

Diagnosis and Treatment of Mental Health Problems in Young Children

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Goals of Diagnostic Thinking

- To gain the most accurate view of the child in the context of his/her world
- To develop a mutual understanding of core concerns (with parents, other caregivers, other professionals, etc)
- To develop a plan for intervention

Diagnostic Thinking

- “Diagnosis can be described as the process of examining what is known about all relevant aspects of a child’s circumstances, choosing the formulation which best fits the information, developing an appropriate plan for further monitoring or intervention, and reviewing the formulation as more information becomes available during the intervention process.” (D.R. Weston)

Any intervention or treatment must be based on as complete an understanding of the child and family's circumstances as is possible to achieve.

After assessment/diagnostic formulation, a shift in focus occurs – the question then becomes “What is the child's experience in this family?....What is the child's experience in his/her relationships?”

Purpose of Intervention Strategies

- To support optimal mental health and socio-emotional development of the young child.
 - What is optimal social emotional development?
 - The capacity to experience, regulate and express emotion;
 - To form close & secure interpersonal relationships;
 - To explore the environment & learn.

- To strengthen parental capabilities with in the context of early developing parent-child relationships.

The overall purpose of any intervention is:

To promote parental competencies

To demonstrate regard for the child

Intervention Strategies

- Child Centered
- Family Focused
- Relationship-Based
- Evidence-Based
- Multidisciplinary

A Range of Intervention Strategies

- Emotional Support

- An Infant Mental Health Specialist may offer emotional support related to an immediate crisis, ie the birth of a premature infant, the hospitalization of a young child, the loneliness of a parent who is ill prepared for the care of a child.
- Look & Listen carefully, acknowledging the family's strengths and needs
- Demonstrate compassion/empathy for the family's difficulties

- Invite the parent “to tell their story”
- Follow the lead of the parent
- Provide regular & consistent opportunities to interact (regular & consistent sessions)
- Communicate concern and support
- Help to identify troublesome feelings & define risks
- Set limits that are firm, clear, & fair
- Establish relationships that reduce developmental risks - “parallel process”

Possible Services Under Treatment Plan to Provide Emotional Support

- Screen for maternal depression/post-partum depression
- Referral to family doctor
- Referral for individual/marital tx
- Referral to Child Guidance
- Assist in developing personal/family supports
- Referral to community support programs like Exchange Club Parent Child Program; Safe Families, Calm Waters, etc.
- Use video/audio
- Write/draw/paint their story

- Concrete Resources

- Assist parents to survive and care for young children
- Concrete support serves as a powerful metaphor for ways the IMH Specialist can be helpful to the young child and family and facilitate developing a working relationship with the family
- Facilitating with concrete resources mirrors resources from parent to child ...parallel process.

- Developmental Guidance

- Provide child development guidance specific to the child's pattern of growth & change
- Encourage parental attention, interest, & appropriate response
- Encourage parents to look for the child's changing competencies suggesting which developmental tasks lie ahead.
- Encourage activities & experiences that will enrich both child's & parent's pleasures & capabilities

- Speak for the child, identifying immediate wants & needs.
- Make informal observations about the child and invite parent to do the same

- NOTE: On occasion the IMH Specialist may model particular caregiving behavior
 - But exercise CAUTION!..Be careful to support parent's capacity to do the same
 - The parent-child relationship is the important focus!

Possible Services Under Treatment Plan to Provide Developmental Guidance

- Parent Education programs
- PCIT
- Complete Sensory Profile
- Develop a Sensory Diet
- Child Care Mental Health Consultation
- PECS
- Positive Behavioral Supports
- Routines-Based Interventions
- SLP
- OT/PT (oral/motor)
- Nutrition Consultation
- OWL

- Infant-Parent Psychotherapy

- Assist parents to explore thoughts and feelings about their child, caregiving responsibilities and relationships.

Clinical Concerns

Early or unresolved loss

Prolonged separation

Maternal deprivation or depression

Trauma

- Memories attached to difficult past experiences and relationships may be awakened with intensity in the presence of the child, placing painful burdens on parents as they struggle to provide care.
- In protecting themselves from feelings that are aroused, they may shut down, withdraw, lash out, or run away
- They place their infant/child at continuing risk, because they cannot hold, comfort or respond with sensitivity. This makes care of the child problematic and contributes to child's distress.

The IMH Specialist explores feelings and behaviors as parents are able to do, in the presence of the child ...and within the context of the trusting, working relationship
(parallel process)

- Advocacy

- Speak for the child's need for stable, secure, and affectionate care....as well as for parent's need to care well for their child
- Advocate/speak up within the child welfare system for permanency for children
- Speak on behalf of young children within every system of care...bring the very young child to the table.

(Zero to Three, Feb/Mar 1995, Weatherston & Tableman, 1989 & World Association for Infant Mental Health Journal, The Signal)

What is the Oklahoma Association for Infant Mental Health (Ok-AIMH)?

- The Ok-AIMH is an affiliate of the World Association for Infant Mental Health

Our objectives are to:

- * Increase awareness in the public and among professionals that the ages birth to five are a critical period in psychosocial development of the individual

- To increase and support training of professionals who work with young children and their families in infant mental health as a specific expertise
- To promote the optimal development and wellness of the young child and his/her family
- To encourage and support cooperation and collaboration among all agencies, groups, and individuals who serve young children and their families in Oklahoma.

Go to www.ok-aimh.org for more information

Recommended Reading

- Osofsky, Joy (2004) Edited by. *Young Children and Trauma: Intervention and Treatment*. The Guilford Press. NY
- Lieberman, A., Ippen, C., Van Horn, P., (2006). Child-Parent Psychotherapy: 6-Month Follow-Up of a Randomized Controlled Trial. *Journal of American Academy of Child & Adolescent Psychiatry* 45:8
- Lieberman, A., Van Horn, P., Ippen, C., (2006) Toward Evidence-Based Treatment: Child-Parent Psychotherapy with Preschoolers Exposed to Marital Violence. *Journal of American Academy of Child & Adolescent Psychiatry* 45:8

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