

8.1 Diagnostic systems and disorder classification: evidence and transfer

Name: _____ Class: _____ Date: _____

Total: 8 marks**KEY WORDS** diagnostic criteria • diathesis-stress model -

Objective

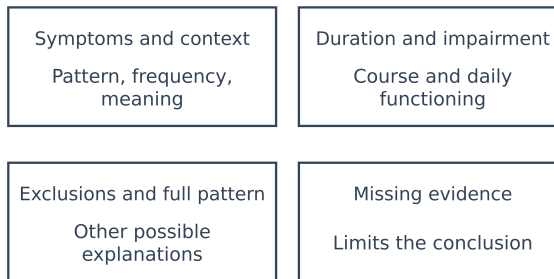
Interpret diagnostic evidence under the recorded DSM-5-TR framework without diagnosing from incomplete vignettes; Apply the diathesis-stress model to separate predisposition from trigger; Distinguish commonly confused disorders by their defining features. Original practice and authored marking guidance.

1 Key knowledge and worked examples

diagnostic criteria : The listed symptom, duration, impairment and exclusion requirements for a classification. **diathesis-stress model** - : An account of how vulnerability and environmental stress jointly affect risk.

The recorded teaching names DSM-5-TR; the historical ETS practice form is not authority for every current diagnostic criterion. A diagnosis requires its complete pattern and exclusions under the applicable manual. Duration is one piece of evidence, never a sufficient decision rule. Predisposition and stress are risk concepts: neither a family history nor an adverse event makes an outcome inevitable. Avoid classifying real people in classroom practice.

Review the evidence together



No single domain settles a diagnosis.

Worked case. A fictional vignette supplies a recent adverse event and two symptoms but omits impairment, exclusions and a full assessment. What conclusion is justified?

The vignette identifies relevant evidence and missing information. It cannot establish a diagnosis. A duration threshold alone cannot turn a short account into an alternative disorder. The correct educational response is to name the missing criterion domains and source/version, not supply personal advice.

2 Practice

2.1 A classroom vignette gives two symptoms and a duration, but omits impairment and exclusions. Which conclusion is justified? ^[1]

A. A diagnosis is established B. Duration alone selects a different diagnosis C. Further criterion evidence is needed D. The cause is established E. A treatment can be selected

2.2 In the diathesis-stress model, a family history of schizophrenia together with a recent bereavement maps onto: ^[1]

A. diathesis: bereavement; stress: family history B. diathesis: family history; stress: bereavement C. both are diatheses D. both are stressors E. neither enters the model

2.3 Revisit the worked case. State one conclusion its evidence supports and one stronger conclusion it does not support. Explain the difference. [2]

3 Exam-style questions

3.1 Two fictional people share a family risk factor; only one has a later stressor and difficulty. Explain the diathesis-stress interpretation and its limit. Give the interpretation, supporting reasoning, a relevant alternative or limitation, and an appropriate check. [4]

Solutions

2.1 Answer: C. The missing criterion domains prevent a complete classification; duration alone is insufficient. The other options do not satisfy the stated defining conditions.

2.2 Answer: B. The pre-existing vulnerability is the diathesis; the later trigger is the stress. Compare the exact process, design or evidence, rather than an associated keyword.

2.3 Use the worked case evidence to support a bounded claim and explain why a causal, universal or stronger claim needs additional evidence. The claim must fit the specific design and observed process.

3.1 The shared factor represents a possible vulnerability; the later event represents possible stress. An interaction account proposes that vulnerability and environment jointly affect risk. This comparison is consistent with the model, but cannot prove causation, necessity or sufficiency. Other exposures and protective factors may differ. Award B1 each (authored) for the interpretation, its reasoning, a relevant limitation/alternative and an appropriate check, up to four points. Accept a different justified answer satisfying these demands.