Volume 30, Number 1

The President's Message



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This is my first opportunity to greet Society for Personality Assessment (SPA) Exchange readers as the president of SPA. I am both honored and humbled to have the opportunity to serve in this role, and take substantial solace from Bob Bornstein's observation "that the leadership of SPA does not rest with one person, but with the entire Board of Trustees." The SPA Board is unique in my experience. SPA Board members make a tremendous commitment to spending long hours in the service of the organization, without compensation but with tremendous talent, energy, and dedication. The SPA Board, in combination with the commitment and skills of Monica Tune and Sam Richardson in our Central office, give me confidence that SPA will survive my

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Society for Personality Assessment

6109 H Arlington Blvd. Falls Church, VA 22044 tenure and continue to serve as the international voice of personality assessment well into the future. In addition, Bob Bornstein leaves his term as president having concluded a very successful and productive renegotiation of our contract with Taylor & Francis for the publication of the *Journal of Personality Assessment* through the next decade. The results of this contract negotiation leave our organization on solid financial footing for the foreseeable future, and we all owe a debt to Bob and to our partners and colleagues at Taylor & Francis for this mutually beneficial outcome.

Looking Ahead

There are several important upcoming events in the near future. In early 2017, a committee led by Dr. Giselle Hass identified several nonprofit consulting firms that could potentially provide SPA with a comprehensive plan for accomplishing our goals and objectives over the next few years. Representatives from three of these consulting organizations were subsequently interviewed, and 2b Communications was unanimously approved by the Search Committee and the SPA Board to develop a 3-year strategic plan for SPA.

2b Communications is a consulting firm with offices in Los Angeles and Washington, DC. The 2b group is led by Elizabeth Bailey (co-founder and principal) and Nancy Schmidt (principal, research and strategy) and 2b has provided consulting services to many nonprofit and public-sector entities, including the American Psychological Association.

The consultation process developed by 2b involves surveying and interviewing SPA Board members, current and past SPA members, graduate students, and key partners and sponsors to gather opinions regarding the current status, and future potential, of SPA across several important areas. The SPA Board and Central Office staff interviews are being completed now. An online membership survey, including both current and recently lapsed SPA members, was conducted in the early fall, followed by interviews with other key SPA stakeholders and members of peer organizations to help identify how to position SPA for the future. A day-long planning session was held in Washington, DC, in early December to discuss research findings and set the direction for the strategic plan by establishing key components and priorities.

The result of this process will be the development of a comprehensive plan, as a joint project between a SPA planning task force and 2b leadership, to continue to build an engaged and active membership, increase awareness of the importance and value of SPA's work among our primary audiences, and to position SPA and the SPA Foundation for the future. It is our goal to present a detailed rollout of the strategic plan at the 2018 SPA Annual Convention meeting in Washington, DC.

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From the Editor Back Cover

The 2018 SPA Annual Convention is certainly high on the list of exciting upcoming events. The convention will be held at the Washington Marriott Georgetown during March 14-18, 2018. This convention will mark the 80th anniversary of SPA, and the publication of the 100th volume of the Journal of Personality Assessment. Several events are being planned to mark these important milestones, including a 2018 celebration reception to be held during the convention. More information will be available on the 2018 Annual Convention at the SPA website, www.personality. org, and through Monica Tune at the SPA Central Office, as planning for the convention continues over the next few months. Mark the SPA 2018 Annual Convention dates on your calendars now; you will not want to miss this event.

The proficiency program in personality assessment was recently the central focus of the summer 2017 SPA Exchange, featuring several perspectives on the importance of our proficiency program to the training, supervision, and practice of assessment psychologists, and to the public served by these practitioners. Personality assessment is a recognized proficiency by the American Psychological Association and its Commission for the Recognition of Specialties and Proficiencies in Professional Psychology. At the request of the American Psychological Association, SPA has taken the lead role in developing and implementing the Personality Assessment Proficiency. The overall goal of our proficiency program is to enhance and maintain the standards in the field of assessment psychology by ensuring that practitioners meet basic standards for personality assessment practices. Hadas Pade leads the SPA Proficiency Committee, which includes Radhika Krishnamurthy, Bruce Smith, Virginia Brabender, Jordan Wright, Anita Boss, Gregory Meyer, and Ginger Calloway. The committee submitted our proficiency program renewal application to the American Psychological Association in December 2017, and we thank the SPA Proficiency Committee for their efforts in creating, promoting, and expanding this important aspect of SPA activities. An extensive description

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of the proficiency program, including application forms, can be found on the SPA website.

Finally, it is my pleasure to welcome several new members to the SPA Board. As a result of the recent election, the president-elect will be John McNulty, and Jan Kamphuis is our new representative-at-large. Jordan Wright has been appointed as our Board of Educational Affairs (BEA) liaison, and the new president and Board representative for the Society for Personality Assessment Graduate Students (SPAGS) will be Sharon Nelson in March 2018. I very much look forward to working with these new members. I also want to express our gratitude to the outgoing SPA Board members, including past-president Ron Ganellen, representative-atlarge Nancy Kaser-Boyd, BEA liaison Virginia Brabender, and SPAGS president Emily Dowgwillo. Their contributions have greatly enriched SPA and we are thankful for their service. \Box

On PTSD: A Miscellany of Notes From the Field



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In the course of a recent assessment, I was exploring with a patient the impact of a life-changing experience she had nearly 4 decades ago. I gently asked if she could talk about any circumstances that served as triggers to re-experiencing for her. She replied, in an almost off-hand way, "How could I not be triggered? Trauma is everywhere today." It was an apt observation that resonated for me at that particular moment as I had a similar thought earlier in the day, owing to a confluence of current events. The most obvious event was that the date was September 11th, and the news was replete with reminders of the 16th anniversary of our shared national sorrow. Sadly, this September also brought us the terrible weather disasters with the names of Harvey, Irma, and Maria, which razed islands in the Caribbean, including Puerto Rico, and decimated communities in Florida, and the Houston area. As I write this, I am listening to an NPR story (Walsh, 2017) relating that the Veterans' Administration is concerned that their constituents may have reactions triggered by the airing of a new 10-part Ken Burns/Lynn Novick documentary on the Vietnam War (Burns, & Novik, 2017). And even our most popular distractions (I'll throw in my favorites: Game of Thrones and Twin Peaks-The Return) contain multiple characters grappling with sequelae of unspeakable events. To borrow a phrase from Kaplan (2005), we seem to be living in a trauma culture.

Our assessment work reflects the larger culture, and thus our attention to trauma and posttraumatic stress disorder (PTSD) is necessarily heightened. One of the positive outgrowths of the ubiquity of trauma in our world is the increasing attention, study, and understanding researchers have brought to this topic. In this article, I will present some recent work in the area of trauma and PTSD that may inform our understanding and assessment work.

PTSD in Veterans and Non-Veterans

In a study exploring differences in different populations with PTSD, Bellet, McDevitt-Murphy, Thomas, and Luciano (2017) found that veterans with PTSD exhibited significantly higher elevations than non-veterans with PTSD when assessed with the Personality Assessment Inventory (PAI; Morey, 1991). The authors also noted interesting differences between veterans of recent military conflicts (e.g., Persian Gulf) versus more distant historical conflagrations. More recent veterans show an increase in numbing, interpersonal issues, higher aggressive (AGG) scores and significantly higher anxiety-related disorders-trauma (ARD-T) scores.

PTSD Dissociative Subtype

With the revision of the PTSD diagnosis to include dissociation, Wolf et al. (2017) developed a scale for the purpose of assessing this construct. The Dissociative Subtype of PTSD Scale is a 15-item selfreport measure with questions that query current and lifetime presence of derealization/depersonalization, loss of awareness, and psychogenic amnesia. In addition to assessing the frequency and intensity of the symptoms, the assessment also has a ruleout function of whether the symptom has occurred during the administration of medication that might induce drowsiness. An example of a question from the scale is, "Have there been times you felt like you were watching the world around you as an outsider, as if it were a movie, and the world did not seem real?"

CAPS for DSM-5

The most commonly used measure for the formal assessment of PTSD is the Clinician Administered PTSD Scale (CAPS), which has been updated for the *DSM*-5 as the CAPS-5 (Weathers et al., 2013). The CAPS-5 is a structured interview that corresponds to a 30-item questionnaire. The update of the CAPS includes items that assess depersonalization and derealization, characteristics of the new dissociative subtype for PTSD in the *DSM*-5 referenced above. Recognizing that veterans and others with suspected PTSD may struggle to make appointments, travel, or simply be reluctant to attend appointments, Olden et al. (2017) reported on efforts to study the administration of the CAPS via a videoconferencing link. Significant correlations between the in-person

and tele-assessment were found and, in particular, there were no differences in patient ratings of the alliance with the assessor, their comfort, and trust. This study provides support in the bourgeoning area of tele-assessment, albeit with an interview/ questionnaire-based tool (one wonders about the prospect of similar studies with performance-based measures).

