

The Use of Psychological Assessments in the 'New Normal': A Scoping Review

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Abstract: Assessment is an integral part of the field of Psychology. It plays an important role in the knowledge, practice and research in the field. However, psychological assessment has undergone a dynamic change since the pandemic. The aim of this study is to understand these changes, emerging trends and challenges in the area of psychological assessment. Secondary data has been collected and the method of scoping review has been used. The results show that the new psychological assessments have been developed mainly to measure the psychosocial impact of COVID-19. The trend is towards remote and computerized assessment that has given rise to ethical issues. It has also raised questions on the psychometric properties of the adapted assessment. The issues on test administration and interpretation through tele-assessment is a new phenomenon. However, the unavailability of professional guidelines is debatable. Hence, the field is facing new challenges. The findings of the study can help in re-structuring the field of psychological assessment.

Keywords: Psychological assessment, remote, tele-assessment, psychometric properties, scoping review

Introduction

Assessment is an integral part of knowledge, practice and research in the various fields of psychology. Before COVID-19, the test administration, scoring and interpretation of the assessment tools were standardized in the face-to-face format. Appropriate norms and psychometric properties in accordance with the existing ethical guidelines were established. However, since the COVID –19 pandemic the field of psychological assessment has undergone a dynamic change. COVID-19 brought new protocols such as isolation and maintaining physical distance. This changed the mode of test administration and interpretation of the tools. The face-to-face format was no longer feasible for psychological assessment. It was replaced by remote or computerized assessment which meant that any kind of assessment could be administered and interpreted via online platforms such as zoom, telephone, e-mail and web-based tools only. It could be conducted in synchronous or asynchronous form. While tele-assessment and assessment by video conferencing was at an early stage of development as a clinical tool, it certainly gained prominence during the COVID-19 pandemic.

Tele-assessment is a sub-field of a broader field of telehealth. Medical Council of India & National Institution for Transforming India Aayog (2020) states, “. . . telehealth is a broader term of use of technology for health and health related services including telemedicine” and defines telehealth as, “The delivery and facilitation of health and health-related services including medical care, provider and patient education, health information services, and self-care via telecommunications and digital communication technologies.”

The Ministry of Health and Family Welfare and NITI Aayog have released the “Telemedicine Practice Guidelines” which has been included in the Indian Medical Council Regulations and is applicable to the entire country. The word telemedicine is derived from the Greek word “tele” meaning “distance” and the

Latin word, “mederi” meaning “to heal.” World Health Organization (as cited in Medical Council of India & NITI Aayog, 2020, p. 10) defines telemedicine as, “The delivery of health-care services, where distance is a critical factor, by all health-care professionals using information and communications technologies for the exchange of valid information for diagnosis, treatment and prevention of disease and injuries, research and evaluation and the continuing education of health-care workers, with the aim of advancing the health of individuals and communities.” In general, telemedicine is used in remote clinical service delivered by a Registered medical practitioner.

This led further to the development of 'Telepsychiatry Operational Guidelines 2020' (Bada Math et al., 2020). These guidelines are applicable to the field of mental health and can be followed by psychologists. Telehealth in the mental health field encompasses both therapy and assessment. Krach, Paskiewicz, & Monk (2020) define tele-assessment as “diagnostic, psychological assessment procedures administered to (an) individual(s) who is not in the same room as the examiner through the use of telecommunication technologies.” Tele-assessment was used sparingly before COVID-19 pandemic. It was mainly used for rural, long-distance or home-bound clients (Perle & Nierenberg, 2013) who had difficulty in accessing the traditional assessment services. Hence, there is an absence of substantial data or research on the efficacy of psychological tele-assessment. National Association of School Psychologists (2017) states that “this is the least explored area of service in telehealth” (pg. 7). Wright (2020) also states, “Most current and emerging telehealth guidelines largely focus on psychotherapy and, as such, tele-assessment guidance is necessary.”

Psychological assessments are of different types such as verbal, non-verbal and performance tests. Some of these assessments such as Vineland Social Maturity Scale are administered by using interviews and observation. Interviews

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can be conducted remotely though there are certain limitations to the observation method. Similarly, the performance tests where the material is manipulated such as blocks and pictures in Bhatia Battery intelligence tests or block design in Wechsler tests are cumbersome to adapt to be administered remotely. For instance, The Wechsler Adult Intelligence Scale–Fourth Edition (WAIS–IV; Wechsler, 2008) can be administered in a telepractice context by using digital tools from Q-global that allow stimulus to be shown to the examinee in another location via the screen-sharing features of teleconferencing software. The effectiveness of such innovations remains to be evaluated scientifically. Another limitation is found in psychophysics experiments where instruments such as aesthesiometer and Whipple box are used. Wright (2020) states, “. . . multiple types of assessment, including cognitive, neuropsychological and autism assessment, . . . have historically relied on tasks and interpersonal procedures that require in-person interaction, such as the manipulation of physical materials, standardized interactions between assessor and client, and clinical observations of the person in a physical environment.” Hence, there are limitations in administering the assessments remotely.

