

Early Childhood Mental Health: The Crucial Role of Early Intervention



Bhavin Dave, MD

Assistant Professor-Department of Psychiatry and Behavioral Sciences

Associate Director-Infant & Toddler Mental Health Program

Children's National Medical Center

June 15, 2016

Conflicts of Interest/Disclaimers

- Dr. Dave has no financial conflicts of interest to disclose.
- Off-label use of medications will be discussed during this presentation and will be noted where relevant.

Learning Objectives

- 1. Understand basic factors contributing to infant/toddler social-emotional/behavioral well-being**
- 2. Learn key aspects of infant/toddler mental health assessment**
- 3. Learn more about developmentally appropriate approaches to managing behavior problems in this age group**
- 4. What should PCP follow-up entail?**

Why early intervention?

1. Relieve child/family distress.
2. Achieve/maintain age-appropriate developmental trajectories.
3. Improve functioning of home and school/daycare.
4. Prevent chronic emotional, behavioral disturbance.
5. Improve development and maintenance of peer relationships.
6. Prevent long term academic failure.

What to say to parents?

- Happy and confident children:
 - 1) Behave better
 - 2) Are more in control of their emotions
 - 3) Learn better
 - 4) Make friends easier

What affects childhood mental health?

- Nature
 - Genetic influences
 - Prenatal care
 - Medical issues
 - Nutrition/Sleep

What affects childhood mental health?

- Nurture
 - Prenatal mental health
 - Parental attachment and engagement
 - Social influences
 - Family
 - Teachers
 - Peers
 - Outside structured environments

What affects childhood mental health?

Early childhood mental health and development are interdependent.

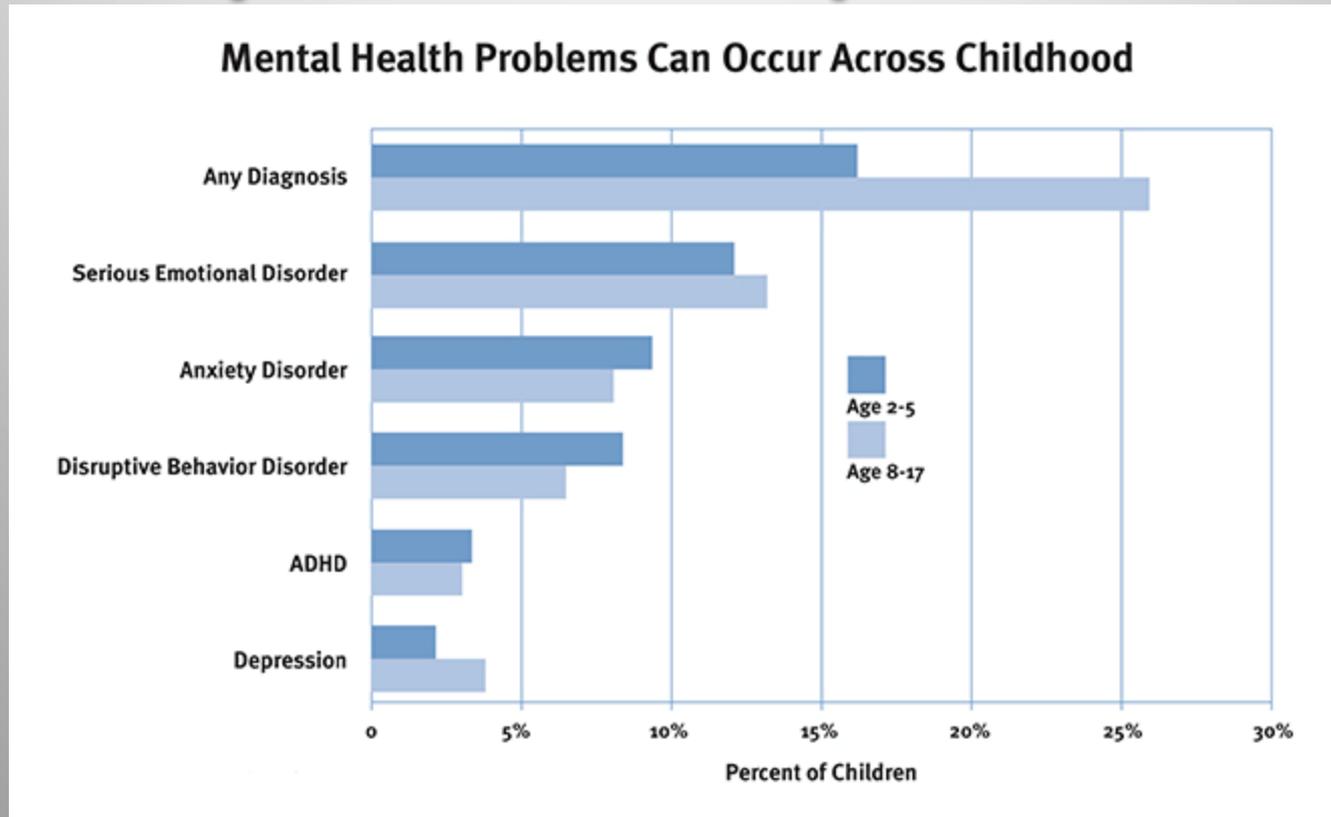
Can preschoolers even have mental health issues?

YES!!

- BE AWARE
 - Any anxiety disorder—9.4% prevalence rate in general population(1)
 - ADHD—2-5.7% (2)
 - Depression—2.1% (2)
 - Any emotional disorder—10.5% (2)
 - Any behavioral disorder—9% (2)
 - Any disorder—16.2% (2)
 - Pervasive developmental disorders—1/125 in 4-year-olds (3)

1. **Test-Retest Reliability of the Preschool Age Psychiatric Assessment (PAPA).** *Journal of the American Academy of Child & Adolescent Psychiatry.* Volume 45, Issue 5 (2006), Pages 538-549. Helen Egger, MD.
2. **Common emotional and behavioral disorders in preschool children: presentation, nosology, and epidemiology.** *Journal of Child Psychology and Psychiatry.* Volume 47:3/4 (2006), Pages 313–337. Helen Link Egger, MD and Adrian Angold, MD.
3. **Autism spectrum disorders in preschool-aged children: prevalence and comparison to a school-aged population.** *Annals of Epidemiology.* Volume 19, Issue 11 (2009). Pages 808-814. Joyce S. Nicholas, PhD, Laura A. Carpenter, PhD, Lydia B. King, MPH, Walter Jenner, MS, Jane M. Charles, MD.

Wouldn't some of the disorders be over-represented in preschoolers?



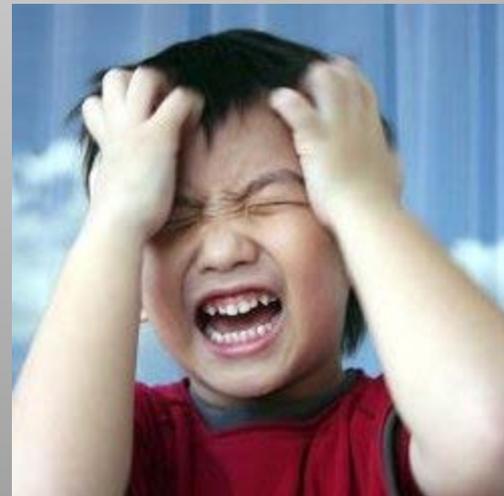
- Mental Health Problems Can Occur Across Childhood. Source: Egger & Angold (2006). Credit: Center on the Developing Child.

Won't kids grow out of it?

- “Meeting criteria for a diagnosis at age 3 was associated with an almost fivefold greater risk of meeting criteria for a diagnosis at age 6” (4)
- “Of children who met criteria for a diagnosis at age 3, 50.4% (64/127) met criteria for a diagnosis again at age 6.” (4)

What to ask and when to intervene?

- Temper tantrums—like a pain evaluation
 - Triggers
 - Specific behaviors
 - **Aggression! Self-harm! Destruction!**
 - Frequency
 - Duration
 - Where do they occur
 - What makes it better



What to ask and when to intervene?

- How much distress and impairment
 - What's it like to go to the store?
 - How many phone calls from school/daycare?
 - How many times asked to pick up from school/day care?
 - How many schools/daycares?
 - Regression of skills?

Screening tools

- Use of a brief, standardized screening tool in early childhood identified 67.9% of childhood who later met criteria for a psychiatric disorder (5)

Screening tools

- Ages and Stages Questionnaire:
Social/Emotional
 - <https://asqoregon.com/whatisasqse.php?lang=en>
- Vanderbilt, Connors, SNAP IV
- Preschool anxiety scale
- Preschool Feelings Checklist
- Child Behavior Checklist

What are common mental health presentations in early childhood?

