



Instructor's Guide

Seventh Edition

ASSESSMENT in Counseling

Procedures and Practices

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American Counseling Association

2461 Eisenhower Avenue, Suite 300

Alexandria, VA 22314

counseling.org

Instructor's Guide



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Introduction

This manual serves as the instructor's guide for the seventh edition of the book *Assessment in Counseling: Procedures and Practices*. Counselors across a variety of mental health and academic settings engage in assessment procedures and practices in almost every aspect of their work with clients; thus, the purpose of this text is to demonstrate how the assessment process is essentially interchangeable with the counseling process. In addition, the assessment process involves multiple quantitative and qualitative methods and tools to foster culturally responsive assessment and counseling practices.

This book is suitable for counselors and counselor trainees, as well as practitioners and trainees in similar disciplines. Readers are exposed to introductory information about the assessment process and specific assessment tools, as well as the multifaceted ways assessment procedures and practices are interwoven into the counseling profession. The assessment process can strengthen the counseling relationship and improve counseling outcomes if performed well and continually infused into the work counselors do. Furthermore, counselors have a right and responsibility to engage in assessment advocacy, as well as shape the way assessment is used in counseling and other disciplines in which they partner.

I hope you will find that the text and this accompanying instructor's guide provide several benefits for trainees and instructors. For example, the reader can reflect on learning as they read with several text features described below. End-of-chapter resources are also included to guide the reader to published or electronic resources to expand learning on a particular topic. Furthermore, instructors have several ancillary materials to help them teach and test for understanding.

While some other texts provide similar foundational content on assessment, this text offers unique content connected to trainee-centered activities throughout the chapters. For example, the text includes a chapter examining future trends in assessment, and topics such as interpersonal relationship assessment, high-stakes testing, counseling outcome assessment, qualitative assessment, and multicultural and social justice considerations are discussed more thoroughly as compared with other assessment texts. In addition, I include practitioner voices to show how assessment is practiced in a variety of settings to address multiple mental, psychosocial, academic, and career concerns. Finally, I integrate ethical and cultural considerations for assessment early in the text and infuse these topics

throughout the remainder of the text. In sum, I hope readers are actively engaged with the text, participating in the activities or reflections every few pages and referring continually to the tips and “next steps” activities provided.

Key Concepts From the Text

The text is divided into five major sections. Section I covers foundational information regarding assessment, such as key terminology, use of assessments to determine counseling outcomes, ethical and multicultural and social justice considerations, and an understanding of the assessment process. Section II introduces statistical and measurement concepts such as raw score transformation, norms, reliability, validity, trustworthiness, and steps for assessment development. Section III describes initial psychological assessments, or key methods to evaluate counseling symptoms related to common mental health disorders and addictions. Section IV explores common types of assessment in the areas of intelligence, ability, career, personality, and interpersonal relationships. Finally, the concluding chapters in Section V describe best practices for presenting assessment data and writing the report, along with a discussion of the future trends in assessment. Key concepts for each of these sections are presented by chapter below.

Section I

- **Chapter 1.** Key terms (assessment, tests, measurement, variable, and psychometrics), purpose of assessment in counseling, history of assessment, questions guiding the assessment selection process, and use of assessment across counseling settings.
- **Chapter 2.** Types of assessment methods, steps of the assessment process (assessment selection, assessment administration, assessment interpretation, and communication of findings), and use of assessments to monitor client progress and evaluate counseling outcomes.
- **Chapter 3.** Core values for effective assessment, assessment standards and guidelines from major counseling and assessment-related organizations, ethical and legal considerations in assessment (counselor wellness and self-care, competence, client welfare issues), and professional issues in assessment (assessment and technology, counseling process issues, test anxiety, the impact of test coaching).
- **Chapter 4.** Multicultural and social justice counseling competency and assessment (e.g., cultural and explanatory models, client cultural identity assessment), assessment fairness and cultural bias, cultural factors in assessment (e.g., culture of counseling, counselor implicit bias and discrimination, rates of mental disorders, client motivation and test sophistication, acculturation), multicultural and social justice assessment (e.g., gender, race, ethnicity, socioeconomic status [SES], disability, and age considerations in aptitude, cognitive, career, and personality assessment), culture-fair tests, and dynamic assessment.

Section II

- **Chapter 5.** Scales of measurement, raw scores, measures of central tendency, measures of variability characteristics of data distributions, and norms and ranks.
- **Chapter 6.** The correlation coefficient, reliability, standard error of measurement, validity, trustworthiness, and assessment development.

Section III

- **Chapter 7.** Crisis and trauma counseling, intake interview, mental status examination, quantitative screening inventories, qualitative tools for initial assessment, suicide risk assessment, and trauma assessment.

- **Chapter 8.** *Diagnostic and Statistical Manual of Mental Disorders*; prevalence of mental disorders; use of mental health services; assessment of depression, bipolar disorders, anxiety and fear, posttraumatic stress disorder, anger, self-injury, eating disorders, and attention-deficit/hyperactivity disorder; assessment of addictions; and motivational interviewing.

Section IV

- **Chapter 9.** Definitions of intelligence, theories of intelligence, individual intelligence assessments, group intelligence assessments, and intelligence assessment and special education.
- **Chapter 10.** Aptitude and achievement assessment, aptitude assessments for higher education, graduate and professional school admissions tests, academic achievement assessments, high-stakes testing, and study habits inventories.
- **Chapter 11.** Theories of career assessment, career assessment across the life span, qualitative career assessment, quantitative career assessment programs, and wellness assessment.
- **Chapter 12.** Specific career process and content tools such as career readiness, interest, and values assessments.
- **Chapter 13.** Personality assessment, structured personality assessments, unstructured or qualitative personality assessments, and objective and projective assessments.
- **Chapter 14.** Interpersonal relationship assessment, genograms, network mapping techniques, assessment of couples and families, assessment of intimate partner violence, assessment of child abuse, assessment of elder abuse, additional interpersonal assessments, and community asset mapping.

Section V

- **Chapter 15.** Communication of assessment findings, assessment interpretation interview, case conference, and assessment report components.
- **Chapter 16.** Future trends in client demographics and assessment practice, globalization, deconstruction of counseling and assessment, technology, increased sophistication of assessment practice, educational accountability, managed care, building of assessment systems, interprofessional collaborations and assessment, assessment as relevant and actionable, and future of counseling assessment research and training.

Structuring the Assessment Course

As indicated by the sample syllabus included in this instructor's guide, I suggest the course format include both lecture and small- and large-group discussions based on reading assignments from the text, completion of an assessment packet, and engagement in external resources included at the end of each chapter. There are also several opportunities for instructors to gauge trainees' understanding of text content as the syllabus outlines requirements of weekly quizzes and examinations.

Experiential training is at the core of the course format, and the assignments support ongoing activities that directly engage with the assessment process. For example, trainees are provided two assignments related to the assessment experience. First, trainees self-administer an assessment packet. Those results are discussed as particular assessment topics are introduced throughout the semester. Second, trainees conduct a clinical assessment and mental status examination, role-playing as a counselor involved in the assessment process. Specifically, trainees can gain assessment experiences with an actual client, reflect on ethical and cultural considerations during test administration, engage in

an assessment interview, and develop an assessment report. It is beneficial for the instructor to demonstrate the role play in class so that students have a concrete example before engaging in the assignment.

In addition to these assessment experiences, trainees also respond to a case study. The case study is designed as one of two culminating experiences to apply understanding of assessment procedures and practices to one of two case examples. As they outline how they would go about the assessment process, trainees address 10 questions about the case, with an opportunity to advocate for use of specific assessment tools with a particular client; present what might be typical assessment findings; and explore ethical, cultural, and social justice considerations.

The second culminating experience suggested in the syllabus is the assessment fair assignment. During the last class session, trainees facilitate a presentation on assessment methods that would be appropriate for a specific topic. Instructors can structure the fair based on the number of trainees in the course. For example, with a small class size, trainees might present to the large group. In larger class sizes, trainees might set up their presentations as booths where the instructor and their peers can visit and ask questions. A key benefit of this assignment is that trainees learn to advocate for multiple assessment methods to be used to evaluate a specific counseling issue, using current literature and best practices to support their decisions. In addition, they can reflect on the strengths and limitations of the tools. Because they are exposed to multiple counseling topics and ways in which assessment tools can be used to address those topics, trainees are presented with an extensive application of assessments in counseling practice. Furthermore, because they participate in the feedback process, they can articulate strengths and challenges for each presentation.

Within-Text Instructional Resources

There are many resources available within the text of the book. These resources are as follows:

- **Test Your Knowledge:** A Test Your Knowledge section is included at the beginning of each chapter to serve as a pretest for readers to determine how much they know about a particular topic prior to reviewing the respective chapter. Items are presented in true/false and/or multiple-choice formats. Instructors might consider beginning a class lecture by presenting these items to showcase the range of topics discussed in the chapter. For example, these could be included as a first slide of a lecture. Correct answers to Test Your Knowledge items can be found in Appendix C.
- **Bolded key terms:** Within each chapter, several key terms appear in boldface to alert the reader that the concepts are particularly important to remember. Trainees and instructors may opt to use electronic or traditional flash cards to test knowledge of key concepts across several chapters. This may be particularly useful for preparing for midterm or cumulative examinations.
- **Case examples:** Case examples are provided in a majority of chapters to help readers consider how to optimally counsel a client presenting with a specific concern. These cases are included to illustrate clearly how the assessment process and counseling process intersect. At times, case examples are presented to illustrate how a counselor administered a particular assessment tool and interpreted and communicated its findings with a hypothetical client or clients. Often, though, reflection questions follow each case example that ask trainees to consider what additional information might be useful to understand the case, what assessment tools may be useful if they worked with the hypothetical client or

clients, and how multicultural or social justice considerations factor into the case. Instructors may have trainees respond in writing to the reflection questions as an assignment that corresponds to reading a particular chapter. Responses may be written during a class lecture as part of class discussion. Alternatively, instructors may divide trainees into small groups to discuss a specific case and report back their ideas of how to counsel the hypothetical client or clients.

- **Activities:** Activities can present a small task and a few questions related to completing the task. For example, Activity 5.1 requests that trainees identify a construct or variable using the four scales of measurement and then reflect on each measurement scale's advantages and disadvantages. Another example is Activity 12.1, which involves trainees selecting measures of career readiness and examining their psychometric evidence to judge the utility of those assessments. Activities, particularly those that require trainees to select assessment tools, are intended to be done as out-of-class assignments after which trainees return to class to present findings to a larger group. The benefits of these activities are that trainees are exposed to multiple assessment tools across several assessment topics, they are able to apply chapter content to examples they create, and the activities can offer the entire class an extensive evaluation of the psychometric properties of tools and/or counseling considerations when applying major concepts.
- **Assessment in Action.** The text also includes Assessment in Action insets to add actual practitioner voices to some of the concepts presented in the text. For example, Assessment in Action 1.1 presents counselors across specialty areas discussing how they use assessment in their work. These insets provide the reader with real-life application of content as they read the text. Instructors may consider bringing practitioners into the course through virtual or traditional in-person methods. These guest speakers could present their experiences as they relate to a specific assessment topic and trainees can ask questions throughout the presentation.
- **Sample assessments and assessment items.** Throughout the text, assessment items are presented for most of the assessments discussed. For example, Chapter 8 provides a list of self-injury assessments available to counselors. In addition, some of the tables and figures include an entire assessment or lists of popular assessment tools that are used for particular counseling issues and/or may be available in the public domain. For example, Table 8.2 includes a list of substance abuse and mental health assessments in the public domain, and Figure 8.1 provides the Michigan Alcoholism Screening Test in its entirety. Instructors may find it useful to ask trainees about any cultural considerations with assessment items or the way assessment items are sequenced. Furthermore, instructors can have trainees reflect on whether recommended lists of assessment tools are comprehensive enough to be used with an increasingly diverse clientele.
- **Tip Sheets.** At the conclusion of major chapter content, Tip Sheets are provided to help remind readers about the most important elements of the material and/or ways they can concretely implement their new learning into action. Thus, Tip Sheets are checklists for learning and next steps. Although Tip Sheets are intended primarily as a reading guide to consolidate larger amounts of information, instructors may want to process during class time what other tips trainees may have to add and what tips they believe should be revised to better work with a particular population or address a particular counseling concern. One culminating way that Tip Sheets could be used to wrap up at the midterm or end of class is by having trainees develop a "Top 10" list of top assessment tips and present those to the larger group.

- **Review Questions.** As with Test Your Knowledge items presented at the beginning of a respective chapter, Review Questions include open-ended questions that trainees and instructors can use to gauge end-of-chapter learning. Many of the items are knowledge-based questions to check for understanding. Instructors may want to include Review Questions as part of a final PowerPoint slide to wrap up a particular class lecture. Alternatively, they may opt to divide trainees into small groups and assign one question per group to discuss and report responses to the larger group.
- **Resources for Further Learning.** Given space limitations within each chapter, along with various copyright issues that preclude whole assessments and assessment reports to be reprinted within the text, a Resources for Further Learning section is included at the end of each chapter. Resources are categorized as publications or web resources. Publications can include books or articles suggested to trainees for further reading, and web resources can include links to relevant professional associations or links to assessment tools or sample assessment reports. Resources for Further Learning can be integrated into class lectures, as instructors can go directly to a web link to show how trainees can learn more about a professional organization or assessment tool. Furthermore, these resources can be useful to trainees as they prepare for some of the assignments suggested in the sample syllabus (e.g., assessment fair, case study).
- **Appendixes.** Three appendixes are included with the text. Appendix A includes the statistical formulas associated with statistical concepts presented in Section II of the text. Appendix B is a sample assessment report, and Appendix C is an answer key for the Test Your Knowledge items. Instructors may refer trainees to the statistical formulas in Appendix A and have them compute by hand statistics associated with correlation coefficient, internal consistency, or standard deviation. Appendix B is a particularly useful model as trainees complete the assessment role-play assignment suggested in the syllabus. In addition, instructors should consider providing additional examples of assessment reports that show how various agencies and schools may develop the report for clients of different ages and diagnoses.

Additional Instructional Resources

- **Chapter Outlines.** Chapter Outlines (pp. 1–70 of this instructor’s manual) are organized by major heading sections of the seventh edition. Instructors can use these as extensive notes that correspond well with the included PowerPoint slides.
- **Test Bank.** The Test Bank (pp. 71–150 of this manual) includes items in multiple choice and true/false formats. Instructors can use these items as weekly quiz items or as a repository of test item options for major examinations.
- **Sample Syllabus.** A Sample Syllabus (pp. 151–158 of this manual) is included to demonstrate how instructors may structure their course, as well as weigh and grade several assignments. Although the institution will likely direct most of the content of a syllabus, I hope that the sample assignments and related descriptions, as well as the sequence of text readings and discussions of related assessments, will be useful for planning purposes.
- **PowerPoint Slides.** PowerPoint slides are organized as separate files per chapter and are available on the flash drive. These slides can be used by instructors to facilitate a class lecture, or trainees may find them useful, if shared, to prepare for examinations.

I hope that you find *Assessment in Counseling: Procedures and Practices* to be an engaging text, and I hope the resources presented within (and with) this instructor's guide are useful in guiding your instruction.

Sincerely,

A handwritten signature in black ink that reads "Danica G. Hays". The signature is written in a cursive style with a long horizontal flourish extending to the right.

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CHAPTER Outlines



Chapter 1

Use of Assessment in Counseling

Introduction to Assessment

1. Assessment is an integral part of individuals' lives, as we engage in assessment-related tasks in everyday actions.
2. Although assessment in counseling was traditionally used for academic and career planning, assessment procedures are now used to address multiple academic, occupational, psychological, and behavioral concerns.
3. Counselors and clients rely on the assessment process to engage in personal awareness exercises, identify presenting issues, make decisions, plan for treatment or interventions, and evaluate courses of action. The assessment process can be a treatment tool in itself.

Key Assessment Terms

4. The term *client* as related to the assessment process can refer to an individual or group of individuals, a program or setting to be evaluated, or a thing or more general category of data to be monitored.
5. The Standards for Educational and Psychological Testing (American Educational Research Association et al., 2014) provide a commonly referenced definition of assessment. *Assessment* is defined as "any systematic method of obtaining information from tests and other sources, used to draw inferences about characteristics of people, objects, or programs" (p. 216).
6. Assessment can rely on multiple methods of data collection and analysis using quantitative and qualitative strategies. The more methods used, the more likely counselors can provide a comprehensive picture for the client.
7. Counselors can use both formal and informal assessment methods to gather client data.
8. Common assessment categories are intelligence, ability, career, and personality assessment. These assessment categories often overlap, as tools traditionally assigned to a certain category can serve multiple functions.
9. *Assessment* as a term can be used interchangeably with terms such as *appraisal* and *evaluation*. *Test* and *assessment* are not interchangeable terms, although they are often used as such.

10. Key assessment terms include *test*, *measurement*, *variable*, and *psychometrics*.
 - Tests are one component of a larger assessment process; it is usually a standardized process that can complement other formal and informal assessment procedures.
 - Measurement refers to the process of determining the amount or quantity of something, expressed on various types of scales based on particular rules. In social sciences, scales of measurement are nominal, ordinal, interval, and ratio.
 - Variables are labels of measurement and can be categorical, continuous, independent, dependent, or extraneous.
 - Psychometrics is the study of measurement.

Purpose of Assessment in Counseling

11. Assessment has several advantages for the counseling process: It provides pertinent data to understand and address individual and programmatic concerns through activities such as screening, classification, and selection; the process of being assessed can be therapeutically meaningful and help clients gain self-awareness; the process is useful for ongoing monitoring of attitudes, knowledge, and skills; and it can serve as a tool for social advocacy.
12. Wellness is an integral part of the work of the counselor and is defined as “a way of life oriented toward optimal health and well-being, in which mind, body, and spirit are integrated by the individual to live life more fully within the human and nature community” (J. E. Myers et al., 2000, p. 252).
13. Wellness assessment as an advocacy tool can involve advocacy at the micro-level (client), mesolevel (interprofessional collaboration), and macrolevel (community collaboration) to support individual and collective wellness.
14. The assessment process is a problem-solving process that can be described in five steps: problem orientation, problem identification, generation of alternatives, decision-making, and verification.
 - Problem orientation refers to the client understanding and accepting that there is a problem to be solved.
 - Problem identification involves the client and the counselor identifying the components of the problem in as much detail as possible.
 - Generation of alternatives refers to the counselor and client exploring options for problem resolution, identifying client strengths during the stage.
 - Decision-making as a problem-solving step refers to the client considering options for problem solving and considering the consequences of each option.
 - Verification involves the client and counselor discussing how the client will know when a particular problem is resolved.
15. There are several limitations to what tests and other assessment procedures can provide. Specifically, assessment procedures highlight only one sample of data at one particular time, they can only measure common traits and thus do not account for unique constructs within a particular individual, and they are not culture free. Moreover, assessment results are often used inappropriately.

History of Assessment

16. Developments in individual intelligence assessment have been well documented since the mid-1800s, beginning with a focus on measuring intelligence through sensory processes such as reaction time and later adding the study of physical dimensions to indicate intelligence through what was known as mental testing.

17. By the early 20th century, individual intelligence assessments were being used to evaluate intellectual disabilities. Example tests include the Sequin form board, the Binet-Simon scale, and the Stanford-Binet Intelligence Scale.
18. The intelligence quotient (IQ) is calculated by dividing the mental age by the chronological age and then multiplying the quotient by 100; this was calculated after the concept of mental level was proposed in the Binet-Simon scale.
19. There has been a misuse of intelligence testing with immigrants. For example, Henry Goddard's work identified the majority of immigrants coming into Ellis Island as "feebleminded." Howard Knox's work with immigrants helped to debunk some of Goddard's claims.
20. Advances in group intelligence assessments began during World War I as a way to screen new recruits. Robert Yerkes developed the Army Alpha and Army Beta tests—verbal and nonverbal intelligence tests, respectively.
21. There was a need for group ability testing after World War I in public schools and higher education as well as after World War II to place individuals in appropriate jobs; previous intelligence tests were limited in the constructs they measured.
22. Edward Thorndike is known for his work in spearheading standardized achievement tests after World War I.
23. Career assessment has been popular since the times of the Industrial Revolution (late 1800s). Frank Parsons established the Boston Vocational Bureau in 1908 to address social conditions in the context of vocational guidance. Furthermore, interest inventories and multiple aptitude batteries were developed to assist high school students and military recruits, respectively.
24. Personality assessment began in World War I with the use of the Woodworth Personal Data Sheet as a tool for screening military recruits. Testing evolved into a more expanded study of personality, including through objective tests like the Minnesota Multiphasic Personality Inventory as well as through projective tests such as the Thematic Apperception Test.
25. Today assessment is used in a multitude of settings to examine a variety of vocational, personality, intelligence, and ability constructs.
26. It is expected that in the future, assessment will continue to be innovative and socially conscious as technology increases and the diverse world becomes more connected.

Key Questions for Selecting Assessments

27. Counselors should consider six questions during the assessment process: Who is making the assessment? What is being assessed? Where is the assessment taking place? When is the assessment occurring? Why is the assessment being undertaken? How is the assessment conducted?
28. S-data are data reported by the individual being assessed, and O-data are data collected from external sources or individuals.
29. The subject of an assessment can be an individual or the environment. Individual assessment can involve evaluating how an individual expresses feeling, thinking, and doing; most individual-based assessment is nomothetic, or focused on capturing the variables most helpful across a more general population.
30. Assessments can be administered in a standardized or naturalistic environment.
31. Assessments can involve individuals tracking present behaviors or may involve recalling information.
32. Assessment data can be collected in an objective or projective manner and can be quantitative or qualitative in nature.

Assessment Usage in Counseling Settings

33. Counselors choose which assessments to use based on a variety of factors. Referral-based question means that the client was referred by some professional, which dictated the assessment use.
34. Assessments in career settings are typically used to increase client knowledge, help clients make career choices, and encourage client participation.
35. Assessment used in mental health and addictions counseling agencies may require advanced training. In addition, counselors should consider administering both mental health and addictions assessments, due to the comorbid nature of mental health issues and addictions.
36. School counselors often administer assessments to evaluate students' academic, social, and psychological well-being, along with school climate, family engagement, and students' career development. The American School Counselor Association National Model and multi-tiered system of supports (MTSS) frameworks can be helpful as school counselors use assessments. These frameworks seek to support students at individual, program, and or school levels, advising varying levels of assessment based on symptom severity and scope of concerns.
37. Assessments in college settings are often used to support postsecondary students' retention, progression, and completion of their academic programs, as well as their overall success as a student. Students are facing increased mental and financial distress postpandemic.
38. Telehealth platforms are being increasingly used in assessment and counseling, particularly since the COVID-19 pandemic. Telehealth involves virtual service delivery synchronously and/or asynchronously. It can supplement traditional in-person assessment and/or can be used to prevent and monitor conditions and to deliver future assessment and counseling interventions. Although it can be cost-effective and offers accessible services, telehealth requires additional ethical, legal, and professional safeguards and may perpetuate the digital divide for clients who are older and/or from traditionally marginalized backgrounds.
39. Current research indicates some overlap between the most frequently used assessments across counseling specialty areas. There are some distinctions based on assessment priorities: Mental health counselors are more inclined to use personality assessments; school counselors face increased pressure to understand and use ability and intelligence assessments; and career counselors use a variety of assessments that explore client skills, interests, and values.
40. There are some discrepancies between those assessments counselors are trained to use—as well as tools used most in research—and what counselors encounter in practice.

The Assessment Process

Assessment Methods

1. Assessments can be characterized in several ways other than by the major categories discussed in Chapter 1 (i.e., intelligence, ability, career, personality). They can be labeled as group versus individual, speed versus power, and quantitative versus qualitative.
2. Although group assessments may be more efficient to administer, individual assessments can allow for greater attention to a test taker's needs or additional assessment methods to inform data.
3. Speed tests are primarily intended to assess reaction time or the number of items completed within a specified time, whereas power tests intentionally have items of varying difficulty, or heterogeneous items, that may not be completed within a specified time. Speed can be a characteristic of some power tests, but it would not influence the final score.
4. Quantitative assessments involve numerical scoring, often with psychometric characteristics such as reliability, validity, standardization, and normed samples. Qualitative assessments are more informal and flexible and produce narrative or storied data regarding the client; narratives can extract explicit memory (factual, readily available information) as well as implicit memory (information not easily embedded in language such as body memories).

Types of Assessments

5. Examples of assessment methods include rating scales, interviews, behavioral observations, projective assessments, story circles, biographical measures, graphic methods, body mapping, card sorts, lifelines, self-characterizations, and physiological measures.
6. Rating scales, a type of nonstandardized assessment, can involve several rater errors. These include a halo effect, error of central tendency or restriction-of-range error, leniency error, drift, or decay. These refer, respectively, to the tendency to judge an individual on one variable based on judgments on other

variables, the inclination to rate an individual at the midpoint of a scale, the act of rating someone more favorably than valid, a change in the way a variable is defined over time, and the decreased reliability of how something is measured over time.

7. Examples of rating scales include semantic differential and situational tests, in which raters rank order items or perform a task that is situationally based, respectively.
8. Interviews can be structured, semistructured, or unstructured and thus can combine elements of standardization and nonstandardization. One form of interviewing, ethnographic interviewing, seeks to understand the client within their social and cultural context. Types of ethnographic interviewing questions include descriptive, structural, contrast, substituting frame, rating, and circular.
9. Behavioral observations are used to objectively observe and count behaviors, oftentimes in a naturalistic setting. Participant observation can be unstructured, wherein the counselor collects information as they interact with the client, or more structured and involving an observation protocol for a prolonged period.
10. Projective assessments require individuals to respond to ambiguous stimuli, and responses are subjectively evaluated by a counselor.
11. Story circles can be used to elicit narratives in group or family counseling settings through rounds of prompts and storytelling.
12. Biographical measures, or biodata, are typically personal records—or interviews regarding previous experiences—of a client that provide information about experiences or skills to predict future performance.
13. Graphic methods use pictures or other spatial representations to evaluate intrapersonal and interpersonal aspects of the client. Some examples of graphic methods include ecomaps and genograms, which collectively can help in understanding a client's social and familial networks and dynamics.
14. Body mapping is an arts-based assessment method that can be used in individual and group counseling to treat trauma or other experiences not easily accessible through language.
15. Card sorts are often used to process a client's attitudes, feelings, and values regarding a counseling topic. Cards can be virtual or physical, whereby the client orders and categorizes them in a way that is meaningful to them.
16. Lifelines, a life history methodology, visually depict a timeframe of the client's life in chronological order. They are helpful in the assessment process to connect events across time to identify meaning for the client.
17. Self-characterizations are client-generated data of their self-descriptions and narratives, often captured in journals and diaries.
18. Physiological measures involve physiological data such as heart rate, blood pressure, and muscle contractions. These data can provide insight into the connection between biology and the client's cognitive, emotional, and behavioral processes.

An Overview of the Assessment Process

19. Before engaging in the assessment process, counselors should evaluate at which stage of change a client is: precontemplation, contemplation, preparation, action, or maintenance. Clients at earlier stages may be less ready for counseling and may not benefit as much from the assessment process.
20. The four major phases of the assessment process are assessment selection, assessment administration, assessment interpretation, and communication of findings.

21. Assessments can be selected from a variety of sources, including the *Mental Measurements Yearbook (MMY)*, *Tests in Print*, and academic journals, to name a few. Although many test source books include additional assessments to previous lists, the *MMY* includes only those assessments that are new or have been revised since the last publication of the *MMY*. Unlike *MMY*, *Tests in Print* does not contain test reviews.
22. Assessments can be administered in a paper-and-pencil or computer-based format. With computer-based testing, there is greater flexibility for test administration and more opportunities for standardization; however, anxiety may be a significant factor for the test taker.
23. Expectations from a counselor administering an assessment can create measurement errors. For example, individual responses may be largely based on what an administrator expects to find (i.e., the Rosenthal effect or expectancy effect) or when an administrator tries to confirm negative stereotypes about race or gender (i.e., stereotype threat).
24. Effective and thorough assessment interpretation can serve as a therapeutic tool within itself during the assessment process.
25. Communication of findings can occur before or during assessment interpretation and should be an intentional and integral component of the counseling process itself. Assessments can be hand scored or scored by a computer, and counselors should strive to supplement either method with additional information to minimize the disadvantages of each.

Monitoring Client Progress and Evaluating Counseling Outcomes

26. Progress monitoring refers to the process by which counselors collect data during the counseling process to inform treatment planning; outcome assessment refers to evaluating the effectiveness of counseling at the end of the relationship.
27. Monitoring client progress and evaluating counseling outcomes is useful to minimize the risk of treatment failure, identify when a client has or has not improved, and make decisions regarding treatment and counseling termination.
28. Progress monitoring is also referred to as feedback-enhanced therapy and response to intervention.
29. Counselors within an agency or across the profession can collectively engage in outcome assessment to inform practice on a larger scale.
30. Response to intervention is increasingly used by school counselors as part of MTSS; it is used to identify children who may benefit from Tier 2 (small-group instruction) and Tier 3 (individualized treatment) from Tier 1 (large-group global screening) interventions.
31. In outcome assessment, counselors can use various methods to judge counseling effectiveness: comparing a score to a desired score in another group, comparing a score to a particular criterion, or judging whether a baseline score has changed by at least 1 standard deviation.
32. Tools for monitoring client progress or evaluating counseling outcomes should be brief, sensitive to change, psychometrically sound, and appropriate for the client and treatment purpose. In addition, counselors should use multiple assessment methods and collect clinical data from several individuals.
33. Four major types of tools are useful for monitoring client progress and evaluating counseling outcomes: client satisfaction forms, client self-report scales, client self-monitoring, and rating scales.
34. Counselors should engage in evaluating advocacy at the agency or school level, as program evaluation and revisions can support individual client outcomes.



Chapter 3

Ethical, Legal, and Professional Considerations in Assessment

Core Values for Effective Assessment

1. There are several core values for effective assessment: equitable access, sensitive to context, efficiency with resources, fairness, integration, proportionality, advocacy orientation, and commitment to cultural competency.
2. These core values are often embedded within key ethical standards and guidelines.

Standards and Guidelines for Evaluating Assessments and Usage

3. Counselors are guided by several ethical standards and professional guidelines during the assessment process. These include the American Counseling Association's (ACA) *ACA Code of Ethics*; the National Board for Certified Counselors' (NBCC) *NBCC Code of Ethics*; the American School Counselor Association's (ASCA) *Ethical Standards for School Counselors*; a joint document by the American Educational Research Association, American Psychological Association, and National Council on Measurement in Education (AERA, APA, and NCME) known as the *Standards for Educational and Psychological Testing*; the *ACA Position Statement on High Stakes Testing*; the *Responsibilities of Users of Standardized Tests* (Lenz et al., 2022); the *AARC Standards for Multicultural Assessments*; and the *International Test Commission* guidelines.
4. Several specialty standards also guide assessment. AARC cosponsored documents for specialty areas such as career counseling, marriage and family counseling, mental health counseling, substance abuse counseling, group work, and rehabilitation counseling.
5. The *ACA Code of Ethics* addresses assessment-related ethics in Section E. Some of the components of this section relate to competence, informed consent, test security, test construction and the assessment process as a whole, and forensic evaluation.

6. The *NBCC Code of Ethics* addresses themes in testing such as nonmaleficence, counselor competence, beneficence, veracity, fidelity to the counseling relationship and profession, client autonomy, and counselor accountability to professional standards.
7. The *ASCA Ethical Standards for School Counselors* includes assessment and evaluation standards as part of its “Responsibilities to Students” section.
8. The Standards for Educational and Psychological Testing provide testing standards and criteria for test construction and evaluation and emphasizes that test developers use a “truth in advertising” approach when informing the public about their products.

Key Ethical and Legal Considerations in Assessment

9. Wellness and self-care are integral components for the client and the counselor. The *ACA Code of Ethics* as well as the Council for Accreditation of Counseling and Related Educational Programs (CACREP) speak to the importance of wellness in practice and training, respectively.
10. Self-care involves individual and group-level practices that support wellness. These include activities that enhance cultural and spiritual identity, creativity, leisure, social and romantic relationships, exercise and nutrition, humor, and positive coping.
11. Counselors need to consider counselor competence and client welfare issues during the assessment process. They are to review ethical codes and professional standards of the counseling profession.
12. In terms of counselor competence, counselors should be mindful of their own knowledge level—and seek additional training as necessary—when developing or using existing assessment tools. Furthermore, several test publishers have codified four competency levels based on the type of qualifications needed: Level A assessments require no specialized qualifications; Level B assessments usually require at least a master’s degree in a field related to psychology or education, appropriate training, or particular professional memberships; Level C assessments usually require doctoral-level education in fields related to psychology or education, appropriate training, or credentials that require assessment training or experience; and Level Q assessments require a training background in a specific test. Those who graduate from a program accredited by CACREP are equipped to use Level A and B tests.
13. All states recognize counselors as having testing and assessment within the scope of their practice, although licensure boards for disciplines outside of counseling often try to restrict which tests counselors can administer.
14. Client welfare is another ethical consideration for counselors. Some assessment-related issues that affect clients include privacy and confidentiality, the quality of test interpretation (particularly when computer-generated reports are generated), and the use of assessment data in research.

Key Professional Issues in Assessment

15. Technology is increasingly being used in testing. Some of the cited benefits of using computers are that test administration may be low cost, faster, and more efficient. Challenges may relate to language barriers for some clients as well as general test security and psychometric concerns. The rise of telehealth introduces new ethical considerations for counselors.

16. Counselors share assessment results with clients to facilitate the counseling process. Counselors are to share findings in a manner that fosters client self-awareness and decision-making while understanding clients' frame of reference for the testing process and reflecting on implications of the assessment process.
17. One of the challenges in communicating assessment findings during the counseling process is that validity evidence is based on groups, and thus one client's scores may be difficult to interpret at times.
18. Test anxiety is a significant issue, particularly with ability testing. There is a relationship between higher test anxiety and lower test scores, and counselors should assess the role of test anxiety in clients' lives as well as how previous low test scores might link to future test anxiety. In addition, counselors are to emphasize to clients adequate preparation and teach cognitive behavior therapy techniques to manage anxiety.
19. Coaching refers to the use of professional test preparation services in the form of workshops, software, practice tests, and books. Although some coaching firms promise significant increases in test scores, oftentimes practice effects can lead naturally to increased test scores. Controversy also exists with regard to these companies, as they often lack a control group to support their claims of increased test scores. Furthermore, the validity of a test can decrease for those who are coached.

Multicultural and Social Justice Considerations in Assessment

Multicultural and Social Justice Counseling Competency and Assessment

1. Multicultural assessment refers to practices in which counselors consider how multiple cultural variables influence how client concerns are expressed, conceptualized, and treated in counseling.
2. Social justice assessment refers to the role of assessment in promoting social justice for the client, communities, and society in general.
3. It is important for counselors to build their multicultural and social justice counseling competence, which is integral to counseling and assessment practices.
4. The Multicultural and Social Justice Counseling Competencies are guidelines for attending to four developmental domains within the context of the power differential that may exist between a counselor and a particular client. These four developmental domains are counselor self-awareness, counseling relationship, client worldview, and counseling and advocacy interventions. Counselors are to build awareness, knowledge, skills, and action plans to facilitate the first three domains; for the fourth domain, counselors are to consider how interventions can be infused across six levels (intrapersonal, interpersonal, institutional, community, public policy, and international).
5. The ACA Advocacy Competencies outline advocacy practices at the microlevel (client and students), middle level (communities), and macrolevel (general public or society). Two dimensions that intersect with these three levels are *collaboration with* (empowerment/collaboration) and *acting on behalf* (advocacy). This intersection yields six domains: client/student empowerment, client/student advocacy, community collaboration, systems advocacy, collective action, and social/political advocacy.

6. Client cultural and explanatory models refer to the internal frameworks or schemas that guide how symptoms are viewed by clients as well as their help-seeking and treatment attitudes. Cultural models are based on the explanatory model, which notes that there are individual differences in meanings of illness, help seeking and coping, and mobilization and use of support networks.
7. According to the explanatory model, clients use prototypes and chain complexes to understand their mental health. Prototypes refer to specific episodes or events in clients' or others' lives that they use as a metaphor for their own illness narrative. Chain complexes are links or sequences of several events without any specific causal connection or explicit prototype.
8. It is important to evaluate the client's cultural identity or cultural makeup. As part of cultural identity assessment, counselors foster understanding or privileged and oppressed status experiences with the client.

Fairness and Cultural Bias in Assessment

9. Most assessment tools, if not all, have some cultural bias associated with them. Bias can occur because of inappropriate norms that prevent the accurate comparison of a diverse client's scores to a standardization group, limited relevance of some test items—or varying meanings—to particular cultural groups, and different cultural attitudes (e.g., test motivation, familiarity) toward assessment that can impact the administration and interpretation processes.
10. Fairness is defined as efforts toward creating equitable assessment conditions and experiences for clients, whereas bias is defined as inaccurate scores or test results that impact the way these findings are used with various cultural groups.
11. Cultural bias in assessment has been associated with misdiagnosis, underdiagnosis, and overdiagnosis, leading to improper screening, placement, and treatment plans, to name a few. The cultural bias hypothesis assumes that mean differences in scores across cultural groups for a particular construct are due to artifacts of the assessment process rather than real differences among groups.
12. Group differences in assessment outcomes do not themselves indicate an assessment is culturally biased or unfair; counselors cannot assume that clients are identical in all traits and attributes or abilities.
13. The Standards for Educational and Psychological Testing define fairness in four ways: (a) absence of bias, (b) equitable treatment of all test takers, (c) irrelevance of group membership for individuals who are on equal standing for a particular test construct, and (d) an equal opportunity among test takers to learn a construct.
14. The Standards for Educational and Psychological Testing define bias in two ways: (a) score differences as a result of the explicit test content and (b) score differences as a result of various response processes not intended by the assessment (i.e., response set).

Cultural Factors in Assessment

15. The notion of who should serve in a counselor-like role for individuals varies across cultural groups. Thus, it is important for counselors to explore with clients who plays a salient role in their lives and thus should be a part of the counseling and assessment processes.
16. It is important to understand three levels of the client-counselor relationship to foster a positive working alliance for the assessment process: (a) conceptual, or each member's perceptions of the other's honesty, motivation, and credibility; (b) behavioral, or the degree of general competence each brings to the counseling session; and (c) cultural, or the amount of cultural sensitivity and competence each brings to the counseling session.

17. Implicit bias by the counselor is commonplace and refers to attitudes and stereotypes held about self and others that can be positive or negative and are based on an individual's cultural model or schema. Implicit racial bias has been well documented and researched in school settings, including the discriminatory disciplinary testing practices of Black children (i.e., pushout).
18. Discrimination occurs in the counseling relationship when counselors intentionally or unintentionally use cultural group membership as the explanation for assessment findings.
19. Diagnostic errors or misdiagnosis can occur with culturally diverse groups in several ways. First, counselors can overdiagnose marginalized groups with more severe diagnoses. Second, they may underdiagnose particular groups when particular behaviors are expected of a group. Third, they may misdiagnose completely if presenting concerns do not align well with traditional criteria of a particular diagnosis.
20. The prevalence and incidence of mental disorders are disproportionately higher for traditionally marginalized racial/ethnic groups and other marginalized cultural groups. These disproportionate rates are not likely representative of actual rates because counselor discrimination plays a role in how counselors misdiagnose. Mental disorders, however, can be exacerbated by discrimination clients experience both within and outside the session.
21. Client motivation and degree of assessment familiarity (i.e., test sophistication) may be the most likely reason for assessment score differences, particularly for traditionally marginalized racial/ethnic groups engaged in standardized testing.
22. Acculturation is another cultural factor influencing the assessment process. Acculturation is the extent to which an immigrant or someone from outside a host country integrates their own country's value system with that of the host country. Acculturation level is affected by the number of years a client has been in the acculturation process, the age at which the client began that process, and the client's country of origin.
23. There are four predominant acculturation models: (a) assimilation, or when the client identifies with only the host country's values and practices; (b) separation, or identification with only the country of origin's values and practices; (c) integration or biculturalism, which is when the client identifies with the values and practices of both countries; and (d) marginalization, when a client rejects the values and practices of both countries. It is important to remember that clients can identify with more than one model and/or ascribe to one model in varying degrees.
24. The Cultural Assessment Interview Protocol may be a useful tool for gauging acculturation and other culturally relevant information during the assessment process.
25. Limited English-language proficiency and the lack of appropriate test translation services can have a detrimental impact on the assessment and counseling process. However, research evidence shows that administering assessments—particularly ability tests—in clients' native language is linked to higher achievement scores.
26. Test adaptation refers to changing an existing assessment tool to meet the needs of a cultural group not included in the original standardization sample. Test translation refers to creating editions of an assessment in alternative languages to accommodate those who are not dominant in the original test's language. Test adaptation and test translation can be useful for addressing some of the limitations associated with language barriers in the assessment process.

Multicultural and Social Justice Assessment

27. Counselors should examine current assessment trends related to cultural categories of gender, race/ethnicity, SES, disability, and age, among others. In particular, the role of oppression and poverty can exacerbate symptomatology.
28. There are no significant gender differences for scores on intelligence tests, but tests of specific aptitudes—such as mathematical ability—continue to show differences. Although some have historically argued that there are innate gender differences in intelligence, more recent research shows that score differences are likely related to stereotypical attitudes held about each gender and ability.
29. Many racial/ethnic differences in scores on aptitude and intelligence tests disappear when SES is controlled, and SES is significantly correlated with race/ethnicity.
30. It is not clear what causes significant differences in intelligence test scores between White and Black individuals. Furthermore, available research indicates that the groups perform equally well on ability tests.
31. Federal regulations regarding assessment accommodations for individuals with disabilities are available.
32. Section 504 of the Rehabilitation Act of 1973 requires that accommodations be made for students with disabilities so that the particular test measures the constructs it is intended to measure rather than the disability.
33. The Education of All Handicapped Children Act of 1975 requires that an individualized education program be developed for students with disabilities. The individualized education program, developed by multiple professionals within the school along with the student's parent(s), must include a statement of the student's present level of performance and needs, a statement of what special educational services are to be provided to meet those needs, and a valid measure of annual goals and short-term objectives.
34. The Individuals With Disabilities Education Improvement Act addresses the use of high-stakes testing with students with disabilities.
35. School counselors usually play an important role in schools by helping to ensure that appropriate test accommodations are made for students with disabilities.
36. National testing programs such as ACT and the College Board offer special test forms and other test accommodations for students with disabilities.
37. Research regarding testing for students with disabilities consistently indicates that those with disabilities tend to score comparable to their peers without disabilities when appropriate accommodations are made.
38. Given the heterogeneity of the population with hearing disabilities, counselors are to initiate the assessment process with a conversation regarding communication preference.
39. Assessments have been developed to evaluate cognitive functioning, particularly for older adults. The most popular is the Mini-Mental Status Examination (MMSE). In addition, portions of the Wechsler Adult Intelligence Scale–Fourth Edition (WAIS-IV) and the Wechsler Memory Scale–Fourth Edition (WMS-IV) are useful to screen for cognitive deficits.
40. Gender differences exist in career assessment, and these are likely related to item bias as well as cultural beliefs about gender-appropriate career paths—and how those beliefs are both internalized by and expressed toward an individual. These cultural beliefs influence the career assessment process, including the career decision-making process.
41. Psychometricians have tried to minimize item bias in career assessment by providing separate same-sex norms for scales, eliminating sexist language (e.g., mailman, policeman), or including items that would be equally attractive to all genders.

42. Research indicates that racial/ethnic minorities may endorse fewer career options, as they may not have expansive exposure to various careers. Furthermore, interest inventories show different results by racial/ethnic group but tend to have similar predictive value.
43. Racial/ethnic differences exist for personality assessment measures, yet variables outside of race/ethnicity (SES, education, intelligence) seem to be important determinants of performance on personality assessments.
44. Asian American clients, particularly those who are not highly acculturated, tend to report psychological problems through somatic complaints and tend to underuse counseling and mental health services.
45. There are mixed findings for personality assessment score differences between Latinx and White individuals, but most score differences disappear with proper test translation for Spanish-speaking Latinx individuals.
46. Native Americans, no matter their age, gender, or education level, tend to have higher scores on numerous mental health assessments (indicating greater mental illness), which is likely largely because of oppression experiences.

Culture-Fair Tests

47. Culture-fair tests are designed to help reduce the use of language and cultural content so that tests are more suitable across cultures. The term *culture-fair* is used, rather than *culture-free*, because not all bias can be eliminated from a test.
48. Although culture-fair tests help to reduce bias, they still possess some limitations: They tend to measure a narrow range of cognitive functions, and they are not strong predictors of academic and work performance.
49. Several culture-fair assessments are available: Cattell's Culture-Fair Intelligence Test, Raven's Progressive Matrices, Naglieri Nonverbal Ability Test, Wechsler Nonverbal Scale of Ability, the Goodenough-Harris Drawing Test, TEMAS (Tell-Me-A-Story), and the Columbia Mental Maturity Scale.
50. Some of the common features of culture-fair tests are progressive series completion, object classification tasks, identification of change patterns in figures (i.e., matrices), selection of a figure that differs from a set of figures, and identification of figures similar to an example figure (i.e., conditions). Some culture-fair tests require individuals to draw a whole picture of a man or woman or tell a story about a scenario on a stimulus card.

Dynamic Assessment

51. Dynamic assessment is beneficial to help further reduce performance gaps between dominant and minority groups that may still exist with the use of culture-fair tests.
52. Dynamic assessment involves providing minimal instruction on metacognitive skills before a problem-solving attempt and provides further instructions and prompts based on instructional needs. Individuals are scored based on their ability to learn from immediate instruction and feedback loops.
53. The AnimaLogica test is one example of a dynamic assessment that uses colored images in a 2×2 matrix. Children identify a relationship between the available figures to ascertain what the missing figure is. This test involves the use of six transformation rules to solve the analogy: animal, color, size, position, orientation, and quantity.

Understanding and Transforming Raw Scores

Scales of Measurement

1. There are four scaling methods (i.e., nominal, ordinal, interval, ratio) that increase in their complexity to measure various constructs in counseling. There are three characteristics of which these scales may possess a combination: magnitude, equal intervals, and absolute zero. The more characteristics for a particular scale of measurement, the more complex information may be gained about a particular construct.
2. A nominal scale does not possess any of the three aforementioned characteristics and is used only to name or classify items or levels for a particular construct.
3. An ordinal scale possesses the magnitude characteristic; thus, counselors are able to note for a construct whether an item or level represents having more or less relative to other items or levels within that construct.
4. An interval scale provides information about magnitude and equal intervals; thus, ranked items or levels within a construct are of equal length or spacing.
5. A ratio scale is the most complex scale of measurement because it possesses all three levels of measurement: magnitude, equal intervals, and absolute zero. Ratio scales are rarely used in counseling assessment.

Raw Scores

6. Raw scores on an assessment are meaningless without some context for comparison. Scores can be compared to those of a particular group (norm referenced), to an established criterion or threshold (criterion referenced), or to an individual's previous performance or an individually based criterion (self-referenced).
7. It is useful to organize a set of raw scores graphically to draw conclusions about the overall data distribution.
8. A frequency distribution is a table with columns outlining the number of occurrences of each score or value as well as the percentage of a group that possessed each score. Values are typically presented in ascending order and can be grouped into interval data for clearer presentation. A histogram is a bar graph

of a frequency distribution, with longer bars indicating the higher frequency of a value. A frequency polygon is a line graph of a frequency distribution, with higher peaks indicating greater frequency.

9. A bar graph is useful for presenting nominal data, and bars can be arranged in any order for the data presentation.

Measures of Central Tendency

10. Measures of central tendency refer to the average score or value for a quantitative data distribution. There are three measures of central tendency: mean, median, and mode.
11. The mean is the arithmetic average score of a data distribution. It is affected by outliers and is typically presented with information regarding a distribution's standard deviation (discussed in the next section).
12. The median is the middlemost score when scores are arranged chronologically in ascending or descending order. When two scores fall within the middle of the distribution, the two values are summed and divided by 2. Although the median helps to address issues associated with outlying scores, it may not be useful when there is a very narrow or broad spread of scores.
13. The mode is the most frequently occurring score in a data distribution. Distributions can have more than one mode, such as in the case of bimodal and multimodal distributions.

Measures of Variability

14. In addition to knowing what the average or typical score is for a data distribution, counselors may want to know what the "spread" of the data distribution is around that score. Measures of variability include range, interquartile range, and standard deviation.
15. Range is calculated by subtracting the lowest score from the highest score—when arranged chronologically—and adding 1 to that number.
16. The interquartile range helps to remove the influence of outlying scores by focusing on the data distribution closer to the median. To calculate the interquartile range, divide scores that are arranged chronologically into four parts; subtract the score that is one quarter from the bottom from the score that is one quarter from the top and divide by 2.
17. The most commonly reported measure of variability is standard deviation. Standard units are calculated for a data distribution by converting scores to derived scores; the mean score is converted to 0 or some other standard score (discussed below). The standard deviation value is indicative of how many standard units a particular score is on a data distribution. The higher that value, the greater the spread of the data distribution.

Characteristics of Data Distributions

18. Data points from a sample or distribution of scores can be plotted on an x - and y -axis; higher points on a y -axis indicate a greater area or frequency of that particular score or value.
19. When the spread of a data distribution is perfectly symmetrical around a measure of central tendency, the data yield a bell-shaped curve or a normal curve when data points are graphed on an x - and y -axis. All phenomena, if measured infinite times, would approximate a normal curve. In addition, the mean, median, and mode are of equal value.

20. When scores are not symmetric around the measures of central tendency, the distribution is known as a skewed distribution. Thus, the location of the distribution in which most scores fall “pulls” the distribution in that direction. A pull above the median would indicate a positively skewed distribution, and a pull below the median would indicate a negatively skewed distribution.
21. Kurtosis is another characteristic of a data distribution and refers to the “peak-ness” of that distribution. Given the symmetry of the normal curve, the distribution is characterized as mesokurtic. Distributions in which the data points are more closely located to one another (i.e., highly peaked) are referred to as leptokurtic distributions, and those with data points that are flatter across the x -axis are referred to as platykurtic distributions.
22. In a data distribution, the standard deviation units can provide information regarding the percentage of data points that fall within a particular area. Approximately 34% of data points lie between the median and 1 standard deviation (SD); thus, about 68% of data points fall 1 SD unit below or above the median. An additional 14% are found between -2 and -1 SD units, and about another 14% of scores fall between $+1$ and $+2$ SD units. Furthermore, about 2% of the data spread can be found both below 2 SD units and above 2 SD units.

Norms and Ranks

23. Norm-referenced assessments involve establishing a standardization sample, which allows an individual’s score to be compared to a sample or norms. The standardization sample should be representative of the intended population, or inaccurate comparisons will be made for the individual’s score.
24. Developmental norms can be indicated by an individual’s grade level (grade equivalents) or age group (age comparisons). Grade equivalents are indicated by a grade level followed by a decimal representing the 10 months of the school year. The grade-level value in the rating does not necessarily indicate that someone is performing at that grade level; it can be more of an indicator of whether that person is performing worse or better than their current grade level. Age comparisons relate an individual’s score to those of others in their age group.
25. Rank is an individual’s standing within a group; it may be considered the simplest form of norm-referenced assessment. Furthermore, it can be misleading, because its interpretation is heavily influenced by the size of a standardization sample.
26. Percentile rank is used more often than rank because it indicates the percentage of scores that fall below a particular score irrelative of the size of the sample. One limitation of percentile ranks is that their spread mirrors that of a normal curve, making the interpretation of percentile changes a bit difficult: A greater number of scores fall around the 50th percentile, or median, with movement among ranks within that general location easier. Thus, it is more difficult for an individual score to move from the 5th to the 10th percentile than from the 55th to the 60th percentile.

Standard Scores

27. A standard score is a score expressed as a distance, in standard deviation units, between the raw score and the mean. There are several types of standard scores: z scores, T scores, College Board scores, deviation IQs, and stanines, to name a few.
28. A z score distribution is a conversion that follows a normal curve distribution. The z score converts raw scores based on an assumed mean of 0 and a standard deviation unit of 1. Thus, a z score that falls at 1 SD above the mean is equal to $+1.00$. A z score is calculated by subtracting the mean of a distribution from the raw score, then dividing by the standard deviation value of that distribution.

29. A *T* score distribution has a mean of 50 and a standard deviation unit of 10. It can be more useful than a *z* score in test interpretation because it does not have negative values. A *T* score distribution is calculated as $50 + 10z$.
30. College Board scores use a mean of 500 and a standard deviation of 100. The formula to convert a *z* score into a College Board score is $500 + 100z$.
31. Deviation IQ scores are used with intelligence tests and have a mean of 500 and a standard deviation of 15 or 16, depending on the test.
32. Stanines are standard scores that divide a data distribution into nine parts. The mean of the distribution is set at 5, with a standard deviation of 2.

Measurement and Qualitative Assessment Concepts

The Correlation Coefficient

1. The correlation coefficient is an example of a reliability estimate, as it measures the relationship between two sets of measures or can show what proportion of an observed score is assumed to be the true score. Correlation coefficients range from .00 to 1.00, with stronger coefficients represented by larger numbers. They can have a positive or negative value, which represents the direction of the correlation (i.e., a negative value indicates an inverse relationship).
2. A coefficient of determination is calculated by squaring the correlation coefficient; this estimate can provide information regarding the amount of shared variance between two sets of measures.
3. The Pearson product-moment correlation coefficient (r) is the most commonly used coefficient.
4. Spearman's rank correlation coefficient (r_s) calculates the relationship between two continuous variables, when at least one variable is measured on an ordinal scale (e.g., age and rank).
5. The point-biserial correlation coefficient (r_{pb}) is useful for determining the relationship between two continuous variables, when at least one variable is dichotomous (e.g., yes or no regarding being admitted to a university and grade point average).
6. There is error in any calculation of a correlation coefficient. If you correlate two variables across several samples, the average amount of error for those calculations is known as the standard error of estimate.

Reliability

7. Reliability refers to the degree of consistency with which a construct is measured. This consistency can be evaluated across the same or similar assessments, within the same assessment, or across raters. It is an estimate related to scores for a particular sample, not the assessment itself.

8. Measurement error is part of the equation concerning reliability: $X = T + e$, where observed score (X) = true score (T) + error score (e).
9. Acceptable reliability estimates depend on the type of test administered but tend to range from .80 to .95. High-stakes tests tend to have reliability estimates above .90, whereas some personality measures may have estimates in the .70s and .80s.
10. There are four major types of reliability: test-retest, alternate-forms, internal consistency, and interrater. Test-retest reliability evaluates consistency across identical tests, whereas alternate-forms reliability is an estimate across similar or parallel forms of an assessment. Internal consistency relates to the consistency of responses within the test itself and can include split-half reliability (corrected by the Spearman-Brown formula) or interitem consistency (Kuder-Richardson formula 20, Cronbach's or coefficient alpha). Interrater reliability is the degree of agreement between two or more independent judges or raters.
11. Reliability estimates are affected by several factors, including assessment length, sample size, and sample type. Longer assessments, larger samples, and more heterogeneous samples typically yield higher reliability estimates. When a sample is homogeneous, restriction of range may become an issue, lowering and causing attenuation of the reliability estimate.
12. Whereas a reliability estimate is the consistency of scores across a sample, the standard error of measurement (SEM) allows counselors to evaluate an individual score within a distribution.
13. In essence, knowing the SEM allows counselors to construct a band around an individual's observed score to ascertain the range in which the individual's true score likely lies.
14. SEM can be conceptualized as a standard deviation unit on a normal curve. For example, if counselors constructed a confidence interval or band 1 SEM above and below an observed score, there would be about a 68% likelihood that the true score would fall within that band.

Validity

15. Validity refers to the extent to which meaningful inferences about a particular construct may be made from an assessment. Invalidity may occur when an assessment fails to fully measure the right construct (construct underrepresentation) or when the assessment measures the wrong construct altogether (construct irrelevant variance).
16. Reliability is a necessary but not sufficient condition for validity.
17. There are four types of validity: content, construct, criterion-related, and treatment. Face validity, although not considered a real type of validity, refers to whether an assessment "looks like" it is measuring what it is supposed to measure.
18. Content validity is typically established by a panel of judges or experts and is evaluated as the extent to which particular items assess a domain area.
19. Construct validity refers to the degree to which there is a theoretical basis for a test. There are two types of construct validity: convergent validity and discriminant validity. Convergent validity is established when two tests measuring constructs theorized to be similar to one another are highly correlated; discriminant validity refers to detecting a negative relationship between constructs that are expected to be theoretically dissimilar.
20. Factor analysis may be useful in establishing evidence of construct validity.
21. Measurement invariance refers to equivalence among cultural groups for a particular construct within an assessment. Establishing evidence of measurement invariance can indicate construct validity.

22. Criterion-related validity refers to the extent to which test scores compare to performance on a criterion measure. The criterion measure can be another assessment tool or external criteria such as grades, a diagnosis, or job satisfaction. Criterion-related validity can correspond to a criterion measured at the same time (concurrent validity) or can be an estimate of prediction (predictive validity).
23. Restriction of range can lower a test's predictive validity. In addition, if the base rates of a characteristic being measured (i.e., the proportion of the population that represents that characteristic) are high or low, it is difficult to make predictions about that characteristic using a particular assessment. The more accurately and sensitively an assessment measures a construct, the more incremental validity (or value-added information) the tool possesses.
24. With regard to criterion-related validity, cutoff scores or thresholds may be useful for judging the presence of a characteristic. If the cutoff score is too low—assuming that low scores equate to less of that characteristic—the chance of a false negative is higher. If the cutoff score is too high—assuming that high scores mean more of the characteristic—the chance of a false positive is higher. Specificity and sensitivity are important for minimizing false negatives and false positives.
25. There are two considerations when evaluating the predictive validity of an assessment. First, base rates—or the proportion of a population with a characteristic that is being measured—cannot be too high or too low. The more normally distributed a characteristic is in the population, the more predictive validity is possible for an assessment. Second, incremental validity refers to the extent to which a particular assessment adds to the prediction(s) obtained from other assessments or information.
26. When used for decision-making immediately (i.e., concurrent validity) or in the future (i.e., predictive validity), assessment outcomes run the risk of inaccurately predicting a construct. If the assessment fails to predict an outcome when the outcome or characteristic is present, it is referred to as a false negative. When it predicts the presence of an outcome or characteristic when that outcome is incorrect, it is referred to as a false positive.
27. Sensitivity refers to the accuracy of a cutoff score in detecting that a client belongs to a particular category being assessed. Specificity indicates the accuracy of a cutoff score to determine absence of a symptom or disorder.
28. Treatment validity refers to the use of an assessment tool as an intervention within itself. Research indicates that the assessment process itself—particularly attention during test interpretation—can foster positive outcomes within clients.
29. Validity scales are useful elements within assessments for detecting issues with validity—particularly various types of response sets. Examples of validity scales include faking good (i.e., social desirability), faking bad, lie scale, and infrequency.

Trustworthiness

30. Trustworthiness is a concept characteristic of qualitative assessment and research, which refers to the degree of rigor of qualitative findings for reflecting client perspectives and the constructs or domains that are explored.
31. There are four main criteria for trustworthiness that can be applied to qualitative assessment: credibility, transferability, dependability, and confirmability. Credibility is the believability of the assessment findings and is closely aligned with the concept of internal validity in measurement. Transferability, aligned with external validity, is the extent to which assessment findings from an individual or sample can generalize to a population of interest. Dependability

refers to the consistency of assessment findings over time and across rates and is analogous to reliability. Confirmability is the degree to which interpretation of assessment findings genuinely reflect what the client reported during the assessment.

32. There are several strategies that can be applied to maximize evidence of the four criteria of trustworthiness. These include memos, member checking, prolonged engagement, persistent observation, triangulation, peer debriefing, negative case analysis, thick description, and use of an audit trail.

Assessment Development

33. Developing a sound assessment involves several steps, beginning with writing several assessment items that are clear, concise, culturally relevant or culture free, and related to the characteristic of interest. Then items are piloted on a sample similar to the targeted group. After this piloting, estimates of reliability and validity can be computed to make revisions to the scale. Then, the assessment may be tested with other samples, with further refinement following.

Initial Assessment in Counseling

Crisis and Trauma Counseling

1. Clients may present to counseling initially because of a crisis or trauma. A crisis is a temporary, unexpected event that impedes the client's ability to cope and affects their ability to function in several life domains. A trauma refers to a substantial psychological and/or physical response due to experiencing serious harm, particularly at vulnerable stages of the client's life.
2. A crisis can lead to trauma, but not always. Individuals respond to crises and traumatic events in different ways, requiring different levels of care.
3. Counselors are encouraged to use trauma-informed care approaches, especially during initial assessment phases. Trauma-informed care refers to endorsing a community approach to mental health and wellness and leveraging client and community resources for recovery. It also attends to the client as a whole, with a focus on the mind-body-spirit connection to support healing.

