# **SAMPLE REPORT**



### Case Description: Mr. J – Interpretive Report

Mr. J is a 44-year-old divorced man assessed at intake for services at a community mental health center following a brief stay at a crisis stabilization unit. Mr. J was taken to the stabilization unit by law enforcement personnel after a serious suicide attempt involving vehicular carbon monoxide poisoning. He had been involved in very contentious divorce- and child custody-related proceedings for two years prior to this attempt. In addition to having a conflictual relationship with his ex-wife, Mr. J was estranged from his two teenage children, and he had minimal sources of social support. His only prior contact with a mental health professional involved a child custody evaluation conducted two years prior to the current assessment. Mr. J's ex-wife was granted full custody minus planned bi-weekly visitations with Mr. J.

The worker who conducted Mr. J's intake interview described him as depressed, despondent, tearful, and withdrawn. He was characterized as speaking in a monotone and giving laconic responses to questions he was asked. He was fully oriented and showed no signs of thought disturbance. No significant history of acting out behavior was elicited. Mr. J acknowledged continuing suicidal ideation but denied current intent. He was diagnosed with a Major Depressive Disorder, Severe with Melancholic Features and accepted for treatment in an intensive outpatient program.

Case descriptions do not accompany MMPI-3 reports, but are provided here as background information. The following report was generated from Q-global<sup>™</sup>, Pearson's web-based scoring and reporting application, using Mr. J's responses to the MMPI-3. Additional MMPI-3 sample reports, product offerings, training opportunities, and resources can be found at **PearsonAssessments.com/MMPI-3**.

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Minnesota Multiphasic Personality Inventory®-3

#### Interpretive Report: Clinical Settings

MMPI<sup>®</sup>-3

Minnesota Multiphasic Personality Inventory®-3 Yossef S. Ben-Porath, PhD, & Auke Tellegen, PhD

reported reported

ID Number:	Mr. J
Age:	44
Gender:	Male
Marital Status:	Not reported
Years of Education:	Not reported
Date Assessed:	08/01/2020

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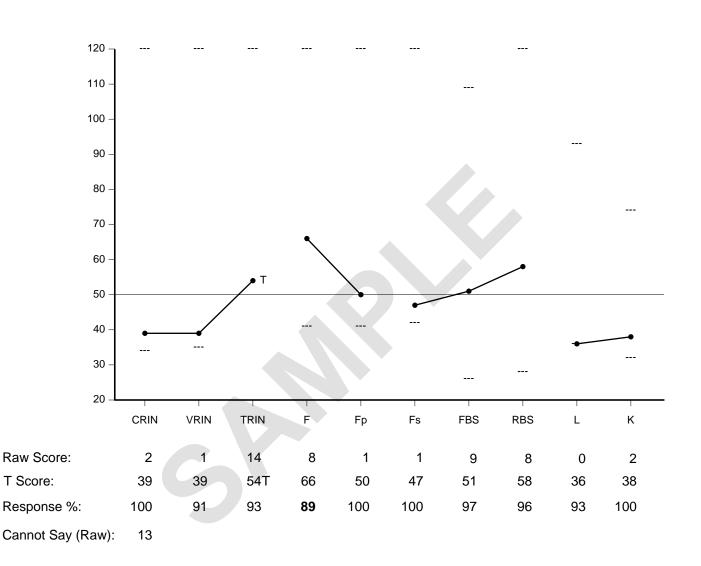
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PEARSON

