

The Personality Assessment Inventory

The **Personality Assessment Inventory** (PAI) is a self-report 344-item personality test that assesses a respondent's personality and psychopathology. Each item is a statement about the respondent that the respondent rates with a 4-point scale (1-"*Not true at all, False*," 2-"*Slightly true*," 3-"*Mainly true*," and 4-"*Very true*"). The PAI is often used in forensics and corrections settings. The test construction strategy for the PAI was primarily deductive and rational. It shows good convergent validity with other personality tests, such as the Minnesota Multiphasic Personality Inventory and the Revised NEO Personality Inventory.

The PAI has a number of strengths for applied psychological assessment. First, the 4-point scale contributes to greater scale reliability and validity, as it provides respondents with the opportunity to give nuanced ratings of themselves (as opposed to a true-false scale). Second, it is relatively economical, assessing most of the constructs that are widely considered important in clinical personality assessment with only 344 items. Third, nearly all of the PAI items are readable at the 4th grade level. Brevity and straightforward item wording makes it accessible to those with lower levels of intelligence and reading ability. Fourth, the responses from each individual's profile can be compared to multiple large samples. The first sample consists of 1,000 people with similar demographic characteristics (e.g., age, gender, ethnicity) to the U.S. Census data. Comparison with this group is useful to detect and estimate the severity of clinical problems relative to the average person. The second sample consists of 1,265 psychiatric patients. Comparison with this group helps assess the severity of psychopathology among other patients. There is also a sample of 1200 offenders from multiple correctional settings and a further sample of 1051 college students. Finally, there are also a number of psychometric (statistical) strengths of the PAI, importantly including content validity and discriminant validity.

The PAI assesses the following clinical issues:

- Somatic Complaints (Conversion, Somatization, Health Concerns, Total)
- Anxiety (Cognitive, Affective, Physiological, Total)
- Anxiety-Related Disorders (Obsessive-Compulsive, Phobias, Traumatic Stress, Total)
- Depression (Cognitive, Affective, Physiological, Total)
- Mania (Activity Level, Grandiosity, Irritability, Total)
- Paranoia (Hypervigilance, Persecution, Resentment, Total)
- Schizophrenia (Psychotic Experiences, Social Detachment, Thought Disorder, Total)
- Borderline Features (Affective Instability, Identity Problems, Negative Relationships, Self-Harm, Total)
- Antisocial Features (Antisocial Behaviors, Egocentricity, Stimulus-Seeking, Total)
- Alcohol Problems
- Drug Problems
- Aggression (Aggressive Attitude, Verbal Aggression, Physical Aggression, Total)
- Suicidal Ideation
- Stress
- Nonsupport
- Treatment Rejection
- Dominance
- Warmth

The PAI includes validity scales for:

- Inconsistency
- Infrequency
- Negative Impression
- Positive Impression

Reliability and Validity of the PAI

Reliability

The data for internal consistency showed that the median alpha coefficients for PAI scales and subscales were .81 (general community sample), .86 (clinical sample), and .82 (college student sample). Test-retest reliability was assessed with additional community and college samples who were retested after 24 or 28 days. Taken together, those two groups produced test-retest correlations ranging from .79 to .92 for the clinical scales.

Validity

At 133 pages, the chapter entitled "Validity Studies" is by far the longest in the professional manual. The test author emphasizes convergent, construct, and discriminant validity, and has amassed data not only from his own validation studies but also from hundreds of others that have appeared in print since the PAI was first issued in 1991. Validity data are presented for all five groups of scales and indexes. The chapter documents the correlations of PAI components with other well-known inventories and structured clinical interview protocols, and presents studies of various criterion groups and their differential responses to the PAI elements. For example, among clinical participants, PAI Depression correlates .66 with the MMPI D scale (Scale 2), and PAI Schizophrenia correlates .55 with the MMPI Sc scale (Scale 8).

Modern test theory methodology was used in concert with classical test theory procedures in some applications. In a tour de force of documentation, the test author provides in this chapter 26 figures and 50 tables that, among other things, delineate the relationship between the indexes and scales of the PAI.

Summary

The PAI is a self-report inventory assessing personality and psychopathology that is convenient to administer, psychometrically sound, extensively researched, and suitable for use in clinical, forensic, and other applied settings. It can be recommended as an alternative to the MMPI-2 (Butcher, Dahlstrom, Graham, Tellegen, & Kaemmer, 1989; 11:244) for its relatively short administration time and its inclusion of scales directly measuring a respondent's amenability to treatment. (from *Buros Center for Testing*, 2007)