- Disruptive behavior disorders
 - ADHD
 - Oppositional defiant disorder



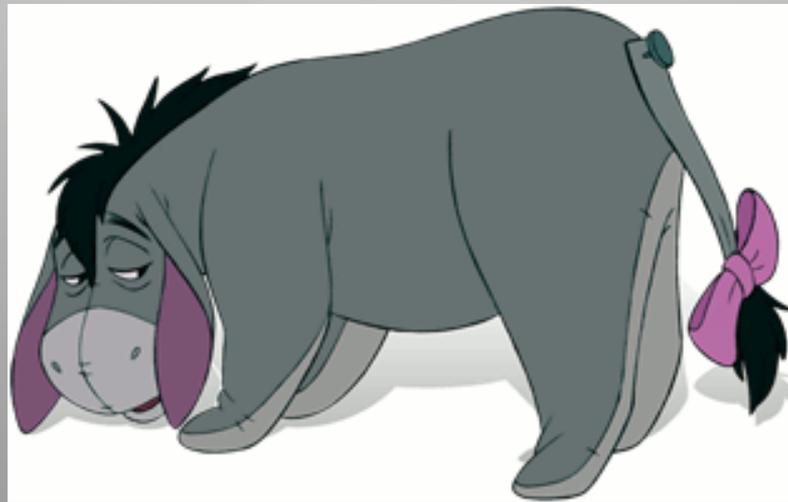
What are common mental health presentations in early childhood?

- Anxiety disorders
 - Separation anxiety
 - Social anxiety
 - Specific fears
 - PTSD



What are common mental health presentations in early childhood?

- Mood disorders
 - Depression
 - Bipolar disorder



What are common mental health presentations in early childhood?

- Developmental delays
 - Autism spectrum disorders
 - Speech/language delay
 - Motor delay

What are common mental health presentations in early childhood?

- Frequent comorbidities
 - Sleep problems
 - Sensory processing problems

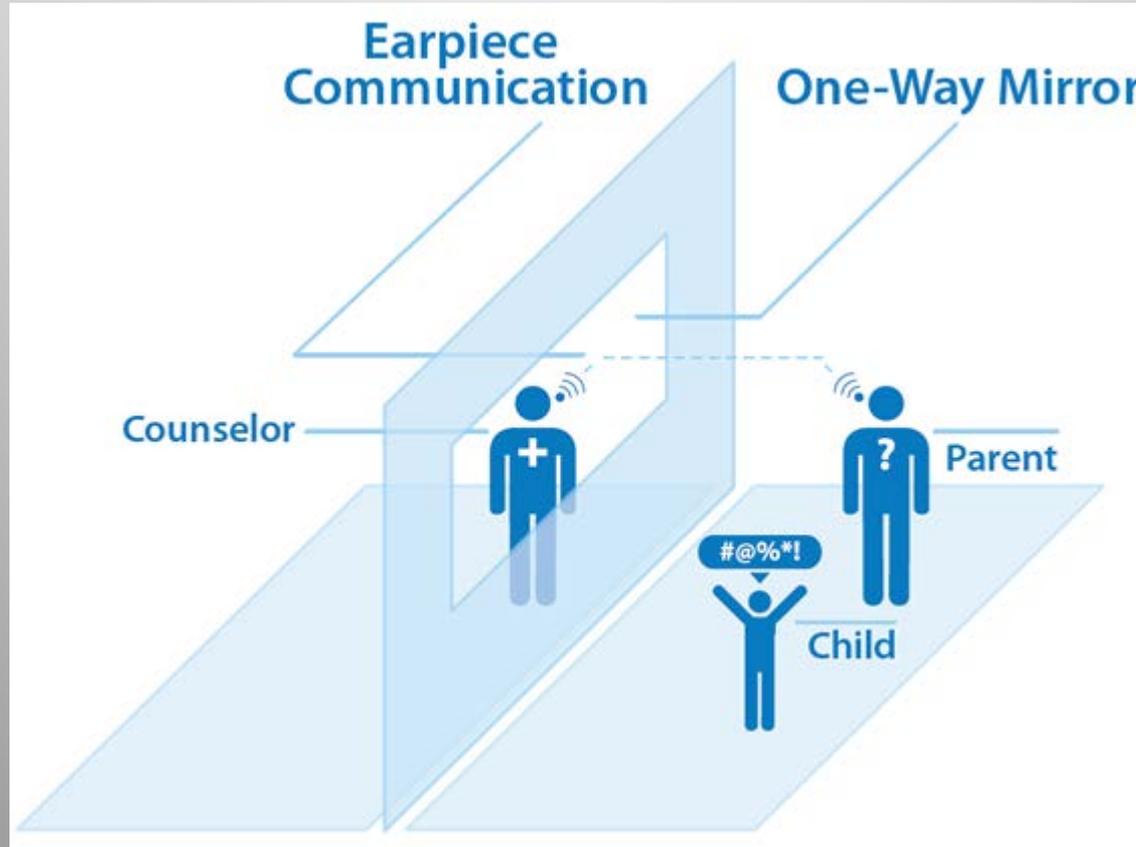
What are common therapeutic interventions in early childhood?

