Diagnosis and formulation – how important is impairment?

Alasdair Jo Kelly Prakash Karen
DNP Team
Outline of presentation

1. Impairment: definition
2. Diagnosis: definition
3. Formulation: definition
4. A way forward
1. Impairment: definition

* diminution of developmental potential
* assessed relative to age, gender and IQ

- Home environment
- School classroom
- School playground
- Youth Group
- Sporting club
- Scouts
2. Diagnosis: definition

DSM-IV: a behavioural or psychological pattern of symptoms associated with impairment in family, social and/or academic domains
2. **Diagnosis: definition**

   in children and adolescents-

   developmentally inappropriate impairment has to be judged relative to children of the same age, gender and IQ

   this requires longitudinal assessment within and across developmental stages
2. **Diagnosis: definition**

multi-informant report - parent, teacher, child

low concordance repeatedly shown

**externalizing:** parent-teacher: increased agreement
**internalizing:** child-teacher: increased agreement
2. Why clinical interview and questionnaires are helpful

Figure 4.1 Problem level categories for children and adolescents as rated on the Total Problems Scale of the Child Behaviour Checklist
2. Why clinical interview and questionnaires are helpful

greater than 1.5 standard deviations from the mean
brain and environment behave differently

as if a clinical ‘threshold’ has been crossed
2. Key comorbid conditions within a developmental context

- oppositional defiant/conduct disorders
- anxiety disorders
- depressive disorders
- learning disorders (language-based/visuo-spatial)
- speech and language disorders
- developmental coordination disorder
3. Formulation: definition

*Why is this individual ill in this way at this time?*

Both nomothetic and ideographic perspectives crucial.

Epigenetic models suggest genes and environment are equal contributors to both risk and resilience.
Nomothetic aspects of phenomena:

-those features of a given, particular phenomenon that are able to be *validly and reliably demonstrated* in groups of individuals with a particular disorder or a range of disorders

*-amenable* to the science of systematic observation and experiment

Ideographic aspects of the individual:

-those features of a given, particular individual that are not able to be validly and reliably demonstrated in groups of individuals with a particular disorder or a range of disorders *that is*

aspects of an individual can be *truly unique*

*-not easily amenable* to the science of systematic observation and experiment
The two main components of the epigenetic code

**DNA methylation**
Methyl marks added to certain DNA bases repress gene activity.

**Histone modification**
A combination of different molecules can attach to the ‘tails’ of proteins called histones. These alter the activity of the DNA wrapped around them.
3. Formulation: definition

- Biological ‘story’ factors

- Psychological ‘story’ factors

- Social ‘story’ factors

All within a developmental phase specific framework
3. Formulation: definition

- Biological ‘story’ factors

  genetic vulnerability
  biological systems dysfunction
  executive functions
  mood regulation
  arousal regulation
  motor developmental delay
  speech/language developmental delay
  learning difficulties/disorders
3. Formulation: definition

- Psychological ‘story’ factors

  psychodynamic factors – especially ‘basic trust’
  belief systems
  coping style
  interpersonal relationships
  empathy
  attunement
  sensitivity
  responsiveness
3. Formulation: definition

- Social ‘story’ factors

  role modeling
  family/peer group systems factors  triangulation
  scapegoating
  idealisation
3. Formulation: definition

- Protective factors

  academic achievement
  hopeful outlook
  likeable temperament
  supportive family
  particular talents (drawing, sport)
And…

