



Natalis Integrated Health Inventories

# Outcomes Report

**Self-assessment result for:**

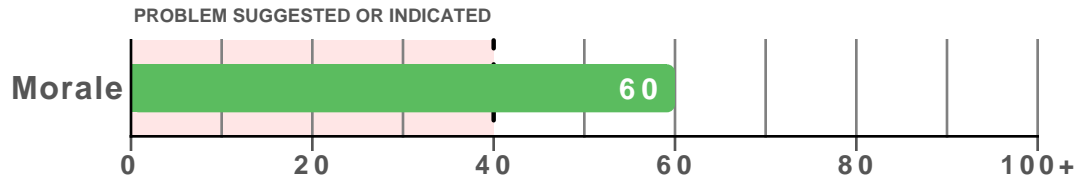
- HDI-S (Health Dynamics Inventory)



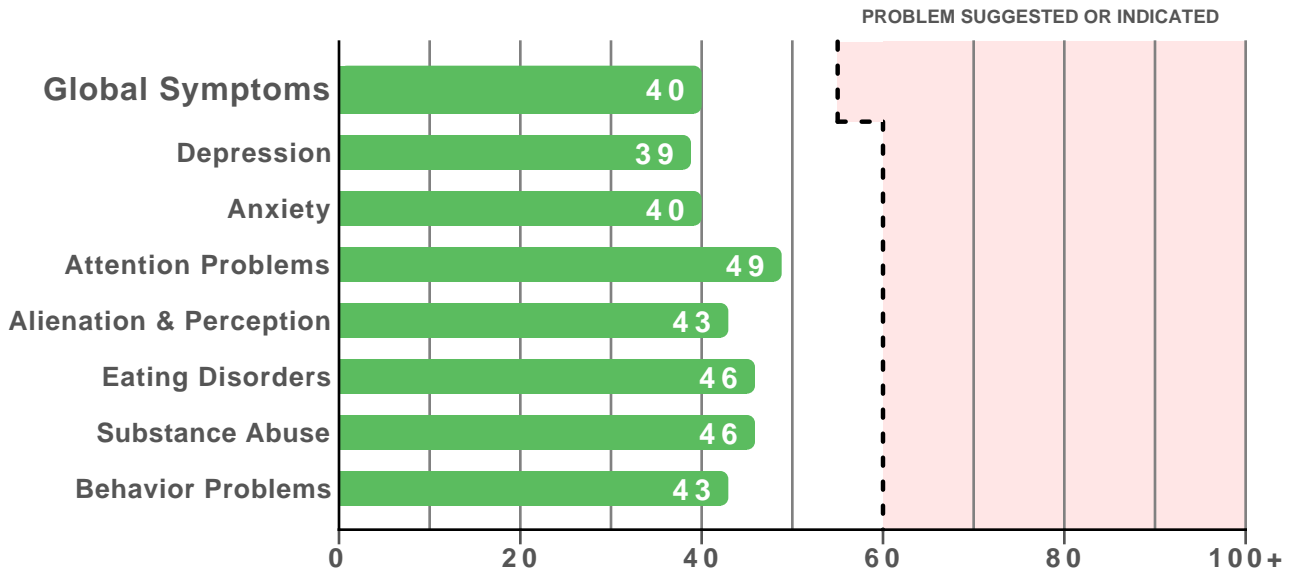
## Scale and Subscale T-Scores for this Administration

