



23<sup>rd</sup> International Conference on

# Adolescent Medicine & Child Psychology

September 28-29, 2017 Berlin, Germany

## Posters

Child Psychology 2017

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## Children's academic competencies: Success is in the eye of the beholder

**Marc H Bornstein**

Eunice Kennedy Shriver National Institute of Child Health and Human Development, USA

How children are thought to perform in the school setting often varies as much on account of actual individual differences as who judges them. Differences in reported ratings of children's academic performance are well documented in the literature, and rater assessment of academic competencies is important because competency beliefs impact children's academic achievements. The current study aimed to examine similarities and differences in child, mother, father, and teacher reports of children's (age 10) academic competencies in math, reading, music, and sports ( $N = 267$  families). This study extends analyses beyond the bivariate level to compare inter-rater and inter-domain correlation coefficients and matrices. Raters showed some systematic mean differences, but high levels of order agreement, perhaps reflecting the observable nature of children's school-based competencies. Little inter-domain agreement was observed except among teachers, which may be attributable to teachers' unique perspectives on children's competencies. The educational, developmental, and methodological implications of these findings are discussed in the context of children's school performance.

### Biography

Marc H Bornstein is a Senior Investigator and Head of Child and Family Research at the Eunice Kennedy Shriver National Institute of Child Health and Human Development. He holds a BA from Columbia College, MS and PhD degrees from Yale University, and an Honorary Doctorate from the University of Padua. He has held faculty positions at Princeton University and New York University as well as academic appointments in Munich, London, Paris, New York, Tokyo, Bamenda, Seoul, Trento, Santiago, Bristol, and Oxford. He is the President of the SRCD and a past member of the SRCD Governing Council Executive Committee of the ICIS. He was named to the top 20 authors for productivity in developmental science by the AERA

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## The letter to anorexia as a diagnostic and a therapeutic tool

**Dorota Ryzanowska**

Pedagogical University of Krakow, Poland

The aim of the presentation is to consider the usefulness of the narrative approach in understanding the experiences of patients with anorexia nervosa. The study included 40 patients of the Department of Children's Psychiatry and Mental Health Outpatient Clinic of the St. Louis Regional Specialist Children's Hospital in Kraków, at the age of 11-18. The retrospective qualitative analysis of 40 therapeutic letters written by adolescent female patients suffering from anorexia nervosa shows that narrative techniques of work such as letters are an important source of information useful in therapeutic context. Studies undertake among others, the question of the relationship between the "Authentic Self" of an individual and an "anorexic voice" present in the patient's mind which according to the current of narrative therapy shows such an intensive tendency of domination of thoughts, emotions, decisions and actions that patient can think about the disease like about his/her self-identity. The aim of the diagnosis and therapy in narrative approach is to identify and deconstruct this kind of internalized viewpoints connected with anorexia and build strategies which allow the patient to take control over them. The directions for potential psychotherapeutic applications of letters in the psychotherapy of patients with anorexia are proposed.

### Biography

Dorota Ryzanowska is a Psychologist and Psychotherapist. She has completed her PhD in 2014 from Jagiellonian University in Kraków. In 2009, she completed her training in family therapy, which was conducted by the Systemic Psychotherapy Centre in Kraków. During the training, she held an internship in the Department of Child and Adolescent Psychiatry of the Medical College in Krakow. She has eight years of experience in professional work as a family and individual psychotherapist of adolescents with eating disorders treated in the Department of Psychiatry of the Regional Specialist Children's Hospital in Kraków. She has published five papers in psychological and pedagogical journals and several chapters in thematic monographs.

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## Body appreciation and intuitive eating among Japanese high school boys

Hikari Namatame<sup>1</sup>, Tomohiro Suzuki<sup>2</sup> and Yoko Sawamiya<sup>1</sup><sup>1</sup>University of Tsukuba, Japan<sup>2</sup>Tokyo Future University, Japan

Research on body image and eating behavior has been heavily centered on describing and predicting negative body image and disordered eating. Recently, however, the studies of positive body image such as body appreciation and adaptive form of eating such as intuitive eating have gained momentum. Although the research on body image and eating behavior has been often targeted only girls, the importance of the research on body image and eating behavior among boys are indicated in these days. The present research aimed to investigate body appreciation and intuitive eating among Japanese high school boys. 148 high school boys participated and completed the body appreciation scale, intuitive eating scale-2 and other body image related measures such as body dissatisfaction. Body appreciation showed significant correlations between several other body image measures. In contrast, intuitive eating did not show any significant correlation between other body image related measures. The implications of these findings are discussed.