ALWAYS LEARNING



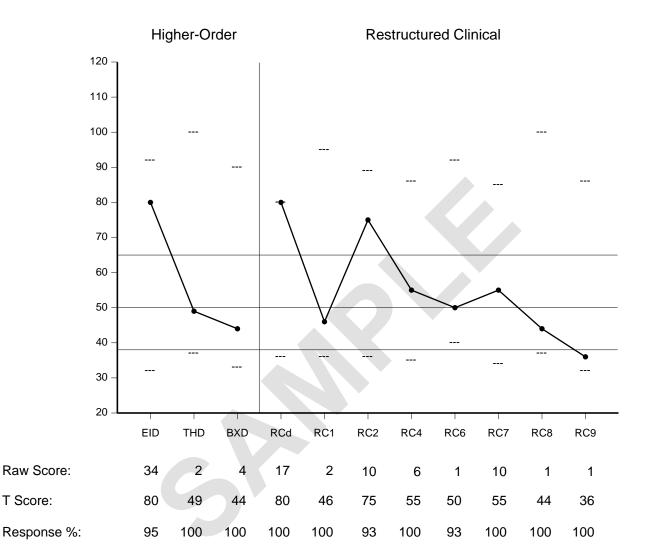
### **MMPI-3 Validity Scales**

The highest and lowest T scores possible on each scale are indicated by a "---"; MMPI-3 T scores are non-gendered.

CRIN Combined Response Inconsistency

- F Infrequent Responses
- VRIN Variable Response Inconsistency Fp
- TRIN True Response Inconsistency
- Infrequent Psychopathology Responses
- Infrequent Somatic Responses Fs
  - FBS Symptom Validity Scale
  - RBS Response Bias Scale

- L Uncommon Virtues
- K Adjustment Validity



# MMPI-3 Higher-Order (H-O) and Restructured Clinical (RC) Scales

The highest and lowest T scores possible on each scale are indicated by a "---"; MMPI-3 T scores are non-gendered.

EID Emotional/Internalizing Dysfunction

THD Thought Dysfunction

RCd Demoralization RC1 Somatic Complaints

BXD Behavioral/Externalizing Dysfunction

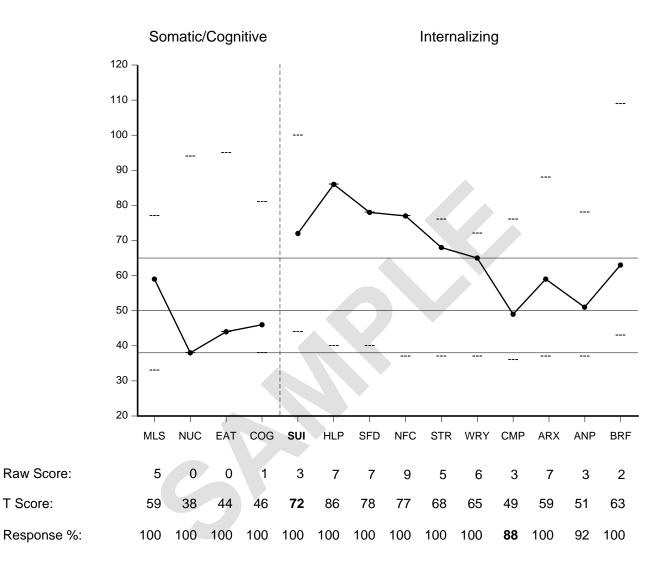
RC2 Low Positive Emotions

RC4 Antisocial Behavior

RC6 Ideas of Persecution

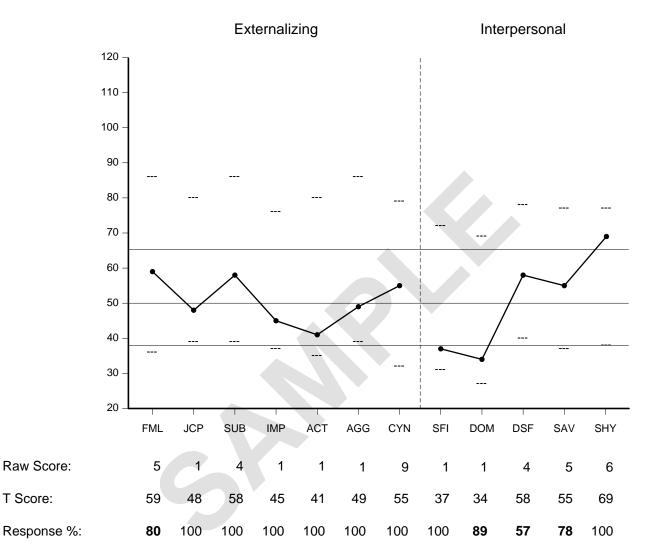
- RC7 Dysfunctional Negative Emotions
- RC8 Aberrant Experiences
- RC9 Hypomanic Activation

# **MMPI-3 Somatic/Cognitive Dysfunction and Internalizing Scales**



The highest and lowest T scores possible on each scale are indicated by a "---"; MMPI-3 T scores are non-gendered.

