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ABSTRACT

Studies have revealed significant problems in correctly scoring ambiguous verbal responses to test items on the Wechsler Intelligence Scale for Children-Revised (WISC-R). This study evaluated the effectiveness of an instructional design procedure developed to reduce examiner scoring errors on the WISC-R. Data concerning frequent sources of error on the WISC-R were obtained from 14 clinical psychology graduate students (pre-intervention group) enrolled in an Individual Intelligence Testing course. Remedial strategies were developed to clarify response categories and minimize errors due to carelessness. Strategies were used with 9 post-intervention students who took the course the following fall term. Pre- and post-intervention students completed the course and administered the WISC-R several times. A total of 98 pre-intervention and 63 post-intervention protocols were analyzed to determine the number and type of errors. Compared to the pre-intervention group, the post-intervention group had significantly fewer errors, with careless mathematical and Clerical mistakes almost eliminated. Students continued to make mistakes, showing no improvement with practice in test administrations. A certain amount of difficulty in scoring may be inherent in the WISC-R test manual, and it may be advisable to incorporate examiner scoring errors into the WISC-R standard error of measurement. (Author/NB)

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Teaching the WISC-R

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Teaching the WISC-R: An Effective
Instructional Design Procedure

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Abstract

The effectiveness of an instructional design procedure developed to reduce examiner scoring errors on the WISC-R was investigated. Scoring errors were significantly reduced, with careless mathematical and clerical mistakes almost eliminated. Corrected Full Scale IQ scores were almost all within +/- 2 points of the originally assigned IQ scores. Even so, subjects continued to make errors, showing no improvement with practice in test administrations. It may be that a certain amount of difficulty in scoring is inherent in the WISC-R test manual (e.g., correctly scoring ambiguous responses). Enough data exists to support the notion that errors are commonplace; perhaps, then, we need to incorporate examiner scoring errors into the WISC-R standard error of measurement.

Teaching the WISC-R: An Effective
Instructional Design Procedure

Numerous studies (e.g., Bradley, Hanna, & Lucas, 1980; Brannigan, 1975; Conner & Woodall, 1983; Franklin, Stillman, Burpeau, & Sabers, 1982; Miller & Chansky, 1972) have shown significant problems exist in correctly scoring ambiguous verbal responses to test items on the Wechsler Intelligence Scale for Children-Revised (WISC-R). Moreover, clerical and mathematical errors are not unusual, even on professional psychologists' test protocols (e.g., Oakland, Lee, & Axelrad, 1975; Sherrets, Gard, & Langner, 1979). One primary cause of examiner scoring error may be inadequate training and poor instructional design procedures of intelligence testing courses. Relatively little has been done in the area of training students to score the WISC-R more accurately (Blakey, Fantuzzo, Gorsuch, & Moon, 1987); what has been conducted has been reported as ineffective (Conner & Woodall, 1983; Warren & Brown, 1973). Poor instructional preparation in intelligence testing courses may produce examiners who do not have sufficient knowledge of test manual instructions nor an awareness of the significance of standardized procedures.

Research studies (Dana, Gilliam, & Dana, 1976; Levitt, 1973; Rice & Gurman, 1973; Russ, 1978; Shemberg & Keeley, 1974; Sturgis, Versteegen, Randolph, & Garvin, 1980) exist which support the hypothesis that training appears to be less than adequate. For example, Garfield and Kurtz (1973) reported that the primary skill deficit of clinical graduate students was a lack of assessment skills. Though competently administering standardized tests is a basic assessment skill, surveys of internship directors (e.g., Dana et al., 1976; Shemberg & Keeley, 1974; Sturgis et al., 1980) cited assessment skills as among new interns' most prominent skill deficits. Two specific features of training mentioned as deficient are (a) inadequate teaching and (b) disparaging attitude toward diagnostic testing. Evidence that inadequate teaching may be an important variable in poor assessment skills comes from several sources (Dana et al., 1976; Drabman, 1985; Sturgis et al., 1980). According to Drabman (1985), students "often arrive at their internship sites not knowing how to administer, score, and interpret" commonly administered tests (p. 624). In regard to (b), Garfield and Kurtz (1973) commented that "university training tends to make students have an overly critical attitude toward diagnostic testing" (p. 352). Thus, students may leave assessment courses

not only with minimal testing skills but also with a distaste for testing which may further impair accurate administration and scoring of intelligence test protocols.