- Behavior management therapy
 - Behavior charts, sticker charts, positive reinforcement
- Promotion of positive coping skills
 - Parents play an active role, modeling for children
- Child directed play
 - Build self confidence, focused positive attention, strengthen parent-child bond, practice parenting skills
- ABA, Floor time
 - Not just specific for Autism!

What are common therapeutic interventions in early childhood?

- PCIT
 - “an empirically-supported treatment for conduct-disordered young children that places emphasis on improving the quality of the parent-child relationship and changing parent-child interaction patterns.” (6)

Parent Child Interaction Therapy



When do we think about medications?

Recommended treatment algorithms:

1. Therapeutic intervention for at least 12 weeks
2. If symptoms, distress or impairment in function persistent despite therapy → medication is indicated
3. Timing of medication (> or <12weeks) may be dependent on:
 - a. Acuity
 - b. Availability of resources
 - c. Capacity of parents to engage in therapeutic interventions



Guiding principles for medication use

- Start low go slow
- Minimal evidence base
 - N=1 approach to treatment
- May need higher doses than expected but may be more prone to side effects
- Practicality of dose administration

Common pharmacologic interventions

- ADHD
 - Stimulants
 - FDA approved—Amphetamine, dextro-amphetamine for children as young as 3 years old
 - Evidence base (PATS study) suggests use of methylphenidate as first line stimulant (7)
 - Alpha agonists

Common pharmacologic interventions

- Anxiety
 - SSRI's
 - Alpha agonists
- Depression
 - SSRI's
- Sleep
 - Melatonin, alpha agonists, Benadryl prn

Common pharmacologic interventions

- Irritability/aggression of unspecified origin
 - Alpha agonists
 - Atypical antipsychotics
 - But continue to assess for underlying pathology
- Autism spectrum
 - Treat comorbid ADHD, anxiety first
 - Atypical antipsychotic for irritability/aggression
 - FDA approved—Risperdal for kids 5-years and older

When to ask for help?

- AAP Guidelines for ADHD updated in 2011 to include children as young as 4-years-old
- Consider referral if:
 - Child <4-years-old
 - Distress or impairment in functioning appears not to be associated with ADHD
 - Diagnostic comorbidity
 - High complexity psychopathology or psychosocial factors

Who to ask for help?

- Child and Adolescent Psychiatrist
 - CNMC Infant & Toddler program
 - Intake line—202 476 4733
 - Direct line—202 476 4692
 - Department of Behavioral Health
- School-based/early intervention
 - DC Early Stages
 - <http://www.earlystagesdc.org/>
- Therapeutic resources/PCIT
 - Department of Behavioral Health, Mary's Center
 - http://www.evidencebasedassociates.com/featured_projects/families_first.html
 - <http://www.maryscenter.org/mental-health>
 - <http://freeprintablebehaviorcharts.com/>
- ABA
 - B.A.S.I.C.S, little leaves, Early Autism Solutions, National Speech
 - <http://www.specialneedskidsinfo.com/washingtondcabatherapists1.html>
 - <http://earlyautismsolutions.com/>
 - <http://www.nationalspeech.com/>
- DC MAP (Mental health Access in Pediatrics)
- Dchealthcheck.net/resources/healthcheck/mental-health-guide



HealthCHECK

Training & Resource Center

Materials on Medicaid's EPSDT benefit for DC providers & families

District of Columbia Department of Health Care Finance (DHCF) & Bright Futures at Georgetown University

