

Psychological Testing and Psychotherapy



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Abstract

Testing and assessment in psychotherapy has been a subject of much debate. This article clarifies various issues related to the subject. Most importantly, the article highlights the importance of following guidelines established by various professional associations and organizations and presents the reader with ideas to address issues such as test bias and ethical considerations.

Introduction

"When am I going to start failing?" A student named Don asked me this question a couple of years ago. When I inquired into why he asked me this question, Don told me this story: "My high school teacher told me that my IQ is only 88. He said that I might be able to get

into college because of my football, but that I'd be certain to flunk out with an I.Q. like that." I pointed out to Don that he had been doing well in my course. I found that he had a B+ average for the three semesters of college coursework he had completed. I reminded him that the proof of the pudding lies in its eating—and that the proof of scholastic achievement lies in grades, not in a test designed to predict grades.

Last June, Don graduated with honors.

Here lies the dilemma of testing. On one hand, testing can be a valuable tool; on the other it can pigeonhole clients' treatment growth and development. The purpose of this article is to examine the widespread use and misuse of testing in psychotherapy, present ethical implications in test usage, examine test bias (particularly with minorities), and offer conclusions on test usage, selection, and interpretation.

Walsh and Betz (1990) defined assessment as a process of understanding and

helping people cope with problems, and defined a test as a method of acquiring a sample of behavior under controlled conditions. Therefore, testing is one aspect of assessment and should be used in conjunction with other information about our clients.

Generally speaking, throughout the clinical assessment process, practitioners should try to understand the unique problems and demands encountered in different referral settings. Otherwise, examiners—despite being skilled in administering and interpreting tests—may provide much useless information to their referral sources and perhaps even administer a needless series of tests. To help clarify clients' needs as well as develop a relevant psychological evaluation, clinicians should become familiar with the types of environments in which they are working. The most frequent environments are the psychiatric setting, the general medical setting, the legal context, the educational context, and the psychologi-

cal clinic.

The proper use of testing and assessment in psychotherapy and education continues to be at the center of public debate because of its vital role in the following: assessing the psychological and educational state of clients, providing historical information on clients, sorting individuals for placement and certification, and evaluating the effectiveness of psychological interventions and educational programs.

Goldman (1972) used a metaphor to describe the relationship between testing and psychotherapy as a "marriage that has failed." To save the marriage, among other things, Goldman recommended that test developers and producers improve their products and that psychotherapists place less emphasis on number comparisons and move on to instruments to stimulate self-exploration.

The main problem with tests, according to Goldman, was that they had been developed for selection purposes, and that the typical level of predictive validity that made tests useful for selecting college students or employees had a very different meaning and value when used in psychotherapy.

Corey, Corey, and Callahan (1993) proposed that the core issue in testing and assessment is not whether tests are used as an adjunct to psychotherapy, but rather under what circumstances and for what purpose. For example, the central role of the clinician conducting testing and assessment should be to answer specific questions and aid in making relevant decisions. To fulfill this role, clinicians must integrate a wide range of data and bring diverse areas of knowledge into focus. Thus they are not merely administering and scoring tests. A useful example to highlight this point is the contrast between a

