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President's Message: Spring 2014: Growth and Change Are in the Air Ronald J. Ganellen, PhD, ABPP Northwestern Feinberg School of Medicine

Although the cover of the Society for Personality Assessment (SPA) conference brochure beckoned us to D.C./Arlington with the implicit promise of spring and cherry blossoms in full bloom, there were no cherry blossoms to be seen. And spring seemed distant when I got back home after SPA ended, as it was snowing in Chicago. Yes. Again. (Groan.) And yet, I wouldn't have missed the SPA conference for the world.



My experience of the conference was filtered through the lens of the 75th Anniversary of SPA, which we celebrated last year. Since that festive celebration, my focus has been on the launch of SPA's next 75 years. Judging by the variety and quality of the presentations; the richness, rigor, and wisdom conveyed in the workshops; and the warm camaraderie we shared, we are off to a very good start.

As perhaps you can tell, I've been thinking a lot about our future: about the future of psychological assessment and SPA, to be precise. The reason I am so confident that the future is bright could be seen in every room, paper session, symposium, poster session, workshop, coffee break, and cocktail reception—the graduate students who attended the conference. One of the high points of the conference for me personally was having the honor of being invited to serve as a discussant for a panel organized by SPAGS, the graduate student arm of SPA. I was impressed by the sophistication of the students in terms of their understanding of the conceptual basis underlying development of the psychological tests they presented, as well as the tests/psychometric foundations and clinical utility. I saw the same level of intellectual openness, curiosity, and rigor time after time in other student presentations. Not only do the students deserve recognition, but their instructors deserve recognition as well for preparing them and fostering their development as budding assessment psychologists.

The mission of SPA is to support three main areas: research, education and training, and

practice. During the Plenary session, I asked the chairs of committees developing goals and action plans in these three areas to share the progress their committees have made. John McNulty, chair of the Research work group, outlined plans being developed for SPA to fund research studies as well as relevant literature reviews that address issues related to the clinical utility of psychological assessment.

Radhika Krishnamurthy, chair of the Education and Training work group, informed the membership that a network of consultants has been established who are available to respond to the needs of instructors of graduate-level assessment courses. There are plans underway to address other training issues, including examining best practices in supervision of trainees, a topic that has been relatively neglected in the literature. The SPA Board has allocated funds for projects to contribute to this literature. One valuable resource for both graduate students and members is a webinar given by Gary Groth-Marnat on the ingredients needed to write quality psychological test reports. This webinar was produced as a collaboration between the American Psychological Association Board of Educational Affairs and SPA. Virginia Brabender deserves special recognition for her indispensable role in making this happen. A link to view this webinar is available for free on the SPA website.

The SPA Advocacy and Public Affairs coordinator, Bruce Smith, gave an update on issues affecting assessment practice. There are a number of issues swirling around which deserve careful monitoring and, when appropriate, action. Reimbursement issues and insurance regulations limiting psychological assessments are two critical issues at the top of this list. Other evolving matters involve the implications of the Affordable Care Act for practice as well as the role assessment psychologists play in collaboration with other health care

professionals, including our colleagues in primary care medicine. SPA has developed and nurtured a positive working relationship with the American Psychological Association Practice Organization, headed by Katherine Nordal. We are pleased at the progress we have made in learning how to harness our resources to address issues affecting practice as they arise. There is more to learn and more to do to promote and protect the practice of personality assessment.

The take-home message from all of the above is that SPA and assessment psychology are thriving and growing. One way we can grow, of course, is to continue to attract like-minded colleagues who share our investment in developing the highest standards in research, training, and practice. With this in mind, Virginia Brabender, chair of the Membership Task Force, enthusiastically informed our membership at the Plenary that the SPA Board approved a motion to allow each current SPA member to extend an invitation to one colleague to join SPA and to enjoy all the benefits of membership, including electronic access to the *Journal of Personality Assessment*, for one year. During that year, dues for these invited new members will be waived. We encourage all current SPA members to take advantage of this program to clue your friends and colleagues in to what they've been missing and the benefits to be reaped from continued involvement with SPA.

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Special Topics in Assessment

Tests in the Public Domain

Alan L. Schwartz, PsyD

Christiana Care Health System



In the early 1990s, in the midst of a brief hiatus from writing my dissertation, I was half-watching an episode of a television crime drama when, suddenly, there it was: Card V from the Rorschach. It was as if I unexpectedly saw a friend on the news, at once both exciting and perplexing. It also came with a fair share of outrage. How can they do this? Aren't they aware of test security? In the ensuing decades of the Internet age, the exposure of

test materials in media such as television or movies is the least of our concerns. Not only can Rorschach's blots be purchased on shirts, pillows, or plates (i.e., the eating kind), but material information about all of our tests is almost effortlessly available. This adds additional layers of complexity to our already complex work, of which our colleagues doing forensic assessment are likely most acutely aware.

Into this mix comes a new packaging of Rorschach's inkblots and words, available on Amazon.com, the fifth most trafficked site on the Internet. This Special Topics in Assessment section provides some thoughtful commentary from Douglas S. Schultz, PsyD, who has published research on the availability of assessment information on the Internet as well as the potential effects of its exposure on clients.

The Rorschach, Now Available on Amazon: Should We Be Worried?

Douglas S. Schultz, PsyD

Delaware Psychiatric Center



Early in March 2014, Amazon.com began selling "The Inkblot Pack" (Rorschach, 2014), a package that includes all 10 full-color Rorschach inkblots, an excerpt from Rorschach's *Psychodiagnostics* (1921), and even a "beautifully designed journal" to record the responses of you and your friends—all the makings for a perfect weekend get-together. Amazon advertises all of this for the low, low price of \$13.01. Understandably, some psychologists are alarmed that the inkblots can now be purchased through a mainstream retailer at a price just about anyone can afford.

However, this is certainly not the first time that the Rorschach has been "exposed" to the public. In the 1980s, William Poundstone reproduced all 10 inkblots in his book, *Big Secrets* (1983), and included advice regarding how to "cheat" the test. Rorschach inkblots—including some of the original 10 cards—can also be seen in various television shows and movies, such as *Armageddon*. More recently, in the summer of 2009, an emergency room physician from Canada published full color images of all 10 inkblots on the popular online encyclopedia, Wikipedia. These images—which remain on the site today—are accompanied by in-depth descriptions of both Comprehensive System (CS; Exner, 1993) and Rorschach Performance Assessment System (R-PAS;

Meyer, Viglione, Mihura, Erard, & Erdberg, 2011) variables, along with descriptions of each card and "popular" responses (which often correspond to responses that would earn a score of *Popular* in both the CS and R-PAS). Publishing the inkblots on Wikipedia became a mainstream news story, so much so that images of the inkblots were published alongside stories in various publications, including the *New York Times*.

