

Dorethea Herbst

3407

## **Psychological test development and adaptation in South Africa: A needs assessment**

Both quantitative and qualitative methods were used. The reason for this was to enhance the richness of the data gathered. Information obtained could be triangulated, which will enhance the trustworthiness and validity of the findings.

1. A mail **survey** was performed, largely quantitative in nature, although some open-ended questions were included. Natalie took the lead.
2. The key informant approach was used in that key role players in psychological testing in South Africa were **interviewed** (*individually*). Heidi conducted this part.
3. A needs assessment is performed to identify a problem or a need and to provide the target group with an opportunity to be involved in planning how to address their need. In addition to the first two methods it was decided to include the forum approach. **Focus group** interviews were conducted with groups of psychological practitioners to identify their test-related needs, to validate information obtained from the needs assessment survey, and to reflect on the agenda that is generated.

I will give only a summary on the themes and sub-themes that emerged when the data were analyzed. So, the focus is rather on the **process** of focus groups as a qualitative research method than the results, which will be presented later in the year when the final report is released.

### **The aim with focus groups as a qualitative research method**

The aim in using focus groups in the present project was to obtain rich data from practitioners that could be integrated with the results of the mail survey and individual interviews with stakeholders. This, in turn served to *enriched* as well as *enhance* the trustworthiness and validity of the findings of the overall project.

Focus groups do not generate *quantitative information* and therefore the results of the focus group survey *on its own* can neither be generalized nor projected to a larger population.

Using this method in research highlights the difference between producing data rather than "gathering" or "collecting" data. In other words, "data" is not "out there" waiting to be "*gathered*" or "*collected*", or for that matter "*discovered*", but rather produced and constructed through the activities of researchers and practitioners (Dhunpath, 2004).

### **Planning for focus groups**

Seventeen focus group discussions were facilitated by 17 facilitators. A total of 141 psychologists participated in the 17 different groups. Consistent with the approach suggested by **Krueger (1994)**, the researcher and facilitator saw to it that each group was small enough for everyone to have the opportunity to share insights, and yet large enough to provide diversity of perceptions. In an attempt to **ensure balance**, small groups of psychologists who gathered monthly for accredited continuous professional development (CPD) discussions were also included.

### **Questions for discussion**

The first step in the process was to decide on a set of questions for discussion. The questions were partly prompted by the questions posed in the survey questionnaire, in order to enrich the quantitative information obtained from the survey. Eight questions were duly formulated to use as a guideline, namely:

1. To what extent and for what purposes do you use psychological tests?
2. Do you find that your use of psychological tests adds value to the professional services that you render as a psychology practitioner?
3. Which tests do you use most frequently? (Identify three to five types of tests, and/or add other tests that you use).
4. If you think critically about the tests that you use most frequently, what are their main strengths and limitations?
5. What are your most important needs related to psychological test usage?
6. How do you see the quality of psychological tests in South Africa?
7. How can the needs that you have identified be addressed?
8. Who should take responsibility for addressing the psychological testing needs of practitioners?

The questions posed served to guide the discussions and were not followed in a rigid and inflexible manner. Enough flexibility for participants in each group allowed each practitioner to express his/her opinion and perception on relevant issues.

*There was a "dummy run", after which some of the questions were slightly changed.*

### **Networking**

The focus group **networking** commenced at the 9th Annual Conference of the Psychological Society of South Africa (PsySSA) held from 24 to 26 September 2003 at Caesar's Palace Conference Centre, Johannesburg. Contacts made by the researcher were followed up by visits to Cape Town, Durban, Bloemfontein and Johannesburg so as to sample practitioners from various geographic areas across the country.

### **Selecting facilitators**

Facilitators were selected on the basis of their **familiarity** with participants in the group or the particular work environment (e.g., university psychology department). All the facilitators were registered psychologists, either in private practice or lecturing at universities. This was to ensure objectivity and greater validity of the results.

Participants/practitioners<sup>1</sup> produced qualitative data focused on the aims of the research project.

### **Familiarity with participants**

They invited psychology practitioners to participate in the group discussion on a specified date. The invitation was to meet for a discussion of an hour. They also acted as the facilitator, organized the venue, invited the participants, and facilitated the discussions. My activities included taking notes and observing the group.