Intellectual Disabilities and PTSD Assessment

The assessment of trauma and PTSD in individuals who have intellectual disabilities can be challenging given the difficulties some may have in processing trauma, as well as expressing their experiences. As a result, symptoms may be prone to being misinterpreted (Mevissen, Didden, & de Jongh, 2016). And given that studies indicate that those with intellectual disabilities have greater exposure to adverse life events and extreme stressors (Wigham & Emerson, 2015), accurate assessment for these individuals is crucial. New measures, both selfreport and clinician interviews, have been developed to address this. The Anxiety Disorders Interview Schedule-Child-Intellectual Disability (ADIS-C-ID; Mervissen, Barnhorn, Didden, Korzilius, & de Jongh, 2014) was developed for use with children aged 6-18. The assessment utilizes the ADIS-C at its core, with language that is simplified and with the addition of some visual cues, including a thermometer card for scaled ratings. Similarly, the frequently used Impact of Events Scale-Intellectual Disabilities (IES-ID; Hall, Jobson, & Langdon, 2014) was revised for use with an intellectually disabled population, using ratings on a 3-point Likert scale.

Posttraumatic Growth

One of the more fascinating areas of development around trauma and PTSD has been in the exploration of posttraumatic growth (PTG). An extension of the positive psychology movement, PTG refers to positive changes in personality, schema, and wellbeing as part of the reconfiguration of one's life after a traumatic experience (Joseph & Linley, 2008b). The presence of characteristics such as optimism and a future orientation are related to PTG, although there may also be a genetic underpinning to those who respond to trauma in an adaptive manner (Collier, 2016). For assistance in capturing this often overlooked aspect of trauma, Tedeschi and Calhoun (1996) developed the Post-Traumatic Growth Inventory, a measure with 21 items rated on 6-point scales. Responses fall into five subscales: Relating to Others, New Possibilities, Appreciation of Life, Personal Strength, and Spiritual Strength. Higher scores on this measure are associated with Five-Factor domains, such as greater openness to experience, agreeableness, extraversion, and conscientiousness (Joseph & Linley, 2008a). A recent article in the American Psychological Association Monitor on Psychology (Collier, 2016) reported that the scale is in the midst of a revision, to add more cultural breadth to the spiritual change domain and to include more existential elements.

Preventing PTSD?

Although beyond the sphere of assessment, psychobiological studies have been conducted to determine if the administration of the hormone oxytocin could reduce or prevent the development of PTSD after a trauma. Oxytocin is a prime candidate as it is associated with stress reduction, a reduction in activity in the amygdala (which is implicated in emotional processing), and positive interpersonal interactions. Researchers reported that intranasal administration of oxytocin twice daily for 8 days after a trauma showed significant reduction in CAPS scores at follow-ups 6 months from the incident. Interesting, the results were only seen in individuals with a high baseline CAPS score; lower scores did not exceed placebo (Davenport, 2017).

These studies and articles are just pieces of the larger, ever-expanding knowledge base around trauma and PTSD. The challenge is to understand and utilize these disparate elements and consider them as we do our assessment work. For such a complex and nuanced example, I suggest one of Bob Erard's (2017) beautifully written discussions of a forensic case involving a woman traumatized in the course of a medical procedure in the recent *The Rorschach in Multimethod Forensic Assessment*.

References

Bellet, B., McDevitt-Murphy, M. E., Thomas, D. H., & Luciano, M. T. (2017). The utility of the Personality Assessment Inventory in the assessment of Post Traumatic Stress Disorder in OEF/OIF/OND veterans. *Assessment*. Advance online publication. doi:10.1177/1073191116681627

Burns, K., & Novick, L. (Directors). (2017). The Vietnam War: A Film by Ken Burns & Lynn Novick [Documentary series]. S. Botstein, L. Novick, & K. Burns (Producers). Washington, DC: Florentine Films and WETA.

Coller, L. (2016). Growth after trauma: Why are some people more resilient than others—and can it be taught? *Monitor on Psychology*, *47*(10), 48.

Davenport, L. (2017, September 6). *Intranasal* oxytocin may prevent PTSD. Retrieved from https://www.medscape.com/viewarticle/885273

Erard, R. E. (2017). Multimethod forensic assessment using the Rorschach in personal injury evaluations. In R. E. Erard & F. B. Evans (Eds.), *The Rorschach in multimethod forensic assessment* (pp. 160–193). New York, NY: Routledge.

Hall, J., Jobson, L., & Langdon, P. (2014). Measuring symptoms of post-traumatic stress disorder in people with intellectual disabilities: The development and psychometric properties of the Impact of Event Scale-Intellectual Disabilities (IED–IDs). *British Journal of Psychology*, *53*, 315–332.

Joseph, S., & Linley, P. A. (2008a). Psychological assessment of growth following adversity. In S. Joseph & P. A. Linley (Eds.), *Trauma, recovery and growth* (pp. 21–36). Hoboken, NJ: Wiley.

Joseph, S., & Linley, P. A. (2008b). Trauma, recovery and growth. Hoboken, NJ: Wiley.

Kaplan, E. A. (2005). Trauma culture: The politics of terror and loss in media and literature. New Brunswick, NJ: Rutgers University Press.

Mevissen, L., Barnhorn, E., Didden, R., Korzilius, H, & de Jongh, A. (2014). Clinical assessment of PTSD in children with mild to borderline intellectual disabilities: A pilot study. *Developmental Rehabilitation*, *17*, 16–23.

Mevissen, L., Didden, R., & de Jongh, A. (2016). Assessment and treatment of PTSD in people with intellectual disabilities. In C. R. Martin, V. R. Preedy, & B. Patel (Eds.), *Comprehensive guide to post-traumatic stress disorder* (pp. 281–299). Cham, Switzerland: Springer.

Morey, L. C. (1991). *Personality Assessment Inventory*. Odessa, FL: Psychological Assessment Resources.

Olden, M., Shingleton, R., Finkelstein-Fox, L., Peskin, M., Cukor, J., Ovalles, A., ... Difede, J. (2017). Telemedicine exposure therapy and assessment for PTSD: A systematic clinical practice narrative review. *Journal of Technology in Behavioral Science*, 1, 22–31.

Tedeschi, R. G., & Calhoun, L. G. (1996). The posttraumatic growth inventory: Measuring the positive legacy of trauma. *Journal of Traumatic Stress*, 9, 455–471.

Walsh, S. (Host). (2017, September 18). VA cautions Ken Burns Vietnam documentary could trigger PTSD. [Radio broadcast episode]. Retrieved from http://www. npr.org/2017/09/18/551726505/va-cautions-ken-burnsvietnam-documentary-could-triggger-ptsd

Weathers, F. W., Blake, D. D., Schnurr, P. P., Kaloupek, D. G., Marx, B. P., & Keane, T. M. (2013). *The Clinician-Administered PTSD Scale* for DSM-5 (*CAPS*-5). Interview available from the National Center for PTSD at http://www.ptsd.va.gov

Wigham S., & Emerson E. (2015). Trauma and life events in adults with intellectual disability. *Current Developmental Disorders Reports*, 2, 93–99.

Wolf, E. J., Mitchell, K. S., Sadeh, N., Hein, C., Fuhrman, I., Pietrzak, R. H., & Miller, M. W. (2017). The dissociative subtype of PTSD Scale: Initial evaluation in a national sample of trauma-exposed veterans. *Assessment*, *24*, 503–516.

Reflecting on the Insights From Past SPA *Exchange* Columns



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I am honored to begin my role as a contributor to the Society for Personality Assessment (SPA)

Exchange, and very much appreciate David Streiner for giving me this opportunity. As best I can tell, this recurrent column in the Exchange started in June 2006, with the inaugural issue from Dr. John Kurtz. Since that time there have been 21 columns written across three main authors, and each column provides a unique perspective on the field we all know and love. All too often, I'm afraid columns like this can get lost in the sands of time, even though many of the topics discussed are just as pertinent today. So for my first column, I thought it would be useful to look back on the previous issues. I will highlight key takeaways from some of these past issues and identify themes that likely reflect content which the society finds important. The SPA website contains all of these past issues, so if a particular topic inspires you, feel free to download and read from the website: http://personality.org/ publications/exchange-newsletter/.

Dr. John Kurtz authored nine columns from 2006 to 2010. The content of these columns varied widely, with broad appeal to the undergraduate student, graduate student, and faculty member audiences. Many of John's columns held clear significance to me as an assistant professor who teaches three courses per semester. One column considered how undergraduates often arrive in psychology interested in being counselors, and he described the challenge of breaking their misconceptions about what personality assessment is (Kurtz, 2006). In particular, students often hold a narrow view of assessment as being just about diagnoses, rather than the more interesting extensions into treatment planning, identifying strengths/ weaknesses, and describing a whole person with various symptoms and dispositions that fit together in a complex idiographic puzzle of human suffering. The appeal of personality assessment is made more difficult as introductory psychology textbooks often portray so-called projective tests negatively, and instructors who may specialize in a different topic in psychology could uncritically adopt this textbook position in their courses, promoting further misrepresentations (Kurtz, 2007b). To address this in my classroom, I teach an undergraduate personality course where students complete a psychological assessment on themselves using self-report data collected in class, which appears to increase their interest in the field of personality assessment (Roche, Jacobson, & Roche, 2017). My paper on this topic was published in the Journal of Personality Assessment, along with several others, in a special issue dedicated to examining "Teaching, Training, and Supervision in Personality and Psychological Assessment." Thus, it appears this issue is gaining attention from several researchers at SPA.

John also provided advice to emerging professionals in this field about how to publish in academic journals (Kurtz, 2010b), and the importance of understanding the academic lineage upon which one's training is built (Kurtz, 2007a). John provides a cogent argument for the benefits of reflecting on these past mentors across academic generations, which includes one's

specific mentor, along with other people who may have influenced their training. In some ways, this exchange article is embracing this advice by tracing the lineage of this column.

The remaining articles authored by John concerned psychological assessment research. He reviewed the influence of social desirability on test development (Kurtz, 2010a), the limitations of coefficient alpha and perhaps under-emphasis of test-retest designs to assess reliability (Kurtz, 2009b), and the limitations of null hypothesis significance testing (Kurtz, 2009a). He described the misconceptions around "objective versus projective" tests, and astutely pointed out that while objective self-report questionnaires require no judgment or interpretation from the examiner, "the burden of interpretation and subjective judgment is merely shifted from examiner to examinee" (Eichler & Kurtz, 2008, p. 3). Finally, one of my favorite columns he wrote concerned the use of personality assessment for prediction (Kurtz, 2008). He pointed out that the field can become enamored with validating internal structure of test measures using factor analysis, yet provide limited data on what these measures can predict (outside of concurrent validity using mono-method [e.g., self-report] designs). He observed that the clinical usefulness of a personality assessment is (in part) to make informed predictions, highlighting the importance of predictive validity in validating psychological instruments.

Dr. Christopher Hopwood next took over the column, authoring four columns from 2011 to 2012. Like John, Chris's vision for the column appeared to span a wide audience, with useful insights for the graduate student, researcher, and practicing clinician. His first column discussed the limitations of considering confirmatory factor analysis to evaluate structural validity in broadband personality instruments (Hopwood, 2011b). In particular, he focused on some problematic assumptions often employed in factor models (e.g., simple structure when some lower order traits are likely interstitial). He then provided several useful recommendations when using factor analysis for this purpose. First, he recommended including a variety of factor analytic methods to evaluate data. He cautioned us to not draw sweeping conclusions when data do not reach conventional fit statistic thresholds, but instead reminded us to consider reasons for misfit, including other aspects of validity (e.g., content validity) that may necessarily drive down fit, and to compare a model's misfit relative to similar measures, as some constructs may be less cleanly captured by the assumptions of factor analysis.

Chris also considered advancements in psychological assessment. He reviewed research suggesting that mood states have a limited impact on personality assessment findings (Hopwood, 2011a). He also considered how new technologies can be leveraged to examine personality processes as they unfold through time at hourly, minute, and second-to-second frequencies (Hopwood, 2012a). Finally, his last column was an inspiring piece about the ways SPA is in a strong position to influence mental health research and practice, along with several recommendations to enhance our ability as a society to impact this important area (Hopwood, 2012b).

My final predecessor was Dr. Jill Clemence, who authored eight columns since 2013, again reflecting an emphasis of speaking to a broad audience of researchers, as well as frontline clinicians. Several columns brought up important ethical issues related to clinical work. The first examined the tension between confidentiality and truthfulness in de-identifying psychological assessment reports, in particular in relation to graduate students sending reports to internship sites (Lewis, Samstag, & Clemence, 2014). The second discussed how patients often misperceive our offer to participate in research as having some added clinical benefit, and the ethical responsibilities on researchers to clarify with the patients when this assumed benefit is not present (Clemence, 2014). In both columns, specific and practical recommendations are provided to navigate these conflicts. Like those before, Jill reflected on the state of personality assessment, particularly as it relates to the changing conceptualizations of personality reflected in the DSM-5 and updated testing instruments (Clemence, 2013a).

Jill also dedicated several columns to reviewing contemporary research on topics important to this society. In one column, she reviewed the advantages of mixed-method designs, particularly focusing on opportunities for integration of qualitative and quantitative data (Clemence, 2013b). She also reviewed suicidal and nonsuicidal self-injury research. She highlighted how reasons for selfharm can be varied (e.g., suicide preparatory acts, relieving negative affect, etc.), and then discussed several contemporary instruments to assess for self-harm specifically, as well as suicide risk more generally (Clemence, 2015a). She also examined the impact of personality on hypertension, contrasting early Type A conceptualizations with contemporary research on this subject. Jill further reviews biological mechanisms for the interrelationships among personality, stress, and hypertension, and comments on potential treatments to address these concerns (Clemence, 2015b). In another column, Jill described the difficulties of chronic pain management, highlighted the clinical implications of this important issue, and then discussed the potential of personality assessment to disentangle the complex relationship among personality, pain expression, and attitude toward care (Clemence, 2016). She also used the column as a platform to highlight SPA interest groups (Clemence & Hass, 2016), with the hope of building collaborative opportunities for research and/or clinical connections.

Identifying themes

Across contributors, there is a clear theme of speaking to multiple audiences with respect to

training level (e.g., graduate student up through professionals) and clinical roles (e.g., researcher, assessor, clinician). This is quite consistent with my experience at the SPA Annual Convention, with symposia and workshops that often have broad appeal to clinicians at every level and clinical role. Just as a well-written assessment report provides information, along with actionable treatment recommendations, these columns also did an excellent job of balancing information on a topic with specific recommendations that are relevant to the SPA readership (e.g., specific measures capturing a construct, strategies to employ for various research designs, practical considerations for ethical dilemmas, etc.).

For more than a decade, this column in the SPA *Exchange* highlighted important issues related to psychological assessment, research advancements, and professional issues relevant to our society. My hope is to continue this column with the same broad scope and attention to practical implications that made these earlier columns so engaging and insightful.

References

Clemence, A. J. (2013a). Assessment in the era of downsizing. SPA Exchange, 25(1), 3, 12.

Clemence, A. J. (2013b). Mixed methods design in the study of personality assessment. *SPA Exchange*, *25*(2), 3, 12.

Clemence, A. J. (2014). Designing studies with the patient in mind. *SPA Exchange*, *26*(1), 4, 13.

Clemence, A. J. (2015a). Differentiating suicidal and nonsuicidal self-injury in self-harming individuals: Current issues and classification systems. *SPA Exchange*, *27*(1), 3, 12.

Clemence, **A.** J. (2015b). Personality, stress, and hypertension: A research update. *SPA Exchange*, *27*(2), 3, 15–16.

Clemence, A. J. (2016). Is there a place for personality assessment in chronic pain management? *SPA Exchange*, *28*(2), 3, 12–13.

Clemence, A. J., & Hass, G. (2016). SPA interests groups. SPA Exchange, 28(1), 4, 15.

Eichler, W. C., & Kurtz, J. E. (2008). What is objective about "objective" tests? Where is the projection in "projective" tests? *SPA Exchange*, 20(1), 3, 10–11.

Hopwood, C. J. (2011a). Do mood states invalidate personality assessments? SPA Exchange, 23(2), 3.

Hopwood, C. J. (2011b). Finding tigers in our tests: The evaluation of structural validity. *SPA Exchange*, 23(1), 3, 12.

Hopwood, C. J. (2012a). The assessment of personality processes. *SPA Exchange*, *24*(1), 3.

Hopwood, C. J. (2012b). SPA and the future of personality assessment. *SPA Exchange*, 24(2), 2, 12–14.

Kurtz, J. E. (2006). Getting students interested in psychological assessment: Strategies for early intervention. *SPA Exchange*, *18*(2), 2–3.

Kurtz, J. E. (2007a). Academic lineages as a source of professional identity. *SPA Exchange*, *19*(1), 3.

Kurtz, J. E. (2007b). Coverage of personality assessment in college textbooks. *SPA Exchange*, *19*(2), 3, 12.

Kurtz, J. E. (2008). Whatever happened to prediction in personality assessment research? *SPA Exchange*, 20(2), 3, 11.

Kurtz, J. E. (2009a). Some old habits in psychological assessment research. *SPA Exchange*, *21*(1), 3, 14.

Kurtz, J. E. (2009b). What does coefficient alpha tell us about test validity? *SPA Exchange*, *21*(2), 3, 14.

Kurtz, J. E. (2010a). The ambiguous role of social desirability in test development and validation. SPA Exchange, 22(1), 5, 12.

Kurtz, J. E. (2010b). Recommendations for publishing in academic journals. *SPA Exchange*, *22*(2), 3, 13.

Lewis, K. C., Samstag, L. W., & Clemence, A. J. (2014). Confidentiality concerns surrounding the use of psychological assessment reports as supplemental application materials to training sites. *SPA Exchange*, *26*(2), 3, 11.

Roche, M. J., Jacobson, N. C., & Roche, C. A. (2017). Teaching strategies for personality assessment at the undergraduate level. *Journal of Personality Assessment*, 99, 117–125.

The Value of Consultation When Faced With an Ethical Dilemma



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Consult, consult, consult is included in every ethics workshop, article and book chapter. Why is this so important? Consultation is important because no psychologist is competent to handle every situation. Sometimes psychologists can think through problems and arrive at a decision on their own. At other times a brief or informal consultation with a colleague is sufficient. Consultation improves ethical decision making because it provides information, helps reduce emotional arousal, and challenges the thinking of the psychologist (Knapp & VandeCreek, 2012). Challenging questions from consultants can help psychologists identify thinking errors and inaccurate conclusions. Consultation is most important in high-risk situations, such as when there may be legal risks, and when a patient presents a danger to self or others (Knapp, Younggren, VandeCreek, Harris, & Martin, 2013). However, consultation is also useful when there is a treatment impasse or when a psychologist thinks it could improve the quality of services.

