

## MENTAL HEALTH CONNECTION

### Bridging the Gap – Moving Toward Evidence-Based Practice

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## EXTERNALIZING DISORDERS

### **Recommended Pilot Program:**

The Externalizing Learning Community recommends a pilot project called “**Quest for Competency**” to help eliminate barriers and improve the efficiency and effectiveness of service delivery through research, practice and policy for Tarrant County. This effort focuses on:

Gaining understanding and skill in implementing core components of proven practices  
Utilizing experts to train a broad range of practitioners in the use of these practices  
Promoting consistent implementation across agencies/entities

### **Executive Summary**

The Externalizing Disorders Learning Community conducted a six-month in-depth evaluation of research as it related to evidence-based programs and practices for externalizing disorders in children and adolescents. Externalizing disorders during childhood include conduct disorders (CD), oppositional defiant disorder (ODD) and attention deficit/hyperactivity disorder (**AD/HD**). These disorders are particularly problematic in at least three ways:

- ◆ their characteristic symptoms (e.g., antisocial behavior, aggression, fighting, high activity levels),
- ◆ their relatively high prevalence (3%-5% for **AD/HD** in school-aged children, 6%-16% for CD in boys and 2%-9% in girls), and
- ◆ their association with a range of poor outcomes during adolescence and adulthood including school failure and drop out, substance use and abuse, criminal activity, early and inadequate parenting, and unemployment (Farmer, Compton, Burns, & Robertson, 2002).

During the literature review, the Externalizing Disorder Learning Community identified the need for individualized, child-centered, family-focused and culturally relevant treatments delivered in the least restrictive setting. Additionally, it was suggested that practitioners employ, in relationship with the parents/caregivers, multiple treatment strategies. Externalizing disorders do not lend themselves to one-dimensional treatment approaches because they are chronic, pervasive and often exist in conjunction with other disorders. (Anastopoulos & Farley, 2003).

Unlike evidence-based programs, which tend to be curriculum based and manualized, evidence-based practices promote a set of core practice components which – when implemented together – produce proven changes in children and families. As noted in the research, externalizing disorders respond best to interventions that include participation by parents/caregivers and focus on concrete changes in behavior. Therefore, the two

practice areas suggested in this pilot include Parent Management Techniques and Cognitive Behavioral Therapy practices.

In addition to utilizing experts to provide training, coaching and follow-up consultation to practitioners, the Externalizing Disorders Learning Community recommends the building of a collaborative relationship with researchers to evaluate the pilot project utilizing evaluation instruments to measure fidelity. Based upon the research findings, the **Quest for Competency** pilot project will utilize the information for continuous performance and quality improvement. Furthermore, the **Quest for Competency** pilot project will employ researchers to identify new initiatives and research studies to keep knowledge of evidence-based programs and practices for externalizing disorders.

**Learning Community Members:**

Sara Ramirez, Catholic Charities - Champion

James Holcomb - Facilitator

- ◆ Gary Acrey, Tarrant County Juvenile Services
- ◆ Jennifer Anderson, Community Solutions of Fort Worth
- ◆ Lisa Benton, Community Solutions of Fort Worth
- ◆ Robin Brake, Excel Center
- ◆ Angela Bryant-Cruz, Santa Fe Adolescent Services
- ◆ Angela Ceglar, Santa Fe Adolescent Services
- ◆ Dr. Kathryn Denkowski, Private Practice
- ◆ Dawn Edwards, Lena Pope Home, Inc.
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- ◆ Carla Story, All Church Home
- ◆ Angie Walston, TCU Institute of Child Development
- ◆ Vicki Warren, Community Solutions of Fort Worth
- ◆ Rachel Wilkes, Austin College
- ◆ Beth Williams-Ewing, The Women's Center

## Summary of Research on Externalizing Disorders

*Identifying and Developing Empirically Supported Child and Adolescent Treatments*, A. Kazdin, J. Weisz (1998)

This article focuses on identifying promising treatment approaches for internalizing disorders, externalizing disorders and other conditions. The article highlights the findings on current research for treatment outcomes, illustrates several promising treatments that have received empirical support, and identifies key issues to advance further development of efficacious and effective treatments.

*Evidence-Based practice in Psychology*, APA Presidential Task Force on Evidence-Based Practice

This report focused on the integration of science and practice by describing psychology's fundamental commitment to evidence-based psychological practice. It took into account the full range of evidence that policymakers must consider. This report provides a rationale for and expands discussion on the policy statement developed by the Task Force and adopted by the APA Council of Representatives in August 2005.

