Initial Assessment Techniques 1 [20 Points]

1) Research has shown that clients who perceive their counselors as being trustworthy, expert, and attractive helpers have better outcomes in counseling than clients who do not have these perceptions of their counselors (see lecture notes and Strong [1968, esp. pp. 221-222]). These factors can also be very important during the first session with a client (i.e., intake assessment).
   a. What do the terms trustworthy, expert, and attractive mean to you with regards to being a counselor establishing rapport with a client during an initial/intake assessment?
   b. Research shows that the effectiveness of counseling is significantly influenced by the first session with a client. Why do you think these factors are important as early as the first intake assessment?
   c. What can counselors do to enhance the quality of the intake assessment and build positive expectations about counseling outcomes for a client?
   d. Do you think it is possible for a therapeutic relationship to recover from a poorly-conducted intake assessment? Explain.

Initial Assessment Techniques 2 [20 Points]

2) Many times, throughout their careers, counselors will conduct an intake with a client and want more specific information about a special situation or circumstance. Often, these situations involve assessing suicide potential. (See lecture notes, Jacobs and Brewer [2004], and NIMH handout.)
   a. Present some background information about suicide statistics and relevant demographic factors.
   b. Identify important client factors that a counselor should consider when assessing suicidality.
   c. What are the recommended areas of concentration for counselors assessing the risk of suicide? Also share your thoughts on following such recommended areas of concentration.
   d. What are two possible instruments to use for assessing suicide? What are your thoughts on their integration into treatment?
Using Assessment in Counseling [15 Points]

3) Assessment in counseling has many uses including integration of treatment approaches and monitoring treatment progress.
   a. Briefly identify five recommended client characteristics to be considered for effective treatment matching. Explain how having additional assessment information for these identified client characteristics would be helpful in formulating treatment goals and interventions. You may use a brief case example to explain your answer.
   b. A new development in the field of psychology and counseling is centering on the assessment and development of human strengths through positive psychology. Why may this be an important consideration in understanding clients? What individual resources/strengths have you noticed in people that might have helped them through a difficult situation or decision? How might assessing for and fostering these types of characteristics or abilities facilitate treatment effectiveness for clients?
   c. Monitoring client treatment progress should occur throughout treatment, not just at termination. What are some ways to assess treatment progress of clients? Why do you think research consistently finds that clients have better therapeutic outcomes when counselors receive feedback about client progress?

Assessment in Career Counseling [15 Points]

4) It is important for counselors to assess self-estimates of clients’ interests, abilities/skills, and values when providing career counseling. These factors, among others, can have a significant impact on career decision making and other future life decisions.
   a. Define and explain the difference between client interests, abilities/skills, and values. Why is it important for a counselor to focus on all three factors, rather than just one? Provide a brief case example demonstrating the need to consider all three factors when choosing a career path.
   b. When going through the “career decision making” process it is important to differentiate between undecided and indecisiveness. What is the difference between these two terms? Similarly, what is career maturity? How does making the differentiation between undecided and indecisiveness, along with assessing career maturity, potentially influence the career counseling process? (In other words, how could this information influence treatment goals and career decisions?)
   c. The qualitative career assessment approach emphasizes the importance of considering relationships when providing career assessment and counseling. What are some examples of relationship factors that may influence a client’s career decision making process? Explain why such factors are important for counselors to consider when providing career assessment and interventions. Provide a case example highlighting how a relationship factor has a “negative” or “positive” impact on career decision making.
Appraisal of Personality 1 [15 Points]

5) Personality is the unique and relatively stable (i.e., trait; not state) ways in which people think, feel, and behave. Personality assessment is a heavily relied upon approach to understanding a person’s present problems/behaviors and even predicting future behavior. (Anastasi & Urbina text [pp. 350-359] and the MYY may be especially helpful for the MMPI-2 questions.)

a. Observation and interviewing are two informal approaches to assessing personality. Describe each approach while identifying their common reliability and validity concerns.

b. The Minnesota Multiphasic Personality Inventory, 2nd edition (MMPI-2) is the most widely used structured personality inventory. Describe MMPI-2’s development (including an explanation of empirical criterion keying), norming, and item content (i.e., what type of questions). How are the MMPI-2 scores interpreted?

c. Although self-report personality inventories are subject to “faking” good or bad and response sets (e.g., socially desirable) the MMPI-2 has multiple validity scales to minimize the effects of these concerns. Identify and define the original three validity scores (e.g., L, F, K). Identify and define the two “new” validity scores (e.g., VRIN, TRIN).

Appraisal of Personality 2 [20 Points]

6) Among the various ways of assessing people, projective techniques have enjoyed considerable popularity in the past. As each generation of mental health practitioners enters the field, there is a trend of fewer professionals using such instruments. [In addition to your lecture notes, it is highly recommended to refer to the Lilienfield, Wood, & Garb (2000) article (specific page numbers provided where appropriate).]

a. Discuss the assumptions underlying projective theory (i.e., the projective hypothesis) – refer to lecture notes and Lilienfield et al. (2000) pp. 28-29.

b. Many meta-analyses and literature reviews, including Lilienfield et al. (2000), have highlighted the concerns of norming, scoring, reliability, validity, and interpretation. The Rorschach Inkblot Test and Thematic Apperception Test have received much criticism for these concerns (probably because they are used the most). Lilienfield et al. (pp. 56-58) provide seven recommendations-advice-comments for the clinical use of projectives. Identify three recommendations that resonate most strongly with you as you see yourself as a mental health professional. Explain.

c. As stated by Lilienfield et al. (2000, pp. 27-28), although the use of projectives has declined over the years, many professionals still utilize them as a part of formal assessment. Why do you think projectives are still used even though reliability and validity is poor? What are some possible consequences for the field of psychology if such instruments continue to be utilized?

d. Considering your answers to questions #5 and #6, what personality assessment approach (structured vs. projective) would you feel most comfortable relying upon when making diagnostic impressions and implementing interventions? Explain.
Assessment Review [20 Points]

7) We have reviewed many assessments in class. Simply pick one of these assessments and answer the following questions. You can also use the MMY or other peer-reviewed articles to supplement your responses. (Do not pick the same assessment used for your “Psychological Assessment Review Outline.”)
   a. “Likes” and Strengths of the assessment.
   b. “Dislikes” and Weaknesses of the assessment.
   c. Describe the assessment’s administration, scoring, and interpretation.
   d. Discuss the assessment’s practical uses for therapy, including treatment.