Consultation is different from supervision. According to Knapp et al. (2013): "In consultation the psychologist retains the independent ability to make decisions about a patient. In supervision the supervisor actually directs the treatment of an individual (e.g., an unlicensed trainee) who lacks the legal authority to act independently" (p. 53). However, supervision may also occur when a licensed psychologist is developing a new area of competence such as neuropsychological testing. The terms *consultation* and *supervision* are often used incorrectly. For example, peer consultation groups are often called peer supervision groups. It is important to use these terms correctly because they are differentiated in law (Knapp et al., 2013).

In order for consultation to be effective, the person receiving the consultation must be honest (which may include admitting to making mistakes), and be willing to consider the advice that is given. The consultant must be honest as well, and able to tell the psychologist if he or she has made a significant error (Knapp & VandeCreek, 2012). Another element that improves the effectiveness of a consultation is the specificity of the question being asked. This does not mean that the consultant should not discuss other issues related to the case, but clear questions help to focus the discussion (Knapp et al., 2013).

Who should provide consultation? There are a variety of factors to consider when choosing a consultant. Is the issue clinical, ethical, or legal? One suggestion is to seek a consultant with a different perspective so that the consultant does not simply agree with everything that is said by the psychologist seeking consultation.

Knapp et al. (2013) also suggest that consultation can be an important element of self-care. It can reduce stress to discuss concerns and uncertainties with trusted and competent colleagues.

Consultation can be ongoing, such as through consultation groups, or it can be case specific. Some consultation groups are made up of individuals in the same practice, or people who have gone to graduate school together. Some professional organizations, such as local or state psychological associations, also arrange consultation groups. Consultants may also be other practitioners who are treating the patient, such as a psychiatrist who is prescribing medication to the patient (Knapp et al., 2013).

Consultation is mentioned in the American Psychological Association (2017) *Ethical Principles of Psychologists and Code of Conduct* in Standard 4.06. This standard emphasizes the need for client confidentiality when seeking consultation unless the client has provided consent or the disclosure cannot be avoided. In addition, psychologists should disclose only the information necessary to achieve the purpose of the consultation. Thus, the ethics code recognizes and supports the value of consultation.

A relatively recent form of consultation takes place over the Internet and specifically on listservs. This presents several ethical challenges. First, psychologists seeking advice on a listserv should not disclose confidential information that could reasonably lead to the identification of a person or organization. However, in order to protect confidentiality, the information provided is often incomplete or out of context so that the psychologists responding do not have an adequate basis for their comments and could provide misleading advice (Behnke, 2007). Another problem is that the psychologist providing the consultation on the listserv may not be competent to address the questions being asked. Finally, there have been situations where clients who were the subject of a consultation were also members of the listserv and recognized themselves. In addition to this breach of confidentiality, clients read advice to their therapist from other therapists. In some cases, this may increase clients' respect for their therapist who is seeking consultation to provide the best possible care, but it could also undermine clients' confidence in their therapists' competence.

Documentation of consultations demonstrates adherence to the standard of care. Both the consultant and the person seeking consultation should document the consultation. In their notes, consultants should include relevant facts, alternatives discussed, and recommendations made (Gottlieb, Handelsman, & Knapp, 2013). Consultation and documentation are especially important in highrisk situations. The notes of a consultation can serve as guidelines for a consulte to follow, especially if the consulte is distressed and/or may not remember everything that was discussed during the consultation. Documentation of a consultation will also be useful if a consulte becomes a subject in a malpractice suit or licensing board complaint.

There has not been a great deal of empirical research on the process of consultation, but Crigger, Fox, Rosell, and Rojjanasrirat (2017) conducted a qualitative study to explore the experiences of healthcare professionals who have participated in ethics consults. The participants in this study worked in a 600-bed academic hospital, which had an ethics committee that offered consultation services. The healthcare professionals included nurses, physicians, and social workers. Although this study did not include psychologists, the results are relevant to the ethical dilemmas psychologists face.

The core concepts of ethics consultation identified in this study were moral questioning, seeing the big picture, and coming together. Study participants reported that at times they lost sight of the big picture and, "[e]motional frustration, anger, anxiety, fear, and moral distress in healthcare professionals propelled the need for intervention and a call for ethics consultation" (Crigger et al.,

2017, p. 283). In this study, ethics consultation resulted in a change in perception. Participants were struck by seeing the perspectives of other team members, family members, and the perspective of the ethical consultant. This resulted in a greater understanding of others' views and an increased trust of other professionals. The professionals in this study valued the ethics consultations because of improved communications and respect. The participants said they gained new knowledge and learned about decision-making principles and how to arrive at a good decision (Crigger et al., 2017). This is the goal of successful consultation.

Gottlieb et al. (2013) identified three reasons that psychologists seek consultation: ethical dilemmas are complex, some dilemmas may require specific knowledge that psychologists may not have, and ethical dilemmas cause distress that can interfere with cognitive processes and optimal decision making. They then developed a model for integrated ethics consultation for psychologists who provide consultation on ethical matters when these circumstances arise. This is a collaborative model of consultation, in which the consultees use their own judgment to follow or not follow the advice provided. Gottlieb et al. categorize consultations in terms of four levels of complexity, ranging from simple factual questions with unambiguous answers (such as how soon must one make a report of child abuse) to highly complex dilemmas where consultees are distressed and have poor self-awareness.

Psychologists seeking consultation should also be aware that consultations are not always confidential. If there is a malpractice suit or a licensing board complaint, it may be necessary for consultants to disclose the content of a consultation. Also, in some states, psychologists are required to report unethical behavior of their peers. It is important for consultants to inform psychologists seeking consultation of these legal obligations (Gottlieb et al., 2013).

Many psychologists provide brief consultations to colleagues for free. However, there is nothing wrong with charging for consultations as long as the fee arrangements are clear to the consultee in advance (Knapp & VandeCreek, 2012). In addition, some liability insurance carriers and professional organizations also offer free ethics consultations to policyholders and members. More complex consultations, whether from an individual or an organization, usually require a fee (Gottlieb et al., 2013).

In general, there are few legal risks to providing consultation because consultants and consultees are legal equals and the consultees make their own decisions about which recommendations to accept. According to Gottlieb et al. (2013), consultation "strives to integrate the standards for best clinical practices, good ethical decision making, and sound risk management while integrating current science regarding decision making" (p. 312). Thus, consultation is valuable when faced with an ethical dilemma.

References

American Psychological Association. (2017). Ethical principles of psychologists and code of conduct (2002, amended December, 2016). Retrieved from http:// www.apa.org./ethics/code/ethics-code-2017.pdf

Behnke, S. (2007). Ethics and the Internet: Requesting clinical consultations over listservs. *Monitor on Psychology*, 38(7), 62.

Crigger, N., Fox, M., Rosell, & Rojjanasrirat, W. (2017). Moving it along: A study of healthcare professionals' experience with ethics consultations. *Nursing Ethics*, 24, 279–291.

Gottlieb, M. C., Handelsman, M. M., & Knapp, S. (2013). A model for integrated ethics consultation. *Professional Psychology Research and Practice*, 44, 307–313.

Knapp, S., & VandeCreek, L. (2012). Practical ethics for psychologists: A positive approach (2nd ed.). Washington, DC: American Psychological Association.

Knapp, S., Younggren, J. N., VandeCreek, L., Harris, E., & Martin, J. N. (2013). Assessing and managing risk in psychological practice: An individualized approach (2nd ed.). Rockville, MD: The Trust.

The MAC Report: Components of Proficient Report Writing: Part I



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The education and training of competent professionals serves a public need, and in recent years there has been increased discussion about the importance of competencies in professional and health psychology (Hatcher et al., 2013; Larkin & Klonoff, 2014). The Proficiency in Personality Assessment is directly aligned with the goal and aspiration of developing competent psychologists to serve the public. Unfortunately, there is no magical transformation in competency that takes place once one passes the Examination for Professional Practice of Psychology and any additional exams to become licensed. Prior to the establishment of the Proficiency in Personality Assessment, there was no clear or standardized mechanism in place to help ensure that those who practice personality assessment indeed demonstrate the set of necessary fundamental skills, knowledge, and professional attitudes. Recognition as being proficient in this particular area of practice will hopefully help increase the likelihood that individuals who practice assessment have appropriate training, and individuals who have achieved proficiency maintain it through the pursuit of lifelong learning in the area.

This article is inspired, as always, by my role as a graduate-level assessment instructor, supervisor, proficiency coordinator for the Society for Personality Assessment (SPA), and now the added experience of co-facilitating report writing workshops with the brilliant A. Jordan Wright. Thus, I find it necessary now more than ever before to openly and directly talk about producing well-written reports. As we transition forward from traditional assessment methods and related report-writing techniques, more and more resources address the issue of meaningful reports. Finn (2007) discussed the power of psychological assessment with respect to the positive impact it can bring, leading to increased insight by clients. Bram and Peebles (2014) discussed the value of testing in terms of treatment planning and the importance of synthesizing information in a meaningful way. Wright (2010) provided specific steps to integrate data to produce a meaningful and individualized narrative of the client. Unfortunately, there is also evidence that we still have a long way to go with respect to accomplishing such goals. Ready, Santorelli, Lundquist, and Romano (2016) reported that "report writing was the skill that needed the most improvement according to internship directors" (p. 330). Evans and Finn (2016) noted concerns about the quality of personality assessment reports in general.

