

Multidisciplinary Anamneses and Diagnosis

For Crisis Situations in
Youth Care Centers



Jugend in Aktion
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Understanding and using a Diagnosis Report for a single YP 13/18

What purpose does a Diagnosis Report serve

The diagnosis is the result of a comparative analysis done by a doctor or a psychologist on the patient's medical history and an objective examination.

By examining neurological manifestations, clinical and laboratory findings (e.g. blood tests) the disease from which the patient suffers is identified.

(Source: Herbert, M. (1994), Psychological issues in Adolescence, Greek version, Athens.)

What kind of information content do we find in a diagnosis report

- Psychiatric
- Psychological
- Medical
- Para-medical
- Social diagnosis
- Social information (way of living, etc..)

(Source: Herbert, M. (1994), Psychological issues in Adolescence, Greek version, Athens.)

Psychiatric diagnosis

- **Assessment and evaluation of the psycho-mental state**

Facial expressions, attitude, appearance, body care, diet, concentration, attention, focusing, memory, judgment, perception, emotion, hospitalisation in psychiatric clinic, suicidal ideation, suicide attempts, self-harm, self-destructive behaviour, scarification, depression, borderline personality disorder, anxiety disorder, aggressiveness/ use of violence, other mental health disorder.

- **Recommendations and medical therapy – medication**

(Source: American Psychiatric Association. (2004). *Diagnostic and statistical manual of mental disorders, IV-TR*, (fr. Traduction), Paris, Masson.)

Psychological Diagnosis

- Background information
Medical and development history, family and social history, previous evaluations
- Behaviour information
- Observation, behaviour rating scales, interview
- Recommendations

(Source: American Psychiatric Association. (2004). *Diagnostic and statistical manual of mental disorders, IV-TR*, (fr. Traduction), Paris, Masson.)

Standardised assessment targeted the domain of

- Cognitive-intellectual-executive functioning,
- attention/concentration, memory,
- sensory-motor/perception processing,
- speech/language,
- academic achievement,
- emotional personality

(Sources: American Psychiatric Association. (2004). *Diagnostic and statistical manual of mental disorders, IV-TR*, (fr. Traduction), Paris, Masson.
<http://www.apa.org/>)

Some tests

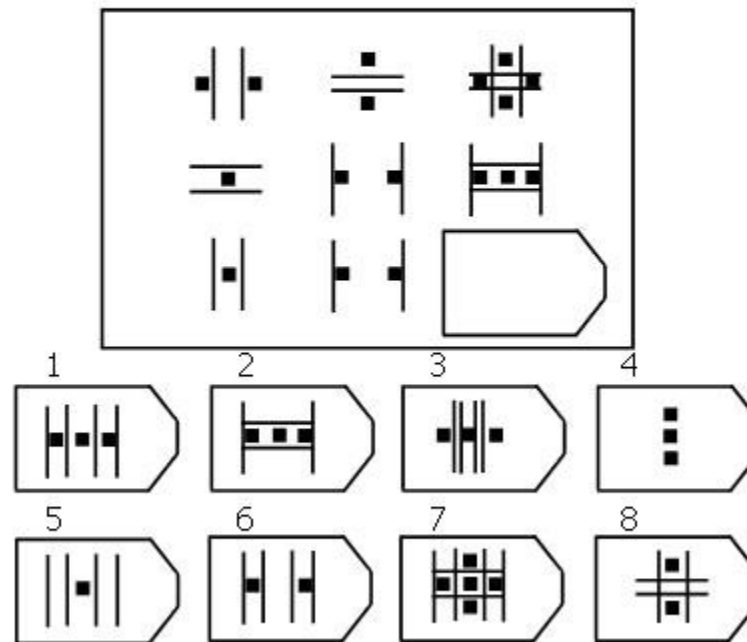
- WEIS-III,
- CAS,
- Trial Making Test A and B,
- Stroop Color Word Interface,
- MMIP-A,
- Brown attention deficit scales,
- Wisc,
- CAT,
- House tree person projective test,
- raven matrices,
- PTSD Test,
- Depressions Scales (BDI),
- etc:

(Source: OMS (2000). Classification internationale des troubles mentaux et des troubles du comportement. Paris, Masson.)

