

Medication: A
Band-Aid
approach to
families in
transition?

October 20, 2005



Problem?

- One in five children have a diagnosable mental, emotional or behavioral disorder. And up to one in 10 may suffer from a serious emotional disturbance. Seventy percent of children, however, do not receive mental health services (SGRMH, 1999)



Childhood Stats on Behavioral health

- Attention deficit hyperactivity disorder is one of the most common mental disorders in children, affecting 3 to 5 percent of school-age children (NIMH, 1999).



More Stats

- As many as one in every 33 children and one in eight adolescents may have depression (CMHS, 1998)
- <http://www.nmha.org/infoctr/factsheets/15.cfm>



Is there an increase in
childhood needs?

- Schools and preschools are reporting a higher rate of children with special needs
- Schools are also reporting additional needs of the families



Reasons medication use has increased for kids

- More knowledge in medical field
- More awareness by society
- Need for parents to work
- Need for a 'speedy' diagnosis in order for services to be rendered
- Common solution after 'speedy' diagnosis is medication



Solutions?

- One solution is a complete assessment of the child and family
- Assess family with a holistic, person-in-environment lens
- Downfall to this???

- **TIME**



Assessment

- The goals of the assessment of children with emotional or behavioral disorders are to (a) gather relevant information about the student in social and instructional environments, (b) assimilate the data to create a comprehensive picture of concerns, and (c) develop short and long term goals and strategies for intervention.



