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2000 Presidential Address Assessing Positive Features of the Personality

by Sandra W. Russ

What are positive features of the personality and why is it important to assess these features? Positive features are those personality variables that have predictive power for adaptive functioning. There is a growing emphasis in psychology on positive aspects of the person and on developing interventions and environments that foster the development of these processes. In order to move forward in this area, we need valid measures of these personality variables. We already have valid measures of many of these personality processes but for other processes, measures need to be developed. The field of personality assessment should be active in getting the word out about the measures that do exist, active in refining these measures, and in developing new measures that are needed.

The topic of assessing positive features of the personality began in SPA about two years ago at the Mid-Winter meeting in 1998 in a symposium organized by Len Handler. That symposium evolved into a special series in the Journal of Personality Assessment, edited by Handler and Potash, on "Assessment of Psychological Health" (1999). That series was predated by John Exner's call for studies of the Rorschach that focus on predicting healthy personality traits (also at the 1998 mid-winter meeting.) At the same time, Martin Seligman and colleagues have begun the positive psychology movement. The January, 2000 issue of the American Psychologist is a special issue on positive psychology. Seligman defines positive psychology at the individual level as being about positive individual traits (capacity for love, perseverance, originality) to name a few (Seligman & Csikzentimihalyi, 2000). At the subjective level, he says it is about valued subjective experiences (hope and optimism, flow and happiness). This issue of the American Psychologist is a good one with excellent articles covering a number of positive personality constructs. Interestingly, in this issue there is not much discussion about assessing these variables. And we can't study them without measuring them.

Personally, I think that this positive psychology movement is very good for the

field. I'm glad to see it getting the hype. There are definite implications for the field of personality assessment and for SPA. There are three implications that I want to talk about today:

- 1. We need to refine and develop the measures of positive personality features. With these measures, we should investigate the personality variables that are resources for the individual.
- 2. In individual assessment, we need to identify the strengths of the individual as well as the problem areas.
- 3. We need to emphasize the importance of assessment of positive personality variables in prevention programs.



Measures of Positive Personality Characteristics

There is a long list of positive personality characteristics. I want to mention four today: optimism, play ability, creativity, and object relations and say a few words about each in relation to personality assessment, and some of the issues that are coming up in assessing these variables.

Optimism—In the special series in JPA on Assessment of Psychological Health, there is an article by Strassle, McKee, and Plant (1999) on assessing optimism. Optimism, they point out, is a personality variable that is related to a number of aspects of healthy functioning, such as physical health, self-esteem, and perception of daily hassles. They were developing a

measure of optimism for the TAT. It consisted of a 5-point Likert scale. I think this measure has real potential because it is a scale that is easy to use and is for the TAT, a test that is often included in a standard assessment battery. I would expect that this optimism measure should be related to treatment outcome and could be very helpful in treatment planning. I hope this research team is continuing efforts to validate this scale, because it is assessing an important variable that is important in treatment planning. This is a good example of using an existing measure and adapting it to measure an important positive personality construct.

Play Ability—Children's pretend play is an area I have spent a lot of time investigating. Many important positive personality and affective processes occur in children's play and, probably, although harder to prove, are facilitated by play. What personality processes occur in pretend play? What can we measure in a standardized situation? (See Table 1, pg.2)

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Table 1 Variables Assessed in Play

Personality
Ability to express affect
Range of affect
Positive affect
Negative affect
Capacity to modulate/regulate affect
Ability to resolve conflicts
Interpersonal schema/object relations
Capacity for flow
Cognitive
Imagination
Organization of Fantasy

We can measure ability to express affect; the range of affect—both positive affect and negative affect; capacity to regulate and modulate affect; ability to work with and resolve conflicts; interpersonal schema/object relations, and capacity for flow. We can also measure cognitive processes of imagination and quality of fantasy to name a few. The Affect in Play Scale (APS) that I and my students have developed, measures the frequency of affect expression and range of affect (Russ, 1993). Our scale and others, like Jerome Singers' scale, measures imagination and ability to pretend. Pauline Kernberg's play scale measures conflict expression and a number of other variables.

Someone needs to develop a good measure of object relations and also of emotional regulation in play. There have been some attempts and I'm sure it can be done. Flow—absorption in and joy in the task—occurs in play and can be measured. The comfort in play score on the APS measures this-we need to do some focused validity studies on that variable. Why is play important? It is predictive of adaptive functioning in children. In our research and in other research programs like those of Jerome and Dorothy Singer, play ability is related to creativity, coping ability, capacity for empathy, and adjustment measures. These play measures are usually independent of IQ. So play is a resource for children that is independent of intelligence.

Another important question to ask about these positive personality characteristics is "are they stable over time?" Do they have state-like or trait-like characteristics? For play ability, using the Affect in Play Scale scores, we did find good stability over a five year period. In a recent study, we followed up first and second graders who were now

in fifth and sixth grade. So this was a four year follow-up study (Russ, Robins, & Christiano, 1999). There were 30 children who participated in the follow-up. In the first and second grades, the children were administered the APS—and affect and fantasy scores were coded from videotapes. These are five minute play sessions. In the sixth and seventh grades they were administered the same task (puppets and blocks) but the play task became a story-telling task in the form of a play. The stories were scored with the same criteria as the APS.