MLS Malaise NUC Neurological Complaints EAT Eating Concerns COG Cognitive Complaints	SUI HLP SFD NFC	Suicidal/Death Ideation Helplessness/Hopelessness Self-Doubt Inefficacy	CMP ARX	Worry Compulsivity Anxiety-Related Experiences Anger Proneness
COG Cognitive Complaints	STR	Inefficacy Stress		Anger Proneness Behavior-Restricting Fears



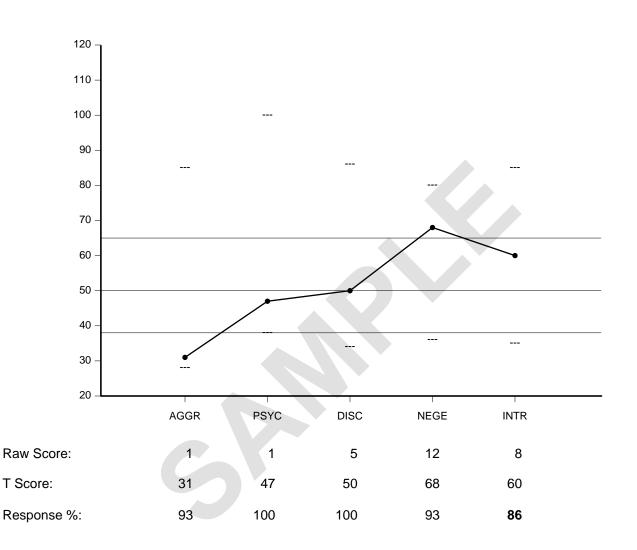
## **MMPI-3 Externalizing and Interpersonal Scales**

The highest and lowest T scores possible on each scale are indicated by a "---"; MMPI-3 T scores are non-gendered.

FMLFamily ProblemsJCPJuvenile Conduct ProblemsSUBSubstance AbuseIMPImpulsivity

ACT Activation AGG Aggression CYN Cynicism SFISelf-ImportanceDOMDominanceDSFDisaffiliativenessSAVSocial AvoidanceSHYShyness





The highest and lowest T scores possible on each scale are indicated by a "---"; MMPI-3 T scores are non-gendered.

AGGRAggressivenessPSYCPsychoticismDISCDisconstraintNEGENegative Emotionality/NeuroticismINTRIntroversion/Low Positive Emotionality

# **MMPI-3 T SCORES (BY DOMAIN)**

#### **PROTOCOL VALIDITY**

Content Non-Responsiveness		13	39	39	54 T				
		CNS	CRIN	VRIN	TRIN				
Over-Reporting		66*	50		47	51	58		
- · · · · · · · · · · · · · · · · · · ·		F	Fp	-	Fs	FBS	RBS		
Under Departing		26	20						
Under-Reporting		<u>36</u> L	<u>38</u> К						
SUBSTANTIVE SCALES									
Somatic/Cognitive Dysfunction		46	59	38	44	46			
		RC1	MLS	NUC	EAT	COG			
		_							
Emotional Dysfunction	80	80	72	86	78	77			
	EID	RCd	SUI	HLP	SFD	NFC			
		75	60*						
		RC2	INTR						
		55	68	65	49*	59	51	63	68
		RC7	STR	WRY	CMP	ARX	ANP	BRF	NEGE
Thought Dysfunction	49	50							
	THD	RC6							
		44							
		RC8							
		47							
		PSYC							
Behavioral Dysfunction	44	55	59*	48	58				
	BXD	RC4	FML	JCP	SUB				
		36	45	41	49	55			
		RC9	IMP	ACT	AGG	CYN			
		50							
		DISC							
Interpersonal Functioning		37	34*	31	58*	55*	69		
		SFI	DOM	AGGR	DSF	SAV	SHY		

\*The test taker provided scorable responses to less than 90% of the items scored on this scale. See the relevant profile page for the specific percentage.

