiles. Further, none of these studies test the validity of individual behavioral correlates found in the *MMPI-A manual* (Butcher, et al., 1992) or by Archer (1997). Moreover, as compared to the immense amount of MMPI literature that exists on incarcerated adult males, the female literature is nonexistent by comparison.

Female Offenders

Scott and Conn (1979) examined the MMPI profiles of 165 adult females residing in a minimum security prison and found that the most elevated, and only MMPI scale with a T-score $\geq$ 65 T was scale 4. Furthermore, other scales, such as F, 6, 8, and 9, were elevated, but fell a few T-score points below the demarcation point. Of interest in this study was that incarcerated female profiles tended to parallel their male

counterparts. That is, research has documented that the single MMPI scale most frequently elevated for incarcerated males is either scales 4 or 9. In this study, the most elevated MMPI scale was, in fact, scale 4. In addition, females also had elevations on scales F, 6, 8, 9, which had been observed in the incarcerated male populations.

Sutker, Allain, and Geyer (1978) compared MMPI profiles of female violent offenders ($\underline{n}$ = 22; murder or manslaughter) against nonviolent offenders ($\underline{n}$ = 40; drug or property offenses) from within the same two prison systems. Results of this study suggest that nonviolent offenders can be differentiated from violent offenders by MMPI scales 4, 5 and validity scale F. Surprisingly, scale 4 elevations were significantly higher for the nonviolent group, whereas MMPI scale 5 and validity scale F were significantly higher for the violent group. The noteworthy finding of this study is that MMPI scale 4 was elevated similar to research findings of incarcerated adult and adolescent *male* populations.

Stefanov and Heffer (1999) examined MMPI-A profiles for 161 incarcerated adolescent females and found that no single MMPI-A scale had an overall mean elevation of $\underline{T} \geq 65$. As documented in previous incarceration literature for adolescent males and adult females, MMPI-A scale 4 had the highest overall sample man ($\underline{M}$ = 63.5), followed by scales 6 ($\underline{M}$ = 58.6), 9 ($\underline{M}$ = 58.5), and 8 ($\underline{M}$ = 58.3). Further, using backward logistical regression, Stefanov and Heffer (1999) examined whether the MMPI-A could be used to predict unit infractions. They found that several MMPI-A clinical scales were able to predict unit infractions, specifically scales 4, 6, 8, and 9. A limitation to their study, however, was that all MMPI-A scales were lumped together to

determine the most predictive MMPI-A scale instead of testing each scale individually. Another limitation to their study was that several of the dependent variables (e.g., unit infractions) had a low occurrence making their results suspect. Further, they also did not group unit infractions into categories making their results more easily interpretable and useful for the agencies using this test.

Content Scales

The MMPI-A consists of 15 content scales that exhibit a large degree of overlap with the original Wiggins content scales of the MMPI (Archer, 1997) and requires the administration of all 478 items. Behavioral descriptors associated with elevated MMPI-A content scales were developed by Butcher et al. (1992) utilizing a clinical sample of 420 boys and 293 girls from a treatment facility in Minneapolis. Research on the content scale interpretation, however, is lacking and it is therefore recommended that MMPI-A content scales be used to supplement and refine clinical scale interpretation (Archer, 1997).

Harris-Lingoes Subscales

The MMPI-A consists of 27 content subscales for clinical scales 2, 3, 4, 6, 8, and 9. These subscales were developed by Harris and Lingoes (Harris & Lingoes as cited in Archer, 1997) for the original MMPI and little research or modification has been conducted on them since. Additionally, the behavioral descriptors associated with elevated MMPI-A Harris-Lingoes subscales are the same as those identified for adults by Harris and Lingoes (1955) for the MMPI. Given the above limitations, Harris-Lingoes subscales should be used only to supplement and refine clinical scale

interpretation (Archer, 1997).

Summary

Specific MMPI-A profiles and scale elevations have been observed in both incarcerated male and female juvenile delinquent populations. Although elevations on scales 4 and 9 are the most common, other elevated MMPI scales have been identified as commonly elevated among both of these groups. Knowing previously identified MMPI-A scale elevations for incarcerated populations does not, however, aid facilities that use this personality measure to gain a better understanding of the adolescents they are attempting to rehabilitate. Rather, knowing behaviors that are likely to be exhibited by individuals who produce specific scores on psychometric instruments would undoubtedly be much more useful. Unfortunately, neither the standardization sample of the MMPI or the MMPI-A included an incarcerated population. Therefore, behavioral correlates associated with elevated scales is questionable, especially given that many of the items used in the MMPI-A are taken directly from the original MMPI and the behavioral correlates associated with elevated MMPI-A profiles are the same as those used for the MMPI. Because of this, research needs to focus on the utility of the MMPI-A for incarcerated populations and test whether behavioral correlates associated with scale elevations are similar in incarcerated populations as in the standardization sample.

Purpose and Data Organization

The purpose of this study was to test whether the MMPI-A had predictive power and clinical utility in a sample of incarcerated adolescent females. The predictive power and clinical utility of the MMPI-A was assessed in the ability of specific MMPI-A scales

to statistically predict behaviorally related unit infractions. As seen in Table 1, behavioral descriptors associated with elevated MMPI-A clinical, content and supplemental scales have been identified in the *MMPI-A manual* (1992) and by Archer (1997). The validity of these behavioral descriptors, however, has not been tested in a sample of incarcerated adolescent females.

Several of the behavioral descriptors presented in Table 1 appear similar to incidents documented at the Texas Youth Commission (TYC). Aggressive behavior, for example, is associated with adolescents who produce profiles with scale 4 elevations, while several incidents documented at the TYC are related to aggressive behavior (e.g., fighting with staff). Therefore, it seems plausible that adolescents within this sample who engage in aggressive behaviors during a 2-year period of incarceration should be those adolescents with scale 4 elevations or at least another scale with behavioral descriptors associated with aggressive behaviors. Further, aggressive behavior is not associated with adolescents who produce profiles with scale 2 elevations. Therefore, aggressive behavior should not be observed in adolescents who produce MMPI-A profiles with scale elevations that are not suggestive of aggressive behavior. It may be the case that aggressive behavior is associated with many elevated clinical scales within this type of population. This study, however, can only rely on previously reported behavioral descriptors associated with elevated clinical scales by the *MMPI-A manual* (1992) and Archer (1997).

TABLE 1

Behavioral Descriptors Associated with Elevated MMPI-A Scales

Clinical Scales

Scale 4
1. Externalizing and aggressive behavior
2. Rebelliousness and hostility towards authority figures
3. Acting out

Scale 5
1. Competitive and aggressive
2. Increased frequency of behavioral problems

Scale 6
1. Anger, resentment, and hostility
2. Tendency towards hostility
3. Increased disagreements with parents

Scale 8
1. Vulnerable and easily upset
2. Nonconformity, unconventional, and socially deviant

Scale 9
1. Impulsivity and restlessness
2. Greater likelihood and delinquent behaviors

Content Scales

Adolescent-Anger
1. Irritability and physical aggressiveness

Adolescent-Conduct Problems
1. Likely to be in trouble because of their behavior
2. Problems with authority

Adolescent-Family Problems
1. Probability of acting out, including running away from home
2. Anger and hostility towards family members

TABLE 1 (continued)

Supplemental Scales

The Immaturity Scale
1. Defiant and resistant
2. Easily frustrated and quick to temper

Table 2 presents several infractions monitored by the TYC. These infractions appear to be related behaviorally to the behavioral correlates associated with elevated MMPI-A scales presented in Table 1. Further, several infractions monitored by the TYC appear to be related behaviorally. Escape and attempted escape, for example, both appear to deal with adolescents attempting to escape from the incarceration facility, with the only proposed difference between the two being the level of success. One method to combine incidents such as these is through principal component analysis. However, several infractions did not occur with much frequency. Because of this, principal component analysis may not be useful.

Another drawback to using principal components analysis in this study maybe that factors identified by the analysis may not be related behaviorally. For example, it does not appear very useful for a facility to know that elevations on scale 4 are predictive of factor 1 when factor 1 consists of escape, assault and vandalism but not predictive of factor 2 that consists of attempted escape, assault on peers and vandalism

TABLE 2

Infractions Monitored by the Texas Youth Commission Related Behaviorally to Specific

MMPI-A Behavioral Correlates

Incident	Number Observed
1. Escape	36
2. Attempted escape	24
3. Abscond	59
4. Identified escape risk	10
5. Assault on staff	113
6. Assault on peers	66
7. Danger to others	259
8. Fail two or more reasonable requests	1208
9. Disruption of program	2185
10. Vandalism over $100	1
11. Destruction of property	63
12. Security	2675
13. Detention	100
14. Jail	44
15. Arrests	24
16. Placement in isolation	13

under $100. It is believed that the easiest and most useful tool for a facility would be to

know characteristics of adolescents who are most likely to try to escape or assault people

in general. It is for this reason that behavioral incidents are not being testing

individually in this study.

