

Managing Special Needs Issues: Early Systemic Intervention

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Defining Terms

A "special needs" child is one who

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    graph LR
      A[has medical, developmental, emotional, or educational needs/conditions] --> B[that may impact on parenting responsibilities and the best parenting plan]
      B --> C[Dizzying array of conditions, services, and opinions as to the best plan]
      C --> D[Parents often have different perceptions and different bases of information]
  
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Clashing Systems...

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    graph TD
      A[Court system considers input from both parents] <--> B[May require consultation between parents before seeking services for children]
      C[Responsibility is usually on the parent] <--> D[BUT - may default to one parent based on external professional opinion or failure of parents to agree]
      A <--> C
      B <--> D
      E[Courts don't always understand the differences among specialties and how these may impact opinion]
      E -.-> A
      E -.-> B
      E -.-> C
      E -.-> D
  
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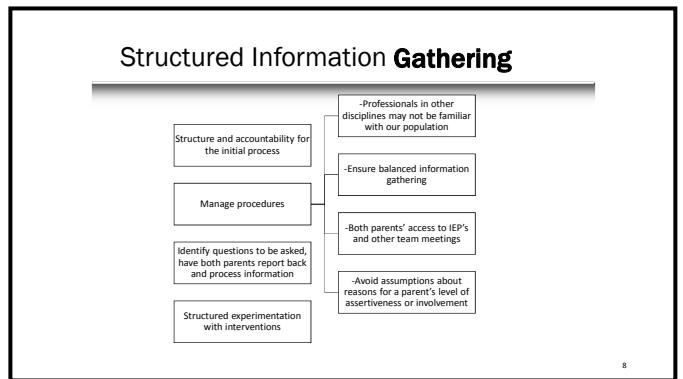
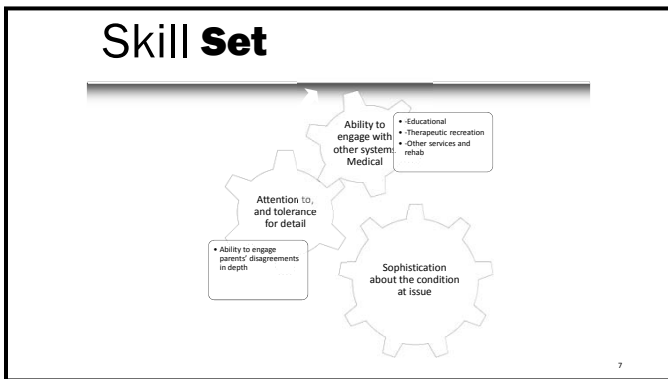
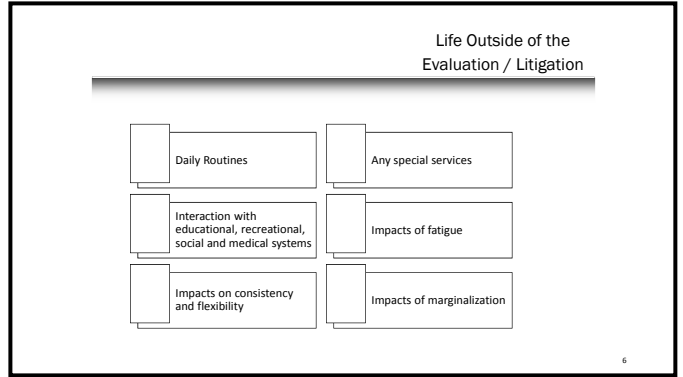
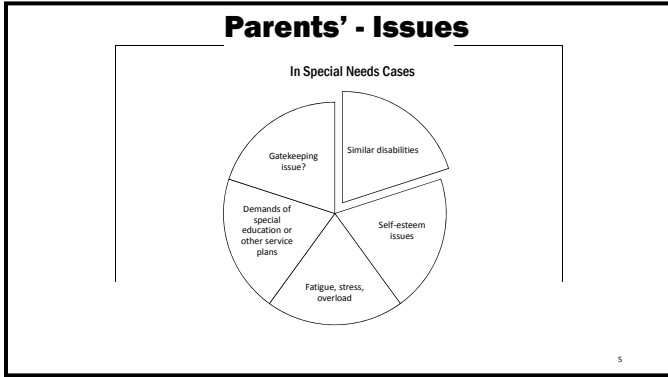
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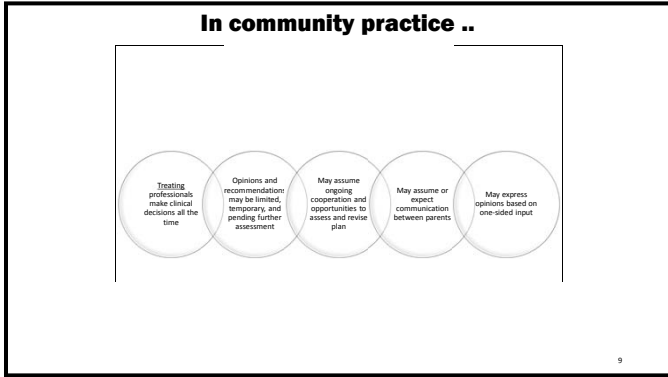
Legitimate disagreement vs. another canvas for parental conflict..