**No Problem Suggested**      **Problem Suggested**      **Problem Indicated**

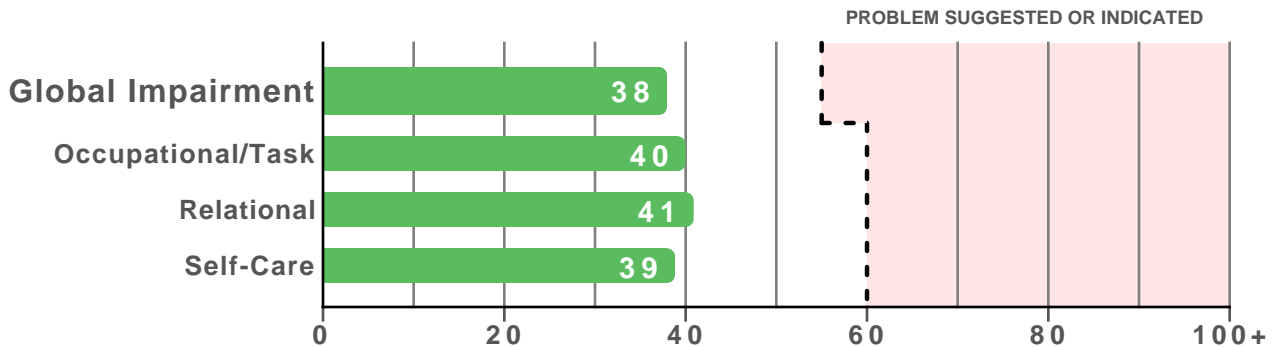
### Morale



### Symptoms



### Impairment



If both patient and non-patient norms are greater than or equal to 60, then the problem is INDICATED. If one of the norms is greater than or equal to 60, but the other one is less than 60, then the problem is SUGGESTED. If both norms are less than 60, then there is NO PROBLEM.

## Summary of Scale and Subscale Scores

Scale Name	Your baseline values			Your most recent values		Std. Range	Comments
	9/8/14	9/15/14	1/2/15	2/3/15			
Morale	16	38	38	60		≥ 40	
Global Impairment	59	52	59	38		< 55	
Occupational/Task Impairment	57	48	53	40		< 60	
Relational Impairment	59	50	54	41		< 60	
Self-Care Impairment	57	57	65	39		< 60	
Global Symptoms	60	46	67	40		< 55	
Depression	52	42	55	39		< 60	
Anxiety	58	43	73	40		< 60	
Attention Problems	56	49	56	49		< 60	
Alienation & Perception	64	49	70	43		< 60	
Eating Disorders	58	46	63	46		< 60	
Substance Abuse	59	49	63	46		< 60	
Behavior Problems	63	58	63	43		< 60	

## Examination of Individual Item Responses

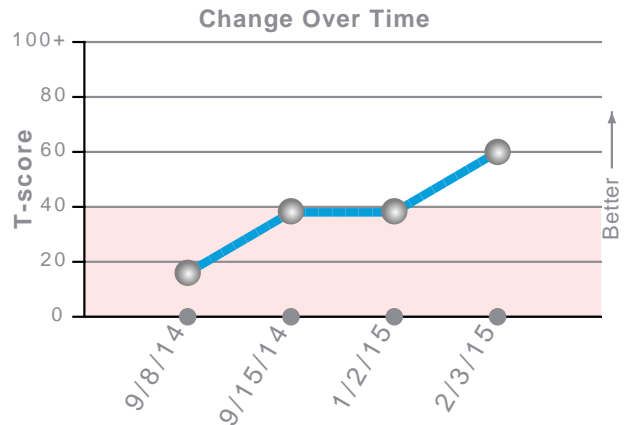
\* indicates a critical item

### Morale

No Problem Suggested

The Morale scale measures emotional distress and well-being. Higher values are better for morale.

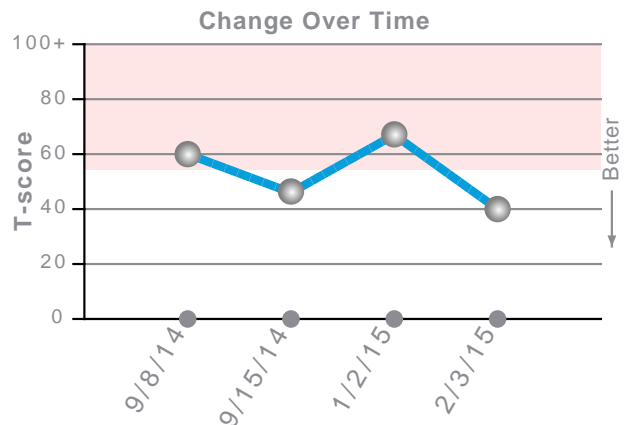
Current health	Very good
How distressed	Not at all
How content	Mostly
How happy	Mostly



