As I sit at my computer, writing this column, I am reminded of last year’s Annual Meeting in Miami. That meeting is a happy glow in my memory (T = 1). But at SPA we always strive for improvement, to present our members with even better Annual Meetings (W±), and with enough time to socialize with friends and colleagues (M±).

Well, I bring you good news and good news. The 2005 Annual Meeting will be held at the Four Seasons Hotel in Chicago, from March 2 to March 6. This five star hotel, furnished in English Country Manor style, has luxuriously appointed rooms, with views of Chicago’s famous Miracle Mile, or Lake Michigan. Some more good news is that Chicago is a vibrant city, with much to offer its visitors. The Chicago museum scene, for example, ranks among the world’s best. The Chicago Art Institute has an amazing collection, especially Impressionist art, including an entire room of Monets. At the Field Museum there are plenty of dinosaurs and ancient Egyptian artifacts. There’s also a children’s museum, an astronomy museum, and plenty of others, including the National Italian-American Sports Hall of Fame, and the Smith Museum of Stained Glass Windows.

Yes, Chicago has something for everyone: A wide variety of buildings designed by famous architects, such as Frank Lloyd Wright and Mies van de Rohe (It is also possible to visit Wright’s home and studio); The Sears Tower, the tallest building in North America; Navy Pier, where there is a wide range of activities and attractions, including a 15 story Ferris Wheel, a carousel, and Time Escape, an exciting 3-D time travel ride, with astounding special effects; and the famous Lincoln Park Zoo. Where else in the USA can one find such ethnic gems as the Division Street Russian Baths. There are also excellent restaurants; Chicago is the home of great steaks as well as restaurants serving a wide variety of American and ethnic dishes. You can enjoy a visit, for example, to Greektown or China Town.

The second part of the good news is that we have reviewed members’ written evaluations of previous conventions and we have taken them to heart. I am happy to tell you that there will be only five simultaneous tracks scheduled for each time period in the convention program, down from the frustrating six simultaneous tracks. That means less frustration about which presentation to attend. There will also be a maximum of five presentations scheduled for each time program, rather than the traditional six. This reduction will hopefully allow for more discussion of the presented papers within each session.

Irv Weiner, our program chair, reported that this year we had an unusually large number of submissions for presentation, including papers, symposia, and workshops. With the reduction in the number of simultaneous tracks, and fewer papers in a session, there was much less program room available then has been available in the past. Therefore, a number of very valuable papers, symposia, and workshop submissions could not be accepted for presentation. We have attempted instead to offer some papers as posters. We look forward to your evaluation of this program change.

Here’s some additional program information for the Annual Meeting:

● Two Master Lectures will be presented:
  - “Implications of MMPI-A Findings for Understanding Adolescent Development and Psychopathology,” by Robert P. Archer, Ph.D., and “Attachment Disorganization: Assessment and Contribution to Personality,” by Carol George, PhD.

● Workshops include:
  - Therapeutic Assessment (Stephen Finn); Recent Developments in MMPI-2 Interpretation (Yossi Ben-Porath, Auke Tellegen); Overview of Current Evidence on the Reliability, Validity, and Utility of the Rorschach (Greg Meyer, Don Viglione); Rorschach Assessment of Children & Adolescents (Irv Weiner); Assessment of Children’s Pretend Play (Sandra Russ); The MMPI-2 in Forensic Evaluations: Contributions to Assessment, Problems to Avoid (James Butcher); IRT and Analysis of Psychopathology Measures (Steven Reise); Using the MMPI-A in Forensic Evaluations (Robert Archer); Developing Treatment Plans Using MMPI-2 Rorschach Findings (Ronald Ganellen); Two Topics in MMPI-2 Assessment: One Contemporary, One Perennial (David Nichols); Thought Disorder and the Rorschach (James Kleger); Adult Attachment Projective (Carol George); Advanced Interpretation for the Millon Clinical Multiaxial Inventory (Jim Choca, Ed Rossini, Bob Craig); The Thematic Apperception Test: A Clinical Approach (Bertram Karon); Consulting with the Prosecution (Nancy Kaser-Boyd).

● The 2005 Mary Cerney Award goes to Martin Sellbom, MA, Kent State University, for his study, “Assessing Psychopathic Personality Traits with MMPI-2.”

● The 2005 Bruno Klopfer Award goes to George Stricker, PhD, American School of Professional Psychology, Argosy University, Washington, DC. His acceptance speech is titled, “Personality Assessment and the Local Clinical Scientist.”

● The 2005 Samuel J. and Anne G. Beck Award goes to Stephen R. Smith, PhD, University of California, Santa Barbara, CA, whose acceptance speech will be titled, “Brains, Behavior, and Blots: Integrating Neuropsychological and Personality Assessment of Children.”

● The 2005 Marguerite R. Hertz Memorial Tribute will honor Silvan P. Tomkins, PhD, the man and his contributions. The tribute will be made by Bertram Karon, PhD, Michigan State University.

I hope that when you receive the program (it is being printed as I write this), you will believe, as I do, (L = 20) that it is an exciting program (Ma = 70). I hope to meet you in Chicago for the best Annual Meeting yet.

Len Handler, President

...references found on page 2
Program Scheduling for Annual Meeting

Irving B. Weiner, PhD
Program Chair

At its September 10-12 meeting in Washington, DC, the Board of Trustees discussed comments and suggestions from the SPA membership concerning the program scheduling of our annual midwinter meeting. Most common among these comments and suggestions were expressed preferences to have (a) fewer paper and symposium sessions scheduled at any one time, thereby reducing difficult choices about which to attend; (b) fewer presentations during paper and symposium sessions, thereby allowing more time to go through their material; and (c) maintaining 15-minute breaks between sessions. In response to these preferences, the Board directed me, as Program Chair, to implement as much as possible certain specifications for our meeting in Chicago on March 2-6, 2004.

Accordingly, the following guidelines have been established in scheduling the program for Chicago. The number of scientific sessions will be limited to four in each time slot (we have sometimes in the past had five concurrent sessions); the number of papers presented during a paper session will be limited to five (we have often in the past included six papers in a paper session); and the 15-minute breaks between sessions (which we had last year in Miami) will be retained.

To fit the scientific sessions (symposia and paper presentations) within our other program activities (the President’s address, the Master Lectures, the awards sessions, and the consultation sessions), while maintaining the 15-minute breaks, these scientific sessions will be 120 minutes in length on Thursday and Friday and either 120 or 105 minutes in length on Saturday. Presenters should accordingly be prepared to limit their presentations to 15 minutes. Session chairpersons will be instructed to enforce these limits, although they will have the discretion to allow additional time for each presenter during the Thursday and Friday sessions, or should there be fewer than five participants in the session they are chairing. The key consideration guiding the chairpersons should be apportioning the time equally among the presenters and allowing time for questions and comments from the audience.

These guidelines should address some of the concerns that have been raised about our meeting program. As one consequence of this plan, however, the number of submissions that can be accepted for paper presentations is likely to be reduced somewhat. More frequently than before, then, members submitting papers may be asked to present their material as a poster, rather than in a paper session.

I hope these guidelines meet with your approval, and I look forward to seeing you in Chicago.

SPA Annual Meeting Master Lecturers

SPA is honored to have Carol George, PhD and Robert P. Archer, PhD as Master Lecturers at the 2005 SPA Annual Meeting in Chicago, IL. Dr. George’s lecture is titled “Attachment Disorganization: Assessment and Contribution to Personality.” Dr. Archer’s lecture is titled “Implications of MMPI-A Findings for Understanding Adolescent Development and Psychopathology.”

Carol George, PhD
is Lee Mirmow Professor of Psychology at Mills College, Oakland, California, where she has been known for the past 18 years as an enthusiastic and gifted teacher. She received her doctorate in Developmental Psychology from UC Berkeley in 1984 and is well known for developing a number of representational and projective attachment assessments, including the Adult Attachment Projective (with Dr. West), the Adult Attachment Interview (with Dr. Nancy Kaplan and Dr. Mary Main), a child Doll Play Projective Assessment and a maternal Caregiving Interview (with Dr. Solomon). Her research interests address the development and sequelae of attachment in children and adults in normative and clinical populations, including divorce and overlap visitation (with research associate Dr. Judith Solomon) and relationship violence and adult depression (with research associate Dr. Malcolm West), and attachment representation in borderline and anxiety patients (with Dr. Anna Buchheim). She has numerous publications in these research areas, including a co-edited volume with Dr. Solomon on Attachment Disorganization. This volume is the first comprehensive book in the field on this clinically-relevant form of attachment. She is on the Editorial Board of Attachment and Human Development and has been an Associate Editor of Developmental Psychology. In addition to her research, teaching, and writing, Dr. George serves as an attachment assessment consultant to researchers and clinicians world-wide.