*Background for Community-Level Work on Mental Health and Externalizing Disorders in Adolescence: Reviewing the Literature on Contributing Factors*, J. Zaff, J. Calkins

This report presented a selective review of research about factors that contribute to emotional, behavioral and addictive disorders in adolescents. The report summarizes what is known regarding the antecedents of these disorders and prevention programs that might help to alleviate the symptoms. It also reviewed research pertaining to each layer of an adolescent's internal and external world.

*Review of the Evidence Base for Treatment of Childhood Psychopathology: Externalizing Disorders*, E. Farmer, S. Compton, B. Burns, E. Robertson (2002)

This article reviewed controlled research on treatments for childhood externalizing behavioral disorders. The results suggest positive outcomes for a variety of interventions (particularly parent training and community-based interventions for disruptive disorders and medication for **AD/HD**). This review also highlighted the need for additional research examining effectiveness of treatment for children 6-12 and strategies to enhance the implementation of effective practice.

*A Cognitive-Behavioral Training Program for Parents of Children with Attention-Deficit/Hyperactivity Disorder*, A. Anastopoulos, S. Farley (2003)

This chapter provided an in-depth discussion of Parent Training, one of the more commonly employed interventions for **AD/HD**. The chapter presented an overview of the aspects of **AD/HD** in relation to the use of Parent Training, a discussion on the rationale for using Parent Training, and a detailed description of the Parent Training Program originally developed by Barkley (1987) and later modified (Anastopoulos & Barkley, 1990; Barkley, 1997).

*Children and Evidence-Based Practice*, B. Burns (2003).

The intent of this article was to provide, with a limited update, a sense of what will be required to nurture and strengthen mental health treatments for children. This article provided a summary of interventions for youth with emotional and mental disorders, identified exemplary child initiatives to launch evidence-based practices, and presented models that narrow the gap between research and practice.

*Empirically Supported Treatments for Children and Adolescents: Advances toward Evidence-Based Practice*, T. Ollendick, N. King (2004)

This chapter described some of the early work undertaken to identify empirically supported psychosocial treatments for children and contentious issues associated with the treatments. The chapter identified the continued need for dialogue between clinicians and researchers to address three major concerns:

- (1) The effectiveness of some treatments over others,
- (2) The use of treatment manuals and the independence of therapist, and
- (3) The transportability of treatments from the research setting to the clinical setting.

### **Specific Areas of Need in Tarrant County Related to Externalizing Disorders**

The Externalizing Disorder Learning Community identified three specific areas of need for Tarrant County:

1. The lack of information and accessibility of evidence-based programs and practices for externalizing disorders in Tarrant County;
2. The lack of fidelity of evidence-based programs and practices currently being utilized in Tarrant County (organizations and practitioners not modeling the program/practice as it was intended); and
3. The need to strengthen child mental health services in Tarrant County including:
  - a. The involvement of multiple core components to address the consumer's needs
  - b. The involvement of parents in the child's treatment
  - c. The involvement of researchers to hold practitioners accountable in providing reliable services via evaluation of the programs/practices

Externalizing behaviors are among those most commonly recognized in children with mental health disorders. Consequently, Tarrant County practitioners, clinicians and other direct care workers are familiar with many of the diagnoses associated with Externalizing Disorders, including Attention-Deficit Hyperactivity Disorder (AD/HD), Oppositional Defiant Disorder (ODD) and Conduct Disorder (CD).

In spite of this knowledge, there remains the question of how best to impact positive change in these children. Recent efforts made by the Tarrant County mental health community to increase knowledge of effective practices has resulted in the realization that – while there are evidence-based programs and practices currently being implemented in Tarrant County – there is limited understanding of which ones are most effective in addressing externalizing behaviors. Additionally, many evidence-based programs and practices currently implemented in Tarrant County are frequently inaccessible to families due to strict eligibility criteria. These two issues – the lack of accessibility and the need for a system for managing knowledge of the latest research regarding effective programs and practices – should be addressed at a county level. Effective and accurate information and services need to be readily available and accessible to practitioners, consumers and the community at large.

Closely linked to increasing knowledge of effective practices is the ability to implement those practices with fidelity. In order to accomplish this, the Externalizing Learning Community identified a need for the training and coaching of front line staff across the county in core components of effective practices. Broadening the training scope to include staff across agencies promotes consistency in implementation and demonstrates Tarrant County’s “no wrong door to the right service” philosophy. Likewise, training followed by an accountability process that includes consultation and coaching by local and national experts would help ensure effective implementation and increase fidelity to the practice/program model.