This has given rise to ethical concerns. The dilemma is whether the American Psychological Association's ethical principles of beneficence, nonmaleficence, fidelity, integrity and justice are being followed in this crisis period. There are numerous ethical concerns that have arisen such as test security, informed consent, testing environment or conditions for constancy of test administration, appropriateness of test scoring and interpretation, competence and respecting client's rights.

Thus, it has become important to understand and gain insight into the emerging phenomenon of tele-assessment as it is being implemented since the pandemic. The aim of this research study is: (a) to understand the technical, legal and ethical issues arising from the transition and implementation from face-to-face to tele-assessment; (b) the status of tele-assessment in India; (c) propose recommendations.

Method

The method of scoping review of literature was conducted to meet the objectives of the study. The framework given by Arksey and O'Malley (2005) was followed to do the scoping review. Following the framework, the study was done in following stages:

a. “Identifying the research question”. The research questions for the study were: (a) What are the technical issues in adapting from face-to-face to tele-assessment for the community? (b) What are the legal and ethical issues in adapting from face-to-face to tele-assessment for the community? (c) What is the status of tele-assessment in India? The questions were developed on the basis of the 'PCC

(Population (or participants)/Concept/Context) framework given by Joanna Briggs Institute (2020)

b. “Identifying relevant studies”. Literature search was conducted using Google and Google Scholar. Reference lists were checked. On the basis of this search, book chapters and professional guidelines on tele-assessment were also included.

Table 1

Search terms

Concept	Search terms
Psychological Assessment 'New Normal'	“Psychological assessments during COVID-19”, “psychological assessment during COVID-19 in India”, “tele-psychology”, “tele-assessment”, “tele-assessment in India”, “professional guidelines”

Table 2

Inclusion and exclusion criteria for selecting the literature

Inclusion Criteria	Exclusion Criteria
Journal research articles	Conference proceedings
Professional / Ethical guidelines	Abstracts
Book Chapter	Literature in other languages
Literature in English Language	

c. “Study selection”: Figure 1 shows the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses; Page et al., 2021) flowchart for the scoping review in this research study.

Figure 1

PRISMA Flowchart



Source: Adapted from Page et al. (2021).

Results

Stage four of the scoping review framework which is 'charting the data' (Arksey & O'Malley, 2005) was conducted in this section

Table 3

Research Sample

S. No.	Author (year)	Hypothesis / research questions / focus	Methodology	Data Analysis	Results
1.	Bada Math & Manjunatha (2020)	Mental health issues in the “acute phase” of COVID-19 outbreak	Conceptual	-	Case identification by screening instruments, questions, referral, using community resources for capacity building
2.	Bloch, Maril, & Kavé, (2021)	Remote neuropsychological assessment in Israel and propose guidelines	Conceptual	Review	Recommendations for remote testing; decision making model for remote testing of the referrals.
3.	Cortez et al. (2020)	Brief review on the importance and advantages of using empirically valid tools to address mental health issues	Conceptual	Review	Development and advantages of empirically valid tools during the COVID-19 pandemic
4.	Farmer et al. (2020)	Tele Assessment of children on achievement and intelligence tests	Conceptual	Review	Remote assessment, construct validity, Factors as “environment, culture, equity and social justice”; implications
5.	Mangalesh, Dudani & Dave (2021)	Assess the mental health status of Indian medical students during the COVID-19 pandemic	Survey using GHQ-28	Chi-square, Mann-Whitney, Kruskal-Wallis test	About 60% of the students have mental health problems.
6.	Manickam (2020)	Ethical guidelines for psychologists in India	Conceptual	–	ICMR ethical guidelines in COVID-19
7.	National Association of School Psychologists (2020)	Recommendations for “virtual service delivery”	Conceptual	–	Guidelines for one component – “Assessment / Evaluation”
8.	Pandit, Salian, & Salian (2021)	Psychological distress due to pandemic during the lockdown	Quantitative, community based cross-sectional study; Online survey	Descriptive statistics and multiple logistic regression analysis	68% of the sample has psychological distress

