Children and Adolescent Treatment

By Greta Nielsen, LCPC, NCC

Today children and their families are faced with a multitude of stressors and parents wonder if their child's response to the stress is serious enough to necessitate outside involvement, or are they just going through a "phase"? The best indicator as to whether or not a child would benefit from outpatient counseling is their behavior. Are their behaviors causing problems across a variety of settings such as school, home and with friends? Are they regressing, returning to behaviors more common for younger children? Is their school work declining? Is your once social butterfly now reclusive? Are they having trouble sleeping or eating? Are they avoiding school? Are they being self-destructive? Any change in their normal routine and way of relating over a period of more than four weeks is a pretty good sign that there is something they are struggling with that is out of their control.

Clinical Care Consultants Child and Family Counselors help children, teens and their parents manage the difficulties they encounter and give them the skills to overcome, or perhaps even prevent, the development of disorders that negatively impact their functioning. Clinical Care Consultants clinicians are skilled at addressing many issues facing children and their families but the ones most commonly identified are:

- **Adjustment Disorders:** Where a change of life occurs and the child responds in a maladaptive way. A divorce, death, move, new school, etc., can bring about feelings of stress, helplessness and anxiousness that they are unable to manage.
- **Depression and Anxiety Disorders:** The depressed and/or anxious child lacks engagement in most areas of their life. There is little motivation to enjoy even simple activities and they tend to be socially isolated and often avoid any social setting. In a manner typical for children they display irritability and oppositional behaviors when suffering from depression instead of significant sadness.
- Attention Deficit Disorder (ADD/ADHD): This can be seen with or without
 hyperactivity. A typical child with ADD will have trouble concentrating, be easily
 distracted, unable to focus and is scattered both mentally and in their physical
 environment.
- **Oppositional-Defiant Disorder:** When a child's negative and defiant behavior significantly impacts his/her social, educational and familial environment. These children have difficulty controlling their temper, are argumentative and often refuse to comply with rules.
- **Eating Disorders:** These can be either anorexia, a refusal to eat, or bulimia, binge eating. These children are unable to maintain a healthy body weight and have a disturbance in their body image. Food is a major source of conflict and anxiety for them and their families.
- **Developmental Disorders:** Children with developmental disorders have marked impairment in social interactions and fail to develop appropriate peer relationships. There is a spectrum of developmental disorders and a thorough evaluation is essential to obtain the appropriate treatment needed.

Treatment approaches differ based on the type of presenting problems, the diagnosis given, and the resources available to the client. There is no cookie cutter approach that works best, but we do know a combination of individual, family and, at times, medication work well to make the most significant and lasting changes in the child and his/her environment. Clinical Care Consultants clinicians utilize the following modalities in working with you and your child:

- Play therapy
- Cognitive-Behavioral Therapy
- Experiential Therapies
- Psychodynamic Approaches
- Bibliotherapy/Education

We hope we can help you, your child and your family obtain, or return to, a state of health and happiness.