Scale scores shown in bold font are interpreted in the report.

*Note.* This information is provided to facilitate interpretation following the recommended structure for MMPI-3 interpretation in Chapter 5 of the *MMPI-3 Manual for Administration, Scoring, and Interpretation*, which provides details in the text and an outline in Table 5-1.

This interpretive report is intended for use by a professional qualified to interpret the MMPI-3. The information it contains should be considered in the context of the test taker's background, the circumstances of the assessment, and other available information.

The report includes extensive annotation, which appears as superscripts following each statement in the narrative, keyed to Endnotes with accompanying Research References, which appear in the final two sections of the report. Additional information about the annotation features is provided in the headnotes to these sections and in the MMPI-3 User's Guide for the Score and Clinical Interpretive Reports.

# SYNOPSIS

Scores on the MMPI-3 Validity Scales raise concerns about the possible impact of unscorable responses on the validity of this protocol. With that caution noted, scores on the Substantive Scales indicate emotional, behavioral, and interpersonal dysfunction. Emotional-internalizing findings include **suicidal ideation**, demoralization, lack of positive emotions, helplessness and hopelessness, self-doubt, perceived inefficacy, negative emotionality, stress, and worry. Behavioral-externalizing problems relate to lack of energy and engagement. Interpersonal difficulties include lack of self-esteem and social anxiety.

## **PROTOCOL VALIDITY**

#### **Content Non-Responsiveness**

#### Unscorable Responses

The test taker answered less than 90% of the items on the following scales. The resulting scores may therefore be artificially lowered. In particular, the absence of elevation on these scales is not interpretable<sup>1</sup>. A list of all items for which the test taker provided unscorable responses appears under the heading "Item-Level Information."

Infrequent Responses (F): 89% Compulsivity (CMP): 88% Family Problems (FML): 80% Dominance (DOM): 89% Disaffiliativeness (DSF): 57% Social Avoidance (SAV): 78% Introversion/Low Positive Emotionality (INTR): 86%

#### Inconsistent Responding

The test taker responded to the items in a consistent manner, indicating that he responded relevantly.

#### **Over-Reporting**

The test taker may have over-reported general psychological dysfunction. The extent of possible over-reporting cannot be precisely determined because of 4 unscorable responses on the 35-item Infrequent Responses (F) scale. The following table shows what the T scores for F would be if the unscorable items had been answered in the keyed direction.

Scale: FT score based on scorable responses:66Cutoff for over-reporting concern:75					
If answered in the keyed direction	The T score would be				
1	69				
2	72				
3	75				
4	78				

See Chapter 5 of the *MMPI-3 Manual for Administration, Scoring, and Interpretation* for guidance on interpreting elevated scores on F.

#### Under-Reporting

There are no indications of under-reporting in this protocol.

### SUBSTANTIVE SCALE INTERPRETATION

Clinical symptoms, personality characteristics, and behavioral tendencies of the test taker are described in this section and organized according to an empirically guided framework. (Please see Chapter 5 of the MMPI-3 Manual for Administration, Scoring, and Interpretation for details.) Statements containing the word "reports" are based on the item content of MMPI-3 scales, whereas statements that include the word "likely" are based on empirical correlates of scale scores. Specific sources for each statement can be viewed with the annotation features of this report.

# The following interpretation needs to be considered in light of cautions noted about the possible impact of unscorable responses on the validity of this protocol.

#### Somatic/Cognitive Dysfunction

There are no indications of somatic or cognitive dysfunction in this protocol.

