

Supervignette 1 - James

James is a 15 year old Caucasian male. He was adopted at age 6. James reentered foster care at age 10 when his adoption failed because of his verbal aggression and oppositional behaviors. He has resided in six different foster homes in the past five years. He has had four different social workers from the child welfare system. He has minimal contact with his adoptive parents. His 19 year old half-brother writes regularly now after leaving the adoptive home for military service.

James currently resides in a detention facility and is waiting for placement. He was arrested by police after he made a bomb threat and broke a window in school. James made the threat to the principal stating he “was going to blow up the school” after being informed he was going to be transferred to another school with a special education program. James broke the window while trying to escape from the school resource officer. His case went before a judge. James was given one year of probation and 4 months of community service by the juvenile court magistrate (judge).

You are the staff child and adolescent psychiatrist consulting to the juvenile detention center and have been asked to perform a psychiatric evaluation for diagnosis and treatment suggestions in one session due to concerns raised by James’ new child welfare social worker who believes he is “conduct disordered and mentally ill”. She believes he should remain in a juvenile justice custodial setting or be admitted to a residential treatment center (RTC). His child welfare social worker is not sure if she will be able to place him in any group home or new foster home because of his actions. She states that if he is locked up he won’t get into additional trouble or if he enters an RTC he’ll learn how to cope with his anger issues.

His probation officer wants to follow juvenile justice post-sentencing guidelines and have him remain in a “home-like setting.” James had a “clean” record until this offense. He is not eligible for locked custodial settings in the juvenile justice system. The probation officer states that if James enters an RTC he’ll have to complete his community service within his probation period. His probation officer wants his child welfare social worker to place him back in his foster home.

Both professionals inform you that the judge does not want James to remain in the detention center because James has already received a sentence and the detention center has problems with overcrowding.

Past Medical and Psychiatric History: James had been treated in the past with Ritalin for ADHD but has not taken medication in the past five years. There is a new primary care doctor, although no one is certain whether James has met him. James has never had a formal psychiatric evaluation.

Family History: His half-brother, aged 19, was diagnosed with depression as a child, and is now in the military overseas.

Social History: His previous foster parent has called him weekly during his detention but firmly stated that his licensing agency “doesn’t allow him to house criminals.” He believes the school principal overreacted. He notes James is a “hot head” but if no one argues with him he calms

down. James has always loved playing the guitar and singing and his prior music teacher has remarked on his talent. He has not been able to have his guitar while in juvenile detention center.

James' mental state is within normal limits except that he is extremely inattentive and hyperactive. He tells you that he makes "extreme" statements when he's angry. James tells you he is not crazy and that when he is an adult he wants to serve in the military.

Questions - James

1. Identify the **child-serving systems** currently involved with James. Are there any additional systems that could be involved? (*Minimum 3 answers*)

2. As the **psychiatric consultant**, are there specific aspects of the case that you would want to clarify? (*Minimum 2 answers*)

3. Describe the different **professionals and supportive individuals** who are involved with James now or in the past year. (*Minimum 5 answers*)

4. From the perspective of the other individuals involved with James, identify the **barriers and challenges** they face in helping him. (*Minimum 4 answers*)

5. What **specific roles** can you, as the consulting child psychiatrist have, based on the information in the vignette? (*Minimum 3 answers*)

Diagnostic and information-gathering role:

Advocacy and systems-consultation role:

6. With the help of your advocacy as well as the work of the social worker and probation officer, James subsequently returns to the foster home. After James has returned to the foster home, the social worker calls to ask you to review the **recommendations** you made in your evaluation. What are some of these recommendations? (*Minimum 2 answers*)

Possible recommendations: