

Intellectual Assessment

- Original practical purpose: detecting mental retardation
- Now used for wide variety of assessment questions

History: Binet

- 1899 Binet, Simon working on intelligence measurement
- 1904 Binet French national commission
 - Asked to develop objective method of diagnosing MR
 - Teacher ratings highly unreliable & socioeconomically biased

Binet, cont'd

- 1905 Binet-Simon scale, standardized
- 1908 Mental age concept
 - Age at which “most” children can do item = item’s mental age
 - Mental age of child got by weighted sum of items
- 1908 Goddard translated 1905 scale

Terman & Stanford-Binet

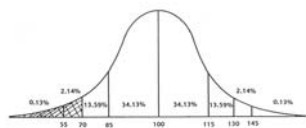
- 1912 Terman & Childs (from 1908 scale)
 - Basal & ceiling ages
 - MA now gotten by adding to basal age # of months for passing items
 - More varied item content

The IQ Concept, Group Tests

- 1912 Stern's "mental quotient" = MA/CA
- "Intelligence quotient" (IQ) = $MQ \times 100$
- Group tests
- 1914 Yerkes's Army alpha, beta
 - Progenitor of SAT, GRE, etc.

Wechsler Tests

- Stanford-Binet not enough "top" for adults
- Used tests from Army beta, etc.
- 1939 Wechsler-Bellevue developed
 - Deviation IQ (why was this necessary?)
 - Within age group, $M = 100$, $SD = 15$
 - 11 subtests in 2 groups: Verbal, Performance



Common Tests Today

- 2003 Stanford-Binet, 5th Ed.
- WPPSI-R, WISC-IV, WAIS-III, WASI
- Kaufman ABC
- Learning disability-related tests
 - Ex.: Reading tests
- Neuropsychological tests
 - sensitive to kinds of brain damage
 - very little “top,” lots of “bottom”

Assessment Procedures

- Formulate clear referral question
- Select tests appropriately
- Administration & scoring
 - Well standardized procedures, strictly followed
 - Neutral demeanor, absence of praise or blame
 - Clear scoring rules, reliability very high
 - Biggest problem is careless errors

Test Interpretation

- Look first at overall performance level
- Discrepancies between subtests
- Discrepancies with expected performance
- Consider age: tests less reliable at younger ages
- Language problems, physical handicaps
- Cultural differences, low SES impact

Reporting Procedures

- Consider audience
- Answer referral question
 - Negotiate question with referral source?
- Give clear but cautious statements
- Giving feedback
 - to patients, parents, etc.
 - to agencies, school systems, etc.