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    graph LR
      A[Whether the special needs exist] --> B[Appropriate management strategies]
      B --> C[Generalized statements vs. the child's specific circumstances]
      C --> D[Extended evaluations]
      D --> E[Delay may compromise the child's development or safety, even more than occurs with a non-impaired child]
      E --> F[Parents, the court, or other professionals want the evaluator to "pick a winner"]
      F --> A
  
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Deciphering the Doctor's note:

Is there a diagnosis?

Is there a plan specific to the child?

Is there a recommendation for a "trial," or a temporary intervention pending further assessment?

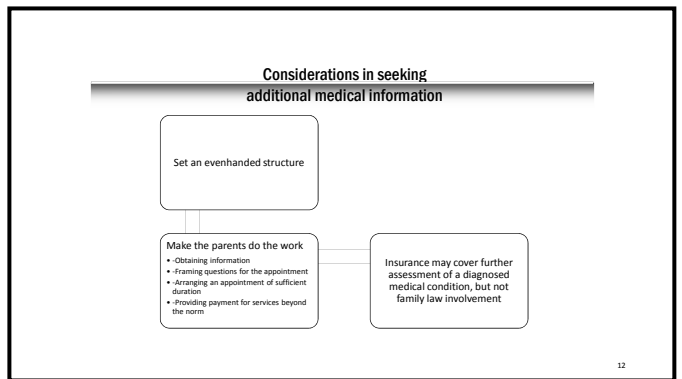
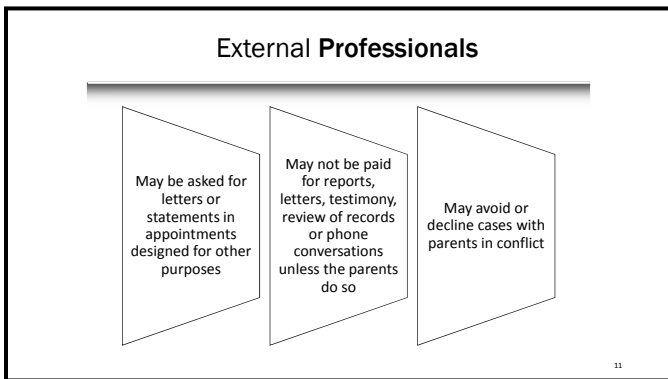
Does this MD have ongoing responsibility for the child?

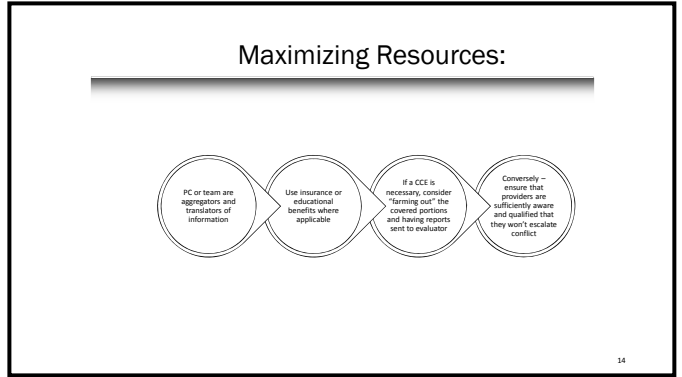
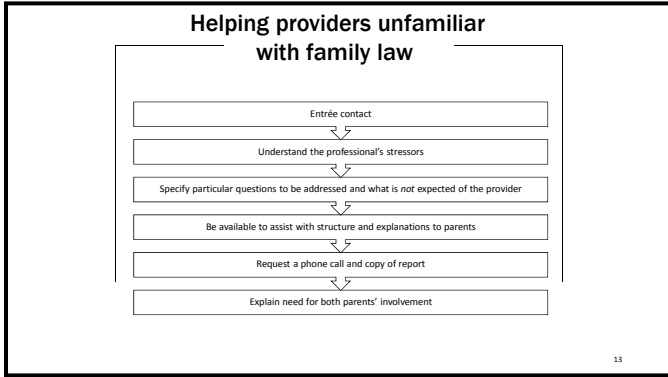
What's the follow-up plan?

Were both parents consulted?

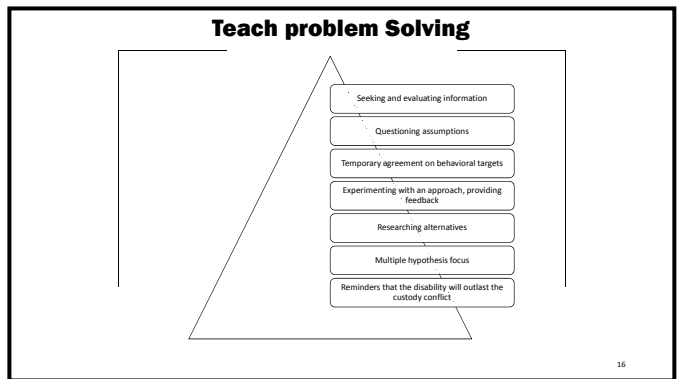
Was an alternative presented to the doctor, or mentioned by the doctor, but not reported?