Though Wikipedia may have been one of the most well-known websites in which the inkblots were posted, information about the Rorschach—including reproductions of the blots—have been available on multiple sites on the Internet for some time. In 2010, Dr. Jamie Loving and I conducted a review of the top 100 websites resulting from Google searches for "Rorschach" and "inkblot test" to quantify how much information was available about the test on the Internet at that time (Schultz & Loving, 2012). Due to website duplications, we found 88 independent websites, 17 of which included information that we believed constituted a direct threat to test security. These websites often included depictions of one or more of the inkblots, as well as guidance on how one should approach the test. Given that these searches occurred four years ago, it's likely that even more information about the Rorschach exists online today. Thus, the ability to purchase the

Rorschach on Amazon is hardly a new threat or a greater threat to test security than the information that has been available on the Internet for many years, and free of charge.

Given the widespread availability of information about the Rorschach online, should we as practitioners of personality assessment be concerned that examinees might come to our offices with pre-existing knowledge of the test? In a word, yes. With all of the exposure in the media—be it online, in books, in television shows and movies, or now through their own introductory Rorschach package through Amazon—it would be naïve to assume that our clients have never seen any of the inkblots or know anything about the test. The inkblots are even included in some introductory psychology textbooks in undergraduate courses. As such, standard practice in any psychological assessment involving the Rorschach should include a discussion with the examinee regarding whether he or she has ever seen the inkblots and what he or she knows (or thinks they know) about the test.

However, if someone has been exposed to the inkblots or test information in the past, does that mean that they will be able to "cheat" the test or that their results will not be valid? Not necessarily. A few empirical studies have

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Confidentiality Concerns Surrounding the Use of Psychological Assessment Reports as Supplemental Application Materials to Training Sites

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Training in psychological assessment is an important part of graduate education in both clinical and counseling psychology programs. In order to conduct a comprehensive psychological testing assessment, psychology graduate students must effectively synthesize a wide array of information, integrating results from a battery of instruments with relevant details of a patient's life history and presenting concerns. The ability to integrate these data and arrive at a formulation that not only answers specific referral questions, but also provides useful and personalized feedback for the patient and their treatment providers, is an advanced set of skills in which psychologists are uniquely trained.

An additional skill trainees must learn is how to sufficiently de-identify and disguise reports that will be read by professionals other than the direct supervisors of the case, in accordance with current ethical guidelines and legal standards (the American Psychological Association's Ethical Principles of Psychologists and Code of Conduct, 2010; Standard 4.07; and the Health Insurance Portability and Accountability Act [HIPAA], 1996). For example, clinical training institutions typically require trainee applicants for externship and internship positions to submit a sample report as part of their applications. In fact, a recent survey of clinical and counseling psychology doctoral students found that a psychological testing report was the supplementary material most frequently requested by internship and practicum training sites (Lewis & Samstag, 2014). Education and supervision about how to appropriately disguise clinical material is critical for trainees, as sample reports are used to evaluate case formulation as well as ethical competencies (Lewis, 2013; Samstag, 2013).

Guidelines and standards for protecting client anonymity and confidentiality are outlined in the American Psychological Association's Ethical Principles of Psychologists and Code of Conduct (2010; Standard 4.07) and HIPAA

(1996). De-identifying written reports by removing information, such as client name, date of birth, and social security or medical record numbers, as required by HIPAA, is a relatively straightforward procedure. However, documents such as psychological testing reports include detailed descriptions of a client's presenting concerns, family and psychosocial history, and other clinically relevant information. These details are necessary for a comprehensive evaluation but are not so easily disguised. The inclusion of such information may leave a client at an increased risk of being identified, even when the most revealing details, such as name and date of birth, are removed from the document.

When preparing testing reports for submission to potential training sites, trainees may choose to generalize information or entirely change certain factual details through the use of "thick disguise" (seeking client consent to use personal information is another option, but a discussion about the clinical and ethical implications of this is unfortunately outside the scope of the current article; see Sieck, 2012). Falsifying information (e.g., changing a client's gender or race in the report) would likely ensure greater protection of that client's privacy; however, this practice raises questions about the validity of the data included in the report, and how useful the altered document may be for evaluating a trainee's case formulation competency. Sensitive and sophisticated clinical judgment is required to decide which information should be omitted or altered in the service of client anonymity and confidentiality, and what impact these changes may have on the perceived validity of the test data and the trainee's conclusions in the testing report.

While these ethical dilemmas have been explored by several authors (e.g., Samstag, 2012), there is a paucity of research investigating the actual current confidentiality practices of trainees. In one recent study, Lewis and Samstag (2014) collected data from 105 doctoral students

from American Psychological Association-accredited programs who had recently applied to either practicum sites or predoctoral internship training programs. The survey showed that only 42% of students sought guidance from their schools when preparing clinical documents for submission, and only 43% reported consulting official professional resources (such as the HIPAA guidelines). This lack of oversight and consultation with licensed professionals is alarming, particularly since over two-thirds of participants (69%) reported that they had utilized actual clinical documents from a prior training site in their application materials to a future training site.

Lewis and Samstag's (2014) findings suggest that in many cases, trainees appear to be utilizing test reports from prior training sites without obtaining permission from their assessment supervisors, the site at which the assessment was completed, or from their home doctoral programs. The extent to which potentially identifying information may be disclosed in situations where testing reports are used as supplementary material remains an unknown, yet highly concerning, question. A majority of trainees in this study (68%) reported that they had included actual scores from psychological tests in their submitted reports, and many (31.7%) chose to include detailed and illustrative quotes from projective testing data. In cases where trainees had omitted or altered information in their submitted reports (including creating a composite of individuals the trainee knew), nearly half (46%) stated that they did not communicate this to training institutions. Such practices raise concerns for both the trainees' home school (which may not be sufficiently educating their students in the ethical practice of clinical writing) and for the sites that are receiving and evaluating sensitive clinical documents that have not been properly supervised.

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Ethical Considerations in Assessment Supervision

Linda K. Knauss, PhD, ABPP
Widener University



As an internship director, I provide many hours of supervision, both in the areas of psychotherapy and assessment. Interestingly, while there is a significant amount of literature on psychotherapy supervision, little has been written about assessment supervision. Most often, supervisors model the behavior of their own mentors when they perform supervision, repeating their own supervisory experiences (Finkelstein & Tuckman, 1997). Thus the most important element of supervision is modeling ethical behavior and emphasizing ethical practice (Barnett, Cornish, Goodyear, & Lichtenberg, 2007). Unfortunately, Ladany (2002) found that more than 50% of trainees reported that they perceived their supervisors to have engaged in at least one unethical practice during supervision.

Supervisors have a duty to clients to truly supervise the service that is being provided. The supervisor is responsible both ethically and legally for the services of anyone under their supervision. Courts have ruled that supervisors may be responsible for the actions of their employees and supervisees (Slovenko, 1980). This is because employers or supervisors have the power to select those who will work under them (Harrar, VandeCreek, & Knapp, 1990). Some supervisors believe they are only responsible for the cases discussed in supervision; however, this is not true. The job of a supervisor is to oversee all of the supervisee's cases. If a supervisee always knew which cases to take to supervision, then supervision might not be necessary.

It is also important for supervisors to create sufficient opportunity for problem areas to become apparent. Effective supervisors create an environment in which supervisees can address concerns and insecurities as well as have the freedom to experiment and try new techniques (Barnett et al., 2007). Critical and negative feedback from supervisors tends to result in less openness and fewer important disclosures by supervisees. Conflicts between a supervisor and supervisee should be addressed promptly, honestly, and comprehensively. Otherwise, both supervision and assessment will suffer.

Through several studies (Anderson, Schlossberg, & Rigazio-DiGilio, 2000; McCarthy, 1994), supervisees identified characteristics that facilitate successful and

unsuccessful supervision. Attributes of good supervisors include providing feedback in a straightforward manner; accepting mistakes; encouraging experimentation; having an open supervisory environment; and communicating respect, support, and encouragement. Poor supervisors were described as authoritarian or demeaning, encouraging unthinking conformity, unable to accept divergent viewpoints, unavailable, focused on supervisees' shortcomings, and preoccupied with their own problems. These behaviors do not contribute to effective learning experiences for supervisees.

There are very few sections of the American Psychological Association Ethics Code (American Psychological Association, 2010) devoted to supervision. Standard 2.05 discusses delegating work to others; Standard 7.06 is about assessing student and supervisee performance; and Standard 7.07 forbids sexual relationships with students and supervisees. In delegating work to others, "psychologists should (a) evaluate whether employees, supervisees, assistants, or others whose services are used have the skills to implement the task independently or under supervision, (b) assign such individuals only those tasks for which they are qualified, and (c) monitor the activities to ensure competent implementation" (Fisher, 2013, p. 83). Under Standard 7.06, psychologists must inform supervisees when and how often they will be evaluated, the basis for evaluation, and the timing and manner in which feedback will be provided. Providing specific information about the basis for evaluation at the beginning of the process is especially important because the nature of supervision is less structured than classroom teaching (Fisher, 2013). The prohibition against sex with students (Standard 7.07) "applies not only to those over whom the psychologist has evaluative or direct authority but also to anyone who is a student or supervisee in the psychologist's department, agency, or training center or over whom the psychologist might be likely to have evaluative authority while the student is in the program or supervised setting" (Fisher, 2013, p. 215).

In addition to the sections of the American Psychological Association Ethics Code, five major ethical principles are seen repeatedly in case law, statutes, other ethical codes,

and the professional literature as related to supervision. These principles are competence, informed consent, confidentiality, dual relationships, and welfare of the consumer. To be a competent supervisor, one needs education, training, and experience in supervision just like in assessment or neuropsychology. Supervisory knowledge must also be continually updated by the latest research and theory. Supervisors must be competent in the techniques used to assess the client. Thus a supervisor whose training and practice are exclusively with adults should not be supervising child assessments (Pope & Vasquez, 1998). Most importantly, a supervisor must not use the supervisee's knowledge to learn new techniques.

Regarding informed consent and confidentiality, clients should know if their assessor is being supervised. They should know the identity of the supervisor, and have contact information for the supervisor (Knauss, 2002). Clients need to know that all information shared with a supervisee may be shared with a supervisor, and supervisees should discuss with clients the process by which supervision will be monitored. For example, some supervisors require the use of audio, videotapes, direct observation, or face-to-face interaction between the supervisor and the client. There needs to be a clear process for the disposal of electronic media once it is no longer needed. Supervisees are also entitled to informed consent in the form of clear specifications of duties, training philosophy, expectations, and evaluative procedures of the supervisor.

Supervisors are in a position of power with regard to supervisees. Thus, they must be vigilant to avoid any exploitation. Supervisors must also be alert to possible multiple relationships between supervisees and their clients. However, not all nonsexual dual relationships are avoidable or unethical. Supervisors will encounter trainees in social settings, community activities, and other professional settings. Supervisors do not need to avoid trainees in these situations unless the supervisor believes that the supervisor-supervisee relationship will be compromised (Harrar et al., 1990).

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Advocacy Corner

Bruce L. Smith, PhD
Public Affairs Director



Things have been fairly quiet on the advocacy front these past six months, so I am taking the opportunity to review what we've done over the past several years.

Our biggest accomplishment has been the establishment of a solid working relationship with the American Psychological Association Practice Organization (APAPO). Beginning in the late 1990s, the Society for Personality Assessment (SPA) leadership has met yearly with the Director. When Katherine Nordal took over from Russ Newman as Director, assessment psychology got a big shot in the arm. Katherine, as many of you know, was a practicing assessment psychologist for over 30 years before coming to the American Psychological Association. Our involvement with the APAPO has been instrumental in the pivot to a focus on prescription privileges to one that recognizes assessment as a key component of psychology. We participated in the effort to develop new current procedural terminology (CPT) codes for psychological testing—codes that increased reimbursement rates to be commensurate with (or in some cases better than) those for psychotherapy. We continue to be involved in this effort, as the Center for Medicare and Medicaid Services (CMS) periodically review the reimbursement rates for assessment services.

For a while, the biggest threat was from various other professions attempting to get assessment as a part of their scope of practice from state licensing boards. While SPA (and the American Psychological Association) do not insist that only psychologists can be trained to do assessment, we do object to the possibility that untrained individuals

could offer such services to the public. In order to help prevent this from happening, we produced a White Paper on training standards (to be found on the SPA website) and promulgated it to state licensing boards and legislatures where needed. I was able to provide testimony on several occasions, and in all but one instance we have been successful in turning back these efforts.

Another area in which we have been active is ensuring appropriate reimbursement from third-party payers for assessment services. Again, this is an area in which we have been working in partnership with APAPO. We continue to ask our membership to contact the SPA central office with examples of denials of service or underpayments. We are fortunate to have the services of the APAPO Legal Affairs Department in this effort.