We found that early play scores were predictive of later play stories. The magnitude of the correlations is quite good for longitudinal data, and suggests that these processes are stable over time. So for frequency of affect expressed in play at time 1 and in the stories at time 2 the correlation is .33 (p < .05), the correlation is .38 (p < .05) for variety of affect (range of affect) and .51 (p < .01) for amount of positive affect. Most of the cognitive scores are also stable over time.

These kinds of longitudinal studies are important to do—and they are hard to do—but we need to learn about the stability of these processes.

The strong implication of these studies is that play is a resource for children that helps them in a number of ways. We should be paying attention to it—both by developing and using measures of play and by teaching play skills at an early age. Play assessment tells us a lot about a child, and play is something that most young children do in intake and early assessment sessions. So it would be useful to observe it systematically.

Len Handler stresses that the ability to play (although I would argue in a different way) is also important in adults and so he is developing a measure of adult playfulness (Handler, 1999) that should be related to adaptive functioning in adults. It will be interesting to see how early play relates to adult playfulness. The positive affect dimension should be stable over time.

Creativity—We know a lot about the personality, affective, and cognitive variables that are important in the creative process. We could put together a fairly comprehensive assessment battery to predict creativity. We need to learn about how these processes develop. We have measures for some creative processes, but not for all. Tolerance for failure is one important positive personality characteristic of creative people. How do we measure that? Dean Simonton makes the point that creative individuals have more

creative products than non-creative individuals, but also have more failures (Simonton, 1993). So these individuals are able to persevere in an area and also tolerate the negative affect that comes with failure and criticism. Openness to experience is another personality variable that relates to creativity. Openness to experience is one of McCrae and Costa's dimensions in their five factor model of personality. In studies with the NEO, openness to experience has consistently been related to creativity measures (McCrae, 1987). How do we help openness to experience develop? Is that process stable from childhood to adulthood?

There are some very interesting theoretical questions in the creativity area. Just to name one—what is the role of negative affect in creativity? We know that positive affect is a plus. It relates to creativity. And it facilitates creativity (Isen, 1999). If you put people in a positive mood, they do better on creativity tests. What about negative affect? There is a real debate in the field. Some studies say there is a positive relationship between negative affect and creativity (our play studies show that, as do the Rorschach studies using primary process responses). But too much negative affect does not help creativity. How much is too much negative affect and in what form (aggression, sadness)? Does aggression work differently than sadness? And a personality trait that is adaptive in one situation may be maladaptive in another. What is a positive feature in one situation may be not so positive in another. So the picture becomes more complicated. Positive personality features may not be consistently predictive of adaptive functioning. A process can be adaptive in one situation and maladaptive in another. So, for example, in play, negative affect has been related to creativity. We just looked at prediction of play over a ten year period-from first and second grade to high school. Negative affect in play did not predict creativity over this ten year period. It did predict depression (Beck's Scale) with a correlation of .31 (p < .05) (Russ & Cooperberg, 2000).

My student, Mark Cooperberg, was happy to see this relationship. Not a bad correlation over this period of time. I, however, was not so glad to see it. I was hoping that the ability to express negative emotion easily would be a resource for the child, and predict creativity, not predict depression. We need to take a closer look at this variable to see what this finding means. Probably the configuration of personality variables is also important here. The interaction of these personality features is also important to study. The

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whole creativity area is ripe for investigation—there are many important questions to investigate.

Capacity for Love- or Levelof Object Relations

In the world of interpersonal relationships, level of object relations (or interpersonal schema) is a key variable. We already have valid measures of object relations for the Rorschach (Urist; Lerner & Lerner; Blatt) and TAT (Westen). We need to get the word out about the value of these measures, especially in treatment planning. And we need to do more research with these instruments. One of the problems in getting the word out about the usefulness of these measures, is the language-the name of the construct. Capacity for love sounds so much more appealing than level of object relations. If you are not psychodynamically oriented, the language is an obstacle and interferes with investigators using the measures. We need to do some "PR" for this concept.

Assessing the Individual Case

The second implication of positive psychology for the field of assessment is that in assessing the individual case, we need to focus on the strengths as well as the problem areas in the psychological report and in treatment planning. Potash stressed this point in the JPA special series (1999). Now, this is not a new idea. Textbooks on assessment have been making this point for a long time. And I think in the child area, it has been more routine to include the strengths and resources in an assessment. Most child clinical psychologists use a developmental approach, are constantly thinking about norms for the age, and how the developmental process is moving forward in the child. So, we look to build on the strengths. That is a different model from that of bringing stability to the adult.

Also, in our individual assessments, we could begin to look at strengths in a more systematic fashion. For example, we could determine whether or not including an optimism scale added predictive power in treatment planning and decision making. Or, in assessing children, I frequently observe the play of a child to help determine whether he or she is a good candidate for play therapy. It does add to my treatment planning. Play observation tells me something unique that other tests don't tell me. Can the child use a play

therapy approach? So play assessment adds value to the decision-making process. What we have to do is demonstrate this empirically. We need studies that determine the "value added" of measures of positive personality variables for treatment planning.