### Global Symptoms

No Problem Suggested

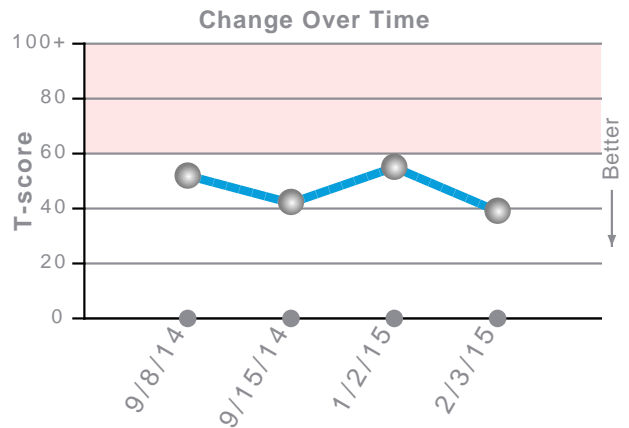
Global Symptoms measure a wide variety of emotional or behavioral symptoms. All of the subscale items are included in the Global Symptoms scale. Lower values are better across all symptoms.



### Depression

No Problem Suggested

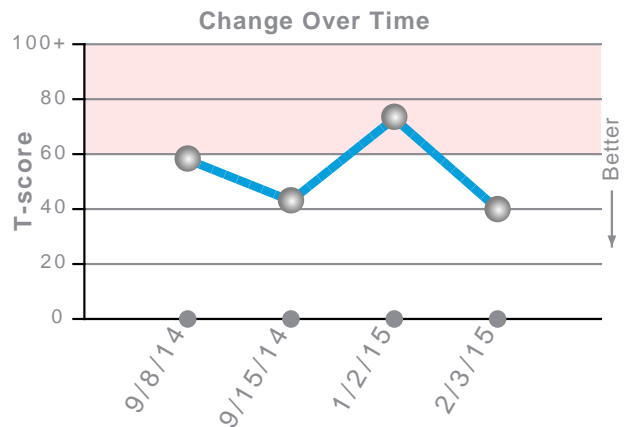
Suicide thoughts*	<input type="text" value="Not at all"/>
Feeling sad	<input type="text" value="Not at all"/>
Lack of interest	<input type="text" value="Not at all"/>
Low self-esteem	<input type="text" value="Not at all"/>
Mood swings	<input type="text" value="Not at all"/>
Appetite change	<input type="text" value="Not at all"/>
Feeling fatigued	<input type="text" value="Not at all"/>
Difficulty expressing self	<input type="text" value="Not at all"/>
Sleep difficulties	<input type="text" value="Rarely"/>



### Anxiety

No Problem Suggested

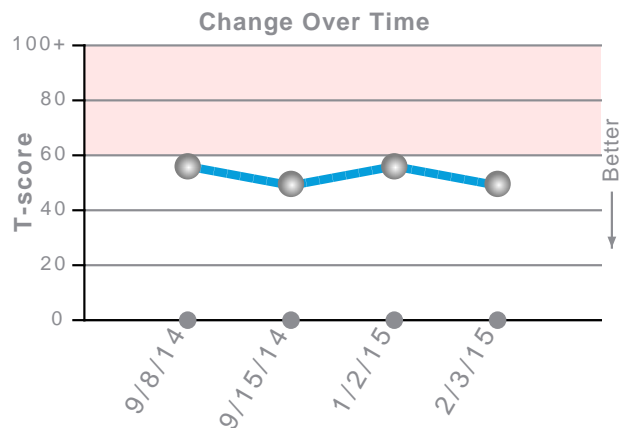
Intrusive thoughts*	<input type="text" value="Not at all"/>
Feeling anxious	<input type="text" value="Not at all"/>
Panicky feelings	<input type="text" value="Not at all"/>
Excessive worry	<input type="text" value="Not at all"/>
Pain	<input type="text" value="Not at all"/>
Nightmares	<input type="text" value="Not at all"/>



