

Psychosocial and Environmental Problems: No Longer Deferred

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Psychosocial and Environmental Problems, Axis IV of the Multiaxial Assessment, "is for reporting psychosocial and environmental problems that may affect the diagnosis, treatment, and prognosis of mental disorders".

Unfortunately Axis IV is often deferred for individuals who have a dual mental retardation and mental illness diagnosis. The rationale for this deferment ranges from a lack of time, to a lack of instrumentation to assess, to a belief that individual with mental retardation "do not experience stress" or "such problems are inherent to mental retardation and therefore to include an Axis IV score only confounds the differential diagnosis".

There are many problems with this deferment and the supporting rationales. While it is true that individual who have mental retardation also frequently have significant psychosocial and environmental problems, it is still critical that we know what these problems are and how they seem to affect the individual. It is often through direct attention to the psychosocial and environmental problems that affect individuals who have mental retardation that significant therapeutic progress can be seen.

Additionally, progress in the lives of individuals with mental retardation can often be measured as a function of how well they are dealing with the problems in their lives and the extent to which the problems have diminished.

In 1993 Mayer developed a tool entitled "Psychosocial Stressors (MR/DD)" which has now been field tested for nearly three years with people who have a dual diagnosis and has been revised and re-titled "An Assessment of the Psychosocial and Environmental Problems for Persons with Mental Retardation".

The assessment was originally designed by translating the psychosocial stressors as defined by DSM III-R into the acute and enduring life experiences and situations that individuals with mental retardation commonly experience. In the revised version, all of the categories of psychosocial and environmental problems as defined by the DSM-IV have been included.

The scoring mechanism, which continues to be utilized, is based on the current literature of relative impact of perceived stressful events. The events identified are then placed in a hierarchical order to correspond to the relative weight of the stress with a score attached to these events. Specific events are grouped by life function area (money, relationships, home, work, health, legal, etc.) so that the tool useful for determining the total score for psychosocial and environmental problems and also enables the therapist/team to direct supports to areas that are identified as problems.

Each category has both acute events and enduring situations which may be scored. In keeping with DSM IV guidelines, "when an individual has multiple psychosocial or environmental problems, the clinician may note as many as are judged to be relevant"(1) In general only those which have been present within the last year or those which occurred prior to the past year but are clearly contributing to the mental disorder or which have become (or should become) a focus of treatment.

When the scores for each specific item are tallied by life area, they are then summed for a composite psychosocial and environmental problems score for this particular point in time. The score is not reported as a part of the multiaxial assessment but is used rather as a means to record and track progress over a baseline.

As currently utilized, the tool serves as a mechanism to evaluate change in the circumstances of ones' life, and also to assist in functional behavior analysis.

While there are certain limitations to the instrument, such as not all possible problems are listed, it does serve as a "memory jog" for professionals, who are encouraged to complete the form prior to first or diagnostic visits to psychiatrists, therapists, etc. as well as question prompts for the professional staff attempting to do a comprehensive diagnosis.

Although the assessment is not a panacea for the multitude of issues associated with accurate diagnostics for persons with mental retardation, without an assessment of the current (acute) and enduring problems we are limited in our ability to determine where and how to direct some of our immediate attention which may help to reduce the presenting symptoms. Further, without sensitivity to how the current and enduring events of a persons life may be affecting them, we may also inaccurately diagnose and treat.

References:

1 American Psychiatric Association: *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition*. Washington, DC, American Psychiatric Association, 1994 pp. 29-30.

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