#### **Emotional Dysfunction**

The test taker reports a history of suicidal/death ideation and/or past suicide attempts<sup>2</sup>. He likely is at risk for self-harm<sup>3</sup>, is preoccupied with suicide and death<sup>4</sup>, and is at risk for current suicidal ideation and attempts<sup>5</sup>.

His responses indicate considerable emotional distress that is likely to be perceived as a crisis<sup>6</sup>. More specifically, he reports experiencing significant demoralization, feeling overwhelmed, and being extremely unhappy, sad, and dissatisfied with his life<sup>7</sup>. He very likely complains about significant depression<sup>8</sup> and experiences sadness and despair<sup>9</sup>. In particular, he reports having lost hope and believing he cannot change and overcome his problems and is incapable of reaching his life goals<sup>10</sup>. He very likely feels hopeless, overwhelmed, and that life is a strain<sup>11</sup>, believes he cannot be helped<sup>11</sup> and gets a raw deal from life<sup>12</sup>, and lacks motivation for change<sup>13</sup>. He also reports lacking confidence, feeling worthless, and believing he is a burden to others<sup>14</sup>. He very likely experiences self-doubt, feels insecure and inferior, and is self-disparaging and intropunitive<sup>15</sup>. In addition, he reports being very indecisive and inefficacious, believing he is incapable of making decisions and dealing effectively with crisis situations, and even having difficulties dealing with small, inconsequential matters<sup>16</sup>. He very likely experiences subjective incompetence and shame<sup>17</sup> and lacks perseverance and self-reliance<sup>18</sup>.

The test taker reports a lack of positive emotional experiences and a lack of interest<sup>19</sup>. He likely is pessimistic<sup>20</sup> and presents with anhedonia<sup>21</sup>.

He reports experiencing an elevated level of negative emotionality<sup>22</sup> and indeed likely experiences various negative emotions<sup>23</sup>. More specifically, he reports an above average level of stress<sup>24</sup>. He likely complains about

stress<sup>25</sup> and feels incapable of controlling his anxiety level<sup>25</sup>. He also reports excessive worry, including worries about misfortune and finances, as well as preoccupation with disappointments<sup>26</sup>. He indeed likely worries excessively<sup>27</sup> and ruminates<sup>28</sup>.

#### **Thought Dysfunction**

There are no indications of disordered thinking in this protocol.

#### **Behavioral Dysfunction**

There are no indications of maladaptive externalizing behavior in this protocol. The test taker reports a low energy level<sup>29</sup> and indeed likely has a low energy level<sup>30</sup> and is disengaged from his normal activities<sup>30</sup>.

#### **Interpersonal Functioning Scales**

The test taker describes himself as lacking in positive qualities<sup>31</sup>.

He reports being shy, easily embarrassed, and uncomfortable around others<sup>32</sup>. He is likely to be socially introverted<sup>33</sup> and inhibited<sup>34</sup>, anxious and nervous in social situations<sup>35</sup>, and viewed by others as socially awkward<sup>36</sup>.

### **DIAGNOSTIC CONSIDERATIONS**

This section provides recommendations for psychodiagnostic assessment based on the test taker's MMPI-3 results. It is recommended that he be evaluated for the following, bearing in mind possible threats to protocol validity noted earlier in this report:

#### **Emotional-Internalizing Disorders**

- Major depression and other anhedonia-related disorders37
- Features of personality disorders involving negative emotionality such as Dependent<sup>38</sup>
- Generalized anxiety disorder<sup>25</sup>
- Disorders involving excessive worry<sup>39</sup>

#### Interpersonal Disorders

- Social anxiety disorder (social phobia)40

# TREATMENT CONSIDERATIONS

This section provides inferential treatment-related recommendations based on the test taker's MMPI-3 scores. The following recommendations need to be considered in light of cautions noted earlier about possible threats to protocol validity.

#### Areas for Further Evaluation

- Risk for suicide should be assessed immediately<sup>41</sup>.
- Need for antidepressant medication<sup>42</sup>.