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<sup>1</sup> The terms psychological practitioner, participant, and psychologist either in singular or plural form, all refer to respondents in this study.

## Participants

Registered psychologists participated in a purposively selected sample.

- To be included in a focus group discussion, practitioners had to share equivalent criteria. They had to be registered with the Health Professions Council of South Africa (HPCSA)
- As well as work in private practice and/or be appointed as lecturers at universities or
- Be doing internships in psychology.

### Background information on the different groups

Groups	Number of participants	Description of group	Description of participants
1 A	10	CPD Group	Psychologists from clinical, counselling, educational and research categories.
2 B	5	University 1 Industrial Psychology	Department of Industrial Psychology: Participants are registered industrial or psychologists/interns who are lecturers.
3 C	9	CPD Group	Participants include psychologists from clinical, counselling, educational and research categories.
4 D	4	Private practitioners	Registered clinical and educational psychologists in private practice.
5 E	13	University 2	Participants included registered psychologists from a psychology guidance centre and the departments of psychology, educational psychology, and industrial psychology.
6 F	12	University 3 (a)	Participants included registered psychologists from a psychology guidance centre and the departments of psychology, educational psychology, and industrial psychology involved in training psychology students.
7 G	10	University 3 (b)	Participants included registered psychologists from a psychology guidance centre as well as from the departments of psychology, educational psychology, and industrial psychology.
8 H	5	Practitioners from different categories	Participants included an industrial and an educational psychologist, and a psychologist from a psychiatric clinic.
9 I	14	University 4	Participants included psychologists from a psychology guidance center as well as the departments of educational and industrial psychology.
10 J	5	Technikon 1	Participants included psychologists in counseling, educational and research psychology.
11 K	5	Technikon 2	Participants included psychologists in counselling, education and research.
12 L	12	CPD Group	Participants include psychologists from clinical, counseling, educational and research categories.
13 M	6	University 2 Dept for continuous Ed and training	Participants included educational psychologists who are also lecturers.
14 N	5	University 5 Student Services	Participants included clinical, educational and counseling psychologists and interns.
15 O	12	Psychiatric Hospital	Clinical psychologists and intern psychologists.
16 P	8	University 5	Educational psychologists/lecturers.
17 Q	6	CPD group	Different categories; all work mainly in neuropsychological assessment.

The different universities are indicated by a number, and where more than one group from a university participated, the number is followed by the letter (a) or (b).

The groups included psychologists from university training institutes, continuous professional development groups, and groups of private practitioners. Psychologists of different ages and all cultural groups participated in the different focus groups. Most of the focus groups consisted of six to nine participants. In three instances the groups included more than ten participants.

## **Procedure**

Upon arrival for the group discussions, the facilitator and participants were briefed. Each participant received a letter with background information on the project, including a consent form as well as a list of the questions. Participants were requested to sign the consent form permitting that the information they provided could be used for the research project. They were also reassured that participation was confidential and that their names would not be mentioned in the research report. Signing the form of consent served as proof that (a) a psychologist participated (b) that the group discussions took place on a certain day and time; (c) if audio and/or video tapes were used as back-up, permission was given by all participants. Research activities included taking notes and observing the participants in the group. For back-up purposes audiotapes and videotapes were used. To verify information, discussions were followed up by phone calls and/or electronic mail. Although the process of facilitation progressed as planned, some limitations related to planning the focus groups, recruitment and research expertise need to be acknowledged, and are discussed in the next section.

## **Limitations**

### Recruitment limitations

- Focus groups of one hour in duration were arranged to suit practitioners, but more detailed information could have been obtained had more than one hour been set aside.
- Not all groups included psychologists of all cultural groups.
- The time of the year (end and beginning) was difficult. Lecturers were involved in examinations at the end of the year, and in the beginning of the year they planned and prepared for the reception of first year students.

- Lack of available time on the part of private psychologists prevented some of them being able to attend a group discussion.
- Some CPD groups did not want to deviate from their planned programme and were neither able to arrange an additional date for a focus group nor persuade participants to stay for an additional hour after the CPD group for the focus group.
- Dates for two groups clashed and one of the groups could not arrange another time.

**Due to the limitations listed above, of the 28 groups initially recruited, only 17 focus group discussions took place and 11 of the recruited groups did not materialise as anticipated.**

#### Project limitations

- More CPD groups could have been arranged, but the budget limited the incentives available for facilitators.
- Networking could have started earlier, but the time taken for the project to be approved prevented this.