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Resources

In the News

New Resources

DC HealthCheck Resources

- DC Contacts
- DC Periodicity Schedule
- DC Mental Health Resource Guide
- EPSDT Billing Manual (External Link)
- HealthCheck Outreach Materials

General Pediatric Resources

- Agencies/Organizations
- Cultural/Linguistic Competence
- Curricula
- Documentation
- Family-Centered Care
- Glossary
- Healthy People 2020
- Immunizations
- Oral Health Toolkit
- Periodicity (External Link)
- Screening Materials

National Medicaid/

Child and Adolescent Mental Health Resource Guide (birth-20 years)



The DC Collaborative for Mental Health in Pediatric Primary Care created the **Child & Adolescent Mental Health Resource Guide** for use by pediatric primary care providers in the Washington, DC area. This guide aims to provide a comprehensive listing of community behavioral health resources for children and adolescents in the District of Columbia.

To access the full guide, [click here](#). Please check back often for updates.

To access specific sections of the guide, please click below:

- » [Overview of Guide and Referral Paths](#)
- » [Quick Reference Sheet for Referrals](#)
- » [Crisis Services/Inpatient Hospital Units](#)
- » [Early Childhood \(Perinatal – 5 yrs\)](#)
- » [Therapy/Psychology Services](#)



The DC Collaborative for Mental Health in Pediatric Primary Care's Child & Adolescent Mental Health Resource Guide

The DC Collaborative for Mental Health in Pediatric Primary Care aims to improve the integration of mental health in pediatric primary care for children in the District of Columbia. We have a strong commitment to addressing the mental health needs of diverse children, from birth through 20, and their families, through culturally competent, family-focused initiatives. The Collaborative is a multidisciplinary group, comprised of the following lead organizations, and guided by a Community Advisory Board: Children's Law Center, Children's National Health System, DC Chapter of the American Academy of Pediatrics, DC Department of Behavioral Health, DC Department of Health, DC Department of Health Care Finance, and Georgetown University.

As part of our work, we have compiled the following mental health resource guide for use by pediatric primary care providers in the Washington, DC area. We intend to update this working guide regularly, and if you have suggestions, questions or comments, please contact Sarah Barclay Hoffman, Project Associate with the DC Collaborative for Mental Health in Pediatric Primary Care, at sbhoffm@childrensnational.org.



DC Mental Health Resource Guide:

DCHEALTHCHECK.NET

Who else to ask for help?

- Ancillary referrals
 - OT
 - Speech/language
 - Neuropsychology
 - Developmental Pediatrician
 - Educational Advocate

Useful reading for parents

- **Behavioral Problems**

- *The Kazdin Method for Parenting the Defiant Child*—Allen E. Kazdin, PhD
- *Your Defiant Child*—Russell Barkley, PhD
- *SOS Help for Parents*—Lynn Clark, PhD
- *1-2-3, Magic*—Dr. Thomas Phelan
- *The Whole Brain Child*—Daniel Segal
- *No More Meltdowns*—Jed Baker

- **Anxiety**

- *Helping Your Anxious Child*—Ronald Rapee, PhD

- **ADHD**

- *Taking Charge of ADHD*—Russell Barkley, PhD

- **Autism Spectrum**

- *Be Different: Adventures of a Free Range Aspergerian*—John Elder Robison

Books for kids

- ADHD
 - *Shelley the Hyperactive Turtle*—Deborah Moss, Carol Schwartz
 - *Eukee the Jumpy Jumpy Elephant*—Clifford L. Corman, MD, Esther Trevino, MFCC, Richard A. Dimatteo
 - *Otto Learns about His Medicine: A Story about Medication for Children with ADHD*—Matthew R. Galvin, Sandra Ferraro
 - *A Walk in the Rain with a Brain*—Edward Hallowel, Bill Mayer
- Anxiety
 - *David and the Worry Beast: Helping Children Cope with Anxiety*—Anne Marie Gaunci, Caroline Attia
 - *Is a Worry Worrying You?*—Ferida Wolff, Harriet May Savitz, Marie Le Tourneau
 - *The Invisible String*—Patrice Karst, Geoff Stevenson