### Biography

Hikari Namatame has completed her Master's degree in Psychology from the University of Tsukuba. Her main research work focuses on positive body image.

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## Cognitive development and adaptive skills of children in institutions with different social environment

Kolesnikova Margarita, Zhukova Marina and Ovchinnikova Irina  
Saint-Petersburg State University, Russia

**Statement of the Problem:** It is well known that children who had experienced early psychosocial deprivation such as institutional care (IC) often show delays in cognitive functioning. In Russia IC placement is prevalent for orphans and vulnerable children, there are intervention programs designed to improve traditional IC and decrease child deprivation. Although empirical evidence is scarce, there are data on effectiveness of an intervention program, which varied the overall social environment in institutions. However, the long-term effects of this intervention program have not been well studied yet. The purpose of this study was to follow up the changes in traditional IC care 15 years after the intervention and to assess cognitive development and adaptive skills of children residing in two institutions with different social environment.

**Methodology & Theoretical Orientation:** We examined 31 children in the age range from 5 to 45 months who live in two types of institutions: family-like and traditional. To evaluate cognitive development of children, we used non-verbal scales of the Mullen Scales of Early Learning and Vineland Behavior Adaptive Scales to assess adaptive skills of children. We hypothesized that two groups would differ in terms of their cognitive profiles and performance on everyday tasks.

**Findings:** Results show that children from family-like IC outperform their peers in traditional IC on Visual Perception skills ( $F=6.398$ ,  $p=.0176$ ), and Daily Living skills (ANCOVA w age,  $F=4.481$ ,  $p=.0436$ ). Notably, there was no difference on the fine motor scale between two institutions (Fine Motor  $F=1.320$ ,  $p=.261$ ).

**Conclusion & Significance:** Both types of institutions provide children with sufficient stimulation for fine motor development. However, children from family-like IC showed significantly higher rates of adaptive functioning and visual perception, which supports the effectiveness of the intervention program.

### Biography

Kolesnikova Margarita is a graduate student majoring in Developmental Psychology at Saint-Petersburg State University, Russia. Her research interests are cognitive and language development of infants and young children, the impact of early deprivation on child's development. At the Laboratory of Translational Developmental Science Margarita Kolesnikova conducts behavioral research using the Mullen Scales of Early Learning. Margarita's project "Cognitive development of children living in families and institutions with different social environment" was supported by a grant from RSC!

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## Measuring irritability / emotional dysregulation in children and adolescents with ADHD

Jenna Pylypow<sup>1</sup>, Lloyd Balbuena<sup>1</sup>, Declan Quinn<sup>1</sup> and Don Duncan<sup>2</sup>  
University of Saskatchewan, Canada

**Objective:** Previous studies found oppositional defiant disorder to be primarily a problem of irritability/emotional dysregulation when studied using symptoms of ADHD, ODD, conduct, and affective disorders. This study analysed items which were found to load on emotional dysregulation, with the objective of developing a reliable and valid rating scale for measuring emotional dysregulation in children and youth.

**Method:** Two random samples of 360 were drawn from 3,374 SNAP-IV 90-item rating scales which were then used as calibration and validation samples for Rasch modelling. Each of 18 symptoms of emotional dysregulation was examined for fit with the Rasch model and evaluated for local independence and differential item performance. Items that violated Rasch assumptions were eliminated and the internal reliability and person separation index of the remaining items were studied. The resulting scale was validated using the Conners' Emotional Lability scale as a standard. We then analysed the items on the 3,374 SNAP-IV scales to calculate the rates of current emotional dysregulation in those meeting criteria for ADHD using both our scale, the CEER-9, and the Conners.

