DASH-II

Diagnostic Assessment for the Severely Handicapped (DASH-II)

The DASH-II is a psychopathology assessment questionnaire intended for people with severe to profound intellectual disability. It is completed by a relative, a caregiver or a professional who knows the person being assessed well. The tool explores 13 clinical domains, including anxiety, depression, mania, autism, schizophrenia, stereotypies, self-injury, sleep, eating and elimination disorders, and impulse control. In clinical practice, it helps the psychologist identify symptoms that are often difficult to verbalize, structure the interview, objectively document the frequency, duration and severity of the observed behaviors, and then guide the diagnostic assessment and follow-up. It is a screening and clinical decision-support tool, not a diagnosis in itself.

Number of questions	84 questions
Estimated duration	15 minutes
Language	English
Original name	Diagnostic Assessment for the Severely Handicapped
Target audience	Severe/profound ID
Authors	Johnny L. Matson, Wilkins I. Gardner, David A. Coe, Robert Sovner (1995)

Administer your questionnaires online

Send your patient a link: they answer from their phone or computer, and you receive the scored results by email.

View the questionnaire on mentaal.org ›

Scoring & interpretation

Each item is rated on three dimensions (frequency, duration and severity), generally on a scale from 0 to 2 based on the respondent's recent observations. Scores are summed by subscale. Interpretation relies on cutoffs specific to each domain. For several main subscales, clinical identification is based on a frequency score exceeding the reference cutoff in the manual. For some behavioral subscales, the presence of at least one item rated as clinically significant in severity may be enough to flag a problem to be explored. The results must be cross-checked with the clinical interview, developmental history, medical data and environmental context.

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- Automatic scoring
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“Mentaal has become an indispensable ally for structuring my assessments and deepening my clinical understanding of my patients.”

 Nolwenn P. - CBT Psychologist