Robert P. Archer, PhD, ABPP, is the Frank Harrell Redwood Distinguished Professor and Director of Psychology, Department of Psychiatry and Behavioral Sciences, at the Eastern Virginia Medical School, Norfolk, Virginia. Dr. Archer is the author of ten books, over 115 articles and 20 book chapters related to psychological assessment. He is also author of the texts, Using the MMPI With Adolescents, and MMPI-A: Assessing Adolescent Psychopathology (3rd edition) (Lawrence Erlbaum Associates, 1987, 2005), and Forensic Uses and Limitations of Clinical Assessment Instruments (in preparation), and co-author of the MMPI-A Casebook (PAR, 1994). Dr. Archer served on the advisory committee to the University of Minnesota Press for the development of the MMPI-A and is a co-author of the MMPI-A manual. He is currently working on a series of research projects related to the MMPI-2 and the MMPI-A. Dr. Archer served as the Founding Editor of Assessment, a quarterly journal that began publication in March, 1994, and was an Associate Editor for the Journal of Personality Assessment. He is an Executive Board member and Diplomate of the American Board of Assessment Psychology.

Presidential Address References continued from page 1...

References


The workshops also have a child and adolescent psychopathology measures. Editors for the JPA Statistical Developments on item response theory (IRT) and one of the in personality assessment research, Steven consulting with prosecuting attorneys.

MMPI-2 and Rorschach findings in treatment rated and attended workshop on using the challenges for the Rorschach Comprehensive research and methodology. Greg Meyer and collaborative psychological assessment.

To begin the workshop sessions, we have an substantial contributions to their chosen areas, personality assessment, all of whom have made substantial contributions to their chosen areas, with a balance of science and clinical work.

To begin the workshop sessions, we have an often-requested introduction to Therapeutic Assessment by Stephen Finn, who for years has been prominent in the development of collaborative psychological assessment research and methodology. Greg Meyer and Don Vignole will provide a thorough overview of the empirical foundations, utility, and challenges for the Rorschach Comprehensive System. Ronald Gandelman returns with his highly rated and attended workshop on using the MMPI-2 and Rorschach findings in treatment planning. Veteran workshop presenter Nancy Kaser-Boyd returns with a new workshop on consulting with prosecuting attorneys. Representing SPA’s commitment to education in personality assessment research, Steven Reise, an internationally recognized authority on item response theory (IRT) and one of the editors for the JPA Statistical Developments Section, will illustrate how IRT procedures can be used to develop or refine personality and psychopathology measures.

The workshops also have a child and adolescent track. Irving Weiner will present case material and an integrated approach to interpretation regarding the Rorschach assessment of children and adolescents. In the able hands of Sandra Russ, we have a workshop on the assessment of children’s pretend play and treatment planning; this workshop will include an introduction to the clinician-friendly Affect in Play Scale, which she developed. Rounding out the topics in this track is the rapidly growing field of juvenile forensics. In the context of comprehensive youth forensic assessments, with a special focus on the MMPI-A, Robert Archer will present current literature, forensic considerations, and case material relevant to this difficult topic.

The MMPI-2 will be well-represented, with three vanguard workshop offerings. Yosef Ben-Porath and Auke Tellegen start things off by describing two major developments with the test, the Restructured Clinical (RC) Scales and the return of non-K-corrected profile interpretation. David Nichols, who has also published extensively on the MMPI-1 and 2, will present both a review of the new RC Scales and a comprehensive approach to assessing test interpretability factors. Finally, James Butcher, last year’s Bruno Klopfer Award winner and a leading figure associated with the MMPI, will present a half-day workshop on using the MMPI-2 in forensic evaluations, incorporating current literature and case material.

On another exciting front, the conference will offer a workshop by three of the most prominent and knowledgeable experts with Millon’s adult inventory, Chicago-based Jim Choca, Ed Rossini, and Bob Craig offer an advanced workshop covering the latest in MCMI-III research and interpretation.

Other not-to-be-missed offerings from world-class experts include Carol George, who will provide training for the Adult Attachment Projective, with an in-depth look at Attachment Theory. In addition, James Kleiger’s workshop, The Rorschach and the Assessment of Thought Disorder, will focus on the multidimensional nature of thought disorder, Rapaport’s contributions in this area, and current methods for assessing thought disorder. Finally, Bertam Karon will provide a workshop on the TAT that focuses strongly on clinical thinking as a critical element in TAT interpretation. He will also address the specific questions for which the instrument is of greatest value.

Our goal is to offer our fellow SPA members the benefit of a series of workshops that provide an excellent opportunity to earn CE credits from nationally renowned experts in personality assessment at a good value. We believe that this is exactly what’s in store for you in Chicago. So the SPA Board invites you to attend, learn from, and enjoy offerings from this outstanding line-up of Continuing Education Workshops at the 2005 Annual Meeting. We believe these CE workshops, as well as the rest of the convention, offer valuable information for all psychologists (and graduate students) who have any interest in assessment. The Board encourages you to invite your non-SPA colleagues to enjoy the convention and the best that Chicago has to offer.

SPECIAL NOTE TO MEMBERS:

To ensure your receipt of emails for the Society for Personality Assessment and from our publisher, Lawrence Erlbaum Associates (who sends you instructions for online access to the Journals), please put the SPA email address(es) and LEA address in your address book.

SPA: manager@spaonline.org; assistant@spaonline.org
LEA: lea@literatuonline.org

Advocating for Assessment

Bruce Smith, PhD

With this article, I am beginning what will be a regular feature of the Exchange. In it I will attempt to keep you abreast of important developments that affect the practice of assessment as well as initiatives that we are undertaking on behalf of assessment psychologists.

CPT Coding

As you may recall, SPA has been involved in the effort to revise the CPT (Current Procedural Terminology) codes for assessment. This is an extremely important task, as the way the current codes are defined, psychologists cannot get reimbursed for professional time for doing assessments; psychological testing is treated in the same way that medical tests are, and the administration of tests—like the drawing of blood—is considered a “para-professional” activity. Under the leadership of the APA Practice Director, a task force has been working to get the AMA CPT committee to accept a new set of codes for assessment. SPA has taken the lead in defining the diagnostic assessment codes, while a group headed by Tony Puente has been working on the neurobehavioral and neuropsychological codes. The main stumbling block has been the AMA’s seeming inability to understand the difference between computer-administered tests and those that are only scored by computer. We have finally developed a set of codes that would appear to be satisfactory. If these are approved by the CPT committee, we will then be conducting a survey of SPA members in order to establish “relative values” (i.e., how complex various kinds of work are) for the purpose of setting reimbursement rates. This goes to RUC (Relative value Utilization Committee) for final approval. We are hoping that the new codes may be in place by mid-2005. The current proposal splits testing into four different codes: 96100 (psychological testing face-to-face), 96101 (testing face-to-face by a technician), 96102 (computer scoring and/or administration of a test), and 96103 (interpretation and report writing). We hope that this model will allow psychologists to bill more accurately for their assessment work.

Supervising Technicians

In a related development, Medicare announced that henceforth, they will accept work of technicians in assessment supervised by psychologists. While this is probably of limited importance in personality assessment, it may be of significant benefit to neuropsychologists who often have some portion of the battery administered by psych techs. Previously, only physicians could bill for supervising technicians, an absurd situation when it comes to psychological assessment.

...continued on page 7
The Complementary Relationship Between Personality Assessment and Neuropsychological Assessment
Barbara W. Domingos, PhD, ABPN, ABSNP
Jed Yalof, PsyD, ABPP, ABSNP

As clinical psychologists who are also trained as school psychologists and neuropsychologists, and who teach personality testing and neuropsychology to doctoral students, it has become increasingly obvious to us that a seemingly routine request to evaluate a learning, social-emotional, or neuropsychological problem involves an integrative assessment across multiple domains of neurocognitive and personality functioning. This realization has become more apparent over the years spent reviewing cases with students and primarily through our collegial consultation over cases involving subtle neurocognitive problems and diagnostic challenges related to intellectual functioning, academic achievement, attention, executive functioning, information processing, and memory skills relative to personality adjustment. In a recent issue of the Exchange, Susan Anderer (2004) addressed the challenge of evaluating neurocognitive and personality data when making diagnostic discriminations about learning and social-emotional issues. In this brief article, we further explore the complementary relationship between personality assessment and neuropsychological vulnerability.

From a diagnostic standpoint, it is very difficult to formulate personality needs in neuropsychologically vulnerable clients without first identifying the degree and nature of vulnerability, and its impact on overall personality structure. Neuropsychological vulnerability has a variety of etiologies including developmental delays, learning disabilities, problems with executive functioning, injury or trauma and/or neurodegenerative diseases. A skillful and sophisticated personality assessment includes information about affect and mood, problem solving style, coping skills, and deficits, perception, and ego strength, each of which domain is connected intimately to neuropsychological functioning. In an outpatient setting, for example, clients may have subtle neurocognitive weaknesses that are often neurodevelopmental and are reflected in difficulty with aspects of executive functioning, attention and focus, and/or processing speed. Deficits in executive functioning compromise affect modulation, impulse control, initiation, problem-solving, and sustained attention, and impact the course of personality development. For those reasons, neuropsychological assessment and personality assessment become complementary in scope and function.

Neurodevelopmental indicators are important in assessment of cases where subtle or not so subtle deficits appear early. Those neurodevelopmental deficits affect not only cognitive development as it is generally known and understood, but personality development as well. Neurodevelopmental deficits in perception, executive functioning or cognitive processing affect the way information is perceived and processed, and therefore impact the developing personality. Assessment represents an attempt to clarify and integrate personality variables with underlying neurocognitive strengths and weaknesses. It then becomes easier to see the relationship between neurocognitive deficits and later emotional disturbance.

