

Case Study Notes for DVD 4

Following is some information that the DVD presentation was based on. Use it in combination with watching the DVD to respond to the exercises in the next section - Exercises from the Case Study.

Mitch is a 12 yr old boy who has experienced multiple losses over the past 5 years. He is now having difficulty adjusting to a new school, to grade 8 in high school and a new foster placement.

Mitch was referred by DOCS as they were concerned that he was very sad, withdrawn and keeps to himself a lot. He refuses to try and integrate into the new living environment. His DOCS worker Lyn found a drawing and note saying 'I wish I was dead' on Mitch's floor. He wouldn't talk with her about this.

Background:

- Mitch is the only child of Sarah and Mick Jones
- Sarah and Mick died in a car accident when Mitch was 7yrs old
- Mitch has lived with his grandmother Nancy since then (Sarah's mum) but Nancy now has Alzheimer's Disease and resides in a nursing home. She can't remember who Mitch is. This really upsets Mitch but he still wants to visit her at the nursing home.
- Mitch has no health problems
- Mitch does not wish to die but is quite sad, anxious and depressed
- There is no family history of mental illness

Mitch:

- Enjoys sport, especially soccer but stresses before games – is unable to eat and sometimes throws up before matches
- Does well at school and spends hours on his homework
- Has few friends and gets teased for being a geek and a goody goody
- Goes to the library and reads at lunch times
- Always has to be early for things or he worries he'll get into trouble
- Has trouble getting to sleep and wakes at 1 or 2am and can't get back to sleep until about 4am.
- Doesn't want to interact with the new foster parents (Tim and Jenny) or their children (Judy 16yrs and Bella 14yrs)
- He eats at the table with the others but gives very little eye contact or conversation
- Mitch has been doing lots of dark drawings
- He has been chatting on MSN with a friend called Freddie who is 17 and is an Emo
- He has a couple of friends from his old school, James and Toby. But they go to a different high school
- Mitch plays lots of computer games

Exercises from Case Study – DVD 4

These questions and responses have been created within a narrative context. Links with other headings for a diagnostic formulation (related to 7 P's) are added in brackets in *italics*.

1. What would Mitch identify as the main **problem** story that is bringing him to CYMHS to seek help? (*Problem*)

2. What would the theme of his **preferred** story be? (*Goal*)

3. When the problem story is around, what would others see Mitch doing or saying? (*Presentation and Pattern – internalising and externalising tendencies*)

4. What events/ facts has Mitch been experiencing that would have contributed to the problem story being created or getting bigger? List in order of importance to him. Most bothersome to least bothersome. (*Predisposing, Perpetuating and Precipitating Factors*)

5. Who are some of the people that stand against the problem story and make Mitch feel more the way he prefers to feel? That is, Peaceful, happy and loved. (*Potentials and social and family supports*)

Suggested Responses to Case Study – DVD 4

1. What would Mitch identify as the main **problem** story that is bringing him to CYMHS to seek help? (*Problem*)

- Feeling unloved, unwanted and angry

2. What would the theme of his **preferred** story be? (*Goal*)

- To feel peaceful, happy and loved.

3. When the problem story is around, what would others see Mitch doing or saying? (*Presentation and Pattern – internalising and externalising tendencies*)

- Running away to see his Nan in the Nursing Home
- Crying in his room
- Doing drawings that are dark and writing things like 'I wish I was dead' even though he doesn't really wish this
- Punching his pillow

4. What events/ facts has Mitch been experiencing that would have contributed to the problem story being created or getting bigger? List in order of importance to him. Most bothersome to least bothersome. (*Predisposing, Perpetuating and Precipitating Factors*)

1. His parents dying in a car accident 5 years ago. He was also in the car but was not hurt.
2. The teasing Mitch gets at school every day for being good at his work and preferring to have some lunch times in the library (called a geek and a goody goody)
3. Nan moving away and Nan forgetting him

5. Who are some of the people that stand against the problem story and make Mitch feel more the way he prefers to feel? That is, Peaceful, happy and loved. (Potentials and social and family supports)

- Friends – James, Toby and Freddie.
- Family – Nan makes him feel loved, Tony his coach makes him feel safe as does Mr Williams his Maths teacher