Assessment and Prevention

Finally, a third implication of positive psychology for personality assessment is that we should define the role of assessment of positive personality features in prevention programs. Hopefully, there will be a growing number of prevention intervention programs that are trying to develop resources such as play skills, competencies, ability to trust and use social support, and coping skills. Assessment is an integral part of these programs.

One thing I want to do in my term as President is to highlight this area of assessment and prevention. I would like to form a Task Force on Assessment in Prevention Programs that would highlight the role of assessment, identify the available valid measures for assessing positive personality features, and identify areas where measures need to be developed. The Task Force could also identify a few model programs in which the role of assessment has been well defined. Anyone who is interested in working with me on this project, let me know.

In conclusion, as you may have deduced, I think the move to focus on positive features of the personality is a very good one for the field of psychology. I think it is also an opportunity for the field of personality assessment to develop measures in this area and get involved in the growing number of activities. I've spent my career investigating the positive characteristics of creativity, play, and integrated primary process thinking—that are resources for individuals. I think I've done this not because I am an optimist, but because I am a pessimist; life is tough. Bad things happen. It's hard to change environments on a large scale. It's hard to change seriously dysfunctional families. But, we can help people develop these internal resources that serve as buffers and can bring joy under the most difficult of circumstances.

The pendulum is swinging to the positive pole of the continuum in psychology and I hope it stays here for awhile. We have a lot to learn—a lot to do—and as the song says—"we've only just begun."

References

Handler, L. (1999). Assessment of playfulness: Hermann Rorschach meets D. W. Winnicott. *Journal of Personality Assessment*, 72, 208–217.

Handler, L., & Potash, H.M. (1999). Special Series: The assessment of psychological health; optimism, creativity, playfulness, and transitional relatedness. *Journal of Personality Assessment*, 72, 181–229.

Isen, A. (1999). On the relationship between affect and creative problem solving. In S. Russ (Ed.) *Affect, creative experience and psychological adjustment* (pp. 3–17). Philadelphia: Brunner/Mazel.

McCrae, R.R. (1987). Creativity, divergent thinking, and openness to experience. *Journal of Personality and Social Psychology*, 52, 1258–1265.

Potash, H.M. (1999). Assessment through the dialectic: The necessary forgotten link. *Journal of Personality Assessment*, 72, 185-189.

Russ, S. (1993). Affect and creativity: The role of affect and play in the creative process. Mahwah: Lawrence Erlbaum Associates, Inc.

Russ, S., & Cooperberg, M. (2000). Affect in play: Longitudinal Prediction of coping and creativity in high school students. Manuscript in Preparation.

Russ, S., Robins, A., & Christiano, B. (1999). Pretend play: longitudinal prediction of creativity and affect in fantasy in children. *Creativity Research Journal*, 2, 129–139.

Simonton, D.K. (1993). Genius and chance: A Darwinian perspective. In H. Brockman (Ed.) *Creativity* (pp. 176–201). New York: Simon and Schuster.

Seligman, M., & Csikszentmihalyi, M. (2000). Positive psychology: An introduction. *American Psychologist*, *55*, 5–14.

Strassle, C.G., McKee, A., & Plant, D. (1999). Optimism as an indicator of psychological health: Using psychological assessment wisely. *Journal of Personality Assessment*, 72, 190–199.

Delaware Society for Personality Assessment (DVSPA) Forming

by Alan Schwartz, PsyD

A local chapter of the Society for Personality Assessment is forming in the Delaware Valley/Greater Philadelphia area which includes Southeastern Pennsylvania, Southern New Jersey, and Delaware. Unlike other regional SPA chapters, there is actually a dense concentration of assessment professionals in this geographic area. However, there are few organizational venues for an ongoing discussion of assessment issues. The DVSPA has had a number of organizational meetings with its steering committee which consists of Jamie Loving, Alan Schwartz, Maryann McLaughlin, and David York. The first open meeting was held on June 23, 2000 over dinner and a case presentation with 12 attendees. The atmosphere was open and friendly and included faculty and graduate students from a number of the prominent programs in the area including Widener University, La Salle University, Philadelphia College of Osteopathic Medicine, Chestnut Hill College, Villanova University, and Hahnemann University. The steering committee is interested in continuing to develop plans for expanding DVSPA yet still maintaining an informal, comfortable atmosphere. Future plans

- Sponsoring Continuing Education lectures and workshops presented by renowned assessment clinicians in affiliation with local graduate programs. Our first cosponsored event will be with Widener University and Dr. Alan Lee's presentation of "PCL-R" on December 15, 2000.
- Providing a continuing forum for case conferences, professional discussions, ethical/legal issues and other issues relevant to the practice of assessment.