Even in the studies (e.g., Boehm, Duker, Haesloop, & White, 1974; Fantuzzo, Sizemore, & Spradlin, 1983) that examined instructional design procedures in intelligence testing, graduate students were still making errors following course completion; errors which later may become more serious due to less supervision and more demands for the practitioner's limited time. The conclusion cannot be made that students will become more proficient in test administration and scoring following graduation, particularly if they lack competency prior to graduation. The suggestion (Franklin, Stillman, Burpeau, & Sabers, 1982) that present training methods need to be re-examined is still apt today. The purpose of the present research was to examine the effectiveness of an instructional design procedure developed to minimize frequently occurring scoring errors on the Wechsler Intelligence Scale for Children-Revised.

Method

Subjects

Two groups of graduate students enrolled in a clinical psychology master's program at a southeastern university and in an Individual Intelligence Testing course served as subjects. Fourteen subjects were enrolled in the 1985 fall semester course (pre-intervention group) while 9 subjects were enrolled in the 1986 fall semester course (post-intervention). Four were male and 10 were female in the 1985 group, while 3 were male and 6 were female in the 1986 group. Academic scores (e.g., Graduate Record Examination and college grade point averages) were commensurate for both groups.

Procedure

Data were obtained from the first group of 14 subjects concerning frequent sources of error on the WISC-R. Following the determination of subtest items that were most difficult to score and reasons errors occurred on those items, remedial strategies were developed. These strategies were aimed at clarifying response categories (e.g., point value assignments) as well as minimizing error due to carelessness. These remedial strategies were used in the following fall to ascertain their effectiveness in decreasing examiner scoring errors.

For both groups, students were required to study the test manual prior to observing a practice demonstration of the WISC-R. Problems in administration and errors in scoring that might occur were discussed. For the post-intervention group, the remedial strategies were examined point by point and each student was provided with a written copy. All subjects for both groups were required to administer the WISC-R 8 times to child and/or adolescent volunteers. The average number of WISC-R protocols completed in assessment courses is 7.3 (Oakland & Zimmerman, 1986). Students were paired together with each one responsible for checking the other's protocols for errors prior to submission to the instructor for grading. The form utilized by the students in evaluating WISC-R protocols was a modification of one used in a study by Conner and Woodall (1983)¹. Both written and verbal feedback were reported to students by the instructor following each of the 7 WISC-R protocols so that corrections could be made prior to the final administration observed by the instructor.

Following completion of the class, protocols were analyzed to determine the number and type of errors made by the graduate students. A total of 98 and 63 protocols were analyzed for the pre- and post-intervention groups, respectively.

Results

A t-test performed on the mean errors per test administration ($t=8.36$, $p<.01$) found a significant difference in mean errors for the pre- and post-intervention groups. When examining the means of scoring errors by test administration (Table 1), one notices that the post-intervention group mean is significantly lower on the first test administration. This decrease was maintained throughout the remaining six administrations. Next, a repeated measures ANOVA was used to analyze whether errors significantly decreased over time for the pre- and post-intervention groups. F's of 1.21 ($p<.31$) and 1.01 ($p<.43$) were obtained for the pre- and post-intervention groups, respectively, indicating that scoring errors did not decrease over test administrations. An examination of the means reveals that the intervention provided an immediate reduction in scoring errors ($M=3.88$ for the post-intervention group compared to $M=9.57$ for the pre-intervention group), but did not result in further decreases over time. This finding has implications for instructional design procedures for assessment courses.

Insert Table 1 about here

The mean scoring error for each Wechsler subtest for both pre- and post-intervention groups is shown in Table 2. As found in previous research (e.g., Miller & Chansky, 1972), Vocabulary, Comprehension, and Similarities were the three subtests in which students made the most mistakes. The post-intervention groups' mean errors per subtest was about half or less of the errors made by the pre-intervention group. The maximum number of scoring errors made on any one protocol decreased from 33 in the pre-intervention group to 9 in the post-intervention group.

Insert Table 2 about here

In the pre-intervention group, errors on 32.6% of test protocols did not influence the Full Scale IQ score while the IQ scores on 58.7% of the protocols were originally assigned scores 1 to 5 points higher than the corrected IQ score. Prior to the intervention, students were more likely to assign too many points to an examinee's answer rather than too few points. In the post-intervention group, 68.3% of the protocols had no change in the Full Scale IQ score. The remaining IQ scores were almost all (exception of 3.4%) within 2 points of the corrected IQ score.