### Attention Problems

No Problem Suggested

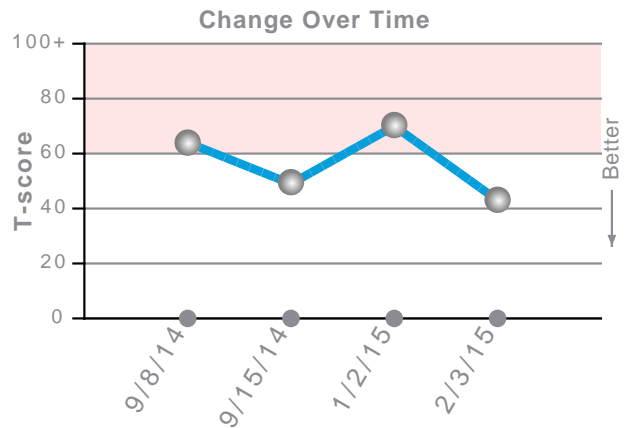
Paying attention	<input type="text" value="Rarely"/>
Racing thoughts	<input type="text" value="Not at all"/>



### Alienation & Perception

No Problem Suggested

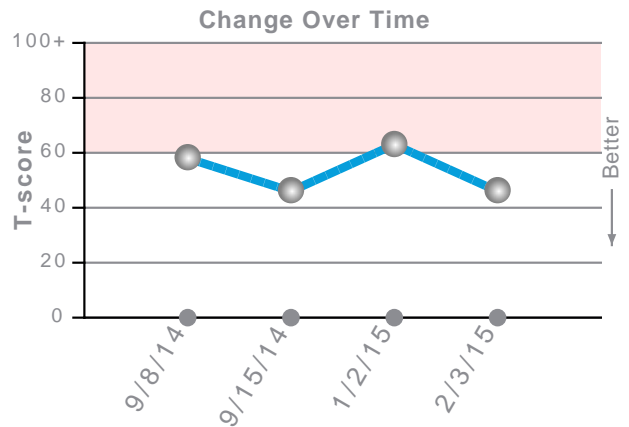
Controlled actions*	<input type="text" value="Not at all"/>
Hearing or seeing things*	<input type="text" value="Not at all"/>
Racing thoughts	<input type="text" value="Not at all"/>
Unusual beliefs	<input type="text" value="Not at all"/>



### Eating Disorders

No Problem Suggested

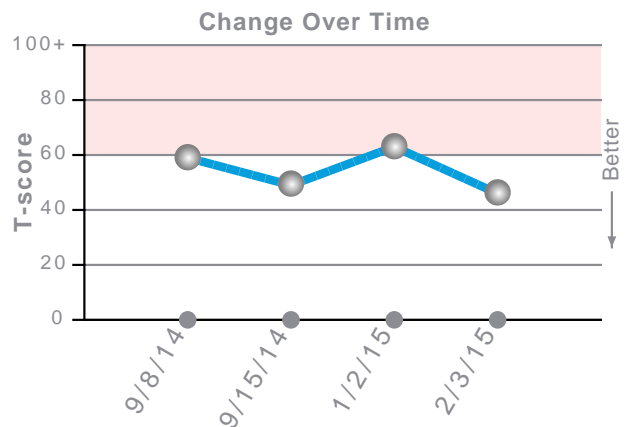
Purging*	<input type="text" value="Not at all"/>
Fear of gaining weight	<input type="text" value="Rarely"/>
Binge eating	<input type="text" value="Not at all"/>
Troubled by body	<input type="text" value="Not at all"/>



### Substance Abuse

No Problem Suggested

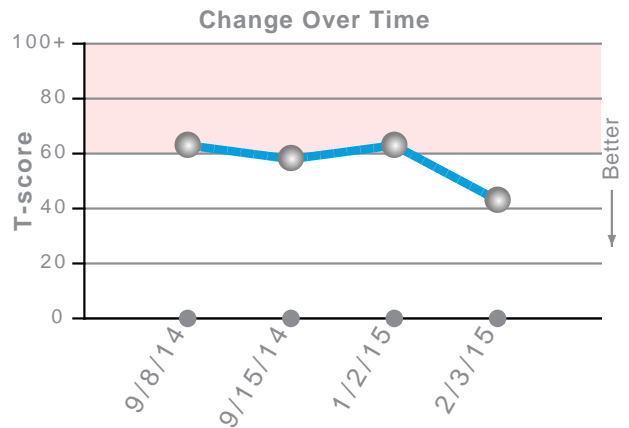
Feelings of guilt*	<input type="text" value="Not at all"/>
Excessive use*	<input type="text" value="Not at all"/>
Lying or hiding*	<input type="text" value="Not at all"/>
Cravings	<input type="text" value="Not at all"/>



