

Chapter Three

BRIDGE TO THE PSYCHOPATHOLOGIES

Developmental Psychopathology: From
Infancy through Adolescence, 5th edition
By Charles Wenar and Patricia Kerig

When do behaviors or issues become pathologies?

- Developmental considerations
- Cost-benefit analysis
- Tension “over pathologizing” and getting appropriate help for genuine problems

- Methods of diagnosis and classification
- Strengths & limitations

Purpose of diagnostic systems

- Organize multiple phenomena into meaningful units for improved understanding of
 - Etiology
 - Differential diagnosis
 - Comorbidity
 - Prognosis

Pros & Cons of Diagnostic Labels

- Pros:
 - Help clinicians summarize and order observations
 - Facilitate communication among professionals
 - Aid parents by providing recognition and understanding of their child’s problem
 - Facilitate research on causes, epidemiology, and treatments of specific disorders
- Cons:
 - May lead to negative perceptions and reactions by child and others

Systems

- Like dictionaries
- Use same language across clinicians and research studies
 - Clarify operational definitions
- Evolve over time

Major Types Diagnostic Systems

- Categorical vs. Dimensional Classification
 - Dimensional classification systems assume that a number of independent dimensions or traits of behavior exist and that all children possess these to varying degrees
 - Categorical approach assumes that every diagnosis has a clear underlying cause and that each disorder is fundamentally different

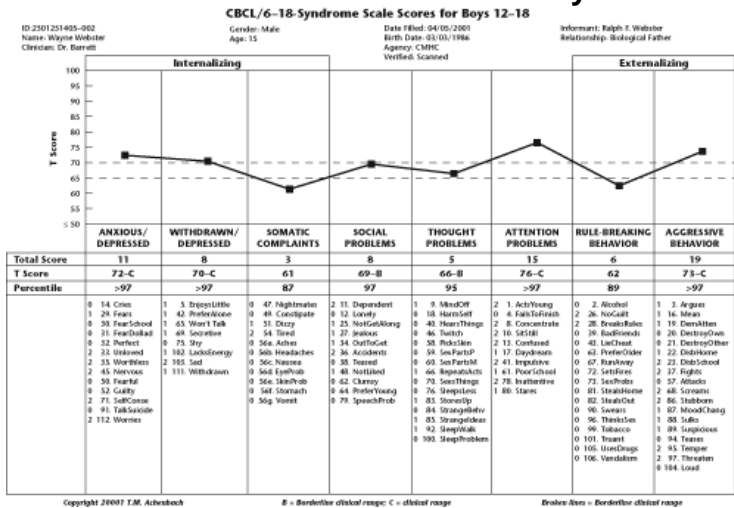
Dimensional systems

- Compatible with developmental psychopathology perspective
 - Continuity normality & psychopathology
- Empirically based
 - Data sets collected from large samples
 - Factor Analysis: statistically derived labels
 - Clinically significant cutoff scores comparable to norms → categories
 - Consideration to gender, age, & source of information when interpreting results

Achenbach System of Empirically Based Assessments (ASEBA)

- Ex: dimensional, empirically based
- Data from multiple informants (e.g., child, parents, teachers)
- Child Behavior Checklist (CBCL) variations
- Internalizing - externalizing factors
- Syndromes identified
- Strengths & limitations

CBCL of 16 year old male



Categorical Systems

- International Classification of Disease (ICD)
 - WHO international epidemiology, mortality, morbidity
- Diagnostic and Statistical Manual for Mental Disorders (DSM-IV-TR)
 - American Psychiatric Association
- Diagnostic and Statistical Manual for Primary Care – Child and Adolescent Version (DSM-PC)
 - American Academy of Pediatrics

Categorical Systems

ICD-10 and DSM-PC: generally more sensitive to developmental psychopathology principles

The DSM-IV-TR currently most widely used in US

- Categorical classification
- Reliability
- Validity
- *Strengths* and limitations

DSM-IV-TR = Diagnostic and Statistical Manual of Mental Disorders, 4th edition, Text Revision (American Psychiatric Association, 2000)

“...clinically significant behavioral or psychological syndrome or pattern that occurs in an individual and that is associated with present **distress** ... or **disability** ... or with a significantly increased **risk of suffering** death, pain, disability, or an important **loss of freedom**.”

DSM-IV-TR

Multiaxial classification system based on 5 dimensions, or “axes”

- Axis I: Clinical Disorders
- Axis II: Personality Disorders; Mental Retardation
- Axis III: General Medical Conditions
- Axis IV: Psychosocial & Environmental Problems
- Axis V: Global Assessment of Functioning (GAF)

Criticisms of the DSM-IV

- Fails to capture the complex adaptations, transactions, & setting influences
- Fails to emphasize situational & contextual factors
- Less attention to infancy/childhood
- Fails to capture comorbidity adequately
- Sometimes improperly used

Chapter Sixteen PSYCHOLOGICAL ASSESSMENT

Assessment

- Clinical assessment
- Art and science
- Goal: Guide treatment

The Decision Making Process

- Typically begins with a clinical assessment, which is directed at differentiating, defining, and measuring the child's behaviors, cognitions, and emotions of concern, as well as contributing environmental circumstances
- Assessments are meaningful to the extent that they result in practical and effective interventions

Purposes of Assessment

- Description and Diagnosis
 - clinical description summarizes the child's unique behaviors, thoughts, and feelings that together make up the features of a given psychological disorder
 - diagnosis involves analyzing information and drawing conclusions about the nature or cause of the problem, and in some cases, assigning a formal diagnosis

Purposes of Assessment (cont.)

- Prognosis and Treatment Planning
 - prognosis involves generating predictions regarding future behavior under specified conditions
 - treatment planning involves making use of assessment information to generate a treatment plan and evaluating its effectiveness

Features

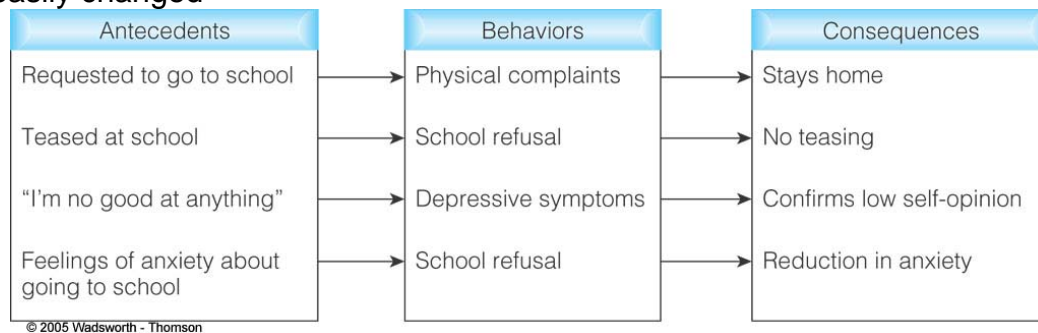
- Multiple theoretical perspectives
- Integrate information from multiple domains
- Data from multiple informants
 - Child, teachers, parents...
- Identify strengths as well as deficits
- Sensitive to developmental dimension
- Inform treatment

Clinical Interviews

- The most universally used assessment procedure
- Often includes a developmental and family history
- May incorporate a mental status exam
- Differ in degree of structure (e.g., unstructured, semi-structured)

Functional Behavioral Assessment

- “ABCs of assessment” - involves observing the antecedents, the behaviors, and the consequences of the behaviors
- Functional analysis of behavior - identify as many contributing factors as possible and develop hypotheses about which are most important and/or most easily changed



Behavioral Checklists & Rating Scales

- Often allow for a child's behavior to be compared to a normative sample
- Usually economical to administer & score
- Lack of agreement between informants is relatively common, which in itself is often informative

Behavioral Observations & Recording

- Info about behaviors in real-life settings
- May be done by parents or others, although it may be difficult to ensure accuracy
- If children often know they are being watched, may react differently as a result

Mood and Behavioral Report

- Children's Depression Inventory (CDI)
- Revised Children's Manifest Anxiety Scale (RCMAS)
- Multidimensional Anxiety Scale for Children (MASC)
- Personality Inventory for Youth (PIY)
- Self-Report of Personality (SRP-BASC)
- Minnesota Multiphasic Personality Inventory-Adolescent (MMPI-A)
- Youth Self Report (YSR)

Psychological Testing

- Tests are tasks given under standard conditions with the purpose of assessing some aspect of the child's knowledge, skill, or personality
- Test scores should always be interpreted in the context of other assessment information
- Developmental tests are used for the purpose of screening, diagnosis, and evaluation of early development

Cognitive testing

- Interpersonal style
- Thinking style
- Problem solving
- Work habits
- Capacity for self-monitoring

Intelligence Testing

- Central component in clinical assessments for a wide range of childhood disorders
- Most popular intelligence scale = Wechsler Intelligence Scale for Children (WISC-IV)
 - well-standardized, reliable, valid
 - verbal comprehension, perceptual reasoning, working memory, & processing speed

Intelligence tests

- Infancy through Adolescence
 - Bayley Scales of Infant Development
 - Stanford-Binet Intelligence Scales
- Younger ages "IQ" estimates less reliable
- IQ standard scores
 - Mean = 100
 - SD = 15