knife throwing, noose making,
gun assembling
<table>
<thead>
<tr>
<th>Risk factors</th>
<th>Child factors</th>
<th>Family factors</th>
<th>School context</th>
<th>Life events</th>
<th>Community and cultural factors</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Low self esteem</td>
<td>Family violence</td>
<td>School failure</td>
<td>Divorce and family breakup</td>
<td>Neighbourhood violence and crime</td>
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<tr>
<td></td>
<td>Poor social skills</td>
<td>Poor supervision</td>
<td>Bullying</td>
<td>Death of a family member</td>
<td>Lack of support services</td>
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<tr>
<td></td>
<td>Poor problem solving</td>
<td>Harsh or inconsistent discipline</td>
<td>Peer rejection</td>
<td></td>
<td>Social or cultural discrimination</td>
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<td></td>
<td>Difficult temperament</td>
<td>Lack of warmth and affection</td>
<td>Poor attachment to school</td>
<td></td>
<td>Community norms concerning violence</td>
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<tr>
<td></td>
<td>Lack of empathy</td>
<td>Abuse and neglect</td>
<td>Deviant peer group</td>
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<tbody>
<tr>
<td></td>
<td>Social competence</td>
<td>Supportive caring parents</td>
<td>Positive school climate</td>
<td>Meeting significant person</td>
<td>Access to support services</td>
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<td></td>
<td>Attachment to family</td>
<td>Family harmony</td>
<td>Prosocial peer group</td>
<td>Moving to new area</td>
<td>Community networking</td>
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<td></td>
<td>Empathy</td>
<td>Secure and stable family</td>
<td>Sense of belonging</td>
<td>Opportunities at critical turning points or major life transitions</td>
<td>Attachment to the community</td>
</tr>
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<td></td>
<td>Problem solving</td>
<td>Supportive relationship with other adult</td>
<td>Opportunities for some success at school and recognition of achievement</td>
<td></td>
<td>Participation in community group</td>
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<td></td>
<td>Optimism</td>
<td>Strong family norms and morality</td>
<td>School norms re violence</td>
<td></td>
<td>Community/cultural norms against violence</td>
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<td></td>
<td>School achievement</td>
<td>Easy temperament</td>
<td>Good coping style</td>
<td></td>
<td>Strong cultural identity/ethnic pride</td>
</tr>
</tbody>
</table>
"All right, Billy, you just go right ahead! ... I've warned you enough times about playing under the anvil tree!"
"Rub his belly, Ernie! Rub his belly!"
"Our psychopharmacologist is a genius."
I worry about the decreased polarization of our society.
4. A way forward

A is a six year old grade one student who presents with a moderate severity ADHD of combined type driving severe early onset oppositional defiant disorder with conduct disorder symptoms. These problems have arisen in the context of a poorly empathic and attuned family environment. This environment has worsened his oppositional defiant disorder/conduct disorder symptoms beyond the effect of his ADHD of combined type vulnerability.
4. A way forward

From a biological perspective, A has a significant family history of paternal substance abuse dependence disorders (cannabis and amphetamines) and a similar maternal substance abuse history to a lesser extent. Further there is a family history of maternal childhood ADHD and speech and language difficulties.

This family history suggests a genetic vulnerability expressed through part functions that may make A susceptible to a range of disruptive, anxiety and depressive difficulties depending on the surrounding interpersonal environment.
4. A way forward

In addition, A has speech and language developmental difficulties, clear executive function difficulties with respect to memory encoding and retrieval and working memory, probable learning difficulties emerging with respect to his basic literacy and numeracy and fine motor clumsiness that all predispose him to developing a range of disruptive, anxiety and depressive difficulties depending on his surrounding interpersonal environment.
4. A way forward

From a psychological perspective, A has been immersed in a family environment devoid of ‘basis trust’ in the world as a basis for constructing meaningful relationships. Inconsistent parenting, sudden, unpredictable and unexplainable paternal absences, indiscriminate use of illicit drugs, uncontained expression of emotion and mindless acceptance of behaviour that is destructive to intimacy and health identity formation have been the norm in A’s family.
4. A way forward

From a social perspective, these same factors have led to poor models for A managing his anxiety, aggression and emotions. Further A’s frequency of behavioural problems, especially the sexualised behaviours have served as a potential focus to unite his parents. But, his parents have then been unable to face and work out solutions for their unhelpful behavioural patterns within their relationship.
4. A way forward

A’s school environment has been resilience building for him, in so far as it has been able to address cognitive, emotional and behavioural needs while educating him.