Chapter 3

Intelligence Tests

- **Primary functions**
  - Obtain intelligence quotient (IQ), or estimate of current level of cognitive functioning
  - Provide clinical data
- **Wechsler scales (WAIS V)**
  - Used for ages 16 and older
- **Stanford-Binet scales**
  - Used for ages 2 to 85

Criticisms of Intelligence Tests

- Fail to consider the effects of culture, poverty, discrimination, and oppression
- Do not consider multidimensional attributes of intelligence
- Have a poor level of predictive validity
  - Do not accurately predict future behaviors or achievement
  - Motivation and work ethic may matter more

Tests for Cognitive Impairment

- **Bender-Gestalt Visual-Motor Test**
  - Involves copying geometric designs
- **Halstead-Reitan Neuropsychology Test Battery**
  - Can provide valuable information about the type and location of the damage
    - Differentiates patients with brain damage

Neurological Tests

- Allows noninvasive visualizations of brain structures
- Electroencephalograph (EEG)
- Computerized axial tomography (CT)
- Magnetic resonance imaging (MRI)
  - Functional MRI (fMRI)
  - Diffusion tensor imaging (DTI)
- Magnetoencephalography (MEG)
- Positron emission tomography (PET)

Diagnosing Mental Disorders

- Psychiatric classification system
  - Similar to a catalogue, with detailed descriptions of each disorder
    - Patterns of behavior are distinctly different
  - Each category accommodates symptom variations