

Book Review Psychological Assessment and Human Development: Case Studies*

Joana Corrêa de Magalhães Narvaes¹

¹Universidade Federal de Ciências da Saúde Porto Alegre (UFCSPA), Porto Alegre, Rio Grande do Sul, Brasil

The book *Psychological Assessment and Human Development: Case Studies* innovates its instructive and illustrative presentation of case studies, displaying a vast contextual investigation of the clinical setting of the Psychological Assessment (PA). It comprehends a developmental continuum with a wide range of PA scenarios, distinct clinical approaches and nosological diagnosis. It studies, in a very dynamic and descriptive way, cases which find no support in nosological terminology. Its frame considers a detailed description of the stages involved in the assessment process and the underlying clinical reasoning, calling the reader to the setting and the decision-making preparation of the procedure. The case variability, from common to rare, as well as the singularity and specificity found in each one, grants a high-quality living experience. The multiple theoretical approaches underlying psychological assessment are highlighted through development, neuropsychology, systemic and psychoanalysis.

The first section of the book conceptualizes, differentiates and establishes the complementarity between PA and neuropsychology, guaranteeing the reader a baseline level of knowledge. Furthermore, it is placed on the theoretical basis on which the PA Center of the Psychology Institute at UFRGS (Federal University of Rio Grande do Sul) bases the understanding of the cases investigated. The stages of conducting the PA are discussed, culminating in an individual assessment plan. The role of the examiner and his clinical view as an accurate and integrative tool in the treatment of data stand out. Special attention is devoted to oral feedback and therapeutic indications, as the psychoeducation of family members and patients put in perspective the diagnostic elaboration, the change of the belief system regarding symptomatic manifestations substantially subsidizes subsequent interventions that encompass several aspects the subject's functioning.

Section 2 approaches the PA during childhood, from first to third infancy, including clinical cases of varied complexity and a wide range of assessment methodologies. The initial chapters study PA at ages three and four, and due to the shortage of validated standardized instruments to this age range in Brazil, there have been debates over the topic in order to prepare the examiner for the use of psychodiagnosis without tests, evaluative attitude, comprehensive analytical skills and diagnostic clinical reasoning.

A clinical scene where psychopathology gives room to environmental stimulation is explored. Attention is given to integral and symbolic development comprehending extensive data collection to the child's different socioaffective and bonding environments outlining resources and vulnerabilities. Another aspect is the establishment of wide lines of examination towards cognitive impairment, due to the impact of emotional factors and stressors on intellectual, school and adaptive performance. The PA includes a comprehensive understanding of the individual besides the overlapping of symptoms that, independently may represent confusion variables. To extend investigation over this early developmental stage, the supervision of experienced professionals and interdisciplinary collaboration are addressed.

Part 3 examines the specificities of the PA in adolescents, as a case in which the patient refuses to interact with the examiner, demanding full methodological ability to conduct the data collection. The difficulty to communicate shown by the patient is usually symptomatic and covers the latent reasons for the questing for help. It identifies a delicate and serious issue for psychologists, the breach of confidentiality. Within this communicational complexity, the legal support grounds a more protective decision-making to the subject and defines the professional commitment to inform any suspicion of violence or any other kind of experience that puts the subject in physical or emotional danger by means of a consistent, but not intrusive control.

It is common for teenagers to reformulate hypotheses through the evaluation process, when comparing emotional and neurodevelopmental comorbidities

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and the increase of environmental issues. The section discusses diagnostic interactions such as cause, tendency, underlying path or co-occurrence. Besides the essential sources of information, complementary sources are also presented bringing multifactorial clarification and distinguishing confusion aspects based on neurobiological, genetic, cognitive, behavioral, environmental conjunction of factors including fetal data. Such insights influence the therapeutic outcome under a preventive point of view and in quality of life, once an incomplete or misdiagnosis can exempt the patient from his best functional potential.

Part 4 refers to PA in adults. Personality traits are particularly taken into consideration because at this stage, emotional functioning is better established. The PA constitutes a powerful tool to guide more accurate and effective ways of treatment according to the specific characteristics of emotional functioning. At this stage, cognitive complaints may be side symptoms of personality problems. There is a demand for explicit complaint discrimination, limited to cognitive symptoms, as opposed to a more clinically significant expression of emotional and structural aspects usually egosonic. The subject's integrative perspective identifies affected performance points and their repercussions in a contextual understanding that requires the analysis of medical, pre-morbid, functional and environmental stimulation confounders. The current concept of intellectual disability is discussed, in which cognition is not the only parameter, and its severity is classified by functionality and autonomy for daily activities. Attention should be paid to what the environment stimulates or inhibits, without neglecting the individualizing, potential and subjective function. A broad evaluation spectrum is defined in cases peculiar to adults, including the clinical presentation of a rare syndrome due to immunological disorders. In this case, the PA requires a stage for literature review for assertive planning of the evaluation process. The intersection between individual development, social typology of chronic disease and family structural constitution is highlighted. The PA has the function of leveraging family plasticity, maximizing outcomes of therapeutic indications of the process and minimizing resistance. Finally, the section presents a psychoanalytical discussion as basis for understanding refractory somatization processes, attributed to non-metabolizable character of traumatic events located in the early and constituent perspectives of psychic development. It is evident the peculiar and differential dynamic diagnostic reading