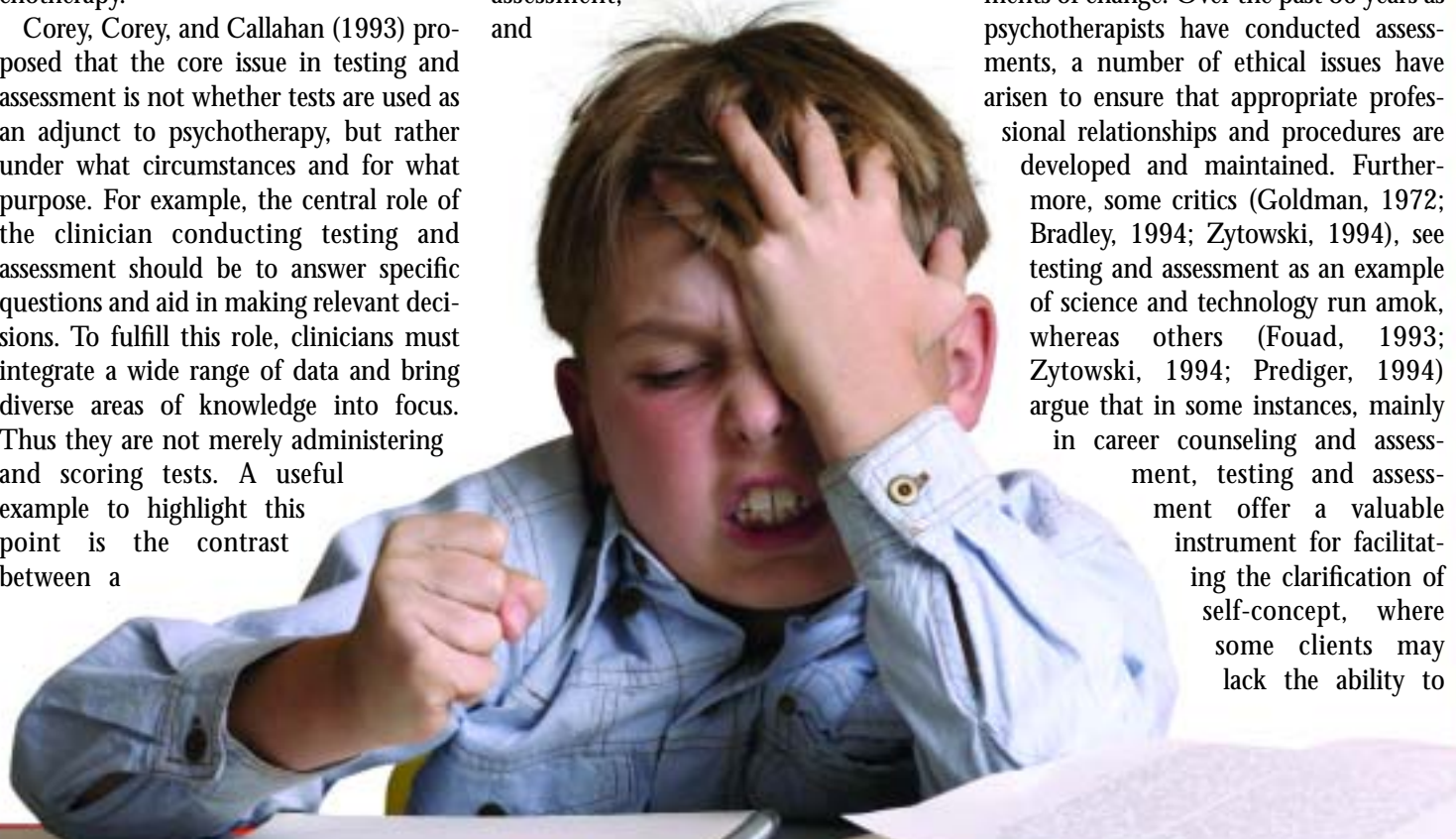
psychometrist who tends to use tests merely to obtain data, wherein the end product is often a series of traits or ability descriptions. In contrast, psychological assessment attempts to evaluate an individual in a problem situation so that information derived from assessment can somehow help with the problem.

Corey et al. (1993) suggest that therapeutic approaches that emphasize an objective view of psychotherapy are inclined to use testing and assessment procedures as tools to acquire information about clients or as resources that clients themselves can use to help them in their decision making. However, client-centered and existential approaches tend to view testing and assessment in much the same way that they view diagnosis—as an external frame of reference that is of little use in therapeutic situations. Consequently, traditional means of assessment have decreased due to an overall increase in other activities of psychologists and an expansion in the definition of assessment. Currently, a psychotherapist doing assessment might include such techniques as MMPI, WAIS-R, BDI, MCMI, etc., naturalistic observations, neuropsychological assessment, and

behavioral assessment. Additionally, psychotherapists might be required to assess areas that were not given much emphasis before the 1980s, such as personality disorders (borderline personality, narcissism), stress and coping (life changes, burnout, existing coping resources), hypnotic responsiveness, psychological health, adaptation to new cultures, and the changes associated with increasing modernization, family system interactions, cognitive processes related to behavior disorders, and level of personality control (self-efficacy). All these require the psychotherapist to be continually aware of new and more specific assessment devices and ethical/legal guidelines for administering and interpreting assessments to maintain flexibility in the approaches they take. It is only appropriate at this point to focus on the ethical issues concerning testing and test usage.

Ethical Considerations

The discussion over testing and assessment in psychotherapy and education continues. Test results are used to document the need for reform, and tests are frequently regarded as powerful instruments of change. Over the past 80 years as psychotherapists have conducted assessments, a number of ethical issues have arisen to ensure that appropriate professional relationships and procedures are developed and maintained. Furthermore, some critics (Goldman, 1972; Bradley, 1994; Zytowski, 1994), see testing and assessment as an example of science and technology run amok, whereas others (Fouad, 1993; Zytowski, 1994; Prediger, 1994) argue that in some instances, mainly in career counseling and assessment, testing and assessment offer a valuable instrument for facilitating the clarification of self-concept, where some clients may lack the ability to



separate themselves from the emotionality of their situation and therefore need the objectivity that testing and assessment can provide. Generally, however, criticism regarding testing and assessment has been directed at the use of testing and assessment in inappropriate contexts, cultural bias, invasion of privacy, and the continued use of tests and assessments that are inadequately validated.

