#### INTELLIGENCE TESTS

## I. USE OF IQ TESTS

## A. <u>Historically</u>

- 1905 created to identify kids needing remediation
- 1940s & 50s widely given to categorize kids
- 1960s awareness of abuses

### B. <u>Currently</u>

- 1. to diagnose problems
- 2. to rule out IQ problems
- 3. to identify ways to help

NOT to simply place children in classrooms

## To diagnose a learning disability

- 1. normal intelligence (IQ)
- 2. performing below expected level in 1+ subject(s)
  - achievement test

### To diagnose mental retardation (MR)

- 1. subaverage intellectual functioning (IQ < 70)
- 2. poor adaptive behavior skills (e.g., daily living)

# II. CHILD & ADULT IQ TESTS

- A. <u>Stanford-Binet</u> (2-24) 2 hours
  - 15 subtests
  - IQ + other scores
- Pros: 1) Best test for very high/low IQs
  - 2) Wide age span
  - 3) 2 equivalent forms
  - 4) Very good norms
- Cons: 1) lengthy
  - 2) difficult to administer
  - 3) lower examiner reliability
  - 4) norms stop at age 24
- B. 3 Wechsler Tests 1-1.5 hours

WPPSI-R (4-6.5) WISC-III (6-16.5) WAIS-III (16-89)

WASI (brief, ages 2-89)

$$-FSIQ + VIQ + PIQ$$

Pros: 1) Shorter

- 2) Easier to administer
- 3) Most commonly used
- 4) Excellent norms
- 5) Can compare performance across ages/tests

Con: Not as useful for IQ extremes - important for MR

# **IQ** Classifications

130+ Very Superior

Superior

High Average High Average

90-109 Average

80-89 Low Average

70-79 Borderline

≤69 Mentally Retarded

## Wechsler subscales

Verbal: Vocabulary

Information

Similarities

Comprehension

Arithmetic

Digit Span

Performance: Picture Completion

Picture Arrangement

Block Design

Object Assembly

Coding

Mazes

#### III. WECHSLER & THE WAIS-III

## Major changes from WAIS-R

- 1. Updating test items & materials
- 2. Editing to detect biased items
- 3. Lowering floor & raising ceiling
- 4. Raising age ceiling to 89
- 5. Inclusion of homogenous factor scores
- 6. Reduction of importance of speed

## Wechsler's view of intelligence

- a global characteristic (g)
- plus specific abilities
- hierarchical

## WAIS & WAIS-R = 3 IQ scores

- VIQ = language-based
- crystallized intelligence
- PIQ = visual-spatial/motor
- fluid intelligence

Subtests: mean = 10, SD = 3

IQ scores: mean = 100, SD = 15

#### Factor analysis

- incomplete support for VIQ/PIQ
- instead, 3-4 factors

### WAIS-III

- retains FSIQ, VIQ, PIQ
- + 4 index scores

Verbal comprehension

Working memory

Perceptual organization

Processing speed

- index scores mean = 100, sd = 15

## WAIS-III norms

- 2,450 "normal" individuals
- minority populations "oversampled"
  - for item analysis
  - to identify biases
  - expert & lay minority consultants examined each item
  - problem items revised or deleted
- the Flyn Effect scores on a given IQ test tend to drift higher over time
  - more education

#### IV. LEVELS OF MR

Mild (55-70) - Educable Moderate (35-55) - Trainable Severe (20-35) Profound (< 20/25)

# Outcomes worse than nonretarded peers

- lower incomes
- worse housing
- worse social adjustment
- greater dependency

## Better than stereotypes

- majority of males work
- most in skilled labor/retail
- generally self-supporting
- most married
- most felt satisfaction

# Severe & Profound

- institutionalization
- very small percentage

## VI. MENTALLY GIFTED

## Findings as kids

- weighed more at birth
- walked & talked sooner
- puberty earlier/health generally better
- better adjusted emotionally/more mature
- leaders in classroom

### Findings as adults

- fewer psychological & health problems
- higher satisfaction with marriage & sex
- many college grads with notable careers

# Why better in all domains?

- IQ/g
- Home:

higher parent education
more stimulating environment
fewer divorced parents