**Results:** A nine-item scale for emotional regulation has been developed that satisfies the Rasch model, a form of item response theory. This scale reliably separates emotionally dysregulated / irritable children and adolescents from healthy ones and is invariant with respect to child sex and age and rater type (parent or teacher). Area under the curve analysis showed that a threshold score of 4 in our scale has optimal accuracy for identifying children and adolescents with current significant dysfunction in emotional regulation. Among youth with ADHD inattentive, hyperactive-impulsive, and combined types, 78 percent, 85 percent, and 88 percent met the cut-off score for Conners emotional lability index. By comparison, the rates were 60 percent, 67 percent, and 71 percent using the CEER-9.

**Conclusion:** This study reports a nine-item rating scale, the Clinical Evaluation of Emotional Regulation-9 (CEER-9), an observer rating scale developed in children and adolescents, whose sum is a measure of emotional regulation, with a score of 4 or more out of 9 indicating current emotional dysregulation/irritability. Having the properties of good measurement, the CEER-9 is a valuable tool for clinical and research applications. Within children and youth with ADHD, current emotional dysregulation/irritability is highly prevalent.

### Biography

Jenna Pylypow is pursuing her Residency in Psychiatry, and fellowship in Child and Adolescent Psychiatry at University of Saskatchewan. She previously completed her Medical degree at University of Alberta, as well as Honours degree in Psychology at University of Calgary.

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## School attendance and chronic illness

**Doireann Eves**

Our Lady of Lourdes Hospital, Ireland

School absence is an objective, valuable indicator of child wellness. Chronic illness impairs school attendance, and both impair cognitive functioning, social relationships and behaviour. School absence leads to academic under-performance and a higher drop-out rate. Many health, social, and economic factors affect attendance rates. The purpose of this study was to establish the extent of school absence in children with a chronic illness and to ascertain associated factors that may influence school absence. Questionnaires were distributed to parents of children visiting a regional university hospital. A convenience sample of 28 children with a chronic illness (CI) and a control sample of 28 children without medical conditions was obtained. Mean school absence was higher in the CI group (mean 10.4days, median 9days, range 0-56days) than in the control group (mean 7.7days, median 5days, range 0-28days), as was absence due to medical appointments (1.85days vs. 1.3days mean). However, absence due to acute illnesses was higher in the control group (5.85days) than in the illness group (1.75days mean). Children with asthma were absent for mean 11.4 days, children with headaches 11days, and children with diabetes 5.3 days Children who were absent for more than 20 days of school were more likely to have a chronic illness, to have been bullied in the preceding year, to have learning support in school, and to have a psychiatric disorder than children who missed less than five days of school. School absence is more prevalent in children with chronic illnesses. The need for learning support in school, academic non-proficiency, psychiatric co-morbidity, and bullying were associated with an increase in school absence. Children with asthma were absent for longer than children with other chronic conditions. Any intervention designed to reduce school absence should focus on children in these high-risk groups, and should involve healthcare professionals, families, and schools working together.

## Biography

Doireann Eves is a Pediatric Senior House Officer at Our Lady of Lourdes Hospital, Drogheda, Ireland. She has an interest in psychosomatic aspect of general pediatric medicine. She hopes to develop a mindfulness based intervention group for children with chronic illnesses with the aim of teaching coping skills, improving school attendance and maximizing social functioning.

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## The review of unmet support needs for caregivers of children and adolescents with mental health issues

**Machiko Minegishi**

University of Sydney, Australia

**Background:** The key developmental process during adolescence is to individuate from parents, however, the parental attitude is one of the significant factors to impact their treatment outcome. The act of seeking mental health support is known to be a barrier for young people and the caregivers play pivotal role in liaising young people with mental health services. While Australia is fully funding National Youth Mental Health Foundation which provides psychological and psychiatric counselling, parental support is out of its funding system.

**Aim:** The aim of this study is to review the influence of parents in the initial engagement of children and adolescents (aged 12-26) to mental health care support and the occurrence of need for the parental support.

**Method:** Data were obtained from the detailed record of the intake contacts received from 1st November to 30th November 2016 at headspace Chatswood (N = 118). The data includes the name of the initial caller, the young person's name, DOB, contact number, the summary of each interaction and the outcome including the follow ups.