- Providing a forum for networking among professionals involved in the research, teaching, and application of psychological assessment.
- Offering consultation and supervision resources available to students and professionals seeking assessment expertise.
- Developing a teaching network to support the quality of assessment training in graduate psychology programs.
- Supporting public and professional advocacy efforts to promote the effective, ethical, and gainful use of assessment in today's era of managed care and other pressures.
- Providing a link between local professionals and the international SPA organization.

DVSPA is excited to have the opportunity to raise the awareness of local assessment professionals by encouraging their attendance at the SPA Mid-Winter Meeting in Philadelphia on March 14–18, 2000.

For information about DVSPA please contact:

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The steering committee would like to thank Virginia Brabender for her generous support and encouragement of DVSPA.

A New Column in the Works...

At the SPA mid-winter meeting in Albuquerque, the editorial board of the SPA Exchange discussed the possibility of developing a new column on Ethics and Standards in Personality Testing and Assessment as a regular feature of the Exchange. As you are aware, the current scenario of testing practice often presents some new ethical dilemmas or additional layers to age-old issues of confidentiality, informed consent, etc.

For example, participants of the Rorschach listsery (which some of you subscribe to) periodically extend alerts about widely used psychological tests being posted on websites—the Rorschach plates have been reproduced on the web, the Beck Depression Inventory questions and scoring guidelines are available for public access, and so on. Further, assessment practitioners have often experienced queasy reactions to third-party payers' access to test data. From a proactive point of view, works by our president-elect Steve Finn and others have sensitized us to the importance of providing thorough and therapeutically-oriented test feedback.

The editorial board feels it is important for the SPA membership to identify the issues we are contending with in our practices and have an open exchange about them. Many of you have arrived at creative solutions that we could all benefit from hearing about. Our collective ideas could even generate scholarly work that finds outlet in assessment journals.

We encourage you to submit comments and topics for discussion. Please write to:

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Mid-Winter 2001 SPA Meeting March 14–18, 2001



To be held at: Loews Philadelphia Hotel, 1200 Market Street, Philadelphia, PA 19107–3788 tel: 215–627–1200; fax: 215–231–7305; website: loewsphiladelphia@loewshotels.com

Philadelphia's key attractions include:

Independence Hall
Franklin Institute
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Academy of Music
Liberty Bell Pavilion
City Hall

Numerous theaters, restaurants, night life...



Mid-Winter 2000 SPA Meeting



Virginia Brabender, editor of the SPA Exchange, makes a bid at the auction during the mid-winter meeting.

Albuquerque, NM



Irving Weiner, Advocacy Coordinator, discusses the political landscape.



Stephen Finn, President-Elect, and John Exner.



SPA merrymakers enjoy the fiesta.



The 2000 Master Lecture was given by Alex Caldwell.



James Kleiger and Don Vigliona embrace symbolism at the mid-winter meeting.

The Impact of Managed Care on Psychological Assessment:

A Review of the Recent Work of Chris Piotrowski

by Edward M. Petrosky, PsyD

In two recent articles, Chris Piotrowski, a long-standing member of SPA, has examined the effect of managed care on psychological assessment. Piotrowski's (1999) review of the literature on current test usage in "Assessment Practices in the Era of Managed Care: Current Status and Future Directions" indicates that while traditional assessment techniques are frequently still used, many practitioners are either testing a fewer number of individuals or spending less time on each case by abandoning time consuming projective, intellectual, and self-report instruments.

Piotrowski (1999) notes that managed care's denials for preauthorization and reimbursement for psychological testing obviously pose as threats, in particular to the area of personality assessment. Piotrowski suggests that at least part of the disharmony between managed care and psychological testing may be because the link between psychological testing and treatment planning has not been adequately fleshed out, despite recent advances to the contrary. In the present author's opinion, this void is reflected in the need graduate students often express for more training on writing report recommendations. Managed care's requirement that all services be justified underscores the importance of demonstrating a clear and explicit link between assessment and treatment decisions.

Piotrowski's (1999) review of the literature also indicates that managed care perceives psychological testing to be too time consuming to be cost effective. As a result, Piotrowski argues that managed care companies rely on nonstandardized clinical interviews, a technique whose reliability and validity have been questioned. Piotrowski predicts an increase in the use of brief, symptom focused measures, specifically checklists that assess particular domains

of functioning, as opposed to comprehensive assessments and a focus on global personality factors. Piotrowski argues that this trend is also influenced by the rise of "brief therapeutic approaches with a focus on....symptomatology, and treatment outcome....and not psychodynamics, defenses, character structure, and object relations" (p. 793). Undoubtedly, the rise of the cognitivebehavioral paradigm has played a significant role in this regard. Cognitivebehavioral approaches have been "DSM (and consequently managed care) friendly," with an emphasis on diagnosing overt symptomatology and seeking symptom reduction.* The proliferation of cognitive-behavioral approaches for specific disorders as defined by the DSM is a case in point.

Piotrowski (1999) states that managed care's influence on psychological testing is not constant across settings. He notes that where reimbursement is not an issue, traditional psychological assessment practices have continued unfettered. He states that in mandated forensic and neuropsychological evaluations during legal proceedings, extensive and comprehensive assessments are the norm. Testing in facilities funded by the government, such as state hospitals and schools, has likewise proceeded along traditional lines. Finally, Piotrowski cites the importance of personality assessment in industrial/organizational contexts, where again, managed care reimbursement does not apply.

