

Interview 1 Fieldnotes

key:
* Observation,
♥ key things to remember / reflect on

Personal notes / Reflections

Date: 11 May 2022 Time: 12:00 - 12:45

Method: Online (zoom) interview

Demographic information: Mr E. M.

• Gender: [REDACTED]

• Race: [REDACTED]

• Language Group: [REDACTED]

• Age: 32 years

• Years of registration: [REDACTED] years of reg.

• Setting of employment / work field:

- Full time, based at [REDACTED], dep, anxiety, relational probs - aftermath of Covid, adjustment.

- Weekends private practice - assessment, therapy.

Participant did not turn on camera which made observation impossible

Multi-perspective due to varying demographics

Rapport building:

- Person orientated interviewing
- Task orientated interview.

Consent, Process explained

Interview process:

- ①
 - SSATs more frequently
 - Limited use - twice
 - Started private practice (use WAS at uni)
 - Very expensive, rent it for R540 waiting list to use (affects clients) be honest.

Cost? Availability?

WAS is standardised, uses WAS-III because of this

Negative impact on client - demand cannot be met due to cost.

So what do you do?

② Use JSATs, SSATs, WISC.

- Prefer: IEB - WISC is a requirement
- Demography is NB type of school English (1st/2nd lang), home lang
- Had a case where he needed to discontinue - discontinue after 3rd test

IEB requires WISC but is this fair for assess? → Relevance to context

Many factors to consider before use = speaks to relevance for All *

- ↳ Verbal - not understanding instructions
- not lang. barrier

* Interruption - someone at door

- ↳ Created anxiety: "Too many" stuff
- over stimulation = Anxiety.

Administration should be done in such a manner that client is not exposed to all materials but I can see how it may make a 'new' psych anxious.

- Clinical judgement NB - need to be ethical

③ 2 based - [redacted] (townships) Mabok township schools

Working with client demo that makes up a lot of SA child population ∴ experience with validity *

- referred by district / social worker
- Private school in townships (better resources not equipped enough)

Uni - [redacted], R, concessions, those who want to apply (WAS)

④ - Can cause anxiety

- Positive

- Not as intimidating - pictures
- Recent lang
- Updated

- Negative

- Takes longer - tired (kids + you)
- Disc.
- Stopwatch.
- Organised.

Had greater general validity but may still lack specific relevance.

- ADHD is an issue, snatching

- Slow pace, put away stimulus book.

Discussed Demographics

- ~~Red~~ Restlessness

= Race often

- Scoring takes a lot of time

- A lot of work - tedious

• WISC disadvantages township school

As before - demo of SA + relevance

• WIAS - SA standardisation

• Want that for the WISC.

7/

8. Investigate the words (verbal) words

Long as issue

Pictures (limited frame of reference) SA context

e.g. locker - daily exposure

Was using IV now V - dependent on what is available

Too expensive (9 of them who can't afford it)

Cost!

IV vs. V.

- Added subtests.
- Still measuring IQ.
- IV still sufficient.

GAP in SSATs to WISC-IV : not automated

more appropriate
as more recent.

COVID made it difficult

- Social distances
 - Sharing
 - Sanitising
- } delay, longer assessment.

Therapy online, limited face-to-face.
↳ feedback over zoom.

Personal Reflection

This interview highlighted many elements I had not previously considered. I knew that the test was expensive but did not realise just how few Ed psych cannot buy it. Specifically in this interview it was highlighted by the participant that he along with 9 other African Ed psychs are unable to afford the test. This speaks to the great issue of SES and even though there are now funds they might be utilised elsewhere more needed. In addition to this challenge is that it is compounded by availability when renting. Cost is said to negatively impact the client because they are not able to do the assessments. It would need to be considered how much of our population lives in circumstances that would not afford these assessment opportunities (possibly seek stats). The new cost of living would also need to be considered. This participant also highlighted challenges assessors themselves may face which I had not

previously considered.

Clinical judgement was highlighted as important as the WISC is not a stand alone measure and can be detrimental to the client's overall achievement.

Positives included the use of pictures, recent language and updated Calbeit international norms. Improvements suggested appropriate pictures (so while they are nice and allow for engagement they may lack appropriateness) \Rightarrow this speaks to the issue of exposure. I felt I may have asked some leading questions after discussing how certain SES may be synonymous with certain racial groups as identified in my research but participant did not over-engage with this.