**Results:** Of the 118 intake enquiries, 59(50.0%) were from parents of young people who were concerned about their children's mental health issues. 10 (16.9%) of these parents requested specifically for further parental support at the time of initial contact by phone or direct walk-in. 4 out of 10 of these parents were from culturally and linguistically diverse (CALD) background. Among the 118 intake calls, 36(30.5%) were self-referral from young people seeking mental health support.

### Biography

Machiko Minegishi has her expertise in child and adolescent general pediatrics and the provision of comprehensive care for the children and young people with chronic health conditions in Japan. After years of experiences in pediatric health care, research and teaching both in hospital and education institutions in Japan, she extended her interest in the realm of youth mental health and social welfare through her study in Australia. The case report from her placement at Headspace Chatswood, Australia demonstrates the need for raising awareness among health care professionals about suicide risks of adolescents with T1DM, who have easy access to the means of self-harm.

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## Can gastroenterology change the therapeutic approach to autism? An innovative proposal for the study of the causes of autism

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Several studies demonstrated that many foods may provide many bioactive peptides into the gastrointestinal tract, as for example, the beta-casomorphin-7, an opioid-like peptide produced by casein. Recent studies have established that the production of these opioid peptides is experimentally associated with autism. Autism is a developmental disorder with a possible connection between dietary components and triggering or worsening of symptoms. An altered intestinal permeability might allow absorption of incompletely digested peptides (gluten and casein) that could produce opioid-like activity in the brain, causing significant changes in behavior. It is also showed, that phenomenon, of the formation of the opioid peptides, strongly stimulates intestinal mucin production in *ex vivo* and *in vitro* models, in particularly, these effects were associated with a higher expression of intestinal mucins (gel forming), MUC2, the principal constituent of Gut Protective Layer. The Over Expression of MUC 2, contrary to what one might think, does not strengthen the intestinal protective layer, but rather tends to altering the continuous layer, in a succession of bubbles, separated by channels, which allow for greater permeability, facilitating the cycle of the opioid peptides and the free radicals. The effect is twofold: inhibition of nerve receptors, and formation of, cerebral micronuclei. The purpose of this study is to propose research, as NMR, for with the imaging to evaluate, the biochemical process for inhibit the MUC2 Over-Expression, in autism, using for example enzyme as the sialidase.

### Biography

Roberto Menicagli has completed his PhD from Milan University. He has completed his Postdoctoral studies in Biochemistry and Molecular Genetics at Milan University. He is the Director of Roma Biomed Research Lab, a private medical service organization. He has published more than 20 papers in reputed journals and he is also the principal author of four international patents, in the field of the environment, and biomarkers, and has been serving as an Editorial Board Member of two magazines concerning the medical sciences.

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## Comparison of childhood traumas and strategies of coping with stress among addicts and normal people

**M Dehestani**

Payame Noor University, Iran

**Introduction:** This research has been abided to deliberation and comparison of childhood traumas and strategies of coping with stress among addicted to drugs and normal people.

**Methodology:** In a causal-comparative design, 100 male addicts and 100 normal people (200 all of them) were chosen by Convenience Sampling. For accumulating information was used from strategies of coping Lazarus scale and childhood traumas questionnaires and were asked from stows of sample that complete these questionnaires. After consisting of data, with using statistical model of logistic regression was abided to analysis of conclusion.

**Result:** Finding showed addicts were using emotion- focused coping style more than normal people and this kind of styles could anticipate addiction. Also, in all of dimensions of childhood traumas, the mean of numbers of group of addicts was more from normal people and emotional default and sexual abuse could anticipate addiction.

**Conclusion:** It was concluded that decreasing of numbers in emotion- focused coping style, emotional default and sexual abuse will amplify the contingency of addiction to the drug.

