

Able-Differently
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**Mental Health and Wellbeing interventions for families of special needs children
Mediate with Training and Support of Primary care Practitioners**

Over 14 million children and adolescents, or 1 in 7 (2 in 7 by 24 years old), have a diagnosable mental health disorder that requires intervention. Costs are unaffordable and only 26-27% of children who are identified receive treatment. The need is great and there exist many barriers to serve this population.

Many practitioners would agree that almost a third of their patients present with either primary or secondary psychosocial concerns. Pediatric and Family physicians have been a significant first resource for parents who are worried about their children's psychosocial problems and today behavioral concerns are the most common chronic conditions for encounters, surpassing asthma and infectious diseases. Of course children with special health care needs have increased secondary social-emotional conditions (40%), and 79% of children with neurological handicaps have social-emotional conditions.

Families, now days are more stressed, and challenged. They have many concerns and large numbers continue to be assessed as high risk but with little or few resources. There are problems with referral to mental health services, and if families are successfully referred there is little feedback or sufficient consultation to inform our practices in how to manage them without further stigmatization.

These children take more office time without adequate compensation (partly bill just enacted 12/09). Our continuing training has come out of necessity, and for most of us, after formal residency. It is also likely that public health systems is worsened by current societal changes, exacerbated by the recent recession that has lead to further cutbacks in resources, leaving voids in services.

In addition, there are large numbers of patients, as evidenced by the theory of change literature as well as our experience, where parents may not be ready or prepared to take action or feel supported to follow therapeutic advice right away. They sometimes comprise our most difficult dispositions by their rationalizing, reluctance, and self-blame. They define their stuck positions in contradictory, contemplative and ambivalent states of mind. Likely many health care agencies you may refer to, because of today's realities, would just give such a family another telephone referral and might not connect with them again.