#### Research expertise

- More prompting by the facilitators could have resulted in richer information being gathered at times.
- Limited experience by the researcher in using focus groups as a qualitative method could have influenced the research activities to some extent.

#### **Data Analysis**

The information obtained from each group was transcribed and typed up by the researcher and uncertainties were clarified with group members telephonically or via electronic mail. The document from each group was then merged into one large document.

The information was then grouped per question. Since discussions tended to overlap, some of the questions were grouped together.

From the analysis of the text per question, ideas and themes were grouped and will be documented later in this chapter. Two tables were compiled, namely, a list of all measures standardized for or classified for use in South Africa and a second list with all the international tests mentioned during discussions. Needs were listed and sorted according to the themes as reflected in this chapter. The same approach was used to identify strengths and weaknesses, and suggestions for a new agenda. Quotations were added to enrich and elaborate on the themes and sub-themes as necessary. The quotations are included verbatim in section 2 of this chapter and have not been edited to improve their linguistic accuracy. To maintain objectivity, the researcher did not review the results from the survey questionnaires and individual interviews, until the data from the focus groups had been analyzed and the findings of the larger project were integrated.

The information from the focus groups was analyzed to gain some insight into the personal opinions and perceptions of psychological assessment practitioners. The practitioners indicated which psychological tests they currently (i.e., at the time of this research project and focus groups) used, and which tests required adaptation or updating for the new, multicultural South African context. Information on which additional tests were required for practice and for training-related purposes was also obtained. The method of organizing and conducting the focus groups is discussed next.

### Needs analyses

The main themes and the sub-themes of which they are comprised will be report on in a presentation later in the year after the report has been released. The themes and ideas that emerged are below. The themes and sub-themes were partly identified according to respondent discussions around the questions, and partly from information repeated in discussions across the groups:

#### Summary of Themes and Sub-themes

Themes	Sub-themes
Tests add value if certain conditions are met	<ul style="list-style-type: none"> <li>• The use of tests is central to the work of psychologists and provides structure</li> <li>• The value of tests depends on the practitioner</li> <li>• Tests help to establish baseline information</li> <li>• Tests add value if they are used in a culture-fair and ethical way</li> <li>• Tests add value if they are psychometrically sound</li> <li>• Outdated and culturally inappropriate tests and norms limit the value of tests</li> <li>• Tests are not used by all practitioners</li> </ul>
Tests are used for various purposes	<ul style="list-style-type: none"> <li>• Purposes of test use: Clinical psychologists</li> <li>• Purposes of test use: Educational psychologists</li> </ul>

Themes	Sub-themes
	<ul style="list-style-type: none"> <li>• Purposes of test use: Industrial psychologists</li> <li>• Test use by Psychologists who are trainers and/or researchers</li> <li>• Test use by Psychologists in private practice</li> </ul>
The use of tests in various applied settings	<ul style="list-style-type: none"> <li>• The use of tests in industry</li> <li>• The use of tests in psychiatric hospitals</li> <li>• The use of tests for school readiness assessment</li> <li>• The use of tests in career assessment</li> <li>• The importance of following good practices in the choice of tests</li> </ul>
The tests used by psychologists	<ul style="list-style-type: none"> <li>• Tests for children</li> <li>• Tests of intellectual ability and aptitude</li> <li>• Objective personality tests</li> <li>• Projective techniques</li> <li>• Interest inventories and tests used in career counselling</li> <li>• Computerized tests</li> <li>• The basis on which practitioners choose tests</li> </ul>
Issues related to test development and revision	<ul style="list-style-type: none"> <li>• The importance of developing quality tests and constantly revising them</li> <li>• Tests need to be developed/ revised to keep pace with changing contexts</li> <li>• Addressing culture in test development/revision</li> <li>• Addressing language issues in test development/revision</li> <li>• Establishing varied and culturally appropriate norms</li> <li>• The need for shorter tests (time factor)</li> <li>• Information on tests and their revision</li> <li>• Erosion of test development expertise</li> <li>• Prices of tests, quality of test materials, and service delivery</li> </ul>
Test-related needs	<ul style="list-style-type: none"> <li>• Intellectual ability and aptitude</li> <li>• Personality</li> <li>• Interests</li> <li>• Children</li> <li>• Scholastic and school readiness</li> <li>• Forensic purposes/law</li> <li>• Alternative assessment methodologies</li> <li>• Tests for special needs groups</li> </ul>
Role players and their responsibilities towards test development and use	<ul style="list-style-type: none"> <li>• The role of an independent body</li> <li>• The role of the Professional Board for Psychology of the HPCSA</li> <li>• The role of the Psychological Society of South Africa (PsySSA)</li> <li>• The role of the Human Sciences Research Council (HSRC)</li> <li>• The role of universities</li> </ul>