Testing has and continues to play a major role in psychotherapy and education in the United States. Despite much debate over the ethical use of testing and test bias, its role has continued to expand and renewed growth is certain. It is difficult to argue against the fact that testing and assessment is more popular than it has ever been (Zytowski, 1994). Therefore, the goal of testing should always have the interest of the client at its core, implying the simultaneous pursuit of excellence and equality.

The matters of appropriate use and the ethics of testing and assessment have recently been addressed by many professional organizations and associations serving psychotherapists and educators. For example, the Codes of Ethics of the American Psychological Association (APA), International Association of Marriage and Family Counselors (IAMFC), National Career Development Association (NCDA), and American School Counselor Association (ASCA) include specific standards pertaining to the use of testing and assessment. Other professional groups have published guidelines for examiners in their Standards for Educational and Psychological Tests (1985), and Guidelines for Computer-Based Test Interpretations. Furthermore, The American Counseling Association (formerly the American Association of Counseling and Development) in a policy statement "Responsibilities of Users of Standardized Tests, (RUST) 1988" urges cognizance of the different purposes for testing, such as: placement, prediction, description and diagnosis, and assessment of growth or change, accompanied by differential skills and knowledge in test selection, administration, scoring, interpretation,

and communicating results.

Guidelines established by these organizations constitute professional standards and guidelines that meet the challenges psychotherapists face in assisting clients. The following are the most important of these guidelines, along with additional related issues.

Developing a professional relationship ensures that testing and assessment are only conducted within the context of a clearly defined professional relationship. In this domain it is important to be aware of the impact that the quality of the relationship can have on the results of testing and assessment. For example, enhanced rapport with adolescents has been shown to increase WISC scores by an average of 13 I.Q. points when compared with an administration involving more neutral interactions (Feldman & Sullivan, 1971).

Maintaining client privacy is one of the main difficulties psychotherapists may face in utilizing testing and assessment. The psychotherapist might discover aspects of the client that he or she would rather keep private, and there may be a concern over information that could be used in ways that are not in the best interest of the client. For example, personality tests pose a highly controversial issue, since items relating to motivational, emotional, and attitudinal traits are sometimes disguised. Thus, persons may unknowingly reveal characteristics about themselves that they would rather keep private.

Diagnosis and the labeling of clients could potentially have damaging consequences. One of the dangers is creating a self-fulfilling prophecy based on expected roles associated with a specific diagnosis and label. Another dangerous consequence of labeling and diagnosis is the social stigma attached to different psychological disorders.

Competence is probably one of the most important issues facing psychotherapists assisting their clients by utilizing testing and assessment. The psychotherapist must have proper training, which generally includes adequate graduate coursework combined with adequate supervised experience. Additionally, psychothera-



pists should acquire a number of specific skills, including the ability to evaluate the psychometric limitations and strengths of a test, ways of selecting appropriate tests, and issues related to various statistical methods and procedures.

Test interpretation should never be considered a simple mechanical procedure. Accurate interpretation means not simply using norms and cutoff scores, but also taking into consideration unique characteristics of the person and his or her environment and circumstances. For example, a high level situational anxiety on the part of the client may result in certain diagnoses being compromised or exaggerated. Another example would be that clients who are undergoing a custody evaluation that includes psychological testing usually try to show themselves in a positive light, which may impact the validity of the test.

Test Bias

According to Hinkle (1994), test unfairness, or test bias, designates constant or systematic error as opposed to chance error. Furthermore, sources of item bias are a major focus in cross-cultural testing, whereas construct or categorical bias is important but less significant. Similarly, when a test is less valid for some groups than for others, the test is biased. A test is



the following excerpt: "The White, middle class Western community, like any moderately isolated social group, has created a specialized vocabulary, reservoir of information, and style of problem solving summarized under the concept of "intelligence." Since possession of these skills is a rite of passage to positions of power and wealth in the society, many have been easily seduced into concluding that those without power or wealth are of fundamentally different intellectual competence. This view ignores the fact that children's access to the experiences necessary to acquire the valued intellectual skills differs enormously by social class (p. 7).

In trying to achieve the ultimate goal of using tests only for the interest of the client, one must examine the cultural diversity of the nation. The 1990 census revealed that within the next 20 years, racial and ethnic minorities would become a numerical majority, while White Americans will constitute only about 48% of the population (Sue, 1992). This increasing diversity of cultural backgrounds will present assessment challenges for years to come (Hinkle, 1994).

As the goals of psychotherapy become more complex and the diversity of clients increases, the psychotherapist's task of measuring and evaluating becomes more difficult. The improper use of testing can lead to exclusion of minorities in job promotion, to discriminatory educational decisions, and to biased determination of what constitutes pathology and treatment in psychotherapy (Lonner & Sundberg, 1985). Hinkle (1994) postulated that cultural influences in testing can be minimized only through increased awareness, training, and instrument development, but that they cannot be totally eliminated. Testing and assessment are potentially valuable tools in psychotherapy. However, the assessment of culturally diverse persons can only be accomplished competently by clearly delineating the contribution of culture to the presenting problems and symptomatology (Dana, 1993).