Intake Interview

4. The intake interview, a critical component of initial assessment in counseling, is an information-gathering phase of counseling that provides guidance for treatment planning.
5. Typical intake interview components address the following client topics in counseling: general appearance and behavior, presenting problem, history of current problem and related problems, present level of functioning, use of alcohol and other drugs, family history of mental illness, history of abuse, risk factors, previous counseling, and attitude of the client toward the counseling process.
6. Counselors should attend to verbal and nonverbal behaviors of the client, taking into consideration how the role of the counselor's and client's culture impacts the intake interview process.
7. Counselors are prone to common errors in judgment during the intake interview that can influence diagnostic decisions: anchoring, availability, diagnostic overshadowing, and attribution bias.

Mental Status Examination

8. A counselor can conduct a mental status examination as part of the intake interview or at any other time in counseling when a client may appear disoriented to time, place, person, or situation or may be encountering crisis-related symptoms.

Quantitative Screening Inventories

9. Screening inventories are available to counselors to provide an initial overview of clients' presenting concerns. They can be particularly useful in determining the likelihood that a cutoff score for a particular inventory indicates that clients meet certain criteria for a condition (i.e., sensitivity) or do not meet criteria for a condition (i.e., specificity). The overall accuracy of a screening tool is determined by calculating how sensitive and specific the tool is to detection compared to the total possible degree of sensitivity and specificity.
10. The Inventory of Common Problems, a tool commonly used in college counseling settings, requires individuals to rate the degree to which they experience 24 common challenges.
11. The Symptom Checklist-90-Revised (SCL-90-R) contains 90 items representing physical and psychological symptoms. This tool provides three total scores: a mean response for the 90 items (Global Severity Index), the number of symptoms endorsed on the scale (Positive Symptom Total), and the mean response of all items from the Positive Symptom Total (Positive Symptom Distress Index).
12. Shortened versions of the SCL-90-R exist: the Brief Symptom Inventory, Derogatis Psychiatric Rating Scale, SCL-90-Analogue, and Outcome Questionnaire-45.2 and -30.2.
13. The Brief Psychiatric Rating Scale assesses therapeutic changes in individuals diagnosed with psychotic disorders.

Qualitative Tools for Initial Assessment

14. Qualitative tools can be used in initial assessment to elicit client narratives of their illnesses or mental health concerns. These tools can be used alone or can supplement quantitative screening tools.
15. Many of these tools are based in the explanatory model and can be used to understand how cultural, familial, and social factors play into a client's conceptualization of help seeking, symptomatology, resiliency, and treatment and prognosis.
16. The Cultural Formulation Interview (CFI) examines the client's view of their illness and the degree of social support available to them. The CFI domains include the following: cultural definition of the problem; cultural perceptions of cause, context, and support; cultural factors that affect self-coping and past help seeking; and cultural factors that affect current help seeking.
17. The McGill Illness Narrative Interview, or MINI, is used to explore the client's current and previous experiences with symptoms, similar experiences with those close to them, and how they view symptomatology and treatment options. The generic version of the MINI contains 46 questions asked of the client over four sections: initial illness narrative, prototype narrative, explanatory model narrative, and services and responses to treatment.

18. The Explanatory Model Interview Catalogue (EMIC) is used to solicit information about the characteristics of the client and their local culture when describing a counseling concern. The counselor queries the client about their demographic background; patterns and implications of distress and their perceived social meanings; perceived causes of the presenting issue(s) and changes over time; help-seeking and treatment history and client preferences; general illness beliefs; and the client's perceived relationship between mind and body.
19. The Short Explanatory Interview (SEMI) evaluates the client's illness attributions for common mental health concerns. It includes four sections: personal background, nature of presenting problem, help-seeking behavior, and beliefs about mental illness.

Suicide Risk Assessment

20. Suicide risk assessment is a key part of the initial assessment in counseling. Counselors should directly ask clients about suicidal thoughts, with increasingly more specific questions if the risk for suicide is elevated.
21. It is important to engage in a collaborative assessment process so that clients may feel validated during a likely stressful time in their lives.
22. Levels of suicide risk can range from no risk to imminent risk, with higher levels of risk requiring hospitalization.
23. Some key correlates and risk factors associated with suicidality are as follows: being White, being an unmarried man with less formal education, having particular psychiatric and substance abuse disorders, encountering stressful events, and having previous suicide attempts. It is important to remember that, given the complexity of suicide risk, counselors should use these components as simply "broad stroke" considerations.
24. Counselors should assess three components of a client's suicide plan: lethality, availability of means, and specificity of the plan.
25. Suicide history in terms of previous suicide attempts or a family history of attempts or suicide is important to gauge during suicide risk assessment.
26. Additional factors to consider during suicide risk assessment include the presence of psychological symptoms and/or substance abuse, environmental stress, the availability of internal and external resources for the client, and the higher rate of suicide for particular racial/ethnic groups (e.g., Native Americans).
27. Several assessment tools are available to help counselors assess and intervene in suicide risk: the SAD PERSONS Scale, the Suicide Assessment Checklist, the Suicide Assessment Five-Step Evaluation and Triage method, the decision-tree assessment strategy, and safety planning.

Trauma Assessment

28. Two general trauma assessments can be used to gauge information about trauma. The Adverse Childhood Experiences (ACE) Questionnaire explores adverse childhood experiences that can lead to trauma. The questionnaire explores substantial experiences that may have occurred for the client within their first 18 years of life, including abuse, food insecurity, severe family mental illness, and incarceration of a family member. The Clinical Ethnographic Narrative Interview (CENI) is a qualitative tool that explores a client's trauma, moving through four components: a social network map to explore their social context, body mapping to identify elements of distress onto the body, a lifeline to examine trauma chronologically, and a card sort to facilitate the integration of the client's feelings.

29. For crisis planning, counselors can develop a portable treatment record with the client. The record includes contact information and emergency contacts; medications taken and their side effects; major medical illnesses, procedures, and treatment responses; current diagnoses; psychiatric hospitalizations; crisis plan listing emergency resources; and relapse plan.
30. When working with clients in crisis or with trauma, counselors can experience vicarious trauma as they are indirectly exposed to client narratives about trauma. It is important that they develop a self-care plan; the ABCs of self-care can be a helpful approach (i.e., awareness, balance, connection).

The Mental Health Ecosystem

31. The larger communities in which counselors work can be considered a mental health ecosystem, with the potential to serve clients more holistically.
32. Components of the mental health ecosystem include crisis care, outpatient care, social support, and inpatient care. These components are sustained by peer and family supports as well as care coordination.
33. Crisis intervention teams within the ecosystem can be helpful to quickly mobilize support, as first responders (e.g., counselor, hospital emergency worker, law enforcement official) work together.

Mental Health and Addictions Assessment

Diagnostic and Statistical Manual of Mental Disorders

1. The latest revision of the *DSM*, the *DSM-5-TR*, was published in 2022 and includes categorical and dimensional assessment opportunities for counselors. Categorical assessment refers to noting whether a particular symptom is present, whereas dimensional assessment involves noting the degree to which a symptom is present.
2. The *DSM-5-TR* updates and clarifies information presented in its previous version as well as adds prolonged grief disorder as a new disorder. It also uses only the *International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM)* codes.
3. Challenges related to the *DSM* and diagnosing in general are present, including concerns regarding the lack of transparency during the development process, the difficulty in distinguishing mental disorder from normal distress, the lack of empirical validation of dimensional assessment scales, and the presence of diagnostic errors resulting from cultural bias factors.
4. Diagnostic variance, or varying clinical decisions, is common during the diagnosis process. Unfortunately, individuals with traditionally marginalized racial/ethnic and other marginalized statuses are disproportionately given more severe diagnoses.

Mental Health Disorders and Assessment

5. Approximately 20% of U.S. individuals are diagnosed with mental disorders in a given year, with about 5.6% experiencing severe enough symptoms to impact their daily functioning. Approximately half of diagnosable cases occur by age 14, and about 75% of cases are identified by age 24.
6. Mental illness can be categorized as any mental illness (AMI) or serious mental illness (SMI). Women and girls have higher lifetime prevalence of AMI as compared with men and boys, although this does not necessarily mean they are more “mentally ill.”

7. In evaluation of mental health disorders longitudinally, four key terms are helpful to track progress: response, remission, relapse, and recovery.
8. Just over half of U.S. adults diagnosed with a mental disorder also have a diagnosed co-occurring substance abuse disorder.
9. Mental health usage, or help seeking, disproportionately occurs for those traditionally marginalized (e.g., people of color, LGBTQ+ individuals). These groups tend either to not have access to mental health care or to report being denied care.

Assessment of Depression

10. Mood disorders are the most prevalent mental disorders in the United States, with about 9.7% of adults and 14.3% of adolescents experiencing major depression. Major depression is characteristic of multiple mental health and comorbid disorders.
11. The Beck Depression Inventory–II is a 21-item scale that assesses depressive symptoms that may be affective, cognitive, or behavioral in nature.
12. The Children’s Depression Inventory 2 is used with children and adolescents ages 7 to 17 years. It includes two scales and four subscales that investigate emotional and functional problems associated with depression.
13. The Geriatric Depression Scale is a 30-item yes/no tool that effectively differentiates between older clients with and without depression. A shortened version of the scale with 15 items exists.
14. The Hamilton Depression Scales include the Hamilton Rating Scale for Depression (HAM-D) and the Hamilton Depression Inventory (HDI). The HAM-D is a 17-item observer tool used to make recommendations for further assessment and intervention. The HDI is a commonly used 23-item scale that can differentiate well between clients with varying levels of depression.

Assessment of Bipolar Disorders

15. There are four types of bipolar disorder: bipolar I disorder, bipolar II disorder, cyclothymia, and bipolar disorder not otherwise specified. In general, prevalence rates are 2.8% for adults and 2.9% for adolescents.
16. The Mood Disorder Questionnaire is a 13-item yes/no scale that assesses symptoms to differentiate bipolar disorder type and recommend further diagnosis.
17. The General Behavior Inventory contains 73 items to broadly examine the core symptoms of bipolar disorders.
18. The Bipolar Spectrum Diagnostic Scale is a 19-item checklist to examine the probability of a bipolar disorder.
19. A life chart is a graphical method to detail client symptoms associated with bipolar disorders, medication efficacy, and life events that precipitated symptoms.
20. Tools available to assess mania include the Altman Self-Report Mania Scale (ASRM), Young Mania Rating Scale (YMRS), and Bech-Rafaelsen Mania Rating Scale (MAS). The ASRM is a five-item scale that examines the presence and frequency of mania symptoms. The YMRS is an 11-item self- and observer-report that evaluates core mania symptoms, and the MAS is an 11-item observer rating tool that examines severity of mania symptoms.

Assessment of Anxiety and Fear

21. About 25% of U.S. individuals can expect to experience an anxiety disorder in their lifetime, with about 19.1% of adults and 31.9% of adolescents experiencing one within any given year.

22. Anxiety should be distinguished from fear: Anxiety relates to significant hypervigilance and avoidant behaviors due to anticipation of a future threat, whereas fear is the response to imminent danger.
23. The State-Trait Anxiety Inventory is a 20-item scale that evaluates state (i.e., intensity of symptoms) and trait (i.e., frequency of symptoms overall) characteristics of anxiety.
24. The Beck Anxiety Inventory is a 21-item scale that helps counselors to identify four degrees of anxiety (i.e., minimal, mild, moderate, severe). The Beck Anxiety Inventory parallels the Beck Depression Inventory–II in format.
25. The Social Phobia and Anxiety Inventory is a 45-item tool that investigates the frequency of social phobia and agoraphobic symptoms.
26. Other measures for evaluating anxiety or fear include the Multidimensional Anxiety Questionnaire, Test Anxiety Scale, Mathematics Anxiety Rating Scale–Revised, Maudsley Obsessional–Compulsive Inventory, Posttraumatic Stress Disorder Symptom Scale, Fear Questionnaire, Adult Manifest Anxiety Scale for College Students, and Adult Manifest Anxiety Scale for the Elderly.

Assessment of Posttraumatic Stress Disorder

27. Almost half of U.S. adults will experience a traumatic event at least once during their lifetime, yet only about 6.8% will develop posttraumatic stress disorder (PTSD).
28. The PTSD Checklist for *DSM-5* is a 20-item screening tool that can be used to determine further assessment and intervention.
29. Given the multiple biological, psychological, social, academic, and career impacts of PTSD, multiple quantitative and qualitative assessments are recommended to evaluate PTSD throughout treatment.

Assessment of Anger

30. The State-Trait Anger Expression Inventory–2, which has a similar format to the State-Trait Anxiety Inventory, is a 57-item scale that explores state and trait characteristics of anger.

Assessment of Self-Injury

31. Self-injury involves deliberate actions of harm that result in physical injury to the self; it may or may not be related to suicidality. Symptoms occur for 15% to 20% of adolescents and young adults at some point, and women are 3 to 4 times more likely to report self-injury than men.
32. There are seven commonly used assessments to measure self-injury: the Self-Injury Trauma Scale, Self-Harm Inventory, Self-Injury Questionnaire, Deliberate Self-Harm Inventory, Self-Injury Implicit Association Test, Suicide Attempt Self-Injury Interview, and Self-Injurious Thoughts and Behaviors Interview.
33. Assessment of self-injury should involve both formal and informal procedures. Informal measures may involve exploring psychological and biological symptoms with clients through the use of open-ended questions.

Assessment of Eating Disorders

34. Eating disorders are classified in the *DSM-5-TR* under the category of feeding and eating disorders. Common eating disorders include anorexia nervosa, bulimia nervosa, and binge-eating disorder.

35. Anorexia nervosa and bulimia nervosa tend to develop in adolescence and early adulthood; the prevalence rates are 0.4% and 1% to 1.5%, respectively. Most cases involve females (90%), although this statistic should be interpreted with caution, as there is little research on males' experiences with eating disorders.
36. The Eating Attitudes Test is a 26-item tool that screens for symptoms and related problems of anorexia nervosa and other eating problems. It involves three scales: Dieting, Bulimia, and Oral Control.
37. The Eating Disorders Inventory-3 is a 91-item scale that assesses eating disorder symptoms and includes personality assessment items. The assessment packet includes a symptom checklist and referral form.

Assessment of Attention-Deficit/Hyperactivity Disorder

38. Attention-deficit/hyperactivity disorder (ADHD) is a neurodevelopmental disorder characterized by inattention, hyperactivity, impulsivity, or a combination of these. Prevalence data show that ADHD is found in about 11% of children, 8.7% of adolescents, and 4.4% of adults.
39. In addition to assessing ADHD-specific symptoms, counselors should use a multimodal approach and assess for age of onset, duration of symptoms, extent of functional impairment, and associated conditions of ADHD.
40. Available assessment tools include the Behavior Assessment System for Children—Third Edition; Achenbach System of Empirically Based Assessment; National Institute for Children's Health Quality Vanderbilt Assessment Scales; Swanson, Nolan, and Pelham IV Rating Scale; Conners' Rating Scales; ADHD Rating Scale—IV; Barkley Screening Checklist for ADHD, Adult Attention Deficit Disorders Evaluation Scale; Conners' Adult ADHD Rating Scales; and Brown Adult ADHD Rating Scales.

Assessment of Addictions

41. Addiction is a treatable, chronic medical disease involving interactions among the brain, genetics, environment, and previous life experiences. It can involve substances (substance addiction or substance dependence) or behaviors (process addictions or behavioral addictions).
42. Substance misuse ranges from 1.6% to 29.2% for adolescents. The most commonly abused substances are alcohol, illicit drugs such as marijuana, and nonprescription pain relievers—or a combination of these. Nicotine use also ranges from 3.8% to 32.7% among adolescents, with vaping having the highest prevalence.
43. Among adults, nicotine use averages 13.9% across age groups. Substance use is highest for marijuana (15.2%), likely due to recent legalization of it across several states.
44. Overdose deaths continue to rise, particularly from opioids and for men.
45. Because most substance abuse involves alcohol, the majority of substance abuse assessments screen for alcohol abuse.
46. The ABCDE and REDFLAGS models are two screening tools useful for evaluating the major indicators of addictions.
47. Given the role of denial in reporting substance abuse, counselors should be intentional and directly ask about substance use with every client.
48. *Substance abuse* can be defined as failure to fulfill major roles at work or home, engagement in dangerous situations, and the presence of recurrent social and legal problems due to substance use. *Substance dependence* includes these symptoms as well as the presence of increased tolerance and severe withdrawal symptoms.

49. The CAGE Questionnaire includes four questions to screen whether clients have ever believed they needed to cut down on drinking, become annoyed when others asked them about their drinking, felt guilty about drinking, or needed to drink in the morning to be alert. The CAGE-AID is an expansion of the CAGE that includes screening for other drugs.
50. The Rapid Alcohol Problems Screen includes four items that relate to guilt about drinking, blackouts, failure to perform as expected, and a need for a drink in the morning. Research has shown that the Rapid Alcohol Problems Screen has performed better than the CAGE in detecting alcohol abuse across gender and racial/ethnic groups.
51. The Michigan Alcoholism Screening Test is a 24-item instrument that assesses symptoms of excess drinking, problems with daily functioning, concerns expressed by others about alcohol abuse, and the degree of success an individual has had trying to control or stop drinking. The Michigan Alcoholism Screening Test has a shortened version as well as a geriatric version.
52. The Substance Abuse Subtle Screening Inventory—4th Edition (SASSI-4) is a comprehensive screening tool for detecting substance abuse, especially among those who may be defensive or deny problems. It contains 10 scales that evaluate the abuse of alcohol and other drugs. There are adolescent (SASSI-A2), Spanish (Spanish SASSI), and American Sign Language (SAS-ASL) versions of the SASSI.
53. The Alcohol Use Disorders Identification Test (AUDIT) is a 10-item screening tool for detecting alcohol dependence and its consequence. It screens for three levels of drinking with score thresholds to identify low- and high-risk drinkers. Two shortened versions of the AUDIT (AUDIT-3 and AUDIT-4) are available.
54. The Addiction Severity Index (ASI) investigates clients' alcohol use in the context of interpersonal and intrapersonal functioning. The ASI has alternative versions, including multimedia version (ASI-MV), follow-up (ASI-FU), adolescent (T-ASI-2), and modified expansive drug assessment (mASI) versions.
55. The Comprehensive Drinker Profile is a structured intake interview that is available in shortened and follow-up versions. The Comprehensive Drinker Profile assesses current and historical abuse of alcohol and its consequences. It typically takes 1–2 hours to complete the interview.
56. The Timeline Followback tool explores drinking or other drug use behavior over a 1-year period to explore patterns in behavior or associated problems.
57. The Alcohol Use Inventory contains 24 scales that evaluate patterns of behavior, attitudes, and symptoms of alcohol use in individuals 16 years and older.
58. Some process addictions tools are available to counselors: Internet Process Addiction Test (IPAT), Short Gambling Harm Screen (SGHS), and Sexual Addiction Screening Test (SAST-R). The IPAT is a 20-item screening tool designed to assess various behavioral addictions facilitated by the internet. The SGHS is a 10-item tool to evaluate financial, emotional, and interpersonal harm caused from gambling. The SAST-R is a 20-item yes/no scale that assesses core symptoms of sexual addiction.
59. Self-monitoring of addictions can produce more accurate data to be used in counseling and further assessment.
60. Motivational interviewing is a guided assessment in which counselors can assist clients who may be less ready to change behavioral patterns; it is commonly used in substance abuse assessment and intervention.
61. The four guiding principles of motivational interviewing involve expressing empathy, developing discrepancy, rolling with resistance, and supporting self-efficacy.

Assessment of Intelligence

Introduction to Intelligence

1. Intelligence has been defined using various theoretical frameworks.
2. Intelligence was historically defined by examining individual differences through sensory processes and mental tests. Over time, these individual tests were formalized to help detect intellectual disabilities by interpreting a calculated IQ score.
3. Group intelligence tests were used to help classify army recruits but were then later designed for educational and other personnel uses.

Theories of Intelligence

4. Charles Spearman's g factor assumes that there is a general factor of intelligence that is indicated by a composite score on several cognitive tests. Although Spearman identified that s factors existed for various subtests, he asserted that the g factor was more influential in understanding intelligence.
5. Louis Thurstone identified seven group or multiple factors that he labeled primary mental abilities. These were verbal comprehension, word fluency, numerical ability, spatial visualization, associative memory, perceptual speed, and reasoning. His later research indicated that the primary mental abilities were correlated and thus intelligence could be interpreted as a general factor as well as seven second-order factors.
6. The Cattell-Horn-Carroll theory of cognitive ability conceptualizes intelligence as two types: fluid and crystallized intelligence. Fluid intelligence is intended to measure context-free capacity for solving new problems. Crystallized intelligence involves an individual solving problems and making decisions based on previous learning or experience; this type of learning is considered more culturally based learning.
7. Robert Sternberg's triarchic theory involves three types of intelligence: componential intelligence, experiential intelligence, and contextual intelligence. Componential intelligence refers to components of intelligence such as executive function and knowledge acquisition ability. Experiential intelligence relates to ability garnered from previous behaviors and experiences. Contextual intelligence refers to adaptability to one's environment.

8. Howard Gardner asserted that there were eight types of intelligences, or multiple intelligences: musical, bodily-kinesthetic, logical-mathematical, linguistic, spatial, interpersonal, intrapersonal, and naturalistic intelligence.

Individual Intelligence Assessments

9. The Stanford-Binet, in its fifth edition, is based on an extension of the Cattell-Horn-Carroll theory of intelligence. The test can be given to people ages 2 to 85+ years, begins with two routing tests, and generates a full-scale IQ score and five factor index scores.
10. The Wechsler scales are a series of intelligence tests that include the Wechsler Adult Intelligence Scale–Fourth Edition, Wechsler Intelligence Scale for Children–Fifth Edition (WISC-V), Wechsler Preschool and Primary Scale of Intelligence–Fourth Edition (WPPSI-IV), and Wechsler Abbreviated Scale of Intelligence–Second Edition (WASI-II).
11. The Wechsler Adult Intelligence Scale, in its fourth edition, can be used with adults across the life span. It includes a full-scale IQ, general ability index, and four index scores.
12. The Wechsler Intelligence Scale for Children, in its fifth edition, is intended for use with children ages 6 to 16 years 11 months. Results provide a full-scale IQ, primary index, and ancillary scale scores.
13. The Wechsler Preschool and Primary Scale of Intelligence, in its fourth edition, is suitable for use with children ages 2.6 to 7.7 years. It provides a full-scale score, primary index scores, and ancillary index scores.
14. The Wechsler Abbreviated Scale of Intelligence, in its second edition, can be used with people ages 6 to 89 when a brief intelligence evaluation is needed. Research indicates that the shortened format does impact clinical accuracy.
15. The Kaufman batteries consist of the Kaufman Assessment Battery for Children, Second Edition Normative Update (KABC-II NU) and the Kaufman Adolescent and Adult Intelligence Test (KAIT). The former can be used with children ages 3 to 18 years old. Practitioners can use up to 10 of the 18 subtests to calculate six different ability indices. The latter, also available in a shortened form, is normed for those ages 11 to 85 years. Results provide scores for fluid intelligence, crystallized intelligence, and a composite index.
16. The Das Naglieri Cognitive Assessment System is intended to be a comprehensive measure of children’s cognitive abilities. It provides scores for four scales: Planning, Attention, Simultaneous, and Successive (i.e., PASS) cognitive processing.
17. The Woodcock-Johnson Tests of Cognitive Abilities, in its fourth edition, is a series of 20 intelligence tests that yield three composite scores, seven factor scores, and six narrow ability scores.
18. Intelligence tests provide counselors with an opportunity to interpret several different types of IQ scores in addition to developing a more complex report of patterns among IQ subtests.
19. Some research indicates that some subtests may be unreliable, given the complexity and variability of subtests and the constructs they intend to measure.
20. Intelligence testing can be costly in terms of time and money, and most counselors lack training opportunities to administer the tests.

Group Intelligence Assessments

21. Five common group intelligence tests are used in schools: the Cognitive Abilities Test, the Test of Cognitive Skills, the Otis-Lennon School Ability Test, the Multiple Intelligences Developmental Assessment Scales (MIDAS), and

the Multidimensional Aptitude Battery–II (MAB-II). The Cognitive Abilities Test, published as Form 7, offers 10 levels across K–12 age groups. It is composed of three batteries to assess verbal, quantitative, and nonverbal abilities. The Test of Cognitive Skills is intended for use in kindergarten through Grade 12, with levels that each cover two grade levels. Four tests are associated with the tool: sequences, analogies, memory, and verbal reasoning. The Otis-Lennon School Ability Test, in its eighth edition, serves those in kindergarten through Grade 12, yielding a total IQ score as well as verbal and nonverbal scores. The MIDAS provides scores for Gardner’s multiple intelligences, as well as 26 subscales and three style scales (Leadership, Innovative, and General Logic). The Multidimensional Aptitude Battery, in its second edition, includes 10 tests that measure verbal and nonverbal performance. The scale provides a total score as well as subscale scores for verbal and nonverbal performance.

Intelligence Assessment and Special Education

22. In special education, intelligence assessments are often administered to evaluate children for giftedness and intellectual disability.
23. Intellectual disability is determined when an IQ score is 2 standard deviations or more below the mean of an intelligence assessment, and there are deficits in adaptive functioning. Depending on what standard deviation range a score falls within, children may be classified as slow learners or with mild, moderate, severe, or profound impairment.
24. Three intelligence assessments are useful for evaluating intellectual disability: the Vineland Adaptive Behavior Scales, Supports Intensity Scale, and the Shipley Institute of Living Scale–Revised. The Vineland Adaptive Behavior Scales include a parent/caregiver interview and a teacher rating form for four domains: daily living skills, communication, socialization, and motor skills. The Supports Intensity Scale involves an eight-page interview booklet that evaluates 57 life activities and 28 behavioral and medical areas. The Shipley Institute of Living Scale–Revised is a 60-item instrument that assesses an individual’s vocabulary and abstract reasoning skills and is intended for use across the life span to detect intellectual disability.
25. Giftedness refers to the top 10% of the population in terms of intelligence assessment scores. Standardized intelligence tests are typically used to identify giftedness, although giftedness is defined in a variety of ways.
26. There are six areas of giftedness: general intellectual ability, specific academic ability, creative ability, leadership ability, visual and performing arts ability, and psychomotor ability.
27. Children identified as gifted are often characterized by various academic and social challenges. The gifted population is incredibly heterogeneous, and cultural factors should be considered.
28. Depending on what standard deviation range a score falls within, children may be classified as high achievers, or mild, moderate, high, exceptional, and profound giftedness.
29. Individuals diagnosed with an intellectual disability and giftedness are referred to as twice exceptional.
30. There are several concerns with intelligence assessment in evaluating giftedness and twice exceptional children. These include concerns regarding using the full-scale IQ score, insufficient item difficulty, and ceiling effects.
31. It is recommended that universal screening for giftedness occur within schools, administering a test in a child’s native language.

Assessment of Aptitude and Achievement

Introduction to Aptitude and Achievement Assessment

1. Aptitude and achievement assessments may be considered ability tests. Aptitude tests are designed to measure one's capacity to acquire a particular skill or ability, whereas achievement tests are intended to assess content knowledge or skills that are already learned.
2. Aptitude tests are most closely evaluated in terms of predictive validity, whereas achievement tests are judged based on content validity.

Aptitude Assessments for Higher Education

3. The SAT and ACT are two common aptitude tests used in higher education admissions decisions at the undergraduate level. The Preliminary SAT/National Merit Scholarship Qualifying Test (PSAT/NMSQT) and PSAT 10 are considered trial tests for the SAT and also play a role in qualifying for National Merit Scholarships.
4. The SAT, with its most recent revision in 2021, includes three major sections: Reading, Writing and Language, and Math. Section scores range from 200 to 800, with total scores ranging from 400 to 1,600. The Essay section was discontinued in 2021.
5. The ACT, more often used by schools in the midwestern United States, assesses aptitude in four areas: English, mathematics, reading, and science reasoning. There is also an optional writing test. Scores on the ACT range from 1 to 36.
6. ACT, Inc., offers other tests that can be taken prior to or with the ACT. These include the UNIACT Interest Inventory, the EXPLORE and PLAN tests, and the ASSET Student Success System. Respectively, these tests gauge information related to career planning, aptitude among students in Grades 8 through 10, and community college and technical school student skills.
7. Most research indicates that high school grades are the best predictors of college grade point average (GPA), as the SAT and ACT yield predictive validity estimates in the .30 to .50 range. Nevertheless, high SAT and ACT scores can be helpful to a student trying to gain admission to college when their high school GPA may be low.

8. GPAs are context specific, and thus the same GPA at different types of institutions can impact the predictive value of aptitude test scores for college GPA.
9. The big-fish-little-pond effect relates to the notion that students placed in high-ability environments will have lower academic self-concepts than those placed in average- and low-ability environments. Thus, this implies that not all students should be placed in highly competitive environments.

Graduate and Professional School Admissions Tests

10. The Graduate Record Examination (GRE) is a common aptitude test used in graduate and professional school admissions. Other more specialized tests include the Law School Admission Test, Medical College Admission Test, Dental Admission Test, and Graduate Management Admission Test.
11. The GRE general test includes three sessions: Verbal Reasoning, Quantitative Reasoning, and Analytical Writing. Scores for the revised GRE range from 130 to 170 for the Verbal Reasoning and Quantitative Reasoning sections. The Analytical Writing section is scored using a 0-to-6-point scale.
12. The GRE is still considered a valid predictor of graduate GPA, especially when combined with undergraduate GPA in the prediction.

Academic Achievement Assessments

13. Several achievement tests are commonly used in kindergarten through Grade 12 settings, including the Iowa Assessments (i.e., Next Generation Iowa Assessments, Iowa Early Learning Inventory); Stanford Achievement Test, 10th Edition (Stanford 10); Metropolitan Achievement Test, Eighth Edition (MAT8); and TerraNova Tests, Third Edition (TerraNova 3). These tests commonly measure student learning and progress in school subject areas such as reading, language, mathematics, science, and social studies.
14. Two achievement tests have been used to award college credit without enrolling in college: the College-Level Examination Program (CLEP) and Advanced Placement (AP) program.
15. The Test of English as a Foreign Language (TOEFL) is widely used as an admissions requirement for international students wanting to attend a U.S. college or university.
16. Several tests have been developed to assess general adult achievement. These include the Tests of Adult Basic Education (TABE 11&12), the Adult Basic Learning Examination, and the Basic Achievement Skills Inventory. Typically, reading, mathematics, and language ability are assessed.
17. Other individual achievement tests can be used across the life span to assess reading, mathematics, and language skills. These include the Wide Range Achievement Test, Fourth Edition (WRAT4), Kaufman Test of Educational Achievement–Normative Update (K-TEA-II), and Wechsler Individual Achievement Test–Fourth Edition (WIAT-IV).