Most recently, we have been dealing with parity issues. Ever since the enactment of the federal parity act (which mandates that mental health services be reimbursed similarly to physical health services) we have been collecting evidence of violations. Requiring preauthorization for psychological assessment if similar requirements are not in place for medical tests is illegal. Please report any instances of this to the Central Office.

Finally, we are trying to increase the visibility of assessment with the general public. I began a blog for general audiences, and I welcome suggestions for topics. We now also have a Facebook page and are trying to make SPA better known both within the professional community and to the general public.

Notes From the Foundation

Bruce L. Smith, PhD
President, SPAF

This will be a short contribution to remind you all of the importance of contributing to the Society for Personality Assessment Foundation (SPAF). Donations to SPAF are generally tax deductible and are a major source of support for our students as well as for research in personality assessment.

At the 2014 Annual Meeting in Arlington, VA, we were treated to the first annual Paul Lerner Memorial Master Lecture, delivered by Aaron Pincus from Penn State. This lecture and subsequent ones have been made possible by a generous gift from the Lerner family, as well as contributions from other SPA members in honor of Paul.



SPA Award Recipients (left to right): Dr. Steven K. Huprich, Editor, *JPA*, and Award Presenter; Dr. Michelle B. Stein, Samuel J. and Anne G. Beck Award; Dr. Anthony D. Bram, Martin Mayman Award; Dr. Carol Overton, SPA Chair, Awards Committee and Presenter; Dr. Mark R. Lukowitsky, Mary S. Cerney Student Award; and Janine N. Galione and Dr. Thomas Oltmanns, Walter G. Klopfer Award.

What Graduate Students Need to Know About Starting an Assessment Research Career

Tips from SPA Early Career Psychologists

Christy A. Denckla, MA

Adelphi University, Derner Institute for Advanced Psychological Studies



It may be stating the obvious that most student members of the Society for Personality Assessment Graduate Student Association (SPAGS) have decided to go to graduate school to pursue a career in some area of psychology. What is not so obvious, however, is how to get from graduate school to our first professional position. As students, we quickly confront enormous demands on our time that can flip the figure/ground relationship; just getting through graduate school can feel like the goal rather than actually having the career we set out launch.

In moments like the one created at this year's annual convention during the Saturday morning roundtable brought to us by our SPAGS Education Committee co-chaired by Josh Elbin and Michael Roche, we could take a moment to reorient our figure/ground perceptions and focus on our long-term goal of actually having a career. This is one of the many reasons why it is so great to be a student member of SPA—at least once a year at the annual convention we take a step out of the intense focus in our home institutions and think about the bigger picture. This year's roundtable, *Starting an Assessment Research Career*, did just that. To pass on the tips brought to us by early career psychologists including Danielle Burchett, Aidan Wright, Mark Lukowitsky, Sara Lowmaster, and Douglas Samuel, I've summarized a few of the points made by the speakers.

Your career has already started once you are in graduate school, so act like it!

Roundtable members highlighted the critical point that our careers start in graduate school. Taking a professional approach as a student can open important doors for our future. For example, we can introduce ourselves to others with whom we might like to work well in advance of actually working with them. Relationships can take time to build, and initiating conversations at places like SPA's annual convention may lead to opportunities down the road. Similarly, Sara Lowmaster encouraged us to think about what comes after graduate school early on. For example, she described how her interest in an academic career informed her choice of internship site, focusing on one that

provided ample postdoc opportunities with an academic affiliation. Because the field tends to work in big lags (for example, time between applying for a grant and receiving funding), we should be thinking about the next step well before that position even starts.

People are important

Roundtable speakers noted the importance of social networks. In many cases, people who were directly known had influenced their careers in various ways, by helping with postdocs or speaking on their behalf to hiring committees. Attending SPA's annual convention is an excellent place to network, especially given the approachability and warmth of SPA culture. For example, when you search for postdocs, reach out to your personal network and say, "I'm on internship and looking for position X, do you know of anyone?" Sara Lowmaster shared that a contact she made while on an internship interview later opened a door for a postdoc, and other roundtable speakers had similar stories about how a personal contact resulted in an important opportunity. People always matter, and having good interpersonal skills can be essential.

Tell a story

Roundtable members also appeared to agree on the importance of having a clear story about your work. For example, Aidan Wright pointed out that to be really successful on the job market, it is a good idea to put a package together that has a clear narrative. Try to make it easy for the person reading it to say, "I get what this person has done and I can see why this person's work is interesting." This can be a very difficult thing to do, so expect to put some work into it. The steps we take can feel less linear, but the important thing is to string our story together in a way that makes sense to others. Be prepared to struggle with this, but a cohesive, simple story will pay off.

Know your audience

Many of us have learned about the importance of knowing our audience, whether we are teaching, writing, or applying for jobs. Roundtable members including Aidan Wright brought up the importance of being aware that major research institutions tend to look for "programmatically research."

This is research that demonstrates continuity of findings which can generalize to basic human functioning and processes. This subtle point is especially important for students in personality assessment, because we will want to be able to demonstrate that our findings are not restricted to one specific test measure, but rather can relate to things like model-based ideas, theory building, or basic human functioning.

The academic job market is not what it used to be

Consensus seems to be that the academic job market is just more difficult than it used to be. For example, it is common to be on the job market for many years, and few move into an academic position immediately after graduate school. This means that rather than asking ourselves, "What is my strategy for getting a job in the next year?" we need to say, "What is my strategy for getting a job over the next few years?" For example, many roundtable panel members described sending out a few applications in the first year of a postdoc, but then following up in subsequent years with more rounds of applications. Another important point here is that we are entering into a job market that is different than that which our advisors negotiated. Therefore, in addition to the guidance that we get from our advisors, it is helpful to seek consultation from various sources like SPA early career psychologists who have recently navigated the job market.

Resources: Postdocs and grants

Postdocs can be very important steps in obtaining a research position. For example, Douglas Samuel pointed out that two important things can come from a postdoc: (1) a new mentor and (2) a new skill (a method or technique). There are a number of resources that can be helpful in our search. The Association for Psychological Science hosts a search engine called Postdoc Exchange (<https://www.psychologicalscience.org/index.php/post-doc-exchange>). The American Psychological Association also hosts a postdoc listerv, to include an Association of Psychology Postdoctoral and Internship Centers (APPIC) match system (which may be more appropriate for positions with a clinical focus). Psychology

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The Teacher's Block Obviating "Bad Endings" Constance T. Fischer, PhD, ABPP Duquesne University



I often have appreciated Jed Yalof's "The Teacher's Block" column, and often have shared it with students. I agree with, and appreciate, many of his comments and suggestions in the Winter 2014 issue of the *SPA Exchange*. However, I regard the bad endings as easy to bypass. It seems to me that those endings, in which the client is dismayed or angry about an assessment report, most often occur when the report is exclusively test- or diagnosis-focused; that is, when the client has not participated in exploring with the assessor the life events and contexts that the scores may reflect.

