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# Trends. The EgyptAir 990 Crash: A Misconception about Psychological Screening

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There has been a common, publicly promulgated misconception about psychological screening of pilots and other aircrew members in the aftermath of the EgyptAir 990 crash. Some psychologists have stated that psychological tests have "a strong record of detecting signs of depression or agitation" that could pose safety problems. Thus, they continue, pilots and others should take such tests every six months.

However, these tests are validated largely through accuracy rates in differentiating between groups of depressed and non-depressed individuals. The accuracy rates can take quite a tumble or even be largely irrelevant on a case-by-case basis--which is most unfortunate when any error can lead to disaster.

Moreover, given that depression has state and trait aspects, the alleged incremental support of semi-annual psychological testing for aviation safety and security is problematic because the testing would more likely identify trait than state emotional phenomena--even as state phenomena are so often implicated in crises precipitating aberrant behavior.

In addition, psychological tests measuring psychopathology are often at least partially invalidated by the deceptive practices of many testees who aim to "look good" and remain in the cockpit. Such deceptive practices are often operative in an aviation culture that wittingly and unwittingly provides negative consequences for admissions of candor related to psychopathology.

Finally, the population pool of pilots and other aircrew members is mentally healthier than the general populations of all citizens of a country and even all other vocational groups. As well, the base rate of problematic individuals in the cockpit is so low that the very reliability and validity standards of psychological tests are challenged. In other words, a test that is at best 90% accurate may have to demonstrate a much higher level of accuracy to demonstrate an incremental contribution to aviation safety and security.

Sound management and training practices, as well as nurturing systems of referral that do not entail needless vocational retribution, would in all likelihood obviate the policy recommendation for semi-annual psychological testing. Less guild-oriented attention to furthering professional mental health opportunities might also lead to more appropriate behavioral and social science support for aviation safety and security. (See Drew, C. (November 21, 1999). EgyptAir crash puts focus on mental fitness for pilots. *The New York Times*, p. 17; Holt, G.W., Taylor, W.F., & Carter, E.T. (1985). Airline pilot disability: The continued experience of a major US airline. *Aviation, Space, & Environmental Medicine*, 56, 939-944; Jennings, L.S. (1948). Minnesota Multiphasic Personality Inventory: Differentiation of psychologically good and poor combat risks among flying personnel. *Journal of Aviation Medicine*, 19, 22-226; 237; King, R.E. (1994). "Current trends in the usage of the Adaptability Rating for Military Aviation (ARMA) among USAF flight surgeons": Comment. *Aviation, Space, & Environmental Medicine*, 65, 1062; Martinussen, M., & Torjussen, T. (1997). Pilot selection in the Norwegian Air Force: A validation and meta-analysis of the test battery. *International Journal of Aviation Psychology*, 8, 33-45.) (Keywords: Aviation Safety, Psychological Screening.)

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