### Behavior Problems

No Problem Suggested

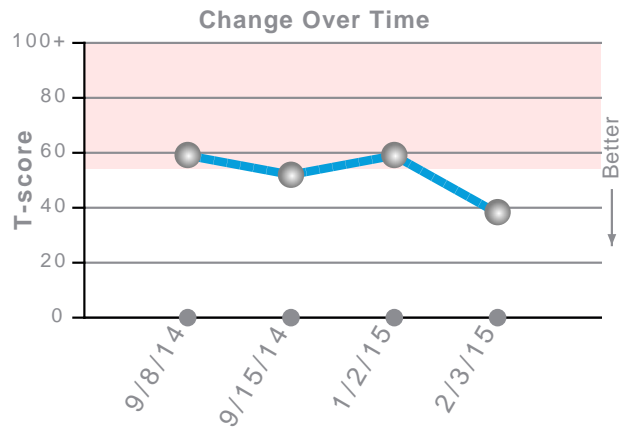
Sexual interest*	<input type="text" value="Not at all"/>
Using force*	<input type="text" value="Not at all"/>
Feeling out of control*	<input type="text" value="Not at all"/>
Outbursts	<input type="text" value="Not at all"/>



### Global Impairment

No Problem Suggested

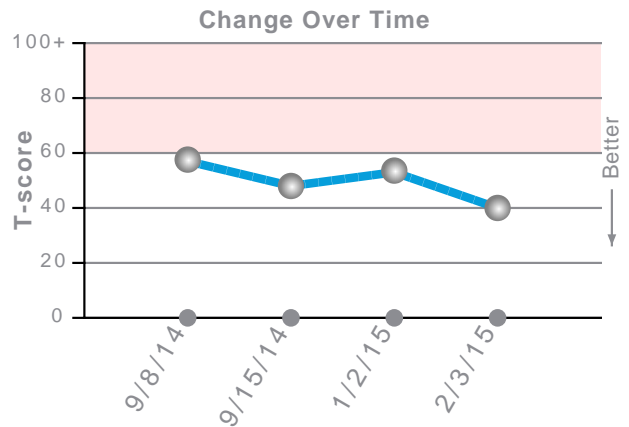
The Global Impairment scale items assess problems fulfilling the major roles of one's life. All of the subscale items are included in the Global Impairment scale. Lower values are better across all impairments.



### Occupational/Task Impairment

No Problem Suggested

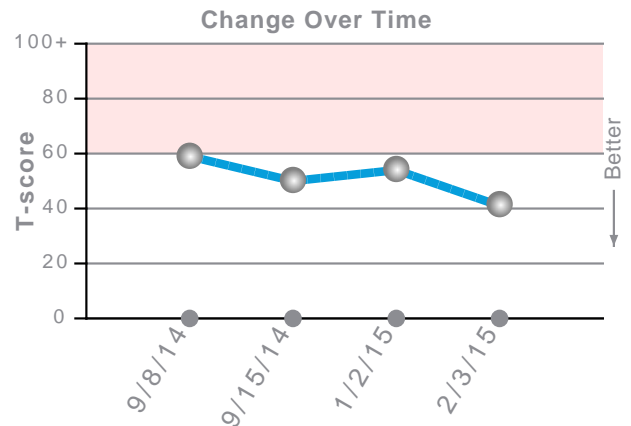
Begin tasks	<input type="text" value="No difficulty at all"/>
Concentrate	<input type="text" value="No difficulty at all"/>
Meet demands	<input type="text" value="No difficulty at all"/>
Interested	<input type="text" value="No difficulty at all"/>



