

# Psychological Disorders: Evaluation of Psychotherapeutic Procedures in Children Diagnosed with Attention-Deficit/Hyperactivity Disorder

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## Abstract

**Objective:** This article describes the results through the analysis of psychological intervention with ten (10) patients' boys and girls from 5 to 8 years referred by educational institutions to pediatric and psychiatric health professionals, consecutively diagnosed with Attention Deficit Hyperactivity Disorder (ADHD) and medicated with psychiatric drugs. **Methodology:** The method used was the qualitative one with hermeneutic approach in order to verify the different aspects that surround the problematic defined for the study. **Findings:** Review medication processes for minors, as some inconsistencies in this regard may be affecting children's health. **Application:** To give continuity to the research processes in this line to attend novelties that can contribute with the knowledge and deepening of the therapeutic procedures.

**Keywords:** Diagnosis, Disorder, Intervention, Patient

## 1. Introduction

According to the Mental Health Bulletin for Children and Adolescents (Boletín de Salud Mental en Niños, Niñas y Adolescentes), the number of cases of different psychological symptoms among children in Colombia increases every day, with frequent manifestations such as: aggressiveness, sadness, deep silences, rivalry and an endless number of symptoms that afflict the lives of minors in the face of the different types of mistreatment to which they are subjected on a daily basis<sup>1</sup>.

According to the exposed data, every day to understand the increase of numbers related to mental health factors in children becomes more complex<sup>2</sup>. Showing as indexes that should concern the health professionals involved from their daily work in the competent areas of mental health, psychologists, pediatricians, psychiatrists, doctors among others,

from this perspective arises the need for this study being the main protagonists children and the environment where they usually develop families, the school and even the closest society the neighborhood places where some are most likely to be violated and to come to evidence what happens in children from their communities is a way to come to understand what happens in their thoughts and what very likely afflicts them causing a mental illness that can come to solve if he is guided and not get to diagnose and medicate without just cause.

## 2. Methodology

The present study corresponds to the qualitative paradigm, from a Historical -Hermeneutic design, through which the due description was made of the information

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obtained with patients diagnosed with Attention Deficit Hyperactivity Disorder (ADHD). The characteristic of the research is applied with a level of descriptive scope. The temporality is transversal and the prospective study, based on the phenomenological method, through which the necessary information for the investigation was obtained, starting from the way in which each boy and girl experienced the conditions of disorders and medications.

The population was composed of patients diagnosed with Attention Deficit and Hyperactivity Disorders (ADHD), and medicated from institutions in the city of Barranquilla in Colombia. For the study, an intentional sample of 6 students was selected among boys and girls of 6 years of age. The technique used was the unstructured interview supported by the following tests: CAT-A projective test; Machover projective test; Human figure projective test and family test.

### 3. Results

The interdisciplinary work is fundamental in the evaluative processes with children from the clinical psychological field, before proposing whatever the disorder is, it is feasible to focus on the patient without forgetting that it comes from social environments (families, school, nearby community, etc.), which may very probably be generating conflict for minors, bearing in mind that there are other aspects that may be affecting patients such as the absence of parents, mistreatment and abandonment of the same<sup>3</sup>, this reflects the need for clarity in the evaluative processes initially from remission, diagnosis and medication are three fundamental and central aspects in the investigation of which an approach is made later. Another author<sup>4</sup> expressed that environmental factors can negatively influence the lives of minors, that is to say, that they would be defined by the social.

#### 3.1 Remission

The educational psychologist in Antioquia, Colombia refers to a role in the development of educational projects, both individual and collective, thus helping mental health and good relations in the institution<sup>5</sup>. This is why the importance of interdisciplinary works arises<sup>6</sup>. In other words, the role of the psychologist is lost and even more so when multiple functions are stopped that do not fulfill the purpose in the institutions, when the role of the psychologist in the institution should be focused on

favoring others with their performance in the determined evaluations of minors.

#### 3.2 Diagnosis of Attention Deficit Hyperactivity Disorder (ADHD)

From the patients and children valued from the institutions who provided the first diagnostic impressions of Attention Deficit and Hyperactivity Disorder (ADHD), the referrals kept a similarity the expression towards the minors of the bad behavior in the school, not to remain still in classes and to speak a lot with their companion's motive that leads to the due referral. The parents of the minors guided by the school professionals accepted the referrals to the pediatrics and psychiatric professionals who, from this research, are shown to be irrelevant, increasing the rate of children who are daily added to referrals to psychiatry<sup>7</sup>.

From the context of these latter health professionals (psychiatrist and pediatrician) was to contribute to the initial referrals of schools leaving aside the usefulness of interdisciplinary work including a third (clinical psychologists), without processes of re-evaluation of the criteria or similarities of the manifestations of minors with the disorder going immediately to medication<sup>8</sup>.

#### 3.3 Medication

For an appropriate period of time, patients receive drugs suitable for their clinical situations, which are affordable for them and the community<sup>9</sup>.

According to the foregoing, the appropriate use is to have access to medicines and in doses that allow the subject (boys and girls) to make progress in the development of the problem represented, the inadequate use of medicines for mental disorders, such as high doses given by professionals (psychiatrists), incorrectly from therapeutic prescription and without limit of consumption generate negative secondary consequences in the long term<sup>10</sup>.