In contrast, when we regard scores and profiles as tools rather than as findings, then our *assessment* results include understandings of the jointly explored circumstances in which a problematic behavior has, *and has not*, occurred. Typically, this collaboration (co-laboring!) is therapeutic for the client, in that he or she becomes aware of personally viable options. Sometimes my students and I have investigated the viability of options by asking the client to try out an alternative way

of responding to tasks. For example, "Amy, could you please tell me what you know about your having so often said 'don't know!' instead of offering your best guess?" [on a Wechsler subtest]. Replies included having been teased by an older brother and chastised by a teacher way back in grade school.

After this discussion, Amy and I repeated the subtest, having agreed, for example, that she would now make a best guess (saying that it is a guess, when that would be more comfortable). The assessment report included score outcomes before and after the intervention, along with a summary of related suggestions for the client and for other readers. Clients do often read drafts of these reports, and they sometimes provide corrections of fact and offer preferred or additional life examples. In all cases, the assessor shares the anticipated impressions and examples to be included in the report. Assessor and client sometimes agree that the report will specify that they had "agreed to disagree" about a particular impression. Receivers of these reports have been appreciative of this life-oriented approach;

psychologists have additionally appreciated our "Technical Appendix" with MMPI profile, Rorschach summary sheet, and so on.

In almost fifty years of teaching and practicing this sort of descriptive assessment, my students and I have experienced "bad endings" very, very rarely. Those unfortunate occasions had to do with the politics of systems, and not with the client's experience of the assessment or of our report.

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SPA President Dr. Ron Ganellen.



Dr. Carol Overton with presenters who spoke in honor of Marguerite R. Hertz Award Winner Dr. David McClelland (left to right): Dr. Bruce Smith, Dr. Joel Weinberger, Catherine McClelland Dole, and Sarah McClelland McMullen.

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SPA Annual Meeting March 4–8, 2015

*The New York Marriott at the Brooklyn Bridge
Brooklyn, NY*

Join us in Brooklyn, NY, March 4–8, for the 2015 SPA Annual Convention at the Marriott at the Brooklyn Bridge!

Historic Brooklyn, NY, is home to everyone from everywhere—the world’s neighborhood, the borough that puts the “new” in New York City. Brooklyn is big, it’s diverse, and it’s got something for everyone—this is the real New York! You name it, Brooklyn’s got it: history,

beaches, including Brighton Beach, parks, New York’s only aquarium, Coney Island, ethnic enclaves, **restaurants and eateries galore**, night clubs, hip art galleries and museums, world-class shopping. You are just a **subway ride** away from Manhattan. Plan to come in early or stay longer and take a Spring Break in New York!

Online Reservations: <https://resweb.passkey.com/go/SPA2015AnnualMeeting>

The New York Marriott at the Brooklyn Bridge
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Monday, February 9, 2015

2014 Annual Meeting Poster Session Winners

Poster Session I: Thursday, March 20, 2014

First Place:

Convergent Validity of the Adelphi Early Memory Index: A Primary Care Study

Laura Richardson
University of Detroit Mercy, Detroit, MI

Matthew Jasinski
Wayne State University, Detroit, MI

William Murdoch, Pierre Morris, and John H. Porcerelli
Wayne State University School of Medicine, Detroit, MI

Honorable Mention:

Longitudinal Effect of Exposure to Intimate Partner Violence on Negative Child Temperament

Matthew M. Yalch, Alytia A. Levendosky, and G. Anne Bogat
Michigan State University, East Lansing, MI

Rorschach and Neuroimaging rsfMRI Studies: Neurobiological Correlates

Tommaso Brischetto Costa, Franco Cauda, Stefania Cristofanelli, Laura Ferro, and Alessandro Zennaro
University of Valle d’Aosta, Aosta, Italy

Poster Session II: Saturday, March 22, 2014

First Place:

Dissecting Dropout: An Investigation of Personality and Retention in Longitudinal Studies

Samantha R. Overstreet, Stephen K. Snider, Jordan N. Heroux, Allan R. Harkness, and John L. McNulty
The University of Tulsa, Tulsa, OK

Honorable Mention:

Behavioral and Neurocognitive Impairments in Persistent Postconcussive Syndrome

James Hedges, Yushi Wang, Brett B. Yarusi and Lisa A. Spielman
Brain Trauma Foundation, New York, NY

Pratik Mukherjee
University of California, San Francisco, CA

Jamshid Ghajar
Brain Trauma Foundation, New York, NY

Using an Ecological Momentary Assessment Approach to Examine the Relationship Between Neuroticism and Variability in Constructive and Unconstructive Thought Processes

Lauren Szkodny, Nicholas C. Jacobson, and Michelle G. Newman
The Pennsylvania State University, University Park, PA

2014 Annual Meeting Award Winners

2014 BRUNO KLOPFER AWARD

*Phebe Cramer, PhD
Williams College
Williamstown, MA*

2014 SAMUEL J. AND ANNE G. BECK AWARD

*Michelle B. Stein, PhD
Massachusetts General Hospital and Harvard
Medical School
Boston, MA*

2014 MARGUERITE R. HERTZ MEMORIAL AWARD

In memory of David McClelland, PhD

2014 MARY S. CERNEY STUDENT AWARD

*Mark R. Lukowitsky, PhD
Albany Medical College
Albany, NY*

2013 WALTER G. KLOPFER AWARD

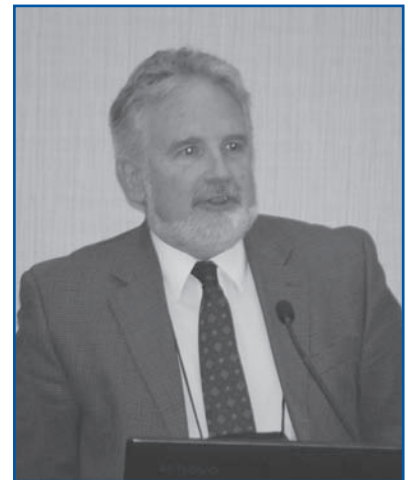
*Janine N. Galione, M. A., and Thomas
Oltmanns, PhD
Article: Identifying Personality Pathology
Associated With Major Depressive
Episodes: Incremental Validity of Informant
Reports
Journal of Personality Assessment, Volume
95, Number 6, pp. 625–632*

2013 MARTIN MAYMAN AWARDS

*Anthony D. Bram, PhD
Private Practice
Lexington, MA
Article: Psychological Testing and Treatment
Implications: We Can Say More
Journal of Personality Assessment, Volume
95, Number 4, pp. 319–331*



Master Lecture I (Paul Lerner Memorial Lecture):
Aaron Pincus, PhD.