### Relational Impairment

No Problem Suggested

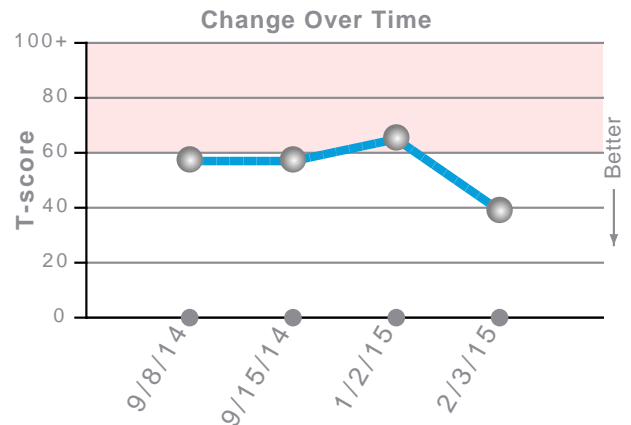
Relationship with friends	No difficulty at all
Relationship with spouse or partner	No difficulty at all
Meet obligations	No difficulty at all
Sexual satisfaction	No difficulty at all



### Self-Care Impairment

No Problem Suggested

Maintain good diet	No difficulty at all
Enjoyment from leisure	No difficulty at all
Manage stress	No difficulty at all
Help self feel good	No difficulty at all



## Detailed Interpretation of HDI-S

### Morale Scale

**Morale: No Problem Suggested (T-Score: 60)**

The Morale Scale measures emotional distress and general well-being. Persons with poor morale exhibit a general dissatisfaction with life, a sense of hopelessness about the future, and general negative affective or emotional tone. On the HDI-S, the Morale Scale comprises the first four items.

This patient's Morale Scale score was about as high as that obtained by most nonpatients, and was considerably better or higher than that of most of the patient sample. This suggests that she is experiencing less distress and dissatisfaction than most persons seeking mental health treatment. While not unheard of, such a score is unusual. Alternatively, she may have made some recovery and is showing response to treatment. Careful evaluation of the Symptom and Impairment Scales and Subscales to determine why she is not particularly distressed about the current situation may be warranted.

### Global Symptoms Scale and Subscales

**Global Symptoms: No Problem Suggested (T-Score: 40)**



The Global Symptoms Scale items measure a wide variety of emotional or behavioral symptoms. There are 32-symptom items, which constitute seven subscales. All of the items are included in the Global Symptoms Scale.

This patient's Global Symptoms Scale score was at or lower than the median score obtained by the nonpatient sample. That is, about half of the sample of nonpatients obtained higher scale scores than this patient. (Less than 25% of the patient sample obtained scores in this range.)

The results indicate that she did not have scores in the clinical range on any of the symptom subscales.

**Depression: No Problem Suggested (T-Score: 39)**

This patient's Depression Subscale score was within the average range. Specific symptoms may have been reported, however, that may be important to evaluate in more detail. Such problems are commonly endorsed by nonpatients as well as patients. Nonetheless, it is strongly suggested that further evaluation of these issues is conducted. Further inquiry may reveal more problems than have been acknowledged.

She reported the following specific symptoms of depression:

No symptoms reported

**Anxiety: No Problem Suggested (T-Score: 40)**

This patient's Anxiety Subscale score was within the average range. Specific symptoms may have been reported, however, that may be important to evaluate in more detail. Such problems are commonly endorsed by nonpatients as well as patients. Nonetheless, it is strongly suggested that further evaluation of these issues is conducted. Further inquiry may reveal more problems than have been acknowledged.

She reported the following specific symptoms of anxiety:

No symptoms reported

**Attention Problems: No Problem Suggested (T-Score: 49)**

This patient's Attention Problems score was within the average range. Specific symptoms may have been reported, however, that may be important to evaluate in more detail. Such problems are commonly endorsed by nonpatients as well as patients. Nonetheless, it is strongly suggested that further evaluation of these issues is conducted. Further inquiry may reveal more problems than have been acknowledged.

She reported the following specific symptoms of attention:

No symptoms reported

**Alienation & Perception: No Problem Suggested (T-Score: 43)**

This patient's Alienation and Perception Subscale score was within the average range. Specific symptoms may have been reported, however, that may be important to evaluate in more detail. The items ask about delusions or social alienation experiences (odd beliefs, feelings of being controlled), about auditory or visual hallucinations, and about racing thoughts or excessive energy. Although even nonpatients occasionally endorse some of these items, it is nonetheless important that such experiences be further evaluated. Further

inquiry may reveal more problems than have been acknowledged.