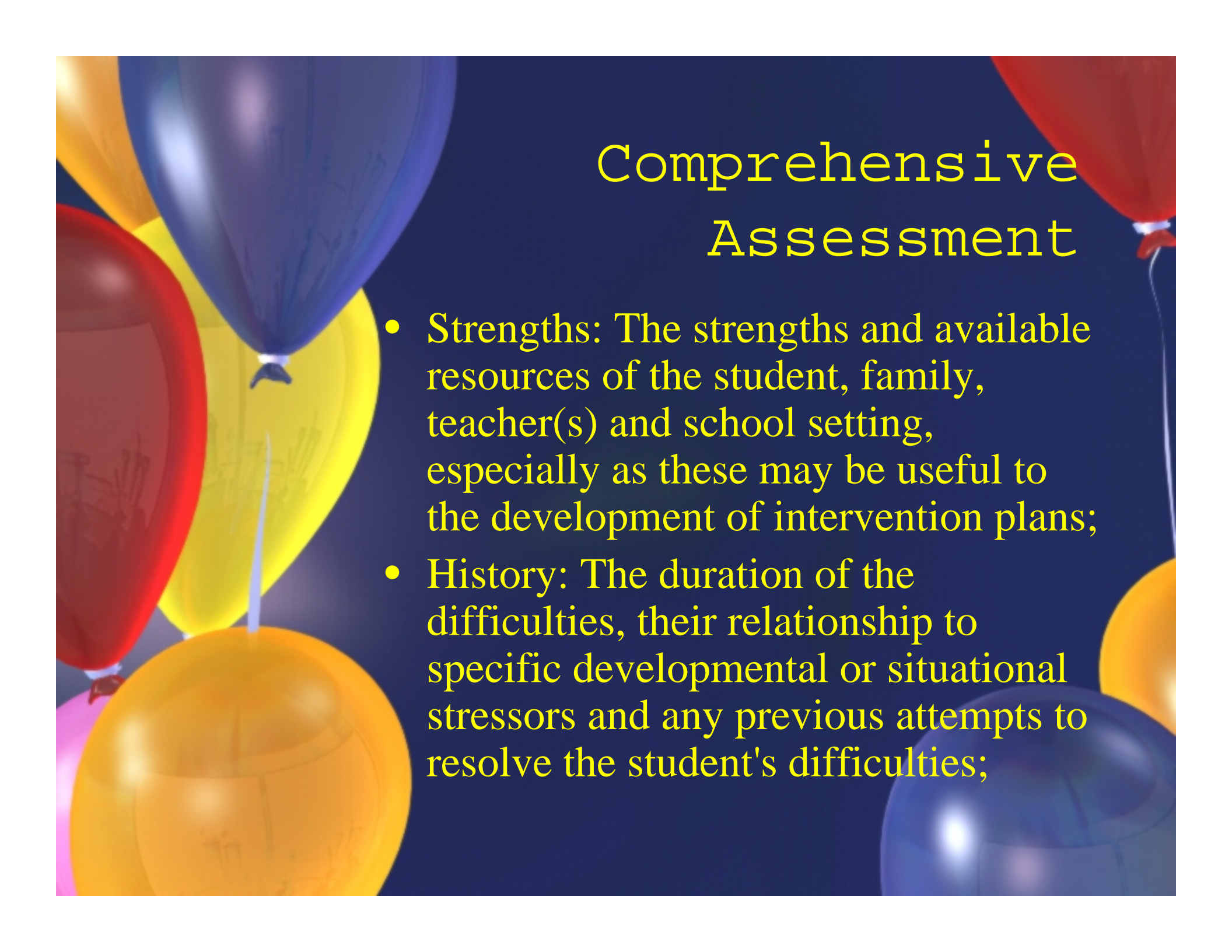
Assessment

- The assessment must identify both the strengths and needs of the student, and the people and systems with whom the student interacts (Rudolph & Epstein, 2000).



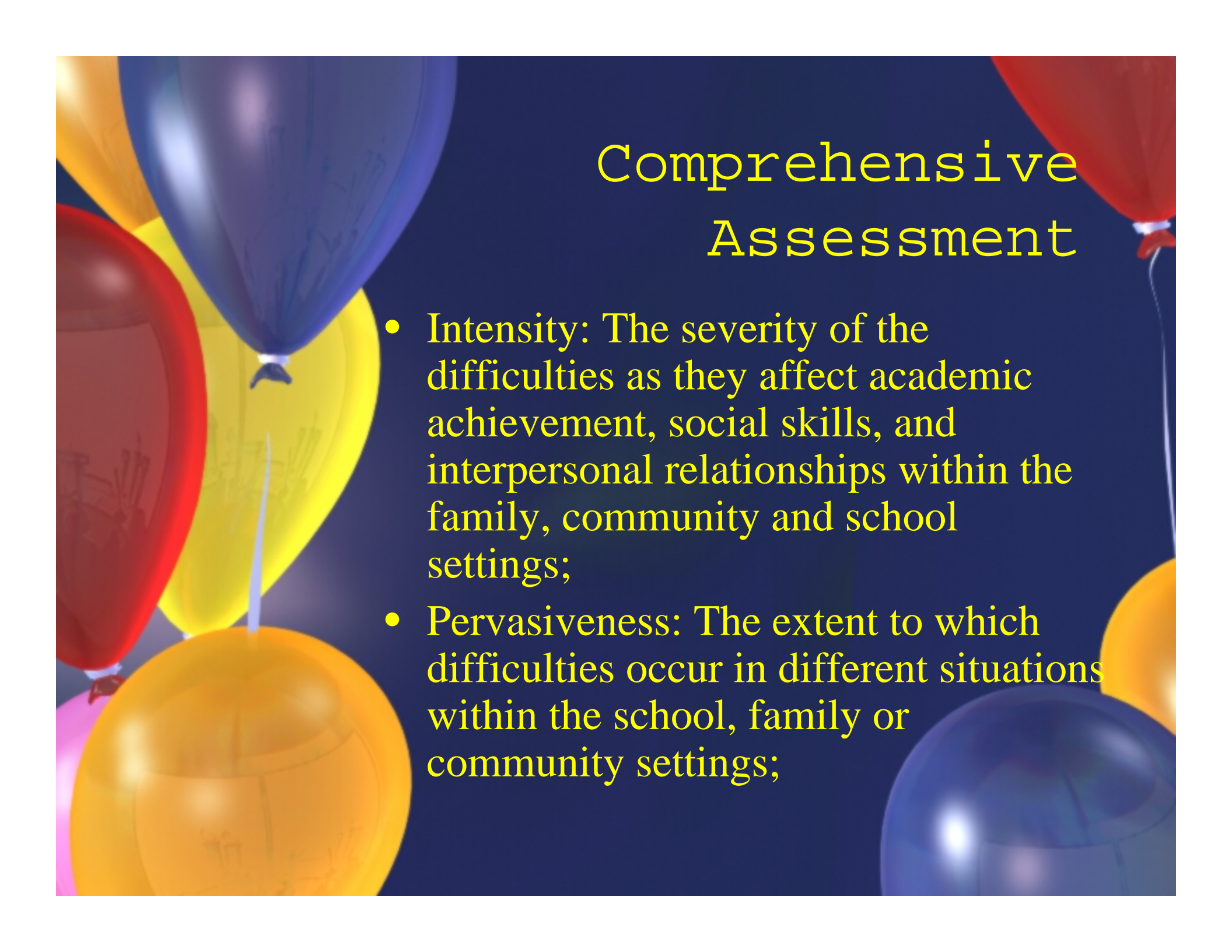
Important Criterion for Assessment

- 1. Comprehensiveness: The assessment should provide information about:
- Specificity: The objective and observable description of the student's difficulties;
- Environmental Factors: people and systems that impact the student(family stress), the relationship between the instructional, social and community environment and specific difficulties demonstrated by the student