Master Lecture II: Leslie C. Morey, PhD.



Dr. Mary Jo Peebles (left), Martin Mayman Award Winner (2002) and Dr. Anthony D. Bram (right), Martin Mayman Award winner 2010 and 2013, at the recent book signing at the SPA annual meeting.



John Porcerelli (left) presenting the Bruno Klopfer Award to Phebe Cramer (right).

President's Message

...continued from page 1

After the chairs of the work groups summarized their goals and the steps they plan to take to reach these goals, I opened the floor up to hear from our members. I asked members not only their reactions to these plans, but to learn what else we should be doing to support them and meet their needs, whether they are graduate students, professors, researchers, clinicians, or some combination of the above. I appreciated the valuable comments and suggestions that were made. I would like to close by asking all SPA members, student members, and those of you in the peanut gallery to consider this question and to then provide input to me (r-ganellen@northwestern.edu) or members of the Board. I look forward to hearing about your vision for the future of SPA, the issues we should focus on and address, and constructive suggestions as to what SPA can do better or should do differently to ensure that the next 75 years are as rewarding as the first 75 years.

The Rorschach, Now Available on...

...continued from page 2

examined this very issue. Castro-Villarreal (2010) conducted a study in which about half of the participants were exposed to Card I one week before taking the Rorschach. However, there were no significant differences found between individuals who were exposed to the card before testing and those who were not on the variables she explored.

Schultz and Brabender (2013) obtained slightly different results, however, when we exposed half of the participants in our study to an abridged version of the Wikipedia article, which contained all of the inkblots as well as descriptions of CS variables and guidance regarding "popular responses." We found that the participants who were given the Wikipedia article, on average, tended to give fewer responses overall and had higher scores on measures of reality testing (including Populars, X+%, XA%, and WDA%) than individuals who were not given the article. However, we did not find significant differences between groups on several other CS variables we explored. Thus, we concluded that while individuals who take the time to study this information before taking the Rorschach might provide

more conventional responses, we did not find evidence to suggest that their overall protocols would be drastically different.

One of the key factors as to whether prior exposure will affect an individual's responses on the Rorschach seems to be the examinee's motivation and willingness to engage in the test. If someone is motivated to present themselves in a certain way (i.e., in a forensic evaluation), he or she may well try to study information about the test in an effort to "pass." In these cases, evaluators should be cautious if an examinee acknowledges prior in-depth exposure to the test or interpretation procedures. In many contexts, however, when an examinee has no specific motivation to malingering or dissimulate and is still willing to provide their own spontaneous responses, prior exposure to the inkblots or information about the test should not significantly affect their responses and overall protocol.

Another component to consider is the complex nature of scoring and interpreting the Rorschach. In graduate programs in which the Rorschach is taught, students often require an entire semester (or more) of instruction and careful supervision before they can confidently and reliably score the test. Thus, someone who reads the Wikipedia page on the Rorschach, or purchases the set of inkblots and an excerpt from *Psychodiagnostics* (1921) on Amazon, is likely to have a much less comprehensive understanding of the test and interpretation procedures. I would venture to guess that it would be quite difficult for individuals who have read these relatively brief excerpts of information to then be able to successfully present themselves in a certain way during an actual Rorschach administration. To do so would require juggling an exorbitant amount of information at once, including how many whole versus detail responses one has given, whether one has described texture on any responses, how many color responses one has given, whether they were form-dominated or color-dominated, etc. The chances of someone being able to manage such a feat seem to be quite slim.

At the present time, the copyright on the original inkblots has expired. Thus, we are likely to see even more information about the Rorschach, including copies of the inkblots, appear in more and more places as time goes on. Several textbooks detailing scoring and interpretation of the Rorschach, including Exner's work, have been available for purchase on Amazon and other major retailers for many years.

However, the threat to test security is not as great as it would be if information about other tests, such as an intelligence test, were published online. Even individuals armed with information about the Rorschach are unlikely to be able to utilize it to significantly alter their overall protocol, with the exception of perhaps a few more *Popular* responses. As long as examinees are open to providing spontaneous responses, the test will continue to capture their personality functioning at that point in time, despite any previous exposure. As one Amazon reviewer aptly put it, "I loved looking at the inkblots and then reading about what I saw, and going back through my journal entries I'm kind of amazed at how what I see changes depending on things going on in my life. I swear every time I look at them I see different things" (Fu, 2014).

At least if you misplace your cards, now you know where you can buy a cheap replacement set.

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Confidentiality Concerns Surrounding...

...continued from page 3

To address these dilemmas, we offer the following general recommendations for consideration by clinical training sites and doctoral programs:

1. Institute a requirement in doctoral training programs that a clinical supervisor and/or faculty member review and approve the use of all clinical documents, including psychological testing reports, prior to their submission to other training sites.
2. Require trainees to obtain written permission from previous training sites before they are allowed to use these materials in their applications; alternately, training institutions that request psychological testing reports as supplementary material could ask applicants to demonstrate proof that at least one licensed professional has reviewed and approved the clinical documents for use.
3. Confidentiality issues surrounding the use of clinical writing samples for purposes other than direct client care should be incorporated into graduate-level curricula early in the course of training, such as in the context of a required ethics course.
4. Training sites requiring clinical documents such as testing reports should make it clear to applicants what the expectations are for protecting client's sensitive data, including information about who has access to the documents and how they will be stored.

In conclusion, there is currently limited and insufficient oversight into how trainees' psychological testing reports are monitored for the dual purposes of protecting client anonymity and confidentiality, and presenting trainees' assessment and case formulation competencies when such reports are submitted to external clinical training sites. While protecting a client's anonymity and confidentiality should be paramount, the extent to which clinical data are falsified to this end likely compromises a trainee's educational goals. Unfortunately, Lewis and Samstag's (2014) survey results suggest that trainees often choose to navigate this critical learning opportunity without supervision or consultation.