S. No.	Author (year)	Hypothesis / research questions / focus	Methodology	Data Analysis	Results
9.	Salam, Bhat, Chakraborty & Acharya (2020)	To assess the knowledge, attitude, practices and psychological impact of COVID-19	Cross-sectional study; online survey; questionnaire for knowledge, attitude and practice, DASS-21	Mean, correlation,	Knowledge score was high; positive attitude and good practices; about 35% of the respondents had a psychological impact.
10.	Society for Personality Assessment	Assessment of personality and psychopathology through tele-assessment methodologies	conceptual	–	Multi-method assessment; accurate-clinical interview; structured clinical interview retains reliability and validity in tele-assessment; equivalence for self-report inventories; collateral report measures; difficulties in administering performance tests as Rorschach
11.	Stifel (2020)	Psychoeducational assessment by school psychologists			Ethical and legal guidelines to conduct valid psychoeducational assessments in schools; guidelines for special education
12.	Wilson et al. (2020)	Assess the prevalence and predictors of stress, depressive and anxiety symptoms among healthcare workers in India.	Cross-sectional, online survey among healthcare workers. Tools used were GAD-7, PHQ-9, PSS-10	Descriptive statistics - frequency, percentage, mean, SD; logistic regression	Depressive and anxiety symptoms were more than stress symptoms.
13.	Wright et al. (2020)	Psychological tele-assessment	Conceptual	–	Given six principles

Table 3 shows the sample of the research study. According to PRISMA shown in Figure 1, thirteen articles were finally selected from a total of fifty articles. Nine articles are conceptual and four articles are based on quantitative methods.

One article focuses on neuropsychological testing (Bloch, Maril, & Kavè, 2021). Two articles focus on assessment in children (Farmer et al., 2020; Stifel, 2020). One article gives a review of empirically valid tests during COVID-19 (Cortez et al., 2020). Five articles focus on psychological assessment in the Indian context (Bada Math & Manjunatha, 2020; Mangalesh, Dudani & Dave, 2021; Pandit, Salian, & Salian, 2021; Salam, et al., 2020; Wilson et al., 2020).

There are four ethical guidelines that have been reviewed (Wright et al., 2020; Society for Personality Assessment; National Association of School Psychologists, 2020; Manickam, 2020). The ethical issues highlighted are tele-assessment of Rorschach, construct-irrelevant error for performance-based personality and psychopathology measures, test security, statistical considerations in scoring and interpretation, simulating the conditions in remote assessment for constancy of administration procedures, equivalence of testing in remote and face-to-face format, clients' level of technology literacy and mentioning the alterations in the psychological report.

Discussion

The aim of this research study is: (a) to understand the technical, legal and ethical issues arising from the transition and implementation from face-to-face to tele-assessment; (b) the status of tele-assessment in India; (c) to propose recommendations. The findings from the results for the research questions are discussed in this section.

The first question is (a) What are the technical issues in adapting from face-to-face to tele-assessment for the community? When tests are adapted from face-to-face administration to tele-assessment it is known as adapted tele-assessment. Krach et al. (2020) states that "adapted tele-assessment" is the administration using telecommunication technology of tests that were standardized for face-to-face administration." In the process there are psychometric errors. The norms, reliability and validity that has been developed for face-to-face test administration is absent for tele-assessment administration. Hence the results and the interpretation cannot be generalized with accuracy to the clients.

There are other issues related to the administration from face-to-face to tele-assessment. In face-to-face mode, tests are administered in a structured setting. However, in tele-assessment the setting can be informal. This can have an effect on the client's responses on the test. It is very difficult to control the environment of test administration in tele-assessment and may have an effect on contextual validity (Stifel et al. & Farmer et al., 2020). Wright (2020) has suggested the use of 'remote audio-visual monitoring' of the test administration.

The familiarity with the telecommunication technology is an important factor for both the client as well as the psychologist.

This can be a challenge to certain clients, such as those who may be from lower socio-economic status or do not have access to the technology. At the same time, the psychologist should be trained in administering the test via tele-assessment. Cultural factors can determine communication patterns in tele-assessment (Farmer et al., 2020).

Apart from the technical issues there are ethical and legal issues in tele-assessment as well as issues in test security. The informed consent form provided to the testee should state the limitations of the applicability and accuracy of results obtained through tele-assessment (Bloch, Maril, & Kavè, 2021). The presence or absence of parents is another debatable issue as it might hamper the constancy of conditions while administering tests remotely on children (Farmer et al., 2020). Further, there can be violation of copyright on sharing the test material remotely. This can be a legal issue. Also, the question about how much the results can be acceptable in forensic settings deserves attention.

While research pertaining to generic tele-assessment is already meagre (National Association of School Psychologists, 2017), when it comes to studies exploring specific areas of adapted tele-assessment, it becomes negligible (Wright, 2020). It is important to establish psychometric equivalency of face-to-face tests and adapted tele-assessment. This points out that more research is needed in this area. Reliability, validity and norms have to be determined for adapted tele-assessment.