The most frequent types of mistakes were examined and ranked in Table 3. Inappropriate questioning and assigning too many points for an examinee's response are the two most frequently occurring errors for both pre- and post-intervention groups. Several mechanical and clerical errors such as no red pencil for coding, incorrect subtest total, and failure to record examinee responses were noticeably reduced in the post-intervention group.

Insert Table 3 about here

Tables 4 and 5 indicate the most frequent incorrectly scored subtest items and subtests by categories of errors and suggestions designed to minimize those errors. On Table 5, numerous items and subtests were scored consistently wrong for the pre-intervention group. Following the remedial strategies, the post-intervention group shows a reduction in the number of difficult items and number of subtests with consistent error patterns. Samples of the remedial strategies are provided in Table 52.

Insert Tables 4 and 5 about here

Discussion

Directing education toward likely sources of error on the WISC-R appeared to be an effective procedure for decreasing examiner scoring error. Making students aware of the existence of errors, common difficulties, and reasons for those difficulties seemed to have an immediate and lasting effect. Errors were cut in half on the first test administration and remained so for the next six administrations. Even with the strategies, students averaged between 3 and 4 errors per protocol. Some of these errors may be caused by ambiguity in the test manual and may be difficult to modify. Brannigan (1975) and Miller and Chansky (1972) suggested a revision of Wechsler test items most subject to ambiguous replies. Even the Revised version appears in need of clarification because many verbal responses given by children are not scorable clearly by the test manual and examiners "read into" the responses.

Students did not significantly reduce their scoring errors over time. That is, test administrations alone did not result in fewer scoring errors. This was true for both pre- and

post-intervention groups. The adage of "practice makes perfect" does not seem to accurately reflect the acquisition of competent assessment skills. What may be happening is that students learn "bad habits" and, therefore, continue to make the same mistakes time and time again. Thus, we should not conclude that students will become more proficient with practice in scoring WISC-R test protocols when the research evidence indicates that this is not the case (e.g., Bradley et al., 1980; Oakland et al., 1975; Sherrets et al., 1979).

One limitation of the present study involves the composition of the sample. A limited number of subjects were used in the study. Also, all the subjects herein were enrolled in a master's level clinical psychology program. Thus, the results may not be generalizable to other graduate students or to other psychological specialty areas. To determine the applicability of these findings, research needs to be conducted with other student groups such as school psychology and with larger samples. Moreover, it is possible that the subjects in the post-intervention group were different from those in the pre-intervention group in ways related to assessment skills. That is, the post-intervention group might have made fewer scoring errors even without the remedial strategies, simply

because of unique subject variables. Therefore, this study needs to be replicated to more clearly ascertain its generalizability.

In summary, improved skills in psychological assessment is a primary need for professional development (Anderson, Cancelli, & Kratochwill, 1984). Strategies designed to reduce examiner scoring errors on WISC-R protocols appeared to be effective. Students made fewer mistakes, resulting in IQ scores that were almost all within +/- 2 points of the corrected IQ score. Even with the instructional design method discussed herein, students continued to make errors which practice did not decrease. This finding may reflect ambiguity in the WISC-R test manual rather than poor educational procedures. Given the research base to date, it is time to consider incorporating examiner scoring error into the WISC-R's standard error of measurement. To fail to do otherwise ignores reality.

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Table 1

Mean Error Scores by Test Administration for Pre- and Post-Intervention Groups.

Test Administration	Pre-	Post-
	M	M
1	9.57	3.88
2	8.62	4.38
3	9.62	3.11
4	7.54	4.12
5	7.23	1.78
6	6.85	3.78
7	7.15	3.11

Table 2

Comparison of Means, Ranges and Ranks of Examiner Errors by
Subtest per Protocol.