Another method of combining incidents into groupings would be to combine

individual incidents together based of behavioral relatedness. This method of grouping

only permits incidents related behaviorally to be analyzed together, and in turn, makes

the results more easily interpretable for facilities using the MMPI-A to predict behaviors. Therefore, individual incidents will be combined with other incidents related behaviorally to form groupings and those groupings will be used to generate hypotheses.

Group Analysis Hypotheses

Table 3 presents the grouping of incidents related behaviorally. Table 4 presents a summary of the hypotheses based on behavioral descriptors associated with clinically elevated MMPI-A scales when $T \geq 60$.

MMPI-A Scale 4 Hypotheses

Externalizing and aggressive behaviors are associated with scale 4 elevations. Therefore, it is hypothesized that the restrictive outcome of incident grouping (RO) be predicted by those adolescents who produce MMPI-A scale 4 elevations. Further, rebelliousness and hostility towards authority figures is associated with scale 4 elevations. Therefore, it is hypothesized that the assault grouping (AS) will be predicted by those adolescents who produce scale 4 elevations. Acting out is also associated with scale 4 elevations. Therefore, it is hypothesized that both the inability to correct behavior grouping (IC) and the RO grouping will be predicted by those adolescents who produce scale 4 elevations.

MMPI-A Scale 5 Hypotheses

Competitive and aggressive behaviors are associated with *females* who produce scale 5 elevations. Therefore, it is hypothesized that the assault grouping (AS) will be predicted by those adolescents who produce scale 5 elevations. Increased frequency of behavior problems is also associated with females who produce scale 5 elevations.

TABLE 3

Behaviorally Related Groupings

Grouping	Behavioral Incident Used in Grouping	Observed n
Escape (ES)	Escape	35
	Attempted escape	24
	Abscond	59
	Identified escape risk	10
	Total N = 129	
Assault (AS)		
	Assault on staff	113
	Assault on peers	66
	Danger to others	259
	(i.e., verbal or physical threats)	
	Total N = 438	
Inability to Correct Behavior (IC)		
	Fail two or more reasonable requests	1208
	Disruption of program	2185
	Total N = 3393	
Vandalism (VA)		
	Vandalism over $100	1
	Destruction of property	63
	Total N = 64	
Restrictive outcome of incident (RO)		
	Security	2675
	Detention	100
	Jail	44
	Arrests	24
	Placement in isolation	13
	Total N = 2856	

TABLE 4

Summary of Hypotheses

MMPI-A Scale	Grouping

Clinical Scales

Scale 4
1. Externalizing and aggressive behavior — RO
2. Rebelliousness and hostility towards authority figures — AS
3. Acting out — IC, RO

Scale 5
1. Competitive and aggressive — AS
2. Increased frequency of behavioral problems — IC, RO

Scale 6
1. Anger, resentment, and hostility — IC
2. Tendency towards hostility — AS
3. Increased disagreements with parents — IC

Scale 8
1. Vulnerable and easily upset — AS
2. Nonconformity, unconventional, and socially deviant — VA, RO

Scale 9
1. Impulsivity and restlessness — ES
2. Greater likelihood and delinquent behaviors — AS, IC, VA, RO

Content Scales

Adolescent-Anger
1. Irritability and physical aggressiveness — AS

TABLE 4 (continued)

MMPI-A Scale	Grouping
Adolescent-Conduct Problems	
1. Likely to be in trouble because of their behavior	IC, RO
2. Problems with authority	IC, RO
Adolescent-Family Problems	
1. Probability of acting out, including running away from home	ES, RO
2. Anger and hostility towards family members	AS
Supplemental Scales	
The Immaturity Scale	
1. Defiant and resistant	IC, RO
2. Easily frustrated and quick to temper	AS, IC

Note: ES = escape, AS = assault, IC = inability to correct behavior, VA = vandalism, RO = restrictive outcome of incident

Therefore, it is hypothesized that both the IC grouping and the RO grouping will be

predicted by those adolescents who produce scale 5 elevations.

MMPI-A Scale 6 Hypotheses

Anger, resentment, and hostility are associated with adolescents who produce

scale 6 elevations. Therefore, it is hypothesized that the IC grouping will be predicted

by those adolescents who produce scale 6 elevations.

MMPI-A Scale 8 Hypotheses

Being vulnerable and easily upset are associated with adolescents who produce

scale 8 elevations. Therefore, it is hypothesized that the AS grouping will be predicted

by those adolescents who produce scale 8 elevations. Further, nonconformity, and being unconventional and socially deviant is associated with scale 8 elevations. Therefore, it is hypothesized that both the vandalism (VA) grouping and the RO grouping will be predicted by those adolescents who produce scale 8 elevations.

MMPI-A Scale 9 Hypotheses

Impulsivity and restlessness are associated with adolescents who produce scale 9 elevations. Therefore, it is hypothesized that the escape grouping (ES) will be predicted by those adolescents who produce scale 9 elevations. Further, a greater likelihood of delinquent behaviors is associated with scale 9 elevations. Therefore, it is hypothesized that the AS, IC, VA, and RO groupings will be predicted by those adolescents who produce scale 9 elevations.

MMPI-A Adolescent-Anger Content Scale Hypothesis

Irritability and physical aggressiveness are associated with adolescent-anger content scale elevations. Therefore, it is hypothesized that the AS grouping will be predicted by those adolescents who produce adolescent-anger scale elevations.

MMPI-A Adolescent-Conduct Problems Content Scale Hypotheses

An increased likelihood of being in trouble because of behavior is associated with adolescent-conduct content scale elevations. Therefore, it is hypothesized that both the IC grouping and the RO grouping will be predicted by those adolescents who produce adolescent-conduct content scale elevations. Further, problems with authority figures are also associated with adolescent-conduct content scale elevations. Therefore, it is hypothesized that both the IC grouping and the RO grouping will be predicted by

those adolescents who produce adolescent-conduct content scale elevations.

MMPI-A Adolescent-Family Problems Content Scale Hypotheses

An increased probability of acting out, including running away from home is associated with adolescent-family problems content scale elevations. Therefore, it is hypothesized that both the RO grouping and the ES grouping will be predicted by those adolescents who produce an elevated adolescent-family problems content scale. Further, anger and hostility and towards family members is associated with adolescent-family problems content scale elevations. Therefore, it is hypothesized that the AS grouping will be predicted by those adolescents who produce an elevated adolescent-family problems scale.

MMPI-A Immaturity Supplementary Scale Hypotheses

Being defiant and resistant is associated with the immaturity supplementary scale elevations. Therefore, it is hypothesized that both the IC grouping and RO grouping will be predicted by those adolescents who produce an elevated the Immaturity supplemental scale. Further, being easily frustrated and quick to temper is associated with the immaturity supplemental scale elevations. Therefore, it is hypothesized that both the AS grouping and the IC grouping will be predicted by those adolescents who produce the immaturity supplemental scale elevations.

METHOD

Participants

Participants were 228 incarcerated adolescent females, ranging from 14 to 17 years of age, M = 15.51, from an incarceration intake facility in Texas. This facility serves as an intake unit for both male and female adolescents adjudicated to a Texas Youth Commission (TYC) facility. Due to the anonymous nature of this sample, the ethnic ratio for this sample was unknown. However, the ethnic ratio for all adolescent females adjudicated to a TYC facility during the year of 2004 is as follows: Angelo (22%), Black (31%), Hispanic (46%), and Other (1%) (TYC, 2004).

Instruments

The MMPI-A (Butcher et al., 1992) is a 478-item self-report measure adapted from the original MMPI and used to assess personality and psychopathology in adolescents aged 14 through 18. Completion of the first 350 items is necessary to score Validity and Basic scales. Scoring the Content and Supplemental scales, however, requires the test to be completed in its entirety, which takes approximately 1½ hours. A standardized incident report form (CCF-225; See Appendix A) used by all TYC facilities to monitor adolescents' infractions of facility rules was used for this study. Individual incidents were stored on a database per adolescent. Only incidents labeled under "Incident Category" were used in the analyses. All other descriptors of incidents (e.g., the length of time an adolescent was physically restrained) or the location the incident occurred was not available. Appendix B lists and defines incident categories analyzed in this study.

