

# [Using the dsm-iv global assessment of relational functioning](https://assignbuster.com/using-the-dsm-iv-global-assessment-of-relational-functioning/)

[Psychology](https://assignbuster.com/essay-subjects/psychology/)

Principally, this regards to gender and sometimes accepts the reality of the predicaments. This differs across culture or ethnic backgrounds, where some may deny or accept depending on their belief (Nolen-Hoeksema, 2011). For instance, mental ailments where some cultures attribute their occurrence as fueled by evil spirits, hence they lack any cure especially the indigenous Chinese. Another factor entails the detection of a single disorder in an individual. According to practitioners, a sole disorder may be a representative of comprehensive disorders in one category. Patients normally have multiple health predicaments that entail the multifaceted approach and treatment. This is primarily when dealing with couples who may seem not to comprehend well about their predicament.
Couple or family therapy encompasses openness amid the patient and the practitioner, so that the latter may be able to elicit the predicament effectively. This diagnostic process is appropriate since it enables a practitioner apply life cycle and developmental progress tool. This entails how the couple might have handled a related predicament together before. This would enhance that cooperation during the present ailment, which may be affecting one member (APA, 2000). The practitioner enhances their cooperation through encouraging communication and privacy where possible. This is especially if the predicament’s repercussions do not affect other members, for illustration, infertility. The approach is similar to a sole person’s diagnosis. Since, on some occasions, if the predicament is severe the practitioner may decide to involve a family member. The purpose of this is to ensure that the patient is accountable and adheres to the already set medical procedures (Yingling, 1998).
DSM-IV-TR assessment encompasses distinguishing features of V- codes, which must be the focus treatment by interacting with members of the relational unit (Nolen-Hoeksema, 2011). It is essential from the onset of the assessment to exclude psychological health identification to ease the process and attain the necessary results. The exercise can accommodate either one or two members meant to receive similar predicament’s treatment. If the predicament is the focus of the treatment, its recording should in Axis I, and if otherwise, the allocation is in Axis IV. GARF Scale mainly measures the universal role of a family whose basis is on five categories (Yingling, 1998, p. 10). The scale range stretches from one to a hundred. 1-20
I. Chaotic
II. 21-40 Seldom satisfactory
III. 41-60 Mainly unsatisfactory
IV. 61-80 Rather unsatisfactory
V. 81-100 Satisfactory
It is not appropriate to devise a separate DSM-IV-TR for members of the same family having the same problem. This is because the argument and allocation of predicaments follow almost similar Axis and information. Conversely, the serious limitation entails pointless distinctions where there is no exact measure of one’s vulnerability, but mere generalization