



# Certified Pediatric Nurse Review Course: Behavioral & Mental Health Disorders

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**NEMOURS**  
CHILDREN'S HEALTH

# Introduction

- Mental health and behavioral health disorders are increasingly recognized as significant concerns in pediatric populations.
  - 10% of children ages 3-17 have current, diagnosed anxiety
  - 7% of children ages 3-17 have current, diagnosed behavior disorders
  - 4% of children ages 3-17 have current, diagnosed depression

# Objectives

- Identify common mental/behavioral health conditions seen in the pediatric population.
- Describe the assessment and characteristics of these concerns.
- Discuss treatment and safety practices for children with behavioral and mental health conditions.



# Mood Disorders

# Depression

Characterized by persistent sadness or irritability lasting > 2 weeks and loss of interest in previously enjoyed activities.

## **Assessment Findings**

- Anhedonia - loss of interest in activities previously enjoyed
- Changes in appetite or sleep disturbances, fatigue or low energy, feelings of worthlessness or excessive guilt
- Poor concentration
- Thoughts of death or suicide

## **Interventions**

- Consider suicide precautions
- Treatment is focused on minimizing the impact on functioning while aiming for full recovery
- Encourage expression of emotions
- Medications commonly utilized are SSRIs

# Bipolar Disorder

Pediatric bipolar disorder is characterized by extreme mood swings and instability.

## **Assessment Findings**

- Very distinct mood swings that include depressive lows and manic highs. The highs and lows may vary from mild to extreme. During mania can have reckless, risky and unpredictable behaviors. They may experience grandiosity and decreased sleep

## **Interventions**

- Medications are crucial in treatment and include mood stabilizers and antipsychotics
- Therapy includes CBT and family therapy to identify triggers and learn coping skills



# Anxiety Disorders

# Generalized Anxiety Disorder (GAD)

Pediatric generalized anxiety disorder (GAD) is a mental health condition characterized by excessive, uncontrollable worry and anxiety about various aspects of daily life.

## **Assessment Findings**

- Persistent nervousness, fear, and dread, which can interfere with their daily activities and overall well-being. Can include aspects of life like school performance or family issues.

## **Interventions**

- Include CBT, relaxation techniques and sometimes medication.

# Separation Anxiety Disorder

Separation anxiety disorder may be characterized by intense distress when anticipating or experiencing separation from home or caregivers.

## **Assessment Findings**

- Clinginess, tantrums, refusal to go to school, and physical complaints of headaches or stomachaches. Kids may also have nightmares about separation and constant worry about losing their caregivers or something bad happening to them.

## **Interventions**

- Involves CBT and may need medications for severe symptoms

# Social Anxiety Disorder

Intense fear of social situations where they may be judged or embarrassed.

## Assessment Findings

- Avoidance of speaking in class or participation in social events
- Blushing, sweating, and trembling.

## Interventions

- CBT and sometimes medication to help manage the symptoms.

# Panic Disorder

Sudden and repeated panic attacks. May feel like they are dying during these attacks.

## Assessment Findings

Intense periods of fear or discomfort, racing heart, shortness of breath, and dizziness.

## Interventions

CBT and medications like selective serotonin reuptake inhibitors for management of symptoms.

# Phobias

Significant fear or anxiety about specific encounters or things.

## Assessment Findings

- Irrational fears related to heights, the dark, animals, insects, needles, etc. These fears last for an extended period and cause distress.

## Interventions

- Gradual exposure therapy in a controlled environment .

# Agoraphobia

Fear that relates to feeling that they cannot escape, and help may not be available.

## Assessment Findings

- Feeling trapped with inability to get out. Avoidance behaviors.

## Interventions

Behavior therapy, medications may be needed if associated with panic attacks.



# Obsessive Compulsive Disorder

# Obsessive- Compulsive Disorder (OCD)

In children, OCD involves obsessive invasive thoughts with repetitive recurring behaviors they are compelled to execute to relieve anxiety.

## **Assessment Findings**

- Time consuming thoughts and behaviors that interfere considerably with ADLs.

## **Interventions**

- Therapy involves ERP, medications



# Attention Deficit Disorders

# Attention Deficit Hyperactivity Disorder

ADHD is a common neurodevelopmental disorder in children who have patterns of inattentiveness, impulsivity, and may have hyperactivity.

## **Assessment Findings**

- Daydreaming, difficulty staying on task and not paying attention, interrupting
- May have fidgeting, constant moving or squirming, and talking with limited ability to control behaviors.

## **Interventions**

- Medications which include both stimulants and non-stimulants, behavior therapy



# Autism Spectrum Disorder

# Pediatric Autism Spectrum Disorder (ASD)

ASD is a developmental disorder that impacts behavior, communication and social interactions.

## **Assessment Findings**

- Symptoms include difficulty making eye contact or responding to social cues, impaired communication, and extreme attraction to certain areas or themes.

## **Interventions**

- Speech, occupational therapies, along with behavioral and education plans

A photograph of four children of diverse backgrounds standing outdoors in a grassy field. From left to right: a boy in a blue shirt, a boy in a blue and white striped shirt, a girl in a white shirt with a pink headband, and a girl in a grey patterned shirt. They are all smiling and looking towards the right. A semi-transparent teal banner is overlaid at the bottom of the image.

# Tourette Syndrome

# Tourette Syndrome (TS)

In this neurologic disorder the child has repetitive sudden movements or vocalizations.