Procedure

The MMPI-A was administered by master's level diagnosticians at the facility in groups of 10 participants and supervised by the facility psychologist. During group administration, adolescents were permitted to ask the meaning of words they were not able to comprehend. Each participant was provided with both a softcover test booklet and the audiotape version that played through a portable tape player and head phones to assist adolescents who had reading and/or comprehension problems and to avoid adolescents identifying peers who had deficient reading and/or comprehension. Adolescents were instructed to complete the entire 478 items and were allowed to work ahead as they were able.

Following recommendations of the *MMPI-A manual* (Butcher et al, 1992), MMPI-A profiles with any of the following elevations were excluded from analyses: (a) Cannot Say (?) raw scores > 10 (n = 2), (b) Lie (L) scale T-scores > 70 (n = 49), (c) Infrequency (F_1, F_2, or F) scale T-scores > 90 (n = 13), or (d) Defensiveness (K) scale T-score > 70 (n = 11). Seventy adolescent females produced profiles that violated one or more of these exclusionary criteria and were not used for further analyses. Further, only adolescent females who had at least one incident report were retained for further analyses. The remaining sample consisted of 132 (x = 15.51, SD = 0.92) incarcerated adolescent females.

Data Analyses

Validity, Clinical, Content and Supplemental Scale Descriptive Analyses

All analyses were computed using SPSS version 11.0. Descriptive analyses were performed on all clinical, content, and supplemental scales, even if the scale was not being used in the analyses.

Behavioral Group Analyses

Principal component analyses were performed on the retained behavioral incidents from the CCF-225. Analyses, however, yielded five factors that did not appear behaviorally related (e.g., assault on staff and abscond, for example, were within the same factor). To make the retained behavioral incidents more interpretable, four psychology graduate students on their doctoral internship were asked to place the behavioral incidents into five behaviorally related groupings. All four raters identically grouped all of the behavioral incidents into five groupings.   Their groupings of behavioral incidents were used in this study.

Behavioral Group Prediction Analyses

Logistic regression analyses were conducted on all behavioral groupings. The independent variable (e.g., MMPI-A scale) was analyzed as a continuous variable, but dummy coded into six dummy variables as follows: T-score of 30 through 54 = 1; T-score of 55 through 59 = 2; T-score of 60 through 64 = 3; T-score of 65 through 69 = 4; T-score of 70 through 74 = 5; T-score of 75 through 95 = 6. The dependent variable (e.g., behavioral grouping) was dichotomized as follows: 0 = did not commit an offense within this grouping; 1 = did commit an offense within this grouping.

Data output. Four statistics are reported for all analyses: coefficient (B), model

chi-square (G_M), significance of G_M and odds ratio. The Wald statistic is one way to test

the significance of the independent variable, however, dichotomized dependent variables

lead to small Wald chi-square values and increases in Type II errors (Menard, 1995).

Therefore, the model chi-square statistic will be used to determine the significance.

Model chi-square is a likelihood ratio test that tests the error prior to the independent

variable being added into the model against the error after the independent variable is

added. When model chi-square is statistically significant, the null hypothesis is rejected

indicting that the independent variable makes a statistically significant difference in

predicting the dependent variable in logistic regression (Menard, 1995). Due to the

exploratory nature of this study, the significance of model chi-square was set at $p < .10$

and this value of p as a test of model chi-square significance is empirically supported for

exploratory analyses (Menard, 1995).

Lastly, effect sizes are reported for all logistic regression analyses regardless of

significance. Significance of effect sizes are reported following the recommendations of

Cohen (1992; e.g., $f^2 = .02 = $ "small"; $.15 = $ "medium"; $.35 = $ "large"). Effect sizes for

logistic regression analyses were computed using Nagelkerke's R-square coefficient.

Nagelkerke's R-square represents the best estimate of R-square because it ensures, unlike

the Cox and Snell R-squared coefficient, that the coefficient can vary from zero to one

(Menard, 1995).

RESULTS

Clinical and Validity Scale Descriptive Analyses

Descriptive analyses for all MMPI-A clinical, content and Harris-Lingoes subscales for the 132 incarcerated adolescent females are displayed in Tables 5 through 7. As seen in these tables, MMPI-A Scale 4 was the most elevated clinical scale in terms of overall mean (x = 63.44), followed by MMPI-A scales 6 (x = 58.70) and 9 (x = 58.65). Also seen in these tables, MMPI-A scale 4 had the highest percentage of adolescent females with profiles of T-score values > 65 (40.9), followed by MMPI-A scales 6 (35.6) and 8 (35.6). Interestingly, 20 % or more of all MMPI-A clinical scales were elevated above or equal to 65 T, except for MMPI-A scale 10 (8.3).

Logistic Regression Analyses

A summary of all logistic regression analyses are contained in Table 8. Table 8 contains statistical analyses specific to overall analyses. Four of the 25 hypotheses were statistically supported.

Escape Group

There were 129 total incidents within this grouping. Some adolescent females committed at least one of the infractions more than once, however, once the act of committing an incident was dichotomized (i.e., did not commit an incident vs. committed an incident at least once) there were 64 adolescent females who committed at least one of the unit infractions within this grouping and 68 adolescent females who did not commit an infraction within this grouping.

TABLE 5

Means and Standard Deviations for 132 Incarcerated Adolescent Females

on the Minnesota Multiphasic Personality Inventory – Adolescent Version

	M	SD	Percent ≥ 65	Minimum	Maximum
Scale 1, Hypochondrias	56.62	11.13	27.3	35	84
Scale 2, Depression	57.90	10.93	28.8	38	87
Scale 3, Hysteria	53.62	11.53	20.5	32	86
Scale 4, Psychopathic Deviate	63.44	10.42	40.9	44	91
Scale 5, Masculinity – Femininity	56.86	10.27	22.0	35	82
Scale 6, Paranoia	58.70	11.49	35.6	37	91
Scale 7, Psychasthenia	55.35	11.51	25.8	33	81
Scale 8, Schizophrenia	58.37	13.48	35.6	32	95
Scale 9, Hypomania	58.65	12.23	28.8	39	92
Scale 10, Social Introversion	51.48	10.25	8.3	30	85

TABLE 6

Means and Standard Deviations of the Content Scales for 132 Incarcerated Adolescent

Females on the Minnesota Multiphasic Personality Inventory – Adolescent Version

MMPI-A Scale	Sample	
	M	SD
A-anx	56.71	12.43
A-obs	53.36	10.63
A-dep	56.64	12.17
A-hea	57.00	11.40
A-ain	53.40	10.28
A-biz	56.15	13.06
A-ang	57.45	13.32
A-cyn	58.25	9.65
A-con	63.34	13.72
A-lse	51.08	11.01
A-las	52.52	11.04
A-sod	51.73	11.57
A-fam	55.18	11.55
A-sch	59.22	12.02
A-trt	54.65	13.34

n = 132

Note: A-anx = anxiety; A-obs = obsessiveness; A-dep = depression; A-hea = health concerns; A-ain = alienation; A-biz = bizarre mentation; A-ang = anger; A-cyn = cynicism; A-con = conduct problems; A-lse = low self-esteem; A-las = low aspiration; A-sod = social discomfort; A-fam = family problems; A-sch = school problems; A-trt = negative treatment indicators

TABLE 7

Means and Standard Deviations for the Harris-Lingoes Subscales for 132 Incarcerated

Adolescent Females on the Minnesota Multiphasic Personality Inventory – Adolescent

Version

MMPI-A Harris-Lingoes Scales	Sample M	SD		Sample M	SD
Scale 2			**Scale 3**		
D	57.11	10.78	Hy	50.91	9.70
D_1	52.58	10.31	Hy_1	44.36	7.18
D_2	59.23	9.98	Hy_2	58.00	11.11
D_3	55.82	11.88	Hy_3	55.23	11.29
D_4	55.73	11.29	Hy_4	44.07	8.88
D_5			Hy_5		
Scale 4			**Scale 6**		
Pd	49.81	9.18	Pa	60.22	11.50
Pd_1	68.28	9.07	Pa_1	53.55	9.98
Pd_2	52.16	10.08	Pa_2	44.35	8.00
Pd_3	58.79	8.87	Pa_3		
Pd_4	62.56	8.91			
Pd_5					
Scale 8			**Scale 9**		
Sc	55.86	10.35	Ma	59.90	12.04
Sc_1	55.99	11.59	Ma_1	50.67	8.19
Sc_2	58.06	11.85	Ma_2	52.84	10.24
Sc_3	56.27	11.18	Ma_3	55.00	9.92
Sc_4	52.20	9.93	Ma_4		
Sc_5	54.85	12.02			
Sc_6					

