

February 22, 2023

DIDACTIC PRESENTATION

Untangling Mental Health Co-morbidities for a Clearer Path to Treatment

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[Recording](#)

[Presentation Slides](#)

CASE SUMMARY

We explored the complicated case of a 17yo female that has a history of significant trauma, is now living with her grandmother and has changed high schools. She is not following through on requirements for graduating or taking control of her own health care. She has been able to keep employment at a childcare center, a job she enjoys.

KEY QUESTION(S)

- How can we pull her back into attending and completing high school?
- How can we get her to engage in self-care that includes therapy and healthcare?

CLARIFYING QUESTIONS

Why is she not going to school?	<i>She says that she has no friends there, and she doesn't like it.</i>
She is currently attending an alternative school program, has she negated that too? How can we get her engaged?	<i>When she started the program in January, she attended school for a solid 2 weeks, she missed 1 day and then didn't come back for 1.5 weeks before school vacation. Unsure if she will return after break.</i>
Does she have a PCP in the community?	<i>No, her PCP is through the School Based Health Center. She did report she hadn't been seen in years, and only connected to get the necessary immunizations to continue with school.</i>
Does the student have a case manager?	<i>No</i>
In regards to the truancy, is DHHS involved? Is the grandmother accountable?	<i>The school district takes a conservative approach to truancy. The SRO at school is the truancy officer and was initially in contact with the family to do a mental health check. Gram is typically agreeable to any plans put in place but doesn't enforce anything. The SRO's involvement now is basically to remind the student of the truancy rules/law.</i>
What is her sexual history? Have you asked about any romantic partners? Can you ask any open-ended questions to open any current red flags re: relationships or gender concerns?	<i>Yes, she does identify as female, she/her pronouns. She is not currently in a relationship, but she did have a rough summer after she attended a party where there was alcohol, and she was sexually assaulted. She also does have the past history or sexual abuse but does not talk about that.</i>

KEY RECOMMENDATIONS:

Case Manager:

Connect her with a case manager at school, if possible. If not, she would be eligible for a community case manager through MaineCare. Children's Case Management is available to her through the age of 20. She would benefit from a children's CM as they work best with schools and transition services. Grandma may need to consent. However, when she turns 18, she can engage in services independently.

School:

She has experienced undernourished resources in her life. Perhaps explore the [Wayfinder School Passages](#) program as an option for completing school. This is strong on the mentorship model.

Work with the school staff to be aware of their genuine responses and working toward responses to her coming from a positive place. This can be a real motivator to students who are likely starving for genuine, positive attention. Even if it is the secretary in the front office who is interacting with her, statements like "I'm so happy to see you today, we really love having you here." This goes a long way in engagement and motivation to come back.

Biopsychosocial:

Consider why this student is continuing to set a plan but not following through. She likely has a trauma/abandonment reaction. This reaction will cause her to sabotage any success. Don't quit on her. Be relentless. She needs the nurturing. When she messes up, work hard to control your frustrated response, control any disappointment in your tone, in your words. The actions of the SRO are not helping her.

If the school refusal is new, this could also be a more serious mental health issue emerging. Possibly bipolar disorder, or major depression. It will be important to keep a pulse on this.

KEY RESOURCES

The following resources do not require insurance/MaineCare to access:

- Youth Peer Support Statewide Network: <https://www.mainehealth.org/Maine-Behavioral-Healthcare/Services/Counseling-Therapy-Services-Adult-Child/Peer-Support/Youth-Peer-Support-Statewide-Network>
- Big Brother/ Big Sister Program may be an option. <https://www.bbbsmidmaine.org/>
- NAMI Maine Teen Text Line: <https://www.namimaine.org/teentextline>
- Wayfinder Schools Alternative Education Program: <https://www.wayfinderschools.org/our-passages-program>
- JobCorp: <https://www.jobcorps.gov/>
- Adult Ed: <https://fairfield.maineadulted.org/classes/categories/high-school-diploma/>

For Caregiver:

- AFFM: <https://affm.net/about-us/>
- Kinship Program: <https://affm.net/support/the-kinship-program/>
- Support Groups: <https://affm.net/support/cares/>
- NAMI Maine: <https://www.namimaine.org/about>
- Support Groups: <https://www.namimaine.org/supportgroups>

Mental Health Treatment Services:

- [Outpatient Services Provider List](#)

MaineCare only Resources:

- Mental Health Targeted Case Management <https://www.maine.gov/dhhs/ocfs/support-for-families/childrens-behavioral-health/services/find-a-provider/providers-region2-mh-cm>

OR

- Behavioral Health Home Organization (BHHO) Services.
Note: This is not a residential program, rather, a comprehensive array of services:
[List of Behavioral Health Homes \(PDF\)](#)

You may always reach out for a consult through the MPBHP access line 1-833-672-4711.