#### **Psychotherapy Process Issues**

- Serious emotional difficulties may motivate him for treatment<sup>43</sup>.
- Indecisiveness may interfere with establishing treatment goals and progress in treatment<sup>44</sup>.

#### **Possible Targets for Treatment**

- Demoralization as an initial target<sup>45</sup>
- Loss of hope and feelings of despair as early targets for intervention<sup>46</sup>
- Low self-esteem and other manifestations of self-doubt47
- Anhedonia48
- Developing stress management skills<sup>49</sup>
- Excessive worry and rumination39
- Anxiety in social situations<sup>40</sup>

## **ITEM-LEVEL INFORMATION**

### Unscorable Responses

Note

Item numbers and content are included in the actual reports. To protect test security, the item details do not appear in this sample report.

Following is a list of items to which the test taker did not provide scorable responses. Unanswered or double answered (both True and False) items are unscorable. The scale(s) on which the items appear are in parentheses following the item content.

Item number and content omitted. (VRIN, SAV, INTR) Item number and content omitted. (CMP) Item number and content omitted. (TRIN, F, DSF) Item number and content omitted. (TRIN, F, FML) Item number and content omitted. (VRIN, DSF) Item number and content omitted. (FBS) Item number and content omitted. (DOM, AGGR) Item number and content omitted. (EID, RC2, SAV, INTR) Item number and content omitted. (RBS, L) Item number and content omitted. (F, FML) Item number and content omitted. (VRIN, DSF) Item number and content omitted. (VRIN, EID, ANP, NEGE) Item number and content omitted. (F, RC6)

#### **Critical Responses**

Seven MMPI-3 scales—Suicidal/Death Ideation (SUI), Helplessness/Hopelessness (HLP), Anxiety-Related Experiences (ARX), Ideas of Persecution (RC6), Aberrant Experiences (RC8), Substance Abuse (SUB), and Aggression (AGG)—have been designated by the test authors as having critical item content that may require immediate attention and follow-up. Items answered by the individual in the keyed direction (True or False) on a critical scale are listed below if his T score on that scale is 65 or higher. However, any item answered in the keyed direction on SUI is listed. The percentage of the MMPI-3 normative sample that answered each item in the keyed direction is provided in parentheses following the item content.

#### Suicidal/Death Ideation (SUI, T Score = 72)

Item number and content omitted. (True, 22.2%) Item number and content omitted. (True, 8.1%) Item number and content omitted. (True, 2.5%)

Helplessness/Hopelessness (HLP, T Score = 86)

Item number and content omitted. (True, 10.9%) Item number and content omitted. (True, 8.7%) Item number and content omitted. (True, 12.3%) Item number and content omitted. (True, 4.6%) Item number and content omitted. (True, 45.4%) Item number and content omitted. (False, 22.0%) Item number and content omitted. (True, 8.4%)

#### **User-Designated Item-Level Information**

The following item-level information is based on the report user's selection of additional scales, and/or of lower cutoffs for the critical scales from the previous section. Items answered by the test taker in the keyed direction (True or False) on a selected scale are listed below if his T score on that scale is at the user-designated cutoff score or higher. The percentage of the MMPI-3 normative sample that answered each item in the keyed direction is provided in parentheses following the item content.

#### Demoralization (RCd, T Score = 80)

Item number and content omitted. (True, 11.3%) Item number and content omitted. (True, 44.5%) Item number and content omitted. (True, 14.9%) Item number and content omitted. (True, 29.4%) Item number and content omitted. (True, 41.0%) Item number and content omitted. (False, 15.7%) Item number and content omitted. (True. 35.3%) Item number and content omitted. (True, 23.9%) Item number and content omitted. (True, 21.9%) Item number and content omitted. (True, 21.5%) Item number and content omitted. (True, 58.0%) Item number and content omitted. (True, 27.8%) Item number and content omitted. (False, 46.0%) Item number and content omitted. (True, 28.7%) Item number and content omitted. (True, 25.7%) Item number and content omitted. (True, 32.0%) Item number and content omitted. (True, 22.0%)

