

**This assessment review was compiled by our students and is intended to be used as a guide in assisting clinicians. We encourage you to review the evaluations and assessments for yourself to guarantee the most accurate and updated information.*

I. General Information

Title of the test: Mayo-Portland Adaptability Inventory-4 (MPAI-4)

Author: Muriel D. Lezak and James F. Malec

Publisher:

Time required to administer: 10-15 minutes

Cost of the Test: Free! This assessment can be downloaded off of The Center for Outcome Measurement in Brain Injury. <http://www.tbims.org/combi/mpai/>

II. Description of Test

Type/Purpose of Test: This test measures current functional status of people in the post acute period following ABI/TBI. It also helps give a better understanding of the long term effects of ABI/TBI. It has three subscales; ability index, adjustment index, and participation index. The ability index examines sensory, motor, and cognitive functioning. Examples of this are mobility, use of hands, vision, audition, motor speech, communication, attention/concentration, memory, fund of information, novel problem-solving, visuospatial abilities, and dizziness. The adjustment index examines mood, interpersonal interactions and insight. Examples of this are anxiety, depression, irritability, anger, aggression, pain and headache, fatigue, sensitivity to mild symptoms, inappropriate social interaction, impaired self-awareness, family/significant relationships, initiation, social contact, and leisure/recreational activities. The third subscale, the participation index, looks at social contacts, initiation, money management, leisure/recreational activities, self-care, residence, transportation, and work/school. The MPAI-4 also looks at pre-existing and co-existing factors that impact participation in the categories identified.

Population: This assessment is intended to be used for individuals with an ABI/TBI. This test should not be administered to those who have severe cognitive impairment.

Focus of measurement:

Organic systems Abilities Participation/life habits Environmental Factors

III. Practical Administration

Ease of Administration: This test can be easily administered to the individual with the brain injury and their family or significant others. It is a series of 35 statements that have a rating scale for each question. The rating scale is from 0-4 and suggests problems or difficulties that the individual may experience with each statement.

Clarity of Directions: The directions for administration are clear in that it states the inventory should be given to an individual, if their cognition is not too severe, their significant others and to professional staff. The instructions on the inventory itself are clear and understandable for those who will be filling it out.

Scoring Procedures: In order to score this test, the evaluator will add up the scores circled in each index (abilities, adjustment, and participation). There is a scoring worksheet at the end of the inventory that instructs the evaluator to rescore certain questions. This will provide the raw score for each section. The raw scores are transferred to the bottom of the sheet where it instructs the evaluator to sum the indices, sum the scores for items 22-24 and that number from the sum of indices. It also requires you to refer to a reference table for the *T*-score. The ratings display behavior.

The manual also gives specific guidelines when working with children and administering the test.

Examiner Qualification & Training: Those filling out the inventory must know the individual well. Significant others and the individual with the ABI/TBI should have someone familiar with the MPAI-4 close by in order to ask and answer questions that may arise. Scoring for the MPAI-4 required professional training and experience with the test and working with people who have an ABI/TBI.

IV. Technical Considerations

Standardization: ___ Norms Criterion Referenced ___ Other

Reliability: The manual states “accurate characterization of people with ABI and outcomes requires assessment of key indicators of *impairment*, *activity*, and *participation*” (p. 52). Rasch analysis has been used to determine the reliability.

Validity: This test is valid. Early studies establish validity for previous versions of the MPAI-4 and the results can be used when established validity for the MPAI-4

Manual: ___ Excellent Adequate ___ Poor

What is (are) the setting/s that you would anticipate using this assessment?

This assessment can be used from community settings to outpatient clinics.

Summary of strengths and weaknesses:

Weakness:

- Seems long
- Not consistent rating scale for each question, which may be hard to follow
- Scoring may be difficult when following the directions to rescore identified numbers according to the manual

Strength:

- Can be given to individual, significant others, and professionals-good way to compare and evaluate individual’s insight.
- Simple mathematics required to score
- Nearly anyone can administer the test
- Evaluates many aspects, including insight
- Translated into many different languages