**Table: The practitioner, type of service, and purpose of test use**

Type of client	Registration category	Purpose of tests
Primary and secondary level in education, (Grade 1 to 12)	Educational psychologists	<b>Therapeutic and diagnostic:</b> <ul style="list-style-type: none"> <li>• School readiness</li> <li>• Learning difficulties</li> <li>• Cognitive functioning</li> <li>• Reading level</li> <li>• Career development</li> </ul>
	Clinical psychologists	<b>Therapeutic and diagnostic:</b> <ul style="list-style-type: none"> <li>• Development</li> <li>• Forensic work (rape and abuse)</li> <li>• Work with family advocate in child custody cases.</li> <li>• On request of parents/guardians, medical practitioners &amp; lawyers.</li> </ul>
	Research psychologists	<b>Experimental</b> <ul style="list-style-type: none"> <li>• Instrument development</li> <li>• Instrument reliability and validity</li> <li>• Program development</li> </ul>



Higher education training level	<b>Psychologists:</b> <ul style="list-style-type: none"> <li>• Educational</li> <li>• Clinical</li> <li>• Counseling</li> </ul> They are also lecturers and work with students (Individuals and groups).	<ul style="list-style-type: none"> <li>• Results are used for decision making related to training courses and career choice.</li> <li>• Participant response: Training ... <i>"should be relevant to the needs of the community, taking into consideration the needs of South Africa in particular and of Africa and the world in general."</i></li> <li>• Support individual students with personal problems, academic needs, study habits and language related problems.</li> </ul>
Adults/ families/ children	Clinical and counseling psychologists in private practice, clinics or psychiatric hospitals.	Use test batteries to: <ul style="list-style-type: none"> <li>• Assist in marriage counseling</li> <li>• Help direct psychotherapy for personal growth</li> <li>• Guide vocational development</li> <li>• For forensic (e.g., road accident fund decisions) and psycholegal purposes (e.g., retrenchment, affirmative action, criminal action, child custody, rape and sexual assault/harassment cases)</li> <li>• Diagnose post traumatic stress (e.g., hi-jacking &amp; retrenchment) and plan trauma therapy/crisis interventions</li> <li>• Perform neuropsychological assessment</li> </ul>
	Industrial psychologists	<ul style="list-style-type: none"> <li>• Identify team roles in company</li> <li>• Recruitment</li> <li>• Employee performance – to recommend appropriate intervention</li> <li>• Identify candidates for training and career development</li> <li>• Disputes between employee and employer</li> <li>• Assess individuals who request early retirement.</li> </ul>