$\underline{n} = 132$

Note: D_1 = Subjective Depression; D_2 = Psychomotor Retardation; D_3 = Physical Malfunctioning; D_4 = Mental Dullness; D_5 = Brooding; Hy_1 = Denial of Social Anxiety; Hy_2 = Need for Affection; Hy_3 = Lassitude–Malaise; Hy_4 = Somatic Complaints; Hy_5 = Inhibition of Aggression; Pd_1 = Familial Discord; Pd_2 = Authority Problems; Pd_3 = Social Imperturbability; Pd_4 = Social Alienation; Pd_5 = Self-Alienation; Pa_1 = Persecutory Ideas; Pa_2 = Poignancy; Pa_3 = Naiveté; Sc_1 = Social Alienation; Sc_2 = Emotional Alienation; Sc_3 = Lack of Ego Mastery–Cognitive; Sc_4 = Lack of Ego Mastery–Conative; Sc_5 = Lack of Ego Mastery–Defective Inhibition; Sc_6 = Bizarre Sensory Experiences; Ma_1 = Amorality; Ma_2 = Psychomotor Acceleration; Ma_3 = Imperturbability; Ma_4 = Ego Inflation

Table 8

Summary of Results for Specific Scale and Grouping Hypotheses

		B	Wald	Sign	Nagelkerke R^2	Odds ratio	True positive/ False negative
Scale 4							
	AS	0.187	3.322	.068	.034	1.206	26/16
	IC	0.493	3.511	.061	.086	1.004	123/9
	RO	0.123	0.568	.451	.009	1.131	114/12
Scale 5							
	AS	0.098	0.593	.441	.006	1.103	12/11
	IC	0.929	3.470	.053	.121	2.532	123/9
	RO	0.106	0.256	.613	.004	1.112	116/13
Scale 6							
	AS	0.039	0.135	.713	.001	1.040	23/19
	IC	0.367	1.695	.193	.041	1.443	119/5
Scale 8							
	AS	0.093	0.986	.321	.010	1.097	25/11
	VA	0.106	0.952	.329	.011	1.112	3/0
	RO	-0.074	0.274	.600	.004	0.929	117/13
Scale 9							
	ES	0.069	0.510	.475	.005	1.071	20/14
	AS	0.153	2.461	.117	.025	1.165	10/8
	IC	0.225	0.971	.324	.022	1.253	121/6
	VA	0.118	1.114	.291	.013	1.126	2/1
	RO	0.281	2.208	.137	.039	1.324	116/14
Anger							
	AS	0.118	1.732	.188	.018	1.125	26/18
Conduct							
	IC	0.180	0.941	.332	.019	1.197	123/19
	RO	0.305	3.642	.056	.062	1.356	116/14
Family							
	ES	0.004	0.001	.972	.000	1.004	19/9
	AS	0.149	2.022	.155	.021	1.161	9/6
	RO	0.249	1.422	.233	.025	1.282	116/13
Immaturity							
	AS	0.076	0.492	.483	.005	1.079	8/5
	IC	0.079	0.124	.724	.003	1.082	123/9
	RO	0.073	0.169	.681	.003	1.076	113/9

Scale 9. The overall model was not statistically significant for Scale 9 analysis ($B = 0.069$, $G_M = 0.510$, $p > .10$, odds ratio $= 1.071$). No dummy coded grouping was predictive of the escape grouping. There was minimal effect measured ($f^2 = .01$) indicating that the overall model for Scale 9 was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the escape grouping.

Adolescent family. The overall model was not statistically significant for the adolescent family content scale analysis ($B = 0.004$, $G_M = 0.001$, $p > .10$, odds ratio $= 1.004$). No dummy coded grouping was predictive of the escape grouping. There was minimal effect measured ($f^2 = .00$) indicating that the overall model for the adolescent family content scale was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the escape grouping.

Assault Group

There were 438 total incidents within this grouping. Some adolescent females committed at least one of the infractions more than once, however, once the act of committing an incident was dichotomized (i.e., did not commit an incident vs. committed an incident at least once) there were 56 adolescent females who committed at least one of the unit infractions within this grouping and 76 adolescent females who did not commit an infraction within this grouping.

Scale 4. The overall model was statistically significant for Scale 4 analysis ($B = 0.187$, $G_M = 3.322$, $p < .10$, odds ratio $= 1.206$). The dummy coded grouping of T $= 60 – 64$ ($B = 0.047$, $G_M = 4.810$, $p < .05$, odds ratio $= 1.100$) was a statistically significant

predictor of the assault grouping. The measured effect was considered "small" ($f^2 = .04$) indicating that the overall model for Scale 4 was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the assault grouping.

Scale 5. The overall model was not statistically significant for Scale 5 analysis (B = 0.098, G_M = 0.593, p > .10, odds ratio = 1.103). No dummy coded grouping was predictive of the assault grouping. There was minimal effect measured ($f^2 = 0.00$) indicating that the overall model for Scale 5 was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the assault grouping.

Scale 6. The overall model was not statistically significant for Scale 6 analysis (B = 0.039, G_M = 0.135, p > .10, odds ratio = 1.040). No dummy coded grouping was predictive of the assault grouping. There was minimal effect measured ($f^2 = .00$) indicating that the overall model for Scale 6 was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the assault grouping.

Scale 8. The overall model was not statistically significant for Scale 8 analysis (B = 0.093, G_M = 0.986, p > .10, odds ratio = 1.097). However, the dummy coded grouping of T = 60 – 64 (B = 1.386, G^M = 3.075, p < .10, odds ratio = 4.00) was a statistically significant predictor of the assault grouping. There was minimal effect measured ($f^2 = 0.01$) indicating that the overall model for Scale 8 was not very useful for

determining whether an adolescent female within this sample would engage in behaviors characteristic of the assault grouping.

Scale 9. The overall model was not statistically significant for Scale 9 analysis (B = 0.153, G_M = 2.461, p > .10, odds ratio = 1.165). No dummy coded grouping was predictive of the assault grouping. The measured effect was considered "small" (f^2 = .03) indicating that the overall model for Scale 9 was useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the assault grouping.

Adolescent anger. The overall model was not statistically significant for the adolescent anger content scale analysis (B = 0.118, G_M = 1.732, p > .10, odds ratio = 1.125). No dummy coded grouping was predictive of the assault grouping. The measured effect was considered "small" (f^2 = .02) indicating that the overall model for the adolescent anger content scale was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the assault grouping.

Adolescent family. The overall model was not statistically significant for the adolescent family content scale analysis (B = 0.149, G_M = 2.022, p > .10, odds ratio = 1.161). No dummy coded grouping was predictive of the assault grouping. The measured effect was considered "small" (f^2 = .02) indicating that the overall model for the adolescent family content scale was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the assault grouping.

Immaturity. The overall model was not statistically significant for the immaturity supplementary scale (B = 0.076, G_M = 0.492, p > .10, odds ratio = 1.079). No dummy coded grouping was predictive of the assault grouping. There was minimal effect measured (f^2 = .00) indicating that the overall model for the immaturity supplementary scale was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the assault grouping.

Inability to Correct Behavior

There were 3393 total incidents within this grouping. Some adolescent females committed at least one of the infractions more than once, however, once the act of committing an incident was dichotomized (i.e., did not commit an incident vs. committed an incident at least once) there were 123 adolescent females who committed at least one of the unit infractions within this grouping and 9 adolescent females who did not commit an infraction within this grouping.

Scale 4. The overall model was statistically significant for Scale 4 analysis (B = 0.493, G_M = 3.470, p < .10, odds ratio = 1.004). The dummy coded grouping of T = 30 – 54 (B = 2.335, G_M = 14.918, p < .01, odds ratio = 10.333), 55 – 59 (B = 1.792, G_M = 8.255, p < .01, odds ratio = 6.000) and 60 – 64 (B = 1.897, G_M = 9.389, p < .01, odds ratio = 6.667) were statistically significant predictors of the inability to correct behavior grouping. The measured effect was considered "small" (f^2 = .10) indicating that the overall model for Scale 4 was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the inability to correct behavior grouping.

Scale 5. The overall model was statistically significant for Scale 5 analysis (B =

0.929, G_M = 3.470, p < .10, odds ratio = 2.532). The dummy coded grouping of T = 30 –

54 (B = 1.771, G_M = 21.435, p < .01, odds ratio = 5.875) and 65 – 69 (B = 2.944, G_M =

8.236, p < .01, odds ratio = 19.000) were statistically significant predictors of the

inability to correct behavior grouping. The measured effect was considered "small" (f^2

= .14) indicating that the overall model for Scale 5 was useful for determining whether

an adolescent female within this sample would engage in behaviors characteristic of the

inability to correct behavior grouping.