Piotrowski's observations indicate that the viability of traditional assessment techniques rests, at least in part, on the answer to the question: "who has the money to pay for it?" Certainly many clients do not, and managed care has proven that it is not willing to foot the bill. Psychological assessment is on the most stable ground when there is a secure source of funding, such as the tax dollars that support the activities of school psychologists. On a side note, school psychology is an area in which assessment is also protected by the fact that the need for testing is built into the laws governing school services. Perhaps this speaks to the importance of the continued efforts of psychologists to influence laws and public policy.

Piotrowski's findings also indicate that one route-albeit a limited one-to influence manage care companies is to demonstrate the cost effectiveness of psychological assessment. One of the reasons for the continued success of assessment in organizational contexts is that psychological assessment has proven to be cost effective for the organization. For example, the fee for assessing job candidates for the best fit for a position paying 100K dollars a year suddenly seems small when one considers that hiring the wrong candidate who does not work out after 6 months represents a 50K dollar lost investment. In terms of managed care and treatment, one tact therapists have taken with certain clients, for example, has been to point out to manage care companies how weekly therapy will be cheaper than the hospitalization the therapist predicts will ensue if the client does not receive therapy. Thus, an analogous demonstration of cost effectiveness might be pursued with regard to psychological testing. However, this approach is necessarily confined by the fact that the services that benefit the client the most will, of course, not always be the most inexpensive. Additionally, psychologists need to be cautious about colluding with an implicit assumption that saving money is the ultimate value to uphold.

Because managed care has had such an impact on the practice of psychology, and

because there has been such a paucity of research on training in psychological assessment in internship settings, Piotrowski and Belter (1999) authored: "Internship Training In Psychological Assessment: Has Managed Care Had An Impact?" Piotrowski and Belter surveyed directors of APA approved internship sites about the role that psychological testing plays in the training experience of their interns. Two hundred twenty five directors were randomly solicited for participation from a list of 446, and an n of 84 directors ultimately responded to the survey.

Although Piotrowski and Belter (1999) found minor shifts in terms of test selection, they reported that managed care has not had a major impact on internship training in psychological assessment. They concluded that psychological assessment remains important to program directors, since 87% of the directors reported that their programs had seminars devoted to some aspect of assessment, and a median of 30 seminar hours on assessment was reported. Future research might address the issue of selection bias. It is possible that the 37% of the directors chosen to participate who responded to the survey were those who are committed enough to assessment to complete and return a survey about it.

Piotrowski and Belter (1999) found that, generally, traditional assessment techniques continue to be utilized. A substantial majority of directors indicated that assessment instruments across projective, objective, and intelligence domains are emphasized, and a slightly smaller majority reported an emphasis on behavioral methods of assessment. Directors also were asked to identify the four techniques most commonly used by their interns in each of the four areas above. At least three fourths of the directors listed the Rorschach, TAT, MMPI-2/MMPI-A, and WAIS among the top four tests in their respective categories. The MCMI and WISC-III were identified by 50% of the directors. There was less consensus for behavioral methods, with the CBCL being the most

commonly endorsed, identified by 17% of the directors. Thus, the data indicate that traditional assessment methods are commonly used in internship training, with the MCMI ascending in popularity. Coinciding with the results above, the directors most commonly identified the MMPI-2/MMPI-A, WAIS-R/WAIS-III, and Rorschach as the techniques essential for practicing psychologists of the present and near future.

While projective techniques may frequently still be used and considered germane by directors of internship training, Piotrowski and Belter (1999) found that approximately one third of the directors reported a decrease in emphasis of projective techniques. In contrast, Piotrowski and Belter reported an increase in emphasis in neuropsychological assessment by more than half of the directors.

Finally, Piotrowski and Belter (1999) assessed the degree to and ways in which internship programs have recently changed. They report that approximately two thirds of the program directors reported at least one issue that has prompted change, with approximately half the issues being internal factors, such as changes in staff or theoretical orientation, and half the issues being external factors, such as decreased reimbursement for assessment and marketplace changes. Piotrowski and Belter state that 43% of the program directors responded "Yes" to an item asking if managed care has affected the program's curriculum in assessment. Thus, despite the constancy in internship programs implied above, Piotrowski and Belter's data indicates that programs have undergone change. What remains to be seen is the interaction between the "internal" and "external" factors Piotrowski and Belter identified. For example, external changes, such as changes in the marketplace, in particular the demand of managed care for more brief treatments, may lead to internal changes, such as changes in theoretical orientation. The rise of short term psychodynamic approaches in recent years is a reflection of this very process.

Piotrowski and Belter conclude by noting that the top-ranked instruments in internship training programs are those that have been identified by practitioners as less frequently used due to manage care constraints. Piotrowski and Belter recommend that directors of internship training programs therefore "strive to establish a balance between maintaining training integrity and preparing interns for the realities of the clinical practice arena" (p. 387).