Professional bodies in various countries such as Indian Council of Medical Research, National Association of School Psychologists, American Psychological Association and Society for Personality Assessment have issued new guidelines on tele-assessment. The Society of Personality Assessment, for instance, recommends multi-method assessment and has stated that there is equivalency for interviews, self-reports and structured clinical interviews. However, further research needs to be done for performance tests such as Rorschach and Thematic Apperception Test. Wright et al. (2020) have given six principles for tele-assessment. These principles are test security, appropriate substitutions, maintaining data quality and widening "confidence-intervals". Hence, these guidelines can help in addressing the legal and ethical issues. Bornstein (2017) also recommends the use of a multi-method approach and clinical expertise to overcome the margin of error.

The second research question is about the status of tele-assessment in India. Results show that it is at the preliminary stage. Most of the research studies are surveys conducted to assess community health using psychological tests (Mangalesh et al., 2021; Pandit et al., 2021; Wilson et al., 2020). They are generally used for screening purposes (Bada Math & Manjunatha, 2020; Salam et al., 2020).

A few research studies have used experimental designs to

compare mental health and well-being before and after COVID-19. Kumari (2020) in her study used a pre-post design to assess stress in adolescents. The objectives of the study were to compare the stress level in adolescents before and after lockdown and know the impact of gender on stress level. The sample was selected randomly. General Health Questionnaire-12 (GHQ-12) was used as a screening measure. Socio-demographic data was collected and 'Student Stress Scale' (SSS) was used. In the post-test, the tool was administered online. Results showed a significant impact of lockdown on the stress level of adolescents. Females felt more stress in pre and post lockdown.

Fernandes et al. (2020) examined the impact of lockdown on internet use, gaming addiction and COVID-19 worries in adolescents before and after the lockdown in India, Indonesia, Malaysia, Mexico, Philippines and UK. The data was collected by using online questionnaires to measure depression, internet addiction, use of social media, escapism, loneliness, gaming addiction and self-esteem. Results showed that COVID-19 had a significant impact on internet use and psychological well-being of the adolescents across all countries.

In the above research studies, the measures were administered online. Globally, assessments have been developed to measure the psychosocial impact of COVID-19 (Cortez et al., 2020). Guidelines on tele-assessment have been given by ICMR (Manickam, 2020). Manickam (2020) have pointed out some important ethical issues such as confidentiality, copyright issues, physical distance and use of PPE in rapport formation and empathy, care in interpreting the results in the absence of norms for tests conducted using telepsychology. This shows that more in-depth research is required to develop and apply tele-assessment in psychology and mental health in India.

The third research objective aims at proposing recommendations for the effective use of tele-assessment. The recommendations are as follows:

- i. Guidelines for tele-assessment have to be revised at each stage from rapport formation, test administration, conduction, scoring, interpretation and communication to the client.
- ii. Greater awareness about establishing rapport via telecommunication should be developed; tele-assessment should be explained in the informed consent; and instructions should be communicated properly so that they are understood by the participant.
- iii. The environment in which the subject is taking the assessment should be monitored properly and it must be ensured that the test is completed by the participant without any disturbances. Technology similar to Any Desk can be used for remote control by the client. Research can also focus on developing computer-simulated virtual reality environments for conducting assessments.

- iv. While conducting the assessment an appropriate substitution can be made for the sub-tests, for e.g., an alternative verbal test can be used for a performance sub-test or more questions can be asked in the absence of non-verbal cues. However, the substitution should measure the same construct.
- v. Margin of confidence interval can be increased and the margin of error should be taken into consideration while scoring and interpreting the obtained data. Tele-assessment alterations should be mentioned in report-writing.
- vi. Artificial intelligence technology can be used in conducting and scoring the assessments.
- vii. Research should be undertaken to determine the psychometric equivalence and norms of the verbal, non-verbal, performance and projective tests from face-to-face to remote assessment.
- viii. Ethical concerns such as test security, confidentiality, informed consent, psychometric equivalency and professional competence; as well as legal concerns such as copyright issues and testimony in forensic settings must be addressed.
- ix. Extraneous factors such as technology literacy of the participants, diversity, internet connection and accessibility need to be considered in tele-assessment.
- x. Further research and guidelines are required for using tele-assessment with children and differently abled populations.

Thus, the above recommendations would aid in transitioning towards tele-assessment and thus adapting to tele-medicine in psychology and mental health.

Conclusion

The field of psychological assessment is at a historical stage and it will be redefined. The present study has highlighted the technical, legal and ethical issues in tele-assessment and given certain recommendations. It is important to be aware about re-establishing psychometric equivalency, test security, informed consent, test administration and interpretation guidelines while adapting to tele-assessment. Though the developed countries are ahead in doing research in this area, still a mammoth task awaits the field of psychology.

The limitation of the study is that it has used secondary data. Further research can be conducted with primary data. More data is required for understanding tele-assessment for performance tests and non-standardized assessment methods. Thus, more in-depth research is needed for establishing the field of psychological tele-assessment.

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