6. What are some of the things Mitch does to stand against the effects of the problem story? (*Pattern and Potentials*)

- Talk to his Nan, visit with Nan
- Go to the Library and read books
- Talk to his friends
- * Play Sport
- * Do his school work

7. . What are some of the possible things that Mitch feels may help him stand against the problem story in future? (*Direction for future therapy sessions/ Recovery Plan strategies*)

- Getting used to his new foster family
- Being able to keep seeing Nan
- Being able to see his friends more often
- Talking to the therapist about how to undermine the effects of the problem

8. What diagnoses are you considering at this point? (*ICD 10 Codes*)

- Provisional diagnoses requiring further questioning/clarifying
F42.2 Adjustment Disorder
F32.0 Major Depressive Disorder, single episode (mild or moderate)
- Contextual Factors
Z60.1 Atypical parenting situation
Z63.7 Other stressful life events affecting family and household
Z63.4 Disappearance and death of family member

9. What further information do you require at this point? How would you gather this information?

- Further assessment of thoughts of death and dying – direct questioning and check with foster parents about their understanding of the context and extent of statements made. Check with Mitch how often these thoughts are around, what the thoughts are, if there is or has been intent to die, understand the context (eg: Mitch may have these thoughts when he is missing his mum and dad and may see death as a way of 'being close' to them. Check his thinking about this.
- Reflect on his mood, appetite and sleep.
- Assess the impact of distress on life roles ie: is the problem impacting on his mastery of life roles such as Student, Foster Son, Grandson, Sportsman and friend?

10. Use the information you have from the DVD and Case study notes to write up a diagnostic formulation using the 7P's. As there is no intake information or other collateral provided just include the information that you do have in attempting a formulation.

Mitch is a 12 yr old boy who has experienced multiple losses over the past 5 years. Mitch was referred by DOCS as they were concerned that he was becoming increasingly sad, withdrawn and socially isolated. After the death of his parents 5 years ago in a car accident Mitch was cared for by his maternal grandmother who has recently been diagnosed with Alzheimers Disease and admitted to a nursing home. She is no longer able to care for Mitch so DOCS became involved and placed Mitch into foster care. He is having difficulty adjusting to this new foster placement and to grade 8 in a new high school. Mitch is an only child and he has no other extended family members living nearby.

The precipitation for this referral was an increase in low mood and social withdrawal. His DOCS worker Lyn found a drawing and note saying 'I wish I was dead' on Mitch's floor. He wouldn't talk with her about this.

Mitch describes the presenting problems as that he feels unloved, unwanted and angry. His DOCS worker describes problems as Mitch's difficulty integrating into school and new foster placement.

The ongoing grief and loss of his parents is the issue that Mitch identifies as the most bothersome problem to him. Mitch feels that other predisposing factors include the daily bullying at a new school and his Nan being unwell, unable to care for him any longer or remember him.

When Mitch is feeling unwanted, unloved and angry, he describes his pattern of behaviour as running away to see his Nan in the Nursing Home, crying in his room, doing drawings that are 'dark' and writing things like 'I wish I was dead' even though he doesn't really wish this and punching his pillow. He reports sleep disturbance, with difficulty getting to sleep, interrupted sleep and early waking. He describes problems with anxiety before soccer matches, being unable to eat and throwing up before games. The school and foster carers observe Mitch withdrawing socially, reading in the library alone, not speaking with anyone about his problems and looking more sad.

Factors that perpetuate this problem for Mitch include the daily bullying, as yet having no-one that he is able to speak with about his feelings and concerns, ongoing adjustment to Nan's declining mental state and altered caring relationship, adjustments to a new school, to the demands of grade 8 in high school and adjustment to a new foster family and living environment.

Potentials include a supportive relationship with his soccer coach Tony and his Maths teacher Mr Williams, a few close friends from outside school, positive engagement with sport, achieving well academically, a loving although altered relationship with his Nan, supportive DOCS worker and foster family, no family history of mental illness or prior history of poor coping skills. His current coping skills include communicating with friends by MSN and phone, reading, playing sport, visiting Nan and being proactive with his school work.

Mitch's goal is to feel peaceful, happy and loved. Mitch expressed hopes for the future around getting used to his foster family, continuing to see his Nan, catching up with his old friends more outside of school and described a willingness to engage with therapy supports to assist him through this time of adjustment.