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## Why parallel parenting may be the better choice for families of divorce

**Catherine MacWillie**

Custody Calculations, A Public Benefits Corporation, USA

In today's divorce environment of extreme litigation, parental alienation, false allegations, of child abuse, police reports and restraining orders, filed to gain an advantage in custody an alternative to co-parenting is a must to protect the parent child relationship and shared custody. Considering a growing number of judicial decisions across the country due to the inability of parents to co-parent the courts are severing or severely limiting contact between many parents and their children. A decision detrimental to everyone involved especially children who suffer ~ lacking regular and frequent contact with both parents, however different, their parenting styles may be. This is also in direct opposition to what the courts desire but is the result nonetheless. It is also a decision that ultimately results in many cases to the loss of all contact between a parent and a child as the primary parent now seeks further destruction of the non-primary parent and child relationship with full immunity lacking recognition of courts of an already existing alternative to the scenario such as parallel parenting. Aggravating the scenario is that the courts usually decide in favor of the more aggressive and alienating parent who is usually more financially capable and who is by the very definition more presentable to the courts. As opposed to the target parent who is often under severe duress and suffering from PTSD and seen as less capable in and out of court and during assessments. An issue could be reduced or obstructed with early awareness and use of parallel parenting by parents, the courts and other experts. Parallel parenting can be implemented without an order of the courts. But certainly, it is a bonus if court order at the onset of the divorce, custody and shared parenting process as opposed to the current failed model of co-parenting.

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## Mindfulness and relaxation practice to improve children's executive functioning

**Zemirah Jazwierska**

School Psychologist, Kids Relaxation LLC

Executive Functioning is the brain functioning involved in mental processes such as working memory, response inhibition, sustained attention, initiation of tasks, shifting focus, cognitive flexibility, self-monitoring and goal orientation. Executive function, or EF, is the chief function contributing to children's ability to self-regulate their emotions. Often children with genetic conditions such as ADHD, autism spectrum disorders, learning disabilities, and anxiety disorders display some level of impairment with EF. Trauma and/or neglect can also contribute to reduce EF. Research is building to show that mindfulness practice and relaxation techniques are effective in down regulating the limbic system and fight/flight/freeze response resulting in improved executive brain functioning. And, if utilized consistently over time, children will default to these tools in times of stress instead of the once-conditioned reactive emotional responses. Once children learn ways to self-regulate their emotions, they can bring themselves back to a state of calm which increases their access to the prefrontal cortex, the area of the brain largely associated with EF, thus improving their executive functioning skills. In this workshop, the symptoms of EF dysfunction and corresponding neurobiology involved with EF will be outlined, research regarding mindfulness and relaxation practice will be discussed and relaxation and mindfulness tools will be introduced and demonstrated. The alternative lens of brain functioning will be applied to the perception of behaviour of concern and taken into consideration in the development of treatment and/or skill instruction plans.

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## Using technology appropriately to assist young children learn about sexual education: An overview of the new “Facts of Life Interactive”

**Jillian Roberts**

University of Victoria, Canada

Children have many questions about the “facts of life” or where babies come from. Research has shown that this can be a difficult and awkward conversation for parents to have with their children. It is essential to give children accurate yet age-appropriate information at the right times, and from their parents, rather than from classmates, the TV, or the Internet. With these ideas and concerns in mind, in 2012 Dr. Roberts created a software application for digital media devices. This first app is called “The Facts of Life” and it has now been downloaded over 30 thousand times around the world. With support provided by the University of Victoria and the BC Innovations Council, “The Facts of Life Interactive” (FOLI) is now ready. The new version will incorporate the latest interactive features of IOS to provide children with an enthralling and educational experience. Talking about the facts of life will no longer be a boring and awkward experience for children and families. During this keynote address, Dr. Roberts will provide an overview of FOLI, all the while grounding the new direction of education and technology in the key findings of pertinent extant literature in the areas of early childhood education and paediatric health psychology. Dr. Roberts will also discussing the theoretical/clinical importance of appropriate sexual education for preschool children.