Scale 6. The overall model was not statistically significant for Scale 6 analysis

(B = 0.367, G_M = 1.695, p > .10, odds ratio = 1.443). No dummy coded grouping was

predictive of the assault grouping. The measured effect was considered "small" (f^2 =

.04) indicating that the overall model for Scale 6 was not very useful for determining

whether an adolescent female within this sample would engage in behaviors

characteristic of the inability to correct behavior grouping.

Scale 9. The overall model was not statistically significant for Scale 9 analysis

(B = 0.225, G_M = 0.971, p > .10, odds ratio = 1.253). No dummy coded grouping was

predictive of the inability to correct behavior grouping. The measured effect was

considered "small" (f^2 = .02) indicating that the overall model for Scale 9 was not very

useful for determining whether an adolescent female within this sample.

Adolescent conduct. The overall model was not statistically significant for the

adolescent conduct content scale analysis (B = 0.180, G_M = 0.941, p > .10, odds ratio =

1.197). However, the dummy coded grouping of T = 30 – 54 (B = 2.110, G_M = 15.886,

p < .01, odds ratio = 8.250) and 55 – 59 (B = 3.296, G_M = 10.475, p < .01, odds ratio =

27.000) were statistically significant predictors of the inability to correct behavior

grouping. The measured effect was considered "small" (f^2 = .02) indicating that the

overall model for the adolescent conduct content scale was not very useful for

determining whether an adolescent female within this sample would engage in behaviors

characteristic of the inability to correct behavior grouping.

Immaturity. The overall model was not statistically significant for the

immaturity supplementary scale (B = 0.079, G_M = 0.124, p > .10, odds ratio = 1.082).

However, the dummy coded grouping of T = 30 – 54 (B = 2.549, G_M = 30.143, p < .01,

odds ratio = 12.800), 55 – 59 (B = 1.792, G_M = 2.752, p < .01, odds ratio = 16.000) and

65 – 69 (B = 2.996, G_M = 8.547, p < .01, odds ratio = 20.000) were statistically

significant predictors of the inability to correct behavior grouping. There was minimal

effect measured (f^2 = .00) indicating that the overall model for the immaturity

supplementary scale was not very useful for determining whether an adolescent female

within this sample would engage in behaviors characteristic of the inability to correct

behavior grouping.

Vandalism Group

There were 64 total incidents within this grouping. Some adolescent females

committed at least one of the infractions more than once, however, once the committing

of an incident was dichotomized (i.e., did not commit an incident vs. committed an

incident at least once) there were 29 adolescent females who committed at least one of

the unit infractions within this grouping and 103 adolescent females who did not commit an infraction within this grouping.

Scale 8. The overall model was not statistically significant for Scale 8 analysis (B = 0.106, G_M = 0.952, p > .10, odds ratio = 1.112). No dummy coded grouping was predictive of the inability to correct behavior grouping. There was minimal effect measured (f^2 = .01) indicating that the overall model for Scale 8 was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the vandalism grouping.

Scale 9. The overall model was not statistically significant for Scale 9 analysis (B = 0.118, G_M = 1.114, p > .10, odds ratio = 1.126). No dummy coded grouping was predictive of the inability to correct behavior grouping. There was minimal effect measured (f^2 = .01) indicating that the overall model for Scale 9 was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the vandalism grouping.

Restrictive Outcome of Incident

There were 2856 total incidents within this grouping. Some adolescent females committed at least one of the infractions more than once, however, once the committing of an incident was dichotomized (i.e., did not commit an incident vs. committed an incident at least once) there were 117 adolescent females who committed at least one of the unit infractions within this grouping and 15 adolescent females who did not commit an infraction within this grouping.

Scale 4. The overall model was not statistically significant for Scale 4 analysis (B = 0.123, G_M = 0.568, p > .10, odds ratio = 1.131). However, the dummy coded grouping of T = 30 – 54 (B = 1.540, G_M = 11.725, p < .01, odds ratio = 4.667), 60 – 64 (B = 2.351, G_M = 10.096, p < .01, odds ratio = 10.500) and 65 – 69 (B = 1.041, G_M = 4.810, p < .05, odds ratio = 2.833) were statistically significant predictors of the restrictive outcome of incident grouping. There was minimal effect measured (f^2 = .01) indicating that the overall model for Scale 4 was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the restrictive outcome of incident grouping.

Scale 5. The overall model was not statistically significant for Scale 5 analysis (B = 0.106, G_M = 0.256, p > .10, odds ratio = 1.112). However, the dummy coded grouping of T = 30 – 54 (B = 1.504, G_M = 18.509, p < .01, odds ratio = 4.500) and 65 – 69 (B = 1.386, G_M = 6.150, p < .05, odds ratio = 4.000) were statistically significant predictors of the restrictive outcome of incident grouping. There was minimal effect measured (f^2 = .00) indicating that the overall model for Scale 5 was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the restrictive outcome of incident grouping.

Scale 8. The overall model was not statistically significant for Scale 8 analysis (B = -0.074, G_M = 0.274, p > .10, odds ratio = 0.929). However, the dummy coded grouping of T = 30 – 54 (B = 1.828, G_M = 25.914, p < .01, odds ratio = 6.222) and 70 – 74 (B = 1.386, G_M = 4.612, p < .05, odds ratio = 4.000) were statistically significant predictors of the restrictive outcome of incident grouping. There was minimal effect

measured ($f^2 = .00$) indicating that the overall model for Scale 8 was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the restrictive outcome of incident grouping.

      Scale 9. The overall model was not statistically significant for Scale 9 analysis (B = 0.281, G_M = 2.208, p > .10, odds ratio = 1.324). However, the dummy coded grouping of T = 30 – 54 (B = 1.808, G_M = 28.094, p < .01, odds ratio = 6.100), 60 – 64 (B = 2.079, G_M = 7.687, p < .01, odds ratio = 8.000), 65 – 69 (B = 2.197, G_M = 4.345, p < .01, odds ratio = 9.000) and 70 – 74 (B = 2.708, G_M = 6.876, p < .01, odds ratio = 14.994) were statistically significant predictors of the restrictive outcome of incident grouping. The measured effect was considered "small" ($f^2 = .04$) indicating that the overall model for Scale 9 was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the restrictive outcome of incident grouping.

      Adolescent conduct. The overall model was statistically significant for the adolescent conduct content scale analysis (B = 0.305, G_M = 3.642, p < .10, odds ratio = 1.356). The dummy coded grouping of T = 30 – 54 (B = 1.455, G_M = 12.020, p < .01, odds ratio = 4.286) and 55 – 59 (B = 1.526, G_M = 9.565, p < .01, odds ratio = 4.600) were statistically significant predictors of the restrictive outcome of incident grouping. The measured effect was considered "small" ($f^2 = .07$) indicating that the overall model for the adolescent conduct content scale was useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the restrictive outcome of incident grouping.

Adolescent family. The overall model was not statistically significant for the adolescent family content scale analysis (B = 0.249, G_M = 1.422, p > .10, odds ratio = 1.282). However, the dummy coded grouping of T = 30 – 54 (B = 1.807, G_M = 30.845, p < .01, odds ratio = 6.091), 55 - 59 (B = 1.504, G_M = 3.702, p < .10, odds ratio = 4.500) and 70 – 74 (B = 1.609, G_M = 4.317, p < .05, odds ratio = 5.000) were statistically significant predictors of the restrictive outcome of incident grouping. The measured effect was considered "small" (f^2 = .03) indicating that the overall model for the adolescent family content scale was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the restrictive outcome of incident grouping.

Immaturity. The overall model was not statistically significant for the immaturity supplementary scale (B = 0.073, G_M = 0.169, p > .10, odds ratio = 1.076). However, the dummy coded grouping of T = 30 – 54 (B = 1.897, G_M = 28.167, p < .01, odds ratio = 6.667), 55 – 59 (B = 2.015, G_M = 7.164, p < .01, odds ratio = 7.500), 65 – 69 (B = 2.251, G_M = 9.171, p < .01, odds ratio = 9.500) and 70 – 74 (B = 2.485, G_M = 5.700, p < .05, odds ratio = 12.000) were statistically significant predictors of the restrictive outcome of incident grouping. There was minimal effect measured (f^2 = .00) indicating that the overall model for the immaturity supplementary scale was not very useful for determining whether an adolescent female within this sample would engage in behaviors characteristic of the restrictive outcome of incident grouping.