Interview 2 Fieldnotes

Personal notes / reflections

Date: 20 May 2022 Time: 9:00-

Method: Online (zoom) interview

Demographic information: [REDACTED]

- > Gender: [REDACTED]
- > Race: [REDACTED]
- > Language Group: [REDACTED]
- > Age: [REDACTED]
- > Years of registration: [REDACTED] years
- > Setting of employment/work field:
[REDACTED]

Intern-school (lived)

Private practice at home.

Area supported by school.

Diverse schools \Rightarrow very diverse.

"Diepstoot" "Cosmos City" (Pro Bond)

Also private school!

works with affluent
(mostly) learners
from schools that
are well resourced

Does see clients from
lesser privileged
areas
 \rightarrow ask about if WISC
is same for them
& the richer kids

Interview process

1. All the time.

Subject + Vocational + Psychoed

Exclusively WISC (because of area)

2. SSATs - ~~set~~ scores were too high
not in relation to academic
achievement.

Due to exposure.

Antithesis of previous

Use of lang too high

*
States "because of area"
= WISC more suited
to certain demographics

SSATs also lacks
reliability possibly because
of outdated info?

Exposure is key.

lang as an issue

Lang is everything
Feel engaged + challenged
Appropriate for setting.

Issues - diversity and exposure
Some pictures are inappropriate for
"Postage Stamp" - prejudicial - exposure
question.

4. Positive

- Most - Intel test + Clinical tool

• Emotional intel (frustration)

• Style of learning

• Fine motor

• Manner

• Hearing / manners

• Perseverance

- IQ is the objective outcome.

Neg.

- PS - relies on Vis-motor skills

→ may discriminate ⇒ not necessarily
checking the right thing

Eg. - Direct instruction of PS is not the
same as real-life

* Report = even though ⇒ Repetitive test with
clear boundaries.

- Numbers only tell half the story

Lang lacking in representing
"John" "Mary"

If the lang is too
challenging it will negatively
affect scores
→ SA context?

Problematic elements
are diversity + exposure
which are key in SA
need to consider that what
they are exposed to
will differ

* Q3 answered in
Demographic info.

It allows for a lot
of information to
be gathered
∴ Not only does it
measure what it
says it does it
contributes to a larger
image of the client.

Processing speed
may not measure
what it measures because
of other influencing
factors = affecting the
validity + reliability of
the findings

WISC cannot be used
in isolation. It is
a tool in an entire
toolbox that needs
to be used ALONG with
others to create a
comprehensive understanding
of a client.

- I am looking at a much bigger picture
↳ Part of the puzzle.

- Many

- Always allow child to give his best
feel forward. Can motivate

Assess structured

45 min - 1 hr = Chit-chat, downplay
↳ allows when they sit down they aren't
anxious

↳ only put down what you need.

↳ keep it light.

- ADHD — got to do with experience
 - slow the whole process down.
 - work WITH client
 - Give something to play with
↳ write in report.

5. Ad — Enormous as long as appropriate

Not all tests are perfect.

HAVE to use clinical judgement
only for diagnostic purpose. — do not
completely represent the child.

7. Extremely app dep on exposure
Inapp for those with Eng (not HL)
↳ not necessarily SSAS either.
We need to be upfront about the test
used

Standardisation
may limit the
potential of the
child. Rigidity =
anxiety.

Alteration/planning
can be done for
smoother transition
into assessment.
↳ allow for greater
reliability of the
findings

Assessor plays
a major role in
setting the pace
which is something
std instruction does
not account for
⇒ Clinical judgement

Appropriate
— we need to consider
what makes it
appropriate?
Clinical judgement
is key

only part of the
picture

Exposure is so
relevant.

Lang is an issue
and even in exposed
children it may
not be their HL.

* Probably not app to larger demographics

8. Lang, how it is presented (audio)

Diversity (lacking in pictures)

↳ Names (John, Sue)

Eng normed test - limited diversity (ownership)

Personal Reflection:

This interview was hugely informative and highlighted a number of elements that were also seen in the previous interview such as the language used for the test as well as elements in the test such as pictures that more broadly speaks to exposure. Exposure is as diverse as the population itself. Exposure to international things would be largely through media as the use of and access to various devices is linked closely to SES. It was also highlighted that education plays a role in success and it is necessary to consider the education received in less affluent vs. more affluent settings (resources, quality, teachers, etc & support). The test also holds many benefits.