Thus, it makes sense that the proficiency recognition process relies primarily on reviewing an applicant's report as an illustration of their skills in the field. The Proficiency Report Review Form, readily available on the SPA website, targets several primary areas (comprehensiveness, integration, validity, client-centered, and overall writing) that are considered to be critical and foundational components of assessment across settings and populations. This article will include brief components of a report in the context of several of the categories noted above. Other categories will be addressed in future articles. Brief sections of a report will be transformed to better meet expectations of a person-centered and integrated report, including overall meaningful discussion of assessment results.

It has been challenging to come up with a catchy acronym for all the adjectives we often use to describe a well-written report, including but not limited to planned, organized, valid, accurate, clear, integrated, useful, helpful, meaningful, individualized, cohesive, and comprehensive. I have since decided to simplify this and have come up with the "MAC Report" for Meaningful, Accurate, and Clear. I find these can be useful umbrella terms for the multiple descriptors above. Hopefully, we can all agree on the importance of producing meaningful written assessment reports for our clients or third-party referral sources. In order to be meaningful, reports need to be accurate and clear. Validity is critical for accuracy while individualization and integration are

necessary for increased meaning and usefulness. A thoughtfully planned, organized, and jargonfree report tends to be a clear one. A MAC report means that the psychologist, rather than the reader, has done the work.

It is possible for reports or sections of reports to be accurate and even clear but not necessarily meaningful, particularly for nonclinical readers, who more often than not are our typical audience. Below are some examples of what that might look like when writing about results of a WAIS-IV and MMPI-2. While some of you may think as you read that "no one writes this way" or "that's a graduate student level sample," I would sadly have to disagree. Lichtenberger, Mather, Kaufman, and Kaufman (2004) mentioned three levels of interpretation and related writing, including concrete (describing scores with no interpretation), mechanical (describing differences in test scores with limited interpretation), and individualized (integration of data and person based interpretations), the latter being the most useful. For a variety of reasons, some psychologists do not necessarily acquire the knowledge, training, or opportunity to advance past those basic levels and into a more proficient level of discussing results. That concrete and mechanical level often relies heavily on texts popular in graduate training. Let me clarify that such books are excellent resources for students and practicing clinicians. However, it is the responsibility of the psychologist conducting the assessment to pull the information together and add their clinical knowledge, judgment, and expertise, for a report that may be accurate and clear to become a meaningful one. This is where the disconnect seems to happen with limited preparedness for internship and beyond in assessment report-writing skills. If anyone is wondering why there are examples of a WAIS-IV for a personality assessment-oriented society newsletter, I will share the wise words of Leonard Handler (Handler & Hilsenroth, 1998), who offered the simple and quite obvious explanation that intelligence and personality are not separate aspects of functioning.

The brief examples below show the transformation of concrete or mechanical, test-focused, nonintegrated, lacking-in-individual-context paragraphs thatwhile accurate and at times even clearly written-are not very meaningful or useful for the reader. Some examples may also illustrate confusing writing, which impedes the reading and understanding of sometimes useful information. One of the greatest things about report writing is the personal style one can incorporate into their writing (although often frustrating to students). Thus, I am not suggesting that this is the best, right, or only way to write, but rather, that these are some options for writing about test results that can lead to a MAC Report. The data used are based on fictional cases. Integration in these examples refers to incorporating background and circumstances rather than multiple tests, which will be addressed in a later article.

Example 1: John

The Wechsler Adult Intelligence Scale–Fourth Edition (WAIS–IV) is a test designed to measure an adult's intellectual strengths and weaknesses. The test contains 10 core subtests and five supplemental subtests which form four scales: Verbal Comprehension Index (VCI), Perceptual Reasoning Index (PRI), Working Memory Index (WMI), and Processing Speed Index (PSI). The Verbal Comprehension Index measures verbal ability and knowledge, the Perceptual Reasoning Index involves processing visual cues and puzzles, the Working Memory Index measures attention, concentration and short-term memory, and the Processing Speed Index measures visual-motor coordination. The full-scale IQ score (FSIQ) measures an individual's intellectual and cognitive strengths and weaknesses across the 10 subtests. Because of the large difference between John's scores on the VCI Index (90th percentile) and the PSI index (30th percentile), the General Ability Index (GAI) best represents his overall intellectual ability. The GAI is a score that excludes the subtests that measure working memory and processing speed. John's GAI score was in the 92nd percentile, which places him in the superior range of intelligence when compared to other his age.

The paragraph above may be clear and accurate for the most part, but it is not meaningful. The focus is primarily on the test rather than on the person, offering terms that are not familiar to most readers and thus providing limited information about John's intellectual functioning. In fact, it almost forgets about the client altogether for much of the paragraph. The paragraph below tries to address such limitations, with a focus on abilities rather than index titles, and providing some individual context by integrating information available. The paragraph below also provides more useful information about John's intellectual functioning, and interestingly enough via a slightly shorter paragraph. It would be simple enough to add index and subtest titles in parentheses, as well as percentile ranks or other scores if needed, that would support the information provided as secondary rather than primary information.

The Wechsler Adult Intelligence Scale–Fourth Edition (WAIS-IV) was administered to measure John's intellectual strengths and weaknesses in the areas of verbal comprehension, perceptual reasoning, working memory, and processing speed. John's scores were significantly varied; therefore, an overall score does not provide an accurate representation of his intelligence. His general intellectual ability (verbal and non-verbal skills) is in the superior range when compared to peers his age and is better developed than his average cognitive efficiency skills (working memory and processing speed), which rely heavily on attention and concentration. This finding is consistent with John's school history as reported by his mother that John has always been a good student who is easily distracted. John's consistent academic background and love of reading likely contributed to his especially impressive verbal expression skills, often associated with one's formal and informal education.

Example 2: Tony

Tony was administered the WAIS-IV, which is an individually administered test that assesses an individual's intellectual abilities and cognitive strengths and weaknesses. Tony's overall intellectual ability (Full Scale IQ, FSIQ) was in the Average range compared to other individuals his age. He obtained an FSIQ score of 110, which ranked him in the 75th percentile. However, because Tony's Perceptual Reasoning Index was not interpretable, neither Tony's FSIQ nor his GAI (General Ability Index) can be used as an accurate estimate of his overall intellectual ability. A better understanding of his specific skills can be obtained by considering each of the four indexes that comprise the FSIQ separately. These indexes are the Verbal Comprehension Index (VCI), the Perceptual Reasoning Index (PRI), the Working Memory Index (WMI), and the Processing Speed Index (PSI).

While the paragraph above may be accurate, it is quite confusing, especially to an untrained reader, and thus valuable information is lost. The paragraph below simplifies the information provided to make it more meaningful to any audience.

Tony was administered the WAIS–IV to assesses his intellectual abilities and cognitive strengths and weaknesses. Tony's intellectual abilities varied significantly and cannot be summed up or accurately represented via an overall score (Full Scale IQ). Instead, a discussion of the different areas measured (verbal comprehension, perceptual reasoning, working memory, and processing speed) would provide greater insight into Tony's intellectual capacities.

The five brief examples below show various ways to write about Richard's elevated score on Scale 6 of the MMPI–2. They include limited information and yet demonstrate the point about personfocused versus test-focused, and the importance of integrating the client's circumstances. Consider how accurate, clear, and meaningful each example is. For context, Richard is a 42-year-old Caucasian male whose latency-aged child was removed from the home due to abuse. Thus far, Richard has been very uncooperative with Child Protective Services with respect to the reunification process. The referral question is regarding the child's possible return home under the care of his father.

Example 3: Richard

Richard's score was elevated on the Paranoia Scale (Scale 6). Individuals who score high on scale 6 are likely to be suspicious, hostile and overly sensitive. They usually have

disturbed thinking, feel mistreated, are resentful and angry, and may exhibit psychotic behavior. This scale is especially concerning because...

Richard's score was elevated on Scale 6 (Paranoia), suggesting that Richard may be suspicious, hostile and overly sensitive. This score may also indicate that he has disturbed thinking, feels mistreated, is resentful and angry, and may exhibit psychotic behavior. His score on this scale is especially concerning because ...

Richard's score was elevated on a scale measuring his view of others and his environment. Such an elevation suggests that Richard may be suspicious, hostile and overly sensitive. Based on this elevated score along with the limited background information available, Richard seems to be reacting strongly to current circumstances with a certain level of mistrust in those around him and some ideas of persecution. He may be angry and resentful about his current situation and he does not appear to have the necessary coping skills to address such issues. Such behaviors and issues are especially concerning because...

Richard's MMPI-2 profile indicated several concerns, specifically in the area of how he views his environment and his level of trust in others. It appears that Richard may be feeling persecuted and he is resentful about current circumstances in his life. Based on his responses on this self-report measure along with the limited background information available, Richard seems to be suspicious of those around him and it is unclear whether such feelings are long standing or directly related to his court case. While he does not appear to be experiencing any delusional thinking at this time and some of his reactions can be understood in context of his situation, such views towards others and related issues are concerning because . . .

Assessment findings indicated that Richard may be feeling persecuted and he is resentful about current circumstances in his life. It is likely that such feelings are, at least in part, related to his court case. Based on his own report as well as the limited background information available, Richard seems to be quite suspicious of those around him. While he does not appear to be experiencing any delusional thinking at this time and some of his reactions can be understood in context of his situation, such views towards others and related issues are concerning because . . .