**Table 3.4 Alphabetical list of classified tests referred to in the focus groups**

1	APIL
2	Bender Visual Motor Gestalt Test
3	California Psychological Inventory (CPI)
4	Cattell Culture Fair Intelligence Tests
5	Children's Apperception Test (CAT)
6	Clinical Analysis Questionnaire (CAQ)
7	Columbus Picture Analyses of Growth towards Maturity
8	Developmental Test of Visual Perception (Frostig)
9	Differential Aptitude Tests: Forms R, S, K & L
10	ESSI Spelling Test
11	19 Field Interest Inventory (19 FII)
12	English Proficiency Tests
13	Goodenough-Harris Drawing Test
14	Group Test for 5/6 and 7/8 year-olds
15	General Scholastic Aptitude Test (GSAT)
16	High School Personality Questionnaire (HSPQ)
17	Individual Scale for Southern Sotho-speaking pupils
18	Individual Scale for General Scholastic Aptitude (ISGSA)
19	Individual Scale for Northern Sotho-speaking pupils
20	Individual Scale for Tswana-speaking pupils
21	Individual Scale for Xhosa-speaking pupils
22	Individual Scale for Zulu-speaking pupils
23	Jung Personality Questionnaire (JPQ)
24	Junior South African Individual Scales (JSAIS)
25	Junior Aptitude Test (JAT)
26	Kinetic-Family-Drawing Test
27	Learning Potential Computerised Adaptive Test (LPCAT)
28	Mathematics Proficiency Tests
29	Mental Alertness
30	Miller Assessment for Pre-Schoolers (MAP)
31	Minnesota Multiphasic Personality Inventory (MMPI)
32	Myers-Briggs Type Indicator (MBTI)
33	Occupational Personality Questionnaire (OPQ)
34	Occupational Interest Survey (OIS)
35	Picture Vocational Interest Questionnaire for Adults (PVI)
36	Potential Index Battery (PIB)
37	Psytech tests
38	Programmer Aptitude Battery (PAB)(A/137) - includes
39	Matrices Test I, and
40	Matrices Test II.
41	Raven's Progressive Matrices (RPM)
42	Rorschach cards
43	Rothwell-Miller Interest Blank (RMIB)(C/134)
44	Scholastic Aptitude Test Battery for Pupils in Standards 4 and 5 (SATB Standards 4/5)
45	School-readiness Evaluation by Trained Testers (SETT)
46	Self-Directed Search Questionnaire (SDS)
47	Senior Academic-Technical Aptitude Test (SATA)
48	Senior Aptitude Tests (SAT)
49	Senior South African Individual Scale - Revised (SSAIS-R)
50	Siegmund System for Computerized Testing (pending final classification)
51	Sixteen Personality Factor (16-PF)
52	Stress Burnout Inventory
53	South African Vocational Interest Inventory (SAVII)
54	South African Individual Scale for the Blind (SAISB)
55	South African Wechsler Adult Intelligence Scale (SAWAIS)(C/35)
56	Survey of Study Habits and Attitudes (SSHA)
57	TAT cards (Murray)
58	Test for 5-6 year olds
59	Thomas International
60	Values Scale (VS)
61	Wechsler Intelligence Scale for Children (WISC-III)
62	Wechsler Adult Intelligence Scale -Revised (WAIS-R)

**Table 3.5**  
**International tests used by psychology practitioners in South Africa but not adapted/standardized for this context**

Name of test	Constructs/purpose
Advanced Progressive Matrices by J C Raven. 1962.	Assesses the mental ability of people by means of nonverbal abstract reasoning tasks. Used for school and vocational counseling and placement and for research.
Beck Depression and Hopelessness Scale by A T Beck. 1988.	Assesses level of depression and the possibility of suicide. Used for clinical assessment and diagnosis.
Belbin / E-Interlace Electronic Inventories and Team Role Feedback Reports by R M Belbin. 1988.	Assesses team roles through the Self-Perception Inventory. South African Distributors are Performance Capacity Inc. in Cape Town.
Bender Visual Motor Gestalt Test by L Bender. 1938.	Assesses the visual-motor functions of individuals: Ages 3-adult. Also used to evaluate developmental problems in children, learning disabilities, retardation, psychosis and neuropsychological impairment.
California Personality Inventory (CPI) by H G Gough. 1975.	Assesses normal adult personality and is an aid to educational, clinical, counseling and vocational choice.
Culture Fair Series: Scales 1, 2 and 3 by R Cattell and A K S Cattell. 1961.	Measures individual intelligence for a wide range of ages without, as much as possible, the influence of verbal fluency, cultural climate, and educational level. Identifies learning and emotional problems. Used in employee selection and placement, special education decisions, and college, career, and vocational counseling.
Computer Programmer Aptitude Battery (CPAB) by J M Palormo. 1974.	Measures potential for success in the computer programming field. Used to identify people with the aptitude for computer programming.
Columbia Mental Maturity Scale (CMMS) by B B Burgemeister, L H Blum and I Lorge. 1972.	Assesses mental ability. Used with preschoolers, kindergartners, or children with physical or verbal impairments.
The Cognitive Assessment System, develop by J A Naglieri and J P Das. 1997.	The CAS is an assessment battery designed to evaluate cognitive processing. Planning, Attention, Simultaneous and Successive (PASS) cognitive processes of individuals between the ages of 5 and 17 years.
Grassi Block Substitution Test for Measuring Organic Brain Pathology by J R Grassi. 1970.	Designed to demonstrate impairment of concrete and abstract performance due to organic brain dysfunction. Especially useful to detect early and minimal organic changes so that defects may be diagnosed in early stages of the disease process.
Kuder Occupational Interest Survey. 1971.	Assesses interests. Up-dated profiles can be bought through the internet.
Griffiths Scales of Mental Development (Griffiths, 1974).	Developmental assessment battery for infants and children up to 7 years 11 months.
Leiter International Performance Scale (LIPS) by R G Leiter and G Arthur. 1982.	Measures intelligence and mental age for individuals aged 2-18, including the deaf, cerebral palsied, non-English-speaking and culturally disadvantaged.
Luria-Nebraska Neuropsychological Battery by C J Golden, A D Purish, and T A Hammeke. 1980.	Assesses a broad range of neuropsychological functions for individuals of ages 15 and older. Used to diagnose specific neuropsychological dysfunctions/impairment and to select and assess rehabilitation programs.
Millon Clinical Multiaxial Inventory by T Millon. 1983.	Diagnoses Axis 1 and 2 conditions (personality disorders and more severe clinical scales) through a co-morbidity approach in adults. Used to screen individuals who may require more intensive clinical evaluation and treatment.

