

Ethical issues in psychological testing

Sources for Ethical Decisions

- *APA: Ethical Principles of Psychologists and Code of Conduct*
- Local code, e.g. Polish Psychological Association Ethical Code.
- Rights of test takers?

Rights of Test-Takers (APA)

- Be treated with courtesy, **respect**, regardless of age, disability, ethnicity, gender, national origin, religion, sexual orientation or other personal characteristics.
- Be tested with measures that meet professional **standards** and that are appropriate.
- Receive a brief **explanation** prior to testing about the purpose(s) for testing, the kind(s) of tests to be used.
- Individual's **freedom to decline**, and freedom to withdraw, is respected.
- Have test administered and your test results interpreted by **trained** individuals who follow professional codes of ethics.

Ethical issues in psych testing

1. Competence of psychologist
2. Informed Consent
3. The right to Results
4. Confidentiality
5. Test security
6. Divided Loyalties
7. Invasion of privacy
8. Labeling
9. Dehumanization

1. Competence

- Theoretical issues
- Actuarial vs. clinical prediction

Test Givers Should:

- select test after review of tests available
- knowledge of test materials & manual
- not using test for purposes not recommended by developers
- knowledge of ethical codes, e.g.:
 - provide test-takers, or their parents, with information about their rights
 - explain results in language test-taker can understand

Theoretical Issues

- Is your test reliable? Reliability – upper limit on validity.
- Is your test valid for **particular** purpose?
- Are you measuring a stable characteristic of the person being tested?
- If so, differences in scores over time reflect measurement error or subject variables such as fatigue.
- What is the value of your test result – will it still be true next year?

Theoretical issues

- Suppose you test someone as part of a hiring process.
- If the test result says that person does not have the characteristic you're looking for, does that mean they could never acquire that characteristic?

Actuarial vs. clinical judgment

- Actuarial judgment occurs when we feed test scores into statistical formulas to diagnose a psychological condition or predict future performance.
- Clinical judgment occurs when we have a trained psychologist interpret test scores to diagnose a psychological condition or predict future performance.

Actuarial vs. clinical judgment

- In actuarial judgment, we cannot make accurate predictions tailored to individuals
- Instead, our conclusion will be the same for every person with a given set of test scores
- In clinical judgment, the claim is that you can determine “what caused what” in an individual’s person’s life
- But clinical judgment does not improve with experience

Actuarial vs. clinical prediction

- E.g. metaanalysis: statistical formula does a better job of prediction
- Still, someone has to be *legally responsible* – that has to be a trained professional

2. Informed Consent

- Consent requires “affirmative permission before actions can be taken”.

Informed Consent

Elements of Informed Consent Agreements

- Must be presented in a clear and understandable manner
- Reason for the test administration.
- Tests and evaluations procedures to be used.
- How assessment scores will be used.
- Who will have access to the results.
- Present rights of test taker e.g. to refuse.

Informed Consent

- If underage is tested written informed consent must be obtained from the parents, guardian.

Research: Debriefing

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- Restate purpose of the research.
- Explain how the results will be used (usually emphasize that the interest is in the group findings).
- Reiterate that findings will be treated confidentially.
- Answer all of the respondents questions fully.

Informed consent - exceptions

- When it is *acceptable* to test without getting consent?
- When it is *necessary* to test without getting consent?

Informed consent - exceptions

- *Acceptable*, e.g., psychology students during a course.
- *Necessary* e.g., when mandated by law.

3. Knowledge of Results

- Must fully disclose test results in understandable language
- Avoid using theoretical constructs e.g. crystallized intelligence, ego strength etc.
- Do not use technical terms, e.g. your neuroticism is 6 sten.

4. Confidentiality

- Test results are confidential information
- Release of results should only be made to another qualified professional after client's consent

5. Test Security

- Test materials must be kept secure
- Test items are not revealed except in training programs and when mandated by law, to protect test integrity
- Test items are private property

6. Divided loyalties

- Who is the client?
- The person being tested, or the institution you work for?
- What if these parties have conflicting interests? Examples?
- How do you maintain test security but also explain an adverse decision?

7. Invasion of Privacy

- When tested people may feel their privacy is invaded.
- The clinician is always ultimately responsible; this includes scoring and interpretation done by a computer
- Informed consent – informing the client about both the nature of the information being collected and the purposes for the which results will be used
- Relevance – is the information gathered through assessment relevant to the counseling? Counselor should be able to clearly state purpose and benefits of appraisal process

8. Labeling

- Once diagnosed, the disease can be labeled.
- E.g. psychiatric labels can be damaging.
- Public has little understanding of e.g. schizophrenia.
- When diagnosing, use least stigmatizing label consistent with accurate representation
 - It does not mean that counselors should always use less or nonstigmatizing diagnostic codes; a less stigmatizing code that is inaccurate could prevent the client from receiving appropriate treatment.

8. Labeling

- Problem: a psych. disease is perceived as medical.
- Ergo: ill person cannot do anything about it.
- It is not true for psychological disorders.
- A person can take responsibility to get better.

9. Dehumanization

- Some forms of testing remove any human element from decision-making process
- Seen as becoming more prevalent with the increase in computer-testing

9. Dehumanization

- Does computerized testing and analysis of test results create a danger of minimizing human uniqueness?
- Humans are very complex – which allows us to be individuals, different from each other
- But testing and interpretation *generalize*

Access to psychological testing

- We've considered possibility of being hurt by tests – but what about possible benefits of tests? Who gets those benefits?
- WAIS-III kit costs \$775 per person – for tester to buy the kit. Cost must be passed on to someone. Who should that be?