<u>Subtest</u>	<u>Pre-</u>			<u>Post-</u>		
	<u>M</u>	<u>Range</u>	<u>Rank</u>	<u>M</u>	<u>Range</u>	<u>Rank</u>
Information	.38	0-4	7	.12	0-1	7
Similarities	1.14	0-5	3	.42	0-3	3
Arithmetic	.12	0-3	10	.05	0-1	10
Vocabulary	2.22	0-11	1	1.27	0-3	1
Comprehension	1.98	0-9	2	.83	0-5	2
Picture Completion	.28	0-4	8	.20	0-3	5
Picture Arrangement	.43	0-3	6	.10	0-2	8
Block Design	.26	0-5	9	.07	0-1	9
Object Assembly	.55	0-4	4	.22	0-4	4
Coding	.54	0-3	5	.13	0-1	6
Independent Errors	8.10	0-33		3.40	0-9	
Total Errors	15.18	0-45		6.45	0-20	

Table 3

Comparisons of Error Type Rankings Across Subtests.

<u>Error Type</u>	Pre-		Post-	
	<u>%</u>	<u>Rank</u>	<u>%</u>	<u>Rank</u>
0 point credit for a 2/1 point answer	6.8	6	11.8	4
1 point credit for a 2/0 point answer	12.9	4	9.3	5
2 point credit for a 1/0 point answer	24.7	1	14.2	2
Inappropriate questioning	23.8	2	36.8	1
Failure to record examinee's response	15.6	3	6.4	6
Incorrect basal and/or ceiling	7.1	5	12.7	3
Incorrect credit for items below basal and/or above ceiling	1.0	9	0.5	8
Incorrect total for subtest	4.3	7	1.5	7
No red pencil for Coding	3.6	8	0.0	9

Table 4

Comparisons of Most Frequent Incorrectly Scored Subtest Items
and Subtests by Error Type.

	Pre-	Post-
Incorrect point assignment		
Information	13, 25, 26	-----
Similarities	5, 9, 14, 16	9, 16
Vocabulary	5, 7, 8, 10, 12, 14, 20	5, 7, 12
Comprehension	3-4, 6-9, 11-12, 15-16	8-9, 12, 16
Inappropriate questioning		
Information	13, 26	-----
Similarities	6	-----
Vocabulary	5, 7, 8, 10, 12, 14, 20	5, 12
Comprehension	3, 4, 7, 8, 9, 12, 16	8-9, 16
Basal and/or ceiling problems		
Arithmetic		-----
Vocabulary		-----
Picture Completion		-----
Picture Arrangement		-----
Block Design		-----

(Table Continues)

Table 4

Incorrect subtest total

Object Assembly -----

Coding

Note. ----- means that no consistent pattern of errors was found.

Table 5

Sample Comments from the WISC-R Suggestions for Remediation.

Subtest Item	Comment
Information	
13	Most errors were assigning 0 points for a 1 point response. An examinee response of the stomach performing some activity on food receives 1 point.
Similarities	
5	All errors were assigning 2 points for 1 point answers. To earn 2 points, the verbal comment must indicate that both are fruits. One point answers indicate specific properties, uses, or other general classifications.
14	Majority of mistakes were assigning 0 points for a 1 point response. Two point answers have to indicate abstract concepts or social ideas while 1 point answers show civil rights, have to do with freedom, democracy, or symbols.

(Table Continues)

Table 5

Subtest Item	Comment
Vocabulary	
5	Most errors were assigning 2 points for a 1 point answer. For 2 points, the child must indicate the object's general conceptualization or two 1 point responses. All 1 point answers in the manual are (Q).
7	The meaning of alphabet is letters in a language that are used in words, to write, and have sounds. A 1 point reply concerns letters or ABC's and are (Q). Note that if the child recites part or all of the alphabet, s/he receives 1 point.
Vocabulary	
8	Two points are assigned when the examinee states a donkey is like a horse but different in some way or indicates its general classification as an animal. One point is given when the child states a use or describes specific attributes.

(Table Continues)

Table 5

Subtest Item	Comment
Comprehension	
3	Examiners made mistakes in failing to (Q) when necessary and assigning 2 points for a 1 point answer. To earn 2 points, it must indicate both general areas on page 177. A reply of 1 area earns 1 point.
11	Examinee must indicate a correct general statement that suggests awareness of the significance of meat inspectors for the public to earn 2 points. One point comments concern a specific statement that points out advantages of having or the dangers of not having meat inspectors but lack implications for society at large.
Coding	
General	Make sure you have several pencils with red lead for the examinee. Do not score from memory; use the scoring stencil. If it is not available, use the key and check each item one at a time.

Footnote

¹ A copy of the modified Conner and Woodall (1983) form is available to interested readers. Please address inquiries to the author.

² A copy of the remedial strategies is available to interested readers. Please address inquiries to the author.