**Table 3.5 ( ... continued)**  
**International tests used by psychology practitioners in South Africa but not adapted/standardized for this context**

Name of test	Constructs/purpose
Minnesota Multiphasic Personality Inventory by S R Hatheway and C McKinley. 1951.	Assesses individual personality. Used for clinical diagnosis and research related to psychopathology.
Myers-Briggs Type indicator (MBTI) by I Briggs Myers and Katharine C Briggs. 1975.	Measures personality dispositions and interests based on Jung's theory of types. Used in personal, vocational, and marital counseling, executive development programs and personality research.
G Neale Analysis of Reading Abilities by M D Neale. 1957.	Assesses reading and spelling standard of children ages 6-12 years.
Neo PI-R Five Factor Personality Inventory [Questionnaire] and the NEO Five-Factor Inventory (NEO-FFI) Costa & McCrae, revised 1992).	Measures five domains/factors of personality (Neuroticism, Extraversion, Openness, Agreeableness and Conscientiousness) and six facets for each factor. Also in computerized report form.
Rey Complex Figure Test (ROCF) and Recognition Trial by J E Meyers and K R Meyers. 1941/1944.	The ROCF is a complex test taps visual-motor functioning, planning and memory. The newly developed Recognition trial measures recognition memory for the elements of the ROCF and assesses the respondent's ability to use cues to retrieve information.
Rothwell Miller Interest Blank by J W Rothwell and K M Miller. 1958.	Assesses the vocational interests of secondary school students and adults. Used for vocational and educational guidance.
Snijders-Oomen (SSON) by Snijders and Snijders. 1966.	Non-verbal intelligence scale for assessment of deaf children. Intelligence is defined in terms of learning ability, the extent to which children could profit from instruction at school.
Diagnostic and Attainment Testing by F J Schonell and F E Schonell. 1960. 4 <sup>th</sup> Edition. Oliver and Boyd, Edinburgh.	Tests of reading, spelling and arithmetic.
Stroop Color and Word Test by C Golden. 1978.	Evaluates personality, cognition, stress response, psychiatric disorders, and other psychological phenomena. Used to differentiate normal, non-brain-damaged psychiatric from brain-damaged subjects.
Tests for Auditory-Perception Skills (TAP) by M F Gardner.	Assesses the auditory functions of children. Used by psychologists, speech pathologists, language specialists, learning specialists, diagnosticians, and other professionals for ages 4-12 years old.
Taylor Johnson Temperament Analysis by R M Taylor and L P Morrison. 1971.	Provides a clinical assessment of personality. Used for premarital, marital and family counseling and educational and vocational guidance.
Torrance Tests of Creative Thinking by (TTCT) by E P Torrance. 1974.	Assesses the ability to visualize and transform words, meanings, and patterns. Used to identify gifted, creative individual.
Scenotest by G Von Staabs. 1948. No publishing information.	Test used with children aged 5 to 13. A revised version is available for use with adolescents. The test is used as a diagnostic test to explore emotional difficulties.
Wisconsin Card Sorting Test (WCST) by D A Grant and E A Berg. 1981.	Assesses perseveration and abstract thinking. Used for neuropsychological assessment of individuals suspected of having brain lesions involving frontal lobes. When used in conjunction with more comprehensive ability testing, it can help discriminate frontal from non-frontal lesions.
Wechsler Intelligence Scale for Children (WISC-III) by D Wechsler. 3 <sup>rd</sup> Edition. 1991.	Assesses intellectual functioning in children aged 7 to 16 years.



