

## Assessment and Classification



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## Assessing Psychological Disorders

- **Purposes of Clinical Assessment**

- Understand
- Predict
- Plan
- Outcome

- **Analogous to a Funnel**



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## Assessing Psychological Disorders

- **Purposes of Clinical Assessment**

- Understand
- To predict
- Treatment planning
- Treatment outcome

- **Analogous to a Funnel**



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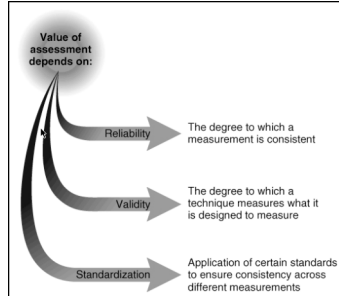
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## Assessment Concepts



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## Key Concepts in Assessment

- **Reliability**
  - Consistency in measurement
- **Validity**
  - Measuring what you think you're measuring
- **Standardization**
  - Consistent use of a technique

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## The Clinical Interview and Physical Exam

- **Clinical Interview**
  - Most common clinical assessment method
  - Structured or semi-structured
- **Physical Exam**



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## The Clinical Interview

- **Purpose: Understanding**
- **Mental Status Exam**
  - Appearance and behavior
  - Thought processes
  - Mood and affect
  - Intellectual functioning
  - Sensorium

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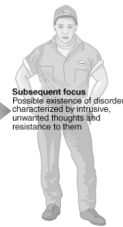
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## Mental Status Exam

Mental status exam	Frank
<b>1. Appearance and behavior</b> <ul style="list-style-type: none"> <li>• Overt behavior</li> <li>• Affect</li> <li>• Appearance, posture, expressions</li> </ul>	<ul style="list-style-type: none"> <li>• Persistent twitch</li> <li>• Appearance appropriate</li> </ul>
<b>2. Thought processes</b> <ul style="list-style-type: none"> <li>• Rate of speech</li> <li>• Continuity of speech</li> <li>• Content of speech</li> </ul>	<ul style="list-style-type: none"> <li>• Flow and content of speech reasonable</li> </ul>
<b>3. Mood and affect</b> <ul style="list-style-type: none"> <li>• Predominant feeling state of the individual</li> <li>• Feeling state accompanying what individual says</li> </ul>	<ul style="list-style-type: none"> <li>• Anxious mood</li> <li>• Affect appropriate</li> </ul>
<b>4. Intellectual functioning</b> <ul style="list-style-type: none"> <li>• Type of vocabulary</li> <li>• Use of abstractions and metaphors</li> </ul>	<ul style="list-style-type: none"> <li>• Intelligence within normal limits</li> </ul>
<b>5. Sensorium</b> <ul style="list-style-type: none"> <li>• Awareness of surroundings in terms of person (self and clinician), time, and place— "oriented times three"</li> </ul>	<ul style="list-style-type: none"> <li>• Oriented times three</li> </ul>



**Subsequent focus**  
Possible existence of disorder characterized by intrusive, unwanted thoughts and resistance to them

Components of the mental status exam

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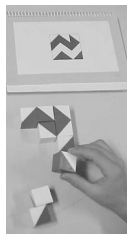
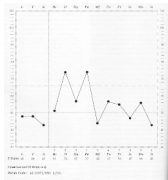
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## Psychological Testing and Projective Tests

- **Projective Tests**
- **Objective Tests**
- **Objective Intelligence Tests**




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## Neuropsychological Testing

- **Neuropsychological Tests**
  - Assess broad range of abilities
    - My Soup Lacks Many Hot Peas
  - To understand brain-behavior relations
  - Not used routinely

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## Classification and Diagnosis

- **Categorical Approach**
  - If X, then Y; If not X, then not Y
- **Dimensional approach**
  - How much of X?
- **Prototypical approach**
  - How much of X does it take for Y?

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## The DSM-IV

- **Basic Characteristics**
  - Five axes
  - Clear inclusion and exclusion criteria
  - Categorized
  - Empirically grounded



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## The DSM-IV

- **The Five DSM-IV Axes**
  - Axis I – Most major disorders
  - Axis II – Stable, enduring problems
  - Axis III – Medical conditions
  - Axis IV – Psychosocial problems
  - Axis V – Global Assessment of Functioning

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## The DSM-IV

- **Example:**
  - Axis I: 300.30 Obsessive-compulsive disorder
  - 296.22 Major depressive disorder
  - Axis II: 301.7 Antisocial personality disorder
  - Axis III: None
  - Axis IV: Recent divorce, unemployment
  - Axis V: GAF = 55, Moderate symptoms (flat affect, unable to keep a job)

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## Unresolved Issues in the DSM-IV

- **The Problem of Comorbidity**
  - Simultaneous Disorders
  - Very common
  - Validity of separate diagnoses?
- **Labeling issues and stigmatization (all classification systems)**

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## Summary

- **Clinical Assessment and Diagnosis**
  - Obtain complete understanding of the client
  - Aid in understanding and ameliorating human suffering
  - Requires reliable, valid, and standardized information
- **Dangers of Diagnosis**
  - Problem of reification
  - Problem of stigmatization

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