She reported the following specific symptoms of alienation and perception problems:

No symptoms reported

**Eating Disorders: No Problem Suggested (T-Score: 46)**

This patient's Eating Disorders Subscale score was within the average range. Specific symptoms may have been reported, however, that may be important to evaluate in more detail. The items assess the behavioral (purging, binge eating) and cognitive (fear of weight gain, being troubled by one's body) symptoms associated with the eating disorders. Some problems are commonly endorsed by nonpatients as well as patients. Nonetheless, it is strongly suggested that further evaluation of these issues is conducted. Inquiry may reveal more problems than have been acknowledged.

She reported the following specific symptoms of eating disorders:

No symptoms reported

**Substance Abuse: No Problem Suggested (T-Score: 46)**

This patient's Substance Abuse Subscale score was within the average range. Specific symptoms may have been reported, however, that may be important to evaluate in more detail. The items ask about common affective (cravings, feeling guilty) and behavioral (using excessively, lying) aspects of alcohol and drug use problems. Some problems are commonly endorsed by nonpatients as well as patients. Nonetheless, it is strongly suggested that further evaluation of these issues is conducted. Inquiry may reveal more problems than have been acknowledged.

She reported the following specific symptoms of substance use disorders:

No symptoms reported

**Behavior Problems: No Problem Suggested (T-Score: 43)**

This patient's Behavior Problems Subscale score was within the average range. However, specific items have been acknowledged that may be important to evaluate in more detail. The items ask about problems with anger management (angry outbursts, using force, and feeling out of control) and about sexual interest, impulses, or behavior. Some problems are commonly endorsed by nonpatients as well as patients. Nonetheless, it is strongly suggested that further evaluation of these issues is conducted. Inquiry may reveal more problems than have been acknowledged.

She reported the following specific symptoms of behavior problems:

No symptoms reported

**Global Impairment Scale and Subscales**

**Global Impairment: No Problem Suggested (T-Score: 38)**

The Global Impairment Scale items assess problems fulfilling the major roles of one's life. There are 12 impairment items, which constitute three subscales. All of the items are included in the Global Impairment Scale.

This patient's Global Impairment Scale score was at or lower than the median score obtained by the nonpatient sample. That is, about half of the sample of nonpatients obtained higher scale scores than this patient. (Less than 25% of the patient sample obtained scores in this range.)

The results indicate that she did not have scores in the clinical range on any of the impairment subscales.

**Occupational/Task Impairment: No Problem Suggested (T-Score: 40)**

This patient's Occupational/Task Impairment Subscale score was within the average range. However, specific items should be further explored. This subscale evaluates problems at work or completing tasks. In this area of functioning, the following impairments were reported on the HDI-S:

No impairment reported

**Relational Impairment: No Problem Suggested (T-Score: 41)**

This patient's Relational Impairment Subscale score was within the average range. However, specific items should be further explored. This subscale evaluates patient's connections to family and friends, as well as sexual intimacy and comfort. In this area of functioning, the following impairments were reported on the HDI-S:

No impairment reported

**Self-Care Impairment: No Problem Suggested (T-Score: 39)**

This patient's Self-Care Impairment Subscale score was within the average range. However, specific items should be further explored. This subscale evaluates the patient's capacity for self-care such as health habits and stress management. In this area of functioning, the following impairments were reported on the HDI-S:

No impairment reported

## Confidence and Motivation

Two items on the HDI-S evaluate confidence in and motivation for treatment. This patient's responses to these items are compared to the responses of other patients.

This patient indicated feeling either "Very" or "Extremely" confident that she would be able to learn to deal with the problem(s). In the large sample of patients, most (61%) indicated this level of confidence. However, this patient also indicated that it was "Not at all" important to be in treatment at this time. Only about 1 in 10 patients in the large sample showed such low motivation for treatment.