DISCUSSION AND CONCLUSIONS

Two goals of this study were: (a) test whether the MMPI-A was able to statistically predict unit infractions within this sample of incarcerated adolescent females and (b) identify whether specific ranges of T-score values (e.g., 60T – 64T; 65T – 69T) were able to statistically predict unit infractions, regardless of the level of prediction significance for the overall MMPI-A scale. Based on previously identified behavioral correlates associated with elevated MMPI-A clinical, content and supplemental scales, 25 hypotheses were proposed (Butcher et al, 1992; Archer, 1997). Prior to analyses, unit infractions recorded on the CCF-225 were grouped according to behavioral relatedness by four independent raters and placed into five behavioral groupings (i.e., escape, assault, inability to correct behavior, vandalism and restrictive outcome of incident). Four of the 25 hypothesis were supported.

Descriptive Analyses

The loss of 70 (30.7%) profiles due to validity scale infractions greatly reduced the sample size within this study. Although adhering to the strict rejection criteria outlined in the *MMPI-A manual* (Butcher, et al, 1992) appeared to have resulted in a high number of rejected profiles within this sample, this reduction in sample size due to validity scale infractions is consistent with previous research examining the utility of the MMPI-A in an inpatient setting, which rejected 31% of MMPI-A profiles due to validity scale infractions (McGrath, Pogge, & Stokes, 2002). The *MMPI-A manual* (Butcher et al., 1992) and Archer (1997) are very specific that profiles with validity scale infractions should not be interpreted because infractions may be suggestive of test takers

approaching the test in a defensive manner, dishonest manner, trying to present his self/herself in a positive/negative light, etc.

Clinical Scales

Consistent with research on incarcerated adult males and females, as well as incarcerated adolescent males, MMPI-A Scale 4 was identified as the most elevated clinical scale across the sample (x = 63.44). Further, no other MMPI-A clinical scale reached the threshold of an overall mean above or equal to 60T. Scale 4 was also the most frequently observed scale with T-score values above 65T (40.9%).

Content Scales

Adolescent-conduct was the most elevated MMPI-A content scale across the sample (x = 63.34). Further, no other MMPI-A content scale reached the threshold of an overall mean above or equal to 60T.

Harris-Lingoes Subscales

Authority problems (Pd_2) was the most elevated Harris-Lingoes subscale (x = 68.28). Further, two other MMPI-A Harris-Lingoes subscales reached the threshold of an overall mean above or equal to 60T (self-alienation (Pd_5), x = 62.56; persecutory ideas (Pa_1), x = 60.22).

<div align="center">

Prediction Analyses

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Hypotheses

Overall, four of the 25 hypotheses were supported when the overall MMPI-A scale was used within the analyses. However, there were numerous T-score ranges on the MMPI-A identified as statistically predictive of specific hypotheses regardless of the

statistical significance of the overall scale analysis. When specific ranges of scores were analyzed, 13 of the 25 hypotheses were statistically supported.

While the escape and vandalism grouping was not predicted in either the MMPI-A overall scale analyses or the T-score range analyses, the number of MMPI-A scales identified as statistically predictive of behavioral groupings increased from three MMPI-A scales to seven MMPI-A scales when analyses were performed on specific T-score ranges. Interestingly, except for the statistical significance for the T-score range of 60 - 64 observed on both MMPI-A scales 4 and 8 that predicted the assault grouping, every other MMPI-A scale with a statistically significant T-score range always included a statistically significant T-scores range of 30 through 54. Moreover, the T-score range of 70 – 95 was not identified as statistically predictive of any specific hypothesis.

There are a few possible reasons for this finding. Although unlikely, it may be the case that the T-score range of 30 – 54 on MMPI-A reflects the most accurate predictor of these types of behaviors within this type of setting. However, the observed odds ratio for all MMPI-A scales with significant T-score ranges of 0 – 54 indicates that although the prediction of group membership may have been significant, the classification into group membership was not much better than 50% as a result of the MMPI-A. Further, the observed T-score distribution was not normally distributed within this sample. Although this is not problematic for logistical regression analysis, many more profiles were included in the analyses for the T-score range of 30 – 54, while only a few were included that had a T-score range of 70 and beyond.

Another reason so few hypotheses were initially supported during the overall scale analyses is that no research exists supporting the use of any MMPI-A scale in predicting behavioral correlates when all T-score values of the scale are used in the analyses. Research does exist and support, however, the increased likelihood of specific behavioral correlate observation only when T-score values on specific scales are above or below an empirically supported demarcation point. That is, adolescents who produce T-scores of 50 on MMPI-A scale 4 should not currently exhibit or have an increased likelihood of exhibiting in the future the same behaviors as those adolescents who produce, for example, T-scores of 75 on MMPI-A scale 4. Likewise, this same type of profile interpretation is also empirically supported for adolescents who produce T-scores below a specific demarcation T-score level of 40 for many of the scales. Because of these aforementioned examples, MMPI-A scales should not have been able to predict behavioral groupings when all T-score values of a specific scale were used in the analyses.

Observed descriptive analyses for the three predictive MMPI-A scales indicates a higher much higher proportion of T-scores above or equal to 65T, as compared to the rest of the scales used in the analyses. This proportion of observed T-score distribution above or equal to 65T permitted many more profiles being used in the analyses that research supports should have been able to predict behaviors consistent with the behavioral grouping. That is, compared to the other six MMPI-A scales, these three scales had a much lower proportion of profiles below the demarcation point where behavioral correlate interpretation is not empirically supported.

Potentially unrelated behavioral groupings may also explain why only four hypotheses were supported. The reason adolescent female assaults staff members, for example, may be completely different from the reasons they assault peers. The former may indicate a lack of respect for elders and a lack of adherence to the societal norm of not assaulting superiors, while the latter may simply show a lack of respect for same-aged peers. Secondly, the behavioral relatedness of factors identified by principal component analyses may have truly captured related behavioral constructs, regardless of the name given to the infraction on the CCF-225. That is, it may be the case that the behavioral constructs underlying adolescents who attempt to escape or attempt to abscond (i.e., significance is that they were caught prior to clearing the prison walls or caught prior to getting away from guards during an outing) may be an inability to plan (i.e., lack of forethought), a hasty behavioral reaction to anxiety or it may also be indicative of lower intellectual functioning. Conversely, the behavioral constructs underlying adolescents who escape or abscond (i.e., significance is that they successfully cleared the prison walls or managed to roam free from a guard during an outing) may be indicative of a high level of planning, which suggests rationality in the face of anxiety and a potentially higher level of intellectual functioning. Future research should examine using PCA as a statistical method for the placement of behavioral incidents into factors prior to analyses.

Even in light of the potential behavioral construct problems addressed in the above paragraph, grouping these incidents together behaviorally still makes practical sense for facilities. A treatment or incarceration facility needs to know whether certain

adolescents are going to assault, are going to destroy property, are going to engage in escape-type behaviors, etc. It does not make practical sense for a facility to use a standardized psychometric measure that is able to statistically predict statistically generated factors when incidents within those factors appear behaviorally unrelated; unless of course the level of prediction was always 100%, which, unfortunately, is not offered by any psychometric measure. If a facility, for example, generated two factors using PCA and factor 1 consisted of escape, vandalism under 100 dollars, assault on staff and sent to security, while factor 2 consisted of attempted escape, vandalism over 100 dollars, assault on staff and sent to detention, then it would appear that the facility would be at a loss on how to use individual test results to suggest treatment if factor 1 and factor 2 were predicted by different MMPI-A scales given the subjective behavioral relatedness of incidents within both factors.

Several MMPI-A scales may have cancelled the predictive ability of each other out. That is, of the 64 incarcerated adolescent females used in the escape grouping analysis, 20 adolescents may have MMPI-A scale 4 elevations, while 20 may have elevated MMPI-A scale 9 elevations with the rest evenly spit amongst other clinical scales. Analyses using research supported MMPI-A codetypes (e.g., 4/9) may have increased the prediction of these groupings. Future research should examine whether or not two-point codetypes offer researchers and facilities better prediction of unit infractions.

The fact that the normative sample for both the MMPI and MMPI-A did not include an incarcerated population may also explain why only a few of the hypotheses

were supported. Identified behavioral correlates associated with elevated MMPI-A scales may not be accurate descriptors within an incarcerated population. Continued use of this psychometric measure within an adolescent prison population requires much more research to test the utility of it and to identify behavior correlates that may be specific to this population.

Something specifically unique to this sample may also have contributed to the lack of hypotheses supported. Although the ethnic breakdown was not available for this specific sample, the ethnic breakdown for all adolescent females adjudicated to a TYC facility during the year of 2004 does not reflect the national average, nor does it reflect the ethnic breakdown for the normative sample for either the MMPI or the MMPI-A. Further, even if the behavioral correlates associated with elevated MMPI-A scales are representative for ethnic populations as a whole, they may not be representative of specific ethnic populations. That is, it may be the case that behavioral correlates associated with MMPI-A scale 4 elevations are descriptive of adolescent Hispanic females living in Minnesota, but are not descriptive of adolescent Hispanic females living in central Texas.