The examples above become progressively more person focused than test focused and thus more meaningful to a variety of readers. The first few paragraphs paint Richard in a negative light and do not take into account circumstances that may help explain results. While some may argue that an integrated discussion of such results can come later in the report, I would argue that by then, the "damage" may already be done, as Richard was clearly categorized as being paranoid, along with a list of significant concerns (that may or may not be reflective of his current functioning) and thus impact a reader's decision-making process. The last two examples provide fairly comparable but slightly different ways to discuss results. There are likely multiple other ways to convey this information and incorporate more numbers if needed.

With the rise of managed care and computerized testing options, there are mixed reports about the current and future role of personality assessment and testing within our field the way we know it. This is somewhat ironic considering the great strides made with evidenced-based measures, a "humanistic" approach to testing, and increased research about the positive impact of assessment. Therefore, even more than ever before, it is important that the work we produce is meaningful to its consumers. The idea of a MAC Report can hopefully provide a simple yet powerful reminder of the critical components of interpretation and writing at any level of training or practice.

References

Bram, A., & Peebles, M. (2014). *Psychological testing that matters: Creating a road map for effective treatment.* Washington DC: American Psychological Association.

Evans, B. F., & Finn, S. E. (2016). Training and consultation in psychological assessment with professional psychologists: Suggestions for enhancing the profession and individual practices. *Journal of Personality Assessment, 98*, 1–11 doi:10.1080/0022389 1.2016.1187156

Finn, S. E. (2007). In our clients' shoes: Theory and techniques of therapeutic assessment. Mahwah, NJ: Erlbaum.

Handler, L., & Hilsenroth, M. (1998). Teaching and learning personality assessment. New York, NY: Routledge.

Hatcher, R. L., Fouad, N. A., Grus, C. L., Campbell, L. F., McCutcheon, S. R., & Leahy, K. L. (2013). Competency benchmarks: Practical steps toward a culture of competence. *Training and Education in Professional Psychology*, *7*, 84–91

Larkin, K. T., & Klonoff, E. A. (2014). Specialty competencies in clinical health psychology. New York, NY: Oxford University Press.

Lichtenberger, E., Mather, N., Kaufman, N., & Kaufman, A. (2004). Essentials of assessment report writing. New York, NY: Wiley.

Ready, R. E., Santorelli, G. D., Lundquist, T. S., & Romano, F. M. (2016). Psychology internship directors' perceptions of pre-internship training preparation in assessment. *North American Journal of Psychology*, 18, 317–334.

Wright, A. J. (2010). *Conducting psychological assessment: A guide for practitioners*. Hoboken, NJ: Wiley.

Comprehensive Assessment of Assessment in Graduate Training



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The American Psychological Association's Commission on Accreditation (CoA) has promulgated new Standards of Accreditation elaborated in its Implementing Regulations for Health Service Psychology programs. Phew! This information can be found on the CoA website (American Psychological Association, 2017).

The CoA has outlined various profession-wide competencies and discipline-specific knowledge areas that programs must address. Assessment is identified as a profession-wide competency that includes: (a) learning to select, administer, score, and interpret cognitive, personality, and neuropsychological tests (with consideration to empirical support, diversity, and assessment context); (b) developing and maintaining effective relationships with recipients of services; (c) learning and applying differences between objective and subjective tests and measures; (d) learning and applying multimethod assessment; (e) learning diagnostic classification; (f) writing integrative reports (e.g., background, results, diagnosis, and recommendations); and (g) communicating findings orally to different audiences (e.g., clients, supervisors, colleagues).

Further, there are other profession-wide competencies, as well as discipline-specific knowledge areas, that tie to the Assessment competency; for instance, Psychometrics, Biological Aspects of Behavior, and Cognitiveand-Affective Aspects of Behavior are designated profession-wide knowledge areas, but they are quite relevant to assessment practice. Professional Attitudes, Values, and Behaviors, and Ethical and Legal Standards, are each presented as discrete profession-wide competencies, but they are always part of assessment education and training. While programs might teach assessment competencies and knowledge in different ways, all programs are required to cover and evaluate competency both proximally (i.e., while the student is in the program) and distally (i.e., surveying program graduates with respect to competency at 2- and 5-year postgraduate intervals). So, needless to say, the program has quite a responsibility when it comes to assessment education and training,

and accreditation decisions can be affected by the manner in which assessment is, well, assessed, by the program!

In what follows, I offer some ideas for how to organize a comprehensive assessment of these assessment skills at the proximal level. The goal is to support the progression of students from foundational training, which includes classroom teaching and practice activities, to practica, and then internship, by evaluating skills that ready students for postdoctoral experience. These areas are: (a) interviewing; (b) rapport building; (c) test selection, whether with objective measures or what CoA terms as "subjective measures" for different clients; (d) administration, scoring, and ability to work flexibly with different clients; (e) receptivity to teacher and supervisory feedback; (f) cultural sensitivity through all aspects of the assessment process; (g) integrative report writing and multibattery assessment; (h) psychometrics; (i) ethics and professional comportment, including relationships with staff, colleagues, and peers; (j) diagnostic classification; (k) feedback; and, (l) self-assessment.

There are at least three ways to ensure that students are on the right track with respect to acquiring assessment competence: (a) skills and knowledge can be evaluated at the level of classroom performance, using the attainment of minimal levels of achievement as the benchmark; (b) application of classroom learning can be evaluated through ratings on a practicum (and internship) form that delineates assessment skills (skills a through l, as noted above); and (c) an integrative "outcome" assessment can be accomplished through a comprehensive evaluation (e.g., standardized cases, requiring an integrative write-up and responses to questions that cover different components of the assessment competency, including psychometrics, ethics, interpersonal relations, diagnosis, feedback, empirically supporting literature, and cultural responsiveness).

In conclusion, external accreditation standards have imposed increasingly stringent assessment requirements on all aspects of education and training. With respect to personality assessment, programs must elaborate and evaluate specific areas of assessment competence and knowledge (Krishnamurthy & Yalof, 2009) as the student progresses toward degree completion. "Assessing assessment" is at the core of the training mission.

References

American Psychological Association. (2017). CoA online self-study preparation sheets. Retrieved from http://www.apa.org/ed/accreditation/about/policies/ self-study-worksheets.aspx

Krishnamurthy, R., & Yalof, J. A. (2009). The assessment competency. In M. B. Kenkel, & R. L. Peterson (Eds.), *Competency-based education for professional psychology* (pp. 87–104). Washington, DC: American Psychological Association.

A View From the Inside



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As a fourth-year doctoral student, the past few years of my life have mostly consisted of academic pursuits, including completing coursework, conducting research, engaging in clinical work, and teaching undergraduate psychology classes. I would argue the same experience is true for most of you, and for other graduate students as well. Learning about psychological theory is likely what initially attracted most of us to the field, unless there were preceding personal circumstances that inspired questions about human motivation, emotion, and behavior. Then, being exposed to case material and consequential practical interventions is probably what got most of us hooked on the idea of becoming clinical psychologists. And for the rare few, including many of us Society for Personality Assessment Graduate Students (SPAGS) members, reading about the impact of psychological research on theory and technique inspired interest in delving into the depths of experimental psychology. Since many of us students have dabbled in the fields of research and psychotherapy, we may be inclined to enjoy both. Regardless, if you are reading this piece, you are a motivated scholar with an appreciation for understanding and properly assessing personality functioning. I implore you, however, to venture down another path in psychology: professional psychology. As president of SPAGS, I have had the unique opportunity to employ leadership skills as a student affiliate in a professional organization. This experience has been unlike any other thus far and I believe it will be integral to my growth as a competent scholar, practitioner, and overall professional. It is my goal that through reading this piece you feel inspired to not only apply for SPAGS membership, if you are not already an affiliate, but to also apply for a leadership position so that you can experience the fundamentals of being part of a board of trustees. There is a good chance many of you reading this article will one day be spearheading the SPA!

In September 2017, SPA held its annual Board meeting in Washington, DC. As the newly elected president of SPAGS, I had the unique opportunity and privilege to participate in the meeting. As a student representative, it is my obligation and desire to share with you the events of this meeting. I am confident you will be as inspired and pleased as I was with the overall process and outcome. As expected, many well-known personality researchers attended the meeting. The meeting commenced with warm and engaging conversation, indicative of the family environment fostered by SPA. Past-president Dr. Robert Bornstein handed over the gavel to SPA's current president, Dr. Robert Archer. Believe it or not, it is one sought-after mallet! Remarks were made thanking outgoing members, and new members to SPA were welcomed, including the president-elect, Dr. John McNulty; the American Psychological Association's Board of Educational Affairs liaison, A. Jordan Wright; Representative-at-Large, Dr. Jan Kamphuis; and myself. We were off to the races!

Topics of discussion varied from reviewing the highlights-and areas in need of developmentof the 2017 Annual Convention, to the upcoming 2018 convention. Updates were provided for budgeting, the Journal of Personality Assessment, and individual committees. SPA has taken steps toward making major innovations to our registration system. For example, this year, ID badges will be scanned to ensure credit is received for attending workshops. Also, consultants have been contacted to help us improve our marketing strategies, benefiting current members and attracting new members. I am fortunate to have attended a meeting in December with one of the consultants to provide input on effective techniques. I look forward to sharing with you the results of that meeting. For SPA's 80th anniversary, a reception will be held at the House of Sweden on Friday, March 16, 2018. All attendees are invited, and tickets for student members are only \$15. Don't forget to purchase them when Monica Tune sends out emails. Considering the SPAGS's Social last year went over incredibly well, in my biased opinion (although I think other attendees would agree), we will follow suit and gather somewhere locally on Thursday evening, March 15. The time and location of the event will soon be revealed.