Conclusions

According to Anastasi (1992), psy-

chotherapists constitute a major group of test users. Therefore it is essential for psychotherapists to be knowledgeable of the basic requirements of proper test use, such as uniform administration and scoring procedures, appropriate use of norms, maintaining the security of test materials and observing copyright restrictions, and protecting the privacy of test takers and the confidentiality of the findings.

Goldman (1972) devoted much of his article to discuss what was needed to save the marriage between testing and psychotherapy. First, test developers and distributors needed to clean out tests that were not up to standards of reliability, validity, adequate and up-to-date norms, and the provision of experience tables, and to get rid of the grade-equivalent type of score that all experts deplored. Second, psychotherapists should prepare local experience tables so they could give clients more than vague interpretive statements. Third, psychotherapists should place less emphasis on number scores and comparisons with norm groups and more on the few tests that were built to stimulate self-exploration and group discussion about values, goals, and alternative courses of treatment.

The most important factor in test selection should be the extent to which the test is useful in answering the referral question. For example, depressed clients could be given the Beck Depression Inventory. Another factor to consider in test selection is the psychotherapist's training, experience, personal preference, and familiarity with relevant literature. For example, a psychotherapist who has received training in the MMPI might be concerned about its ability to assess a personality disorder and may rather choose to use the Millon Clinical Multiaxial Inventory (MCMI). A recent trend in practice is to use tests to generate a treatment plan. This goal has become possible by having psychological assessments that provide useful information regarding planning, implementation, and evaluation of treatment.

Anastasi (1988) suggested that test users, for the proper interpretation and application of test results, need some basic understanding of statistical techniques of

biased if scores depend not only on client/student ability, achievement, etc., but also on race, sex, ethnic origin, or some other group factor. Suzuki, Meller, & Ponterotto (1996) defined test bias as the presence of systematic error in the measurement of certain factors (e.g., academic potential, intelligence, psychopathology) among certain individuals or groups. The basic issue psychotherapists must consider is determining whether tests are as valid for minority groups as they are for non-minorities.

Furthermore, psychotherapists should consider three types of test bias when testing minorities: content bias, internal structure bias, and selection bias. These are described below.

Content bias is found in a test in which the items are more familiar to one group than to another.

Internal structure bias results from the internal structure of the test and the relationship among items. This is related to the way test-takers perceive the test items.

Selection bias refers to a test having differential predictive validity across groups (Fouad, 1993).

Goldman (1972) asserted that tests are unfair to the "disadvantaged" and constituted a self-fulfilling prophecy, thereby restricting participants' opportunities and discouraging them from trying. Kagan (1972) stated his case against I.Q. tests in

psychometrics and relevant facts and principles of behavioral science. The latter requires knowledge about the behavior domain assessed by the test and the conditions that affect behavior development.

Two principles constitute the foundation upon which test interpretation skills are built. First, test interpretation must not be viewed as a discrete activity but conceptualized as a part of the ongoing psychotherapy process. Second, it is useful to think of tests as structured interviews designed to provide information about clients in an efficient manner. They should not be deified or thought of as magically providing answers (Tinsley & Bradley, 1986). Bredekamp and Shepard (1989) recommended that standardized tests not only be a valid and reliable measure, but that they be used only for the purpose for which they were designed and for which data exists to support validity, and, most importantly, that tests be used only to benefit clients in some way.

It is crucial, according to Dana (1993), to train prospective psychotherapists to provide services to multicultural groups. Second, psychotherapists must face cross-cultural assessment with a commitment to learn more about themselves and more about cultural values and the worldviews of their clients. These worldviews include group identity, individual identity, beliefs, values, and language. Additionally, psychotherapists must constantly challenge themselves to learn and incorporate appropriate strategies of intervention when assessing culturally different individuals. A well-designed test will be accompanied by empirical evidence regarding its technical adequacy and how it actually works, as well as estimates of its reliability, validity, potential for error, and standard error. It is important to keep in mind that no test will be 100% reliable and valid for any specific information need. This is why it is important to test the test itself to determine the type and magnitude of errors of interpretation that might be made.

Test usage in psychotherapy has undergone the discovery that testing has had

less precision than was hoped for, and testing has changed both in its form and its role to remain viable in the psychotherapy process. Tests are and will continue to be used to make decisions that are crucial in the lives of clients; therefore it is essential that testers be knowledgeable about the limitations and benefits of tests. If tests are to be used effectively, then we will need to expand our research endeavors and our professional competence.

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