# Assessing Negative Symptoms: A 5-Item Tool

#### Instructions

This tool aids in the rapid clinical assessment of 5 key negative symptoms in patients with schizophrenia: speech, anhedonia, affect, motivation, and social drive. It is based on several recently validated assessment tools including the 4-Item Negative Symptom Assessment Instrument (NSA-4), the Brief Negative Symptom Scale (BNSS), and the Clinical Assessment Interview for Negative Symptoms (CAINS), with the added benefit of requiring minimal training only.

To use the tool, rate each symptom on a scale of 0 to 4, with 0 representing normal behavior (compared with the general population) and 4 representing a severe behavioral deficit. A final item of this tool is a separate global symptom rating that helps quantify the overall presence of negative symptoms and any negative symptoms not assessed by this tool, such as poor hygiene or slowed movements.

Details for choosing the most appropriate score are incorporated into the rating system. Also included at the end of this tool is a list of tips for conducting successful patient interviews when evaluating for negative symptoms.







# Negative Symptom Assessment Tool

	peech Quantity
	<b>0 = Normal:</b> normal amount of speech or excessive speech quantity
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	2 = Moderate: many of patient's responses are 1-2 words; may require prompting
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	leasure/Anhedonia
	O = Normal: patient enjoys daily activities, hobbies
	2 = Moderate: patient reports a moderate decrease in pleasure from most activities
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	motional Expression/Affect
	<b>0 = Normal:</b> patient easily expresses emotions via facial expressions, vocal tone, and/or gestures
	of expression is somewhat reduced <b>2 = Moderate:</b> patient displays a noticeably reduced capacity to express emotions using facial expressions
_	vocal tone, and/or gestures but still responds emotionally on occasion
П	3 = Moderately severe: patient has a significant lack of emotional expression but may respond infrequently
Ī	at times during a conversation
	lotivation/Goals
	<b>0 = Normal:</b> patient feels motivated to pursue work-, school-, or activity-related goals
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_	considered normal
	2 = Moderate: patient demonstrates a significant lack of interest in work or other activities but still
	occasionally feels motivated to pursue goals
	3 = Moderately severe: patient shows a profound lack of motivation and interest in work or activities but
	may infrequently express interest in goals
	4 = Severe: patient has no interest in pursuing work-, school-, or other activity-related goals
5. S	ocial Drive
	<b>0 = Normal:</b> patient desires contact with other people and is able to develop friendships
	1 = Mild: patient has a somewhat diminished desire to interact with others and has a slightly decreased
	capacity for friendships/intimacy
	2 = Moderate: patient has lower desire for contact with people and has significant problems developing
_	friendships, although patient may still express interest in others
	<b>4 = Severe:</b> patient desires complete isolation from others and has no relationships
Glol	bal Negative Symptom Rating
	1 = Mild: patient has some negative symptoms, but symptoms interfere minimally with functioning
	2 = Moderate: patient has 1-2 negative symptoms that interfere significantly with functioning
	<b>3 = Moderately severe:</b> patient has 3 or more moderately severe negative symptoms that substantially interfere with functioning
	4 = Severe: patient has 3 or more negative symptoms that are categorized as severe
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## Tips for Negative Symptom Assessment

In actual practice, it can be difficult to assess and quantify negative symptomatology in patients with schizophrenia. Interviewing technique is key in eliciting patient responses that help identify the presence of negative symptoms; however, engaging the patient in conversation may be difficult, as some patients may lack self-awareness or the capacity to understand concepts such as pleasure, emotional expression, and motivation.

When assessing negative symptoms, asking the patient open-ended questions rather than questions that can be answered with a "yes/no" response can yield useful information. Below is a list of sample questions to aid in the evaluation of each negative symptom. These questions are suggestions only and should be tailored to make them relevant to an individual patient's circumstances.

### **Speech Quantity**

To assess speech quantity, it is crucial to engage the patient in conversation to the extent that it is possible. Questions should be designed to elicit a broad response. Examples include:

- 1. How have you been doing since our last visit?
- 2. Tell me about how you spend a typical day, from the time you wake up until you go to bed.
- 3. What are you looking forward to in the next few days?

#### Pleasure/Anhedonia

The patient's capacity for enjoyment should be differentiated from the motivation to engage in activities or pursue goals. Questions should be aimed at identifying how often the patient feels pleasure, whether he or she looks forward to enjoyable activities, and how much pleasure is taken in enjoyable activities.

- 1. What did you do for fun since our last meeting? How did you feel when you were doing those activities?
- 2. What activities or hobbies do you enjoy? Are you looking forward to doing those activities again soon?
- 3. Are there other activities you think you might enjoy?

### **Emotional Expression/Affect:**

When evaluating for emotional expression, consider the patient's vocal tone, facial expressions, and gestures.

- 1. Can you think of a time when you had strong feelings about something, good or bad? What were you feeling exactly? Have you felt that way at any other time?
- 2. How do you feel today? What kind of mood are you in?
- 3. Has anything made you feel happy, angry, or sad in the past week?

#### Motivation/Goals

To assess a patient's motivation, consider asking questions about the patient's work, school, other activities, or living situation, depending on his or her individual circumstances, such as:

- 1. What might you like to do for work? Do you have any interest in possibly getting a job?
- 2. Did you make it to your group therapy this week?
- 3. How do you feel about starting to look for an apartment?
- 4. What hobbies do you think you'd like to try? Would you like to come up with a plan to do that?

#### Social Drive

Social motivation may be assessed by asking questions about the patient's desire for interpersonal interactions or motivation to develop relationships.

- 1. Who did you talk to or visit with this week? How did that go?
- 2. Would you like to have more contact with people or do you prefer to spend time alone?
- 3. How did you feel when you were around other people this week?

#### **Global Negative Symptoms**

This score should be derived from your overall impression of your discussion with the patient. You may observe things like poor hygiene, slowness of movement or speech, lack of interest in the discussion, or lack of emotion during your discussion.