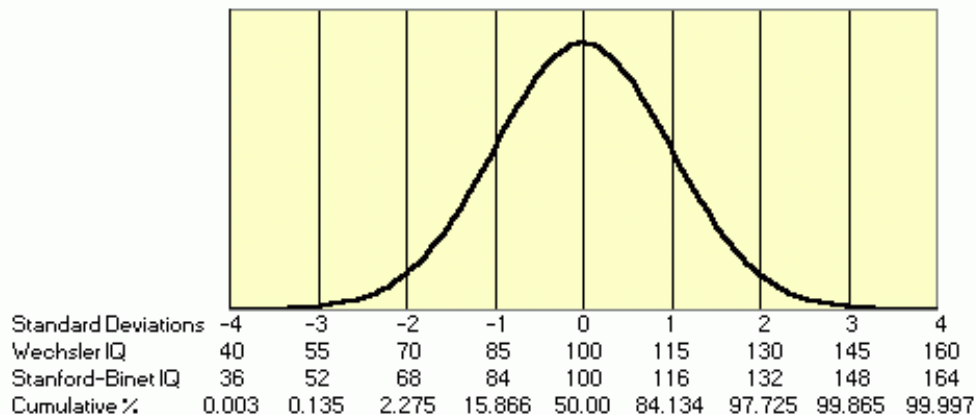
Interpreting IQ

IQ Comparison Site

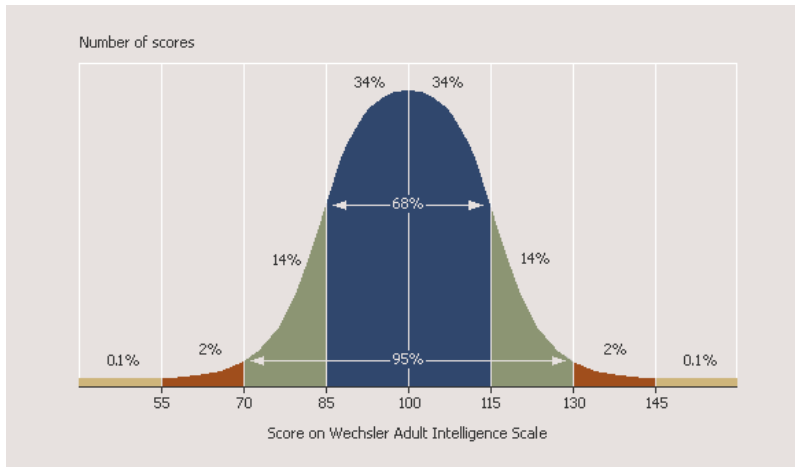
<http://members.shaw.ca/delajara/>

Copyright 2002 Rodrigo de la Jara

IQ Normal Curve



Percentiles



Intelligence v. Achievement

- Capacity v. Knowledge/skill acquisition
- Standardized tests widely administered in schools = achievement
 - Content mastery
 - MCAS
 - Woodcock Johnson III Tests of Achievement

Neuropsychological Testing

- Link brain functioning with objective measures of behavior that depend on intact central nervous system
- Often comprehensive battery to assesses full range of psychological functions
 - verbal and nonverbal cognitive functions
 - perceptual functions
 - motor functions
 - emotional/executive control functions
 - Tower of Hanoi

Socio-Emotional & Personality Testing

- Temperament
 - LAB-TAB
- Personality "Big 5" Factors (Adult model)
 - timid-bold
 - agreeable-disagreeable
 - dependable-undependable
 - tense-relaxed
 - reflective-unreflective
- Interviews, projective techniques, behavioral measures, objective inventories

Parent & Teacher Report

- Child Behavior Checklist (CBCL)
 - Achenbach system child--adolescent
 - Parent forms and teacher report forms
- Behavior Assessment System for Children
 - Parent Rating Scale (PRS) and Teacher Rating Scale (TRS)
- Devereux Scales of Mental Disorders
- Personality Inventory for Children-Revised

Projective Testing

- Present ambiguous stimuli
- Ask what child sees
- Assumes: child projects own personality, including unconscious fears, needs, and inner conflicts, on the ambiguous stimuli
- Techniques: figure drawings, play
- May help children relax and to make it easier for them to talk about difficult events

Projective Tests

- Rorschach
 - Inkblots
- Projective Drawings
 - Draw-A-Person (DAP)
 - House-Tree-Person (HTP)
 - Kinetic Family Drawings (KFD)
- Apperception Tests
 - Thematic Apperception Test (TAT)
 - TAT: Social Cognition and Object Relations Scale (SCORS)
 - Roberts Apperception Test for Children (RAT)



Example of projective
Adolescent Apperception Test

Tell me a story with a beginning, middle, and an end

Western Psychological Services