

Chapter Seventeen
INTERVENTION AND PREVENTION

Developmental Psychopathology: From
Infancy through Adolescence, 5th edition

Charles Wenar and Patricia Kerig

- Integrated models
- Evidence-based approaches
- Empirical Validation: Studies
 - Control Group
 - Random Assignment
 - Treatment Protocol
 - Defined Population
 - Outcome measures reliable & valid
 - Data Analysis appropriate
 - Adequate statistical power in design

Effectiveness of Treatment

- Categories
 - Possibly efficacious (1 study)
 - Efficacious (2 independent studies)
 - Efficacious & specific
 - More effective than alternative tx by 2 indep. Teams
 - Role of conflicting evidence
- Weitz, 1995: Meta-analysis
 - Children treated less symptomatic
 - Compared majority of non-treated children--76%
 - Overall conclusion: Tx = effective

Ethnic Diversity and Intervention

- Cultural differences in pathology
- Cultural differences in treatment
- Cultural competency for therapists
- Culturally compatible interventions

Models of psychopathology applied to intervention strategies:

- Psychoanalytic Approach
- Humanistic Approach
- Behavioral Therapies

- Cognitive Therapies
- Family Systemic Approach
- Medical Model—Psychopharmacology
- *Psychotherapy*, which is intervention directed at changing internal factors that mediate between environment and child's behaviors
- Interventions directed toward changing the environment, such as behavior therapies or family systemic therapies
 - Disability = mismatch capacities of individual and demands of environment
 - Can address either or both

1. Psychoanalytic Approach

- *Minimal treatment of this approach*
- Classical Psychoanalysis
 - Conceptual Model
 - Therapeutic Process
 - Transference, interpretations, insight, working through
- Ego Psychology
 - Conceptual Model
 - Therapeutic Process
- Object Relations Theory
 - Conceptual Model
 - Therapeutic Process
 - Family Context
- *Psychodynamic Developmental Therapy for Children (PDTC)*
 - Conceptual Model
 - Therapeutic Process
- Empirical Support
 - Generally poor
 - Psychodynamic: Internalizing more than externalizing; success with wide range of problems

2. Humanistic Approach

- Humanistic (Client-Centered) Therapy
 - Conceptual Model
 - unconditional positive regard
 - conditions of worth
 - Therapeutic Process
- **Play Therapy**

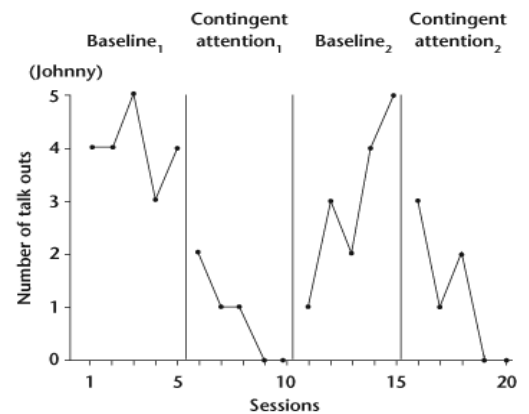
- **Dibs In Search of Self (Axline, 1964)**

- Empirical Support
 - Warmth etc. consistently related to positive outcomes

3. Behavior Therapies

- Conceptual Model
 - A-B and A-B-A-B designs
- Developmental Dimension
- Therapeutic Process
 - classical conditioning
 - operant conditioning
 - observational learning
- Family Context
- Empirical Support
 - Positive for wide variety problems: conduct, phobias, bedwetting (enuresis)

ABAB Design



4. Cognitive Therapies

- Conceptual Model
- Therapeutic Process
 - cognitive treatment for Anxiety Disorder
 - cognitive treatment for Obsessive-Compulsive Disorder
 - Interpersonal Problem-Solving Skills Training (IPS)
- Empirical Support
 - Strong, including Conduct disorder, anxiety.
 - More effective for older children

5. Family Systemic Approach

- Conceptual Model
- Therapeutic Process
 - restructuring techniques
- Empirical Support
 - Some support
 - More likely for families to persist in treatment

6. Psychopharmacology

- Varies by disorder
- Combined with other approaches
 - ADHD: Meds & Cognitive-Behavioral
- Varies by age of child
- Dispensed by physician
 - Psychiatrist v. Psychologist
- Research on drugs primarily from adults studies; cannot generalize

Integrative Model of Intervention

- Multiple theoretical orientations → link intervention planning to *pathogenic processes*
- Combinations
 - Behavioral-Play
 - Cognitive-Behavioral
- Major domains of development
 - cognitive
 - emotional
 - interpersonal

PREVENTION

- *Prevention*: Reduce developmental effects
- Reduces the cumulative effort, costs, and suffering incurred if action is taken only after psychopathology develops
- Cost effective

Primary, Secondary, & Tertiary Prevention