In order to address this problem, a model incorporating these suggestions is currently being piloted at the Albany Psychology Internship Consortium. Trainees applying to internship are asked to provide a de-identified copy of a testing report, along with a completed checklist of ethical considerations to follow in accordance with the HIPAA guidelines and the American Psychological Association's Ethical Code of Conduct when submitting clinical data. The checklist includes a space to indicate whether or not the de-identified document has been reviewed by a supervisor. A link to the ethics guidelines is provided to the trainee during the application process, as well as a description of who will have access to the document and how it will be stored. The goal is to encourage applicants to consider issues of confidentiality during the submission process and to provide an additional layer of protection for sensitive clinical data. Clearly this is an important issue to be considered at all stages of training. Doing so may help to increase awareness of the sensitive nature of clinical data throughout a trainee's career and may even carry over into other aspects of ethical decision making.

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Ethical Considerations in Assessment Supervision

...continued from page 4

Consumers of supervisory services are both the supervisee and the client. The supervisor is obligated to protect the welfare of both. The supervisee is protected when the supervisor provides clear goals and timely feedback. Sometimes a supervisor must choose between closer levels of scrutiny and giving the supervisee the freedom to make decisions that might be mistakes.

Incorporating contracts into clinical supervision is becoming increasingly common and expected. Written contracts between supervisor and supervisee help to elucidate the roles and responsibilities of each party. Sometimes learning how to be a supervisee, what to ask for, and what to expect is the most challenging task of training. Supervision contracts promote ethical practice by detailing specific ethical standards, and are an effective tool for goal setting for positive outcomes for both supervisees and their clients. These agreements are not legally binding (Bernard & Goodyear, 1998), but they sensitize the parties to the various aspects of the supervisory relationship. They are especially helpful in matters of confrontation or disagreement between supervisors and supervisees. Osborn and Davis (1996) outlined six topics to be addressed in supervisory contracts, including: purpose, goals, and objectives; context of services; method of evaluation; duties and responsibilities for both parties; procedural considerations; and supervisor's scope of practice. Documenting supervisory agreements gives all parties informed consent about supervisory roles and responsibilities (Bernard & Goodyear, 1998).

Most ethical complaints in the area of supervision result from supervisors who were negligent or disrespectful. Negligence often takes the form of lack of timely feedback, but also includes supervisees receiving very little supervision, and evaluations based on extraneous variables such as monetary contributions, referrals, or help with a research project. There must be clearly established criteria for proper evaluation to occur. Negative evaluations should never come as a surprise. If a supervisor feels a supervisee is unable to do satisfactory work, he or she is responsible to determine why

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the supervisee is experiencing difficulty and provide a plan to remediate the problem. Supervisors have a responsibility to the public to ensure that unqualified people do not become psychologists.

Supervision sessions should be documented. Bridge and Bascue (1988) recommend including the date and session number of supervision, identification of the cases discussed, the client's problems and progress, suggestions for further treatment, and remediation plans for the supervisee. Harrar et al. (1990) recommend keeping three things in mind: the quality of care given to the client, the quality of training given to the supervisee, and the ethical issues involved if there would be a complaint from the supervisee or the client.

Supervision can prevent burnout. Many clinicians find that when their training ends, so does supervision. Although supervision is not just for students or trainees, once training is ended many clinicians benefit from peer consultation. Consultation differs from supervision because in consultation, clinicians do not give up their independent authority. Clinicians can accept or reject the opinion of a consultant. Regular case discussions are helpful and sharpen the skills of all clinicians (Knauss, 2002). Through supervision/consultation, clinicians can update their knowledge of recent developments in the field, learn specialized skills or techniques, or learn new evidence-based methods of assessment or treatment. The supervisory relationship can provide an incentive for further growth and training as well as boost morale and energize clinicians who work in difficult situations.

Supervision is not just for training. It is good risk management. Good supervision can keep clinicians focused and help them to be more effective in their work. Elements of good supervision include communicating respect, support, and encouragement; and balancing personal growth with the development of technical skills. Supervision/consultation is important for clinicians at all levels of experience and is a lifelong process.

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Among the highly competitive but very important funding mechanisms within the National Institute of Health (NIH) are F32 awards, T32 Institutional Training Grants, R21 high risk/high reward grants, R34s, and K awards. More information can be found at the NIH website. Also on the NIH website, a search engine called NIH RePORT (<http://projectreporter.nih.gov/reporter.cfm>) provides access to all currently funded grants. Sara Lowmaster pointed out that it can be helpful to search for individuals who have grants and follow up with an email to ask about opportunities. Additional sources of funding include private foundations, Veterans Affairs (VA) funding mechanisms (career development awards), VA Merit awards, and Department of Defense funding.

In summary, this group of successful early career psychologists generously passed on their hard-won wisdom to a full audience of graduate students. It was encouraging to see that the long path to a research career can be so successful!

SPA Personals

Anthony D. Bram, PhD, and **Mary Jo Peebles, PhD,** have authored *Psychological Testing That Matters: Creating a Road Map for Effective Treatment*, published in 2014 by APA Books. This book describes and updates the psychodynamic approach to diagnostic psychological testing, case conceptualization, and treatment planning that evolved in the postdoctoral fellowship program at the Menninger Clinic in Topeka, KS. The authors integrate decades of clinical wisdom with up-to-date empirical research in personality assessment, psychoanalysis, and psychotherapy.

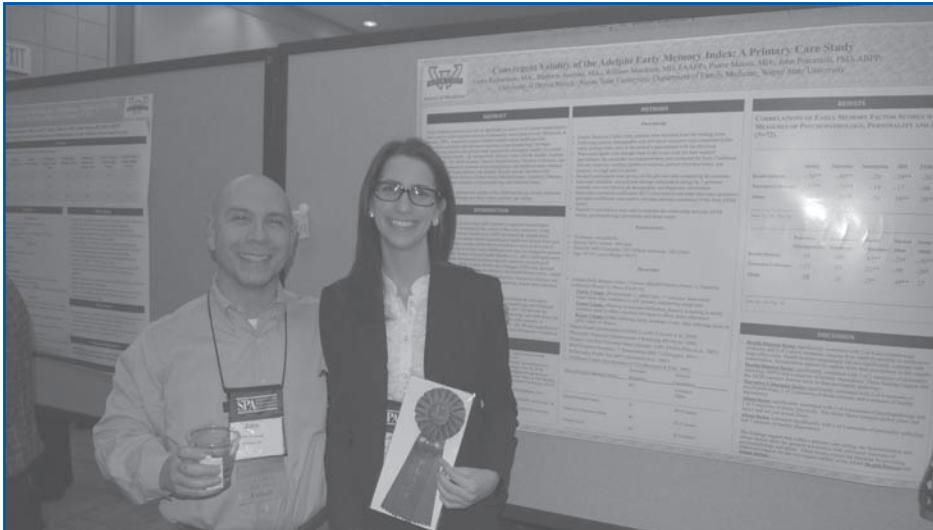
After 10 years at UC–Santa Barbara, **Steve Smith, PhD,** will be relocating to the Bay Area where he will join the faculty of Palo Alto University in August 2014. He will serve as the co-DCT of the Palo Alto University (PGSP)/Stanford PsyD Consortium.