Books for kids

- Autism
 - *Tobin Learns to Make Friends*—Diane Murrell
 - *Little Rainman*—Karen L. Simmons, Susan Simmons, Robert A. Woodbury, Mitzi Briehn, R. Wayne Gilpin
 - *I Am Utterly Unique: Celebrating the Strengths of Children with Asperger Syndrome and High-Functioning Autism*—Elaine Marie Larson
 - *What It Is to Be Me!: An Asperger Kid Book*—Angela Wine
 - *My Friend Has Autism (Friends with Disabilities)*—Amanda Doering Tourville, Kristin Soura
- Anger management
 - *When Sophie Gets Angry—Really, Really Angry*—Molly Bang
 - *Sometimes I'm Bombaloo*—Rachel Vail, Yumi Heo
 - *Josh's Smiley Faces: A Story About Anger*—Gina Ditta-Donahue, Anne Catharine Blank
 - *When I Feel Angry*—Albert Whitman

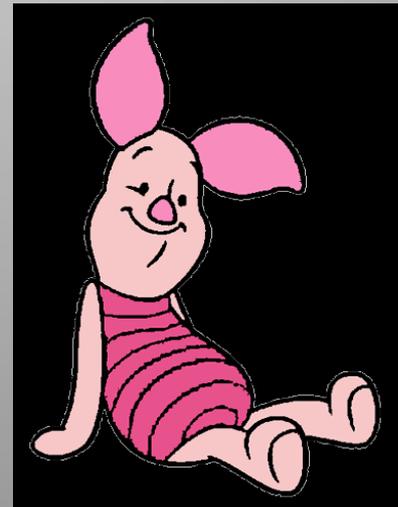
Is treatment working?

- Is there less distress in the environment?
 - Reduced frequency, intensity and duration of tantrums
 - Kids more emotionally stable
 - Parents less anxious/distressed
 - Fewer complaints from teachers



Is treatment working?

- Is there improved function?
 - Making friends
 - Following rules and directions better
 - Compliant with routines
 - Able to engage in normal daily activities
 - Improved sleep



Is treatment working?

- Are developmental trajectories getting back on track?
 - Recovering any lost skills
 - Meeting new milestones



- Are there any adverse medication effects?

Wrapping up

- Early childhood mental health is crucial in providing children greater opportunity for social, emotional and cognitive success
- Pediatricians play a crucial role as the 1st line of defense and gateway to services
- It really does take a village!

Thank You!



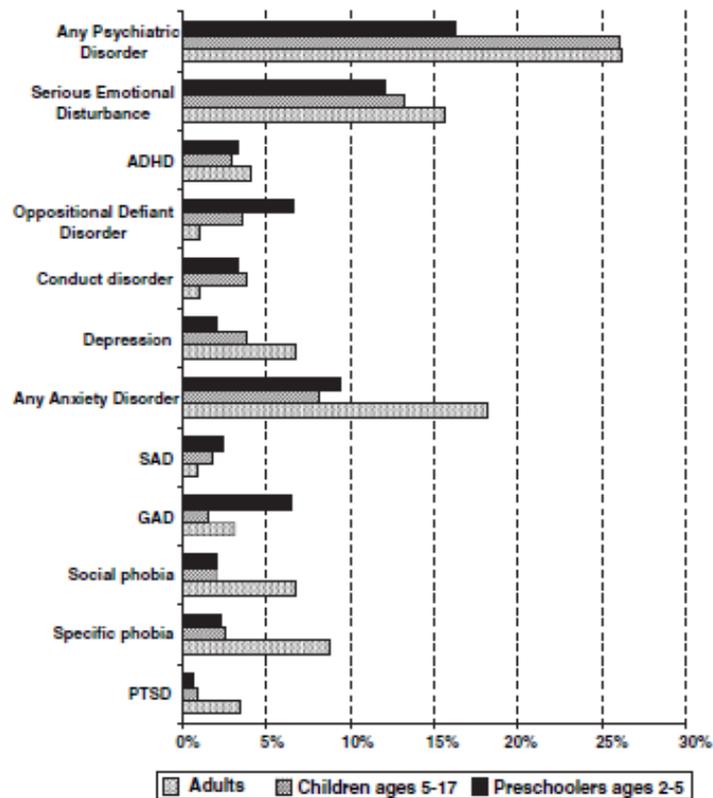


Figure 1 Prevalence of psychiatric disorders in preschoolers, children and adolescents, and adults. Data abstracted from: Angold, Egger, Erkanli, & Keeler, submitted; Costello, Egger, & Angold, 2005; Kessler, Chiu, Demler, & Walters, 2005b.