In conclusion, the work of Piotrowski (1999) and Piotrowski and Belter (1999) indicates that traditional assessment techniques remain standard, both for practicing psychologists and interns in training. Traditional assessment techniques have continued unencumbered in settings in which manage care reimbursement is not an issue. However, in settings where it is an issue, there has been a relative decline in the use of projective techniques. Piotrowski foresees an increase in the use of objective, symptom-based measures, and calls for a balance in internship training between traditional techniques and assessment tools needed to adapt to the managed care marketplace.

* One notable exception is Jeffrey Young's (1994) Schema-Focused Cognitive Therapy which attempts character change and addresses "defenses."

References

Piotrowski, C. (1999). Assessment practices in the era of managed care: Current status and future directions. *Journal of Clinical Psychology*, 55(7), 787–796.

Piotrowski, C., & Belter, R.W. (1999). Internship training in psychological assessment: Has managed care had an impact? *Assessment*, 6(4), 381–389.

Young, J.E. (1994). Cognitive therapy for personality disorders: A schema-focused approach. Sarasota, FL: Professional Resource Press.

Sandra Russ, SPA President

Biography

by Robert Lovitt, PhD

Sandra Russ is a person who could have had several distinguished careers, if she only had the time. Academic and clinical psychology won out over music, university administration, writing, children's advocate, to name a few. I encourage you to spend time with Sandra; it is likely to be a special experience.

The only child of a talented musician, scholar, and devoted/hardworking

mother was born in Pittsburgh in 1946. Sandra was the first of the baby boomers; being first became a way of life for her.

Being an only child meant coping with large amounts of solitary time. During these experiences she learned to depend on herself and to use internal resources and imagination to make the time enjoyable. There is not a trace of entitlement or self-centeredness deriving from her only child status. Spending a great

deal of time alone, as a child, Sandra learned to use opportunities in a constructive and rewarding manner. She describes herself as being a creative child who derived a great deal of pleasure from her imagination and her play. This was not a lonely or frustrating time but one that provided a deep personal background for understanding fantasy and creativity.

The parents, two individuals who were unpretentious, hardworking, with strong family values served as an inspiration and model for Sandra throughout her early and later years. Dad was particularly influential. Although not receiving extensive formal training he was a professional trumpet player and musical scholar who was knowledgeable and erudite

about various musical styles. He sold music in a music store and loved it. The act of helping and educating people was a joy. He did not complain about the lack of objective compensation for his ability, but in fact was a wonderful teacher who integrated being a retail salesman with a scholarly understanding of music which he transmitted to family and customers. These values have had a major impact upon Sandra. Mr. Walker initiated Sandra's career in



academic psychology by teaching her how to collect data in a systematic way at an early age. Those of you with long memories will remember the hit parade which was a standard on radio and television in the 40s, 50s, and 60s. Sandra started at the age of 6 to keep a listing of which songs fell in which position every week; she stored and retrieved this data to review musical issues with her father. He was also an enthusiastic teacher who loved his work. Mr. Walker passed away in 1990, at the age of 83; he remains a living presence in Sandra's life.

Mom was a hardworking, familycentered woman who found her greatest joys in being a mother, housewife, and providing whatever support she was best able to give to the family. This is a woman who did not finish high school and nurtured Sandra and encouraged her to do the best she was able to do in whatever arena she was trying to master.

There was a small extended family and Sandra became particularly close to a grandmother and set of aunts who were important in providing support outside the immediate family. This was a loving family, deeply committed to

nurturing. Sandra returned to her mother the devotion and appreciation that she has felt from her throughout her life. Her mother recently passed away after a difficult bout with pneumonia. During her later years Sandra had remained devoted and involved with her mother's care. As all of you with elderly parents know, this was a loving and painful time.

Sandra found herself a high achieving, well-rounded individual as she began high

school. She did high level academic work, she sang, was involved in student council, and became a vigorous participant in campus life. During this time Sandra developed a sensitivity to and appreciation of different socioeconomic levels and the unique problems and opportunities associated with these levels. She developed a strong awareness of social fairness, social privilege, and social discrimination. These experiences laid the ground work for major career activities in college administration, departmental governance, and SPA leadership.

After high school she got a scholarship to the University of Pittsburgh. Loving the college experience it solidified her interests in psychology. She continued her singing career singing in the college

chapel and choir. But she also knew she wanted to major in psychology and wanted to do therapy and research. Sandra had always known that it was important that she be able to financially support herself. She has emulated those people who developed economic independence without manipulating or exploiting others. Instead she has given back consistently to psychology, her university, her department, SPA, her family, and to the research literature.

Graduate school took place at the University of Pittsburgh, starting at age 20. Never one to waste time, the doctorate was awarded at the age of 24. She did a master's thesis in creativity and the doctoral dissertation was a study on the quality of clinical decision making. She looked carefully at assessment data and the assessment process to determine which data contributed most significantly. Clinical focus was child experience with a secondary focus on adult experience. Her most memorable work took place at a child guidance clinic, in beginning her research program in creativity and in using play therapy with an outpatient population.

