

Addressing Emotional Health: A Self-Assessment

This self-assessment activity is aimed at helping providers better understand and assess the emotional health of children and adolescents with chronic conditions and their families. The self-assessment questions will help you evaluate your understanding of emotional health and present example scenarios to help you put the learning into practice.

Click on each reference in white text located inside the colored box at the top of each page to review the referenced materials. Once complete, you can download the self-assessment key to compare your answers.

1. According to the reference cited, which of the following statements is most accurate about children and adolescents with chronic health conditions?

- A. Up to half may have a concurrent mental health condition.
- B. The incidence of mental health conditions is approximately equal to that among children and adolescents without chronic conditions.
- C. The prevalence of mental health conditions has remained stable or slightly decreased over time.
- D. Anxiety is the most common clinician-diagnosed mental or behavioral health disorder.

2. According to the reference cited, which of the following statements indicates that pediatricians and pediatric residents lack comfort or confidence to address the mental health needs of patients with chronic physical health conditions?

- A. Less than 50% of pediatric residents rated themselves as good to excellent in competence for addressing mental health issues.
- B. 80% of pediatricians surveyed reported deficits in their training to identify and treat mental health problems.
- C. Only 40% of pediatric residency training programs include requirements for assessments in mental health.
- D. Only 25% of pediatric practices report routine depression screening for youth with chronic conditions.

3. The video “How Are You Doing?” features parents of children with chronic conditions describing their experience as parents and their interactions with health care providers.

Which of the following most closely describes the theme of their statements?

- A. “Please recognize that we are often overwhelmed, that our ability to manage our children’s condition depends on our own well-being, and that we would like you to acknowledge and partner with us on that.”
- B. “Please recognize that we are doing the best we can, and we worry that you judge us as inadequate to take care of our children’s complex medical needs.”
- C. “Please recognize that we are doing the best we can and asking us about our emotional or mental health is stigmatizing.”
- D. “Please recognize the stresses of having a child with a chronic condition and don’t assume that you understand what we are going through on any given day.”

4. Your patient, Eddie, aged 4, arrives 5 minutes late for his renal transplant follow-up. He is accompanied by his mother; twin sisters, aged 6; and 4-month-old brother. His mother, Ms. Gomez, bustles the children into the exam room and murmurs something about parking.

According to the video, what can you say that would be most helpful for Eddie’s care?

- A. “Ms. Gomez, it is very important that you arrive on time so that I can give Eddie the time needed for our appointment.”
- B. “Yes, it can take a long time to find parking here.”
- C. “Ms. Gomez, it might be easier for you to get here on time if you didn’t bring all of the children.”
- D. “Wow, Ms. Gomez, you got here with all of the kids dressed so warmly with the cold weather. How are you holding up?”

5. According to the video, what is a first step that specialist clinicians can take to overcome potential obstacles to addressing the emotional needs of patients and families?

- A. Extend scheduled clinic visit times by 5 minutes.
- B. Hire a social worker to join the clinical teams.
- C. Recognize that they don’t need to have all the answers; just asking questions and empathizing is a start.
- D. Refer teen patients with chronic conditions to a mental health professional.

6. You are seeing a school-aged boy with cystic fibrosis (CF) in the pulmonology clinic for a follow-up appointment. His mother and 2-year-old sister are with him. His mother appears fatigued, his sister is crying, and you notice that his lung function tests have been declining over the past 18 months.

According to the reference cited, which of the following will best address what might be going on?

- A. Acknowledge that caring for a toddler and the ongoing CF management is stressful, assess specific barriers to adherence, and utilize available resources to assist the mother in problem-solving and self-care strategies.
- B. Remind the mother of the consequences of nonadherence to the CF treatment regimen. Refer this family to social work and/or psychology, if available.
- C. Review the trends in the boy's lung function test results with the mother and engage a nurse practitioner to reinforce the regimen with her.
- D. Assess whether the boy's mother has noticed changes in her son's activity level. Screen the boy and his mother for depression and anxiety.

7. According to the reference cited, which of the following statements best represents the relationship between emotional health and resilience in parents of youth with chronic conditions and management of their health care needs?

- A. Providers with anxiety and depression consistently have difficulties managing the needs of their children with chronic health conditions.
- B. Anxiety and depression in providers of youth with chronic health disorders can lead to deficits in executive functioning (e.g., planning, organization), which in turn can lead to difficulties with managing their child's health care needs.
- C. Sleep difficulties associated with anxiety and depression in providers of youth with chronic health disorders directly affects their ability to manage their child's health care needs.
- D. Providers with anxiety and depression who utilize relaxation and mindfulness demonstrate an improved ability to manage their child's health care needs.

8. According to the reference cited, which of the following is a barrier to promoting wellness for families of children with chronic conditions?

- A. Insurance plans that do not reimburse care teams for activities supporting family wellness.
- B. Parents who may be unwilling to accept suggestions for family life changes, feeling they are unrelated to the care of the child with a chronic condition.
- C. Training programs for health care professionals that lack emphasis on wellness for families of children with chronic conditions.
- D. Lack of clarity about what family wellness dimensions could be supported, especially given the range of pediatric chronic conditions.

9. According to the article, which of the following is most true about families caring for sick or disabled children?

- A. Siblings of the sick child should stay with relatives as much as possible so that the parents can focus on the patient.
- B. Emotional and behavioral responses of a sibling can be readily predicted by the sibling's age and the stage of the patient's illness.
- C. Expressions of anger by a sibling about her sick brother indicate potential pathology and should be discouraged.
- D. Education about the illness and one-on-one time with the parent are key to helping siblings cope with the illness of the patient.

10. David, aged 9, arrives for a mid-treatment visit with his mother, Ms. Smith, and his brother Sam, aged 7. While the doctor is talking with David, Sam tosses a small action figure that hits David in the shoulder. Ms. Smith scolds Sam, who begins to cry and shout that his mother "only loves David and his stupid cancer."

According to the article, which of the following would be the best way for the doctor to respond to David and his family?

- A. "Ms. Smith, from now on please leave Sam at home or find someone who can stay with him in the waiting area."
- B. "Sam, please sit down and be quiet. This visit is to focus on David."
- C. "Sam, it looks like David's being sick has been tough for you. What's the hardest thing about it?"
- D. "Sam, having cancer is very hard, and David can't help being sick."

11. According to the reference cited, what scenario best describes the results of a study involving a large sample of children and young adults?

- A. Patients with a chronic medical condition and a co-occurring mental health or substance use disorder had annual insurance payments 2.4 times larger than those with a chronic medical condition only.
- B. Approximately one-third of children and young adults with a chronic medical condition also had a co-occurring mental health or substance use disorder.
- C. Increased insurance payments for children and young adults with a chronic medical condition and a co-occurring mental health or substance use disorder were driven primarily by increased payments for behavioral services.
- D. Additional annual insurance payments for children and young people with a chronic medical condition and a co-occurring mental health or substance use disorder may total \$6 billion.

12. Based on the reference cited, among parents of children and young adults with a chronic medical condition and a co-occurring mental health or substance use disorder, which of the following scenarios is most accurate?

- A. Total insurance payments were 59% higher as compared with parents whose children did not have a chronic medical condition.
- B. Increased insurance payments were driven primarily by increased payments for behavioral services.
- C. Approximately 20% of parents of a child or young adult with a chronic medical condition had a mental health or substance use disorder.
- D. Approximately 20% of parents of a child or young adult with a chronic medical condition had a mental health or substance use disorder.

13. According to the article and video, which of the following is the most important element in fostering resilience in children?

- A. Genetic predisposition.
- B. A stable, supportive relationship with an adult.
- C. Assistance in meeting normal developmental milestones.
- D. Reducing toxic stress.

14. Which of the following scenarios best exemplifies promoting resilience in a child with a chronic condition, as outlined in the article and video?