#### Low Positive Emotions (RC2, T Score = 75)

Item number and content omitted. (False, 17.9%) Item number and content omitted. (False, 27.2%) Item number and content omitted. (False, 41.2%) Item number and content omitted. (False, 29.7%) Item number and content omitted. (True, 13.2%) Item number and content omitted. (False, 7.3%) Item number and content omitted. (False, 9.1%) Item number and content omitted. (False, 22.0%) Item number and content omitted. (False, 33.5%) Item number and content omitted. (False, 27.0%)

#### Self-Doubt (SFD, T Score = 78)

Item number and content omitted. (True, 11.3%) Item number and content omitted. (True, 29.4%) Item number and content omitted. (True, 41.0%) Item number and content omitted. (True, 11.8%) Item number and content omitted. (True, 28.7%) Item number and content omitted. (True, 14.6%) Item number and content omitted. (True, 32.0%)

#### Note

Item numbers and content are included in the actual reports. To protect test security, the item details do not appear in this sample report.

#### Inefficacy (NFC, T Score = 77)

Item number and content omitted. (True, 37.7%) Item number and content omitted. (True, 45.2%) Item number and content omitted. (True, 42.3%) Item number and content omitted. (True, 35.3%) Item number and content omitted. (True, 23.9%) Item number and content omitted. (True, 25.2%) Item number and content omitted. (True, 29.0%) Item number and content omitted. (True, 20.9%) Item number and content omitted. (True, 40.2%)

#### Stress (STR, T Score = 68)

Item number and content omitted. (False, 31.7%) Item number and content omitted. (False, 26.7%) Item number and content omitted. (True, 30.9%) Item number and content omitted. (True, 31.6%) Item number and content omitted. (False, 58.8%)

#### Worry (WRY, T Score = 65)

Item number and content omitted. (True, 42.5%) Item number and content omitted. (True, 26.3%) Item number and content omitted. (True, 40.6%) Item number and content omitted. (True, 54.0%) Item number and content omitted. (True, 57.8%) Item number and content omitted. (True, 50.9%)

#### Shyness (SHY, T Score = 69)

Item number and content omitted. (True, 27.8%) Item number and content omitted. (True, 29.1%) Item number and content omitted. (True, 38.0%) Item number and content omitted. (True, 38.6%) Item number and content omitted. (True, 52.2%) Item number and content omitted. (False, 32.3%)

#### Negative Emotionality/Neuroticism (NEGE, T Score = 68)

Item number and content omitted. (True, 31.2%) Item number and content omitted. (False, 26.7%) Item number and content omitted. (True, 16.9%) Item number and content omitted. (True, 26.3%) Item number and content omitted. (True, 38.4%) Item number and content omitted. (True, 40.6%) Item number and content omitted. (True, 46.0%) Item number and content omitted. (True, 26.0%) Item number and content omitted. (True, 35.8%) Item number and content omitted. (True, 59.1%) Item number and content omitted. (True, 59.1%) Item number and content omitted. (True, 50.9%)

### Note

Item numbers and content are included in the actual reports. To protect test security, the item details do not appear in this sample report.

### **ENDNOTES**

This section lists for each statement in the report the MMPI-3 score(s) that triggered it. In addition, each statement is identified as a <u>Test Response</u>, if based on item content, a <u>Correlate</u>, if based on empirical correlates, or an <u>Inference</u>, if based on the report authors' judgment. (This information can also be accessed on-screen by placing the cursor on a given statement.) For correlate-based statements, research references (Ref. No.) are provided, keyed to the consecutively numbered reference list following the endnotes.