What Graduate Students Need to Know...

...continued from page 6

Job Wiki (<http://psychjobsearch.wikidot.com/>) is another source, and while roundtable members had mixed reviews on its utility, they did agree that that it offers real-time information and can give a good sense of what is going on in the market.

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Dr. John Porcerelli (left), SPA Board Member, and Laura Richardson (right), first place winner, Poster Session I.



Past-President Dr. Radhika Krishnamurthy.



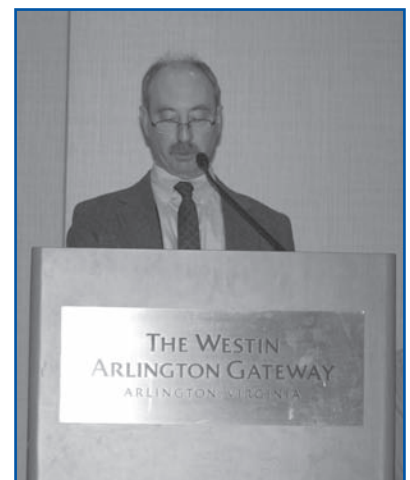
Dr. Robert Bornstein (i) with Samantha R. Overstreet (right), first place winner, Poster Session II.



SPA Board members Drs. Giselle Hass (left) and Carol Overton (right).



Left to right: Cleo Arnold, Michelle Casarella Espinoza, and Exchange Associate Editor Dr. A. Jill Clemence.

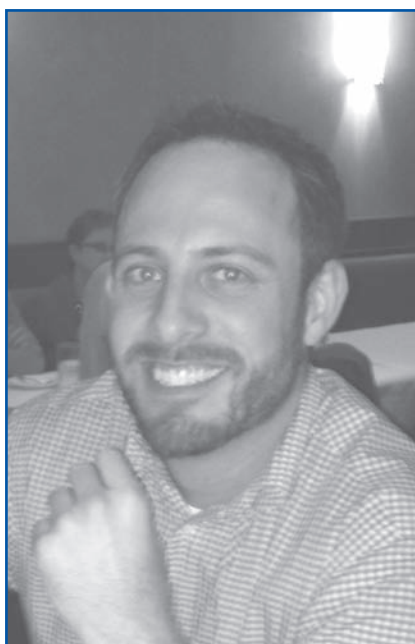


Dr. Robert Bornstein.

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SPA Board member Dr. Carol Overton.



SPA Website Editor Dr. J. D. Smith.



Dr. Steven K. Huprich, Editor, *Journal of Personality Assessment*.



Bob Erard (*left*) receiving Past President gift from Ron Ganellen (*right*).



SPA Board members Drs. Les Morey (*left*) and Mark Blais (*right*).

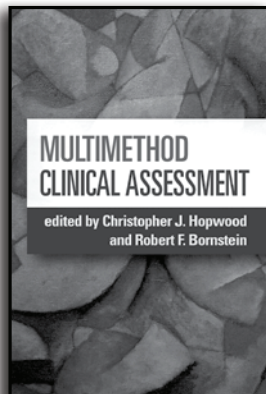
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Robert F. Bornstein, PhD



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—Robert F. Krueger, PhD

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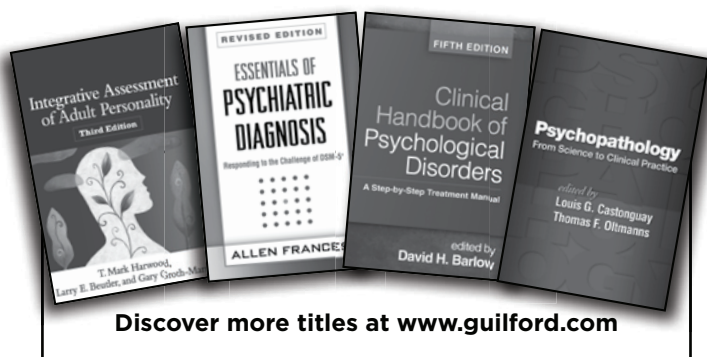
so-called ‘gold standard’ instruments, they argue that multitrait, multimethod assessment encompassing the whole person should become the minimum standard. Addressing a diverse range of topics, the contributors show that both convergences and divergences among multiple assessment methods need to be understood in order to develop a full picture of the help-seeking client. The book is organized within an integrative, cross-theoretical framework that provides practical support for effectively carrying out multimethod assessment.”

—Gary Brown, PhD

From leading authorities, this book presents evidence-based strategies for using multimethod assessment to enhance clinical practice. The volume is organized around key assessment targets in the areas of personality, psychopathology, and clinical management (for example, treatment planning and progress monitoring). Each chapter presents multiple methods that are particularly useful for assessing the issue at hand, provides a framework for using these methods together, and reviews the empirical data supporting their integration. Illustrative case examples clarify the approaches described and show how incorporating assessment into treatment can strengthen the therapeutic relationship.

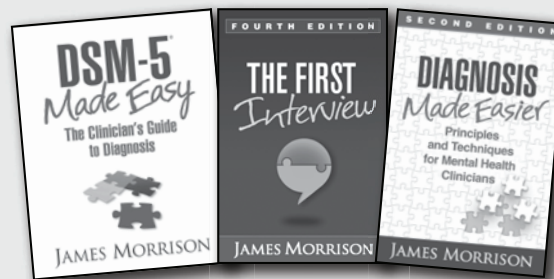
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From the Editor...

Jed A. Yalof, PsyD, ABPP, ABSNP



In this issue of the *Exchange*, we cover quite a bit of territory: ethical considerations in assessment supervision, public domain access to the Rorschach, and confidentiality concerns related to the use of assessment materials as supplemental application to training sites. There is also information for early career professionals on starting a research career and updates on the SPA Foundation and advocacy initiatives, a message from the President, and highlights from this year's annual convention, as well as a heads-up about next year's convention in Brooklyn, New York. Until next time...

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