High-Stakes Testing

18. Although a controversial process at times, achievement testing is often used to indicate both the quality of student learning and the quality of instruction in a particular school or state. Results from these tests can be used as a change agent to improve instruction and learning.
19. One purpose of high-stakes testing is to ensure that students are not “left behind” in learning in order to promote equitable educational access across schools within a particular state.

20. The Every Student Succeeds Act (ESSA) is the legislation guiding high-stakes testing today; it is a reauthorization of the 1965 Elementary and Secondary Education Act.
21. ESSA provides more flexibility to states in measuring student success as well as identifying high-quality teachers and promoting principals' professional development. Student-level interventions can apply to the bottom 5% of schools, schools with high dropout rates, or schools with subgroups of students who are falling behind.
22. Scholars have argued that students of color and students from other disadvantaged backgrounds are negatively affected by accountability legislation such as ESSA. Careful attention must be given, especially to these communities.

Study Habits Inventories

23. Study habits inventories can be useful for comparing a particular high school or college student's study habits with those of their peers, for serving as instructional tools for counselors to use with students, or for identifying student challenges and strategizing for improvement.
24. Common study habits inventories include the Study Attitudes and Methods Survey (SAMS), the College Student Inventory (CSI), the Learning and Study Strategies Inventory (LASSI), several tools labeled as the Learning Style Inventory, and the Thinking Styles Inventory.

Assessment of Career Development and Wellness

Introduction to Career Assessment

1. Career counseling—and thus career assessment—has been at the heart of counseling and other related disciplines for more than 100 years. Career assessment has been useful in assisting with placement and screening, informing public policy, and facilitating client self-exploration and decision-making.
2. There are three waves of career development. The first wave concerns matching individuals to a job and is most influenced by the trait-and-factor approach. The second wave relates to managing roles with other life roles over the life span, influenced primarily by life-span, life-space development theory. The influence of cognitive processes on vocational behavior was also a focus of this wave, with attention to social cognitive career theory and career learning theory. The third wave involves making meaning through work, or postmodernist approaches to constructing career narratives.
3. Career assessment is integral to and ongoing throughout the career counseling process, as illustrated by Niles and Harris-Bowlsbey's identified steps: (a) becoming aware of the need for career decisions, (b) learning or relearning about vocational self-concept, (c) identifying occupational alternatives, (d) obtaining information about identified alternatives, (e) making tentative choices from among available occupations, (f) making educational choices, and (g) implementing a vocational choice.

Career Assessment Across the Life Span

4. Career development is a continual process across the life span. As counselors assess career readiness, interests, and values, they attend to minority stress and environmental barriers, integrate culturally responsive and affirming practices, and explore career adaptability and personal wellness strategies with the client.

5. For clients in childhood and adolescence, counselors facilitate career identity formation, attending to transcending gender norms, expanding career interests and skills, and preparing individuals to be college and career ready. Critical consciousness, or awareness of social justice concerns, should be leveraged with clients to support positive career outcomes.
6. For young adult clients, counselors continue to expose them to education and career opportunities. They also assist clients to address any financial roadblocks and further support college retention and orientation.
7. For midcareer clients, counselors validate the normative nature of career transition. They also attend to the internal factors (emotional, cognitive, behavioral) and external factors (situational, organizational) that impact successful career transition.
8. Older clients moving toward the retirement phase may be interested in bridge employment before retirement. They also tend to prioritize generativity or giving back to the next generation.

Qualitative Career Assessment

9. Qualitative career assessment techniques may be useful as stand-alone or supplemental tools of the career counseling and career assessment processes.
10. Qualitative career assessment involves nonstandardized and often informal approaches to assessment in order to construct a career story or narrative. They include interviews, card sorts, and journaling or written exercises.
11. Card sorts is an interactive method to explore a client's values, interests, skills, or abilities. The client sorts the cards into subpiles, which are then discussed to facilitate the career decision-making process.
12. A career genogram is based on the family genogram and can be used to gather career information from the client's family and their life experiences and barriers.
13. Career workbooks are integral to support self-report on career readiness and exploration. Examples of career guidebooks or workbooks include *What Color Is Your Parachute?* and *Making Career Decisions That Count: A Practical Guide*.

Quantitative Career Assessment Programs

14. Comprehensive assessment programs serve the multiple purposes of assessing a client's values, interests, and aptitudes. Often, they use standardized procedures to establish rigor.
15. Five frequently used standardized assessment programs are available: the Differential Aptitude Tests (DAT), Armed Services Vocational Aptitude Battery (ASVAB), WorkKeys, O*NET System and Career Exploration Tools, and the Career Occupational Preference System (COPSystem).
16. The DAT can be used with the Career Interest Inventory to provide career planning reports for counselors and students. There are two levels for each assessment tool. The DAT contains eight subtests: Verbal Reasoning, Numerical Reasoning, Abstract Reasoning, Perceptual Speed and Accuracy, Mechanical Reasoning, Space Relations, Spelling, and Language Usage. The Career Interest Inventory provides scores for 15 occupational groups.
17. The ASVAB is a multiple aptitude test battery, a career interest inventory, and a collection of career planning exercises and materials to help with career planning. The tool is used for educational and vocational planning among high school and community college students along with military recruits. ASVAB scales include General Science, Arithmetic Reasoning, Word Knowledge, Paragraph Comprehension, Mathematics Knowledge, Electronics Information, Auto & Shop Information, and Mechanical Comprehension.

18. WorkKeys is a work skills assessment program administered by ACT to evaluate actual and anticipated job skills that would maximize an individual's success in the workplace. Specifically, it measures foundational skills in 10 areas: applied mathematics, applied technology, business writing, listening, locating information, observation, reading for information, readiness, teamwork, and writing.
19. The O*NET System and Career Exploration Tools is a comprehensive career information system that includes the O*NET database, O*NET OnLine, and O*NET Career Exploration Tools (i.e., Ability Profiler, Interest Profiler, and Work Importance Profiler).
20. The COPSsystem measures career interests, values, and abilities across a wide range of settings. There are three measures in the system: the COPS Interest Inventory, the Career Orientation Placement and Evaluation Survey, and the Career Ability Placement Survey.

Wellness Assessment

21. Wellness assessment can support optimal development in various life domains, including career, family, and interpersonal.
22. Wellness assessment tools are based on two key theoretical models. The Wheel of Wellness includes five life tasks (i.e., spirituality, self-direction, love, friendship, and work and leisure) and 12 subtasks. The second model, the Indivisible Self, extends the Wheel of Wellness and reflects a single factor (wellness) with five subfactors (Essential Self, Creative Self, Social Self, Physical Self, Coping Self).
23. The Indivisible Self model informed the development of the Five Factor Wellness Inventory (5F-WEL).
24. Ecowellness is a wellness concept related to one's relationship with nature. It includes several dimensions, including access to nature, environmental identity, and transcendence.
25. Wellness counseling involves assessment and treatment planning and implementation of wellness counseling interventions. Orienting the client to wellness models and assessing various wellness components at various times are integral to wellness counseling.

Career Assessment Tools

Career Readiness Assessments

1. Career readiness relates to how motivated a client may be to engage in career decision-making. It can be referred to as career maturity or career adaptability. Career maturity refers to the ability to complete career-related developmental tasks, and career adaptability refers to the ability to adjust to both predictable and unpredictable aspects of career decision-making.
2. The Adult Career Concerns Inventory measures the career concerns of adults at four stages and 12 substages of their development across the life span.
3. The Career Attitudes and Strategies Inventory assesses nine aspects of career or work adaptation that adults ages 17 to 77 face.
4. The Career Beliefs Inventory measures beliefs that block career goals. Given its limited psychometric data, the tool should be used as a decision aid that supplements other career assessment practices.
5. The Career Decision-Making Difficulties Questionnaire evaluates students' and young adults' ability to cope with different types of difficulties encountered in the career decision-making process.
6. The Career Decision Scale is tailored toward adolescents and young adults to better understand origins of career indecision.
7. The Career Decision Self-Efficacy Scale, also known formally as the Career Decision-Making Self-Efficacy Scale, evaluates a client's belief in their ability to make effective career decisions.
8. The Career Development Inventory evaluates students' readiness to make educational and career decisions. The tool assesses career maturity or career adaptability as well as general knowledge of the world of work.
9. The Career Factors Inventory evaluates factors that may influence career indecision, such as need for career information, need for self-knowledge, career choice anxiety, and generalized indecisiveness.
10. The Career Futures Inventory assesses career planning attitudes and competencies as they relate to career optimism, perceived knowledge, and overall career adaptability.

11. The Career Mastery Inventory assesses adults' career adaptability along six developmental tasks: organizational adaptability, position performance, work habits and attitudes, coworker relationships, advancement, and career choice and plans. In addition, the scale provides scores related to three adjustment scales (i.e., Integrative, Adjustive, and Nonadjustive).
12. The Career Maturity Inventory–Revised is similar to the Career Mastery Inventory except that it is tailored for use with adolescents.
13. The Career Thoughts Inventory measures dysfunctional thinking in terms of career decision-making in adults across the life span. Specifically, it measures misperceptions in eight core areas of career development and provides scores related to decision-making confusion, commitment anxiety, and external conflict.
14. The Childhood Career Development Scale measures career progress in children in Grades 4 to 6 for eight areas: planning, self-concept, information, interests, locus of control, curiosity/exploration, key figures, and time perspective.
15. My Vocational Situation is often used as a screening tool to detect career planning concerns that need to be addressed in counseling. The scales provide scores related to vocational identity, occupational information, and barriers.
16. The Skills Confidence Inventory, often used as part of the Strong Interest Inventory, measures individuals' level of confidence with general occupational themes of the Strong Interest Inventory.
17. The Future Career Autobiography is a qualitative assessment tool that is often used after a career intervention. The client is instructed to write a paragraph about where they hope to be in life and what they hope to be doing occupationally after a particular time frame, such as 5 years after college graduation.
18. My System of Career Influences is a qualitative assessment tool within a booklet with open-ended questions regarding the influences of a client's career situation and their career plan.
19. My Career Chapter is a qualitative assessment tool that uses sentence stems to construct a client's autobiography. The sentence stems refer to past, present, and future perspectives that facilitate the client's understanding of their career readiness.

Interest Assessments

20. Two common types of scales make up interest inventories: (a) general or basic interest scales and (b) occupational scales.
21. General scales, such as the Basic Interest scales of the Strong Interest Inventory (Strong), evaluate an individual's interest in broad areas; these scales usually involve clustering items that logically fit together (i.e., rational process). Occupational scales assess an individual's interest in comparison with others in specific occupations; scale development involves an empirical process, and items are selected based on how well they differentiate among groups.
22. Interest inventories may be useful for generating academic or career possibilities, confirming previous academic or career choices, aiding in decision-making among majors or occupations, or assisting individuals in considering ways in which a particular career path may be adapted in the future to maximize career satisfaction.
23. Common interest inventories include the Strong Interest Inventory, Campbell Interest and Skill Survey, Kuder Career Search With Person Match, Self-Directed Search, Career Decision-Making System–Revised, and Jackson Vocational Interest Survey. Qualitative interest assessments include My Career Story, Career Style Interview, and life role analysis.

24. The Strong Interest Inventory, most recently revised in 2004, is widely used and has extensive psychometric support.
- There are six sections of the Strong: occupations, subject areas, activities, leisure activities, people, and your characteristics. For the first five sections, individuals rate on a 5-point scale the degree to which they like an occupation, subject area, and/or activity; for the last section, individuals indicate on a 5-point scale the degree to which a particular characteristic describes them.
 - Three administrative indices provide information about item response percentages, total responses index, and typical responses (i.e., typicality index).
 - The Strong also contains two sets of general scales: the General Occupational Themes and Basic Interest Scales. The former represent six scales that provide an overview of an individual's profile, classified according to the Realistic, Investigative, Artistic, Social, Enterprising, Conventional (RIASEC) model. There are 30 Basic Interest Scales, which function as subscales of the General Occupational Themes; they help the individual to note interest patterns associated with different occupations.
 - There are 122 pairs of items that constitute the Occupational Scales for the Strong; these scales differentiate significantly the interests of men and women. The Occupational Scales have been normed on men and women in a particular occupation.
 - The Strong also yields five bipolar Personal Style Scales that evaluate personality factors associated with educational and career planning activities: Work Style, Learning Environment, Leadership Style, Risk Taking/Adventure, and Team Orientation.
 - Two alternative and supplemental assessments are associated with the Strong: the Strong Interest Explorer and the Skills Confidence Inventory/Expanded Skills Confidence Inventory. The Strong Interest Explorer is designed for use with younger individuals in Grade 8 or higher. The Skills Confidence Inventory or Expanded Skills Confidence Inventory may be useful to supplement information about interests with information related to career self-efficacy.
25. The Campbell Interest and Skill Survey (CISS), one of the tools associated with the Campbell Development Surveys, parallels some of the Strong's scales but offers self-report skills scales to match the interest scales.
- The CISS provides seven Orientation Scales, 29 Basic scales, 60 Occupational scales, and three Special scales (i.e., Academic Focus, Extroversion, Variety).
 - The CISS differs from the Strong in that it provides unisex occupational scales.
26. The Kuder Career Search With Person Match, part of the Kuder Career Planning System, is also referred to as the Kuder Career Assessment Instrument.
- This interest inventory includes multiple levels to cater to different age groups (i.e., Kuder Galaxy, Kuder Navigator, Kuder Journey).
 - The inventory includes 32 forced-choice triads for which individuals select from three activities.
 - Clients receive scores on six career clusters similar to the Holland RIASEC themes along with scores for 10 activity preference scales that map onto the career clusters.

27. The Self-Directed Search (SDS), in its fifth edition, is based on Holland's theory of vocational choice, in which the congruence between person and environment is examined to determine career satisfaction. The same six RIASEC categories used to identify personality clusters are used to categorize occupational environments.
28. The SDS is self-administered, self-scored, and self-interpreted. There are six test components: the Assessment Report, the Occupations Finder, the *You and Your Career* booklet, Educational Opportunities Finder, Leisure Activities Finder, and the *SDS Professional Manual*.
 - There are five sections of the SDS: Occupational Daydreams, Activities, Competencies, Occupations, and Self-Estimates. The SDS can be considered an inventory of interests and perceived abilities.
 - It may be advisable to supplement the SDS with the My Vocational Situation inventory.
29. The Career Decision-Making System–Revised is a brief tool with which middle and high school students or postsecondary students and adults rate themselves in terms of interests, school subjects, work values, abilities, and educational plans.
30. The Jackson Vocational Interest Survey is designed for use with high school students, who select between 289 pairs of items interests associated with various job-related activities. It parallels many of the Strong's scales but differs in that it measures academic interests and focuses on occupational clusters instead of specific occupations.
31. My Career Story is a qualitative self-guided workbook consisting of three parts of open-ended prompts: Telling My Story, Hearing My Story, and Enacting My Story. Once complete, the client shares their career story with significant others.
32. The Career Style Interview is a qualitative interview guide that facilitates a client's career self-concept, with particular attention to career interests.
33. Life role analysis is a qualitative approach whereby clients recall the salience of various life roles at three points in their life (past, present, future).

Values Assessments

34. Assessment tools are available to measure both work values and personal values. Work values, a type of personal values, relate to motivations for working. Personal values can entail a broad range of motivations related to school, family, community, leisure, and work.
35. Examples of values measured by inventories might include security, achievement, dominance, conformity, and humility.
36. Common assessments for assessing work values include the O*NET Work Importance Profiler/Work Importance Locator, Work Values Inventory–Revised, Career Orientation Placement and Evaluation Survey, and Values Scale.
37. Common inventories for assessing personal values include the Rokeach Value Survey, Schwartz Value Survey, Portrait Values Questionnaire, Study of Values, Salience Inventory, and Quality of Life Inventory.
38. The O*NET Work Importance Profiler, and its alternative version the Work Importance Locator, is a measure available free to download from the O*NET website. It provides scores for six core values: Achievement, Independence, Recognition, Relationships, Support, and Working Conditions. This tool is useful to use with other instruments available on the O*NET website.
39. The Work Values Inventory–Revised is a tool designed to evaluate the relative importance of 12 values: creativity, mental challenge, achievement, independence, prestige, income, security, work environment, supervision, coworkers, lifestyle, and variety.

40. The Career Orientation Placement and Evaluation Survey, part of the COP-System, measures work values on eight bipolar scales: Investigative versus Accepting, Practical versus Carefree, Independence versus Conformity, Leadership versus Supportive, Orderliness versus Flexibility, Recognition versus Privacy, Aesthetic versus Realistic, and Social versus Reserved.
41. The Values Scale and the Salience Inventory were developed as part of a large study on work importance. The Values Scale expanded the Work Values Inventory to assess 15 work values on 21 scales; values measured in addition to the original Work Values Inventory are physical activity, physical prowess, risk, advancement, personal development, and cultural identity. Scores are provided for five factors (or orientations): Utilitarian Orientation, Orientation Toward Self-Actualization, Individualist Orientation, Social Orientation, and Adventurous Orientation.
42. The Rokeach Value Survey measures preference for various instrumental and terminal values. Instrumental values, such as obedience, forgiveness, and imagination, represent "modes of conduct." Terminal values, such as beauty, adventure, and friendship, represent the "end-states of existence."
43. The Schwartz Value Survey assesses 10 values that are considered applicable to most cultures. These values are arranged in a circumplex model. Counselors may also consider using the Portrait Values Questionnaire, which assesses 19 more narrowly defined values.
44. The Study of Values measures six personal values: Theoretical, Economic, Aesthetic, Social, Political, and Religious.
45. The Salience Inventory measures the importance of five life roles for individuals in the context of Super's life-space, life-span model of career development: studying, working, community service, home, and leisure activities. These life roles are measured using three scales: Participation, Commitment, and Value Expectations.
46. The Quality of Life Inventory evaluates how important individuals perceive 16 typical aspects of life and how satisfied they are with each of these aspects in their lives.
47. Values clarification exercises may be useful for measuring values in lieu of values inventories. Compared to traditional inventories, values clarification exercises require clients to engage in self-assessment at a deeper level that considers actual behavior as well as preferences. The exercises ask clients to review their beliefs and behaviors in response to different situations.
48. In addition to several career planning workbooks that include values clarification exercises, the Life Values Inventory and the Sustainable Career Card Sort (SCCS) are popular tools. The Life Values Inventory is used to explore through quantitative and qualitative items how various intrarole and interrole value conflicts may impact career choice. The SCCS is a qualitative tool in which the client sorts 19 cards, each representing a societal role.

Assessment of Personality

Introduction to Personality Assessment

1. Personality assessments tend to be categorized as structured or unstructured, also referred to as objective and projective assessments, respectively. Structured assessments are typically more standardized measures with forced-choice formats; unstructured assessments are those that seek responses to ambiguous items or tasks to showcase personality traits or states, also known as the projective hypothesis.
2. Objective personality assessments tend to be constructed using one of four methods: logical content, theoretical, criterion group, or factor analysis.
 - The logical content method involves the test developer identifying items that correspond with the apparent domain or content of the characteristic being assessed.
 - The theoretical method involves developing items that are aligned with an underlying construct.
 - The criterion group method refers to developing items that relate well to a group of individuals known to possess a particular characteristic. Then, the criterion group is compared with a control group on those items, and items that distinguish the groups well are retained.
 - The factor analysis method involves the test developer using a statistical procedure—factor analysis—to review shared variance among items to detect latent constructs or factors.

Structured Personality Assessments

3. There are two assessment inventories clustered as the Minnesota Multiphasic Personality Inventories: the Minnesota Multiphasic Personality Inventory–3 (MMPI-3) and the Minnesota Multiphasic Personality Inventory–Adolescent–Restructured Form (MMPI-A-RF). *T* scores of 65 or higher are clinically significant, and scores between 60 and 65 can indicate possible psychological problems.

- The MMPI-3 contains 335 items and includes 52 scales: 10 validity scales, three higher order scales, nine restructured clinical scales, 25 specific problems scales, and five personality psychopathology scales. Validity scales are available to detect response sets for clients. Higher order scales include Emotional/Internalizing Dysfunction, Thought Dysfunction, and Behavioral/Externalizing Dysfunction. The eight restructured clinical scales are Demoralization, Somatic Complaints, Low Positive Emotions, Antisocial Behavior, Ideas of Persecution, Dysfunctional Negative Emotions, Aberrant Experiences, and Hypomanic Activation. The specific problems scales are categorized as Somatic/Cognitive scales, Internalizing scales, Externalizing scales, and Interpersonal scales. The five personality psychopathology scales include Aggressiveness, Psychoticism, Disconstraint, Negative Emotionality/Neuroticism, and Introversion/Low Positive Emotionality–Revised.
 - The MMPI-A-RF is the most updated personality assessment for adolescents. It includes 241 true/false items and 48 scales.
4. The Millon Clinical Multiaxial Inventory–IV and its version for adolescents, the Millon Adolescent Clinical Inventory–II, conceptualize personality style on three levels: normal/adaptive functioning, abnormal/moderately maladaptive, and clinical. The former contains 15 personality disorder scales and 10 clinical syndrome scales. The latter contains 60 scales and five clinically relevant categories.
 5. The Millon Index of Personality Styles–Revised is a personality inventory designed to evaluate “normal” adult personality. It contains 24 scales and four validity indices to provide information on three dimensions of normal personality: motivating styles, thinking styles, and behaving styles.
 6. The Personality Assessment Inventory (PAI) is a tool used with adults ages 18 years or older. The PAI contains 22 scales clustered as one of four types of scales: validity scales, clinical scales, treatment scales, and interpersonal scales. The clinical scales parallel many of the MMPI scales and can be categorized as neurotic spectrum, psychotic spectrum, and behavior disorder scales. The treatment scales provide clinically relevant information related to interpersonal problems.
 7. Other PAI scales exist, such as the PAI–Adolescent, PAI–European Spanish With Norms, and the Personality Assessment Screener.
 8. The Myers-Briggs Type Indicator (MBTI) is a measure of normal personality characteristics using eight scales (four pairs or dimensions) based in Carl Jung’s theory.
 - The first dimension is extraversion versus introversion (E-I), which relates to individuals’ preference for where they draw or focus energy (i.e., toward people or the outer world, or internally or toward their inner world).
 - The second dimension is sensing versus intuition (S-N), which refers to how individuals perceive information (i.e., through five senses or through indirect perception).
 - The third dimension is thinking versus feeling (T-F) and relates to how individuals judge obtained data.
 - The fourth dimension is judging versus perceiving (J-P), which relates to how individuals opt to interact with the outside world and implement decision making.
 9. The California Psychological Inventory Third Edition (CPI 434) and its shorter version (CPI 260) assess an individual’s positive, everyday personality attributes, referred to as folk concepts. The scales include Dominance, Capacity for Status, Sociability, Social Presence, Self-Acceptance, Independence, Empathy, Responsibility, Socialization, Self-Control, Good Impression, Community,

Well-Being, Tolerance, Achievement via Conformance, Achievement via Independence, Intellectual Efficiency, Psychological Mindedness, Flexibility, and Femininity-Masculinity. These concepts or scales are placed in an interpretive three-dimensional model.

10. The Sixteen Personality Factor Questionnaire includes 16 scales and five global factors (Extraversion, Anxiety, Tough-Mindedness, Independence, Self-Control); the global factors are similar to the Big Five factors. There are two additional versions of the Sixteen Personality Factor Questionnaire: the High School Personality Questionnaire and Children's Personality Questionnaire.
11. The NEO Personality Inventory-Revised was explicitly designed to measure the Big Five personality factors (i.e., Neuroticism, Extraversion, Openness, Agreeableness, and Conscientiousness). There is also a shortened version: the NEO Five Factor Inventory.
12. The Coopersmith Self-Esteem Inventory is used to measure individuals' self-evaluations as they relate to social, academic, family, and other personal experiences. They consist of three forms: the School Form and School Short Form (for ages 8 to 15) and the Adult Form. The School Form provides six scores: a total self-esteem score; subscale scores related to peers, parents, school, and personal interests; and a Lie scale score. The School Short Form and the Adult Form have only a total self-esteem score.
13. The Behavioral Academic Self-Esteem tool is a rating scale that can be used to triangulate self-reported information reported on the Coopersmith.
14. The Tennessee Self-Concept Scale, Second Edition, which includes two forms for ages 7 to 14 as well as ages 13 and older, is a popular measure of self-concept. It includes 14 scales. The Piers-Harris Children's Self-Concept Scale is similar to the Tennessee Self-Concept Scale and is tailored toward individuals in Grades 3-12.

Unstructured Personality Assessments

15. Unstructured or projective tests allow for multiple responses toward ambiguous stimuli; these responses may be used to infer information about an individual's personality.
16. Although these tests are reported to be minimally used in counseling professions, they do possess clinical value.
17. Projective techniques can be classified in five ways: association to inkblots or words, story construction or sequences, sentence or story completion, picture arrangement/selection of verbal choices, and drawing or play techniques.
18. The Rorschach Inkblot Method is the most widely used projective test in the helping professions. It involves a series of 10 inkblots, and responses are categorized according to the location of the response on the inkblot, the feature that determined the response, and the content of the response. The Exner Scoring System is the most popular scoring scheme used today.
19. The Thematic Apperception Test (TAT) and other story construction techniques such as the Children's Apperception Test and TEMAS (Tell-Me-A-Story) provide opportunities for a client to look at cards and make up and detail the sequence of a story. The TAT includes 30 black-and-white cards, 20 of which are used during test administration; most cards are drawings of humans. The Children's Apperception Test consists of 10 pictures to use with children ages 3 to 13 and uses animals in the drawings. TEMAS is intended to be an adaptation of the TAT for use with diverse populations and uses nine to all 23 of the available cards to evaluate cognitive, personality, and affective information regarding a client's stories.

20. Figure drawing methods require a client to draw a figure, tree, and/or house; these drawings are intended to reflect how a client feels about themselves and others. Methods include the Draw-A-Person Test (DAP), Kinetic Family Drawing (KFD), and House-Tree-Person (HTP).
21. The DAP, developed from the Draw-A-Man task, involves presenting a child or adolescent with the task of drawing a person using paper and pencil. Given the psychometric concerns with the technique, counselors should integrate the technique into their overall assessment of the presence of emotional and behavioral problems.
22. The KFD asks the client to draw a picture of themselves and their family all doing something. Through inquiry, the counselor can understand information about individual family members; relationships among family members; and demographic information, attitudes, thoughts, and feelings about them.
23. HTP is a projective drawing technique that relies on a child drawing a house, tree, and person and describing features of each. It was designed as an extension of the DAP.
24. The Rotter Incomplete Sentences Blank consists of 40 sentence fragments written in the first person. A single overall adjustment score can be calculated, although counselors can use responses to initiate session content on a variety of topics.

Assessment of Interpersonal Relationships

Interpersonal Relationship Assessment

1. Humans are naturally social creatures, and the quality of interpersonal relationships impacts wellness, personality, academic ability, career decision-making, and so on.
2. The convoy model can be a useful tool for helping counselors understand the influence of clients' interpersonal relationships. The model assumes that antecedents of interpersonal relationships, such as personality and situational factors, will impact the quality and extent of social relationships, which can predict consequences of a client's social or personal network.
3. The hierarchical mapping technique is an interpersonal relationship assessment approach based in the convoy model. It includes three dimensions: social structure, social support, and support satisfaction.

Genograms

4. A genogram is a graphic representation of family systems and interactions based on Bowen's family system theory. It is a type of graphic model that tends to include three generations of a client's family of origin. The tool can show successes and challenges in families across multiple generations as well as major events and relationships among members—and the quality of those relationships.
5. Common genogram symbols are included in Figure 14.1, and several software programs are available for counselors to use to develop genograms.
6. Developing a genogram can be compared to casting a wider and wider net to capture information regarding family relationships and dynamics.

Networking Mapping Techniques

7. Like genograms, there are several network mapping techniques available to identify information about the client's social or personal networks. These techniques can range from freestyle drawing to systematic evaluation of pairs of all network members. These include the hierarchical mapping technique and the Mannheim Interview on Social Support (MISS).

8. Hierarchical mapping is a visual diagram of three concentric circles in which clients place members of their support system based on different degrees of closeness or perceived support. The hierarchical mapping technique has been adapted to include additional concentric circles as well as to cluster similar network members.
9. The MISS is a structured interview designed to map a client's individual support network and each network member's characteristics and functions. Members are mapped for psychological, instrumental, everyday, and crisis support roles.

Assessment of Couples and Families

10. Assessment of couples requires a counselor to examine multiple relationships dynamics and interactions and provides an opportunity to triangulate information from multiple sources in the process.
11. The literature indicates that formal assessment inventories are minimally used in the counseling process; however, there are several prominent common inventories with which counselors should be familiar. Caution must be exercised, as most were developed using White middle-class couples.
12. In addition to more formal measures, counselors should consider using informal measures such as observation and interview protocols, self-monitoring methods, and genograms, to name a few. The Person-in-Environment (PIE) assessment method is a graphic method and interview approach that can be used to examine family roles within individual, couples, and/or family counseling. Clients individually identify roles they have and then divide the "pie" based on the percentage or importance of each role to them. Their drawings are then used to facilitate discussion about family roles among couples and families.
13. The Myers-Briggs Type Indicator is a measure of four personality dimensions, discussed in Chapter 13. It could be particularly useful in couples and family counseling to help individuals understand their communication patterns and preferences for interaction and decision-making.
14. The Taylor-Johnson Temperament Analysis, a tool commonly used in premarital counseling, investigates relationship and personal adjustment factors. Specifically, 18 traits are measured on nine bipolar scales. Scores can be compared among partners or family members.
15. The Marital Satisfaction Inventory–Revised assesses couples' interactions and the extent of couples' distress. It provides scores for 13 subscales as well as a Global Distress scale. Scores for partners are combined on a single profile to investigate areas of agreement and disagreement.
16. The Derogatis Sexual Functioning Inventory is a popular measure for exploring sexual functioning that also provides information about sexual satisfaction. It is intended to measure current functioning, although some of the scales explore lifetime experiences.
17. PREPARE and ENRICH are two parallel forms of a survey that explores relationship strengths and challenges, with attention to communication patterns, family dynamics, and significant stressors. The survey includes 12 relationship scales, five SCOPE (Social, Change, Organized, Pleasing, Emotionally Steady) personality scales, four couple and family scales, and several customizable scales.
18. The Couples Precounseling Inventory is a measure designed to evaluate couples in 12 relationship areas to aid in treatment planning in couples counseling.
19. The Family Environment Scale assesses a family member's perception of the family as it is, as it is preferred to be, and as it is expected to react to new situations. Ten scales make up three larger domains: the family relationship domain, the personal growth domain, and the system maintenance change domain.