A key statement of this interview was

"No test is perfect"

This interview stood in stark contrast to the previous one in terms of demographics (participant & their clients) & experience

Limited mention was made about cost of the measure, may this have been due to number of years of experience or possibly also speak to the ~~at~~ issue of demographics. This would then have a direct impact of the participants discussion of test availability

Interview 3 Fieldnotes

Date: 21 May 2022

Method: Online (Zoom) Interview

Demographic info

- > Gender: [REDACTED]
- > Race: [REDACTED]
- > Lang Group: [REDACTED]
- > Age: [REDACTED]
- > Years of registration: Reg coun 7: Ed psych [REDACTED]
- > Setting of employment:
 - Station Manager
 - Oversee psychometrics
 - Selection Process
 - Private Practice [REDACTED]

Interview Process:

- 1) Frequently → Supervisor had the WISC.
1st choice - fitted demo (private school [REDACTED]).
Less in Private.

- 2) No preference for test - demographic
 - Affordability (expensive) Rent or buy
↳ demo of child depends on the use of the WISC.
 - Best interest of the child
- = Consider results, compare to class + school and then use SSATIS / WISC.

Demographic of clients worked with again mostly from affluent homes

Use it less in private due to cost

Very expensive - issue of affordability

using the WISC requires careful consideration of demographics + lang

3. Mixed - White
Indicun
Black
Coloured. } Affluent.

• Suits the demo of the school.

4. WISC-IV + V

• "Pennies" → These were exposed
→ contextually relevant to SA

• Many kids would be "gifted" if
compared to SSATs + WISC → norms
questionable.

Exposure is NB
for the use of intel
test and along with
it lang. Works with
affluent children &
pennies might not
be understood.

5-8. Experience + good training is essential
to correct admin

↳ anxiety hasn't been the case.

If used correctly = comforting

↳ use of object / picture
↳ focus point

Clinical training NB
to utilise the test
effectively + correctly

Test can be comforting
to client - use of
objects + pictures create
a focus point for
client.

- So many thing laid out could

• Blocks - kids enjoy.

* ADHD → Unsettled

→ Regular breaks

→ Checking in, Physical activity

Children enjoy elements
such as the blocks

Clinical judgement
necessary to monitor
client + his/her
attention ability.

Issue → Affordability (don't have)

→ Rent

→ Alas someone who shares

→ Many schools won't even buy it

Rent → from another psych.

Mindmusic → never available.

We can rent from others.

Issue → IEB already stipulates they want it

→ IEB want WISC-V not IV

→ Covid getting asses. done was very difficult

Parents afford it is NB *
↳ deparation

Amazing tool (brilliant)

It is trusted - SSATIS is sorely outdated.

More relevant - Than SSATIS - contextually

Works very well with WIAI

Prefer WISC-V (trained in that)

WISC-IV - informal training

↳ similar questions

↳ may have different bell curve.

7. Appropriate for current context

Able to complete on All clients

Ver clear results (ADHD, IOD) - contributed to diagnosis

Affluent context

A good clinical tool

Lang is not as big a barrier in private schools

8 Absolutely → way Qs are asked (ease of understanding) = 11 lang

→ Affordability to be used by GDE

→ Terms adapted

↳ have international students (accent)

Lang not as big a barrier in private schools.

NB WISC-V is required by IEB
- Challenge for both clinician + client
Cost & availability

Parental ability to afford is a major considering factor
↳ Greater Democant afford.

It is a great tool
↳ trusted

more relevant context?

Personal Reflection

The participant, while very friendly and willing to help, had limited experience with the WISC and so did not often elaborate extensively. This made the process rather short yet still informative. This interview corroborated many of the findings from previous interviews in terms of various considerations required when using the WISC (language, ease of understanding, terminology used). Additionally, the cost of the WISC was highlighted as influencing both practitioner and client due to inability to afford it. Something that was highlighted was the use of the WISC-V for accommodations by IEB which may hinder the process of getting these accommodations. Clinical judgement and input was again highlighted as an important element of the assessment process.