For example, when considering the implications of an elevated or clinically significant score on the Coping Deficit Index (CDI) of the Rorschach, several etiologies can be considered. Does the coping deficit exist primarily as manifestation of an intrapsychic conflict in the historical absence of neuropsychological markers? Or, is the CDI elevated as a secondary reaction to executive functioning deficits that lead to an actual coping deficit? Or is the CDI elevated because of language problems, and/or specific learning disabilities, and/or cognitive or affective dysregulation that might be rooted primarily in pediatric-neurodevelopmental issues identified during history taking? To what degree have environmental responses to neuropsychological events contributed to the elevated CDI (or, for that matter, any other significant score variations)?

As noted above, it is important to weigh history, observations, external ratings, and results of cognitive and personality measures to determine primary, secondary, and covariance among different diagnostic considerations. Learning disorders, attentional problems with executive functioning may affect self-esteem as well as academic and social success and be related to later anxiety and depression.

Information about neurocognitive strengths and weaknesses can affect the way we look at the responses and scores of the Rorschach test and/or responses to Thematic Apperception Test cards. What do the responses mean when combined with attention, memory, affect modulation, coping skills and language skills? Barkley (1998) described impulsiveness or behavioral disinhibition as a deficiency in inhibiting behavior or in appropriate responses to the demands of a situation. Frequently, impulsive clients respond before hearing all of the directions. More impulsive clients may respond quickly on a Rorschach test and may not take time to integrate information resulting in a low number of responses that tend to be global and whole (W) or simplistic in nature.

Lunardi (1999) noticed similarities in Rorschach scores and patterns when testing students enrolled in a special education program for emotionally disturbed adolescents. The scores of the students revealed coping deficits and sensitivity to emotional stimulation. In a descriptive analysis of Rorschach scores, Lunardi found that those students tended to have higher scores on the Coping Deficit Index, and the Depression Index. They had comparatively fewer responses, tended to be concrete, frequently used a W response, and were more likely to be scored as Ambivalent.

With interviews and background information, it appeared that attention and learning deficits had preceded emotional difficulties, especially with anxiety and depression.

Children with neurodevelopmental deficits often experience academic difficulty along with anxiety, depression, and self-esteem problems. In another article, we (Domingos and Yalof, 2003) reviewed the various needs of adolescents with learning, attention, and cognitive processing deficits who may later have associated social and emotional problems. In a practical sense, differentiating common and subtle symptoms is a challenge. For example, a female client, enrolled in middle school, with attention problems that did not reach the level of symptom severity needed for an ADHD, Predominately Inattentive Subtype diagnosis, still had attention problems. This client also experienced anxiety related to family problems. When she had difficulty attending and focusing, her anxiety increased and when she was anxious, her attention and focus decreased. The anxiety-inattention co-occurrence is a frequent co-morbid symptom pattern, and requires both cognitive measures of executive functioning and attention, along with personality tests and measures, to identify the co-occurrence. In another case, an adolescent male with ADHD, Mixed Subtype, presented with aggression and agitated mood, vulnerability to depression and self-injurious thought and behavior, and a history of overlooked problems with reading disability. A comprehensive neuropsychological evaluation revealed a reading disorder, subtle auditory processing problems, and characteristics of what could be viewed as a neurologically based impulse control problem, in addition to providing an articulated personality profile in which Rorschach findings were studied in relation to language skills and the capacity to symbolize as part of differentiating the ADHD and depression from a primary Bipolar Disorder.

In summary, high base rate referral symptoms that are somewhat vague, but presented in combination, such as a combination of anxiety-depression, inattention, organization problems, and academic underachievement, are often signals for the need to conduct a more thorough investigation of underlying deficits using a neuropsychological approach.
to assessment in combination with personality assessment. A combined neuropsychological-personality assessment of underlying processing, executive function, attention, memory, motor, and spatial skills can contextualize symptom covariance.

References

The Teacher’s Block

*A Picture’s Worth a Thousand Words*

Pamela Pressley Abraham, PsyD, NCSP

**Immaculata University**

Subtest analysis of the Wechsler scales has been an important part of the history of training clinical psychologists in assessment. Subtest analysis has been a core component of psychodynamic approaches to test analysis in particular, and while a psychodynamic analysis of subtests is not currently in fashion, there is still much that can be learned from paying attention to the content of the stimulus material in relation to contemporary clinical issues in education and training. Students bring an especially fresh set of eyes to item analysis because of their immersion in clinical material and emergent readiness to search for underlying meaning in test stimuli. The WAIS III Picture Arrangement (PA) subtest exemplifies this point because it might be seen as having an underlying thematic sensitivity to, among other issues, the areas of gender imbalance, shame, and bullying. Gender, shame, and bullying represent thematic areas that have high salience in current clinical and school psychology training programs, and latent implications of their presence on test stimulus cards is worthy of analysis.

In this context, while teaching an assessment course, I observed repeatedly students practicing the tedious administration and layout of the WAIS-III PA stimulus cards. You know the routine- read the numbers on the back of the cards, place the cards in front of the client in the required order, time the test, and then speedily collect the cards like a magician while recording the letters in sequence. The ambitious among us might ask the client for stories to each card, but this is not routine practice. Perhaps it was in response to a combination of the spatial distance advantage that teaching provides or the repeated exposure to the task through my own clinical experience that I began to reminisce about Segal, Westen, Lohr, and Silk’s (1993) article about analyzing stories told to the PA with regard to object relations and social cognition. As I reflected on the idea of object relations and imagery, several questions and teaching points began to unfold. Does the thematic content on the Picture Arrangement subtest matter? Is the content secondary to the process of perceptual organization? Why are the stimulus figures engaging in acts involving what struck me as shaming experiences? Why are the roles of the stimulus figures condescendingly? Why is irony the favored method of humor? Does the meaning of the picture affect performance? Is there an interaction with one’s own feeling state or experiences with the feeling states represented on the card? Do the shaming experiences reflect something about our culture and tolerance of such behaviors?

Students enjoy spelunking in the cave of possibilities so the headlight went on…. First, we examined how many card sequences utilized irony (this occurs when the result of the consequence of events is incongruent with the normal or expected result):

#2—Dough lands on the baker’s head when she is trying to answer the phone
#3—A woman unable to open a door watches another woman open the same door with ease
#4—A man runs for safety from a dog only to find himself in a fenced in area with another dog
#6—in the process of escaping from prison, the escapee steals the numbered prison clothes of another prisoner, while she is swimming
#7—A man forms a relationship with a mannequin
#8—Laughingly, the robber gives an apple back to a man while taking his money (Being nice does not pay?)

Next, we examined the role of men and women: Role of women:

#3—The woman is trying to open the door is inadequate and looks silly
#6—the woman is a prisoner swimming without clothes; females also are depicted as prison guards
#7—the woman is a mannequin, part object
#10—the woman nudges a man to wake up

Role of men:

#2—the man looks silly when dough lands on head
#4—the man looks silly when ending up with the same object of fear that he was trying to escape (a dog)
#6—the man is a prisoner who ends up wearing female clothes
#7—the man is interacting with a female mannequin

#8—the man is a robber, the other male is deceived
#9—the man is reading the music upside down and is corrected
#10—the man falls asleep in a group situation and is prodded by a female
#11—the man scares a group of people by deceit (pretending to be a shark)

The class discussed why stereotypes continue to perpetuate, despite recent efforts to address bias and cultural influences. They also speculated how and why decisions are made to use some of the same ironic content situations over a period of decades.

The class then examined the cards for shaming and ridiculing experiences:

#7—a man is embarrassed for riding next to a mannequin
#8—a man who helps another is laughed at for helping or being nice
#9—a man is embarrassed in a group setting for having their music book upside down
#10—a man is embarrassed in a group setting for falling asleep while listening to a speaker
#11—a male believes the beach is too crowded, buys a shark outfit, gets into the water, and scares the people away so he can have the beach for himself

 Granted, these are all speculative impressions, but still, the class pondered whether or not one has to be shamed in order to learn a lesson. And, although the purpose of the subtest is not to teach a lesson, it was difficult to imagine why the shaming, ridiculing imagery was chosen as part of the stimulus! Some even discussed the connection to the current focus of public and private school settings on bully behavior and the attention to bully behavior in the workplace. Just a few years ago, bully behavior was viewed as a “developmental rite of passage” while now we are responding to the seriousness of interpersonal threats. Like bullying, shaming is considered a “put down” and one might questions does this type of imagery affect performance on the subtest? Does it really matter? And, is it possible to design pictorial representation on stimulus cards which requires the sequencing of patterns of human interactions while at the same time utilizing more balanced yet a variety of emotional expression?