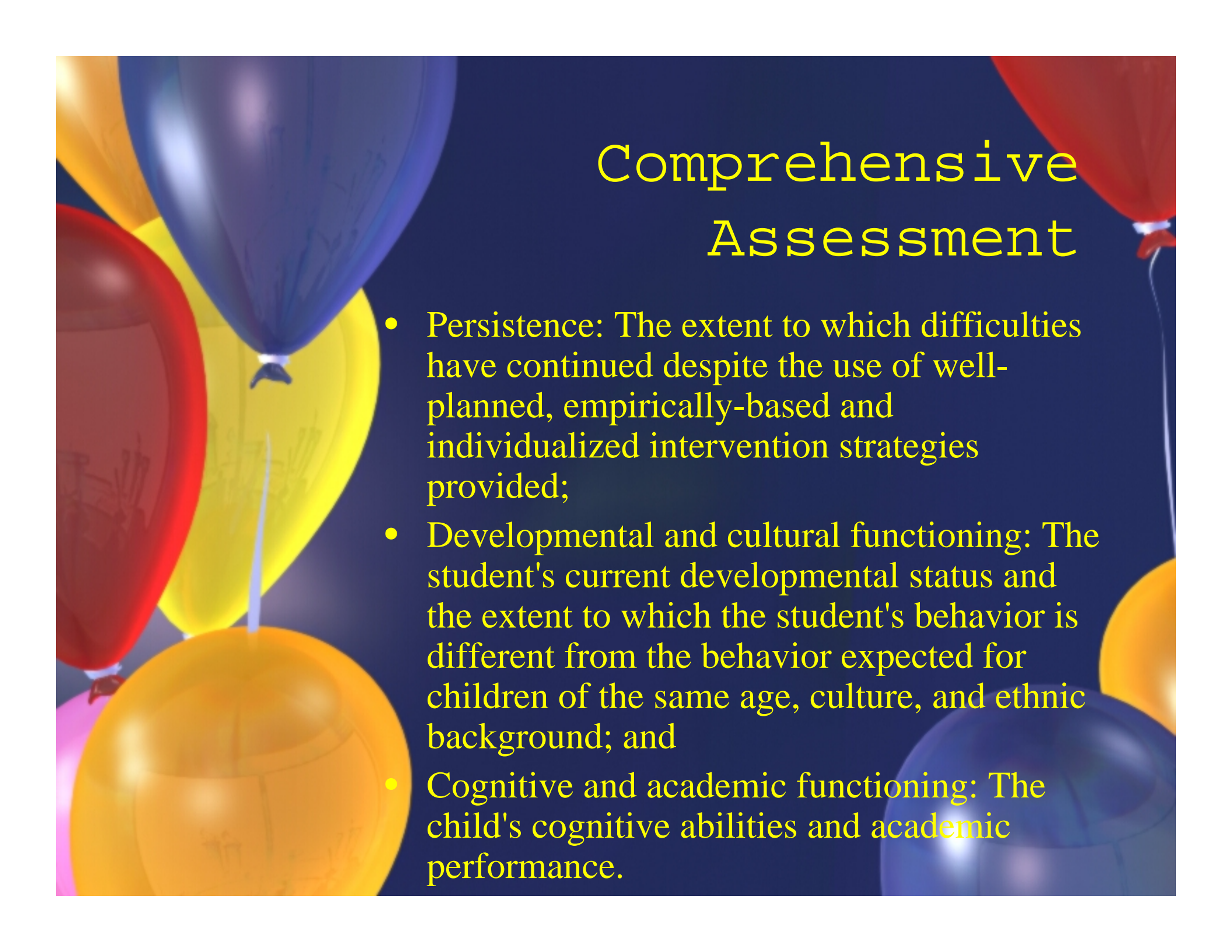
Comprehensive Assessment

- **Strengths:** The strengths and available resources of the student, family, teacher(s) and school setting, especially as these may be useful to the development of intervention plans;
- **History:** The duration of the difficulties, their relationship to specific developmental or situational stressors and any previous attempts to resolve the student's difficulties;