<sup>1</sup> Correlate: Response % < 90, Ref. 12 <sup>2</sup> Test Response: SUI=72 <sup>3</sup> Correlate: SUI=72, Ref. 7, 26, 31 <sup>4</sup> Correlate: SUI=72, Ref. 4, 7, 20, 21, 30, 31, 32, 42, 45 <sup>5</sup> Correlate: SUI=72, Ref. 4, 7, 20, 21, 31, 42, 43, 45 6 Correlate: EID=80, Ref. 7, 25, 33, 45 <sup>7</sup> Test Response: RCd=80 <sup>e</sup> Correlate: RCd=80, Ref. 1, 5, 7, 8, 9, 10, 13, 14, 16, 17, 18, 23, 24, 29, 30, 34, 36, 37, 38, 40, 41, 44, 45, 46, 47, 49, 50; RC2=75, Ref. 1, 5, 7, 8, 9, 10, 16, 17, 18, 23, 24, 34, 36, 37, 38, 40, 41, 45, 46, 47, 49, 50 <sup>9</sup> Correlate: RCd=80, Ref. 7 <sup>10</sup> Test Response: HLP=86 <sup>11</sup> Correlate: HLP=86. Ref. 45 <sup>12</sup> Correlate: RCd=80, Ref. 45; HLP=86, Ref. 45 <sup>13</sup> Correlate: HLP=86, Ref. 7 <sup>14</sup> Test Response: SFD=78 <sup>15</sup> Correlate: SFD=78, Ref. 7, 45 <sup>16</sup> Test Response: NFC=77 <sup>17</sup> Correlate: NFC=77, Ref. 7 <sup>18</sup> Correlate: NFC=77, Ref. 10 <sup>19</sup> Test Response: RC2=75 <sup>20</sup> Correlate: RC2=75, Ref. 15, 40, 45; HLP=86, Ref. 45 <sup>21</sup> Correlate: RC2=75, Ref. 7, 45 <sup>22</sup> Test Response: NEGE=68 <sup>23</sup> Correlate: NEGE=68. Ref. 7 <sup>24</sup> Test Response: STR=68 <sup>25</sup> Correlate: STR=68, Ref. 7 <sup>26</sup> Test Response: WRY=65 <sup>27</sup> Correlate: WRY=65, Ref. 7 <sup>28</sup> Correlate: WRY=65, Ref. 7; SFD=78, Ref. 7, 45 <sup>29</sup> Test Response: RC9=36 <sup>30</sup> Correlate: RC9=36, Ref. 7, 45 <sup>31</sup> Test Response: SFI=37 <sup>32</sup> Test Response: SHY=69 <sup>33</sup> Correlate: SHY=69, Ref. 1, 2, 6, 7, 11 <sup>34</sup> Correlate: SHY=69, Ref. 1, 6, 7, 45 <sup>35</sup> Correlate: SHY=69, Ref. 6, 7, 10, 19, 30 <sup>36</sup> Correlate: SHY=69, Ref. 7, 45 <sup>37</sup> Correlate: RCd=80, Ref. 7, 22, 27, 28, 35, 41, 45, 48; RC2=75, Ref. 7, 22, 27, 28, 35, 41, 45, 48 <sup>38</sup> Correlate: NEGE=68, Ref. 3, 7, 39 <sup>39</sup> Inference: WRY=65 <sup>40</sup> Inference: SHY=69 <sup>41</sup> Inference: SUI=72 42 Correlate: RC2=75, Ref. 7 <sup>43</sup> Inference: EID=80; RCd=80; NEGE=68 <sup>44</sup> Inference: NFC=77 <sup>45</sup> Inference: RCd=80

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<sup>46</sup> Inference: HLP=86 <sup>47</sup> Inference: SFD=78

- <sup>48</sup> Inference: RC2=75
- <sup>49</sup> Inference: STR=68

### **RESEARCH REFERENCE LIST**

The following studies are sources for empirical correlates identified in the Endnotes section of this report.

- Anderson, J. L., Sellbom, M., Ayearst, L., Quilty, L. C., Chmielewski, M., & Bagby, R. M. (2015). Associations between DSM-5 Section III personality traits and the Minnesota Multiphasic Personality Inventory 2-Restructured Form (MMPI-2-RF) scales in a psychiatric patient sample. *Psychological Assessment*, 27(3), 801–815. <u>https://doi.org/10.1037/pas0000096</u>
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**End of Report**