of the psychologist, capable of integration, beyond the symptomatological descriptions.

Part 5 deals with the PA of the elderly, in which the identification of the etiology of clinical conditions can be difficult, given the chronification and overlapping of habits, pathologies and medications. The association of the different cognitive components with functional independence and biological disorders that may affect them is discussed in depth. Mild cognitive impairment can be an intermediate stage between healthy and dementia aging. This is the role of reassessment: whether punctual or systematic, it can reveal the gradual progression of cognitive domains and their correlates in daily instrumental activities. Longitudinal follow-up gives the diagnostic and prognosis process greater precision and extends it to more assertive preventive and interventional dimensions.

Another highlight throughout the section is the assessment of mood and anxiety disorders, common in old age, but underdiagnosed by the distinct symptomatic expression and confusion with dementia. Understanding the subject's motivation, which may interfere with his/her performance and confound cognitive deficit and dementia symptoms, is critical. The use of comprehensive clinical reasoning helps in the therapeutic, pharmacological indication, and is a source of guidance for the patient, caregivers and professionals. Here is another point reported; the PA of confined elderly. In nursing homes, environmental conditions and the diversified inclusion of secondary informers for data, as well as institutional routine are investigated. Likewise, the feedback provides a space for guidance and revision of routines that do not benefit the examinee, intensifying losses.

In short, the specificities of PA in the elderly corroborate a different attitude for the elderly appraiser, characterized by listening, welcoming, repeating tasks / information patiently and establishing limits towards the excessive demands that interfere with the pace of the assessment. One must consider the physical limitations of the elderly – audiovisual, motor or fatigue along the battery – taking them into consideration when selecting instruments. The PA requires a solid knowledge base of psychopathology of aging, life cycle crises and their vicissitudes as chronic diseases. The chapters of the section include the frequent need for the patient to be accompanied by another informer, especially when they present memory deficits or dementia, so that he can establish a deal and a more impartial information collection in relation to cognitive complaints. In return, the family can be of great value in complying

with therapeutic indications, which can leverage the quality of life. Finally, as in early childhood, regarding the elderly, Brazil has few validated instruments that subsidize PA, but the authors reinforce the use of standardized instruments for the elderly population, in addition to interviews and observations.

Finally, the book *Psychological Assessment and Human Development: Case Studies*, through the illustration of clinical cases, provides a vast contextual exploration of the setting of psychological assessment, considering its scope in terms of developmental continuum. The book contributes to discussions that permeate realistic and deeply problematized diagnostic differentiation, in addition to exploring comorbidities that may have an impact on therapeutic outcomes. The reader goes deeply into the setting and decision-making process of psychodiagnosis. Therefore, he is

called upon to share and develop clinical reasoning in the assessment process. In contrast, the usual literature with purely theoretical resources, does not acknowledge the vicissitudes of clinical praxis. It is also worth mentioning the discussion of the interdisciplinary complexity inherent to the assessment of subjects in the context of socio-affective vulnerability.

Reference

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About the author:

Joana Corrêa de Magalhães Narvaez is a Professor of Universidade Federal de Ciências da Saúde (UFCSPA). Psychologist graduated by Pontifícia Universidade Católica do Rio Grande do Sul (2004). Expert in Clinical Psychology by Contemporâneo - Instituto de Psicanálise e Transdisciplinaridade. Master degree in Medical Science by Universidade Federal do Rio Grande do Sul (UFRGS), Doctor degree in Medical Science emphasis in Psychiatry by UFRGS. Professor of Professional Master in Prevention and assistance to alcohol and other drugs of Hospital de Clínicas de Porto Alegre. Reviewer of journals of chemical addictions and clinical psychology.

ORCID: <https://orcid.org/0000-0001-5972-4722>

E-mail: jcmnarvaez@ufcspa.edu.br / jonarvez@gmail.com

Contact:

Rua Sarmiento Leite, 245 – sala 208, prédio 1

Porto Alegre-RS, Brasil

Fone: +55 (51) 3303-8700

Celular: +55 (51) 9.9989-4202

CEP: 90050-170