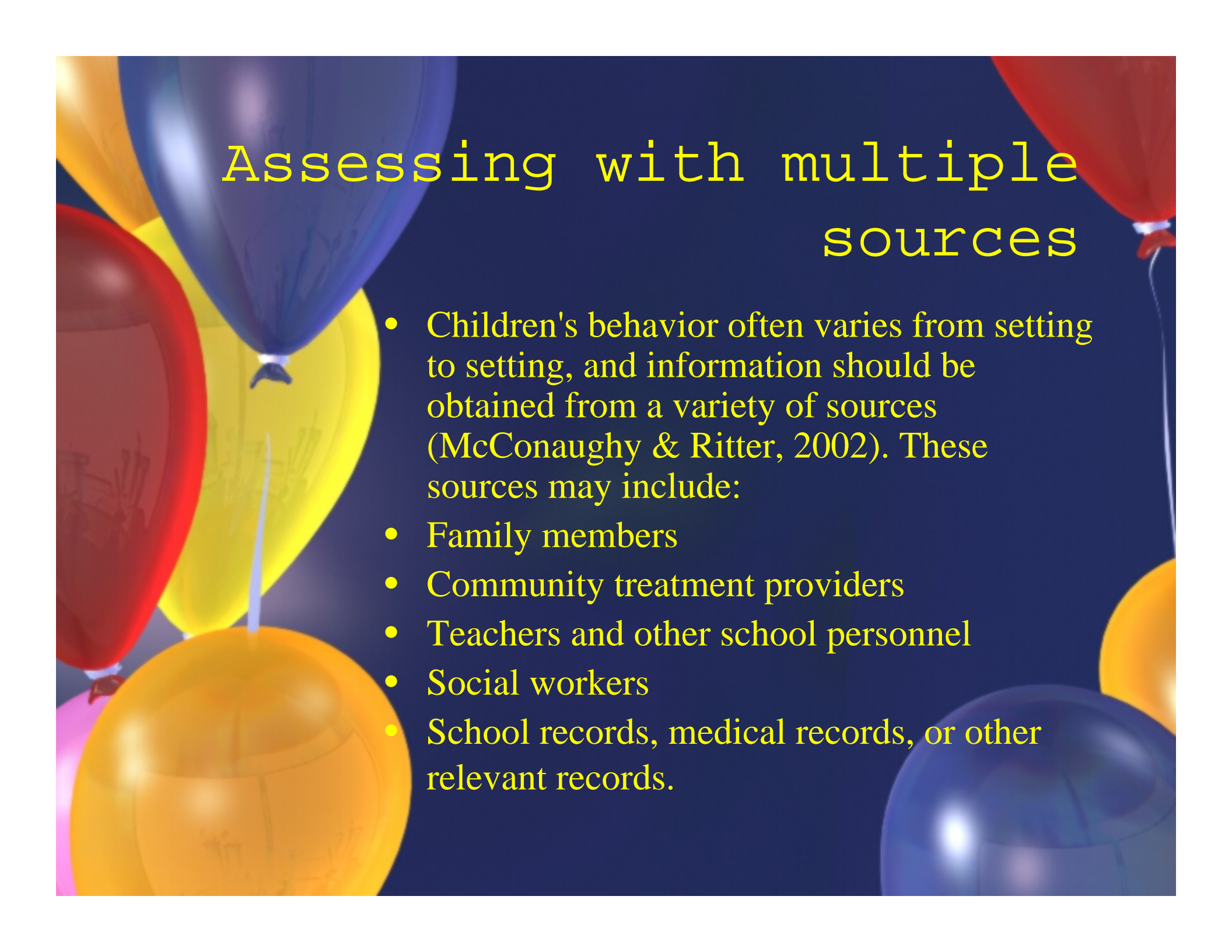
Comprehensive Assessment

- **Intensity:** The severity of the difficulties as they affect academic achievement, social skills, and interpersonal relationships within the family, community and school settings;
- **Pervasiveness:** The extent to which difficulties occur in different situations within the school, family or community settings;



