BEHV4005 THEORY AND PRACTICE OF PSYCHOLOGICAL ASSESSMENT AND INTERVENTION

CHAPTER 1: PRINCIPLES OF PSYCHOLOGICAL ASSESSMENT

Part 1: Introduction, Purpose and Methods of Assessment

1.1 Learning Objectives

By the end of this chapter, you should be able to:

- explain what psychological assessment involves;
- describe the purposes of psychological assessment;
- identify Sattler's four pillars of assessment;
- explain why psychologists generally use multiple assessment methods and information sources;
- distinguish between reliability and validity;
- explain why good assessment is necessary for accurate diagnosis, formulation and treatment;
- understand assessment as an ongoing rather than static process;
- explain how psychological symptoms exist on a continuum;
- apply the four pillars of assessment to a clinical case.

The major subject learning outcome addressed in these lectures is the ability to explain commonly used psychological assessment instruments, understand their theoretical foundations and make basic interpretations of assessment results

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1.2 What Is Psychological Assessment?

Psychological assessment is the systematic process of collecting, evaluating and integrating information about a person's psychological functioning. It may involve examining the person's emotions, thoughts, behaviours, abilities, symptoms, relationships, everyday functioning and personal circumstances.

Assessment is broader than simply administering a psychological test. A test produces one particular type of information, such as a cognitive score or symptom rating. In contrast, an assessment usually combines several forms of information to develop a more complete understanding of the person.

Psychological assessment may be used to answer questions such as:

- Does the person appear to be experiencing a psychological disorder?
- What difficulties or symptoms are currently present?
- How severe are these difficulties?
- How are the difficulties affecting everyday functioning?
- What factors may have contributed to the development of the problem?
- What is maintaining the problem?
- What cognitive strengths and weaknesses does the person demonstrate?
- What treatment or support may be appropriate?
- Has the person improved following intervention?

The specific assessment methods selected should be guided by the **assessment question** or **referral question.** A psychologist should not administer tests simply because they are available. Each assessment method should contribute information that helps answer the reason the person was referred.

For example, consider the following two referral questions:

1. **Does Tim have any major cognitive deficits?**
2. **Why is Tim upset much of the time?**

The first question may require norm-referenced cognitive testing, interviews, behavioural observations and information about Tim's functioning. The second may require interviews, symptom questionnaires, observations and information from people who know Tim well. The appropriate assessment process therefore depends on what the psychologist is attempting to understand.

Key exam point

Psychological testing is one component of psychological assessment.

A test provides a specific sample or measurement of behaviour or ability. An assessment integrates test results with other relevant information in order to answer a broader clinical question.

1.3 Purposes of Psychological Assessment

Psychological assessment may serve several related purposes.

1.3.1 Describing the presenting difficulties

Assessment helps the psychologist identify what is currently happening for the client. This includes understanding:

- the nature of the symptoms;
- when they occur;
- their frequency;
- their duration;
- their severity;
- the distress they cause;
- the effect they have on everyday life.

For example, a client may initially say, "I feel anxious all the time." Assessment would explore what the client means by anxiety, the situations in which it occurs, the thoughts that accompany it, physical symptoms, avoidance behaviours and the extent to which it interferes with study, employment or relationships.

1.3.2 Assisting diagnosis

Assessment may help determine whether a person's presentation is consistent with the criteria for a psychological disorder.

A diagnosis provides a recognised label for a pattern of symptoms. However, diagnosis requires more than recognising that a person experiences a particular symptom. Psychologists must consider the number, combination, severity, duration and functional impact of symptoms, as well as possible alternative explanations.

For example, many people experience occasional social anxiety. Experiencing nervousness in social situations does not automatically mean that the person has social anxiety disorder. Assessment helps determine where the person's experiences fall on the continuum from low to high symptom severity and whether the threshold for a disorder appears to have been reached.

1.3.3 Developing a case formulation

Assessment also contributes to formulation. A formulation is an individualised working hypothesis about:

- what the person's main problems are;

- how these problems may have developed;
- what factors triggered or precipitated them;
- what factors are maintaining them;
- what strengths or protective factors may support recovery;
- how intervention may address the difficulties.

Diagnosis identifies a recognised pattern of symptoms. Formulation attempts to explain how the problem operates for the particular individual.

For example, two clients may both meet criteria for depression but have different contributing and maintaining factors. One client's depression may be maintained by social withdrawal and loss of rewarding activities. Another person's depression may be maintained by perfectionism, self-criticism and repeated beliefs that they have failed.

Assessment therefore supports both classification and individualised clinical understanding.

1.3.4 Guiding intervention

Assessment provides the foundation for treatment planning. The information collected helps the psychologist decide:

- which problems should be prioritised;
- which intervention may be appropriate;
- what risks or barriers need to be addressed;
- what strengths and resources may support treatment;
- how the intervention should be adapted for the individual.

