

## *Book Review / Recension d'ouvrage*

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### **DSM-5 Diagnosis in the Schools**

by Renée Tobin and Alvin House

New York, NY: The Guilford Press, 2016, 268 pages

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### **Reviewed by/ Revu par**

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The *Diagnostic and Statistical Manual of Mental Disorders*, fifth edition (DSM-5; APA, 2013) is the most recent revision of the DSM. For all the praise and the criticisms it has received, the DSM-5 frequently serves as the diagnostic authority for practitioners. As it becomes more heavily integrated into the North American mental health system, it becomes increasingly important for school psychologists to not only have an understanding of the book's diagnostic criteria, but also how these criteria specifically apply to children. That being said, at a lengthy 947 pages, the DSM-5 can be intimidating to dive into. As Tobin and House noted in the beginning pages of their text, it is common for practitioners who are unfamiliar with the medical model to feel overwhelmed by the sheer amount of information in the DSM-5. As such, this book serves as a companion to the DSM-5 rather than as a replacement; it assists by clearly and concisely outlining relevant information for school practitioners about the child populations they work with.

DSM-5 Diagnosis in the Schools is divided into three main sections. The first is an exploration into diagnostic issues and the use of the DSM-5. This section served as a brief overview of the categorical classifications and a description of how the book is organized. This section should be helpful for those who have a cursory understanding of the DSM series, and it adequately lays the foundation to understanding the structure and functions

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of the DSM-5. Further, Tobin and House provided a brief overview of how developmental considerations should be integrated into diagnosis. Indeed, as the authors noted, children are not as static as adults in their cognitive performance and personality traits, and diagnosis is made further complex by the fact that children often do not present with the same sorts of symptoms as their aged counterparts.

The second section of the text delves into the guidelines for evaluation of presenting problems, examining topics such as intellectual disabilities and personality disorders. This section represents the main content of the book, and it is ultimately where this text shines. It provides a thorough overview of each category as it is represented in the DSM-5, how it relates to children, and issues with diagnoses that clinicians may encounter. Throughout the content, Tobin and House included heuristics for making certain diagnoses and identified occasions where diagnosing may be complex (such as circumstances where two disorders have similar or overlapping symptomatology).

Generally their grouping of topics per chapter were sensible and had a clear relationship to how the material is presented in the DSM-5. One chapter, however, grouped Autism Spectrum Disorder with Psychotic Disorders under the idea that they both represent highly atypical symptom patterns. This seemed like an unusual choice as this is not how they are represented in the DSM-5 and these disorders do not share many similarities outside of being “atypical.”

The authors concluded with a section on applications of the DSM-5 in school settings where prominent issues and topics were examined. This section is particularly relevant to American practitioners, as the authors take care to describe documentation and reimbursement procedures relevant to the United States of America.

Each section is enhanced by the inclusion of notes that discuss various clinical issues, such as DSM-IV comparisons and notes about the Individuals with Disabilities Education Improvement Act (IDEA). The IDEA notes are especially useful for American practitioners, but are still a useful reference for Canadian counterparts. One notable aspect was the inclusion of author notes, which provided a spotlight for the authors to input their own ideas and opinions about the DSM-5 and related issues. One such example is when the authors commented on the name change from “Mental Retardation” to “Intellectual Disability” (p. 40), which is a discussion I have engaged in myself on more than one occasion. While some readers may not agree with the opinions of the authors, it cannot be denied that these discussions evoke active thought and consideration from the

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reader, which, from a cognitive perspective, assists with learning and memory associations. Further, I appreciate that these opinions are presented separately from the primary body of text and are not meant to be represented as facts. It was interesting, however, that while the authors chose to discuss various hot topics, they did not to include any discussion about the removal of Asperger's as a diagnosis, which is considered to be a controversial decision.

Overall, I believe that the greatest strengths of this text are not only that it efficiently untangles the complexities of the DSM-V in an accessible way, but also tackles practical issues that are faced by practitioners when using the criteria and making diagnoses. The authors do a good job of anticipating questions and issues with each topic, and their notes allow them to present various concepts and facts without compromising the flow of their main text. The text is well-researched and uses a variety of literature to help enhance each of the sections. Altogether, the book is an excellent companion to the DSM-5 and serves to facilitate the understanding of the DSM to school practitioners.

### *References*

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders: DSM-5*. Washington, D.C: American Psychiatric Association.