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Fernbrook Family Center, Inc. Need Identification and Training

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Fernbrook Family Center, Inc. Need Identification and Training

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Abstract

Mental Health Practitioners (MHPs) provide services to clients with a variety of diagnoses and presenting problems. Continued education and training on evidence-based practice is needed. A survey was created and completed for the capstone project. MHPs at Fernbrook Family Center, Inc. (FFC) indicated that Reactive Attachment Disorder (RAD), Behaviorism, and Systems Theories were areas of interest. A workshop was completed at the agency for MHPs practicing there. Post-workshop surveys indicated the information was applicable to current practice and would be shared with other professionals.

Literature Review

The diversity of presenting problems drives the need for MHPs continued training and education of available best practice models. Currently there are no evidence-based practices for the diagnosis of RAD, however some interventions have shown some degree of success including Cognitive Behavioral Therapy and systemic approaches (Shaw & Páez, 2007).

RAD is characterized in the DSM IV-TR by specific criterion that includes "inappropriate social relatedness". Pathogenic care is believed to be responsible for the disturbance (APA, 2000). There are multiple associated behaviors such as aggression and stealing (Forbes & Post, 2006). Disorders that may be mistaken for RAD or co-morbidly occur with RAD are Attention Deficit Hyperactivity Disorder, Oppositional Defiant Disorder, Conduct Disorder, and Pervasive Developmental Disorders, among others (Shaw, & Páez, 2007).

Attachment Theory, Biopsychosocial, Systems Theory, and Behavioral approaches are often used by providers when working with children diagnosed with RAD. The application of the theories results in differing assessment which in turn drive the goals and interventions. Attachment Theory views the primary caregiver's relationship to the child as the basis for all future relationships (Bowlby, 1988). The biopsychosocial theory investigates altered connections within the brain, cognitions, and relationships (Corbin, 2007). Systems approach is similar to the biopsychosocial approaches in ways, and investigates how various systems interact (Zeanah & Smyke, 2008).

Research Questions

1. What were areas of interest for a workshop for MHPs at FFC?
2. What are evidence-based practices for this area of interest?
3. Was the workshop beneficial to MHPs at FFC?

Methodology

This was a three phase project:

- Phase 1: Identify areas of interest via surveys. ()
- Phase 2: Conduct a system review of the literature to create a continuing education module for an agency training workshop.
- Phase 3: Conduct a post workshop survey (12 out of 20 were returned).

Surveys were created, reviewed by appropriate parties and distributed to approximately 20 MHPs with a letter of informed consent. Less than half returned these surveys (N=7). Data was compiled and areas of interest were determined. Information from the literature and personal communication was gathered and reviewed to create the workshop and present it. MHPs were encouraged to engage during the workshop and discuss cases where attachment issues were apparent. Prior to providing the workshop it was reviewed by the Clinical Director of FFC, researcher's academic advisor, and one peer. After the workshop was presented a post-workshop survey was provided to determine benefits of the workshop (N=12).

Table 1
Initial Survey Responses (N = 7)

	Highest number of responses	Mid-number of responses	Lowest number of responses
Diagnosis or symptoms of interest	RAD	Social skills PDD/Autism Anger Management Sexual Abuse	Parents ODD Anxiety Bedtime Routine Eating Disorder
**Ages of clients (in years)	11-14	6-10	0-5 15-21
Theories of interest	Behaviorism	Systems Cognitive Behavioral Therapy	Strengths

**Ages are relevant as diagnoses can depend on age of onset of symptoms and some theories are suited better for different ages

Table 2
Responses to Post Workshop Survey (N = 12)

Survey Question	Disagree	Somewhat Disagree	Agree	Strongly Agree	Not Applicable
1. I can utilize the information that was presented in my current practice	0	0	6	6	0
2. I will share the information that was presented with other professionals	0	0	10	2	0
3. The content presented today was easy to understand	0	0	5	7	0
4. The presenter was knowledgeable about the topic	0	0	6	6	0
5. What aspects were the most helpful to you and why	Resources to use Signs and symptoms, examples, and interventions Research Systemic interventions Relating information to real-life examples Different theories				
6. What aspects of the workshop were	DSM Handout, already aware of information				

Data/Results

Response rate to the initial survey was 7 out of 20. Some surveys did not provide responses to all areas. MHPs who completed the initial survey indicated interest in a variety of disorders and symptoms (see table one). All MHPs who completed the survey indicated current utilization of relationship-based practice.

Systemic interventions including family psychoeducation and safe, supportive, secure environments have shown improvements in the lives of some children with attachment issues. MHPs at FFC indicated via post-workshop surveys that they either agreed or strongly agreed that they could utilize the information in current practice. Information on systemic interventions, signs and symptoms of RAD, and inclusion of different theories were reported as helpful.

Conclusions & Recommendations

RAD was the topic identified by MHPs. A systemic review of the literature revealed no evidence-based practice. Attachment, Biopsychosocial, Systems, and Behaviorism Theories address certain symptoms of RAD. A post workshop survey of learning outcomes revealed information from the workshop could be utilized in current practice, information would be shared with other professionals, and was easy to understand. Continued education and training on evidence-based practice is needed.

There is no evidence-based practice for RAD, however, best practice at this point is a safe, secure, and supportive environment (Shaw & Páez, 2007). Interventions have demonstrated more effectiveness with the inhibited type (Zeanah & Smyke, 2008). It is recommended that FFC and other agencies providing services to children who are diagnosed with RAD provide opportunities for research and learning of evidence-based practice. More research is needed to determine an evidence-based practice for treating children with this disorder.

Implications for Practice

- ❖ Continued research, education, and training for effective practice
- ❖ Continued research for evidence-based practice on RAD is needed (Hardy, 2007)
- ❖ Dissemination of information on evidence-based practice for RAD is necessary
- ❖ MHPs and other professionals working with children who are diagnosed with RAD or attachment issues must:
 - ❖ be aware of the multiple challenges that can arise and
 - ❖ utilize appropriate theories and interventions.
- ❖ There are currently no evidence-based treatments for RAD, however providing a stable, safe, supportive environment between the home, school, and community is a way to foster the creation of healthy relationships and attachment styles (Shaw & Páez, 2007).
- ❖ There are identified risk factors that can be addressed to lessen the possibility of the development of RAD; these take a systemic approach.

References

References are available from the author upon request.