**Objective**
Examine in a clinical sample the joint hierarchical structure of the 24 scales of Clinical Syndromes (CS) and Personality Disorders (PD) measured by the third edition of the Minnesota Multiphasic Inventory (MMPI-III; Millon, Davis, & Millon, 1997, 2007) and the 14 Restructured Clinical (RC) and Pathological Personality scales (PSY-5) of the Restructured Form of the Minnesota Multiphasic Inventory-2 (MMPI-2; Ben-Porath & Tellegen, 2008, 2009).

**Method**
The clinical sample was comprised of 377 outpatients (55.7% women), aged 18 to 73 years old (M= 37.8; SD= 11.5) who were attending various psychiatry and psychology centers from Barcelona (Catalonia, Spain). A series of exploratory factor analyses (EFA) was performed following a “bass-ackwards” approach (Goldberg, 2006) by using Unweighted Least Squares (ULS) as the method for factors extraction and Promax rotations. One to k factors were successively extracted, being k the maximum number of nontrivial factors (three or more loadings per factor above .30 psychologically interpretable). Regression-based factor scores on each level of the hierarchy were computed and subsequently correlated to compute path coefficients between the different hierarchical levels. We also calculated zero-order (r) and disattenuated (r*) correlations between all scales.

**Results**
A hierarchical structure of four factors (Figure 1) provided the most clearly interpretable solution (F1: Internalizing; F2: Externalizing; F3: Detachment; F4: Thought Disorders) which accounted for 71.6% of the common variance. The fit indexes of this model were acceptable ($x^2_{(360)} = 2568.56; p < .001; AGFI = .90$) as well as factorial simplicity indices ($S = .9695; LS = .3358$) and the root mean square of residuals (RMSR = .0666; Kelley’s RMSR = .0561). This four-factor solution was the lowest one meeting our acceptability criteria, and it is fully shown in Table 1.

Disattenuated correlations ($r_*$) between the MCMI-III (CS & PD) & MMPI-2-RF (RC & PSY-5) scales (see Figures 2, 3 & 4) show a moderate-high convergence, with some scales of both questionnaires with a corresponding image from good to excellent in the other ($r_* \geq .80$).

**Conclusions**
The hierarchical structure resulting from this study integrates into the same four-factors model the Clinical Syndromes and Personality Pathology evaluated with the MCMI-III and the MMPI-2-RF, providing support to previous studies proposing between three and five major domains of Psychopathology that affect the regulation of emotions (Internalizing disorders), thoughts (Thoughts disorders), behaviors (Externalizing disorders) and interpersonal relationships (Detachment disorders).

The authors declare no potential conflicts of interest.
Integrated Hierarchical Model of Clinical Syndromes & Personality Pathology

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