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## The psychological impact of immigration detention on child and adolescent asylum seekers

**Kathryn S Miller**

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Penn Center for Public Health Initiatives' Asylum Evaluators Consultation Group

There has been a surge in the number of people fleeing their country of origin due to persecution. Many countries, including the United States, have implemented measures like detention to discourage asylum seekers from entering the country. Studies have shown that detention can have adverse effects on asylum seekers, and can maintain or exacerbate the mental health of an already traumatized population. Children are especially vulnerable to the impact of detention, which can have lasting effects on their developmental trajectory and physical and mental wellbeing. We have evaluated a number of children and mothers detained at Berks Family Detention Center in Leesport, Pennsylvania. For the majority, experiences in detention are correlated with the onset or significant increase in posttraumatic stress, anxiety, depression, hopelessness and suicidality, as well as feelings of confinement, perceived loss of control, invasion of privacy, and distortions in self-concept, world-view and future orientation. Families report increased feelings of isolation, given their inability to access protective resources in detention (e.g., limited contact with family members in the community, inability to fully practice cultural or religious beliefs, limited opportunities for socialization). Parent-child relationships are negatively impacted, given that a parent's ability to care for their child is compromised by the constraints of detention. Children face barriers to achieving developmental milestones, given limited education and opportunities for play and recreation. Families lack access to medical and mental health treatment to promote physical and mental wellbeing. Some families have also reported abuse, neglect and inappropriate use of solitary confinement by guards.

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## Challenging the international trend to increase prescribing rates for psychotropic drugs for school aged children – An issue of safeguarding their wellbeing

**Dave Traxson**

British Psychological Society, UK

I will open my talk with the concept of ‘Psycho-Economic Imperialism’ (Traxson 2013) –which I define as the biochemical colonisation of young developing minds for huge commercial profit and social control. I coined this term to help stimulate debate on the growing trend internationally to medicate more and more young children for behaviour problems that may be associated with their immaturity or their distressing life experiences. It has been well received even in America which has the highest rates for medicating children with such potentially toxic drugs. I will outline some key issues in this crucial area of professional practice and give illustrations from three main psychotropic drug categories stimulants, anti-depressants and anti-psychotics. I will use these to promote discussion and encourage colleagues to follow the principle of being ‘Ethically Mindful,’ i.e. working in a way that better Safeguards Children from the the potential risk of toxic harm. I will share some examples of challenging such diagnostic and prescribing practices and share a Reflective Checklist, which I have developed in consultation with a range of professionals who are involved in this field and which was inspired by the work of Dr Atul Gawandne in his seminal book, ‘The Checklist Manifesto.’(2009).

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## The role of cultural factors in engagement and change in multi-systemic therapy

**Simone Fox**

National Implementation Service, South London, UK

Evidence has shown that Multi-systemic Therapy (MST) has been particularly effective in the treatment of youth with antisocial behaviour from ethnically diverse backgrounds. Although the process of change within MST has been explored, there is a dearth of research in looking at this for families from ethnic minority backgrounds. This qualitative study aimed to explore ethnic minority caregiver experiences of MST and understand how this might impact on engagement, the presenting problems and the process of change. Semi-structured interviews were conducted with seven ethnic minority caregivers who had completed treatment. A constructivist version of grounded theory was used to analyse the data. Specific cultural theoretical codes that emerged were around the consideration of cultural difference in terms of the engagement process, the conceptualisation of difficulties and the therapist acting as cultural broker in the process of change. This research integrates culturally specific ideas into the existing MST Analytical Process.

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## Sameness, immobility and omnipotent control in OCD and Autism

**Francesco Bisagni**

Center for the Studies in Contemporary Psychoanalyses - CSPC, Italy

**A**im of this contribution is to highlight the obsessional features observed in an autistic child whom I treated analytically with four weekly sessions for eighteen years, to relate them to the obsessional functioning in the family, particularly the mother, and to discuss the severe obsessive-compulsive disorder in my patient's younger brother, which became apparent in his late adolescence. This boy is treated analytically by a colleague whom I regularly see in supervision. I will mainly focus on the obsessional features, about language, and the issue of sameness in particular, and will consider the family and the brother as part of what I saw as a reticulum of modes of functioning that all the group members shared.