It is well seen in relation to the above that the drugs should know how to use, in the cases indicated, in this research is observable, as each child is medicated without the proper work together by professionals, are entities guided by the first diagnostic impression reducing the manifestations of patients with drugs, in some cases without taking into account the consequences that may occur later in the lives of children (side effects). On the other hand, in relation to the search for other factors different from the diagnosis established by the professionals, other factors that

could have triggered aggression, sadness, rage and other types of psychological discomfort in children were having to face situations that are probably very decontextualized for their ages, they are represented as difficult situations that lead them to act in one way or another under aggression, sadness, bad behavior, inhibition and it is where the need to count on parents in the different processes of their children becomes relevant<sup>11</sup>.

### 3.4 Reasons for Consultations

In the initial interview process, the patients arrived with their representatives, some consulted because of aggressions from the patients towards others, because of bad behavior at home and at school, they were easily enraged, some said they no longer knew what else to do with the little ones. The common characteristics of the patients were their similar ages of 5, 6, 7 and 8 years among girls and boys, all referred by institutions (schools), diagnosed with Attention Deficit and Hyperactivity Disorders (ADHD), and medicated by psychiatry with Meltifenidate, Ritalin among others, some with medications in prolonged times in years and others recently medicated.

## 4. Reflections on the Results

The study involved ten (10) subjects, boys and girls aged 6, from different schools in the city of Barranquilla in Colombia, children who were attended for a long time in psychodiagnosis and psychotherapy, from clinical psychology in a dynamic clinical approach<sup>12,13</sup>, from initial consultation, interviews, application of different machover tests, cat, test, time of diagnosis game, return to patients and their parents, in some cases, interviews with parents, visits to schools with the purpose of analyzing the criteria in the supposed diagnosed disorders for the confirmation or re-evaluation in the psychodiagnosis, in addition to identifying the possible different diagnoses to the supposed disorders emitted by other professionals in order to strengthen the psychotherapeutic accompaniment with the support of the family nucleus resulting in the annulment of medicines and supposed disorders diagnosed by professionals of the health explained in the following way.

### 4.1 Remission, Diagnosis, Medication vs Reassessment

In the re-evaluation of the patients, boys and girls, it was evidenced that the pathology of attention deficit disorder

and hyperactivity in its criteria according to the mental health manuals CIE-10 and DSM V, from this perspective none of the patients complied with what was stipulated by the same manuals, in addition in the psychodiagnostic process it was observed that the children had badly handled family dynamics, aggressions, some of them absence, others abandonment of their parents, complaisant paternal figures, without rules, norms or authority; On the contrary, most of the patients diagnosed and medicated represented in their schools, with their companions, the situations represented in the structure of the homes<sup>14</sup>.

From the psychotherapeutic process the patients maintained after several encounters more than fifteen (15) sessions, it was preceded to the suspension of the medicines, with the patients who had more than two years medicated the process of suspension took more time. The children in relation to their manifestations were witnessed improvements and evolution in the different contexts where they are developed, work that could be carried out with the accompaniment of the parents or in his defect persons in charge of the minors with custody.

## 5. Conclusion

The study carried out with the 10 boys and girls referred, diagnosed and medicated by the different schools and different health professionals, through the different techniques and interviews used in the psychological process, allowed the proper description to be made from the due process of intervention, taking for granted the inappropriate evaluation in the indicated processes. The patients belonging to the schools of Barranquilla in Colombia had to experience remissions, diagnoses and inappropriate medications, in the reevaluation in the psychological process it was possible to analyze the criteria of the supposed diagnosed disorders for the confirmation or reevaluation in the psychodiagnosis, in addition, to identify the possible different diagnoses to the supposed disorders emitted by other professionals and to strengthen in the due psychotherapeutic accompaniment with the support of the familiar nucleus by means of the acquisition of tools the different manifestations of the patients boys and girls. The foregoing makes evident the daily cases that are presented in the city of Barranquilla in Colombia with undervalued and medicated children, ignoring their family dynamics and what may affect minors, medications that will lead to side effects compromising the future life of children (adolescence, adulthood and old age), it is through these processes where the proper

description is made through the experience obtained in psychotherapeutic processes, with patients facing the bad procedures previously exposed. Based on the subject matter presented, it is suggested to continue expanding the line of investigation so that the scourge of psychological abuse of minors ceases to be a silence in Colombia, since continuing to be submerged in this problem implies, in the long term, having populations of adolescents and adults psychologically hurt in some cases, separated from society by different conditions.

The consequences of side effects generated by psychiatric medication from an early age put at risk the lives of many subjects, a society impregnated with depression, bipolarity, schizophrenia, deep sadness and even increases in suicide rates as the only solution to the problems represented in the patient's home. It is necessary to continue calling attention to the entities implicit in the development of minors, involving parents, teachers, psychologists, psychiatrists among other professionals who choose to have a position as the only solution diagnosis and medication. It is important to act in the face of this violence, which up until now has been presented as silent, which has generated important questions that may be the object of future research:

- How does medication influence behavioural disorders in children at an early age?
- What role does an educational institution play in dealing with cases of diagnosed and medicated children?
- Where does the validation and criteria of professionals in the diagnosis and medication of these minor's point?

One way of giving answers to the questions mentioned above is through descriptions through daily experiences observed in different contexts, mainly in schools and of relevant importance to work with family members and professionals (interdisciplinary) for the achievement of improvement in small patients.

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