20. The Family Assessment Measure–III is used in family counseling to evaluate family strengths and challenges. Specifically, it evaluates general family functioning, how a family member perceives another family member, and self-ratings of a family member's own functioning.
21. Sternberg's Triangular Love Scale measures three components of relationships: intimacy, passion, and commitment.
22. The Dyadic Adjustment Scale is designed to assess the quality of interpersonal adjustment in couples. It contains four subscales: Dyadic Consensus, Dyadic Satisfaction, Dyadic Cohesion, and Affectional Expression.

Assessment of Intimate Partner Violence

23. Intimate partner violence (IPV) is actual or threatened physical, emotional, and/or sexual abuse against a partner by another partner in a romantic relationship. IPV is predominantly reported by women, with 41% of women and 26% of men reporting IPV during their lifetimes. Women with multiple oppressed statuses encounter more pronounced consequences, given discrimination experiences as well as limited resources.
24. Research tends to show a heterosexual bias toward couples reporting IPV, in which each partner in a same-sex relationship tends to be blamed equally as compared to male-to-female violence, in which each partner is not equally blamed (males are blamed more).
25. Counselors are to be aware of multiple limitations in IPV assessments today, including the type of relationships assessed, the predominance of emotional and physical abuse being evaluated compared with sexual abuse, the limited measure of imminent risk factors, the minimal evaluation of family dynamics and roles in perpetuating IPV, inattention to available support, and the lack of scoring information or flexible item response options, as well as limited reliability and validity information.
26. It is important for counselors to evaluate how individuals conceptualize IPV, to what extent has IPV been a part of their current and past romantic and family relationships, what supports they have, and what data from multiple assessment sources tell the counselor about clients' current situation.

Assessment of Child Abuse

27. Similar to IPV, there are three major types of child abuse: physical, sexual, and psychological. In addition, neglect is an act or omission that deprives a child of basic needs.
28. Counselors are to be aware of the short- and long-term consequences of child abuse. Consequently, they should use multiple types of assessment tools to measure these consequences and risk factors. Correlates may include depression and suicidality, anger, aggression, cognitive distortions, risk-taking behaviors, and difficult interpersonal relationships.
29. Counselors should attend to abuse factors such as age of onset, duration and intensity, frequency, guilt and feelings of powerlessness, ongoing support, and resiliency.
30. Native American children have the highest rate of victimization (15.5 per 1,000 children), and Black children have the second highest victimization (13.2 per 1,000 children). The three largest percentages of perpetrators are White (48.4%), Black (20.8%), and Hispanic (20.1%).

Assessment of Elder Abuse

31. As the older population lives longer, there is an increased risk for elder abuse and maltreatment within this population. Currently, about one in 10 individuals ages 60 and older experience elder abuse.

32. In addition to sexual, psychological, and physical abuse common with IPV, forms of elder abuse include confinement, passive neglect, willful deprivation, and financial exploitation.
33. One cited tool for evaluating elder abuse is the Elder Abuse Suspicion Index (EASI), which is a six-item screening tool that evaluates the presence of elder abuse within the past 12 months.

Additional Interpersonal Assessment Inventories

34. Additional interpersonal assessment inventories are available to capture information about relationships other than those in couples and families.
35. These include the Checklist of Interpersonal Transactions, the Checklist of Psychotherapy Transactions, the Interpersonal Compass, the Impact Message Inventory, the Interpersonal Adjective Scales, and the Thomas-Kilman Conflict Mode Instrument.

Community Asset Mapping

36. The work counselors do is not an individual process, and evaluating a client's social, familial, and community contexts through community asset mapping (CAM) is critical.
37. CAM is a strengths-based approach to identify and document available resources; the CAM process itself can be a therapeutic and empowering process for the client.
38. CAM benefits include client empowerment, enhanced community understanding, bolstered resource capacity, and increased community well-being.
39. In addition to partnering with the client, counselors can partner with other practitioners and community members to conduct CAM as they build a resource database for clients. Four CAM steps include creating a multidisciplinary team, identifying known and potential resources, contacting individual and community resources, and developing and maintaining a community resource guide.
40. For school counselors, CAM can be a powerful tool for supporting college readiness.

Communication of Assessment Findings

Introduction to Communicating Assessment Findings

1. Communication of findings can be considered the last phase of the assessment process, although the process can cycle again as new data are introduced. In general, the steps of the assessment process are assessment selection, administration, scoring/interpretation, and communication.
2. As counselors communicate assessment findings, it is important to be cognizant of the client's understanding of the assessment as well as their reactions to the assessment. In addition, counselors are to identify both strengths and opportunities presented in the assessment findings.
3. Counselors are to be cognizant of the counseling relationship process as they communicate findings and plan for use of the data, listening attentively and observing nonverbal behaviors and cultural information as relevant.

The Assessment Interpretation Interview

4. The literature identifies five steps of the assessment interpretation interview: check in with the client, provide structure for the interpretation, review the findings, integrate the findings, and plan for the future.
 - As an initial step, the counselor will want to check in with the client to see how they felt on the day the assessment was administered as well as what reactions the client has regarding the assessment itself.
 - The second step involves reviewing the purpose of the assessment using a clear and useful description.
 - The third step relates to the counselor and client looking over the assessment together, reviewing scores and other assessment data in the clearest and simplest manner.
 - The fourth step involves integrating the assessment findings with other information known about the client. This will assist the counselor in making the data relevant to the client as well as providing a more comprehensive interpretation.

- The last step, plan for the future, involves applying the assessment findings in future decisions with the client.
5. The client should summarize toward the end of the assessment interpretation interview what they heard about the findings and next steps.

The Case Conference

6. Counselors at times will meet with other interested parties about a client and relevant assessment data and treatment planning.
7. Counselors are to establish structure for the case conference, soliciting information regarding how each stakeholder will be involved in the conference as well as reminding participants of the purpose of the conference to promote client welfare.
8. Counselors are to infuse relevant nonassessment data during the conference.
9. Counselors can take a “bad news sandwich” approach, in which they layer negative data with more positive data.
10. At the end of the conference, counselors and those involved should summarize what they discussed and address any remaining questions.

The Assessment Report

11. Counselors should be thorough and intentional as they develop the assessment report, as the written report may be the only part of the assessment process others see. With this intentionality in mind, counselors are to be careful about the unintended consequences of the assessment report for the client and any relevant stakeholders.
12. Counselors are to be mindful of ethical and legal principles as they prepare and share the report.
13. The assessment report should be focused, with the purpose of the report clearly stated. Depending on the purpose of the report, supplemental information to the assessment process might be included.
14. Counselors should avoid the following problems in report writing: poor organization, use of psychological jargon or unclearly defined terms, and lack of integrated information regarding the assessment and other client data.
15. The components of an assessment report are as follows: a brief description of the client, the reason for counseling or referral, relevant background information, evaluation procedures, behavioral observations, a report of the assessment results and their interpretation, recommendations, and a brief concluding summary.

Future Trends in Counseling Assessment

The Assessment Process: Looking Back to Look Ahead

1. Looking back on the types of assessments that have been used over the past 150+ years and how they have been used can be useful in determining how assessments will be used in the future.
2. The purpose of assessment throughout time has been to facilitate decision-making and client and counselor knowledge, awareness, and skills. Tools have been used for screening, accountability, and resource allocation purposes, to name a few.
3. The downward trend in assessment usage must be addressed to protect the viability of conducting assessments in the future. Some reasons for this decreased usage include limited attention to assessment in training programs, erosion of health care reimbursement, depletion of time and personnel resources, professionals' limited knowledge of the assessment process, and insufficient advocacy and promotion of the utility of assessment in the counseling process to external stakeholders.

Changing Client Demographics and Assessment Practice

4. The racial/ethnic makeup of the U.S. population will continue to diversify, and by 2060 the proportion of White, non-Hispanic individuals is projected to be 44.3%. Furthermore, the U.S. population is getting proportionately older, and socioeconomic status will remain a significant influence on client outcomes. These changing demographics will require alterations in the assessment process and tools themselves to promote optimal counseling and assessment experiences for an increasingly diverse clientele.
5. Social justice practices in counseling will continue to inform practices in assessment. Counselors will need to remain open to new ways of thinking to best support culturally diverse clients who experience oppression. Strategies include empowering clients and communities, investigating systemic forms of inequity, and creating space for new cultural learning.

Globalization and Problematizing Counseling and Assessment

6. Globalization, the process of interacting with various societies across the world, will continue to influence the process of assessment. As counselors engage with international counselors and conduct counseling in international settings, the way in which counseling is conceptualized and practiced will change.
7. The process of problematizing refers to questioning assumptions about the practice of counseling and assessment, including dismantling constructs and current assessment methods and content.
8. As we become a globalized society, counselors may integrate the four Rs of Indigenous ways of knowing: relational accountability/responsibility, respect, reciprocity, and rights and regulations.
9. Indigenous research practices can be adapted to ensure that assessment practices are more multiculturally and social just.

Greater Attention to Client, Counselor, and Community Wellness

10. Wellness is increasingly being recognized as an integral part of assessment practices and procedures. Thus, wellness advocacy at the client, counselor, and community levels will be an important part of counseling practice well into the future.
11. Assessment tools that focus on nonpathology and client strengths (e.g., wellness, resilience, self-esteem) are expected to expand. This includes community asset mapping tools discussed in Chapter 14.
12. Counselor self-care will increasingly be part of wellness assessment, and there will be an increase in tools that evaluate counselor wellness and self-care.

Technological Advances

13. Increased technology in the future will allow counselors to engage in more accurate, efficient, and contextualized assessment processes.
14. Some technological aids that will continue to inform the assessment process include computers, tablets, avatars and virtual reality systems, biofeedback measures and neuroimaging equipment, and social media.

Increased Sophistication of Assessment Process

15. As the assessment process becomes more sophisticated, there will be increases in the use of formative assessment, assessment of learning and other meta-cognitive processes, procedures that facilitate ecological validity, evaluation of nonpathology, and qualitative assessments.
16. Dynamic assessment is one example of assessment of the process of learning and instruction that will increase in the future.
17. It is important for counselors to develop assessment tools that approximate real-life experiences or have ecological validity. This will facilitate client engagement as well as increase the meaningfulness of assessment findings.
18. Qualitative assessments will receive greater attention as their own tools or as supplements to other traditional measures.

The Continuation and Adaptability of Educational Accountability

19. The Every Student Succeeds Act (ESSA), the successor of the No Child Left Behind Act, aims to maximize student opportunity by creating additional support for “disadvantaged schools” while building opportunities such as pre-school access, college and career readiness, and wraparound services.

20. In the future, there will be greater attention given to the process of how individuals learn in educational settings, using more complex assessments to understand this process.
21. With more flexibility in demonstrating educational accountability, counselors will increasingly collaborate with education professionals.

Assessment and Managed Care

22. The Patient Protection and Affordable Care Act, or the Affordable Care Act, serves to provide health care coverage to Americans who may not have had coverage previously while helping to provide consumer protections for those who have private health insurance.
23. Substantial numbers of screenings and other interventions are part of the preventive services provided by the Affordable Care Act. These new services to clients will likely increase the number of assessments done among those covered under that system.
24. Counselors working with clients with private health care insurance will have to continually advocate with those insurance companies for the use of assessments as a cost-savings measure.

Building Assessment Systems

25. More complex assessment systems will be developed as a result of the factors mentioned earlier in Chapter 16. These systems will be able to provide a more complete picture of a client.
26. Complex assessment systems will bring together multiple data sources, including traditional assessment; client self-monitoring; medical, academic, and public records; and simulation and virtual reality feedback, to name a few.
27. Evidence-based assessment is a proposed 12-step system for conducting assessment in a manner that guides treatment planning and ongoing monitoring.

Building Partnerships With Health Professions

28. Counselors will need to be proactive in developing and sustaining partnerships with health professionals. This can involve serving as consultants, providing initial and follow-up assessment services, serving as a referral source, or providing resources and psychoeducational workshops to individuals receiving medical services with psychosocial consequences.
29. Counselors will need to be familiar with the interventions common in the health community to best serve clients.

Assessment as Relevant and Actionable

30. Counselors will increasingly need to be able to provide assessment data in a relevant way to clients, stakeholders, other practitioners, and policy makers.
31. Consequential validity, or the applied consequences of assessment, will continue to become more prominent in the assessment process.
32. The benefits of assessment will need to be expressed in terms of how it relates to various counseling variables and outcomes. The Association for Assessment and Research in Counseling will be an invaluable resource for counselors as the future of assessment unfolds.

The Next Frontier in Assessment Research and Training

33. Additional research will need to be conducted on counseling constructs and processes in addition to assessment practice itself.
34. There remains a great discrepancy between which assessments are used in practice, which are used in research, and which are taught in counselor education programs.



TEST BANK Questions



Chapter 1

Use of Assessment in Counseling

Multiple Choice

1. Which of the following is something counselors would likely investigate during the assessment process?
 - a. Client depression
 - b. Evaluation of a study skills group
 - c. High school dropout rate
 - d. **All of the above**
2. Which of the following categories of assessments would most likely be used to measure personal traits?
 - a. Intelligence
 - b. Ability
 - c. Career
 - d. **Personality**
3. Which of the following categories of assessments would most likely be used to measure attitudes?
 - a. Intelligence
 - b. Ability
 - c. Career
 - d. **Personality**
4. Which of the following categories of assessments would most likely be used to measure information acquired in a particular content domain?
 - a. Intelligence
 - b. **Ability**
 - c. Career
 - d. Personality

5. Which of the following categories of assessments would most likely be used to measure interests?
 - a. Intelligence
 - b. Ability
 - c. **Career**
 - d. Personality

6. Which of the following categories of assessments would most likely be used to measure general cognitive ability?
 - a. **Intelligence**
 - b. Ability
 - c. Career
 - d. Personality

7. Tests can be used to measure current performance or attributes, which can be compared to:
 - a. A criterion
 - b. Previous performance
 - c. A normative sample
 - d. **All of the above**

8. Scales of measurement common in the social sciences include which of the following?
 - a. Time
 - b. Mass
 - c. Temperature
 - d. **None of the above**

9. Which of the following is a measurement label that takes on more than one value?
 - a. **Variable**
 - b. Psychometric item
 - c. Test
 - d. Measure

10. Which of the following is also known as a confounding variable?
 - a. Dichotomous variable
 - b. Continuous variable
 - c. **Extraneous variable**
 - d. Ordinal variable

11. Hair color is an example of which type of variable?
 - a. **Categorical**
 - b. Continuous
 - c. Extraneous
 - d. Ordinal

12. Height is an example of which type of variable?
 - a. Categorical
 - b. **Continuous**
 - c. Extraneous
 - d. Ordinal

13. Rating scales that require a forced choice during the observation of a particular behavior would classify as measuring what type of variable?
 - a. **Categorical**
 - b. Continuous
 - c. Extraneous
 - d. Ordinal
14. Open-ended questions on a survey measuring anxiety would likely assess that trait as which type of variable?
 - a. Categorical
 - b. **Continuous**
 - c. Extraneous
 - d. Ordinal
15. Which type of instrument scale is based on the belief that people think dichotomously?
 - a. Guttman
 - b. **Semantic differential**
 - c. Likert
 - d. Thurstone
16. A counselor is conducting a program evaluation of a smoking cessation group. If group members are engaged in other types of cessation methods, those methods could likely be considered which type of variable?
 - a. Categorical
 - b. Continuous
 - c. **Extraneous**
 - d. Ordinal
17. Which of the following ways can assessment be used to classify clients?
 - a. **Certification**
 - b. Self-awareness
 - c. Theory development
 - d. Treatment planning
18. Teaching a client how to engage in self-care is a form of:
 - a. mesolevel wellness advocacy
 - b. **microlevel wellness advocacy**
 - c. macrolevel wellness advocacy
 - d. burnout prevention
19. Identifying client wellness resources in the surrounding community is a form of:
 - a. mesolevel wellness advocacy
 - b. microlevel wellness advocacy
 - c. **macrolevel wellness advocacy**
 - d. burnout prevention
20. Consulting with the client's physician to support their mental and physical well-being is a form of:
 - a. **mesolevel wellness advocacy**
 - b. microlevel wellness advocacy
 - c. macrolevel wellness advocacy
 - d. burnout prevention

21. Which problem-solving step is most linked to goal setting?
 - a. Problem orientation
 - b. Problem identification
 - c. **Generation of alternatives**
 - d. Decision-making

22. Which problem-solving step is most characterized by identifying client strengths?
 - a. Problem orientation
 - b. Problem identification
 - c. **Generation of alternatives**
 - d. Decision-making

23. Which problem-solving step is most characterized by client readiness to make change and address a problem?
 - a. **Problem orientation**
 - b. Problem identification
 - c. Generation of alternatives
 - d. Decision-making

24. Which problem-solving step involves assessing the probability of success for solving a problem?
 - a. Verification
 - b. Problem identification
 - c. Generation of alternatives
 - d. **Decision-making**

25. Which problem-solving step is most closely linked to a counselor's evaluation of a particular client intervention?
 - a. **Verification**
 - b. Problem identification
 - c. Generation of alternatives
 - d. Decision-making

26. When did the earliest form of assessment appear?
 - a. Mid-1600s
 - b. Late-1700s
 - c. Mid-1800s
 - d. **None of the above**

27. Brass instruments were used as tools in what early form of assessment?
 - a. Ability
 - b. **Intelligence**
 - c. Career
 - d. Personality

28. One of the successes in early intelligence assessment was the discovery of which of the following?
 - a. **Individual differences**
 - b. Group differences
 - c. Eugenics
 - d. Statistics

29. Which of the following variables was historically evaluated during intelligence testing?
- Head size
 - Reaction time
 - Hand squeeze
 - All of the above**
30. Who coined the term *mental test*?
- Charles Darwin
 - Francis Galton
 - Wilhelm Wundt
 - James Cattell**
31. Place these intelligence testing developments in chronological order, with the earliest development listed first:
- Sequin form board, mental tests, Binet-Simon scale, Stanford-Binet Scale
 - Binet-Simon scale, Sequin form board, Stanford-Binet Scale, eugenics
 - Eugenics, mental tests, Stanford-Binet Scale, Binet-Simon scale
 - Mental tests, Sequin form board, Binet-Simon scale, Stanford-Binet Scale**
32. Which of the following is associated with cultural bias in intelligence testing?
- Goddard's intelligence testing at the Vineland Training School
 - Galton's eugenics movement
 - Knox's testing with immigrants
 - Both a and b**
33. Which of the following intelligence tests is associated with group intelligence testing?
- Stanford-Binet Scale
 - Sequin form board
 - Army Beta**
 - SAT
34. Which type of test was in increasing demand as careers became more specialized in the United States?
- Individual intelligence
 - Group intelligence
 - Personality
 - Ability**
35. Who from among the following is not associated with the ability testing movement?
- Thorndike
 - Parsons**
 - Goslin
 - None of the above
36. The Boston Vocational Bureau was established to do which of the following?
- Screen potential recruits for flight engineers
 - Assist adults with intellectual disabilities
 - Counsel school youth on vocational and social needs**
 - Develop advances in career assessment for urban centers

37. What is considered the most widely used ability test in the world?
- Kuder Preference Record
 - Armed Services Vocational Aptitude Battery**
 - Strong Vocational Interest Blank
 - Strong Interest Inventory
38. Which of the following assessments is not considered a projective test?
- Kuder Preference Record**
 - Rorschach Inkblot Test
 - House-Tree-Person
 - Thematic Apperception Test
39. According to research on the assessments most frequently used by mental health counselors, which of the following does not rank in the top 15?
- Beck Depression Inventory
 - Myers-Briggs Type Indicator
 - Mini-Mental State Examination
 - Woodcock-Johnson Personality Test**
40. According to research on the assessments most frequently used by school counselors, which of the following does not rank in the top 15?
- ACT
 - GRE**
 - SAT
 - Conners' Rating Scales
41. An example of S-data would most likely yield from which form of assessment?
- Teacher rating scale
 - School dropout rates
 - Reaction time
 - Opinion questionnaire**
42. A family interview included as part of an intake process for an individual struggling with depression would be considered which type of data?
- S-data
 - O-data**
 - F-data
 - None of the above
43. The Beck Depression Inventory is an example of what kind of an assessment?
- Idiographic
 - Nomothetic**
 - Ipsative
 - Norm referenced
44. Which of the following settings is most likely to use the multi-tiered systems of support model?
- Career
 - Addictions
 - Telehealth
 - School**

45. Which of the following settings is most likely to deal with access issues due to a digital divide?
- Career
 - Addictions
 - Telehealth**
 - School

True or False

- T F 1. Counselors mainly use assessment procedures for academic and career decision-making only.
- T F 2. Counselors can use the assessment process as a treatment intervention with clients.
- T F 3. Ability assessment is also referred to as intelligence or aptitude assessment.
- T F 4. Questionnaires are typically standardized tests used in counseling.
- T F 5. Extraneous variables should be controlled in assessment, given their impact on measuring the independent variables.
- T F 6. The assessment process can be synonymous with the problem-solving process.
- T F 7. During the problem-solving process, it is important that clients are prepared to acknowledge that there is an issue to be addressed and evaluated in counseling.
- T F 8. Tests are useful in identifying characteristics unique to a particular person.
- T F 9. Individual assessments are useful for group comparison when the comparison group is culturally similar to the one used for developing the assessment tool.
- T F 10. It is possible to measure purely innate characteristics.
- T F 11. Mental testing was once historically synonymous with intelligence testing.
- T F 12. The intelligence quotient is calculated by dividing the mental age by the chronological age and then multiplying by 100.
- T F 13. The Army Alpha test is a nonverbal counterpart to the Army Beta test.
- T F 14. Career assessment largely grew out of a need to reform intelligence testing.
- T F 15. The first personality questionnaire was the Woodworth Personal Data Sheet.
- T F 16. Most counseling assessments are idiographic assessments.
- T F 17. Research indicates that telehealth assessment is less efficacious than face-to-face assessment.



Chapter 2

The Assessment Process

Multiple Choice

1. Which type of assessment is most likely to consider environmental factors of the client?
 - a. Power test
 - b. Speed test
 - c. Standardized assessment
 - d. **Nonstandardized assessment**
2. Which type of assessment is most intended to facilitate client self-awareness?
 - a. Power test
 - b. Speed test
 - c. Standardized assessment
 - d. **Nonstandardized assessment**
3. Which of the following is a major concern of standardized assessments?
 - a. The lack of dependability of test results
 - b. **The subjective nature of test scores**
 - c. The systematic nature of test administration
 - d. The sample composition of the norm group
4. Which of the following assessment methods would least likely be timed?
 - a. Power
 - b. Speed
 - c. **Qualitative**
 - d. None of the above
5. Soliciting information regarding a client's trauma experiences storied within their physical bodies most likely refers to identifying:
 - a. **implicit memories**
 - b. explicit memories
 - c. narratives
 - d. somatic symptoms

6. Failing to note instances of aggression in a classroom observation after increasing the amount of observation is an example of what type of rater error?
 - a. Restriction-of-range error
 - b. Halo effect
 - c. Drift
 - d. **Decay**

7. Failing to note instances of aggression in a classroom observation because the way in which aggression is “counted” is redefined is an example of what type of rater error?
 - a. Restriction-of-range error
 - b. Halo effect
 - c. **Drift**
 - d. Decay

8. Failing to note instances of aggression in a classroom observation because of using previous experiences with a student to make judgments is an example of what type of rater error?
 - a. Restriction-of-range error
 - b. **Halo effect**
 - c. Drift
 - d. Decay

9. Failing to note instances of aggression in a classroom observation because of rating all students as behaving “normally” is an example of what type of rater error?
 - a. **Restriction-of-range error**
 - b. Halo effect
 - c. Drift
 - d. Decay

10. When interviewing a client with the intent of excluding experiences outside of the presenting problem, _____ questions may be most helpful.
 - a. structural
 - b. substituting frame
 - c. circular
 - d. **contrast**

11. The following assessment method would be most useful with clients in group counseling settings:
 - a. Participant observation
 - b. Ethnographic interviewing
 - c. Biodata
 - d. **Story circle**

12. A college counselor interested in evaluating disordered eating in a student would be most interested in which example of biodata?
 - a. Heart rate
 - b. Weight
 - c. **Grade point average**
 - d. Purging frequency

13. A _____ assessment method most allows the client to introduce culturally based reasons for mental health concerns:
 - a. card sort
 - b. ecomap
 - c. graphic
 - d. **body mapping**

14. Card sorts have been mainly used for:
 - a. **career exploration**
 - b. mental distress
 - c. trauma recovery
 - d. substance abuse

15. The assessment method that least likely relies on the client's narrative is:
 - a. self-characterization
 - b. lifeline
 - c. **card sort**
 - d. body mapping

16. Which of the following is not considered a basic principle of conducting assessments?
 - a. Consider the purpose of the assessment
 - b. Use several methods of assessment
 - c. **Focus on only one problem or disorder**
 - d. Collaborate with the client during the assessment process

17. A test is considered to be standardized if:
 - a. Objective scoring is used
 - b. There are uniform procedures for test administration
 - c. Representative norm groups are used during test interpretation
 - d. **All of the above**

18. Individuals who seek counseling in what stage usually do so at the insistence of someone else?
 - a. **Precontemplation**
 - b. Contemplation
 - c. Preparation
 - d. Maintenance

19. A client celebrates one month of sobriety. Which stage of change are they most likely at?
 - a. **Action**
 - b. Maintenance
 - c. Preparation
 - d. Contemplation

20. A client at which stage of change is least likely to benefit from the assessment process?
 - a. **Precontemplation**
 - b. Maintenance
 - c. Contemplation
 - d. Preparation

21. Which of the following describes placing too much emphasis on information obtained early in the interview?
 - a. **Anchoring**
 - b. Availability
 - c. Diagnosing
 - d. Attribution

22. Which of the following is a major strength of unstructured interviews in counseling?
 - a. Reliability of item scores
 - b. **Flexibility of interview process**
 - c. Sequencing of interview protocol
 - d. None of the above

23. During the administration of an ability test, the administrator informs individuals that the test is intended to measure verbal ability—a construct most of the group has internalized as inadequate within themselves. What type of error has been introduced?
 - a. Restriction of range
 - b. Rosenthal effect
 - c. **Stereotype threat**
 - d. Decay

24. As a counselor works with a couple and administers a marital satisfaction inventory, the counselor notes how well the couple will score, given their recent reports in counseling. What type of error has been introduced?
 - a. Restriction of range
 - b. **Rosenthal effect**
 - c. Stereotype threat
 - d. Decay

25. If a counselor intends to hand score an assessment, it is recommended that they do which of the following?
 - a. Supplement with a computer-based interpretation
 - b. **Use multiple scorers**
 - c. Readminister the assessment
 - d. None of the above

26. Computer-based test interpretations are most likely to provide which of the following?
 - a. Individualized score reports
 - b. Situational information for interpretation
 - c. **Standardized score reports**
 - d. All of the above

27. Administering a session rating scale is an example of which of the following?
 - a. Observing client behaviors
 - b. Assessing client outcomes
 - c. **Monitoring client progress**
 - d. Preparing a client for change

28. Comparing pre- and posttest scores on a career maturity inventory during a termination session is an example of which of the following?
- Observing client behaviors
 - Assessing client outcomes**
 - Monitoring client progress
 - Preparing a client for change
29. Periodically identifying session themes across several sessions to identify trends is an example of which of the following?
- Observing client behaviors
 - Assessing client outcomes
 - Monitoring client progress**
 - Preparing a client for change
30. Which of the following is a danger in not engaging in monitoring client progress?
- Clients may terminate prematurely from counseling**
 - Counselors may change the interventions they planned to use
 - Counselors could test clients too often
 - Client outcomes may not be reliable
31. Which of the following examples of monitoring client progress is most likely found in school settings?
- Feedback-enhanced therapy
 - Treatment failure modification
 - Evaluating stages of change
 - Response to intervention**
32. One of the most useful characteristics of an assessment in terms of monitoring client progress is its ability to:
- Be sensitive to measuring change in client symptomatology**
 - Include an opportunity to identify immediate client goals
 - Have longitudinal data supporting the tool
 - Provide visual data for clients
33. Which of the following assessment tools can be used as an intervention within itself?
- Client satisfaction forms
 - Client self-report scales
 - Client self-monitoring**
 - Rating scales

True or False

- T F 1. Speed is a necessary precursor of power tests.
- T F 2. The greater amount of time a counselor observes a client, the greater the chance for rating errors to occur.
- T F 3. A client's readiness for change is linked to how beneficial the assessment process is for the client.
- T F 4. Expectancy effects during test administration are most likely to produce more realistic test scores.
- T F 5. Computer-based test interpretation is intended to be an efficient way for counselors to report findings to a client.

Test Bank Questions

- T F 6. One of the identified concerns of computer-based test interpretation is the risk for leniency error.
- T F 7. One of the identified concerns of hand-scored test interpretation is the amount of time it can take to analyze results.
- T F 8. The purpose of outcome assessment is to create a feedback loop between counseling sessions.
- T F 9. Client self-report scales have the potential disadvantage of clients providing socially desirable responses.
- T F 10. The tools most used by clients to evaluate their behaviors and attitudes between sessions are rating scales.
- T F 11. Biodata provide critical information regarding the client's physiological symptoms.
- T F 12. Tests in Prints is a popular resource that provides counselors with test reviews.
- T F 13. Lifelines is a qualitative assessment method that can help capture client information across time.
- T F 14. A tool that could be used with clients as a self-characterization method is a journal.
- T F 15. Ethnographic interviewing would most benefit from structured interview protocols.