- A. Encourage parents to help their child with all activities of daily living when hospitalized for an exacerbation of their condition.
- B. Invite a child to learn about and manage her condition and treatment in developmentally appropriate ways.
- C. Discourage participation in medically harmless healing rituals particular to a child's culture.
- D. Help minimize situations in which a child with a chronic condition might be frustrated or feel sad

15. Which of the following best describes the purpose of the Roadmap initiative?

- A. To increase awareness of emotional health difficulties in patients and families with pediatric chronic medical conditions among subspecialty providers.
- B. To provide resources for pediatric patients, their families, and their providers to address emotional health.
- C. To improve the resilience and emotional health of pediatric patients and their families by raising awareness and providing tools and resources.
- D. To help pediatric subspecialty providers address deficits in resilience and emotional health in youth with chronic medical conditions and their families.

16. A father brings his 11-year-old son back to clinic for an urgent visit after a recent discharge from a hospitalization due to an inflammatory bowel disease flare. The gastroenterologist (GI) orders the boy to be re-admitted and asks, "This must be a tough time for your family; how are you doing?" The father replies, "We're okay; we always knew his remission couldn't last forever."

Based on the reference, which of the following is the most likely reason for the father's response?

- A. He is not aware of the seriousness of his child's inflammatory bowel disease flare.
- B. He has been too busy (e.g., in crisis mode) to think about how he is doing.
- C. He does not think his child's GI doctor should ask about his wellbeing.
- D. He may not be answering the question honestly.

17. A family whose young child has just been diagnosed with juvenile rheumatoid arthritis (JRA) has joined a new rheumatology practice.

According to the cited reference, when would be the best time to begin discussing emotional health with the parents?

- A. Immediately, so they understand the importance of both physical and emotional components of the child's condition.
- B. After several visits, when they have had a chance to learn more about JRA and their child's medications and treatment.
- C. Prior to beginning annual depression screening.
- D. When the parents begin to ask questions about their child's emotional health, signaling their readiness to discuss it.

18. An adolescent girl is being treated for asthma by her pulmonologist. During the physical exam, she discloses that she has been experiencing panic attacks that sometimes feel like asthma attacks. She is stressed about exams and college applications and worries that she will have an asthma attack during the SAT exam.

Based on the reference, what could the pulmonologist say to this patient that would start a conversation about emotional health and resilience?

- A. "It sounds like you are under a lot of stress right now and you're right, panic attacks can feel like asthma attacks sometimes. What have you tried to manage your anxiety?"
- B. "You should talk with your pediatrician about this; they might be able to prescribe some medication to help you."
- C. "After we are done, I'll have the social worker come to help set you up with a 504 plan."
- D. "Here is a number for a pediatric psychologist who works with patients from our clinic. She can teach you ways to manage your anxiety."

19. A 15-year-old girl who received a liver transplant 5 years ago comes in for a post-transplant follow-up appointment. Her mother reports that the patient is refusing to take her medication and that she has started experimenting with alcohol. The patient presents with a flat affect and her mother reports that the patient has been sleeping more and spending more time alone in her room.

Based on the reference, what is a likely barrier to this patient's adherence to her treatment plan?

- A. This patient may be struggling with depression and using alcohol as a maladaptive coping mechanism.
- B. This patient is tired of listening to her mother.
- C. This patient's mother is not keeping a close enough eye on her daughter.
- D. This patient is showing normal signs of adolescent development.

20. According to the cited reference, which of the following scenarios best illustrates a summary of the key themes that have emerged from the Roadmap Project?

- A. Recognizing signs that an adolescent with type 1 diabetes may be struggling with anxiety due to fear of hypoglycemia and explaining that this fear is common and how mental health treatment maybe beneficial.
- B. Advising parents of an adolescent with inflammatory bowel disease with elevated scores on a brief depression screening tool to seek therapy in the community.
- C. Providing a family with a child who has congenital heart disease with recent peer-reviewed research about mental health difficulties.
- D. Referring the parents of a patient with newly diagnosed autism spectrum disorder and their family to process the diagnosis with a social worker or psychologist.

