# SPECTRA™
# Indices of Psychopathology

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## Applications

For use as a primary or supplemental measure of adult psychopathology

Provides information relevant for intake, clinical diagnosis, treatment planning, and monitoring
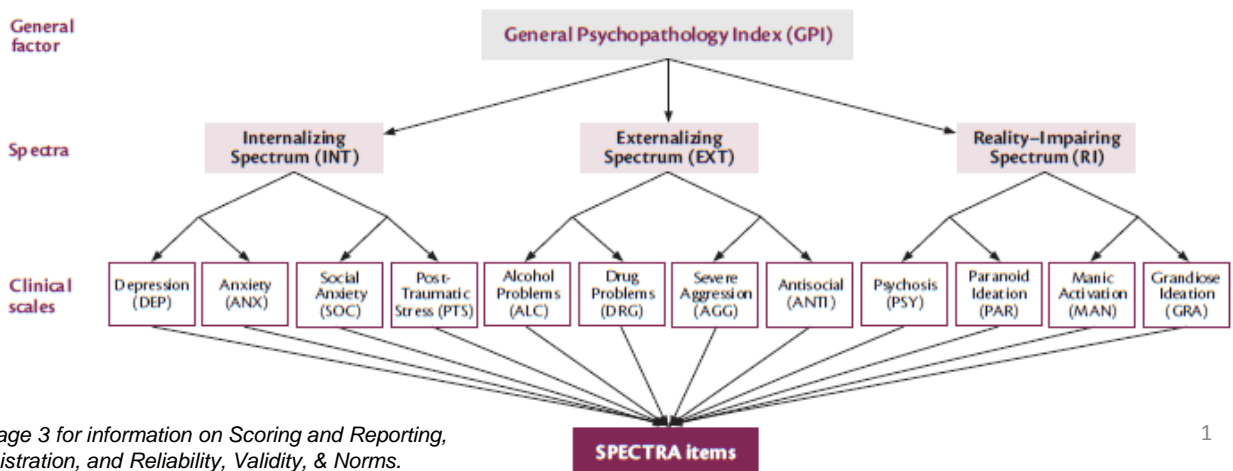
Appropriate for ages 18 years and older

## Overview

- Developed using a rational-empirical method based on the three-factor quantitative model.
- Can be used to evaluate individuals in a variety of clinical settings.
- Composed of 12 clinical scales: Depression (DEP), Anxiety (ANX), Social Anxiety (SOC), Post-Traumatic Stress (PTS), Alcohol Problems (ALC), Severe Aggression (AGG), Antisocial (ANTI), Drug Problems (DRG), Psychosis (PSY), Paranoid Ideation (PAR), Manic Activation (MAN), and Grandiose Ideation (GRA).
- Also includes three supplemental scales: Cognitive Concerns (COG), Psychosocial Functioning (PF), and Suicidal Ideations (SUI)
- The 12 clinical scales align with common DSM-5™ diagnoses.
- The clinical scales are organized into three higher-order spectra:
    - Internalizing: DEP, ANX, SOC, PTS.
    - Externalizing: ALC, AGG, ANTI, DRG.
    - Reality-Impairing: PSY, PAR, MAN, GRA.
- The spectra scores combine to provide a General Psychopathology Index (GPI), which measures the total burden of psychopathology.

**More about the SPECTRA and the quantitative (three-factor) model**
Whether measured as discrete disorders or continuous dimensions, psychopathology demonstrates substantial covariation and comorbidity. Multivariate research has shown that comorbidity reflects the presence of higher-order spectra that organize a wide range of psychiatric conditions into three broad dimensions: Internalizing, Externalizing, and Reality-Impairing. Discovery of these spectra offers a more parsimonious model for conceptualizing, measuring, and studying psychiatric disorders while avoiding the problems associated with comorbidity. Informed by quantitative model research, the SPECTRA provides an integrated hierarchical assessment of psychopathology from lower-order clinical constructs, up through multiple spectra, as well as critical information about cognitive and adaptive capacity.

SPECTRA hierarchy of item, scale, and spectra measurement.