A lack of a theory and a working construct of human nature that should have guided the development for both the MMPI and the MMPI-A may be the biggest contributing factor why so few hypotheses were supported. Even if the original MMPI was developed out of a solid, well thought out theoretical construct of personality, that construct would fail to capture the wholeness of human beings (i.e., personality is just one part of a human being just like an arm is just one part; surely a human being cannot

be described in terms of his/her arm); therefore, making it an incomplete construct. Jean-Paul Sartre (trans. 1965) contends that before a therapy of "being" (i.e., human being) can be used, a theory of "being" must first be developed. That is, the therapy must always follow the theory. Likewise, a psychometric measure of human beings should also always follow a theory of human beings. Unfortunately, no theory of human being was ever proposed by any of the test developers.

Further, even if the point addressed in the above paragraph is completely disregarded, it may be the case that personality is not as stable as previously thought. To contend that an individual's personality should remain stable across time, especially in light of a complete lifestyle change (e.g., home vs. jail), is to arguably deny him/her freedom of choice to become whatever he/she chooses to be. It should also be noted that many researchers contend that an individual's personality is not completely formed until he/she is 18 years of age. Adolescents within this sample ranged in age from 13 through 17. Therefore, it is possible that although they may have presented as neurotic upon admission, for example, their personality may have shifted as a result of incarceration and treatment; thereby, no longer engaging in behaviors characteristic of neurotic individuals after a year or so.

Escape grouping. One of the biggest single events that can destroy the credibility of an incarceration institution is an inmate's escape. The negative publicity brings scorn from national and local leaders, as well as fear from the local community. Unfortunately, no MMPI-A scale was able to statistically predict adolescents that would attempt behaviors consistent with the escape grouping. There may be many reasons for

this. One possible reasons may be that the MMPI-A does not have external validity in predicting this type of event. That is, the MMPI was not initially developed with the intent of being used within a prison population, nor did the normative sample include an incarcerated population for either the MMPI or the MMPI-A. There are a multitude of potential variables or behavioral constructs that may make adolescents willing to attempt to escape. None of these variables or constructs, however, may be statistically identified by the MMPI-A.

The aforementioned possibility that behavioral construct differences exist between adolescents who attempt to escape, but are caught and those adolescents who are successful in escaping may indicate another reason the escape grouping was not able to be predicted. Future research should examine potential differences between these groups and consider dichotomizing this group based on an escape success variable prior to analyses.

Both the *MMPI-A manual* (Butcher et al., 1992) and Archer (1997) report that compared to the use of single-point scales, using MMPI-A codetypes increases prediction of empirically supported external behavioral correlates. Although no single-point MMPI-A scale was able to statistically predict the escape grouping, analyses using two- or even three-point codetypes may have increased the statistical probability of prediction. Future research should examine using codetypes, rather than single-point scales to examine the predictive validity of the MMPI-A, not only on this grouping, but all of the groupings within this study.

Assault grouping. Due to the population, working in a jail can be a very dangerous job. Guards and prison staff that work at these facilities run the risk every day of serious bodily injury inflicted upon them by those they are charged with caring for and protecting. Knowing specific characteristics (e.g., psychometric data) of individuals who are more likely to assault them while they fulfill their duties would be a very useful and comforting piece of data for all guards and prison staff members. As hypothesized, MMPI-A scale 4 was statistically predictive of adolescents who would engage in behaviors consistent with the assault grouping. Unfortunately, MMPI-A scale 4 was the only overall statistically identified scale predictive of this grouping. When specific T-score ranges on MMPI-A scales were analyzed, however, the T-score range of 60 through 64 was identified as a statistically significant predictor of the assault grouping for both MMPI-A scales 4 and 8. The aforementioned discussion regarding the reason overall MMPI-A scales should not be predictive, but that specific T-score ranges should be predictive for specific scales should help to explain the statistical findings within this grouping.

Inability to correct behavior grouping. Guards and prison staff are generally outnumbered in terms of the guard to inmate ratio. Regardless, staff members are responsible for ensuring the adherence of facility rules for all incarcerated individuals. Their job most likely becomes more difficult when incarcerated individuals refuse to follow unit directives. Two MMPI-A scales were statistically identified as predictive of adolescents who would engage in behaviors consistent with the inability to correct behavior grouping. As hypothesized, both MMPI-A scales 4 and 5 were statistically

predictive of adolescent females who would engage in behaviors consistent with this grouping. Further, when specific T-score ranges were analyzed, Scale 4 (T = 60 through 64), Scale 5 (T = 30 through 54 and 65 – 69), Conduct (T = 30 through 54 and 55 through 59) and Immaturity (T = 30 through 54, 55 through 59 and 65 through 69) were all identified as statistically significant predictors of this grouping.

Vandalism grouping. Destruction of unit property cuts into the facility budget, which may impact the hiring of needed staff. Further, destruction of property potentially creates a safety risk (e.g., broken glass) for everyone within the facility. Unfortunately, no hypothesized scale or T-score range was able to statistically predict adolescents who would engage in behaviors consistent with the vandalism grouping. The low number of facility destruction incidents may explain why this grouping was not predicted. Further, as aforementioned, a hasty reaction to anxiety construct may underlie individuals who destroy property. Because of this, the construct underlying adolescents who commit these behaviors may indicate a different behavioral construct, rather than a construct that stands by itself.

Restrictive outcome of incident grouping. As with the aforementioned inability to correct behavior grouping, incarcerated individuals who do not initially accept redirection potentially pose a security risk for the facility. Unfortunately, some individuals complete refusal to compose themselves and accept redirection necessitates staff members to impose serious adverse consequences upon them in order to retain control and hopefully diminish the likelihood of specific behaviors occurring in the future.

Only two of the hypothesized seven MMPI-A scales (e.g., Conduct and Immaturity) were able to statistically predict adolescent females who would engage in behaviors consistent with the restrictive outcome of incident grouping. However, when specific ranges of T-scores were analyzed, every hypothesized MMPI-A scales had at least a couple of T-score ranges that were identified as statistical predictors of this grouping. Unlike every other behavioral grouping used within this study, this grouping required an action by a staff in order for adolescents to be placed within this category. Further, many factors may have inherently gone into a staff member placing an adolescent into this grouping. For example, the comfort and experience level of a staff could have arguably made him/her more likely to "jump the gun", rather using his/her previous experiences to better handle the situation.

Statistical Significance vs. Odds Ratios

Logistical regression can be interpreted a couple different ways depending on the previously identified research question. Logistical regression, for example, can be used to either statistically predict the probability of group membership or to statistically classify group membership through the use of logarithmic odds ratios. These two ways of interpretation, however, do not always produce statistically identical results. As seen in this study, few hypotheses were supported (i.e., prediction model), but only one MMPI-A scales had an odds ratios (i.e., classification model) less than 1.0, indicating that except for that one analysis (i.e., scale 8/RO), the logarithmic odds of group membership increased as the T-score values on the MMPI-A increased. That is, using MMPI-A scales increased the odds of membership into a specific behavioral grouping

for all but one analysis, even though the p-value for the prediction model ranged from 0.30 to 0.90 or greater.

The purpose of this study was to determine whether the MMPI-A could predict groupings, not whether individual MMPI-A scales increased the classification into groupings. Neither way is the correct way to examine data. It was decided at the onset of this study, however, that the data would be analyzed according to the prediction model.

True Positive vs. False Negative Prediction

Knowing characteristics of adolescents who are more likely to either assault you or attempt to escape, for example, is a very useful piece of data that psychometric instruments should be able to provide to facilities. This knowledge can help guards and staff members remain more vigilant, as well as to help in the decisions regarding placement for incarcerated adolescents into specific milieus, treatment programs, chore details, etc. Believing that certain adolescents are not a risk for the two aforementioned examples because of psychometric data, however, possesses a very serious risk for staff members and the facility. For example, if psychometric data (i.e., MMPI-A) suggests that individuals who produce specific profiles are unlikely to engage in specific behaviors, guards may become less vigilant and facilities may place psychometrically identified no-risk adolescents into situations that seriously compromise everyone at the facility.

Except for the inability to correct behavior and the restrictive outcome of incident groupings, which over 90% of the sample engaged in behaviors consistent with

each of these groupings, individual MMPI-A scales failed to identify many adolescents who committed an offense within other groupings. As aforementioned, future research should perform MMPI-A codetype analyses to test whether 2-point scales decreases the true positive to false negative ratio compared to single-point scale prediction analyses.

