

ABSTRACT

DISSERTATION: The Moderating Effects of Client Information Processing Style on Benefits Gained From Delivered and Interactive MMPI-2 Feedback

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This study investigated the interaction between test feedback style (interactive and delivered) and a client's information processing style (experiential and rational) based on Cognitive Experiential Self-Theory (CEST) with a sample comprised of 39 clients from a university outpatient clinic and a community outpatient clinic in a midsized, midwestern city. Participants were randomly assigned to one of three groups: interactive test feedback, delivered test feedback, and examiner attention control group. Participants attended three sessions (initial session, feedback session, follow-up session) with a doctoral-level examiner. Participants in the two experimental groups (interactive and delivered feedback) received test feedback on their MMPI-2 profiles based on their assigned feedback condition while participants in the control group were not provided with feedback until after the conclusion of the study. The instruments assessing client response to treatment over time consisted of process-oriented (client's perception of counselor and session) and outcome-oriented (symptomatology and self-esteem) measures.

The results of two MANCOVAs (one for process and one for outcome variables) found no difference between participants who received test feedback and the control group. Partial support was found for the attribute by treatment interactions. There was some support for the matching effect of experiential information processing and interactive test feedback. This interaction was significant for self-esteem; individuals with higher levels of experiential information processing who received interactive feedback reported higher levels of self-esteem over time than those participants receiving delivered feedback or examiner attention only. The interaction of experiential information processing and treatment group was also significant for symptomatic distress; however, this interaction was opposite to the hypothesized direction. A matching effect for rational information processing and delivered test feedback was not supported. Finally, the three-way interaction of test feedback style, information processing style, and time was not significant for the process- or outcome-oriented benefits.

The current study is one of the first studies to examine personality feedback with a community outpatient population. The lack of support for the benefits of personality feedback is noteworthy. In part, the results may be explained by low statistical power. Further examination of beta weights and directions of effects, however, suggest that even with a larger sample support for the benefits of personality feedback may not be found. These findings suggest caution should be exercised in generalizing previous results to a more severely impaired community population. Other limitations are discussed and implication for theory, research, and practice are provided.