Being psychologists or “psychologists to be,” we are, of course, interested in interpersonal situations and context and might wonder if and how reasoning, perceptual organization, and planning (proposed task demands of the PA subtests) are affected by interpersonal contexts? Might the thematic implications of shaming, ridiculing, and irony on the subtest reflective of cultural factors? How does one’s own ridicule and shame experiences interact with the feeling states represented on the stimulus cards?
We concluded the class with:

“…arrange these pictures in the right order so they tell a story that makes sense…”

An addendum:
Lest we forget, any attempt to teach students about testing is enriched by drawing attention to the literature review. And, although the following is a summary review (not exhaustive), the PA research has centered on more procedural aspects of the subtest with secondary considerations to cultural and contextual aspects. Research conducted with the PA subtest of the Wechsler attempts to identify and measure the more mechanical aspects of subtest demands and identify abilities related to subtest interpretation. Regarding research on the mechanical aspects of the subtest, order of items and item difficulty were reviewed (Ryan et al. 1989), and test revision effects (WAIS-WAIS-R) such as PA items eliminated, modified and rewritten, timed items, time bonuses, and order of items were examined (Broder, 1987). With regard to subtest interpretation, the PA was found to measure visualization (Carroll, 1994), simultaneous processing (Kaufman & McLean 1987), and mechanical: spatial processing (Blaha & Wallbrown, 1996), most of which fall under what is now called perceptual organization.


References
Advocating for Assessment

HIPAA and the Patriot Act  As was discussed in several sessions at the past Annual Meeting in Miami, HIPAA (Health Insurance Portability and Accountability Act) has placed difficult burdens on assessment psychologists and potentially compromises the privacy of assessment data as well as the security of test materials. At present, we are preparing a White Paper on HIPAA and privacy that we hope will be of use to our members in dealing with threats to the security of test materials and test data. When completed, the White Paper will be available from the SPA website and possibly published in JPA. On a related topic, the Practice Directorate has analyzed the Patriot Act for its impact on the confidentiality of mental health records (including assessment reports and raw data). Basically, the Patriot Act allows for the FBI to access “business” records without subpoena. Most troubling, if a patient’s records were seized, it would be a felony for the professional to inform the patient of this seizure. According to the APA analysis, there is as yet no clear agreement as to whether or not the intent of the Act was to include mental health records or not. Ashcroft has thus far refused to answer this question, so it remains for a test case to be taken up by the courts. While this is not likely to be of great relevance to most practitioners, those who do a lot of forensic work—especially if it involves immigration cases—may have some reason to be concerned.

Coaching on Tests  An issue that was brought to light by a recent article in Professional Psychology: Research and Practice (Victor, T. and Abeles, N., Coaching clients to take psychological and neuropsychological tests: A clash of ethical obligations. v. 35: 373-379) is the practice of attorneys coaching clients in how to fake psychological tests in forensic evaluations. While such a practice is clearly unethical to psychologists, there is debate within the legal community about the ethics of coaching. Anita Boss and Barton Evans of the SPA Board are preparing a paper on this issue designed to be helpful to forensic psychologists who may be confronted with this problem.

SPA Advocacy Survey  As you recall, a survey was circulated with the Call for Dues. It has been tabulated and the results indicate that you feel that the major problem facing assessment today is the difficulty with reimbursement from 3rd party payers. Decrease in training in assessment in graduate schools was ranked second, and the criticism of assessment and assessment instruments in the lay press was seen as the third most important issue. Interestingly, most of you were not as concerned about acceptance of assessment instruments in forensic settings, hopefully signifying a continued acceptance of our work by the courts. Among the specific problems with 3rd party payers that were cited included the lowering of reimbursement rates, the reduction in number of hours allowable for assessment, the refusal to reimburse for analysis or interpretation (hopefully the new CPT codes may help alleviate this problem), and the rejection of instruments (e.g., Wechsler scales as “educational,” or MCMI as redundant with the MMPI). Over the coming months those of you who have indicated a willingness to participate in the Advocacy Group will be asked to work with MCOs and HMOs to try and educate them around the appropriate uses of assessment.

Training Guidelines and Credentialing

Virginia Brabender, PhD, ABPP
Widener University

Have you looked at your SPA Membership Directory lately? One resource hides in the back of the book, which may serve a variety of member needs. The resource is the “Training Guidelines and Credentialing” established by the SPA Task Force of the same name. This set of guidelines outlines the minimal necessary training program in personality assessment.

The Training of the Competent Personality Assessor

These guidelines provide a developmental overview of the training process. They begin with the earliest years of graduate training in which the student takes courses preparatory to beginning a study of personality assessment. For example, the guidelines identify Personality Theory, Psychopathology, Life Span Development, and Principles of Test Construction and Evaluation as the foundation of personality assessment training.

Specific academic training in personality assessment requires a minimum of three semesters and should be launched by a survey course that lasts at least one semester. In this primer course, students should be actively engaged in learning to administer, score, and interpret some of the instruments covered in the survey. Through an appraisal on the reliability and validity of instruments presented, students begin to internalize these criteria in their decision-making about what instruments to use in conducting a personality assessment.

Following the primer course, students should move into one or more courses that focus intensively on particular techniques (presumably those wideband instruments that have applicability to a spectrum of problems and settings). Simultaneously, students should be given relevant fieldwork in which they practice under supervision use of the instruments they are studying in their course. An advanced course in personality assessment would engage students in mastering the meta-skills necessary to conduct a personality assessment such as assembling an appropriate test battery and integrating results form different instruments.

Practicum and internship training are critical in the learning process. The guidelines rightfully underscore the value of repeated practice and variety in the characteristics of assessment participants. This requirement is also very practical: students who obtain a great deal of assessment experience at the practicum level tend to fare very well in the intern selection process. The guidelines also indicate that students during the internship should be working at an advanced level and not attempting to get the basic skills that should have been provided during their academic and practicum work.

The guidelines also instruct us that continuing education is necessary for individuals who do personality assessments and that care should be taken to selection among all of the offerings available. For example, ensuring that CE instructors are well credentialed is critical.

Uses of the Guidelines

The potential uses of these guidelines are various. These guidelines could be helpful to the individual faculty member who represents the curricular area of personality assessment in his or her doctoral program. Frequently, I have heard such faculty lament that other faculty attempt to render as meager as possible, personality assessment offerings. Through use of these guidelines, the faculty member can show what the premier national organization in this area sees as a coherent curriculum, graded in complexity with present learning based on prior work (as required by the APA accreditation guidelines). The guidelines also can be beneficial to those academic programs that do enjoy robust assessment programs. The fact that a doctoral program meets or exceeds the requirements of the major national organization in personality assessment is a point that could be referenced in a self-study. The guidelines could also be a resource to individuals who are considering choosing a doctoral institution. To aid such individuals, SPA could invite doctoral institutions to submit their assessment curriculum. A list might be maintained of those programs that offer programs consistent with the training guidelines.

...continued on page 11
Katie is a new pre-doctoral intern on an inpatient forensic unit. Due to the nature of the patient population, her supervisor wanted to accompany her for her first assessment case at the site. During the administration of the Rorschach, she was surprised to hear her ask leading questions, yet fail to follow-up on key words. He also noticed that she was very awkward when completing the location sheet while also recording the inquiry information. The supervisor spoke with Katie about her concerns. She said that although she had read the instructions regarding Rorschach administration, she had never seen anyone give the test and had never before been observed. However, Katie also said that she had given numerous Rorschachs at her previous practicum placements.

In this vignette, Katie is a student and the test that is being discussed is the Rorschach. However, this same situation could have occurred with any test instrument, and while supervisees are often students, this is not always the case. Very little research has been conducted on the effectiveness of practice test administrations (without observation or feedback) as a teaching method. However, all of us began our careers as graduate students and then as supervisees, and most of us probably had the experience of being assigned five or ten practice administrations of intelligence or personality tests or both. In one study (Slate, Jones, & Murray, 1991) using the WISC-R and the WAIS-R, students continued to make administration errors even when they were observed and given feedback.

It is generally assumed that at the completion of a testing course students are competent testers. Thus, interns are unlikely to get the detailed supervision and feedback necessary to improve their testing skills. This has implications for both graduate education as well as for supervision. An increasing number of graduate programs are stressing test administration through direct observation and immediate feedback. Some programs also include this as part of a midterm or final examination. In addition, it is an area for supervisors to also stress regardless of whether their supervisees are students, interns or employees. With every test, administration has implications for scoring and interpretation.

Another aspect of this vignette that is important involves the feedback that Katie received from her supervisor. In order for feedback to be effective, it must be timely, specific, and delivered in a way that it can be heard and used by the supervisee. Effective feedback is also dependent on having a good relationship with the supervisee so that he or she does not feel defensive. Most ethical dilemmas in the area of supervision result from supervisees who were negligent or disrespectful. When a supervisor and supervisee begin working together, it often takes time to establish a positive relationship and an open, honest context in which the supervisee’s skills can be evaluated. Supervisors are responsible for assessing and evaluating the competence, skills, and professional development of their supervisees. In initial supervisory meetings, supervisees should be encouraged to discuss what they perceive to be their strengths and the areas where they feel competent, as well as to identify areas in which they need to grow and learn (Knauss, 2000). It is important to keep in mind that some supervisees such as Katie may not be aware of their weaknesses so it is the responsibility of the supervisor to evaluate supervisees in all relevant areas.

Lack of timely feedback is another common basis of ethical complaints regarding supervision (Koocher & Keith-Spiegel, 1998). If a supervisor feels that a supervisee is unable to do clinical work, then the supervisor is responsible for determining why the supervisee is experiencing a problem and assisting the supervisee in obtaining help. This can be done in conjunction with the student’s graduate program if the supervisee is a student. Supervisors have a responsibility to the public to prevent unsuitable or不合格 individuals from becoming psychologists, but supervisors also have a responsibility to supervisees to do this in a way that is not excessively hurtful (Pope & Vasquez, 1998).