Description of SPECTRA Scales, Spectra, and Global Psychopathology Index.

| Scale/spectrum/index | Number of items | Description |
|---|---|---|
| Infrequency (INF) | 3 | Presents items that are infrequently endorsed by anyone. |
| Protocol Classification Index (PCI) | N/A | A count of SPECTRA indices elevated above a critical level. |
| **Clinical scale/spectrum** | | |
| Depression (DEP) | 6 | Measures depressive affect and ideation. |
| Anxiety (ANX) | 8 | Measures generalized worry and physiological fear and reactivity. |
| Social Anxiety (SOC) | 5 | Measures social anxiety and avoidance. |
| Post-Traumatic Stress (PTS) | 6 | Addresses intrusive memories, avoidance, and physical reactivity related to a stressful event. |
| Internalizing Spectrum (INT) | 25 | A higher-order index of the internalizing spectrum including items from the DEP, ANX, SOC, and PTS scales. |
| Alcohol Problems (ALC) | 6 | Addresses functional problems related to alcohol use. |
| Severe Aggression (AGG) | 6 | Questions explosive anger and physical violence. |
| Antisocial (ANT) | 8 | Addresses impulsivity and behavioral dyscontrol, and disregard for social, ethical, and legal conventions |
| Drug Problems (DRG) | 6 | Questions functional problems related to drug use. |
| Externalizing Spectrum (EXT) | 26 | A higher-order index of the externalizing spectrum including items from the ALC, AGG, ANT, and DRG scales. |
| Psychosis (PSY) | 6 | Addresses perceptual and thought disturbance. |
| Paranoid Ideation (PAR) | 6 | Questions ideas of reference and persecution. |
| Manic Activation (MAN) | 5 | Addresses mental and physical acceleration. |
| Grandiose Ideation (GRA) | 6 | Questions an elevated sense of importance, talent, and destiny. |
| Reality-Impairing Spectrum (RI) | 23 | A higher-order index of thought disorder or reality—impairing items from the PSY, PAR, MAN, and GRA scales. |
| General Psychopathology Index (GPI) | 74 | A higher-order index of the total psychopathology spectrum including items from all clinical scales. |
| **Supplemental scale** | | |
| Cognitive Concerns (COG) | 5 | A functional scale related to cognitive complaints. |
| Psychosocial Functioning (PF) | 8 | A functional scale related to adaptive functioning. |
| Suicidal Ideation (SUI) | 6 | A supplemental scale of suicidal ideation. |

## Scoring and Reporting

- Score in approximately 10 minutes; online scoring and reporting are available on PARiConnect, our online assessment platform.
- Maps on to *DSM-5™* conditions and links assessment findings to quantitative model research literature.
- The Score Summary/Profile Form is a visual representation of SPECTRA scores, and may inform interpretation trends within the scores.

## Administration

- Administer with paper and pencil; online administration is available on PARiConnect, our online assessment platform.
- Administration takes 15-20 minutes.
- Qualification level C.
- Features 96 self-report items that can be completed and scored via carbonless form.
- Items are written at a fourth-grade reading level.
- Includes a Fast Guide to help users learn quickly how to administer.

## Reliability, Validity, & Norms

- Normative data are based on a sample of 1,062 individuals ranging in age from 18 to 91 years representative of the U.S. population.
- Older adult, college student, and mild and moderate clinical samples were collected.
- Reliable change scores were calculated for the scales, spectra, and GPI and are provided in the Professional Manual.
- Reliability coefficients for the scales (with the exception of DRG) range from .73 to .96.
- Reliability for the spectra and GPI ranged from .90 to .96.
- SPECTRA scales correlate highly with the PID-5, the PDQ, the SBQ-R, the PAI, the NEO-FFI-3, the BRIEF-A, and more.
- The internal consistency estimates for the SPECTRA scales across the different demographic groups indicate little variability in internal consistency as a function of age, gender, or race/ethnicity.
- The pattern of correlations in the expected directions with a wide variety of measures of psychopathology, normal and abnormal personality, behavior, and executive functioning provides evidence to support the convergent validity of the SPECTRA.