

(student's name)
HS 204
Spring 2010
Revised2 SP-12

PSYCHOSOCIAL ASSESSMENT---EXAMPLE---EXAMPLE---EXAMPLE

Presenting Problem

Stan is a 32 year-old, homosexual, white male. Stan has been using methamphetamine for the past eight years. Initially, he was smoking the drug. Five years ago he began using intravenously. Stan injects methamphetamine 3-5 times daily.

Personal Status

Stan is the middle of three siblings. He has an older sister and a younger brother. Stan was born and raised in Arkansas. He moved to the West Coast at the age of 20. He was thrown out of the family home after revealing his homosexuality. Stan became sexually active at the age of 13. He has been engaging in promiscuous, unprotected sexual activity since the age of 20. Stan was involved in the gay party circuit in the San Francisco Bay area during the ten years he lived there. Upon moving to NJ, he began frequenting the gay bathhouses in NYC. The majority of Stan's social circle is made up of individuals he met in these establishments. Stan reports that they are all methamphetamine users. Stan has been sexually involved with several of them.

Drug History and Current Pattern of Use

Stan first began experimenting with drugs at the age of 15. He drank alcohol every weekend and smoked marijuana on an almost daily basis throughout his teens. At 20 he began drinking heavily and experimenting with Ecstasy. At 24 Stan was introduced to methamphetamine. He was initially smoking it 3-6 times weekly. Five years ago he began injecting. Within a few months he became a daily user. He is currently injecting methamphetamine 3-5 times daily.

Substance Abuse Treatment History

Stan was in a recovery center in California for thirty days five years ago. He successfully completed treatment and attended Narcotic Anonymous meetings for several months. He relapsed after six months. After being arrested in New Jersey for CDS possession he entered a local detox center. He successfully completed its twenty-one day Rehabilitation Program. He did not follow up with aftercare or NA meetings. After testing positive for methamphetamine at probation, Stan was admitted to another detox facility for five days. He must complete an Intensive Outpatient Program or he faces a three-year prison term.

Medical History and Current Status

Stan is HIV positive and has been for four years. He is asymptomatic and his T-cell count is well within the normal range. Stan has had syphilis and gonorrhea in the past.

Family History and Current Relationships

Stan was raised in a two parent household in rural Arkansas. The family was Catholic of Irish and Scottish descent. Stan's father was an alcoholic and both physically and verbally abusive. The family was upper middle class. His father was a car salesman. His mother was a dietician. Both parents are deceased. Stan was estranged from his father from the age of 20. He maintained periodic phone contact with his mother until her death three years ago. His father, brother, and sister stopped speaking to him when he revealed his homosexuality. Stan currently lives with his partner of 10 years. The relationship is strained due to Stan's drug use and infidelity.

Positive Support Systems

Stan's live-in partner is drug free and supportive of Stan seeking treatment. Stan recently began attending services at church. He has made a few friends there and states that the Pastor has been a great support to him. The Pastor has asked him to join the church's homeless outreach program.

Crime and Delinquency

Stan was arrested for being drunk and disorderly on two separate occasions in California. Both times he was fined \$500. Stan was arrested for possession of methamphetamine in New Jersey several months ago and placed on probation. Stan has tested positive for methamphetamine twice since being placed on probation. If he does not enroll in and complete an Intensive Outpatient Program he is facing up to three years in prison.

Education

Stan is a high school graduate. He briefly attended a community college but dropped out after two semesters. He appears to be of above average intelligence. He reports being an A/B student in high school.

Employment

Stan is currently unemployed. In the past he has worked mainly as a waiter and/or bartender. His longest place of employment was at a restaurant in California. He worked there for two years. Over the past seven years Stan has been fired from ten different places of employment for excessive absenteeism and once for stealing.

Readiness for Treatment

Stan accepts the fact that he is in need of treatment. Furthermore, Probation is requiring that he receive treatment or be sent to prison.

Resources and Responsibilities

Stan is currently receiving Medicaid through the City Welfare system. This will cover the cost of his treatment. It is his responsibility to provide proof of insurance coverage to the Billing Department.

Mental Status Exam Narrative

Stan is a thirty-two year old single, white, homosexual male. He appeared older than his stated age. His dress was appropriate for the setting and meticulous. He wore tan khaki pants with brown leather belt, white polo shirt, neatly tucked in, and brown loafers. His grooming was adequate. He was cooperative in the interview answering all questions politely. His mood was both anxious and defensive.

Stan's affect was appropriate to content; he was not overly emotional but reasonably distressed over his current situation. His rate of speech was somewhat rapid when addressing stressful subjects, but otherwise normal. His tone was average throughout the interview. His thought processes were logical; yet he did not demonstrate proper insight as to his own actions, how they contributed to his situation, and his continued inability to remain drug free. His thought content was relevant.

Stan did not demonstrate psychotic symptoms. He denied any current hallucinations; however, he admitted to having had olfactory (i.e.; smelling something burning) and auditory (i.e.; hearing police sirens) hallucinations while under the influence of methamphetamine. He did not deny obsessions and compulsions. He did not deny having a germ phobia. Stan was oriented to time, place, and person. His memory was impaired. His intelligence was estimated to be above average. His judgment and impulse control were inadequate. He denied both suicidal and homicidal ideation.

Diagnosis

- AXIS I: Amphetamine dependence 304.40
- AXIS II: Obsessive Compulsive Personality Disorder 301.4
- AXIS III: HIV positive
- AXIS IV: Problems related to interaction with the legal system (probation)
- AXIS V: GAF 61

Treatment Plan

OUTLINE---OUTLINE---OUTLINE

A. PROBLEM:

DSM-IV Diagnosis

B. PROBLEM DEFINITION:

Only connected to DSM-IV diagnosis. Why is the client there?

C. STRENGTHS AND WEAKNESSES:

Examples of Strengths: articulate
empathetic
bright

Examples of Weaknesses: enabler
co-dependent
people-pleaser

D. GOALS:

Outcome from counseling.

E. STRATEGIES OR INTERVENTIONS:

Examples: cognitive behavior
referral to N/A
referral to ACOA
referral to A/A
relaxation
role-playing
desensitization
assist client in identifying life changes
rehearsal to refuse high risk situations

F. TYPE OF COUNSELING:

Example: Group Counseling _____ Xs weekly
Couples Counseling _____ Xs weekly
Individual Counseling _____ Xs weekly
and so forth.

Client's Personal Values and Attitudes

Being a homosexual male, Stan prefers to work with a female therapist to avoid any accusations of sexual impropriety on his part.

Counselor's Personal Values and Attitudes

The therapist was deeply moved by this client. He reminded the therapist of a close friend who passed away recently. The therapist's value system is such that she is open to dealing with a homosexual client without being judgmental.