All supervisory relationships should include clear goals, frequent performance reviews, timely notification of problems, steps to remediate problems, and access to grievance procedures. Routine feedback sessions should be built into all supervisory relationships (APA, 2002). When serious criticisms are discussed with supervisees, they should be accompanied by written documentation as well as by dialogue about expected changes (Harrar, VandeCreek & Knapp, 1990). It would be inappropriate for Katie’s supervisor to say nothing about her deficiencies until her final evaluation. This delay in feedback would give her no opportunity for remediation. If a supervisee’s conduct is severe enough to warrant termination, then lack of timely feedback and opportunities for remediation can legitimately result in a claim of lack of due process (Koocher & Keth-Spiegel, 1998).

The APA Ethics Code (APA, 2002) states that “Psychologists evaluate students and supervisees on the basis of their actual performance on relevant and established program requirements.” Thus there must be clearly established criteria for evaluation. Evaluations should never be based on extraneous variables such as monetary contributions, referrals received from a student, help the student offers in a research project, or physical characteristics, gender, and ethnic background. If there are no objective and identifiable criteria, proper evaluation can not occur (Canter, Bennet, Jones, & Nagy, 1994).

A clear understanding of the contract between supervisees and supervisors is essential. This contract should include information regarding the nature of the relationship (clearly stated as supervision), mutual expectations, frequency of contact, feedback format and intervals, and other similar contingencies (Koocher & Keith-Spiegel, 1998). Although not required, it is preferable to have these arrangements specified in a formal written contract. If the supervisee is a student or an intern, the contract may be between the supervisor or the agency where the student is providing services and the graduate institution.

In conclusion, it is most important that supervisors and supervisees establish and maintain an atmosphere of clear communication, honesty and respect for one another. Supervisory relationships carry a great deal of responsibility. Clear, goals, timely and specific feedback, objective evaluation criteria, written documentation of problems and a contractual relationship between supervisors and supervisees will help these relationships to proceed smoothly.

References


Widener University
The SPA Annual Meeting March 2-6, 2005
The Four Seasons Hotel Chicago!

Registration

Participant conference registration includes all conference materials; refreshment breaks; the President’s Welcoming Reception on Thursday evening, as well as the Closing Reception on Saturday evening; entry to the scientific sessions, the master lectures, poster sessions, and the award presentations; and a collegial atmosphere to meet and interact with colleagues from around the world who are interested in personality assessment research and practice.

Conference registration can be completed with the registration form found in the promotional brochure which was mailed to the membership the first week of December 2004 or by accessing an online registration form through our web page (www.personality.org). To ensure your participation, please register early and take advantage of the advance registration fee.

Cancellations will be accepted for the Annual Meeting and/or Workshop, less a $75 administrative fee, until Wednesday, February 16, 2005. After that date no refunds will be granted.

All participants are asked to complete the conference registration form and the workshop registration form and return it to the SPA office with the appropriate fees. (All presenters, workshop leaders, and award winners are asked to complete the conference registration form and return it to the SPA office.) In order to take advantage of the Advanced Registration Fee, your completed forms must be postmarked no later than February 7, 2005. Any forms postmarked after February 7, will be processed at the On-Site Registration Fee.

All persons who register for the conference by February 7, 2005, will be mailed an Annual Meeting Program Book. Anyone registering after that date will have a Program Book in their registration packet at the conference registration desk.

Non-members are encouraged to join the Society for Personality Assessment and take advantage of the Advanced Registration Fee for Members.

Workshops

Workshops will be held on Wednesday, March 2, Thursday, March 3, or Saturday, March 5, 2005 and Sunday, March 6, 2005. No workshops are held on Friday, March 4. Enrollment in the workshops will be filled on the basis of completed workshop registration forms and fees received. Continuing Education credits will be awarded to all in attendance at the entire workshop.

Fees for Workshops:

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Continuing Education Credit

As part of its SPA Annual Meeting program, the Society for Personality Assessment will present full-day and half-day workshops. The Society is approved by the American Psychological Association to offer continuing education for psychologists, and they maintain responsibility for the program. The full-day workshops will offer 7 CE credits and the half-day workshops will offer 3.5 credits. CE credits will also be available, at no extra charge, for the two Master Lectures and for the 13 symposia sessions. A listing will appear in the Program Book.

Airline Tickets

Call Alice Hapner at Travelink, Incorporated, at 1-800-821-4671 to find the best available air travel to Chicago.

Hotel Accommodations

The Four Seasons Hotel welcomes SPA participants to experience world-class luxury and genuine Midwestern hospitality. Located on Michigan Avenue (The Magnificent Mile) and Delaware Place, the hotel provides easy access to Chicago’s business centers, dining, shopping and entertainment. The hotel itself sits atop six floors of shops—including Bloomindale’s.

Local Attractions:

☞ Within ten minutes of the hotel—The Magnificent Mile is a glittering stretch of shopping; the John Hancock Center, one of the world’s tallest buildings, with an observatory deck on the 94th floor; Lincoln Park Zoo; the intriguing Museum of Contemporary Art.

☞ Within 15 minutes of the hotel—The Chicago Board of Trade; Wendella Sightseeing Boats, offering various river and lake tours highlighting Chicago landmarks; The Alder Planetarium; The Art Institute of Chicago; the Field Museum of Natural History; the John Shedd Aquarium; the Chicago Symphony Orchestra; the Peggy Notebaert Nature Museum; the Navy Pier, a top lakefront destination; the Chicago Shakespeare Theater; the House of Blues; elegantly restored Oriental Theater; and the Chicago Opera Theater and the Lyric Opera of Chicago (please see the special section of the promotional brochure for an opportunity to join other SPA members to see Puccini’s Tosca on Tuesday, March 1, 2005, and at the same time make a contribution to the Utility of Assessment Research through the SPA Foundation.)

Dining:

The Café offers all-day dining featuring comfort foods in a relaxed atmosphere. The Seasons offers innovative North American Cuisine in an elegant yet comfortable setting. The Seasons Lounge and Conservatory is the perfect setting for lunch, tea, cocktails or after theater dessert. The Seasons Bar is a sophisticated bar with the feel of an exclusive club. For your convenience, 24-hour room service is also available and features Seasons daily specials.

Parking:

For hotel guests, the parking rate is $35 per day with in/out privileges. For the local participants, the following rates will apply for self-parking: $11 for one hour or less; $15 for 2 hours or less; $21 for five to ten hours; and $25 for 10-14 hours; OR Early Bird Special (in by 9:00 am and out by 7:00 pm) for $13.75 per day. With validation, daytime parking, enter before 5:00 pm, three hours or less is $10 (over three hours, regular rates apply). With validation, evening parking, enter after 5:00 pm (exit by 2:00 am), three hours or less is $10.

Transportation:

All major and domestic airlines serve Chicago O’Hare International Airport. Transfer time from the airport to the hotel, depending on traffic and weather, is 30 to 60 minutes. Midway Airport, serving domestic flights, is 20 to 30 minutes away. Highway access to Chicago is through Highway I-94.
Meeting Information
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Airport to Hotel:
☞ Airport Express: They do not take reservations; participants walk to the booth which is located in baggage claim to purchase a ticket. One-way—$23 per person.
☞ Taxi: One-way—$35-40, and most taxis will accommodate up to three persons, with a slight charge for each additional passenger.
☞ Metro Limousine: One-way—$100, and will accommodate up to three persons. Reservations can be made through the Concierge at the Four Seasons Hotel.

Hotel reservations must be made directly with the hotel. To get the special conference rate, please inform the hotel that you are with the Society for Personality Assessment.
The Four Seasons Hotel
120 East Delaware Place at 900 North Michigan Avenue
Chicago, IL 60611 / 312-280-8800

Reservation deadline to receive the conference rate: February 8, 2005

Room Block Dates: March 1-6, 2005
Single Room: $145 per night
Double Room: $145 per night
Executive Suite: $185 per night
One-Bedroom Suite: $495 per night

The SPA 2005 Annual Meeting will be held March 2-6, 2005, at the Four Seasons Hotel in Chicago, IL. This annual event is designed as an educational, informative, and networking event for clinical psychologists, educators, and students, all of whom are interested in psychological assessment and psychotherapy.

As a member of SPA, we invite you to become an exhibitor, advertiser, or sponsor at the Annual Meeting. Products and services of interest to meeting attendees include: psychological tests and test scoring; books concerning psychology, treatment, assessment, or disorders; psychological treatment centers; psychotherapy tools and business management tools.

Increase your visibility and put your name before all of the participants in the meeting by becoming a sponsor of our 2005 Annual Meeting. Several sponsorship opportunities for events held during the meeting are available. Simply choose the event that best fits your needs from the information packet on our web site.

The SPA Annual Meeting offers space for exhibitors and approximately 17 hours of exhibit hall exposure. Exhibit space is limited and will be assigned on a first-come, first-serve basis. This year we are also offering a substantial discount to those who exhibited in Miami in March 2004.

There are advertising opportunities, for those who prefer not to exhibit, in both our promotional/registration brochure and the onsite Program Book provided to all registrants for the annual meeting.

For detailed information, see the Exhibitor/Advertiser/Sponsor Information Packet on our Web page: www.personality.org. If you have questions, please contact Paula J. Garber, SPA Administrative Director, at managers@spapaper.org.

Personals

Robert F. Bornstein, PhD, SPA Fellow, was recently appointed to the editorial boards of Psychological Assessment and the Scientific Review of Mental Health Practice.

Vera Campo, PhD, is stepping down following four years of service as President of the Catalan Rorschach Society and will remain active teaching and supervising (Barcelona Rorschach School). She is President of the Scientific Committee of next year’s International Rorschach Conference in Barcelona. Vera furthered the introduction of the Comprehensive System in Spain in 1978 and has no plans to retire! She is currently writing about aspects of the Rorschach highlighted by an investigation of the relationship of the Rorschach and the KPDS (Klemann Psychoanalytic Diagnostic Scales). She was an invited guest of Dr. Carl-Erik Mattler and presented a case in Finland in last January that included five follow-up Rorschach evaluations of a child with psychosis.

Robert J. Craig, PhD, ABPP, has published the following book: Personality Guided Forensic Psychology, American Psychological Association, 2004. A second edition of Bob’s edited book Clinical and Diagnostic Interviewing (Rowman & Littlefield) is due out in October. Bob also received a commemorative plaque from Larry Erbbaum, JPA Publisher, for his “distinguished service as a Consulting Editor to the Journal of Personality Assessment” (for 33 years on the editorial board).

Mark Hilsenroth, PhD, won the 2004 Jack D. Krasner Early Career Award recognizing promising contributions to psychotherapy, psychology, and Division of Psychotherapy (29). The award is given annually.

Maria Holden, PsyD, continues to grow her specialty of assessing members of religious orders (e.g., monks, nuns) prior to their taking religious vows and in response to behavioral concerns.

Steven K. Huprich, PhD, is now at Eastern Michigan University, where he is a core faculty member in the clinical PhD program. Steve can be contacted through the Department of Psychology, Eastern Michigan University, 537 Mark Jefferson Hall, Ypsilanti, MI 48197, shuprich@emich.edu, 734-487-2037.

Sophie L. Loevinger, PhD, was made a Fellow of APA Division 39 in January 2003, and was awarded the Diplomate in Clinical Child Psychology in July 2004.

Robert McCarthy, PhD, was recently accepted as a member in the International Society for Neuroimaging in Psychiatry and completed the requirements for Certified Relationship Specialist with the American Psychotherapy Association Dr. McCarthy remains an Executive Advisory Board Member with the American Psychotherapy Association.

Robert McGrath, PhD, newly elected SPA Fellow, is Professor of Psychology at Fairleigh Dickinson University in Teaneck, NJ. Former Clinical Director of their APA-accredited PhD program in Clinical Psychology, he is now the Training Director of the Master of Science program in Clinical Psychopharmacology He is Associated Editor of the Journal of Personality Assessment, as well as a Contributing Editor to Professional Psychology: Research and Practice. He is the 2002 recipient of the Society for Personality Assessment Martin Mayman Award and the New Jersey Psychological Association Richard A. Schere Applied Researcher Award. He is also President-Elect-Designate for Division 55 of the American Psychological Association, as well as a Fellow of APA.


Richard Rogers, PhD, Professor of Psychology at University of North Texas (UNT), has received the university’s Toulouse Scholar Award. The award, established to honor UNT Provost Emeritus, Robert B. Toulouse, for whom UNT’s graduate school is named, recognizes the outstanding teaching and scholarly or creative achievements of a member of the graduate school faculty. A UNT faculty member since 1991, Dr Rogers was selected for the award for his contributions to the field of forensic psychology. Dr. Rogers developed the Structured Interview of Reported Symptoms, which is widely regarded as the best-validated measure to evaluate feigned metal disorders, and is the author of five books, including The Handbook of Diagnostic and Structured Interviewing, Conducting Insanity Evaluations, and Clinical Assessment of Malingering and Deception.

Susan Urbina, PhD, has just received copies of her new book, Essentials of Psychological Testing, published in July 2004 by John Wiley & Sons, Inc. Essentials in Psychological Testing is a paperback book (336 pp.) that covers all the basic topics, such as the history of psychological testing, norms, reliability, validity, item analysis, and test development. In addition, it has a separate chapter on the statistics that are most frequently used in psychological testing and another one on test use, which covers test selection, administration, scoring interpretation, and the reporting of test results.
Perhaps the most significant use of the guidelines might be for SPA itself. Not infrequently members complain that doctoral programs in professional psychology are providing training in personality assessment that is more and more impoverished. In response to this problem, SPA could use the guidelines to develop its own core curriculum, which might be offered nationally (at the mid-winter meeting) and in some cases, regionally (through our affiliate societies). Fieldwork could be facilitated through a national network of assessment supervisors. Depending upon their backgrounds, some individuals may intend to pursue the entire curriculum and receive a certificate; others could take selected parts. In this organized way, SPA would be doing its utmost to ensure that the personality assessors who are practicing are competent rather than relegating the responsibility to other educational entities.

NEW MEMBERS!

2004

Carolyn Parsons  MA
Jean Jadot  PhD
Sharon Kaufman  MA
Emily Ansell  MS
Elizabeth Pearce  PsyD
Valerie Clemen  BA
Mary Koopman  LPC, LLP
Stephanie Silberman  PhD
Susana Kugeares  PhD
Michael Tilus  PsyD
Graciela Nearing  PhD
Gregory Duncan  PhD
Sandra Sarnoff  PhD
Alessandro Crisi  PhD
Sondra Tuckfelt  PhD
Marie Oden  PhD
Carol Wintermyer  PhD
Ralph Fretz  PhD
Karin Yoch  PhD
Juliana Rohrer  PhD
Yolanda Leon  PsyD
Michael Epstein  PhD
Esther Afek  PhD
Daniel Seagrave  PhD, ABPP
Gary Meunier  PhD
Janet Smith  PhD
Michael Perrotti  PhD
Bruce Borkosky  PsyD
Michael Brannon  PsyD
Jerome Gordon  PhD
Alicia English  PhD
Kelly Zima  PsyD
Psina Lapidot  MA
Marjat Serguskin  PhD
Edward Schau  PhD
Helen Childs  PhD
Virpi Kinnunen  MSc
Laurie Dietzel  PhD
Peter Weiss  PhD
Nancy Nichols-Goldstein  PsyD

Lori Holt  PhD
Richard Greenbaum  PhD
Adam Pollack  PsyD
David Bullard  PhD
Serge Lecours  PhD
Robert Walters  PsyD
Joanna Smith  PhD
Peter Jackson  PsyD
Thomas Avery  EdD
Edward Gots  PhD
Thomas Thorsheim  PhD
Elisabeth Eurelings-Bontekoe  PhD
Chen-li Liu  MS
James Gall  PhD
Penelope Zeffert  PhD
Nicole Friedman  PsyD
Laurie Bassan  PhD
Emanuel Amrami  MA
Michal Nakash-Dura  MA
Tamar Khoushy-Hadar  MA
Hila Shaimir  MA
Daphna Dollberg  PhD
Hana Grinberg  MA
Galit Halevy-Bar-Tendler  MA
Efrat Lurie  MA
Janet Rosen  PsyD
Izhak Shahar  PhD
Sarah Sarkis  PsyD
Trudy Iredale  PhD
Joseph Schaller  PsyD
Malay Kapoor  MA
Deneis Karamitis, S.J.  PsyD
Dafni Stamatoianni  PsyD
Gail Schwartz  PhD
Tamara Hodges  EdD
Barbara Sheptycki  MSc
S. Hisch  PhD
Eve Helleotes  PhD
Rama Mishra  PhD
Michelle Parker  PhD

Jay Reeve  PhD
Lee Wetherbee  PhD, Cand. Psych
Niels Bagge  PhD
Claus Werchmeister  PhD
Donna Weiss  PsyD
Margaret Webb  PhD, LLP
Mark Hume  PhD
Blaine Carr  PhD
David Pogge  PhD
Julia Reeb  PsyD
Anna Myers  PhD
Anna Rivera  MA
Derek Prove  MA
Sarah Keiser  MA
Matthew Whitehead  BS
Kristina Feiter  MA
Scott Parker  MA
Katherine Lee  BA
Richard Fleitas  MA
Krisha Frassrand  BA
Heather Norden  BA
James Hoelzel  BS
Serena Gorgueiro  BS
Keisha Henry  MS
Virginia Wolson  BA
Laura Windham  MSW
Arica Evelo  BA
Katherine Bellon  BA
Kim Wilson  MS
Chrisy Bennett  BA
Megan Moore  MS
Keith Noland  MS
Gudrun Opitz  MA
Melissa Mann  MA
Thomas Switala  MA
Jana Radisic  MA
Maribel Del Rio  MA
Jebidiah Gaffney  MA
Thomas Slattery  MA
Casey O’Neal  MA
Jennifer Stransky  MA
Dunia Karana  BA
Matthew Schullery  BA
Robert Janner  BA
Susan Walker  MS
Emily Neff  MA
Margarita Verano  MS
B. Katrichak  MA
Nathaniel Chapman  BA
Andrea Bond-Robertson  BS
JocelynCharnas  BA
Erin Farrer  BA
Carlo Velti  BA
Jennifer Gibson  MA
Justin Shewell  MSW
Aman Nayar  MA
Katherine Falwell  MA
Rory Stern  BS
David Kemmerer  BA
Marquise Laban  MA
Mahsaw Nademin  BA
Margaret Blake  MA
Corey Arranz  MS
Sarah Chisholm  BA
Grant Stoll  BS
Maria Ortiz  MA
Jaime Nisenbaum  MA
Anthony Rowley  BA
Christine Senn  BA
Delia Silva  BS
V.C. Braeckman  MOA, MTD
G. Abiko  MA
Ann Frankel  MA
Cerise Vablais  MBA
Emily Anderson  MAFP
Anthony Ruocco  BS
Christine Raches  MA
Kristin Henley  BA
Lara Nallbandian  MA
Sarah Hood  BA
George Bormbel  MA
Benjamin Chapman  MS
Katherine Wallinga  MS

Training Guidlines
...continued from page 7
In this Special Assessment section, I have asked three graduate students who were on the precipice of administering their first true Rorschach (true meaning to an actual client) to discuss some of their contemporary thoughts and experiences. Two of the students—Matthew Whitehead and Sharon Momenian—are both third year practicum students from Widener University’s Institute for Graduate Clinical Psychology, a program which emphasizes psychological assessment and, particularly, the Rorschach. They have both recently administered their first Rorschach and share some of their thoughts and anxieties about the experience. From a slightly different perspective, Natalie Rosenthal is a third year student from the University of Delaware where personality assessment and the Rorschach are not traditionally emphasized. Natalie has not yet given her first Rorschach and shares some of her anticipatory thoughts. In the three articles, the students put words to the desire to be diligent examiners, the normal anxieties of beginners and help us appreciate many of the procedural points that we all need to address attentively, regardless of our experience level, to ensure test integrity. As a preface to the section, I share some ideas about supervising students around their first Rorschach experience. Reading these first-hand accounts of students is helpful as a supervisor as it brings us back those formative moments in our own history and may even help inform how we provide support and training to our young colleagues.

Preparing Students for their First Rorschach: A Supervisor’s Thoughts

Alan L. Schwartz, PsyD
Christiana Care Health System
Wilmington, Delaware

During my second year in graduate school, I had the opportunity to administer the Rorschach for the first time to a real patient, a nine year old girl who came to the learning center at my practicum for primarily learning difficulties. As potential subjects go, she was among the least formidable one could imagine; a slight, quiet and deliberate little girl with a tiny voice that possessed a lilting cadence. Thus, it was somewhat perplexing to my supervisor that the prospect of administering the Rorschach to this waif sent me reeling with anxiety as if I was testing a violent inmate on death row. Now, as a supervisor of new Rorschachers, I am in the position of trying to make that first and those initial experiences as edifying and as minimally traumatic as possible. A number of cogent and well-written articles (many of them in Handler and Hilsenroth, 1998) have addressed the myriad challenges of students and teachers of personality assessment. Preparing for that first true administration of the Rorschach poses some unique stressors for students, and teaching opportunities for supervisors.

It goes without saying that preparation for the technical aspects of administration is a prerequisite. Unlike some other experiences often prescribed for graduate students, the Rorschach does not lend itself well to a ‘fly by the seat of your pants’ approach. Particular contingencies from a supervisor’s experience can help protect students from those first unwanted pitfalls. Who among us has not had the experience of not having enough paper, breaking all of the four pencils you came with, believing that ninety minutes was enough time for this client or forgetting a location chart? Predicting mistakes, particularly sharing our own, can help inoculate students to the fact that they will likely walk away with some ambivalence about their first performance. Cautionary tales from our experiences are important to share with supervisees as a way of taming idealizations and facilitating identification, an important element in the supervisory relationship (Lerner, 1998). Efforts to moderate students’ potentially harsh criticisms of themselves when—not if—perfection is not achieved, pay dividends for students’ confidence. In trying to bring expectations closer to earth, I often remind students analogously about the phenomena that I term ‘Cooking Show Wisdom’ where chefs invariably offer advice in the form of sagacity (“Never add the boiling pudding mixture to the raw eggs or they will scramble”) and fail to include the final clause of their thoughts (“Because I have done this too many times to remember”).

It also helps to reinforce how difficult, at times, it is to bring to life the mandates of correct administration. For example, in a recent year’s demonstration for students, even providing the
most earnest encouragement to a client regarding giving more than one response to Card I was met with a firewall of resistance that lasted a full five minutes. That vicarious experience helped the students truly recognize the patience and behavior associated with the innocuous “Take your time...” prompt. In our setting, akin to our medical colleagues creed, it is most helpful to ‘see one’ before you ‘do one’. The vicissitudes of the particular clinical environment with which the supervisor is well-acquainted is important preparation as well. One of the struggles in our setting, for example, is that privacy and space are often at a premium, and finding an opportunity for the two within which to safely conduct a Rorschach requires a modicum of planning ahead.

Ultimately, however, the challenge for students and thus for supervisors of first-time Rorschachers is the management of anxiety and the protection of their burgeoning sense of self as assessment professionals. While the process of assessment offers many obstacles, it is important to acknowledge the challenge that the Rorschach presents: the inquiry itself rivals the most exacting elements of the Wechsler scales with the unpredictability of psychotherapy. Even the most technically able of students can have their store of knowledge overwhelmed by fears and anxiety. Supervisors are obliged to call on their skills as clinicians in building working alliances with their students and developing a safe holding/learning environment within which to work (Handler, Fowler, and Hilsenroth, 1998). Lerner (1998) points out that feeling understood and not being made to ‘feel stupid’ have been central to his most influential learning experiences. Normalizing the anxiety of the first Rorschach and assisting students in not catastrophizing is often a helpful intervention. Students should be assured that their supervisor would not present them with a high pressure case for their first Rorschach, something which sound judgment precludes. We might also communicate to our charges that while we both would certainly prefer that first Rorschach to be an ample contribution to the assessment data, we may not even expect viable data, but merely that they emerge from the experience with experience. Along these lines, even while reinforcing the importance of technical proficiency, it is never too early to emphasize to students the observational, interpersonal and experiential elements of that first Rorschach experience. Thus, while they may emerge from the Rorschach with less than a psychometrically valid protocol, their observations, sense of the interactions between themselves and the client and impressions will be worthy data for them to share and consider vis-a-vis the entire assessment.

Finally, with all of the preparation—both technical and emotional—in place, the moment will arrive for the students first Rorschach. As unpredictable as much of the process can be, there is generally one reaction that one can reliably expect; the expression of relief once their first experience is behind them. If they have survived to learn something of themselves and of the client, then we may consider their first Rorschach a success. While we are supervisors may have helped them emerge from their experience with some of their fears and anxieties about the Rorschach assuaged, it remains to be seen if it has ultimately prepared them for the next important task: their second Rorschach.

References


My First Rorschach

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At half past the hour I began my preparations: moving chairs, setting up a space for the blots, and quickly reviewing the instructions given to me by my wise professor. “The Rorschach. Have you ever heard of it before?” I practiced aloud. At the time when I decided to use the Rorschach, I felt clear and resolve in my decision, but at twenty-five minutes of the hour, that decision felt more like a manifestation of masochistic intent: Did I have enough paper? Should I use pencil or ink? I don’t have any shadow sheets! Where are they kept? Oh yes, in my hand! I had shrugged off my professor’s sage advice that I practice and develop my transcription skills, but now I swear by it. The quality of my penmanship was perhaps even worse than my ability to transcribe.

And then there was the inquiry. This was the point in the administration when I felt the least competent. A flurry of words, paper, and ink as I hurriedly attempted to circle the location, write words, and inquire about a response written on my paper that I had trouble reading. What a multitasking mess!

By the end of the process, I had played with the idea that I might promise myself to never do it again. But once the protocol was scored and discussed in supervision, my attitude towards the test changed completely. In that short amount of time I was able to get so much information about my client. From that Rorschach, I had learned things about my client that I would never have learned from an MMPI-2 and perhaps not even known after a year of working together in psychotherapy. Rare jewels of information hidden in a structural summary to provide a comprehensive picture of one’s functioning. Even with the horrendous handwriting, the mechanical gesticulations and interactions, and the chaotic inquiry, the protocol was valuable.

If not for the careful instruction I had received in class and good supervision with the actual case, I think I would have lost faith in the process. Reviewing the experience as a neophyte, I can see how such a process might intimidate practitioners who find comfort in more structured methods of assessing personality. These structured methods would have demanded less of me in terms of administration and would have removed the pressure and uncertainty that the ambiguity of the task presents. Yet, my experience taught me that these difficulties are temporary and minuscule when considered in light of the benefits the dyad receives upon completion of the task. As strange as it seemed in the year 2004 to present a series of inkblots to a client in an effort to learn about their personality, the experience was positive, and one that I would recommend to any graduate student.
Ever since I began learning about the Rorschach Inkblot Test, I loved it. I thought how great it could be to learn about a person's personality from things they report to see in smudges of black, gray, and colors. I realize there are clinical psychology graduate programs out there that do not teach the Rorschach as a personality assessment instrument. I, however, am so glad that my program, Widener University’s Institute for Graduate Clinical Psychology, still believes the test is an important component of comprehensive personality assessment. That being said, my one semester of Rorschach training by no means prepared me completely for the intricacies of administration, scoring, and interpretation of the test. But with the basics under my belt, it was my time to give my first Rorschach during my third year practicum rotation doing psychological assessments at a large community hospital serving Wilmington, Delaware. This particular referral came from a psychiatrist on the inpatient unit who was working with a young man who was hospitalized for the fourth time, each coming after a suicide attempt. Not like it was not enough to be dealing with the dreaded “S” word, but I also had my first Rorschach to worry about. And anyone who says they are not nervous over giving their first Rorschach is lying. How many responses are they going to give? Am I going to be able to write everything down? When can I prompt? What if he does not understand the whole Inquiry thing? Oh, the many questions! But I wiped the sweat from my hands, reminded myself not to say “good” after every response, and got the show on the road.

