
Abstract
The Fake Bad Scale (FBS), developed to identify malingering of emotional distress among claimants seeking compensation for personal injuries, was recently added to the MMPI-2 scoring materials, resulting in its widespread dissemination across the various clinical settings that use the MMPI-2 in psychological evaluations. We examine: (1) questions of item bias in the FBS; (2) how malingering and nonmalingering groups are identified in FBS studies, including whether the research has been broadly inclusive and fully represents the populations assessed by the MMPI-2; (3) the reliability and validity of the FBS; (4) the highly variable recommendations for raw score cut-offs and how they relate to T scores; (5) two inpatient groups [men in a tertiary care Veterans Affairs Healthcare System (VA) unit and women in an eating disorders program] who may be inappropriately labeled as malingering by the FBS; (6) the publisher’s statement on use of the FBS; and (7) a Frye hearing in Florida where the FBS was excluded from expert testimony, one of three so far. We raise questions about its potential bias against people with disabilities and physical illnesses, women, individuals exposed to highly traumatic situations, and those motivated to present themselves in a favorable light. Psychologists using the FBS for making decisions about clients’ motivations need to be aware of the serious problems with the scale’s use and the cases of its inadmissibility in court.