Development of a Comprehensive Transdiagnostic Approach to Pediatric Behavioral Health

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Background
To better address the behavioral health needs of children and families, the Pediatric Mental Health Institute at Children’s Hospital Colorado is developing a transdiagnostic approach to clinic services.

Transdiagnostic programming was initiated in response to:
• Increasing recognition that the field’s current diagnostic system fails to clearly guide intervention.
• The proliferation of manualized Evidence-Based Treatments (EBTs), which has:
  – Failed to address high rates of comorbidity
  – Resulted in clinician training burden
• The mental health field’s growing focus on identification of the mechanisms that underlie mental health (NIMH, 2011).

Mechanisms and Modules
• The proposed clinical protocol will be based on a novel assessment approach aimed at identifying each individual’s profile of mechanisms, or the cognitive, behavioral, and biological processes that underlie and maintain psychopathology.
• Treatment planning will utilize identified mechanisms to develop an individualized, modular treatment ‘roadmap.’
• Treatment modules will utilize EBT components (e.g., exposure) that are known to be effective. Modules will be designed to treat specific mechanisms.

Future Directions
The transdiagnostic approach is expected to better meet the behavioral health needs of youth without contributing to the growing numbers of manualized treatments. Future directions will include:
• A transdiagnostic pilot program, to be launched this summer at the Pediatric Mental Health Institute.
• Development of improved tools and strategies for measurement of transdiagnostic mechanisms.
• Ongoing data collection to measure both individual change and overall program effectiveness.

Proposed Clinical Protocol

Hypothetical Family Experience “Danielle”

Phone call to determine:
• Appropriateness for services
• Level of acuity
• Chief complaint

Parent calls and reports concerns:
“Danielle (age 10) has tantrums every day before school and gets in trouble for leaving the classroom.”

Gather data about symptoms, functioning, & mechanisms via:
• Standardized interview
• Broadband & mechanistic measures

Family participates in interview and completes measures. The following mechanisms are identified:
- Emotion dysregulation
- Avoidance of social situations
- Ineffective parenting practices
- Sleep dysregulation

Provide feedback to family about:
• Strengths
• Mechanisms
• Proposed treatment

Family meets treatment team, discusses mechanisms, goals and family strengths, and agrees to participate in weekly individual therapy

Define treatment roadmap, including:
• Specific goals & markers of change
• Intervention modules to address identified mechanisms

Goals (based on chief complaint):
- Decreased tantrums; Increased time in classroom

Modular Roadmap (based on mechanisms):

Ongoing monitoring:
- Assessment measures
- Tracking progress towards goals

Completion of goals:
Danielle no longer leaves classroom; tantrums markedly reduced.

Discharge Module