So it was not as bad as I had imagined. Thankfully, he gave nineteen responses and did not even flinch when I repeatedly asked, “What made it look like that to you?” I am sure that most readers have had similar experiences. I realized that I could always ask him to slow down and repeat. I could bring in as much paper as I could ever possibly need. And the word “Okay” is an adequately neutral response to that look the patient gives you when they have finished with a card but want to know if it is alright to hand it back.

While these may seem like self-explanatory bits of knowledge, these are the things we are not taught in class and the very things that make giving the Rorschach a doable task. But there is one thing that we are taught in class that makes giving the Rorschach infinitely easier: scoring. I could not imagine deciding what to query during the Inquiry if I did not know what to look for, such as “fuzzy” is a clue for texture or that “coming forward” could either be vista or form dimension. Without this knowledge I might still be asking that fellow questions.

As a novice Rorschacher I knew the best way to get through the scoring was to just do as much as I could on my own and then get really good supervision. I constructed my chart and made fast friends with the Rorschach Workbook for the Comprehensive System. (Exner, 2001). My initial run through was respectable, but the true intricacies of Rorschach scoring came after my supervisors went over the protocol with me. By this point I was feeling very fortunate about how my first Rorschach experience was turning out. A bump in the road was bound to come along and this was its time. While much of the scoring was routine, this particular patient repeatedly saw white where there was color. At first we thought about color projection, but that is solely when someone sees color in an achromatic part of the blot. We were stumped about what to do and I was amazed that my first Rorschach scoring contained material that even Exner had not accounted for. In the end we gave him a deviant verbalization for each incident and made sure to focus on it during the interpretation. The thing that impressed me the most in this process is how important it is to have good supervision at this time. Obviously two minds are better than one, especially when one has plenty of Rorschach experience.

I must admit that interpretation is my favorite part of the Rorschach. Thanks to RIAP (Rorschach Interpretive Assistance Program; Exner, Weiner and PAR Staff, 2004), I had the structural summary and once again sought supervision. So much can be seen in that maze of numbers and how it all fits together is a picture that can only be put together with practice and help. In addition, this is the stage that truly shows us how complex people are. This is when we can bring in other information we have on the person through history, interview, and other tests. We can see how the patient responded to self-report measures when they might have been able to tell what we were asking. Conversely, the Rorschach gives us a look at a person when they do not know what we are asking. With ambiguity on our side, we can see some of what they may not want us to see, and I suspect this is the most important information we are to find.

In summary, I still love the Rorschach even after giving it for the first time. I know there is much more anxiety and frustration to come my way, especially now that I am preparing for my second, but with that in mind I am still amazed at how we psychologists (even those of us in training) use those now famous inkblo-
My First Rorschach
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“In Human Movement, Color Responses, the S-CON scale, FD or Form Dimension…” These strange conglomerations of words appeared so foreign. While I would expect to hear unfamiliar jargon if I was sitting in a meeting of Wall Street investment bankers or gathered in a restaurant kitchen amidst world-class chefs, I was caught off guard by feeling quite out of place amongst two psychologists and two other psychology doctoral students. I am describing my experience in didactic instruction at my clinical placement in my third year of graduate school.

Discussing the administration, scoring and interpretation of the Rorschach was a new subject matter for me. In fact, projective tests, in general, are seldom taught in classes or encouraged in clinical assessments at my extremely research-oriented, cognitive behavioral Clinical Psychology program. Thus, while discussing assessment cases, the apparent thought processes and subsequent verbal expressions of the others at the table were quite different from the ideas or insinuations that came to my mind.

However, the endeavor of learning the Rorschach did intrigue me. I became quite determined to share some of the others’ knowledge regarding the expansive rules and detailed underpinnings of the Rorschach. I considered how (and hoped I could) relate some of this information to the evidently distinct perspective I obtain while at school. In the very least, I decided that it was important to understand how some other professionals within the very same field as I, conceptualize, theorize and verbalize their thoughts on the Rorschach.

While, I am yet to administer my first Rorschach, I have begun to grasp a very small degree of the interpretation of the Structural Summary. This is just the start, I know. Reading several different sources handed to me by my supervisors, and carefully observing my supervisors and other students administer, score and interpret Rorschach results, are some of the ways that I am preparing for my first administration. However, I believe that I will not even begin to feel comfortable with the process until I have gone through it myself.

There are several obvious worries inherent in beginning this process. First of all, will I administer the assessment correctly enough for it to be scorable? Will I remember to probe when appropriate, or will I probe too much? Will I be able to write everything down, and will I get it down accurately? What if something happens during the administration that we never discussed, what should I do?

In some sense, anxieties regarding strict administration rules are not new for me at all. Thus far in my graduate career, I have spent much of my clinical and research training on becoming familiar with measures such as: the Weschler Intelligence and Achievement scales, diagnostic, structured interviewing (i.e. Diagnostic Interview Schedule for Children/ DISC), and the Adult Attachment Interview (AAI). However, to abide by the administration rules of the Rorschach, it appears that a strong background of the scoring is needed as well. This, in fact, is true of the above measures as well. An assessor can best utilize his or her instrument when he or she knows exactly what the instrument is supposed to uncover.

Along with the usual concerns of administering a first Rorschach, I will enter my first Rorschach administration with some biases and doubts. My program tries to instill in its students the notion of conducting an efficient, yet thorough and informative assessment. Given the time consuming nature of conducting, scoring and interpreting the Rorschach, I am hoping at the end of my first assessment (which will include the Rorschach along with several self report measures, other projective tests and a clinical interview) I will feel that my time, as well as my patient’s time, was wisely spent. By this, I hope that the information acquired through the intensive Rorschach experience is both valuable and additive. Additionally, I am extremely interested in understanding how the results of the Rorschach converge with or diverge from other test data.

With all of this said, receiving a well-rounded education in the field of clinical psychology, by conversing and learning from professionals of differing perspectives, can only greatly enhance my training. I am looking forward to my first Rorschach administration, as well as discussing my thoughts about this particular test with my fellow students and supervisors. I feel privileged to be learning such material, and more importantly to be doing so in such a comfortable and open-minded atmosphere.

By the end of my third year of graduate school, I am hoping to be quite proficient in the Rorschach. At this point, I believe I will be able to form a much more informed opinion about when and how to utilize the Rorschach or other projective tests for assessment purposes.

New Dues Structure for 2005

Background:
Several of our members are not paying their annual membership dues, which is a continued source of lost revenue for SPA. The SPA board is not sure if this is largely a result of forgetfulness; we will be polling non-payers in the near future to get a better sense of the problem. In the interim, please note that the call for 2005 dues was sent out in September, 2004, and check to see if you have paid. Please also see the SPA website for the mechanism for online payment of dues.

Plan:
We have decided on a new dues structure and process for this year:

- The rate for members who pay by December 31, 2004 will be the standard rate of $90.00.
- Payment made between January 1st and February 28, 2004 will be at the rate of $105.00, involving a late fee of $15.00, and there will be continued delivery of The Journal of Personality Assessment.
- Nonpayment by March 1st will result in discontinuation of JPA although there will be continued access to the online version.
- Membership renewal by payment of standard and late fee after March 1st will enable reinstated JPA subscription. However, missed issues can be backordered only by payment of $15 per issue so that SPA does not have to bear the extra costs incurred in this scenario.

We are adding two additional provisions. First, we are encouraging multi-year membership subscription. Members who opt to pay for membership for a 3-year period will receive the benefit of doing so at the current dues rate. Second, we will be glad to provide accommodation in situations of hardship and encourage you to contact us in such cases.
From the Editor...

In this issue of the Exchange, Len Handler’s article gets us “warmed up” for the annual meeting in Chicago. Anita Boss describes the outstanding presenters and excellent continuing education offerings available at this year’s meeting. Irv Weiner discusses program scheduling and also brings to our attention the upcoming triennial Congress of the International Rorschach Society in Barcelona, Spain. Bruce Smith provides an update on his work as the SPA Advocacy Coordinator. There is also a series of informative and practical articles that should be of interest to readers. Pam Abraham presents socio-cultural perspective on the Picture Arrangement subtest. Linda Knauss discusses educational, training, and ethical issues that impact practicum and internship experience. Virginia Brabender discusses training guidelines and credentialing issues in assessment. Alan Schwartz and three of his supervisees offer commentary on “the first Rorschach administration.” Barbara Domingos and Jed Yalof discuss the integration of neuropsychological testing and personality assessment. The Exchange also includes information about a new dues structure for SPA members. The Exchange invites brief articles by members on topics of interest; please contact the editor.

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