5

**FOCUS GROUPS AS A  
METHOD IN  
QUALITATIVE RESEARCH IN  
A NEEDS ASSESSMENT OF  
PSYCHOLOGICAL TEST USE**

**Dorethea Herbst**

**27 AND 28 JULY 2004  
BIRCHWOOD CONFERENCE CENTRE**

Project

TO OBTAIN DATA FROM PRACTITIONERS THAT COULD BE INTEGRATED WITH THE RESULTS OF:

- **A main survey and**
- **Individual interviews with stakeholders and**
- ***Conducting focus groups served to enrich as well as enhance the trustworthiness and validity of the findings of the overall project.***

## Focus groups

- To give practitioners the opportunity to interact and express needs, opinions and interests related to test use
- Allows the moderator to probe
- High face validity
- Relatively low cost
- Provide speedy results
- Increase sample size



Questions for the discussions were prompted by the questions posed in the mail survey in order to enrich the quantitative information obtained from the survey questionnaire

Questions served as a guideline to focus attention on aims with the discussion and overall project goal.

- **Networking started at the PsysSA Conference (2003)**
- **Familiar with participants**
- **The facilitators invited practitioners to participate.**
- **This ensured objectivity and greater validity of the results.**

**• Registered as psychologists with the Health Professions Council of South Africa (HPCSA)**

**• Work in private practice**

**• Lecturers at universities**

**• Students in internships**

# ASAP FOR SUBURBAN

- Pretoria
- Johannesburg
- Bloemfontein
- Durban
- Cape Town

## PROCEDURES

- Participants were introduced by highlighting the aims of the project
- Signed consent was requested
- Confidential participation
- Audio/video tapes were used for back-up

- Notes were transcribed and typed
- Uncertainties were clarified by follow-up using electronic mail or personal calls to facilitators
- Files created for each group were merged into one large document (not suitable for Atlas-ti)
- Information were then grouped per question
- Some questions overlapped and were grouped together.

## RESUMING JUDICIAL

- **A list of standardized measures for use in South Africa**
- **A list with all international tests mentioned during discussions**
- **A list of needs were compiled related to tests and use of tests**

- From the list of needs themes and sub-themes emerged
- Strengths and weaknesses of tests were highlighted
- Suggestions for a new agenda could be compiled
- Quotations were included verbatim



- **Tests add value if certain conditions are met**
- **Tests are used for various purposes**
- **Test are used in various settings**
- **Types of tests used**
- **Test development and revision issues (language, special groups)**
- **Test related needs**

## Summary of findings

- Different role players were identified
- Practitioners confirmed that they used tests in everyday practice
- Using tests adds value in their service to the public
- Tests are used for various purposes
- Test use is linked to training

- **Local and international tests are used in practice**
- **Computerized tests**
- **Updating and development of new tests is important**
- **Needs of practitioners are related to their work environment**

Summary (continued)

- **Need for alternative assessment methodologies was expressed, as well as development of tests for test-takers with special needs**
- **Practitioners are committed to ethical use of tests**
- **Practitioners and important role players should co-operate in future**

# QUALITIES OF A GOOD SUBSTANTIVE

## MODERATOR (SPROUEN)

- Detailed planning is required
- Manage recruitment process
- Don't prejudge participants
- Moderator required to be objective and to have expertise
- No guarantee
- Optimal number of groups (10 - 12)
- Participants should be thoroughly briefed about research objectives
- Objective conclusions

## QUALITY ASSURANCE

- **Recruitment limitations**
- **Project limitations**
- **Research expertise**

## PROBLEMS ENCOUNTERED

- One hour was too short - afterwards
- Representation in control of facilitator
- End of year limited some from participating (heavy work schedule)
- Lack of participation also due to limited time away from practice
- Not all were available on the same date and time
- Groups in different cities/venues requested the same date.