Ethical, Legal, and Professional Considerations in Assessment

Multiple Choice

1. Assessment standards are currently available for counselors engaged in which of the following areas of counseling?
 - a. Neurocounseling
 - b. **Career counseling**
 - c. Forensic counseling
 - d. None of the above
2. Which of the following divisions is actively involved in publishing assessment standards?
 - a. **AARC**
 - b. JCTP
 - c. ADA
 - d. RUST
3. Which professional organization was not responsible for developing the Standards for Educational and Psychological Testing?
 - a. **ACA**
 - b. APA
 - c. NCME
 - d. AERA
4. Which of the following most qualifies as unethical practice during the assessment process?
 - a. Disclosing test results to an insurance company supplied by the client
 - b. Including psychometric evidence from earlier versions of assessment tools
 - c. **Using an outdated tool to evaluate client symptoms**
 - d. Receiving additional training on a tool prior to test interpretation

5. The restriction to test access most affects which of the following?
 - a. Psychologists
 - b. Counselors
 - c. **Clients**
 - d. Social workers

6. The test level involving the most qualifications is likely which of the following?
 - a. Level A
 - b. Level B
 - c. **Level C**
 - d. Level D

7. Which of the following is not a primary example of counselor self-care?
 - a. Humor
 - b. **Receiving client telephone calls at the client's convenience**
 - c. Leaving work activities at the office
 - d. Exercise

8. The Rorschach Inkblot Method is an example of what level of test?
 - a. Level A
 - b. Level B
 - c. **Level C**
 - d. Level D

9. Which of the following may constitute ethical concerns in testing?
 - a. The way test results are stored
 - b. The type of service a client receives regarding test results
 - c. The disclosure of test results
 - d. **All of the above**

10. Which of the following requires educational institutions to release test result information to parents of minor children and to students 18 years or older in some cases?
 - a. Standards for Educational and Psychological Testing
 - b. RUST statement
 - c. **Family Educational Rights and Privacy Act of 1974**
 - d. None of the above

11. When conducting research using assessments, counselors engage in ethical research by doing which of the following?
 - a. Disclosing fully the purpose of the research study and their expectations
 - b. Encouraging research participation among their clients
 - c. Obtaining assent from parents of minors
 - d. **None of the above**

12. The Carl D. Perkins Act (Vocational Education Act of 1984) does which of the following?
 - a. Ensures the confidentiality of student test record by restricting access to scores
 - b. Mandates that students with disabilities receive an individualized education program (IEP)
 - c. **Provides disadvantaged populations access to vocational assessment, counseling, and placement services**
 - d. Secures the privacy of client records

13. Which of the following is a key benefit of using technology in assessment?
 - a. **It offers most clients a more efficient way of self-administering a test**
 - b. It is a low-cost method of administering intelligence tests
 - c. It provides more psychometric information to the client than paper-and-pencil tests
 - d. None of the above

14. Which of the following is most closely aligned with test anxiety?
 - a. Practice effects
 - b. Coaching
 - c. **Previous low scores on a similar test**
 - d. Desensitization techniques

15. Test anxiety has been most closely linked to which of the following?
 - a. Personality testing
 - b. **Ability testing**
 - c. Career assessment
 - d. Neuropsychological assessment

16. What law maintains that clients have the right to their health records (including tests and assessments) and, subsequently, third parties must have appropriate consent to access those records?
 - a. **HIPAA**
 - b. FACT
 - c. FERPA
 - d. JCTP

17. Familiarizing oneself with the format and content of an assessment by self-administering multiple assessments is commonly known as:
 - a. Memory effect
 - b. Automation
 - c. **Practice effect**
 - d. Coaching

True or False

- T F 1. According to the *ACA Code of Ethics*, it is advisable to administer assessments in an unsupervised environment.
- T F 2. Ethics concerning diagnosis are also included in Section E of the *ACA Code of Ethics*.
- T F 3. Most graduates from CACREP-accredited programs will meet the requirements of Level C and Q tests.
- T F 4. When disclosing test results to others, one should communicate findings to others descriptively rather than numerically.
- T F 5. Students who are English language learners may not be well suited for computerized testing.
- T F 6. Studies demonstrating the effects of coaching on test results tend to include control groups as part of their validity evidence.
- T F 7. The limits of confidentiality of assessment include a clear and imminent danger to self or others.
- T F 8. Having a social justice orientation is considered a core value of assessment.

Multicultural and Social Justice Considerations in Assessment

Multiple Choice

1. Which of the following represents components of the Multicultural and Social Justice Counseling Competencies?
 - a. Client worldview
 - b. Counseling relationship
 - c. Counselor self-awareness
 - d. **All of the above**
2. A counselor is interested in exploring their cultural background to understand how it may impact their counseling practice. This multicultural and social justice competency domain is most likely:
 - a. Awareness
 - b. **Knowledge**
 - c. Skill
 - d. Action
3. The ACA Advocacy Competencies:
 - a. include six intervention areas that include intrapersonal, interpersonal, institutional, community, public policy, and international
 - b. address competency through client self-awareness, counseling relationship, client worldview, and counseling and advocacy intervention domains
 - c. **outline practices at the microlevel, middle level, and macrolevel.**
 - d. none of the above

4. Which of the following most likely refers to internal frameworks that guide perspectives on help seeking?
 - a. Privilege and oppression
 - b. Chain complexes
 - c. Prototypes
 - d. **Explanatory model**

5. "I am anxious every holiday season since the car accident" is an example of what?
 - a. Cultural model
 - b. Chain complexes
 - c. **Prototypes**
 - d. Explanatory model

6. According to the Standards for Educational and Psychological Testing, which of the following best defines an absence of assessment bias?
 - a. Equitable distribution among test takers of factors irrelevant to a particular test construct
 - b. **Lack of factors irrelevant to a particular test construct**
 - c. Differential responses to an assessment
 - d. The nature of test-taker and test-user interactions

7. A group of diverse test takers who demonstrate similar familiarity to the assessment process is an example of what form of test fairness?
 - a. **Absence of bias**
 - b. Equal treatment of test takers
 - c. Equal standing on test construct
 - d. Equal opportunity to learn

8. The notion that what is included in an assessment—in particular, an ability test—is that to which a group of diverse test takers would have been equally exposed is an example of what form of test fairness?
 - a. Absence of bias
 - b. Equal treatment of test takers
 - c. Equal standing on test construct
 - d. **Equal opportunity to learn**

9. The expectation that a group of diverse test takers would have equal access to a standardized testing procedure is an example of what form of test fairness?
 - a. Absence of bias
 - b. **Equal treatment of test takers**
 - c. Equal standing on test construct
 - d. Equal opportunity to learn

10. The likelihood that individuals will not score significantly different from one another based on group membership is an example of what form of test fairness?
 - a. Absence of bias
 - b. Equal treatment of test takers
 - c. **Equal standing on test construct**
 - d. Equal opportunity to learn

11. Having mean differences in assessment findings across cultural groups due to the measurement process rather than as real differences among groups is referred to as:
 - a. Fairness
 - b. Cultural bias
 - c. Bias
 - d. **Cultural test bias hypothesis**

12. Which bias occurs when a particular test construct being measured is more familiar to a particular group?
 - a. Conceptual
 - b. **Content**
 - c. Criterion
 - d. Connotation

13. Which bias occurs when a characteristic of a particular cultural group (e.g., females, sexual minorities) is scored negatively in an assessment?
 - a. Conceptual
 - b. Content
 - c. Criterion
 - d. **Connotation**

14. Which bias occurs when an assessment references a scenario that may be unfamiliar to a particular cultural group?
 - a. **Semantic**
 - b. Omission
 - c. Examiner
 - d. Response

15. Which bias occurs when assessment scores are compared for an individual not appropriately represented in the standardization sample?
 - a. Conceptual
 - b. Content
 - c. **Criterion**
 - d. Connotation

16. Which of the following types of bias is most indicative of the stereotype threat phenomenon?
 - a. Semantic
 - b. Omission
 - c. **Examiner**
 - d. Response

17. Which of the following types of bias is most indicative of an individual answering test items in a socially desirable manner?
 - a. Semantic
 - b. Omission
 - c. Examiner
 - d. **Response**

18. The exclusion of experiences specific to a particular cultural group as assessment items is best known as which type of assessment bias?
 - a. Semantic
 - b. **Omission**
 - c. Examiner
 - d. Response

19. During the intake assessment process, a counselor asks whether a client is male or female. Which of the following types of assessment bias is likely occurring?
 - a. Semantic
 - b. **Omission**
 - c. Examiner
 - d. Response

20. A counselor who fails to explore cultural idioms of distress when making a diagnosis is most likely engaging in which type of assessment bias?
 - a. Semantic
 - b. Omission
 - c. **Conceptual**
 - d. Response

21. A counselor rating prosocial behaviors in a classroom who tends to see females as possessing more traits classified as prosocial would most likely be engaging in which type of bias?
 - a. **Interpretive**
 - b. Situational
 - c. Predictive
 - d. Technical

22. A career counselor exploring with a client from a collectivist culture about individualist career interests may be most likely engaging in which of the following types of assessment bias?
 - a. Semantic
 - b. Omission
 - c. **Conceptual**
 - d. Response

23. A student not familiar with the testing conditions of high-stakes achievement tests is most likely being affected by which type of assessment bias?
 - a. Interpretive
 - b. **Situational**
 - c. Predictive
 - d. Technical

24. An employer using an emotional well-being scale to make decisions about job candidates is most likely introducing which type of assessment bias into the hiring process?
 - a. Interpretive
 - b. Situational
 - c. **Predictive**
 - d. Technical

25. Minimizing discrimination in clinical decision making is important because discrimination can do which of the following?
 - a. Impact client prognosis
 - b. Lead to misdiagnosis
 - c. Misinterpret the client's level of functioning
 - d. **All of the above**

26. Which term best describes the automatic positive and negative assumptions that we have based on our cultural schemas or models?
 - a. **Implicit bias**
 - b. Explicit bias
 - c. Discrimination
 - d. Internalized oppression

27. What term has been commonly used to describe discriminatory assessment practices toward students of color?
 - a. Racial microaggressions
 - b. **Pushout**
 - c. Underdiagnosis
 - d. None of the above

28. Research indicates that counselors who are aware of the cultural makeup of a racial/ethnic minority client are more likely to do which of the following?
 - a. Provide an accurate assessment
 - b. **Make a more severe diagnosis**
 - c. Allot more time in the assessment process
 - d. None of the above

29. Mental disorders tend to be rated disproportionately higher for which of the following?
 - a. Whites
 - b. **Racial/ethnic minorities**
 - c. Males
 - d. None of the above

30. Which of the following is the most likely example of gender bias in assessment?
 - a. **Differential awarding of STEM education scholarships based on math achievement scores**
 - b. Providing separate sex norms for interest inventories
 - c. Including only items that are equally attractive to both sexes
 - d. Both a and c

31. The term *test sophistication* typically refers to which of the following?
 - a. **Degree of familiarity with the assessment**
 - b. Ability to adapt an existing assessment
 - c. Amount of client motivation in the assessment process
 - d. None of the above

32. A client identifying mainly with which acculturation model is likely least affected by assessment bias from traditional assessments?
- Marginalization
 - Separation
 - Assimilation**
 - Integration
33. A client identifying mainly with which acculturation model is likely most affected by assessment bias from traditional assessments?
- Biculturalism
 - Separation**
 - Assimilation
 - Integration
34. Which of the following methods is not useful for minimizing gender bias in career assessment?
- Providing separate same-sex norms
 - Including only items that are equally attractive across genders
 - Eliminating sexist language
 - None of the above**
35. Which of the following racial/ethnic groups is most likely to express mental health symptoms as somatic complaints?
- White individuals
 - Black individuals
 - Asian Americans**
 - Native Americans
36. Which of the following racial/ethnic groups tends to have higher scores (i.e., greater psychopathology) on personality assessments?
- White individuals
 - Black individuals
 - Asian Americans
 - Native Americans**
37. Creating multiple language versions of an assessment to better accommodate linguistically diverse clients is most likely referred to as:
- test adaptation
 - test translation**
 - measurement invariance
 - culture free test development
38. AnimaLogica is an example of what kind of assessment?
- Culture fair
 - Culture free
 - Dynamic**
 - None of the above
39. Tell-Me-A-Story (TEMAS) is an example of what kind of test?
- Culture fair**
 - Culture free
 - Dynamic
 - None of the above

40. Which of the following individuals is not typically included in an individualized education program (IEP)?
- School counselor
 - School principal**
 - A student's teacher
 - A student's parent
41. Section 504 of the Rehabilitation Act of 1973 is geared toward which population?
- Students with disabilities**
 - Elderly individuals
 - Employees with disabilities
 - Individuals with addictions

True or False

- T F 1. The Counseling and Advocacy Interventions domain of the Multicultural and Social Justice Counseling Competencies is the building block for the three additional domains.
- T F 2. According to the Multicultural and Social Justice Counseling Competencies, a competent counselor should be concerned about how the degree of cultural power (i.e., privilege and/or oppression) a client possesses impacts the assessment and counseling experiences.
- T F 3. Artificial differences in assessment findings that influence how data are used to make decisions about clients are referred to as bias.
- T F 4. Group differences in test scores usually mean that a test was fair if it was appropriately constructed and administered.
- T F 5. Clients who were not exposed previously to matrix items in cognitive tests, and thus perform poorly, have likely experienced a technical assessment bias.
- T F 6. The inappropriate diagnosis of a lesbian with a sexual identity disorder is an example of overdiagnosis.
- T F 7. The failure to diagnose a client not meeting traditional criteria for anxiety is an example of underdiagnosis.
- T F 8. The diagnosis of an African American female with schizophrenia rather than a mood disorder is an example of underdiagnosis.
- T F 9. During the test translation process, it can be useful to have a client's bilingual child or relative serve as the translator.
- T F 10. Most available research indicates improvements in achievement scores when tests are translated appropriately for clients.
- T F 11. Research indicates that gender differences in intelligence testing still persist.
- T F 12. Dynamic assessment allows the counselor to determine learning gaps of children as they conduct the assessment.

Understanding and Transforming Raw Scores

Multiple Choice

1. Which scale of measurement shows magnitude differences only?
 - a. Nominal
 - b. Ratio
 - c. **Ordinal**
 - d. Interval
2. University rankings are an example of which type of scale of measurement?
 - a. Nominal
 - b. Ratio
 - c. **Ordinal**
 - d. Interval
3. Distance is an example of which type of scale of measurement?
 - a. Nominal
 - b. **Ratio**
 - c. Ordinal
 - d. Interval
4. A Likert scale is an example of which type of scale of measurement?
 - a. Nominal
 - b. Ratio
 - c. **Ordinal**
 - d. Interval
5. Grouping individuals by ethnicity is an example of which type of scale of measurement?
 - a. **Nominal**
 - b. Ratio
 - c. Ordinal
 - d. Interval

6. What is the mode of the following scores: 4, 7, 8, 8, 9, 10, 12, and 14?
 - a. 7
 - b. **8**
 - c. 8.5
 - d. 11

7. A client receives a score of 20 on a substance abuse assessment, with 14 as the cutoff score for the assessment tool. What kind of assessment is this?
 - a. **Criterion referenced**
 - b. Norm referenced
 - c. Self-referenced
 - d. None of the above

8. Which measure of variability provides the most information about the meaning of a raw score compared to a standardization sample?
 - a. Rank
 - b. **Standard deviation**
 - c. Median
 - d. Standard error of measurement

9. A line graph is also known as which of the following?
 - a. Histogram
 - b. Frequency distribution
 - c. Bar graph
 - d. **Frequency polygon**

10. Nominal data are most usefully displayed by which of the following?
 - a. Histogram
 - b. Frequency polygon
 - c. **Bar graph**
 - d. Histogram

11. Which of the following is true of a positively skewed distribution?
 - a. The median is lower than the mode, which is lower than the mean
 - b. The mean is lower than the median, which is lower than the mode
 - c. **The mode is lower than the median, which is lower than the mean**
 - d. The mean, median, and mode are the same

12. What is the mean of the following scores: 4, 7, 8, 8, 9, 10, 12, and 14?
 - a. 8
 - b. 8.5
 - c. **9**
 - d. None of the above

13. What is the range of the following scores: 4, 7, 8, 8, 9, 10, 12, and 14?
 - a. 7
 - b. 8
 - c. 8.5
 - d. **11**

14. If a set of scores with a mean of 74 and standard deviation of 10 is normally distributed, what is the median?
 - a. 64
 - b. **74**
 - c. 84
 - d. It cannot be determined from the information provided

15. The middlemost score when all scores have been ranked is called what?
 - a. Mean
 - b. **Median**
 - c. Mode
 - d. Quartile

16. If you have the raw scores of two individuals on a norm-referenced test, which of the following is important in terms of making meaning of the scores?
 - a. Measures of central tendency
 - b. The relative positions of the scores to the rest of the group
 - c. What higher scores mean
 - d. **All of the above**

17. Which of the following measures of central tendency is most sensitive to outliers?
 - a. **Mean**
 - b. Median
 - c. Mode
 - d. Midquartile

18. What is the interquartile range of the following scores: 3, 5, 6, 7, 9, 10, 13, and 15?
 - a. **4**
 - b. 8
 - c. 8.5
 - d. 11

19. Which of the following is not a major step in establishing a normed sample?
 - a. Examining whether a sample size and composition was aligned with the scope of the intended norms
 - b. Distributing the assessment consistently across multiple settings
 - c. Determining whether there are systematic score differences among subgroups
 - d. **Administering the assessment in multiple formats**

20. An individual scores at the median of a distribution. What percentile rank is assigned?
 - a. **50**
 - b. 68
 - c. 84
 - d. It cannot be determined from the information provided

21. An individual scores 1 *SD* above the mean. What percentile rank is assigned?
 - a. 50
 - b. 68
 - c. **84**
 - d. It cannot be determined from the information provided

22. A professor administers an exam that contains too many easy items. What can be stated about the data distribution?
- It is negatively skewed**
 - It is positively skewed
 - It is platykurtic
 - It is mesokurtic
23. In a normal distribution, what percentage of scores falls between -1 and $+2$ *SD*?
- 68%
 - 2.25%
 - 81.5%**
 - 97.5%
24. A client's *T* score on a personality assessment is 65. What is the approximate percentile rank of that score?
- 64
 - 84
 - 93**
 - It cannot be determined from the information provided
25. An individual with a *z* score of -1.3 has which of the following stanine scores?
- 2.4
 - 37
 - 22.6
 - 2**
26. A client receives a flat profile from a career assessment. What can be stated about the data distribution?
- It is negatively skewed
 - It is positively skewed
 - It is platykurtic**
 - It is mesokurtic
27. A fourth grader receives a 6.5 grade equivalent score on an achievement test. What can be stated about her performance?
- She is performing higher on average than peers in her grade**
 - She is performing at the level of a sixth grader
 - She is performing slightly above the median
 - It cannot be determined from the information provided
28. What does a student's grade equivalent score of 5.8 denote about the level at which she is performing?
- The 8th month of the fifth grade**
 - 80% higher than her peers
 - The fifth month of the 8th grade
 - It cannot be determined from the information provided
29. What is the percentile rank of a student who scored 37 on an achievement test if the mean of the achievement test is 31 and the standard deviation is 3?
- 99.75
 - 97.5**
 - 83.75
 - 55

30. A client's self-esteem score is at the 25th percentile of the standardization sample. What does this mean?
- The client scored below 25% of the sample
 - The client scored similar to 25% of the sample
 - The client scored higher than 25% of the sample**
 - It cannot be determined from the information provided
31. An individual's intelligence score is 132. If the mean is 100 and the standard deviation is 16, what would their comparable z score be?
- 1.50
 - 2.00**
 - 2.50
 - It cannot be determined from the information provided
32. Which of the following standard scores does not have negative values?
- z scores
 - T scores**
 - Both of the above
 - Both have negative scores
33. Which of these standard scores is not equal to the others?
- $T = 50$
 - $z = 0$
 - Stanine = 4**
 - Deviation IQ = 100
34. Which of the following is a T score of 62 converted to a z score?
- 0.2
 - 0.2
 - 1.2**
 - 1.2
35. A college counselor interprets an ACT score of 24 and indicates that there is a 95% chance that the student's true score falls between which two values?
- 22, 26
 - 20, 28**
 - 22, 30
 - It cannot be determined from the information provided
36. If SAT scores have a range of 1200 (400–1600) and an SEM of 40, and a student scores 1400, what is the likely range of the student's true score (95% confidence interval)?
- 1380–1420
 - 1360–1440
 - 1320–1480**
 - It cannot be determined from the information provided

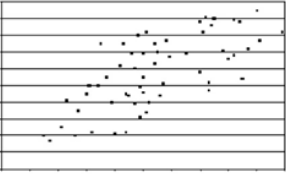
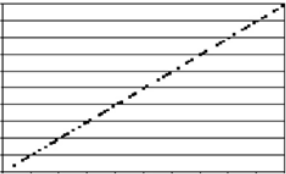
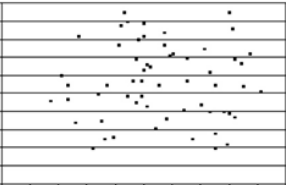
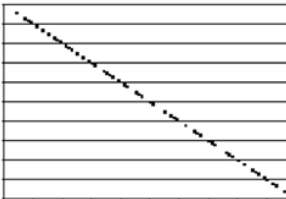
True or False

- T F 1. The most complex scale of measurement is known as an interval scale.
- T F 2. It is acceptable for counselors to compute average scores for assessments using the interval scale of measurement.
- T F 3. Histograms and frequency polygons are visual representations of frequency distributions.
- T F 4. It is easier for a client to improve a score by 5 percentile rank points when they are at the 25th rather than the 70th percentile rank.
- T F 5. Rank is commonly referenced in psychological assessments as a measure of variability.
- T F 6. When selecting culturally fair assessments, counselors should to seek those with greater evidence of measurement variance.

Chapter 6

Measurement and Qualitative Assessment Concepts

Multiple Choice

- Which of the following depicts the coefficient of determination that relates to the shared variance of two factors?
 - r
 - a
 - r^2
 - μ
- Which correlation is the strongest?
 - $-.87$
 - $+.86$
 - $+.30$
 - $.00$
- Which of the following has a correlation of approximately .70?
 - 
 - 
 - 
 - 

4. Which is not a type of reliability?
 - a. Split-half
 - b. Kuder-Richardson
 - c. Cronbach's alpha
 - d. **Convergent**

5. A statistical analysis of each test item against all other test items is best known as which of the following?
 - a. Split-half
 - b. **Cronbach's alpha**
 - c. Test-retest
 - d. Parallel forms

6. The correlation of odd-numbered items on a test to even-numbered items would be an example of which type of reliability?
 - a. **Split-half**
 - b. Cronbach's alpha
 - c. Test-retest
 - d. Parallel forms

7. The correlation of scores from one test administration with another administration of the same test at a later date would be an example of which type of reliability?
 - a. Split-half
 - b. Cronbach's alpha
 - c. **Test-retest**
 - d. Parallel forms

8. Which type of reliability is computed when test scores from one version of an assessment are correlated with another version?
 - a. Split-half
 - b. Cronbach's alpha
 - c. Test-retest
 - d. **Parallel forms**

9. Which of the following is an estimate of an individual's true score when considering measurement error?
 - a. Validity
 - b. **Reliability**
 - c. Alpha
 - d. None of the above

10. The degree to which an instrument's scores are free from measurement error is known as which of the following?
 - a. Validity
 - b. **Reliability**
 - c. Alpha
 - d. None of the above

11. Test anxiety is an example of which of the following?
 - a. **Individual error**
 - b. Test error
 - c. Testing condition error
 - d. None of the above

12. The correlation between scores on two interest inventories is .25. How much shared variance exists between the inventories?
 - a. 25%
 - b. 50%
 - c. **63%**
 - d. It is not possible to know

13. Which of the following can be used to adjust an underestimated reliability estimate?
 - a. Pearson product-moment
 - b. **Spearman-Brown**
 - c. Stepwise replication
 - d. Kuder-Richardson

14. Which of the following is an example of an internal consistency estimate?
 - a. Cronbach's alpha
 - b. Split-half
 - c. Kuder-Richardson
 - d. **All of the above**

15. What formula would you use to measure the interitem consistency of a test with a Likert-type scale?
 - a. **Cronbach's alpha**
 - b. Spearman-Brown
 - c. Standard error of estimate
 - d. Kuder-Richardson

16. How does the reliability of an instrument impact the standard error of measurement estimate?
 - a. **The more inconsistent a test is, the higher the standard error of measurement**
 - b. The more consistent a test is, the higher the standard error of measurement
 - c. The relationship is mediated by the validity coefficient
 - d. There is no relationship between the two concepts

17. Compute the standard error of measurement using the following data:
 $M = 90, X = 85, SD = 5, r = .35$.
 - a. 2.18
 - b. 3.65
 - c. **4.03**
 - d. 5.00

18. A test developer creates a new instrument to measure depression. He correlates this with an existing assessment that measures self-esteem. The test developer hopes not to find a high correlation to support the new instrument's validity. Which type of validity is this?
 - a. Experimental
 - b. Factor analysis
 - c. Convergent
 - d. **Discriminant**

19. A counselor asks five experts in depression to rate 100 clients with depression using *DSM-5* criteria. Ratings are then correlated with test scores for a new test of depression. Which type of validity is this?
 - a. Experimental
 - b. **Concurrent**
 - c. Convergent
 - d. Construct

20. A counselor is interested in examining whether the GRE can accurately indicate how undergraduate students will perform in graduate school. Which of the following is the most likely type of validity to provide evidence for this?
 - a. Content
 - b. Concurrent
 - c. **Predictive**
 - d. Convergent

21. Which of the following is not a kind of construct validity?
 - a. **Face**
 - b. Convergent
 - c. Discriminant
 - d. None of the above

22. The extent to which test items represent an intended domain is referred to as which type of validity?
 - a. Concurrent
 - b. **Content**
 - c. Convergent
 - d. Split-half

23. Which of the following phenomena would least likely factor into evaluating predictive validity?
 - a. Base rate
 - b. Specificity
 - c. Sensitivity
 - d. **Expert review**

24. A more narrow range of scores for a criterion of interest will result in which of the following?
 - a. An underestimated correlation coefficient
 - b. Less accurate prediction
 - c. Invalidity
 - d. **All of the above**

25. What type of validity refers to an assessment having added predictive value?
 - a. **Incremental**
 - b. Treatment
 - c. Base rate
 - d. Concurrent

26. Issues with specificity are most closely linked with which of the following?
 - a. **False positives**
 - b. False negatives
 - c. Low base rates
 - d. Low sensitivity

27. Factor analysis would be most useful for establishing what type of validity?
 - a. Content
 - b. Concurrent
 - c. Predictive
 - d. **Convergent**

28. A client provides an odd response on a personality assessment. Which validity scale would be most useful for detecting this response set?
 - a. Fake Bad Scale
 - b. **Infrequency**
 - c. Correction
 - d. Lie

29. Which statement best describes the relationship between reliability and validity?
 - a. **In order for a test to be valid, it must be reliable**
 - b. There is no relationship between reliability and validity
 - c. When validity increases, reliability increases
 - d. None of the above

30. Which of the following is not a criterion of trustworthiness?
 - a. Credibility
 - b. Transferability
 - c. Confirmability
 - d. **Believability**

31. Greater client engagement during the qualitative assessment process can be best described as which process?
 - a. Audit trail
 - b. Persistent observation
 - c. Peer debriefing
 - d. **Member checking**

32. Involving an interprofessional team during the qualitative assessment process can be best described as which process?
 - a. **Triangulation**
 - b. Member checking
 - c. External auditor
 - d. Negative case analysis

True or False

- T F 1. It is not possible to know a person's true score.
- T F 2. Reliability is best described as an estimate of an assessment rather than a particular sample's scores for that assessment.
- T F 3. Validity coefficients seldom exceed .60.
- T F 4. A false positive refers to failing to diagnose a client when the client actually met criteria.
- T F 5. Sensitivity refers to having an accurate cutoff score that best predicts a criterion of interest.
- T F 6. The standard error of measurement provides information related to the consistency of scores for a group.
- T F 7. A higher standard error of measurement estimate is linked to a higher reliability coefficient.
- T F 8. Transferability is to external validity as credibility is similar to internal validity.
- T F 9. When multiple counselors find similar findings from qualitative assessments, evidence of dependability is established.

Initial Assessment in Counseling

Multiple Choice

1. Which of the following statements is true?
 - a. Trauma is a necessary precursor to a crisis.
 - b. **Crisis is a necessary precursor to trauma.**
 - c. A crisis is typically predictable.
 - d. None of the above are true.
2. The intake interview process allows the counselor to do which of the following?
 - a. Establish expectations for counseling
 - b. Assess the nature and severity of a client's presenting concerns
 - c. Include a mental status examination in the session
 - d. **All of the above**
3. Which of the following data are least likely to be collected in the intake interview process?
 - a. **Insurance information**
 - b. Substance abuse history
 - c. Suicidality
 - d. General appearance and behavior
4. A student presents with depression accompanied with failing grades and witnessing family violence, and the school counselor focuses the session on obtaining details about how the student's attitude influences particular symptoms of depression. Which of the following errors of judgment is most likely happening?
 - a. Anchoring
 - b. Availability
 - c. Diagnostic overshadowing
 - d. **Attribution**

5. A client reports to her college counselor that she recently drove home drunk after a fight with her partner. She continues to discuss throughout the session how she has been unable to cope with the loss of her brother, and the counselor focuses the session on minimizing risk for substance abuse. Which of the following errors of judgment is most likely happening?
 - a. **Anchoring**
 - b. Availability
 - c. Diagnostic overshadowing
 - d. Attribution

6. How a client reports feeling during a mental status examination may be best described as their:
 - a. **mood**
 - b. affect
 - c. prosody
 - d. insight

7. Which of the following assessments is considered a screening inventory?
 - a. Outcome Questionnaire 45.2
 - b. Patient Health Questionnaire
 - c. Index of Common Problems
 - d. **All of the above**

8. The overall accuracy of a screening inventory is best represented as which proportion?
 - a. Those who are correctly identified as having particular symptoms to those who are not correctly identified as having particular symptoms
 - b. **Both those who are accurately identified as having particular symptoms as well as those who are accurately identified as not having symptoms to the total possible individuals administered the tool**
 - c. Those who are correctly identified as having particular symptoms to those who are accurately identified as not having symptoms
 - d. None of the above

9. Which of the following tools has been commonly used to evaluate psychotic disorders?
 - a. Patient Health Questionnaire
 - b. Psychiatric Diagnostic Screen Questionnaire
 - c. **Brief Psychiatric Rating Scale**
 - d. Outcome Questionnaire 45.2

10. A qualitative assessment used to examine a client's illness narrative and degree of perceived social support during treatment is the:
 - a. Cultural Formulation Interview
 - b. Explanatory Model Interview Catalogue
 - c. Short Explanatory Model Interview
 - d. **All of the above**

11. Nonfatal suicidality refers to which of the following?
 - a. Self-injury
 - b. Suicidal thoughts
 - c. Failed suicide attempts
 - d. **All of the above**

12. Which of the following age groups has the highest rates of nonfatal suicidality?
 - a. **18–25 years old**
 - b. 26–50 years old
 - c. 51–65 years old
 - d. 66 years old and older

13. Individuals identifying as which of the following make up the preponderance of successful suicide completers?
 - a. White adolescent girls
 - b. African American elderly men
 - c. **White adult men**
 - d. Native American adolescent men

14. Which racial/ethnic group has the highest prevalence of suicidal thoughts?
 - a. White
 - b. Asian American
 - c. Black
 - d. **Native American**

15. Which method of suicide is most commonly used by men?
 - a. **Firearms**
 - b. Poisoning
 - c. Hanging
 - d. Jumping from great heights

16. Which method of suicide is most commonly used by women?
 - a. **Firearms**
 - b. Poisoning
 - c. Hanging
 - d. Jumping from great heights

17. According to the literature, which of the following are the best indicators for determining risk of suicide?
 - a. Lethality, means, and available resources
 - b. Presence of substance abuse and psychological symptoms
 - c. **Ideation, plan, intent, and means**
 - d. Environmental stress and available resources

18. Which of the following is the strongest factor in predicting suicide?
 - a. Psychosis
 - b. **Previous suicide attempts**
 - c. Significant recent loss
 - d. Family history of suicide

19. Which of the following is one of the predominant challenges of suicide risk assessment?
 - a. Assessment tools tend to identify only those at imminent risk for suicide
 - b. Assessment tools focus more on proximal factors such as stressful events and suicidal plans
 - c. **There is a low base rate for completed suicides in the United States**
 - d. Counselors tend to make high false-negative predictions

20. Which of the following is not a suicide risk assessment aid?
- SAD PERSONS Scale
 - SAFE-T
 - AUDIT**
 - Decision-tree assessment strategy
21. Suicide safety planning typically includes which of the following:
- Identification of ACEs
 - Identification of warning signs
 - Identification of coping strategies
 - Both b and c**
22. Which of the following assessments focuses on traumatic events within the first 18 years of life?
- ACE Questionnaire**
 - CENI
 - EMIC
 - EPIC
23. A client experiencing crisis who needs overnight care would most likely benefit from:
- crisis care
 - outpatient care
 - social support
 - inpatient care**

True or False

- T F 1. Judgment errors such as anchoring and attribution are commonly caused by a client not reporting accurate information.
- T F 2. The initial level of suicide risk can be useful in predicting treatment prognosis.
- T F 3. There is no universal definition of what constitutes imminent suicide risk.
- T F 4. A crisis intervention team typically excludes a law enforcement official.