The relationship between assessment and treatment can be represented as:

Presenting symptoms → Assessment → Diagnosis and formulation → Treatment

An inaccurate or incomplete assessment may lead to an inaccurate formulation or diagnosis. This can then lead to an unsuitable treatment plan. The lecture materials emphasise that unreliable or invalid assessment may result in unreliable or invalid diagnosis and formulation, which can adversely affect treatment.

1.3.5 Monitoring change

Assessment is not limited to the beginning of therapy. It may also be used throughout treatment to determine:

- whether symptoms are improving;
- whether functioning has changed;
- whether treatment goals are being achieved;
- whether the original formulation remains accurate;
- whether the treatment plan should be adjusted.

A symptom questionnaire may be administered at the beginning of treatment and then repeated later. Changes in the score may provide one source of information about improvement. However, questionnaire scores should still be interpreted alongside interviews, behavioural changes and the client's own account of their functioning.

1.4 Why Good Assessment Is Important

Good assessment is important because clinical decisions depend on the quality of the information collected.

The general process is:

Presenting symptoms → Assessment → Diagnosis and formulation → Treatment and reporting

Each stage influences the next. If the assessment process produces inaccurate or incomplete information, the psychologist may develop an inaccurate understanding of the client. This may affect diagnosis, formulation, treatment selection and the way results are communicated.

For example, imagine that a student is avoiding schoolwork. One possible explanation is anxiety. Other possibilities include:

- attention difficulties;
- a specific learning difficulty;
- low mood;
- bullying;
- problems understanding the work;
- family stress;
- sleep difficulties;
- low motivation;
- fear of failure.

If the psychologist assumes the behaviour is caused by defiance without conducting a thorough assessment, the resulting intervention may not address the actual problem. In contrast, a careful assessment would test several possible explanations.

1.4.1 Assessment reduces reliance on assumptions

Clients often present with behaviours or symptoms that could have several explanations. Assessment allows the psychologist to develop hypotheses and collect evidence that supports or challenges each possibility.

For example, taking a long time to complete homework might reflect:

- difficulty understanding the task;
- poor concentration;
- anxiety about making mistakes;
- perfectionism;
- slow processing speed;
- distraction;
- fatigue;
- avoidance.

The observable behaviour alone does not explain why it occurs.

1.4.2 Assessment supports ethical clinical practice

Psychological conclusions may have significant consequences. Assessment results may affect:

- diagnosis;
- treatment;
- access to services;
- education support;
- workplace adjustments;
- disability funding;
- family decisions;
- legal or administrative outcomes.

Psychologists therefore need sufficient and appropriate evidence before reaching conclusions. The methods used must be suitable for the person, the context and the referral question.

1.4.3 Assessment supports individualised treatment

A diagnosis by itself does not provide every piece of information required for treatment. Assessment should identify the person’s specific symptoms, maintaining factors, strengths, barriers and goals.

For example, behavioural activation may be appropriate for a client whose depression is maintained by withdrawal and reduced engagement in rewarding activities. A different or additional intervention may be required when the client's difficulties are primarily associated with trauma, psychosis, substance use or an untreated medical condition.

1.5 Why Good Assessment Can Be Difficult

Although assessment is important, it can also be challenging. The lecture materials identify three major difficulties.

1.5.1 People tell stories rather than presenting symptoms in organised categories

Psychological interventions often target particular symptoms or maintaining processes. However, clients generally do not present their experiences in a neatly organised diagnostic format.

A client may say:

> "Everything has been falling apart since I changed jobs. I barely sleep, I keep arguing with my partner and I cannot focus on anything."

The psychologist must respectfully explore this story and identify relevant information, such as:

- sleep disturbance;
- concentration problems;
- emotional distress;
- interpersonal conflict;
- possible anxiety or low mood;
- the timing of the difficulties;
- the impact of the job change.

The psychologist must organise the information without ignoring the client's own meaning and perspective.

1.5.2 Different difficulties may have similar presentations

Many psychological and non-psychological problems produce similar symptoms.

For example, poor concentration may occur in:

- depression;
- anxiety;
- attention-deficit/hyperactivity disorder;
- trauma-related disorders;
- sleep deprivation;
- substance use;
- medication side effects;
- physical illness;
- high stress.

This means that a single symptom rarely establishes a diagnosis. The psychologist must examine the broader pattern and consider alternative explanations.

1.5.3 Symptoms frequently co-occur

Clients may experience symptoms from more than one area. Anxiety and depression, for example, commonly appear together. A person may experience worry, low mood, sleep disturbance, fatigue, avoidance and reduced concentration at the same time.

The presence of overlapping symptoms makes assessment more complex. The psychologist must determine: