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PSYCHOLOGICAL EVALUATION

NAME: Shedrick Hutson EXAMINER: Patricia B. Bruner, Ph.D.
DOB: 9/13/76 DOE: 6/24/94
AGE: 17-9 SCHOOL: dropped out two years ago
SEX: Male GRADE: 9
RACE: African-American

REASON FOR REFERRAL: Shedrick was referred for psychological evaluation by court order. Information from the evaluation was to be used for treatment and placement determinations.

TESTS AND TECHNIQUES USED:

Wechsler Adult Intelligence Scale - Revised
Wechsler Individual Achievement Test Screener
Bender-Gestalt
Rorschach
Thematic Apperception Test
Draw A Person Test
Clinical Interview
Review of Available Records

OBSERVATIONS: Shedrick is a tall young man of average weight for his height. He was dressed on the day of the evaluation in a tee shirt and jeans. He was somewhat impulsive and fidgety, but exhibited no difficulty with understanding or attending to the requirements of the testing. He appeared to exert his best efforts and the results below are felt to accurately reflect his current levels of functioning in the measured areas.

Shedrick's affect was one of palpable anger. When asked about this, he readily admitted to being angry "for a lot of years." He said that his anger becomes severe at times, and he experiences rage. He has considered harming himself or others when he becomes very angry. Shedrick said that he is angry "all the time". Although he intimated that he knew the cause of his continuing anger, he said that he did not want to discuss it with the examiner.

Shedrick Hutson
#1016101
Red Onion State Prison
P O Box 1900
Pound, Va 24279

In view of the degree of Shedrick's anger, his fire setting is ominous. Shedrick said that he does not intentionally set fires, but he is fascinated by fire and has often played with fire because it is interesting. He denied having any problem with control of his fires.

He said that he was agreeable to the testing because he wanted to leave St. Joseph's Villa. Shedrick said that he did not like the staff at the Villa because they "insinuate" that he is doing things such as smoking when he is not. He said that he curses at the staff. In the past, he admitted to fighting at school often and usually winning. He said that when he used to become angry at his mother, he simply left the house.

Shedrick said that he used to feel depressed, but now he does not usually have that feeling. He reported going to a psychiatrist a few times when he was 9 or 10, but said that he dropped out of therapy quickly.

INTELLECTUAL FUNCTIONING:

WAIS-R		PERCENTILE	CLASSIFICATION
VERBAL IQ:	114	82	high average
PERFORMANCE IQ:	99	47	average
FULL SCALE IQ:	108	70	average

SUBTEST SCALED SCORES:

VERBAL		PERFORMANCE	
Information	10 (12)	Picture Completion	8 (8)
Digit Span	10 (11)	Picture Arrangement	11 (12)
Vocabulary	10 (13)	Block Design	8 (8)
Arithmetic	10 (11)	Object Assembly	13 (14)
Comprehension	9 (10)	Digit Symbol	7 (7)
Similarities	13 (14)		

Shedrick functions in the uppermost limits of the average range of intelligence. There is a significant difference between his average performance skills and his high average verbal abilities. There is also some discrepancy among the performance subtests, suggesting uneven skill development.

Among the verbal subtests of the WAIS-R, Shedrick scored in the average range relative to age peers on subtests measuring his immediate recall, his ability to perform verbally presented arithmetic problems, and his use of common sense judgement. In the high average range were his knowledge of general information and his knowledge of vocabulary words. In the superior range was Shedrick's ability to determine similarities among disparate items.

Among the performance subtests, Shedrick scored in the low average range on a subtest requiring him to rapidly memorize and transpose numbers and symbols in a code. In the average range were his attention to detail and his skill in assembly of abstract designs from parts. In the high average range was his ability to sequence cause and effect. Shedrick scored in the superior range on a measure of his skill in assembly of everyday objects from parts.

This is a young man who should be able to easily progress from year to year in school. The fact that he has not done so suggests that factors other than his level of intelligence have impeded his performance. Shedrick's lack of attendance at school and his difficulty in getting along with others appear to have prevented his achieving as he might have.

ACHIEVEMENT SCREENING:

WIAT	PERCENTILE	STANDARD SCORE	GRADE
BASIC READING	39	96	9-7
MATHEMATICS REASONING	34	94	9-4
SPELLING	39	96	8-6

Shedrick's achievement in reading and spelling is consistent with his measured level of intellectual functioning. His score in mathematics reasoning is poorer than would be expected for one of his ability. Careless errors were responsible for this, as he consistently chose an appropriate strategy for solving the problems and then made errors in execution. He does not appear to have a learning disability.

VISUAL-MOTOR FUNCTIONING: Shedrick earned no errors on the Bender as would be expected for a person of his age and level of intelligence. He does not have a visual-motor dysfunction.

SOCIAL-EMOTIONAL FUNCTIONING: Projective testing as well as observation and interview information, suggest a seriously disturbed young man. Shedrick is angry, depressed, and lacking in hope for the future. Reality contact is adequate, but Shedrick perceives his current situation in a manner colored by his past experiences. This leads at times to inappropriate responses which will be confusing to others.

Shedrick appears to lack empathy. He deals poorly with emotions and does not perceive emotional warmth or nurturance in his surroundings. He is detached and alienated from others, anticipating criticism or conflict in interpersonal relationships. He does not appear to be emotionally close to either peers or relatives.

Sexual identity is appropriate. Self-esteem is poor, consistent with the many problems which Shedrick has experienced. His lack of conformity with typical rules regarding school attendance and behavior has led to a sense of independence which is greater than that experienced by many people his age. Unfortunately, he lags far behind his peers in his ability to relate to and care about others.

SUMMARY AND CONCLUSIONS: Shedrick functions in the uppermost limits of the average range of intelligence. His achievement in reading and spelling is consistent with his intellectual ability, but his mathematics skills are poorer than would be anticipated. However, Shedrick does not appear to have a specific learning disability. His poor score in mathematics appeared to be due to careless errors rather than lack of ability. Shedrick does not have a visual-motor dysfunction.

Shedrick's degree of chronic anger, his level of depression, and his hopelessness are of concern. He admits to an almost lifelong fascination with fire and lacks empathy for others. He also admits to having periods of rage where he has considered harming himself or others. Evaluation was requested due to his firesetting.

This examiner suggests that this young man is in need of treatment to address his rage, his depression, his hopelessness, his alienation, his fascination with fire, and his lack of empathy for others. At this point, Shedrick appears to represent a danger to others and possibly to himself. He should not be placed in a typical placement situation where he is accorded minimal treatment and maximum autonomy.

Any placement for Shedrick needs to be able to accommodate his need for extensive treatment as well as his need for placement. Outpatient treatment has not been successful because he and his family did not continue to participate. Shedrick's mother no longer wants him in her home, limiting her motivation to participate in family counseling. Shedrick has the ability to benefit from insight-oriented therapy and could participate individually rather than with family members because of his age and intelligence.

If Shedrick can be placed in a residential treatment facility with very careful supervision and required therapy, this might be ideal. He may qualify for treatment in an inpatient mental health facility. If not, then he should be evaluated for medical intervention and treatment with a placement where he does not pose a risk to the welfare of those around him. Eventual placement and treatment within the Department of Corrections is anticipated unless extensive treatment is accomplished very soon.

Thank you for this interesting referral.



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