Mental Health and Addictions Assessment

Multiple Choice

1. A counselor identifies whether a particular symptom is present in order to make a diagnosis. Which of the following types of assessment is likely occurring?
 - a. Overall accuracy assessment
 - b. Diagnostic variance assessment
 - c. Dimensional assessment
 - d. **Categorical assessment**
2. A counselor determines how severe a presenting symptom is before making a diagnosis. Which of the following types of assessment is likely occurring?
 - a. Overall accuracy assessment
 - b. Diagnostic variance assessment
 - c. **Dimensional assessment**
 - d. Categorical assessment
3. Which of the following is a main challenge of the *DSM-5-TR*?
 - a. The distinction between normal distress and mental disorder
 - b. The psychometric data available of dimensional assessment tools
 - c. The tendency of high false positives
 - d. **All of the above**
4. About what percentage of U.S. individuals live with a mental health condition in any given year?
 - a. 10%
 - b. **20%**
 - c. 30%
 - d. 40%

5. About what percentage of U.S. adults have a comorbid substance abuse and mental health condition?
 - a. 15%
 - b. 25%
 - c. **38%**
 - d. 55%

6. Which of the following mental health disorders tend to be more prevalent for adolescents versus adults?
 - a. Major depression
 - b. Posttraumatic stress disorder
 - c. Attention-deficit/hyperactivity disorder
 - d. **All of the above**

7. Which of the following questions would most likely be used in a community needs assessment regarding mental health and substance abuse?
 - a. Does symptom expression vary by subpopulation?
 - b. What resources are available for a subpopulation?
 - c. How culturally relevant are particular counseling interventions within a community?
 - d. **All of the above**

8. Which refers to the resolution of previous mental health symptoms?
 - a. Response
 - b. Recovery
 - c. **Remission**
 - d. Relapse

9. Which of the following refers to a 50% reduction in baseline mental health symptoms?
 - a. **Response**
 - b. Recovery
 - c. Remission
 - d. Relapse

10. The following demographic is most likely to seek and receive help for mental health concerns:
 - a. Transgender individuals
 - b. **Women**
 - c. Men
 - d. Children

11. About what percentage of U.S. adults are diagnosed with a substance abuse disorder in a given year?
 - a. **8%**
 - b. 15%
 - c. 23%
 - d. 31%

12. What are the features most often used to distinguish substance abuse from substance dependence?
 - a. Daily use and impaired social functioning
 - b. Engagement in dangerous situations and recurrent legal problems
 - c. Inability to stop using substances and impaired social functioning
 - d. **Increased tolerance and withdrawal symptoms**

13. Which of the following alcohol abuse assessments may also be used to evaluate for illicit drug use?
 - a. **CAGE-AID**
 - b. MAST
 - c. RAPS4
 - d. AUDIT

14. Which of the following is not a guiding principle of motivational interviewing?
 - a. Supporting self-efficacy
 - b. **Addressing resistance**
 - c. Developing discrepancy
 - d. Expressing empathy

15. Which of the following depression tools measures the frequency and intensity of depression symptoms?
 - a. Beck Depression Inventory
 - b. Children's Depression Inventory
 - c. Geriatric Depression Scale
 - d. **Hamilton Depression Inventory**

16. Which type of anxiety scale scores would most likely be stable across time?
 - a. S-Anxiety
 - b. **T-Anxiety**
 - c. P-Anxiety
 - d. F-Anxiety

17. Which of the following is not true regarding self-injury?
 - a. **It tends to be related to suicidality**
 - b. Women tend to report self-injury more often than men
 - c. It tends to be misdiagnosed
 - d. It results in physical injury

18. Which of the following are examples of psychological factors to evaluate during self-injury assessment?
 - a. Coping resources, social supports, and reports of dissociation
 - b. Medication use, family history of self-injury, and significant impairment
 - c. **History of mental illness, coping resources, and reports of dissociation**
 - d. Family history of self-injury, history of mental illness, and social supports

19. Which of the following *DSM-5* mental disorder categories was designed to capture disordered eating patterns that do not meet the threshold for a major eating disorder?
 - a. Eating disorder not otherwise specified
 - b. **Unspecified feeding or eating disorder**
 - c. Pica
 - d. Binge-eating disorder

20. What is the 12-month prevalence rate for anorexia nervosa among females?
 - a. **0.4%**
 - b. 2%
 - c. 2.4%
 - d. 4%

21. Which of the following is a widely used standardized eating disorder assessment tool?
 - a. **EAT-26**
 - b. EDDS
 - c. STAXI-2
 - d. BAI

22. Which of the following is not true of assessing for ADHD?
 - a. Inattention, hyperactivity, and/or impulsivity must be present
 - b. Symptoms must occur in more than one setting for at least 6 months
 - c. **ADHD symptoms must be associated with another mental disorder**
 - d. A multimodal approach should be used to verify client assessment data

23. The median age of onset of ADHD is:
 - a. **6**
 - b. 9
 - c. 11
 - d. 13

24. The following tool is intended for assessing for the presence of bipolar disorders:
 - a. **General Behavior Inventory**
 - b. State-Trait Anxiety Inventory
 - c. Hamilton Screening Inventory
 - d. None of the above

25. The most used substance among adolescents in any given year is:
 - a. **alcohol**
 - b. marijuana
 - c. opioids
 - d. methamphetamines

26. The recent increase in overdose deaths has largely resulted from abuse of which substance?
 - a. Alcohol
 - b. Marijuana
 - c. **Opioids**
 - d. Methamphetamines

True or False

- T F 1. The current *DSM-5* helps to minimize diagnostic variance through its use of empirically validated dimensional assessments.
- T F 2. Data from self-monitoring methods for assessing substance abuse tend to be more accurate than data obtained from interview procedures.
- T F 3. Fear is defined as the significant anticipation of a future threat.
- T F 4. Assessment of anger can be useful during crisis intervention.
- T F 5. Self-injury is a new diagnosis to the *DSM-5*.
- T F 6. Behavior rating scales can be useful as screening tools to detect ADHD symptoms.
- T F 7. Process and substance addictions have similar features regarding their development and impact.

Assessment of Intelligence

Multiple Choice

1. What is one of the major criticisms of Gardner's multiple intelligences theory?
 - a. **There is a lack of evidence to support the theory**
 - b. No one, including Gardner, understands the theory
 - c. The theory is entrenched in the general intelligence model
 - d. There are too many forms of intelligence to evaluate
2. Which of the following definitions of intelligence has been used in scholarship?
 - a. Capacity for abstraction
 - b. Ability to learn from experience
 - c. Ability to adapt to one's environment
 - d. **All of the above**
3. Which of the following is not associated with intelligence testing?
 - a. Spearman
 - b. Simon
 - c. Terman
 - d. **Holland**
4. Having flexibility for new learning would best be considered _____, whereas cultural learning would best be classified as _____.
 - a. primary ability, secondary ability
 - b. general factor, specific factor
 - c. specific factor, general factor
 - d. **fluid intelligence, crystallized intelligence**
5. Who is most closely aligned with the concept of primary mental abilities?
 - a. Sternberg
 - b. Spearman
 - c. **Thurstone**
 - d. Cattell

6. Who is most closely aligned with a triarchic theory of intelligence?
 - a. **Sternberg**
 - b. Spearman
 - c. Thurstone
 - d. Cattell

7. Which of the following is not considered a primary mental ability?
 - a. Perceptual speed
 - b. Reasoning
 - c. Numerical ability
 - d. **Componential ability**

8. Executive functioning can best be classified as which of the following?
 - a. **Componential intelligence**
 - b. Experiential intelligence
 - c. Contextual intelligence
 - d. Associative intelligence

9. Being able to visualize an object being rotated to solve a problem is best described as which of the following?
 - a. Associative intelligence
 - b. **Spatial ability**
 - c. Perceptual speed
 - d. Experiential ability

10. A client is able to accurately compare visual details of an object on an intelligence test. Which of the following abilities is best evidenced?
 - a. Associative intelligence
 - b. Spatial ability
 - c. **Perceptual speed**
 - d. Experiential ability

11. Which type of intelligence is most closely associated with self-awareness?
 - a. Interpersonal
 - b. **Intrapersonal**
 - c. Naturalistic
 - d. Bodily-kinesthetic

12. Which type of scale is used in intelligence tests in which an individual identifies the missing portion of a picture or graphic from several choices?
 - a. Naturalistic
 - b. Block design
 - c. **Matrix reasoning**
 - d. Picture concepts

13. Which type of scale is used in intelligence tests in which an individual selects a picture from a row to form a group?
 - a. Naturalistic
 - b. Block design
 - c. Matrix reasoning
 - d. **Picture concepts**

14. Which type of intelligence is most closely associated with problem-solving ability?
 - a. Interpersonal
 - b. Bodily-kinesthetic
 - c. **Logical-mathematical**
 - d. Naturalistic

15. Which of the following is not classified as an individual intelligence test?
 - a. Stanford-Binet
 - b. Wechsler Intelligence Scale for Children
 - c. Das Naglieri Cognitive Assessment System
 - d. **Otis-Lennon School Ability Test**

16. Which of the following intelligence tests is not used with children?
 - a. Wechsler scales
 - b. Kaufman batteries
 - c. Wide Range Intelligence Test
 - d. **Supports Intensity Scale**

17. An individual with an IQ of _____ would most likely be classified as a "slow learner."
 - a. 88
 - b. **82**
 - c. 70
 - d. 65

18. Which of the following group intelligence tests is useful for detecting intellectual disability?
 - a. **Shipley Institute of Living Scale**
 - b. Kaufman batteries
 - c. Scholastic Level Exam
 - d. Woodcock-Johnson tests

19. Which of the following is considered most effective for identifying giftedness in children?
 - a. History of high IQ scores
 - b. Teacher rating forms
 - c. **Universal group ability testing**
 - d. Parent rating forms

20. A challenge of assessing for giftedness is:
 - a. the ceiling effect of intelligence assessments
 - b. insufficient item difficulty of intelligence assessments
 - c. reliance on teacher recommendations
 - d. **all of the above**

21. The Torrance Tests of Creativity is useful for which type of client?
 - a. Having a motor disability
 - b. **Having giftedness**
 - c. Having experienced a childhood trauma
 - d. None of the above

22. A child has been classified as moderately gifted and is recommended for accelerated courses. They likely have an IQ of:
- a. 115
 - b. 120
 - c. 125
 - d. **130**

True or False

- T F 1. An underlying factor of intelligence in intelligence theory is best labeled as a g factor.
- T F 2. The s factors are most influential in understanding an individual's intelligence.
- T F 3. The notion of an intelligence quotient is most useful to test takers before late adolescence.
- T F 4. IQ scores tend to remain stable across tests and test administrations.
- T F 5. Early group intelligence tests were used for educational purposes.
- T F 6. It is more common to increase crystallized intelligence than fluid intelligence.
- T F 7. One of the key benefits of intelligence testing is its low cost to clients.
- T F 8. Early intervention in special education usually takes place before children enter elementary school.
- T F 9. Using the full-scale IQ score is the most effective method for identifying twice exceptional children.



Chapter 10

Assessment of Aptitude and Achievement

Multiple Choice

1. Which of the following is the best example of an achievement test?
 - a. ASVAB
 - b. SAT
 - c. **TerraNova Tests**
 - d. Wechsler Adult Intelligence Scale
2. Which of the following is an assessment designed to measure noncognitive factors associated with success in schools?
 - a. **Study Attitudes and Methods Survey**
 - b. Procrastination and Study Skills Assessment
 - c. Career Attitudes and Beliefs Inventory
 - d. None of the above are actual tools
3. The Armed Services Vocational Aptitude Battery includes which of the following?
 - a. **A 90-item career interest inventory**
 - b. WorkKeys (a comprehensive work skills assessment program)
 - c. 5-minute tests on mechanical reasoning, spatial relations, verbal reasoning, numerical ability, language usage, word knowledge, perceptual speed, and manual dexterity
 - d. 14 occupational clusters
4. If a student has a score of 20 on the ACT, what is the true score range of their score?
 - a. 10–30
 - b. **18–22**
 - c. 50–60
 - d. They cannot score higher than a 20 on the ACT because this is the highest score

5. Which of the following is a test given to international students who apply for admission to colleges or universities in North America?
 - a. Wechsler International Scholastic Exam (WISE)
 - b. Test of Basic English Education (TABEE)
 - c. **Test of English as a Foreign Language (TOEFL)**
 - d. None of the above

6. Which of the following aptitude tests is not part of the ACT Assessment program?
 - a. EXPLORE program
 - b. ASSET Student Success System
 - c. **ENRICH program**
 - d. PLAN program

7. Scores on aptitude tests are considered most useful in which of the following?
 - a. Correlating performance with high school GPA
 - b. Predicting performance on other aptitude tests
 - c. Evaluating learning in colleges and universities
 - d. **Predicting performance in educational programs in high schools and/or colleges and universities**

8. Aptitude tests align closely with _____, whereas achievement tests align closely with _____.
 - a. content validity, predictive validity
 - b. **predictive validity, content validity**
 - c. construct validity, content validity
 - d. predictive validity, construct validity

9. Each of the two SAT section scores has a range of:
 - a. **200–800**
 - b. 400–1,600
 - c. 320–520
 - d. 160–760

10. Each of the two PSAT section scores has a range of:
 - a. 200–800
 - b. 400–1,600
 - c. 320–520
 - d. **160–760**

11. Which of the following is true about aptitude tests?
 - a. Aptitude tests tend to correlate more highly with performance at very highly selective institutions
 - b. **Aptitude tests tend to correlate more highly with performance at less selective institutions**
 - c. The typical correlation range for aptitude tests is .40 to .55
 - d. The best predictor of college GPA is aptitude test scores

12. The big-fish-little-pond concept refers to which of the following?
 - a. **The impact of high-ability environments in lowering academic self-concept**
 - b. The impact of high-ability environments in raising academic self-concept
 - c. The predictive ability of aptitude tests within highly selective institutions
 - d. The predictive ability of aptitude tests within nonselective institutions

13. The Graduate Record Examination is most often used in gaining admission to which of the following?
 - a. **Graduate school**
 - b. Medical school
 - c. Law school
 - d. Dental school

14. Which of the following aptitude tests is composed of analogies?
 - a. ACT
 - b. UNIACT
 - c. **MAT**
 - d. LSAT

15. Which common achievement test serves as an observational instrument that examines young children's behavior related to school learning?
 - a. **Iowa Early Learning Inventory**
 - b. Next Generation Iowa Assessments
 - c. Stanford Early School Achievement Tests
 - d. Metropolitan Achievement Tests

16. The Test of English as a Foreign Language includes which of the following sections?
 - a. Language, Speaking, and Comprehension
 - b. **Listening, Speaking, and Reading**
 - c. Comprehension, Writing, and Listening
 - d. Reading, Mathematics, and Language

17. Which of the following is an example of an adult achievement test?
 - a. **ABLE**
 - b. METROPOLITAN8
 - c. WRAT4
 - d. TerraNova

18. The Every Student Succeeds Act is intended to do which of the following?
 - a. **Allow flexibility for states to develop performance indicators**
 - b. Keep high-quality teachers in the classroom
 - c. Provide equal interventions to schools at varying performing levels
 - d. Provide the federal government with greater authority in designing interventions

19. Which of the following is the most widely used learning inventory on college campuses?
 - a. College Student Inventory
 - b. Study Attitudes and Methods Survey
 - c. Thinking Styles Inventory
 - d. **Learning and Study Strategies Inventory**

True or False

- T F 1. Aptitude tests measure acquired skills and knowledge.
- T F 2. Aptitude tests tend to improve the predictive power of high school GPA for college GPA.
- T F 3. The standard error of measurement for the SAT is approximately 30.
- T F 4. The standard error of measurement for the ACT is approximately 3.
- T F 5. A satisfactory score for the College-Level Examination Program (CLEP) assessments allows students to receive three to 12 college credits.
- T F 6. Intelligence assessment is a form of aptitude assessment.



Chapter 11

Assessment of Career Development and Wellness

Multiple Choice

1. Who proposed a three-part approach to career counseling that involved self-awareness, knowledge of the world of work, and the relationship between these two components?
 - a. Edwin Herr
 - b. **Frank Parsons**
 - c. JoAnn Harris-Bowlsbey
 - d. Jane Okacha
2. Which of the following is not considered one of Niles and Harris-Bowlsbey's steps of career counseling?
 - a. Learn about vocational self-concept
 - b. Make tentative choices about available occupations
 - c. Identify occupational alternatives
 - d. **Participate in informational interviews**
3. What are the four uses of career assessment?
 - a. **Prediction, discrimination, monitoring, evaluation**
 - b. Placement, screening, prediction, evaluation
 - c. Directing, prediction, discrimination, screening
 - d. Mapping, prediction, evaluation, discrimination
4. Career identity formation is typically a critical developmental task for which group?
 - a. **Adolescents**
 - b. Young adults
 - c. Midcareer adults
 - d. Older adults

5. Determining bridge employment is typically a critical developmental task for which group?
 - a. Adolescents
 - b. Young adults
 - c. Midcareer adults
 - d. **Older adults**

6. Which qualitative assessment technique is used to develop piles of similar occupational titles to aid in career decision-making?
 - a. Life Career Rainbow
 - b. Lifeline tool
 - c. **Card sort**
 - d. Occupational tree

7. Which qualitative assessment technique is used to document a client's family patterns of career-related events?
 - a. Life Career Rainbow
 - b. **Career genogram**
 - c. Card sort
 - d. Career Style Interview

8. Which qualitative assessment technique is used to evaluate the salience of roles across the life span?
 - a. **Life Career Rainbow**
 - b. Career genogram
 - c. Card sort
 - d. Occupational tree

9. Which of the following standardized programs is published by ACT?
 - a. **WorkKeys**
 - b. O*NET
 - c. Differential Aptitude Tests
 - d. ASVAB

10. Which of the following standardized programs measures actual and anticipated job skills to maximize workplace success?
 - a. SIGI³
 - b. **WorkKeys**
 - c. ASVAB
 - d. Differential Aptitude Tests

11. Which of the following standardized programs is published by the U.S. Department of Defense?
 - a. SIGI³
 - b. WorkKeys
 - c. **ASVAB**
 - d. Differential Aptitude Tests

12. Clients can evaluate the extent to which they would qualify for various careers using eight skill areas of which career assessment tool?
 - a. SIGI³
 - b. **WorkKeys**
 - c. ASVAB
 - d. Differential Aptitude Tests

13. The _____ Self refers to the wellness component of positive humor.
- Creative
 - Coping**
 - Essential
 - Social
14. The _____ Self refers to the wellness component of self-care.
- Creative
 - Coping
 - Essential**
 - Social
15. Which of the following wellness components is not found in the Five Factor Wellness Inventory?
- Creative
 - Coping
 - Ecowellness**
 - Social

True or False

- T F 1. The Ability Profiler, Work Importance Profiler, and the Interest Profiler are part of the COPSystem.
- T F 2. The Wheel of Wellness directly informed the development of the Five Factor Wellness Inventory.
- T F 3. O*NET allows individuals to compare individual characteristics of more than 900 occupations.
- T F 4. The development of postmodern approaches is typically aligned with the third wave of career assessment.

Career Assessment Tools

Multiple Choice

- Which of the following is a measure of career readiness?
 - Career Attitudes and Strategies Inventory**
 - Career Adaptability Inventory
 - Skills Aptitude Inventory
 - None of the above
- According to Donald Super, what is the goal of career development?
 - Career adaptability**
 - Life-work balance
 - Career discrimination
 - Career satisfaction
- Which concept best refers to the ability of individuals to complete developmental tasks appropriate to their respective age?
 - Career maturity**
 - Career adaptability
 - Career discrimination
 - Career development
- Which of the following assessment tools is specifically designed for use with students?
 - Career Attitudes and Strategies Inventory
 - Career Beliefs Inventory
 - Career Decision-Making Difficulties Questionnaire**
 - Career Decision Self-Efficacy Scale
- Which measure of career readiness is based on Super's work?
 - Career Mastery Inventory
 - Career Factors Inventory
 - Childhood Career Development Scale**
 - Career Thoughts Inventory

6. Which measure of career readiness is most useful as a screening tool to detect career planning concerns?
 - a. Career Thoughts Inventory
 - b. Career Mastery Inventory
 - c. Skills Confidence Inventory
 - d. **My Vocational Situation**

7. Which of the following types of career scales is easy to interpret, given such scales are homogeneous in nature and refer to one interest or activity?
 - a. Occupational
 - b. **Basic interest**
 - c. Administrative
 - d. Validity

8. Which of the following types of career scales involves comparing an individual's scores to others within a particular career?
 - a. **Occupational**
 - b. Basic interest
 - c. Administrative
 - d. Validity

9. What is true of the General Occupational Themes (GOTs) on the Strong Interest Inventory?
 - a. **They are equivalent to Holland's six types of personality (RIASEC model)**
 - b. They are equivalent to the 22 worker traits described by the U.S. Department of Labor
 - c. They are equivalent to personality type preferences (e.g., ISTJ, ENTP)
 - d. None of the above

10. Which of the following is an example of an inconsistency on the administrative index of a career assessment?
 - a. An individual reports liking a particular occupation and subject area but also reports liking another occupation and/or subject area
 - b. **An individual reports liking a particular occupation but disliking a related subject area**
 - c. An individual does not answer all of the items related to a particular occupational cluster
 - d. An individual reports differentiated scores among personal style scales

11. Item response percentages on career assessments are most useful in indicating which of the following?
 - a. Which items are most popular across test takers
 - b. Whether all items were answered within an assessment
 - c. How many items were correctly identified
 - d. **How many items across various scaling points were endorsed**

12. Gender differences are most notable on which scale of the Strong Interest Inventory?
 - a. Enterprising
 - b. Investigative
 - c. Artistic
 - d. **Realistic**

13. The Career Values Card Sort and the Life Values Inventory are examples of which of the following?
 - a. **Values clarification exercises**
 - b. Standardized assessments
 - c. Inventories of personal values
 - d. Marriage enrichment program tools

14. The Salience Inventory, Quality of Life Inventory, and the O*NET Work Importance Profiler are examples of which of the following?
 - a. **Values inventories**
 - b. Values clarification exercises
 - c. Projective tests
 - d. Outcome expectation questionnaires

15. Personal Style Scales on career assessments are useful for evaluating which of the following?
 - a. How personality relates to career planning
 - b. What preferences individuals have for work and leadership style
 - c. The degree to which individuals like to complete tasks as a team
 - d. **All of the above**

16. The Skills Confidence Inventory and the Expanded Skills Confidence Inventory are assessments used for which of the following?
 - a. **To supplement interest inventories that have clients indicate their perceived abilities in career interest areas**
 - b. To determine whether clients have low self-esteem and could benefit from greater external motivation
 - c. To determine a client's preparedness for career decision-making
 - d. To gauge a client's skill level from observational data

17. Which of these career assessments is useful for working with students?
 - a. Kuder Navigator
 - b. Strong Interest Explorer
 - c. Kuder Galaxy
 - d. **All of the above**

18. Which of the following describes the difference between instruments such as the Saliency Inventory, Quality of Life Inventory, and Rokeach Value Survey compared with the O*NET Work Importance Profiler, Values Scale, and Work Values Inventory–Revised?
- The Saliency Inventory, Quality of Life Inventory, and Rokeach Value Survey measure personal values, whereas the O*NET Work Importance Profiler, Values Scale, and Work Values Inventory–Revised measure work-related values**
 - The Saliency Inventory, Quality of Life Inventory, and Rokeach Value Survey are qualitative assessments, whereas the O*NET Work Importance Profiler, Values Scale, and Work Values Inventory–Revised are quantitative assessments
 - The Saliency Inventory, Quality of Life Inventory, and Rokeach Value Survey are unstandardized assessments, whereas the O*NET Work Importance Profiler, Values Scale, and Work Values Inventory–Revised are standardized assessments
 - The Saliency Inventory, Quality of Life Inventory, and Rokeach Value Survey are assessments available for purchase, whereas the O*NET Work Importance Profiler, Values Scale, and Work Values Inventory–Revised are free assessments available in the public domain
19. Holland’s RIASEC categories are embedded in which of the following career assessments?
- Strong Interest Inventory
 - Kuder Career Search
 - Self-Directed Search
 - All of the above**
20. In order to address gender-related bias such as stereotyping and socialization regarding traditional versus nontraditional occupations, the Strong Interest Inventory has done which of the following?
- Engaged in gender norming to take into account gender differences (presenting career interest scores on separate distributions for each gender) as a way to help identify nontraditional career interests
 - Removed sexist language (e.g., mailman)
 - Included career interest items that are equally attractive to all genders (e.g., “repair furniture” vs. “repair automobiles”)
 - All of the above**
21. Which career assessment explicitly offers the ability to compare skills and interests in order to determine whether occupational areas should be pursued, explored, developed, or avoided?
- Kuder Career Search
 - Campbell Interest and Skill Survey**
 - Kuder General Interest Survey
 - Self-Directed Search
22. Which career assessment explicitly maps Holland codes to career cluster and activity preference scales?
- Kuder Career Search**
 - Campbell Skills and Interest Survey
 - Kuder General Interest Survey
 - Self-Directed Search

23. Which career assessment is distinct from other career assessments in that it includes work style and work role items?
- Career Decision-Making System–Revised
 - Jackson Vocational Interest Survey**
 - Kuder Skills Assessment
 - Campbell Interest and Skill Survey
24. Which of the following career assessments is not considered explicitly a measure of work values?
- Work Importance Locator
 - Values Scale
 - Work Importance Profiler
 - Rokeach Value Survey**
25. Which of the following is not considered one of the major values of the Study of Values?
- Individualism**
 - Aesthetic
 - Religious
 - Economic
26. Which career assessment tool aligns most closely with Donald Super’s life-span, life-space model?
- Study of Values
 - Salience Inventory**
 - Quality of Life Inventory
 - Life Values Inventory

True or False

- T F 1. Terms associated with career readiness include *career adaptability* and *career maturity*.
- T F 2. Clients with lower levels of career readiness would benefit more from group counseling than individual counseling.
- T F 3. The Campbell Interest and Skill Survey contains administrative indices, General Occupational Themes, and Basic Interest Scales.
- T F 4. Work values can be considered a subset of personal values.
- T F 5. Research indicates that the structure of work and personal values tends to be similar across cultures.