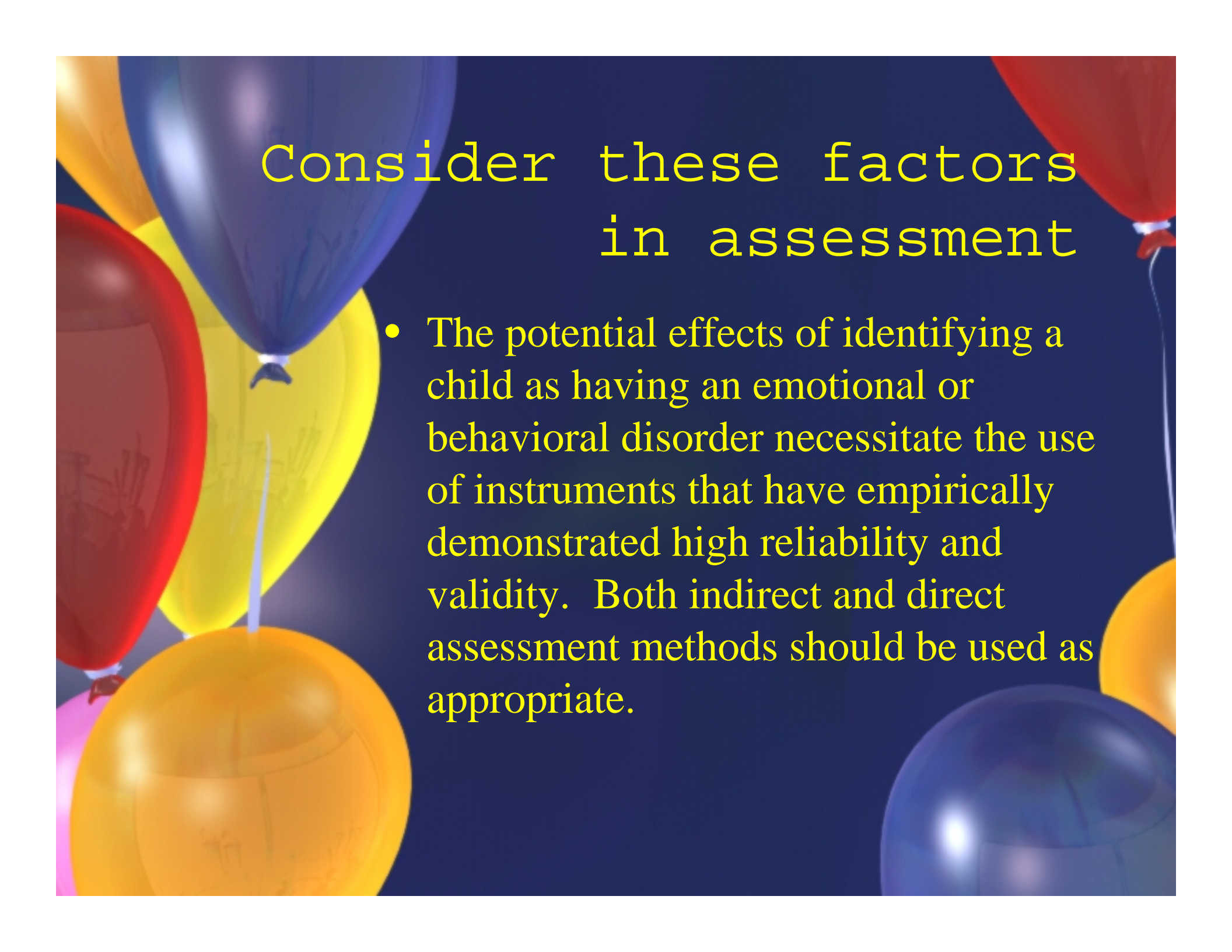
Comprehensive Assessment

- Persistence: The extent to which difficulties have continued despite the use of well-planned, empirically-based and individualized intervention strategies provided;
- Developmental and cultural functioning: The student's current developmental status and the extent to which the student's behavior is different from the behavior expected for children of the same age, culture, and ethnic background; and
- Cognitive and academic functioning: The child's cognitive abilities and academic performance.



Assessing with multiple sources

- Children's behavior often varies from setting to setting, and information should be obtained from a variety of sources (McConaughy & Ritter, 2002). These sources may include:
 - Family members
 - Community treatment providers
 - Teachers and other school personnel
 - Social workers
 - School records, medical records, or other relevant records.



Consider these factors in assessment

- The potential effects of identifying a child as having an emotional or behavioral disorder necessitate the use of instruments that have empirically demonstrated high reliability and validity. Both indirect and direct assessment methods should be used as appropriate.



Assessment tools

- Indirect methods may include behavior checklists, structured interviews, rating scales, and other appropriate assessment techniques.
- Direct methods may include behavior observation, standardized self-reports from a child, curriculum-based assessment, and analysis of work samples should also be considered.



Interventions?

- Medication is only one part!!
- Seldom are problems a single issue, especially for families in transition
- Important address the total child and his/her family



Intervention Guidelines

- Intervention plans should take into account the strengths of the child, the family, the child's teacher(s), and the school.
- Interventions should be provided both inside and outside of the school; therefore collaboration and coordination of services will be required



Intervention Approaches

- Individualized academic and curricular interventions
- Consultation with teachers and other service providers
- Consultation and partnership with parents
- Individual and group counseling



Intervention Approaches

- Social skills training
- Career, vocational and transitional planning
- Effective discipline practices.
- Crisis planning and management
- http://www.nasponline.org/information/pospaper_sebd.html