Sandra attended her first SPA meeting in 1979. She had been hired at Case Western Reserve, by Irv Weiner in 1975 and was encouraged to join SPA by Irv. From 1982 to 1986 she served as training director at Case Western Reserve. Very early in her career she rediscovered that she wanted to write and do research linking the quality of play with that of creativity. This eventually became her major academic interest. During these early years at Case Western Reserve she taught a one year assessment sequence. Faculty quickly became attuned to Sandra's style of management and style of relating to colleagues. This was someone who built consensus among people and someone that others trusted. She received tenure in 1981.

Returning from a one year sabbatical she was appointed to a position in the provost's office and became the

assistant provost for the University in 1987. Serving in this role for seven years opened up a new career path and supplied her with the opportunity to develop unique skills and to bring social values to the administration. As assistant provost, she became a vital part of the office responsible for academic affairs for the University. Becoming involved in developing an affirmative action program for women, minorities, and disadvantaged groups characterized early efforts. Sandra developed programs for junior faculty to assist them in becoming better teachers and in dealing with grievances against the University. Earlier, she had run for faculty senate and won. Directing faculty personnel areas and developing guidelines for faculty for promotion and review followed. This was a gratifying time for Sandra and eventually left her with a major career decision. Should she search for a provost's position or return to psychology and become chairperson? Happily for SPA she came back to psychology and continued her research in creativity and play, developing scales and techniques to more fully understand and measure creativity. This served as a major impetus for her current commitment in SPA to study and understand well functioning personalities and to extend psychology's knowledge base and procedures to provide credible service activities in this area. The deepest academic satisfactions have always come from psychology. Writing a book on affect and creativity remains a must reading for those interested in creativity. Being chairperson at Case Western Reserve since 1995 has been characterized by recruiting good faculty members, mentoring them, and helping them develop their careers. Being certain that faculty work together in a collegial and collaborative fashion has been important, as well as getting back to her research and writing.

Sandra has had a talent at establishing herself in leadership positions at early stages of new endeavors. She joined SPA in 1979 and became treasurer in 1986. In 1994, subsequent to the death of treasurer, Eugene Levitt, she was asked to resume the role that she had left 10 years earlier and did an outstanding job in "rescuing the treasury." She was subsequently elected treasurer and eventually became current president of SPA.

Current activities as SPA president reflect values and activities learned in previous leadership positions. The interest in consensus building played a role in the development of the first town hall meeting held by SPA. During this meeting, members were invited and encouraged to communicate their views as to what it is they need and would like from SPA. It was an exciting meeting. Encouraging a proactive board in anticipating problems and acting on them at early stages has been encouraged by Sandra. She has been influential in initiating a well thought out advocacy program for SPA in dealing with problems arising from managed care. She has been very articulate in expressing her wishes that SPA and psychology become more concerned with understanding and nurturing healthy and creative processes.

During her spare time Sandra and her husband enjoy traveling, reading, and sharing their professional lives. Sandra states that she is, "consumed by psychology." This is a person who has been able to merge personal values, interests in academic and management activities, and social consciousness into a unique personal and SPA style.

We are fortunate to have a fine and gracious lady who is creative, warm, and competent to be leading SPA.

The Society for Personality Assessment Awards



Bill Kinder and Robert Craig



Len Handler and Erik Sproghe



Greg Meyer, Bill Kinder, and Carl Gacono



Radhika Krishnamurthy

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for

Distinguished Contribution to the Literature in Personality Assessment

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2000 Mary S. Cerney Memorial Award

for

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to

Mark Bates, Carl Gacono, and Greg Meyer

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The Society for Personality Assessment
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for

Excellence in Early Career Research

to

Radhika Krishnamurthy, PsyD

Introduced by: Bruce Smith, PhD; Presented by: Leonard Handler, PhD

Beck Award—Nominations Requested

We are interested in soliciting nominations from our members concerning the Samuel J. and Anne G. Beck Award for Excellence in Early Career Research. We give this award each year to a psychologist who has earned his or her PhD within the last five years. Please send your nominations to: Len Handler, Department of Psychology, 310 D Austin Play Building, University of Tennessee, Knoxville, TN 37996–0900

Self-nominations are acceptable.

The Teacher's Block

The Role of the Academic Training Programs in Teaching Supervision and Consultation Skills by Jed Yalof, PsyD

In this article, I will address a few nuts and bolts of clinical supervision and consultation that might be useful to teachers and trainers as part of formalizing the learning experience in these areas. My primary interest here is with the application of foundation principles to supervisory and consultative assessment contexts. Generic psychology principles of ethics, intervention, supervision and consultation are applicable to different clinical contexts. With this point in mind, I will present a model for teaching them to students in an academic course.