Assessment of Personality

Multiple Choice

1. Objective personality assessments are also referred to as which kind of personality assessment?
 - a. Projective
 - b. Unstructured
 - c. **Structured**
 - d. Theoretical
2. A personality test developer develops items that are aligned with an underlying construct. Which of the following methods for test construction has been used?
 - a. Logical content
 - b. **Theoretical**
 - c. Criterion group
 - d. Factor analytic
3. A personality test developer is interested in comparing a group with a control group as part of test construction. Which of the following methods for test construction is used?
 - a. Logical content
 - b. Theoretical
 - c. **Criterion group**
 - d. Factor analytic
4. A personality test has been constructed by identifying latent constructs. Which of the following methods for test construction has been used?
 - a. Logical content
 - b. Theoretical
 - c. Criterion group
 - d. **Factor analytic**

5. Which of the following instruments would not be considered a structured personality assessment?
 - a. Millon Clinical Multiaxial Inventory
 - b. Personality Assessment Inventory
 - c. **Children's Apperception Test**
 - d. Myers-Briggs Type Indicator

6. What is the purpose of the Minnesota Multiphasic Personality Inventory-3?
 - a. **To evaluate an individual for psychopathology and mental disorders**
 - b. To identify an individual's preferred dimensions of perception and judgment
 - c. To determine an individual's level of social-emotional functioning
 - d. To evaluate an individual on normal personality constructs

7. A T score of which value or higher for personality assessments is typically viewed as clinically significant?
 - a. 50
 - b. 60
 - c. **65**
 - d. 70

8. Which personality assessment uses the categories of normal/adaptive, abnormal/moderately maladaptive, and clinical disorder to report results?
 - a. **Millon Clinical Multiaxial Inventory**
 - b. Personality Assessment Inventory
 - c. California Psychological Inventory
 - d. Sixteen Personality Factor Questionnaire

9. Which MBTI dimension relates to how individuals focus their energy?
 - a. **E-I**
 - b. S-N
 - c. J-P
 - d. T-F

10. Which MBTI dimension relates to how individuals interact with the outside world to make decisions?
 - a. E-I
 - b. S-N
 - c. **J-P**
 - d. T-F

11. Which MBTI dimension relates to how individuals judge obtained data?
 - a. E-I
 - b. S-N
 - c. J-P
 - d. **T-F**

12. Which MBTI dimension relates to how individuals directly perceive information?
 - a. E-I
 - b. **S-N**
 - c. J-P
 - d. T-F

13. Which of the following personality assessments does not measure normal personality?
 - a. Myers-Briggs Type Indicator
 - b. California Psychological Inventory
 - c. Millon Index of Personality Styles–Revised
 - d. **Personality Assessment Inventory**

14. Which assessment tool was constructed to measure the Big Five personality factors?
 - a. **NEO Personality Inventory–Revised**
 - b. Coopersmith Inventory
 - c. Millon Index of Personality Styles–Revised
 - d. Personality Assessment Inventory

15. Which of the following is not considered one of the Big Five personality factors?
 - a. Neuroticism
 - b. **Introversion**
 - c. Agreeableness
 - d. Conscientiousness

16. The _____ data of projective assessments indicate typical information shared regarding figures or drawings.
 - a. **structural**
 - b. behavioral
 - c. affective
 - d. thematic

17. A typical example of _____ data from projective assessments would be the emotional tone of the story projected in the drawing.
 - a. structural
 - b. behavioral
 - c. affective
 - d. **thematic**

18. Which of the following characteristics are not typically considered when scoring the Rorschach Inkblot Method?
 - a. Location on the card described by the client
 - b. **Questions asked by the client during administration**
 - c. How client responses align with popular responses
 - d. Inkblot characteristics

19. Which of the following personality assessments typically requires the client to make up a story about a picture, including what led up to the moment depicted in the picture?
 - a. **TAT**
 - b. KFD
 - c. TEMAS
 - d. HTP

20. Which of the following personality assessments was designed to be useful for diverse populations?
 - a. TAT
 - b. KFD
 - c. **TEMAS**
 - d. HTP

21. "Draw a picture of everyone in your family, including you, doing something" is the prompt used for which personality assessment?
- a. TAT
 - b. **KFD**
 - c. TEMAS
 - d. HTP

True or False

- T F 1. Folk concepts in personality assessment refer to everyday personality attributes.
- T F 2. Personality assessments most closely aligned with the projective hypothesis are referred to as objective personality assessments.
- T F 3. The CAT is a useful personality assessment, as it includes mostly drawings of humans on its cards.
- T F 4. The CAT and TEMAS are intended to be adaptations of the TAT.
- T F 5. Although the Exner Scoring System is used often with the Rorschach Inkblot Method, there lacks research on its use.
- T F 6. The tree drawing in House-Tree-Person is typically analyzed to gauge the client's attitudes toward themselves.

Assessment of Interpersonal Relationships

Multiple Choice

1. Which of the following assessment tools are most aligned with the convoy model?
 - a. **Hierarchical mapping**
 - b. PIE assessment
 - c. MBTI
 - d. Sternberg love model
2. Which of the following is an assessment tool used to measure interpersonal relationships?
 - a. **Genogram**
 - b. Salience Inventory
 - c. Campbell Community Survey
 - d. Jackson Personal Interest Scale
3. Which of the following symbols is used to denote LGBTQ+ individuals in a genogram?
 - a. A zigzag
 - b. An X
 - c. Two parallel lines
 - d. **A triangle**
4. Which of the following symbols is used to denote a death in a genogram?
 - a. A zigzag
 - b. **An X**
 - c. Two parallel lines
 - d. A triangle

5. Which genogram symbol typically denotes an enmeshed relationship?
 - a. A square
 - b. **Double parallel line**
 - c. An X
 - d. Double slanted line

6. Which genogram symbol typically denotes a male?
 - a. **A square**
 - b. Double parallel line
 - c. An X
 - d. Double slanted line

7. Which genogram symbol typically denotes a female?
 - a. **A circle**
 - b. A triangle
 - c. A Y
 - d. An X

8. Which genogram symbol typically denotes divorce?
 - a. An X
 - b. Squiggly line
 - c. Dotted line
 - d. **Double slanted line**

9. Which of the following is not a tip for using a genogram?
 - a. **Use a pencil to allow the client to erase family members**
 - b. Use a broad definition of family in order to assess the diverse composition of families in society
 - c. Collect data from each side of the family separately
 - d. Begin constructing the genogram in the first session and revise as appropriate

10. Which of the following assessment tools can be most useful in premarital counseling?
 - a. ENRICH
 - b. **Taylor-Johnson Temperament Analysis**
 - c. Family Environment Scale
 - d. Dyadic Adjustment Scale

11. Which assessment tool is explicitly intended for both partners to self-administer and have their results interpreted as a single profile?
 - a. **Marital Satisfaction Inventory**
 - b. Derogatis Sexual Functioning Inventory
 - c. Triangular Love Scale
 - d. Taylor-Johnson Temperament Analysis

12. Which of the following interpersonal tools is most closely aligned with social learning theory?
 - a. Marital Satisfaction Inventory
 - b. Family Environment Scale
 - c. Family Assessment Measure–III
 - d. **Couples Precounseling Inventory**

13. Which of the following is a theme of interpersonal violence (IPV) assessments?
 - a. Most tools include psychometric information such as evidence of reliability and validity
 - b. **Most tools do not include items that solicit information about IPV survivors' need for assistance, available resources, or degree of support**
 - c. Most IPV measures investigate family dynamics with a focus on current family systems
 - d. Most assessments do not address emotional abuse
14. What are the common categories of assessment for child abuse?
 - a. **Physical abuse, sexual abuse, neglect, psychological abuse**
 - b. Physical abuse, rape, child endangerment, neglect
 - c. Physical abuse, bullying, neglect
 - d. Physical abuse, failure to thrive, sexual abuse, psychological abuse
15. Which assessment tool provides forms that indicate the client's perceptions of their family, ideal preferences, and expectations of the family in new situations?
 - a. Family Assessment Measure–III
 - b. **Family Environment Scale**
 - c. Family Adjustment Scale
 - d. Family Conflict Survey
16. The majority of intimate partner violence assessments evaluate which of the following?
 - a. Sexual abuse
 - b. Patterns of abusive relationships
 - c. Imminent risk factors
 - d. **None of the above**
17. It is important for counselors to assess which of the following during intimate partner violence assessment?
 - a. Family patterns of violence
 - b. Imminent risk factors
 - c. Degree of support
 - d. **All of the above**
18. Which racial/ethnic group has the highest child abuse victimization rate per 1,000 children?
 - a. Blacks
 - b. **Native Americans**
 - c. Latinx
 - d. Whites
19. Most child abuse cases involve:
 - a. **neglect**
 - b. physical abuse
 - c. sexual abuse
 - d. exploitation

20. Denying an older adult their medication is an example of what form of elder abuse?
- a. Physical
 - b. Neglect
 - c. Emotional exploitation
 - d. **Willful deprivation**
21. Community asset mapping is typically done:
- a. with the client
 - b. with other helping professionals
 - c. with community stakeholders
 - d. **all of the above**

True or False

- T F 1. Most popular interpersonal assessment tools require that the test respondent rate their partner on various characteristics.
- T F 2. Intimate partner violence assessments have been adjusted to address heterosexual bias on the part of the counselor.
- T F 3. Assessment tools tend not to assess intimate partner violence in current family systems.
- T F 4. Most intimate partner violence assessment tools are able to provide a criterion score.
- T F 5. The majority of child abusers are women.
- T F 6. The interpersonal circle metaphor refers to the circumplex created using the affiliation and control constructs.
- T F 7. The most common perpetrator of elder abuse is a family member.

Communication of Assessment Findings

Multiple Choice

- Which of the following is a likely impact of HIPAA laws and related freedom of information laws?
 - A written assessment report will be more likely to be read by a client/student and their parents**
 - A written assessment report will be less likely to be ready by a client/student and their parents
 - Insurance companies will be less inclined to pay for assessment reports
 - Insurance companies will be more inclined to pay for assessment reports
- Which of the following is not one of the five steps of Miller's assessment communication process?
 - Check in with the client/student
 - Provide structure for the interpretation
 - Review the results
 - Identify supporting information**
- Which of the following is not one of the tasks in the fourth step of Miller's assessment interpretation?
 - Emphasize the importance of adding the assessment data to other information that the client has
 - Discuss the results in the context of other information
 - Relate the results to past, present, and future behavior
 - Remind the client which assessment is being discussed and for what purpose**
- When providing structure in the assessment interpretation phase, Miller recommends that the counselor:
 - Remind the client about the purpose of the assessment(s)**
 - Use specific professional terms when presenting the interpretation
 - Request that the client integrates the assessment information
 - None of the above

5. Which of the following is not a basic component of an assessment report?
 - a. Reason for counseling or referral
 - b. Relevant background information
 - c. Evaluation procedures
 - d. **Annotated exception to findings**

6. In a case conference, counselors should do which of the following steps in sequence?
 - a. **Outline how the conference will proceed, cover the history of previous meetings and/or assessment findings, present assessment data, summarize the assessment information, and allow time for questions and discussion**
 - b. Review client perceptions of the assessment, present assessment data, summarize the assessment information, and plan a follow-up case conference
 - c. Welcome those in attendance, develop a case conference agenda, review assessment data, solicit feedback and discussion from the group, summarize the meeting, and plan for the future
 - d. None of the above

7. Common recommendations made when communicating assessment findings relate to:
 - a. Future assessments
 - b. Self-monitoring activities
 - c. Social support activities
 - d. **All of the above**

True or False

- T F 1. Research indicates that it is useful to use psychological jargon with clients during an interpretation session as long as terms are defined.
- T F 2. Counselors should discuss what assessment findings do and do not mean for the client.
- T F 3. Counselors should summarize results for clients rather than having clients summarize their own results.
- T F 4. Counselors can use a “bad news sandwich” approach to delivering positive and negative assessment findings.

Future Trends in Counseling Assessment

Multiple Choice

1. Which of the following reasons accounts for the downward trend in assessment usage in the counseling profession?
 - a. There are limited remaining counseling constructs to be measured
 - b. Health care companies have increased reimbursement opportunities
 - c. Clients are not as interested in assessments as they previously were
 - d. **There is limited attention to assessment in training programs**
2. Which of the following racial/ethnic groups is expected to increase at the most substantial rate by 2060 relative to their current population proportion?
 - a. Blacks
 - b. **Latinx**
 - c. Whites
 - d. Asian Americans
3. Which group is most affected by poverty?
 - a. **Women heads of households**
 - b. Black males
 - c. Married women of Latin descent
 - d. White men who have been recently incarcerated
4. Clients who identify as racial/ethnic minorities are likely to terminate counseling earlier because of which of the following factors?
 - a. A mismatch between the culture of counseling and their cultural background
 - b. Discrimination experienced during the counseling or assessment process
 - c. Cultural stigma
 - d. **All of the above**

5. Globalization:
 - a. Provides an opportunity for counselors to interact with international counselors
 - b. Can be detrimental to the ways counseling symptoms are conceptualized in other countries
 - c. Can be beneficial to the ways counseling symptoms are conceptualized in other countries
 - d. **All of the above**

6. With technological advances in the future, counselors can expect to do which of the following?
 - a. **Work more closely with other professions to maximize assessment findings**
 - b. Be able to create new technologies in assessment
 - c. Rely more on traditional assessment tools
 - d. None of the above

7. Which of the following assessment methods does not help to capture ongoing process-oriented assessment data?
 - a. Dynamic assessment
 - b. Formative assessment
 - c. **Summative assessment**
 - d. Biofeedback

8. Attention to client and community wellness will likely attend to:
 - a. **Resilience strategies**
 - b. Oppression experiences
 - c. Counselor burnout
 - d. Mobile technology

9. Which of the following is not an aim of the Every Student Succeeds Act of 2015?
 - a. Additional access to preschool education
 - b. **Statewide assessments used consistently across school districts**
 - c. Opportunities for college and career readiness
 - d. Wraparound services for students at disadvantaged schools

10. Which preventive assessment service is not included as part of the Patient Protection and Affordable Care Act?
 - a. HIV screenings
 - b. Substance abuse screening
 - c. Intimate partner violence screenings
 - d. **PTSD screenings**

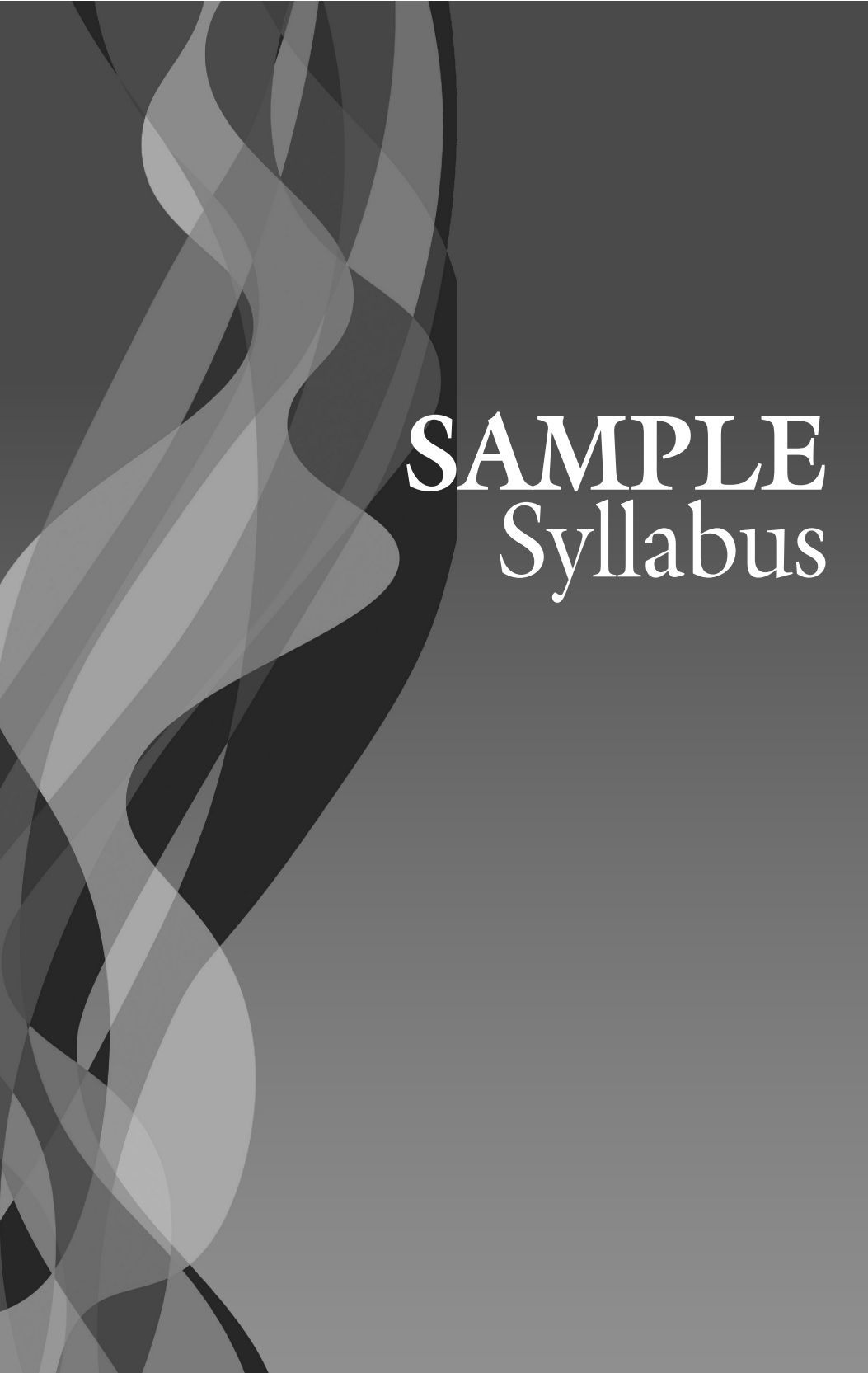
11. Evidence-based assessment involves examining which of the following?
 - a. **Base rates of diagnoses**
 - b. Community support
 - c. Individual changes in comparison with group changes
 - d. None of the above

12. According to Chapter 16, counselors can work with health professionals by doing which of the following?
 - a. Providing consulting services
 - b. Performing initial assessment services
 - c. Conducting psychoeducation workshops
 - d. **All of the above**

13. Which of the following describes the applied consequences of assessment?
 - a. **Consequential validity**
 - b. Ecological validity
 - c. Treatment validity
 - d. Dynamic testing

True or False

- T F 1. The proportion of foreign-born individuals residing in the United States is expected to decrease in the future.
- T F 2. Qualitative assessments will be increasingly used to solicit client narratives about other assessment data.
- T F 3. With the Every Student Succeeds Act of 2015, state and local decision makers come together to develop statewide standards for achievement.
- T F 4. In the future, greater attention will likely be placed on the process of teaching and learning in educational settings.
- T F 5. In order for assessment findings to be relevant and actionable, consequences must be meaningful to pertinent stakeholders.
- T F 6. In the future, it is likely that assessments used in practice, research, and training will remain consistent.



SAMPLE Syllabus

Assessment in Counseling Sample Syllabus

Instructor: Danica G. Hays, PhD

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Office: 301 CEB

Office hours: Tuesdays and Thursdays by appointment

Graduate credit: 3 hours

Class: Tuesdays

4:20–7:00 p.m.

315 CEB

Required Text

Hays, D. G. (2024). *Assessment in counseling: Procedures and practices* (7th ed.). American Counseling Association.

Assessment Packet

Beck Anxiety Inventory

Beck Depression Inventory–II

California Psychological Inventory

Myers-Briggs Type Indicator

Rotter Incomplete Sentences Blank

Saliency Inventory

Skills Confidence Inventory

Strong Interest Inventory

Course Description/Rationale

The focus of this class is on major concepts and principles of counseling assessment and evaluation and the use of standardized instruments and qualitative assessments with differing populations. To this end, this course is designed to have counselor trainees obtain a basic understanding of the nature of psychological and educational assessment, to examine how assessment has influenced our lives, and to examine how clinical assessment can significantly affect the clients with whom we work.

Counselors and helping professionals need to become intelligent users of assessment information within the clinical decision-making process. This course is designed to familiarize counselors, teachers, and other helping professionals with a variety of psychometric instruments typically used in many different settings. This course will provide a means for helping students select, administer, score, interpret, and analyze test data with other clinical information. Throughout the assessment process, cultural diversity issues will be reviewed and discussed. In addition, students will be exposed to the philosophical and statistical properties of measurement instruments as well as the advantages and limitations of assessment approaches. Finally, this course is designed to provide students with an enhanced sensitivity to social and ethical issues in assessment.

Course Objectives

Consistent with CACREP 2024 requirements, upon completion of this course, students will have successfully gained knowledge, skills, and/or attitudes in the following objectives:

Section 3: Foundational Counseling Curriculum	
Standard G. Assessment and Diagnostic Processes	Chapter
1. Historical perspectives concerning the nature and meaning of assessment and testing in counseling	1, 16
2. Basic concepts of standardized and nonstandardized testing, norm-referenced and criterion-referenced assessments, and group and individual assessments	2, 5
3. Statistical concepts, including scales of measurement, measures of central tendency, indices of variability, shapes and types of distributions, and correlations	5
4. Reliability and validity in the use of assessments	6
5. Culturally sustaining and developmental considerations for selecting, administering, and interpreting assessments, including individual accommodations and environmental modifications	4
6. Ethical and legal considerations for selecting, administering, and interpreting assessments	3
7. Use of culturally sustaining and developmentally appropriate assessments for diagnostic and intervention planning purposes	4, 8
8. Use of assessments in academic/educational, career, personal, and social development	9–14
9. Use of environmental assessments and systematic behavioral observations	2, 4, 16
10. Use of structured interviewing, symptom checklists, and personality and psychological testing	2, 7, 13
11. Diagnostic processes, including differential diagnosis and the use of current diagnostic classification systems	8
12. Procedures to identify substance use, addictions, and co-occurring conditions	8
13. Procedures for assessing and responding to risk of aggression or danger to others, self-inflicted harm, and suicide	7, 8
14. Procedures for assessing clients' experience of trauma	7, 8, 14
15. Procedures for identifying and reporting signs of abuse and neglect	7, 8, 14
16. Procedures to identify client characteristics, protective factors, risk factors, and warning signs of mental health and behavioral disorders	7, 8, 9
17. Procedures for using assessment results for referral and consultation	7

Note. The parts of the CACREP Standards that are reproduced in this publication represent only selected parts of the 2024 CACREP Standards. This inclusion of the CACREP Standards reproduced is in no way intended to imply CACREP endorsement or approval of this work and that use of the seventh edition of *Assessment in Counseling* as a teaching tool does not establish or connote compliance with CACREP Standards for purposes of determining CACREP accreditation of any education program.

Course Outline

The following topics will be covered during the course, although not necessarily in the order and format listed.

- I. Functions and Origins of Counseling Assessment
 - A. What is counseling assessment?
 - B. Historical bases for assessment techniques
 - C. Nature and use of counseling assessments
- II. Technical and Methodological Principles
 - A. Norms and test standardization (e.g., norm-referenced, criterion-referenced) and normed samples
 - B. Statistical concepts (e.g., scales of measurement, measure of central tendency, indices of variability, distributions and correlations)
 - C. Reliability
 - D. Validity
 - E. Trustworthiness
 - F. Test development
- III. Applications
 - A. Assessment selection
 - B. Assessment administration
 - C. Scoring and interpreting assessments
 - D. Counseling implications (e.g., integration of case conceptualization, assessment, and intervention)
- IV. Methods and Models of Counseling Assessments
 - A. Intelligence assessments
 - B. Aptitude assessments
 - C. Achievement assessments
 - D. Personality assessments
 - E. Alternative and authentic assessment techniques (e.g., environmental assessment, performance assessment, behavioral observations)
 - F. Qualitative assessments
 - G. Community asset mapping
- V. Current Issues and Future Trends
 - A. Working with special populations
 - B. Multicultural and social justice assessment (e.g., age, gender, sexual orientation, ethnicity, language, disability, culture, spirituality)
 - C. Ethical and social considerations
 - D. Legal considerations
 - E. Technology and assessment
 - F. Assessment within interpersonal relationships
 - G. The future of assessment

Course Format

Class sessions will include both lecture and class discussion to introduce new as well as expand, clarify, and challenge materials presented in the text. Students are expected and encouraged to participate fully.

Accommodating Students With Special Learning Needs

In accordance with university policy, students with documented sensory and/or learning disabilities should visit the Office of Disability Services to request accommodations.

Course Requirements

1. ***Class Attendance and Participation.*** No more than one absence. Excused absences are those reported to the instructor prior to or immediately following the student's absences. Three (3) absences or more—barring extenuating circumstances—will result in a grade of “C” or less. Punctual attendance is expected at each class meeting. Absences will be reflected in the student's course grade. The instructor reserves the right to deduct a maximum of **2 points per absence from the final grade.** While it is understandable that occasionally there are circumstances beyond one's control that may cause one to be late to class or leave class early, excessive tardiness and leaving class early are not acceptable and may affect final course grade.

Read assigned chapters and additional readings according to the course schedule. Participate actively in class discussions and activities. You will be asked to integrate and apply the ideas expressed in the required readings and class discussions.

2. ***Assessment Experience.*** Students will complete the assessments included in the course packet; additional assessments will be provided throughout the course. This material is to complement and provide awareness to test format, test construction, questions, scoring procedures, norming, profiling, interpretation, manual reading, and ethical considerations. Students will self-administer the instruments and return some for computerized scoring as outlined in the course schedule. These will serve as personal examples for computerization results and at the same time require students to consider the ethical implications of presenting such results to others. Some of the assessments will be hand scored by the student in order to learn and gain experiences in scoring procedures, conversion of raw data to standardized score reporting, norming exchanging and adjusting, profiling, and manual interpretations.
3. ***Short Quizzes.*** At the beginning of each class, students will be given a short quiz pertaining to the assigned reading for that particular class. The quizzes will consist of general questions from the readings. Those who are absent or tardy for the quiz will **NOT** be permitted to make up the quiz. The lowest quiz score will be dropped.
4. ***Clinical Assessment and MSE.*** Each student will locate one participant who will volunteer to take the Outcome Questionnaire 45.2 (Lambert et al., 2004), allow for the release of a video-recorded test result interpretation, and provide answers to an intake interview and mental status examination (MSE). **Participants may not be a part of the student's immediate family or a student in this department.** The recorded interview, test report, and interpretation are to be submitted for evaluation. Guideline data sheets are provided below. Please submit **the recording, written report, and consent form** (see Appendix A) **together. Points will be deducted if all are not submitted together.**

Please include the following information in this paper. This report should be similar to the examples presented in class.

- a. Reasons for assessment, assessment conditions, behavioral observations, demographic information
- b. Assessment findings and interpretations
- c. Summary and recommendations
- d. Personal reactions to this project (e.g., How did it feel to be sitting across from a real client? How did you feel about the findings? What did you learn about yourself? What did you learn about the assessment process?)
- e. Redo interview: What would you do differently if you were given the opportunity to redo the interview and Outcome Questionnaire 45.2 interpretation?

The following will be used to evaluate the interpretation:

Recording

- a. Building rapport
 - b. Intake interview
 - c. MSE administration
 - d. Description of the instrument and purpose of the activity
 - e. Interaction with the client
 - f. Interpretation of the Outcome Questionnaire 45.2
 - g. Attention to diversity and social justice considerations
 - h. Integration of assessment information, including external information as relevant
 - i. Planning and summary
5. **Examination.** There will be two examinations (Exam 1: Chapters 1–6; Exam 2: Chapters 7–16). They will include multiple-choice and/or true/false items.
 6. **Case Study.** Students will complete a case study (see Appendix B). They will have to apply learning from the semester to the case study, providing responses to a set of open-ended questions. **Students must work independently on this project.**
 7. **Assessment Fair.** The final class meeting is designated as an assessment fair where students will facilitate a presentation. Select a topic for assessment and find methods for assessing that topic. The purpose of this assignment is to demonstrate your ability to select and critique appropriate assessment tools for a specified topic for assessment; comprehend the pertinent professional literature; and provide a cogent, well-presented summary of the literature investigated.

During the assessment fair, students will discuss their topic and materials using creativity and audiovisual media during the presentation. Students will give a brief introduction of the topic and selected tools and then answer questions. Feedback from classmates will be considered by the instructor when giving a final grade for the assignment. Everyone will present for about 15 minutes each.

The presentation should include the following information:

- a. A definition and description of the topic for assessment;
- b. A description of at least two instruments that assess the topic, including identifying data (e.g., name, author, publisher, date of publication), general information (i.e., nature and purpose of the test, grade/age-group levels, scores available, methods for scoring, administration time and special features, cost), and technical features (i.e., validity, reliability, norms, adequacy of test manual and accessory materials);
- c. Information regarding alternative ways to assess beyond traditional assessment tools; and
- d. A personal critique of the instruments and alternative methods.

Course Evaluation

Deadline	Each class period
Examinations	40% (20% each)
Short quizzes	10%
Case study	15%
Interview write-up	
Report	15%
Personal reaction	5%
Recorded session	Pass/Fail
Assessment fair	15%

Sample Syllabus

In order for a student to pass this class, they must complete and submit all assignments. Failure to do so will result in a failing grade for the course. In general, missing assignment deadlines will not be excused. If a writing assignment is not received at the beginning of the class on the date it is due, a letter grade will be deducted for each class period it is late. There will be no opportunities for extra credit.

Students will receive a letter grade corresponding to the following percentages:

95–100 = A	80–82 = B–
90–94 = A–	77–79 = C+
87–89 = B+	73–76 = C
83–86 = B	70–72 = C–



Appendix A

Consent to Participate and Permission for Confidential Release of Information

I, (print participant's name), agree to participate in a project (student's name) is conducting for [name of course], under the supervision of the instructor (insert name). I understand that I will be asked to respond to the Outcome Questionnaire 45.2 as well as a mental status examination, which will take approximately 25 minutes to 30 minutes to complete. I will also be asked to participate in a recorded interpretation session of my assessment results with (student's name), which will take approximately 1 hour. In addition, I agree to a standard intake interview as part of this recorded session.

I also understand that the interpretation session will be video recorded and that the recording and the Outcome Questionnaire 45.2 printed results will be shared with the instructor. The instructor will provide feedback to the student. The results and the interview data will be confidential and will be returned to me upon completion of the course by the student. No names will be submitted with the report. I also understand that I may withdraw from this project at any time.

Signed: _____
(participant) (date)

Signed: _____
(student)^a (date)

Signed: _____
(parent or guardian) (date)

^aIf a minor, parent or guardian must also sign for participation in this project and to release for recording and administration.



Appendix B

Assessment Case Study

Case of Tony

Tony is a 36-year-old woman. She has been partnered for the past 3 years and has three children (ages 18, 10, and 2), two of whom are from previous relationships. During her intake interview, she presented herself as meticulously dressed and overweight. She fidgeted constantly with her clothes and picked at her fingernails. She avoided eye contact during the session. She recently graduated from college. Tony reports general dissatisfaction. She states that her life is uneventful and predictable, and she feels some panic over reaching her late 30s. For the past 2 years, a range of psychosomatic complaints, including sleep disturbance, anxiety, dizziness, heart palpitations, and headaches, have troubled her. Tony complains that she cries easily over trivial matters, often feels depressed, and has a weight problem.

OR . . .

Case of Mia

Mia is a 12-year-old girl who was referred to you by her teacher for evaluation of her avoidant behavior and emotional outbursts. Mia lives with her mother and younger brother. She has been refusing to participate in class activities and fails to follow directions. Her teachers report that Mia has a tendency to isolate herself from others in the class and refuses to participate in any class activity. Her mother indicates that other children make fun of Mia. Her mother is very reluctant to have Mia assessed, stating that she does not want any “test telling her that her daughter is crazy.”

Please select one of the case studies and respond to the following questions/issues:

1. Define assessment and discuss how you believe it is related to the general counseling process with this client.
2. What questions would you include as part of an intake interview? Moreover, what responses do you anticipate? (Responses to this question may influence how you respond to some questions below.)

3. Describe your client's mental status using a mental status examination.
4. Based on your intake interview and mental status examination, what factors and issues do you feel need to be addressed?
5. You have described that your client would benefit from some testing. What are some reasons for testing this client?
6. Which evaluation tools will you utilize and why? (Consider both formal and informal, structured and unstructured tools.) How will you determine whether the tools are appropriate?
7. What are the advantages and disadvantages of the tools you selected?
8. How would you go about preparing for and executing the assessment process? Specifically, what will you tell the client?
9. What are the legal, ethical, and/or moral issues?
10. What are some potential multicultural and social justice considerations?