In summary, this patient appears to be adequately confident that treatment will help, but she expressed very low levels of motivation for treatment. Issues of motivation should be addressed sooner rather than later in treatment. The clinician might encourage the patient to consider why she sought treatment and to strive for

those goals

## Response To Treatment

### 1. Morale

If the patient has had between 1 and 3 treatment sessions or has just begun medications ...

Between the first and third sessions or early in medication treatment, the patient's Morale score will often improve (increase) slightly. In contrast, this patient has experienced a rapid and dramatic improvement in Morale. Change in the positive direction indicates a remoralization of the patient, indicating that he or she is feeling more hopeful and positive. Such an early response suggests the beginnings of a functional treatment relationship and/or medication response and often predicts a successful course of treatment. No adjustment to services seems necessary.

If the patient has had between 4 and 9 treatment sessions or has been using medications for 6 to 8 weeks ...

Changes in Morale scores of this magnitude are expected at this stage in treatment. Such change indicates positive improvement and often predicts a successful course of treatment. Evaluation of change on targeted symptoms and functioning should indicate any need for treatment plan changes.

If the patient's treatment is at or beyond the 10th session or has been using medications for 2 to 4 months...

Changes in Morale scores of this magnitude are expected at this stage in treatment. It indicates a positive adjustment and progress in treatment. Evaluation of change on targeted symptoms and functioning should indicate any need for treatment plan changes.

### 2. Change in Critical Items

No critical items showed an increase in severity.

### 3. Change in Confidence in Treatment

The patient has reported a change in the importance of treatment. If the scores on any symptom or impairment scale or subscale is increasing you should consider whether this represents a loss of motivation or discouragement about treatment, or whether it is a reflection about the treatment experience.

## Overview of HDI-S

The Health Dynamics Inventory–Self (HDI–S) is a self-report questionnaire for adults (persons age 14 and older) that was developed to provide a valid, concise, and easily understandable measure of mental health problems.

The HDI–S was normed on samples of approximately 2,100 mental health treatment outpatients and 1500 nonclinical volunteers. This report provides information about the respondent's scores, how she compares to the sample of nonpatients, and what subscales are elevated. See the Health Dynamics Inventory Technical Manual (2003, published by MHS) for more information about the questionnaire and interpreting its results. The HDI–S is designed to correspond to the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV; APA, 1994) criteria for mental illness. According to the DSM-IV, mental disorders comprise a set of related symptoms (which define specific disorders, such as depression) that are accompanied by significant emotional distress and/or impaired role functioning. Except where noted, in the report that follows, the scores obtained by this patient were compared to scores obtained by the sample of over 1,500 nonpatients (persons from the general public). The HDI–S measures all three of the following constructs:

### **Morale**

Mental health problems are usually (but not always) characterized by significant emotional distress. Distress is often expressed as painful affect, general dissatisfaction with one's life, or hopelessness about the future. The opposite of distress is "morale," which is the term used in the HDI-S.

### **Symptoms**

Mental health problems are characterized by a variety of emotional or behavioral symptoms, such as dysphoria, worry, angry outbursts, low self-esteem, and excessive drinking. Combinations of symptoms constitute the criteria for specific disorders, such as major depression, panic disorder, and alcohol dependence.

### **Impairment**

Mental health problems are usually (but not always) associated with significant problems fulfilling the major roles of one's life. Persons suffering mental illness often have difficulty with relationships and with work.

## Cautionary Remarks

As with all computer-generated reports, certain cautions need to be taken. This computerized report is meant to act as an interpretive aid and should not be used as the sole basis for intervention or clinical diagnosis. This report works best when combined with other sources of relevant information. The report is based on an algorithm that produces the most common interpretations for the scores that have been obtained. Atypical interpretations must be explored in other ways and on a case-by-case basis.

Other cautions specific to the HDI-S must be noted. First, the HDI–S was normed on patients and nonpatients who took the questionnaire voluntarily and who completed it in a single setting. Second, the HDI–S is intended to be taken by persons who are both willing and capable of disclosing their mental health problems for the purposes of an evaluation. Therefore, extreme caution should be used when examining or interpreting the results from any person who took this unwillingly or under coercion, or who did not understand or agree to take it as part of an evaluation of her mental health status.