Assessment supervision and consultation have received some attention in the literature, but remain subordinate to psychotherapy supervision and organizational consultation strategies in terms of practitioner interest, scope of research and models. Yet, anecdotal accounts of supervisory issues in training assessment students, for example, are quite powerful. Assessment represents a distinct clinical activity conducted under the supervision of professionals who may have more or less skill in the scoring, interpretation, and analyses of the various tests and measures to which the student is being exposed in their academic training program. Students may be taught, for instance, by faculty with expertise in assessment and supervised by clinicians whose skills may not match the particular needs of an academic training program. Or, faculty may teach highly abstruse constructs that are not immediately applicable to the fast pace of many clinics, where lengthy reports and fanciful formulations are neither part of the local assessment culture nor valued anywhere near a level proximal to the student's ideals. Or, a clinical facility may use computerized test reports for which neither the student nor supervisor have a full understanding of the underlying ethical and psychometric implications. Or, there may be a dearth of other psychologists who have intimate familiarity with assessment, thereby imposing limitations on whom to consult when knotty diagnostic issues arise. Moreover, both consultation and supervision remain professional activities to which many psychologists ascend by proxy without the benefit of an academic course, continuing education experience, or other formalized training in supervision, including being supervised while conducting supervision or consultation.

Consequently, academic training programs bear some responsibility for ensuring that students are taught foundation concepts and skills in supervision, and can approach supervisory experiences informed in their roles as assessment consumers, supervisors, consultants, and practitioners. There is much to learn about supervision and the classroom is an excellent place to begin the process.

A Course in Supervision and Consultation

A foundation course in consultation and supervision can provide very relevant information to students about different facets of these two professional activities. Decisions about how to organize such a course, however, depend on the interests of the teacher, whether the course is taught in a full academic semester or is a small module within a larger course sequence, and the specific needs of the academic training program itself. Assuming that consultation and supervision are a valued part of education and training, decisions must be made about what to include in such a course. Relevant to our interests is how course content dovetails with education and training in assessment.

Here are some suggestions for what to include in a course on supervision and consultation. It might be helpful to sequence this course at a time when students are actually involved in actual practicum training in order to enrich the immediacy and applicability of their learning experience.

- 1. *Definition of terms*: How do we define "consultation and supervision?" How are the two activities similar and different?
- 2. Ethical and Legal Issues: Which APA principles touch upon consultation and teaching practices? How are they applied in real-life situations? How does harrassment fit in and what are the responsibilities of supervisors and consultants? What are the responsibilities of academic programs for supervisees and how do academic programs formalize relationships with clinical facilities that have well defined boundaries, grievance procedures, and protect the educational and training objectives of students? How might a supervisor develop a training manual as part of acclimating and protecting the interests of students and clients?

- 3. Supervisee and Supervisor Expectations: What are the fantasies that supervisees, consultees, supervisors, and consultants have about their mutual goals? Is there the fantasy of a life-long mentoring relationship? Fears of being criticized by authority? Fear of being usurped by a competitive and smart student? Asking students to speculate aloud can help to articulate a range of generic expectations that accompany superisory and consultative relationships.
- 4. Screening Practices: How might one screen a supervisee/supervisor or consultee/consultant in order to determine if there will be a positive fit? What are the obstacles in clinical practicum and internship settings in particular that work against rigorous screening? What are some of the potential liabilities of not having a full range of choices (e.g., a student assigned to a supervisor; a student told to consult with someone when they prefer a different consultant? A supervisor who is assigned supervisees without feeling any control over the selection process?).
- 5. Developmental Models of Consultation and Supervision: What does the literature say about developmental themes that define different stages of experience? How, if at all, does one integrate parallel process phenomena into supervision?
- 6. Human Diversity: What does the literature say about ethnic, racial and gender diversity in supervisory and consultation dyads or groups?
- 7. Special Populations: How does one respond to special challenges that arise in the supervision or consultation of cases that involve unique challenges (e.g., supervising a duty to warn situation; consulting on a testing case that has legal disposition; being a supervisee and treating a client with severe character pathology).
- 8. *Clinical Illustrations*: How does one develop and lead discussion around vignettes that are realistic and directed toward integrating course concepts?
- 9. Guided Practice Exercises: How does one develop opportunities in class for students to role play and practice supervisory and consultative skills in a supportive and protective learning environment?

From the Editor...

We are looking forward to welcoming you all to Philadelphia in March! As far as I know, this is the first time that SPA is meeting in this area. You will be coming to a city and region that for many, many years has been passionate about personality assessment. I remember in the early 80s when I used to teach at Hahnemann having Zygmunt Piotrowski come into my classroom to borrow chalk. He was teaching the Piotrowski system to the third-year students and on the other side of the wall, I was teaching the Comprehensive system to students in their fourth-year (at that time, it was not at all unusual for students to learn more than one system). Even on the other side of the wall, I could tell from the laughter and the many student questions

that he was enrapturing the class. Zygmunt was a major force in interesting graduate students in personality assessment at Temple, Hahnemann, and in workshops at a variety of other local universities. The interest he nurtured continues today as is reflected by the large number of graduate students in this area who are student members of SPA. This issue of the *Exchange* will feature a report from the Delaware Valley Society for Personality Assessment, a local chapter of SPA in the greater Philadelphia area that already has a respectable membership and a rich array of activities.

For soft pretzels, cheesesteaks, and great collegiality, make Philadelphia your destination this March!

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