Limitations to This Study

The central limitation to this study was that the predictive results of this study could not be compared to other researcher. It may be that the predictability of the MMPI-A is limited to incarcerated females in the state of Texas or even to adolescent females within this study. Future research examining the utility of the MMPI-A within an incarcerated adolescent population should attempt to gain a more representative sample and replicate these results.

Another potential limitation to this study was in the administration of the MMPI-A. Although it may appear as helpful for the test administrator to define the meaning of specific words on the MMPI-A, this goes against guidelines for administration set forth in the *MMPI-A manual* and also the administration procedures used in the normative sample (Butcher et al., 1992). Defining words can potentially improve the accuracy of an adolescent's response and increase the validity of his/her profile, but this approach has many potential drawbacks.

First, the administrator could incorrectly define a word. Further, by defining the word, the administrator may inadvertently lead the adolescent to answer the question in a manner that does not reflect how he/she may truly feel and may have answered the question (e.g., the word "blue" located in the question "I feel blue."). Also, many factors

may be associated with a willingness to approach a staff to ask him/her the meaning of a word (e.g., staff administrating the test, anxiety level of the adolescent, an attempt by the adolescent to present him/herself in a positive light). Most importantly, however, may be that defining a certain number of words invalidates the required 4th grade reading level necessary for this instrument. That is, by asking the meaning of a word, the adolescents may now know what a specific words means, thus making their validity scales appear that they approached the test in an honest manner, but it does not mean that he/she is able to comprehend the meaning of the question on a 4th grade level, possibly making them appear more or less sick than they truly are. Unfortunately, the reading level of adolescents within this sample was unknown. Further, no data exists on the reading level of adolescents adjudicated to a TYC facility.

Adolescents in this sample have an invested interest in presenting themselves in a more psychologically disturbed manner and the probability that this occurred within this sample may have increased as a function of the adolescent's knowledge of the prison system. For example, prisoners who are judged to be psychologically disturbed are either placed in separate treatment facilities or on separate units within the prison. Although validity scale analyses invalidated 70 profiles from further analyses within this study, more intelligent and sophisticated adolescents may have been able to understand in advance the purpose of this measure, how test results could potentially help them to be placed in a less strict environment and the reason questions are asked several different ways on this measure.

The MMPI-A was administered upon admission to the TYC intake facility and behaviors were monitored over a two year period. Although both the construct of this test and the stability of personality overtime were previously discussed, there is little reason to assume that an individual's MMPI-A profile should look exactly the same as it did during the first few days of incarceration as it did after two years of incarceration. Many reasons could have influenced why an adolescent female produced elevations on Scale 2, the biggest reason possibly being the feeling of utter despair knowing that she was going to be incarcerated for the next five years. Examples like the previous ones can be made for many of the scales. Because of this, results of this study may not reflect accurate descriptors of behaviors observed by adolescents who produce specific MMPI-A profiles upon admission into an incarceration facility. Future research should examine pre-and post-MMPI-A profiles to determine the stability of profiles across time prior to behavioral prediction.

Lastly, the reliability of the critical incident reports is suspect. It may have been the case that a staff member, the individual reporting the infraction, favored certain adolescents and gave these adolescents a lot of leeway with unit rules, but did not give other adolescents the same amount of leeway. If this were the case, it may have affected the validity of all of the findings in this study.

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APPENDIX A

Case Number: _____ Youth Name: _____

Last   First   MI

Location: _____

I.   INCIDENT

        Incident Date: _____/_____/_____

        Incident Time: _____ / _____ / _____ M

        Incident Location: (circle one)   Institution

               Community Program

RA	Recreation Area	**CF**	Cafeteria
SC	School		
OP	Other On Campus	**DE**	Security
DT	Detention	**OC**	Off Campus
DO	Dorm	**FC**	Facility
FG	Facility Grounds	**CL**	Classroom
OL	Other Location		
IF	Infirmary	**FR**	Furlough

Incident Category: (circle all appropriate items)

AR	Arrest _____ Most Serious Offense		
	Arrested For (write in code)		
AS	Assault on Staff		
DH	Death		
ST	Assault of Youth/Other		
AB	Alleged Abuse or Neglect		
DA	Danger to Others		
RT	Use of Mechanical Restraints During Non-routine Transportation		
DS	Disruption of Program	**IS**	Danger of Injury to Self
DP	Destruction of Property	**PS**	Possession or Use of Substance
CI	Injury Requiring Hospital Admission		
VA	Vandalism (over $100)	**PW**	Possession of Weapon
PF	Use of Physical Force		
AD	Abscond	**SR**	Self-referral to Security
CN	Use of Mechanical Restraints for Control		
AA	Attempted Abscond	**SI**	Staff Injury
CA	Use of Chemical Agent		
ER	Identified Escape Risk	**PI**	Placement in Isolation
HO	Hostage Incident		
AE	Attempted Escape	**RR**	2 or More Failures to Comply with Reasonable Request
RS	Use of Mechanical Restraints in Security		
ES	Escape	**YI**	Youth Injury without Hospitalization

No. of Paid Days: _____

        Youth was injured or claimed to be injured in the incident?   ☐ No ☐ Yes

        If yes, describe location and type of injury youth sustained or claimed to sustain (attach a page if necessary):

        _____

        Was youth referred for medical treatment?   ☐ No ☐ Yes

        Time: __:_____ M

        Return from Escape/Abscond: Date: ___/_____/_____   Time: _____:_____ M

        Directive Issued Date: _____/_____/_____ Tme: ____:____ _____ M Ended Date: _/_____/_

        Time: __:_____ _____ M

        Ended PI Date: _____//_____   Time: _:_ _____ M Ended RS Date: _____/__/_

        Time: ___: __ M

Referred to:	Security?	☐ No ☐ Yes	Detention?	☐ No ☐ Yes

Referred to: Security? ☐ No ☐ Yes   Detention?   ☐ No ☐ Yes

Jail? ☐ No ☐ Yes

Admitted to: Security? ☐ No ☐ Yes   Detention?   ☐ No ☐ Yes

Jail? ☐ No ☐ Yes

Referring Staff Person: _____

II.   DESCRIPTION: Summarize the incident in the space provided and enter into CCS as written. Attach additional detail description page(s) if necessary: _____

_____

_____

Staff Witness		Youth Witness

_____   _____

_____   _____

_____   _____

Disposition of Physical Evidence (contraband): _____

_____

Signature of Person Reporting Incident   Title   Date

III.   USE OF PHYSICAL FORCE REPORT

A.   Was physical restraint used?   ☐ No ☐ Yes

Time applied_____ : ____M

Time released_____ : ____M

Was mechanical restraint used?   ☐ No ☐ Yes

Time applied_____ : ____M

Time released_____ : ____M

Use of mechanical restraints authorized by:_____

Name   Title

☐ Applied for more than 15 minutes. Provide justification:_____

☐ Applied for 30 minutes or more. Authorized by: _____

Name   Title

B.   Was full body restraint used?   ☐ No ☐ Yes

Full body restraint authorized by:_____

Superintendent or Designee

*AND*_____

Correctional Care Staff Trained in Full Body Restraint

Time full body restraint was applied: _____:_____ _____M

Release Time: _____:_____ _____M

Action taken at the end of one hour: _____

_____   _____

Signature of Person Filing Use of Physical Force   Title   Date

IV.   HOSTAGE/USE OF CHEMICAL AGENT REPORT

A.   Did the incident include the taking of hostages?   ☐ No ☐ Yes   If yes, see Part II for full description.

B.   Did the incident include the use of chemical agent?   ☐ No ☐ Yes

V.   This Incident Report involving use of physical force, use of mechanical restraint, use of chemical agent, and/or taking of hostages has been reviewed by:

Signature of Institutional or Halfway House Superintendent or Designee   Date

VI.   SECURITY DETENTION/JAIL

Admission Date: _____/_____/_____   Admission Time:_____:_____ _____M   **Admission

Number: _____

*No. of Paid Days: _____   County of Detention/Jail: _____

Reason for Admission: (circle one)   Security

    Jail   Detention

    DS   Disruption of Program   **DO**   Danger or Injury to Others
    AH   Awaiting Hearing/Transportation
    DP   Destruction of Property   **IS**   Danger or Injury to Self
    FO   Arrest for Felony Offense
    AD   Abscond   **SR**   Self-referral
    AR   Arrest for Other than Felony Offense
    EA   Escape or Attempt

Release Date: _____/_____/_____   Release Time::_____M

Admission Decision Made By: _____ Title:

Justification: (summarize in the space provided)

Release Decision Made By: _____ Title: _____

**Reviewed By: _____ Title: _____

Contract Care Only   ***** Institutions Only**

VITA

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