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## Autism is curable; the re-start infant family program for infants and toddlers with autistic behaviour

**Stella Acquarone**

Parent Infant Centre, UK

Autism affects 1% of the general population (Baird 2003) and 25% of the children born premature (Limperopoulos, 2008). Often it is a different evolution in development from our normal development because of mysterious sensitivities, sometimes physical deficits and interpersonal adaptation, accommodation, reciprocity and parental attachments. Early intensive intervention is possible from a very young age. First we identify the signs of alarm with a 'Mother' scale and an 'Infant' scale and from this we can set up the goals for a treatment. Treatment should include work with the parents alongside working with the baby. They need to find out the cause of the child's impairment to relate, whether is physical or psychological. We have developed two main methods to change development outcomes: the first is consultations of one hour to help gain insight to the parents of what is going on in the baby's mind and difficulties in emotional dysregulation; and the second is The Re:Start programme, an intensive intervention with babies and toddlers that are already showing autistic-like behaviour. To wait until school age for an official diagnosis misses the window of opportunity when the brain is wiring up and/or pruning neurons which could jeopardise emotional and cognitive potential. An early intervention can better the outcome for the child, the family and society as a whole. This treatment – which is 6 hours per day for 3 to 4 weeks by a multidisciplinary team – includes general awareness of physical difficulties and exploration of the specific emotions interfering in the social and communication interactions between the mother/father and baby/toddler. We consider 5 areas with sub-areas that we measure before and after the intervention. All the children who completed The Re:Start programme changed their diagnosis and grew up knowing their difficulties and able to go into main stream education. I will present the graphics with the results of the scale evaluation before and after treatment.

**Conclusion:** Early signs of autism and diagnosed autism is treatable and could become a thing of the past. The concept and the practice of The Re:Start programme is a great contribution towards the understanding of this condition and the treatment towards making autism curable.

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## Emotional education for early school leaving prevention: the project

**Francesca Mencaroni**  
Doctor Schiralli's, Italy

The EUMOSCHOOL project aims to develop, test and implement a new coherent methodology and innovative curricula of emotional education within school environments involving 6 countries (Italy, UK, Hungary, Romania, Turkey and Austria) and new contexts, to provide an effective intervention model to reduce the phenomenon of Early School Leaving (ESL). EUMOSCHOOL will develop innovative curricula, educational methods and training to meet the increasing needs of the educational staff and pupils, aged 6 to 16 years old. The project is based on the adaptation at EU level of the Italian methodology "Didattica delle Emozioni"© (Didactic of Emotions, DoE), developed from 16 years of experience and investigation into emotional education. The methodology has been successfully tested on 3000 teachers, students, parents and tutors, in order to improve the wellbeing & transversal key competencies of pupils thus reducing ESL whilst upgrading professional competencies of teachers & pedagogical staff. EUMOSCHOOL will aim to spread the adapted methodology to a wide range of students, teachers, staff and schools through implementing emotional education into school curricula.

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## Parent training for early ADHD

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Parent training is a structured, manualized intervention for parents of children with behavioral difficulties and/or hyperactivity, impulsivity and impaired inattention. The Incredible Years<sup>®</sup> is a well-documented parent training program developed by Carolyn Webster-Stratton, originally aiming at treating oppositional defiance conduct problems in children. It has been adapted and tested for children with ADHD difficulties as well. Incredible Years<sup>®</sup> Parent training as conducted in Center for ADHD, Aarhus, Denmark is group based. A group consists of two group leaders and parents of 6-7 children in the age range 3-8 years (BASIC) or 9-12 years (SCHOOL AGE). The parent training course runs for 20 session. Parents are trained in integrating play and positive labeling in their parental practices, along with structuring difficult everyday situations and establishing daily routines. Furthermore, parents are taught how to use behavioral contingency principles, primarily in the form of praise, encouragements and rewards to reinforce child concentration, self-regulation and collaboration. Sessions consist of video vignettes modeling effective and ineffective parental strategies, group discussions and hands-on exercises where parents practice new ways of managing their child's difficulties. Extensive psycho education on child difficulties is implemented in the parent training, aiming at enhancing parent understanding and mentalization ability of child symptoms and difficulties. The goal of IY Parent Training is to facilitate a more positive, successful parental management of child difficulties. By strengthening the relation between parent and child, the goal is to reduce child symptoms, prevent a negative, adverse developmental trajectory and to promote well-being for both parent and child.

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