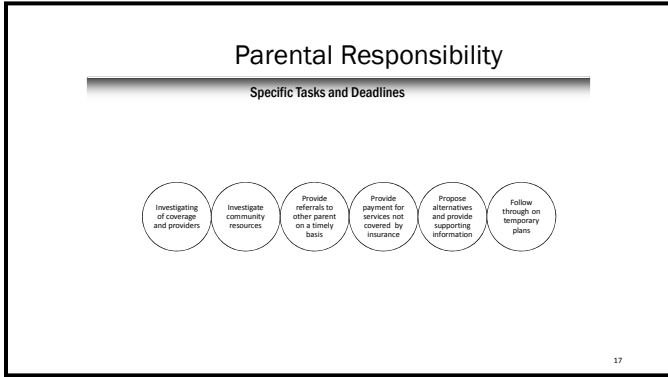
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- ### Established Medical Conditions
- o Are both parents aware?
 - o Have recommendations been made to both parents?
 - o Were they accurately interpreted?
 - o How well have the parents followed recommendations?
 - o If a parent disagreed, did he/she return to the doctor or propose an alternative?
 - o Is MD seeing differential follow-up at time of court dates, or after weekends with either parent?
 - o Consistency vs. Rigidity
 - o Attempts at mitigation of risks
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- ### Plans for chronic conditions often require home-based maintenance..
- Familiar parenting variables apply
 - Consistency (caution re definition)
 - Attunement to Child
 - Authoritative parenting
 - Ability to set limits and promote positive coping
 - Willingness to implement treatment plans
 - Facilitative rather than restrictive gatekeeping (Kaufman and Pickard, 2017)
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Dan and Mary Smith have been divorced for two years. Dan is Black, Mary is Caucasian. The separation occurred when their son Scott was 5 years old. The parents live within a mile of one another and Scott has had a 2-2-5-5 schedule since their separation. Scott has always been an active child but is now developmentally behind his peers and has twice been suspended for disruptive behavior at school. He is currently in the second grade and is struggling academically.

With both parents' consent, Scott was tested for his eligibility for support services to address his learning disabilities and has been receiving some assistance at school. School personnel are suggesting that Scott has attention-deficit-hyperactivity-disorder (ADHD) and that he should receive medication. They are suggesting that he may not be allowed to return to his school if this does not occur.

Mary agrees with the school's recommendation and Scott's pediatrician has agreed to facilitate a more comprehensive assessment. Mary believes that Dan is in denial about Scott's condition. She reports being told by teachers that Scott needs a consistent environment and interprets this to mean that Scott should only reside with her during the week. She fears that Scott will be expelled from school and carry that failure for the rest of his life. Dan agrees that his son has problems but also believes that Scott is being unfairly targeted because of his race. Dan also states that he has far fewer problems controlling Scott's behavior than Mary has, and believes that her permissive parenting is part of the problem. He fears a rush to medicate Scott and that Scott will be labeled. He opposes medication for Scott until all other options have been tried. He has also read articles stating that ADHD is overdiagnosed, particularly in children of color. The parents have agreed to family therapy as an interim measure while other options are discussed.

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Susan Mills, age 9, was diagnosed with Autism Spectrum Disorder at the age of 3. Her parents, Justin and Karen Mills, both actively participated in seeking an adequate diagnosis and assessment of Susan, and both attend her education, treatment planning and medical appointments. Susan lives with her mother during most of the week, although she is with her father from the close of school on Wednesday to Thursday morning and on alternate weekends. Karen devotes much of her time to overseeing services for Susan and has become a parent advocate for other disabled children.

Disagreements have emerged about the severity of Susan's symptoms and her readiness to participate in a broader range of activities. Justin believes that Susan would be able to participate in a community recreation program and proposes enrolling her in a team sport or art program since he believes she likes both. He would like to gradually increase his parenting time so that he could ultimately take a short vacation with Susan. Karen believes that Susan is unable to handle interaction outside of a special program and that Justin is pushing Susan too hard. She further states that Susan is exhibiting greater stress after her overnights with Justin and believes that Justin is not following the structure and daily routine that has been established for Susan. The parents disagree as to which of Susan's routines have been recommended by the school and which have been established by Karen. Justin feels controlled and micromanaged by Karen and believes that she is stifling Susan's development and attempting to marginalize him as a parent. Karen alleges that Justin has become insensitive to Susan's needs because they do not fit into his lifestyle. Each parent has found web sites, articles or professionals to support his or her opinion.