Example I

nonVerbalReasoning.net Ravens Matrices Q01

Find the missing piece in the pattern. Look across the rows and down the columns.



Example II

1. Sadness

- 0 I do not feel sad.
- 1 I feel sad much of the time.
- 2 I am sad all the time.
- 3 I am so sad or unhappy that I can't stand it.

2. Pessimism

- 0 I am not discouraged about my future.
- 1 I feel more discouraged about my future than I used to be.
- 2 I do not expect things to work out for me.
- 3 I feel my future is hopeless and will only get worse.

3. Past Failure

- 0 I do not feel like a failure.
- 1 I have failed more than I should have.
- 2 As I look back, I see a lot of failures.
- 3 I feel I am a total failure as a person.

(Source: Beck Depression Inventory)

PTSD Self-test, first part

Re-experiencing Symptoms: Memories and images of the traumatic events may intrude into the minds of those with PTSD. They occur suddenly without obvious cause. They are often accompanied by intense emotions, such as grief, guilt, fear, or anger. Sometimes they can be so vivid a person believes the trauma is actually reoccurring.

- Nightmares, night terrors
- Sleepwalking, sleep fighting
- Unwanted daytime memories, images, thoughts, daydreams
- Flashbacks, feeling like you're reliving the traumatic event
- Somatic flashbacks (physical pain / medical condition linked to the feeling or bodily states associated with the traumatic event)
- Fixated on war experience, living the past
- spontaneous psychotic episodes (the world vanishes and you're suddenly somewhere else, experiencing some sort of trauma)
- panic attacks, undefined dread or fear
- Phobias

(Source: <https://www.psychiatry.org/>)

- Family history, medical family history
- Personal history
- Objective examination
- Diagnosis
- Recommendations

(Source: Tsiantis, G., Manolopoulos, S. (1994). *Contemporary children psychiatry*. Athens, Kastaniotis editions.)

Social diagnosis is a broader context for practitioners to understand extra-medical and psychological factors, which in turn has consequences for patient care and health outcomes, consequently, for the minors in institutions/shelters

Social diagnosis recognises the interplay between social structures and illness manifestations/ symptoms.

(Sources: Bricaud, J. (2012). *Accueillir les Jeunes Migrants*, Lyon, Chroniques Sociales.
<https://www.psychiatry.org/>)

Deontological and legal limits prohibiting the sharing of confidentiality information

- Medical procedures are subject to *medical confidentiality*. cf medical code of conduct, in national level for each participant country
- At the European level, medical confidentiality is protected by Article 7 of the Principles of European Medical Ethics (1987).

(Sources:

Penal Procedural Code (2013). Thessaloniki, Sakoulas editions

Penal Code (2013). Thessaloniki, Sakoulas editions

Civil Code (2013). Thessaloniki, Sakoulas editions

<http://eur-lex.europa.eu/legal-content/EN-EL-DE/TXT/?uri=URISERV:l14012&from=EN>

<http://www.dpa.gr/>)

Relevant Elements of a Future Crisis Situation

- Family history (domestic violence, absence or negligence from parents, way of birth)
- Family heredity (health problems, psychiatric problems)
- learning disabilities, cognitive problems, developmental problems
- Abuse (physical/psychological, neglect)
- Sexual abuse, victimisation of the minor
- Trafficking and smuggling, modern slavery
- Pathology (psychiatric problems, medical problems concerning the family or the minor himself)
- Delinquent behavior

(Sources: Giotakos, O., Prekate, V. (dir). (2006). *Sexual Abuse*. Athens, Ellinika Grammata.
<https://fr.slideshare.net/debrajean333/full-psychological-reportsample>)