Exciting news regarding future conventions was also announced. Next year, SPA's Annual Convention will be held in New Orleans and the year after that, San Diego. If you are not currently conducting research, be sure to have something prepared for next fall so that you can join us in NOLA! Also, in an effort to address the role that personality assessment can play in an environment that is increasingly spawning social exclusion, divisiveness, and injustice, a new committee was formed: the Diversity/Social Justice Committee of SPA. The fall meeting largely focused on incorporating multiculturalism into the organization and conventions. It is reassuring to see important strides taken by SPA. At this year's convention, a panel sponsored by both the SPA's Diversity/Social Justice Committee and SPAGS's Diversity Committee will discuss the barriers to addressing the disempowerment of underprivileged groups in society and the implications this has on research, practice, and training regarding personality assessment. Also, SPAGS's Education Committee will host a symposium focused on the clinical utility of specific personality measures and how they can be used by clinicians to guide treatment planning, as well as a roundtable discussion focused on the professional role of personality assessors in a variety

of career trajectories and disciplines. Leading researchers and clinicians will be panelists, so please be sure to attend!

This year, there will be several changes affecting SPAGS members. Firstly, members will now be offered room compensation for awarded travel grants. This will enable students to reside in the convention hotel and have increased opportunities to connect with SPA members. What's better than that? Actually, there might be something. SPA's Student Matters Committee, run by Dr. Chris Hopwood and Dr. Piero Porcelli, advocated for increases in grant funding for student research. The Board quickly approved the request and now students can receive research and dissertation awards in the amount of up to \$800! There are two different types of grants offered to students, one for research related to personality assessment and the other for dissertation research focused on personality assessment. Every student conducting such research is eligible to apply for these grants. Don't miss out on the opportunity to have your research funded! The deadlines for submission is November 15.

Participating in this meeting has been one of the highlights of my professional career. While I have been active in the psychology community, I have yet to experience the inner workings of a professional organization, let alone from the best around. I can attest to the unrelenting dedication that SPA has to serving its students. As a sitting member, I felt valued and supported. The Board consistently asked for my feedback and honored my suggestions. Furthermore, I voted on every motion applicable. I was treated as a colleague and even networked with members who have similar career interests. At a dinner after the meeting, I learned in greater detail about the personal and professional histories of Board members and received advice for the year ahead as I am in the process of applying for internships. And something really meaningful happened: I shared laughs with professional icons that I have admired for many, many years. It was truly an invaluable experience.

I want to thank the SPA and SPAGS Board for affording me the opportunity to work closely with esteemed colleagues in an effort to serve the members of SPA and SPAGS and positively impact the field of personality assessment and, more broadly, psychology. I am humbled to serve as president of SPAGS and after attending the fall board meeting, I am even more inspired to create an environment of professionalism and camaraderie among likeminded individuals interested in the advancement of personality research, the exchange of ideas about theory and practice of assessment, and the promotion of the applied practice of personality assessment. I very much look forward to seeing you all in March and learning about the impressive and impactful work you are doing. Please remember to apply for a leadership position in SPAGS since you are likely to experience a sense of well-roundedness and purpose by joining the SPA Board. And for those fourth-year students, may the force be with you in the months ahead! \Box

Public Affairs Corner



Bruce L. Smith, PhD, ABAP *Public Affairs Director*

This is a time of considerable flux in the healthcare marketplace, and consequently in the forces that are likely to influence assessment practice in the near future. With the long-term future of the Affordable Care Act (ACA) uncertain, many of the assumptions we under which were operating (e.g., medical homes, the integration of mental health care into primary practice) are called into question. Additionally, professional groups other than psychologists are increasingly lobbying heavily to have psychological assessment included in the scope of practice of their licenses. This includes the usual suspects-marriage and family therapists and social workers-as well as newer players, including speech and language therapists and counselors (as distinguished from master's-level Marriage and Family Therapists [MFT]). The threat that these efforts pose is that none of these professions includes assessment training as part of their normal curriculum. Obviously, this threatens the integrity of assessment and the quality of services provided to the public. We have been in consultation with the American Psychological Association's Practice Organization (APAPO) to try and coordinate our response. In addition, this is also on the radar of the American Psychological Association Board of Professional Affairs with which we liaison.

Along similar lines, the American Psychological Association is taking up the question of supporting proposals to license master's-level psychologists. This would be in distinction to the current master's-level licenses: Licensed Clinical Social Worker, MFT, Licensed Professional Counselor, etc. The thinking of those who support this is that the American Psychological Association could accredit MA programs in psychology and define not only the curriculum, but potentially the scope of practice as well. SPA has not taken a position on this, but we are monitoring the situation.

One of the ways that we can respond to these developments is to develop clear-cut definitions for the terms *screening, testing,* and *assessment,* which are too frequently used interchangeably. Screening involves the use of a single, generally brief instrument, such as the Patient Health Questionnaire–9 (PHQ–9; Kroenke, Spitzer, & Williams, 2001) to rule out a possible condition, such as depression. Typically, a positive result on a screen would be an indication for further evaluation. Testing involves the use of instruments

that have relatively straightforward interpretations (e.g., the Beck Depression Inventory; Beck, Steer, & Brown, 1996) to answer relatively simple questions. Assessment, on the other hand, involves the use of multiple data sources and the integration of the findings into a comprehensive report that answers more complex clinical questions. We are also exploring the possibility of partnering with an American Psychological Association entity, such as Section 9 of Division 12 (Assessment), to develop guidelines for assessment practice along the lines of existing guidelines for evidence-based treatment. Given the American Psychological Association bureaucracy, this is likely to be a lengthy process.

Given all of the above, it is *essential* that SPA members who practice assessment go through the proficiency process and become recognized as proficient. The current criteria for proficiency that we have established are likely to form the structure of any practice guidelines that are developed. The more psychologists who are recognized as proficient, the stronger will be our position in advocating for ensuring competency.

As you all know, yet another alarming longterm trend is the shrinking of assessment education and training in assessment in graduate programs, especially those that characterize themselves as clinical science. SPA is considering partnering with the Board of Educational Affairs of the American Psychological Association to develop guidelines for education and training in assessment. Because of the increase in courses that are required for American Psychological Association accreditation, assessment (which has no specific number of semesters required) is often squeezed by programs that are reluctant to add didactic requirements that might detract from time in the research lab. We hope that developing such guidelines will help shore up the importance of education in assessment in graduate programs.

Finally, as you know from my last report, the process of reviewing the Current Procedural Terminology (CPT) codes for assessment services with an eye toward ensuring proper reimbursement rates has been ongoing. Many of you recently completed surveys designed to evaluate the work value of assessment services. The results of these surveys will be used by CMS (Center for Medicare and Medicaid Services) to evaluate the CPT codes for assessment and, we hope, will lead to more appropriate valuation. We have been working closely with the American Psychological Association office that is spearheading this effort with CMS, and will keep you informed.

Beck. A. T., Steer, R. A., & Brown, G. K. (1996) Manual for the Beck Depression Inventory–II. San Antonio, TX: Psychological Corporation.

Kroenke, K., Spitzer, R., & Williams, W. (2001). The PHQ-9: Validity of a brief depression severity measure. *Journal of General Internal Medicine*, 16, 606–616.

References

Notes From The Foundation

Bruce L. Smith, PhD, ABAP President of SPAF

As you probably know, the Society for Personality Assessment Foundation (SPAF) was established as a separate 501(c)(3) entity in order to receive tax-deductible charitable contributions to further the educational and research efforts of SPA. Moneys donated to SPAF are used to support various granting programs for students and young professionals (travel grants to the Annual Convention, dissertation and other student research, etc.). In addition, SPAF funds are used to support some of the awards given at the Annual Convention. It is our hope that we can build the SPAF endowment to the point where we can offer more sizable research grants in the future.

I want to take this opportunity to impress upon you the importance of donating to SPAF. While the financial position of the society is strong, in order to fully realize our mission of advancing the science and practice of personality assessment, we need to be able to invest in educating the next generation of assessment practitioners and scholars and to fund meaningful research that both advances the science of personality assessment and demonstrates to the professional community the clinical utility of assessment. Money that is donated to the foundation goes toward those two endeavors. Please consider making a contribution to the foundation when you receive the dues statement later this year. In addition, we will be reminding you again in the spring of the importance of contributing. Finally, let me welcome Chris Front as the newest member of the SPAF Board of Trustees.

SPA Annual Convention

March 14–18, 2018 The Washington Marriott Georgetown Washington, DC

The Society for Personality Assessment (SPA) continues to be concerned with both the science and the practice of personality assessment, and our theme for the 2018 Annual Convention is *"Empirical Foundations of Personality Assessment."*

Registration

Promotional material about the 2018 workshops and the Annual Convention was mailed to the SPA membership the first week of December 2017. Online registration also became available

Convention Registration Fees

	Early Bird By 02/10/2018	Regular After 02/10/2018	Onsite After 03/10/2018
Member/Fellow/Associate	\$215	\$265	\$315
Non-Member	\$285	\$335	\$385
Member/One-Day	\$145	\$170	\$220
Non-Member/One-Day	\$165	\$190	\$240
Early Career	\$125	\$150	\$175
Early Career/One Day	\$100	\$125	\$150
Student	\$75	\$100	\$125
Student/One Day	\$50	\$65	\$80
Student Volunteer	\$55	\$55	\$55
Workshop Fees:			
Member/Convention Registrant	t	Full-Day \$175	Half-Day \$105

Student	Full-Day \$90	Half-Day \$50
Early Career	Full-Day \$125	Half-Day \$75
Non-Member/Non-Convention Registrant	Full-Day \$225	Half-Day \$140
Member/Convention Registrant	Full-Day \$175	Half-Day \$105

Note: On-site workshop registration will incur an additional \$15 fee per workshop. Students will be charged an additional \$5 for each onsite workshop registration.

Cancellation Policy: Cancellations will be accepted for the Annual Convention and/or a workshop, less a \$75 administrative fee, until midnight ET 02/10/2018. After that date no refunds will be granted.

on the web page (<u>www.personality.org</u>) the first week of December. Participant convention registration includes all convention 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.

Convention registration can be completed by accessing the online registration form (www. personality.org, Convention tab, Register for the Convention link). To ensure your participation, please register early and take advantage of the advance registration fee.

Workshops and Continuing Education Credits

As part of its Annual Convention, SPA will again present full-day and half-day workshops. The society is approved by the American Psychological Association to sponsor Continuing Education (CE) for psychologists. SPA maintains responsibility for the program and its content. The full-day workshops will offer 7 CE credits, and the half-day workshops will offer 3.5 credits. SPA offers between 25 and 27 workshops. The workshops will occur on Wednesday morning, afternoon, and evening, as well as Thursday morning and Sunday morning and afternoon. During the Annual Convention, CE credits will also be available (at no extra charge) for the two Master Lectures, some award presentations, any lunchtime presentations, and symposia sessions. Detailed information on the workshops is on the SPA website and is available on the SPA mobile Convention App. Detailed information on the scientific sessions carrying CE credit will be listed in the Program Book. A draft of the Program Book will be available online after the first week of January 2018. A hard copy of the Program Book will be available at the registration desk at the Annual Convention.

Celebrating 80 Years

SPA will be celebrating our 80th anniversary in 2018. A special celebration is being planned for Friday evening, March 16. In addition to the SPA anniversary, the *Journal of Personality Assessment* will be celebrating its 100th volume in 2018. Find more information about this special event on our website under the Convention Tab/General Information.

Annual Convention Event App

We're excited to integrate an event app into our Annual Convention experience. Benefits will include readily accessible resources such as hotel maps, the convention schedule, and speaker information; the ability to send instant reminders about coffee breaks; immediate feedback from sessions; and even details on the local area, including restaurants and sightseeing opportunities! We're always looking for ways to enhance the convention experience for our members, and we believe our event app will aid us in that mission. Find out more about our convention app, including how to download it, by following us on Facebook or by looking under the Convention tab on our website.

Accommodation

The March 14–18, 2018, SPA Annual Convention will be held at The Washington Marriott Georgetown in Washington, DC. The popular Dupont Circle is extremely close to the hotel, along with the Reagan National Airport, which makes coming and going very convenient.

The Washington Marriott Georgetown 1221 22nd Street NW Washington, D.C. 20037 Phone: 1-877-212-5752

Tel Reservations: 1-506-474-2009 (toll-free: 1-877-212-5752)

Online Reservations: https://aws.passkey.com/ event/49162056/owner/5184/home

Reservation deadline to receive the convention rate: February 19, 2018

Rates: \$219.00 Single/Double; call hotel for suite information

Transportation

This hotel does not provide shuttle service.

- Ronald Reagan Washington National Airport (DCA): airport phone: +1 703-417-8000; hotel direction: 5.4 miles N; alternate transportation: bus service, fee: \$17 USD (one way); estimated taxi fare: \$15 USD (one way)
- Washington Dulles International Airport (IAD): airport phone: +1 703-572-2700; hotel direction: 25 miles SE; alternate transportation: estimated taxi fare: \$45 USD (one way)
- Baltimore/Washington International Thurgood Marshall Airport (BWI): airport phone: +1 410-859-7111; hotel direction: 33 miles SW; alternate transportation: estimated taxi fare: \$75 USD (one way)

Off-Site

Off-site parking, fee: \$3.50 daily hourly

Valet Parking

Valet parking, fee: \$49 daily

Future Dates

March 20-24, 2019, New Orleans, LA

Diversity/Social Justice Committee



Giselle A. Hass *Chair, SPA Diversity/Social Justice Committee*

We are delighted to announce that during the last Board meeting, the Board of Trustees of Society for Personality Assessment (SPA) decided to form a standing committee on the Board for Diversity and Social Justice. The motion approved by unanimity reads: "SPA will develop a Diversity/ Social Justice workgroup to emphasize issues of diversity and fairness in programmatic and other functions of the society. This standing board committee will report to the Board directly. This committee will be chaired by a Board member, with the active participation of the SPAGS [Society for Personality Assessment Graduate Students] Diversity Committee."

Diversity involves including, understanding, and valuing differences in individual and group characteristics, such as race, religion, ethnicity, gender, gender identity and expression, socioeconomic status, age, (dis)ability status, sexual orientation, nationality, and immigration status. While the value and integration of diversity in all SPA activities has been recognized as an important principle, this moment in time demands a step further. We have acknowledged and must continue to focus on understanding the impact that individual differences can have in our professional practice, but we cannot separate this from the broader context of the individual's life. We also need to challenge the marginalization, discrimination, and oppression directed toward diverse groups of people as part of our ethical and social responsibility.

The Diversity/Social Justice committee wants to foster an environment in which intercultural dialogue, diversity awareness and sensitivity, and the values of human rights and social justice play a strengthening role in the life of the SPA community. Equally important is our goal to expand and strengthen the education and training of personality assessors around these important themes, as well as the inclusion in SPA of diverse voices and perspectives. We are inviting you to participate and contribute to this committee at whatever level you desire. Please watch out for a call to participate in this committee.

Free Software

In a previous issue, I mentioned a free program that does item response theory analyses, called Jmetrik (available at https://itemanalysis.com/ jmetrik-download/). The same group has produced a program called IRT Illustrator (https://itemanalysis.com/irt-illustrator/). It allows you to plot item characteristic curves, item and test information functions and standard error functions, and the test characteristic curve. These can then be saved as PNG or JPEG files. It's great if you need to make slides or pictures for presentations or articles.

As in the past, if you've come across any free software that others should know about, write to me at streiner@mcmaster.ca.

Kudos

Piero Porcelli, PhD, has a new affiliation and position as Full Professor of Clinical Psychology at the University of Chieti-Pescara (Italy), Department of Psychological Sciences, Health, and Territory. He can be reached at piero.porcelli@unich.it.

Steve Huprich, PhD, editor of the *Journal of Personality Assessment*, is now a Fellow of Division 29 (Psychotherapy) of the American Psychological Association. Also, in January 2018, he will become President of the International Society for the Study of Personality Disorders.

From the Editor...



David L. Streiner, PhD, CPsych

Welcome to the new look of the *Exchange*. Thanks to the work of Laura Sonnie, of the society's publisher Taylor & Francis, there have been many changes that we hope will make this a much more accessible newsletter. The major difference is that it is now an online publication. This has allowed a number of significant improvements, such as the use of full color and less restriction on the length of the articles. Most importantly, the articles are now continuous, so you don't have to jump from one page to another to finish reading an article, which was always a bother. While I am thanking people for their behind-the-scenes work, let me give a long-overdue thanks to Cathy Ott, also of Taylor & Francis. I think that I have more than my share of OCD when it comes to editing the contributions, but Cathy always spots things I have overlooked. If you appreciate the professional and polished look of the *Exchange*, you can thank Cathy (and I do quite often).

You'll also notice some changes to the contributors. Bob Bornstein has ended his term, and now the President's Message is hosted by Bob Archer. Having sat with the second Bob on the Executive Committee for the past 2 years, it's safe to say that both the organization and the column continue to be in very capable hands. A second new contributor is Michael Roche from Penn State, who has taken over writing the column on research. His first article is an overview of what has appeared in that column over the past 21 issues: a very valuable guide to some very

valuable resources. Finally, we welcome Crista Maracic from Adelphi, who is the new President of SPAGS, and say goodbye and thanks to Emily Dowgwillo who just ended her term.

This issue also has an article about important changes in the society. Giselle Hass writes about a new initiative, the Diversity/Social Justice Committee, which is a new standing committee of the Board aimed at fostering "an environment in which intercultural dialogue, diversity awareness and sensitivity, and the values of human rights and social justice play a strengthening role in the life of the SPA community." This is a very exciting development, and we look forward to hearing more about it in future issues.

As always, I think you'll find all of the other articles interesting and informative about what's going on in our profession. As in the past, let me reiterate that the *Exchange* is not a closed shop with a fixed roster of articles or authors. We would welcome contributions from any member about issues relevant to personality assessment; write to me at streiner@mcmaster.ca if you have any ideas you would like to discuss.

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