## **Assessment Findings**

Motor tics - eye movement, grimacing, shrugging shoulders, hopping or jumping

Vocal - throat clearing, barking, repeated words, including swear words

## **Interventions**

Therapy to recognize and reverse habits, provide calm environments, medication, rewards for positive behavior.



# Oppositional Defiant Disorder

# Oppositional Defiant Disorder (ODD)

ODD is characterized by defiant, disobedient behavior

## **Assessment Findings**

- Arguing, difficulty controlling temper, deliberate refusal to follow rules of limits. Actions can be mean and hurtful.

## **Interventions**

- Behavioral therapy, medication for associated conditions like ADHS, parental training



# Eating Disorders

# Anorexia Nervosa

Anorexia is associated with extreme efforts to control shape and body weight which leads to significant low body weight.

## Assessment Findings

- Calorie restriction, fear of weight gain
- Laxative use, overexercising
- Distorted body image, irregular or loss of menses, thinning hair
- Electrolyte disturbance, and cardiac arrhythmias

## Interventions

- Monitor for and treat complications using a multidisciplinary approach
- Individual and family therapy
- Reintroduction of foods with support for weight gain. Close observation around meals.

# Bulimia Nervosa

Bulimia nervosa is an eating disorder characterized by cycles of binge eating followed by steps to avoid weight gain.

## Assessment Findings

- Calorie restriction, intense fear of weight gain
- Body image perception tremendously distorted
- May utilize excessive exercise or laxatives
- Inability to recognize the severity of the impact on physical health

## Interventions

- Behavioral contracts
- Creating a calm, judgment-free eating environment.
- Bathroom restrictions and /or close observation post meals to prevent self-induced vomiting



## Substance Use Disorder (SUD)

# Substance Use Disorder (SUD)

SUD is a psychological condition that causes problematic recurrent use of a substance or substances that cause impairment.

## **Assessment Findings**

- Cravings, impaired control using the substance even if there are negative consequences
- Sleep impairments
- Social and relationship problems
- Signs of withdrawal or tolerance

## **Interventions**

- Monitor for withdrawal
- Medications as needed
- Therapy and support groups with family involvement



## Special Considerations

# Special Considerations

**Assess patients for self harm**

**Assess for suicidal thoughts**

**Assess if patient is a danger to others**

Get good history, any substance use, risky behavior, recent stress of life changes, abuse, mood changes, access to a weapon in the house

**Safety, Therapeutic Communication, Support, Warning signs, LGBTQ**

# Knowledge Check Questions



# Knowledge Check 1

**When assessing a child with Anorexia Nervosa, which combination of symptoms would most likely indicate a need for immediate medical intervention?**

- A. Calorie restriction and fear of weight gain
- B. Distorted body image and overexercising
- C. Electrolyte disturbance and cardiac arrhythmias
- D. Thinning hair and irregular menses

# Knowledge Check Answer 1

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- A. Calorie restriction and fear of weight gain
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- C. Electrolyte disturbance and cardiac arrhythmias
- D. Thinning hair and irregular menses

**Correct Answer:** C. Electrolyte disturbance and cardiac arrhythmias

# Knowledge Check 2

**In the context of pediatric bipolar disorder, which intervention is most effective in managing manic episodes and preventing risky behaviors?**

- A. Encouraging avoidance of stressful situations
- B. Immediate prescription of SSRIs
- C. Mood stabilizers and antipsychotic medications combined with Cognitive Behavioral Therapy (CBT)
- D. Gradual exposure therapy

# Knowledge Check Answer 2

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**Correct Answer:** C. Mood stabilizers and antipsychotic medications combined with Cognitive Behavioral Therapy (CBT)

# Knowledge Check 3

**Which assessment finding is most indicative of Attention Deficit Hyperactivity Disorder (ADHD) in children?**

- A. Persistent sadness and irritability
- B. Difficulty staying on task and fidgeting
- C. Intense periods of fear or discomfort
- D. Avoidance of social situations

# Knowledge Check Answer 3

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- A. Persistent sadness and irritability
- B. Difficulty staying on task and fidgeting
- C. Intense periods of fear or discomfort
- D. Avoidance of social situations

**Correct Answer:** B. Difficulty staying on task and fidgeting

# Knowledge Check 4

**Which of the following assessment findings is most indicative of depression in children and adolescents?**

- A. Persistent sadness or irritability lasting more than two weeks
- B. Intense fear of social situations
- C. Recurrent panic attacks
- D. Excessive worry about daily activities

# Knowledge Check Answer 4

**Which of the following assessment findings is most indicative of depression in children and adolescents?**

- A. Persistent sadness or irritability lasting more than two weeks
- B. Intense fear of social situations
- C. Recurrent panic attacks
- D. Excessive worry about daily activities

**Correct Answer:** A. Persistent sadness or irritability lasting more than two weeks

# Knowledge Check 5

**Why is it important to include family therapy in the treatment plan for pediatric bipolar disorder?**

- A. Family therapy is more effective than medication
- B. Family therapy helps identify triggers and develop coping strategies
- C. Medication alone can lead to dependency
- D. Family therapy eliminates the need for medication

# Knowledge Check Answer 5

**Why is it important to include family therapy in the treatment plan for pediatric bipolar disorder?**

Family therapy is more effective than medication

B. Family therapy helps identify triggers and develop coping strategies

C. Medication alone can lead to dependency

D. Family therapy eliminates the need for medication

**Correct Answer:** B. Family therapy helps identify triggers and develop coping strategies

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