### **Recommended Evidence-Based Practice or Program for Externalizing Disorders**

The Externalizing Learning Community supports the implementation of a pilot project called **Quest for Competency**. This effort focuses on gaining understanding and skill in implementing core components of proven practices, utilizing experts to train a broad range of practitioners in the use of these practices, and promoting consistent implementation across agencies/entities. Unlike evidence-based programs, which tend to be curriculum-based and manualized, evidence-based practices promote a set of core practice components which – when implemented together – produce proven changes in children and families. As previously noted in the research, externalizing disorders respond best to interventions that include participation by parents/caregivers and focus on concrete changes in behavior. Therefore, the two practice areas suggested in this pilot include *Parent Management Techniques* and *Cognitive Behavioral Therapy* practices.

The **Quest for Competency** project recommended by the Externalizing Disorders Learning Community will include:

- ◆ Utilizing experts to provide training, coaching and follow-up consultation to practitioners
- ◆ Building a collaborative relationship with researchers to evaluate the pilot project utilizing evaluation instruments to measure fidelity
- ◆ Utilizing the information for performance and quality improvement as it relates to Externalizing Disorders
- ◆ Employing researchers to identify new initiatives and research studies for keeping evidence-based programs and practices knowledge current in Tarrant County as they relate to externalizing disorders.

### **Barriers to Effective Implementation**

The Externalizing Learning Community acknowledges that in order to execute the **Quest for Competency** pilot project effectively, we must be able to recognize potential barriers to effective implementation. Additionally, we must be able to identify solution-focused strategies that will help overcome these systemic barriers. Without addressing both components, the sustainability of the pilot project would be unlikely.

There is an understanding that, with the implementation of this pilot project, the Externalizing Disorders Learning Community is seeking a cultural change for Tarrant County. Research shows that it takes an average of four years to create cultural change; however, we believe that this process has already started in Tarrant County and the recommended pilot project is a result of that cultural change. To sustain the cultural change, the **Quest for Competency** pilot project acknowledges the following barriers and suggestions to overcome obstacles:

- Funding for the pilot project will have to be outlined in advance so all stakeholders have a general understanding of the investment Tarrant County is making in implementing excellence in service delivery. Such costs include the fee for training, coaching and supervision provided by experts in the field of *Parent Management Techniques* and *Cognitive Behavioral Therapy* practices. Additionally, there will be the cost for travel, training site locations and materials utilized by practitioners, researchers and consumers.
- As providers go through training, parents and other caregivers of children with Externalizing Disorders must be educated about:
  1. Evidence that supports the effectiveness of evidence-based programs and practices in providing relief for the symptoms that their children are experiencing
  2. The need for them to participate actively in the treatment if it is going to be effective for their children
  3. Accessibility of the program, including informing caregivers of the existence of the program, who provides it and what funding is available to help them pay for the services.

- Tarrant County will need to create incentives to build commitment and confidence in the pilot project, as many ventures expire after the excitement of the project wears off. In order to maintain the pilot project, the Externalizing Disorders Learning Community recommends the implementation of creative recruiting efforts that engage community members to participate. Such efforts can include fiscal responsibility, as well as alignment with professional and organizational mission, vision and values.
- Youth with externalizing disorders are served in many different settings. Therefore, another barrier to successfully implementing the pilot project is that of linking the various organizations, practitioners, schools, hospitals and researchers with each other to provide continuity and structure in all settings for children in treatment. While there is a growing willingness of Tarrant County agencies to collaborate in improving treatment outcomes, practitioners in general know very little about what other providers are doing. This has resulted in conflicting and overlapping services that create confusion for the families seeking help. Families are often referred for help to a program, only to find they are ineligible to participate. In addition, families might be referred by different service providers to participate in programs at various agencies for the same purpose – such as parent education – which teach different and conflicting strategies to solve problems.
- The **Quest for Competency** pilot project must receive marketing and public relations efforts to raise awareness regarding externalizing disorders and the need for evidence-based programs and practices within the community. Underlying all of the above barriers is the barrier of generalized knowledge about the frequency with which externalizing disorders affect youth, families, schools and the community at large. The general public also does not understand the cost to the community of leaving individuals with externalizing disorders untreated. A community-wide effort through the media – including television, radio, newspapers and the internet – should educate the community about the symptoms, resulting problems and costs associated with untreated externalizing disorders. This campaign will heighten awareness of the need for the **Quest for Competency** pilot project. It should also address the cost benefits of identifying and treating individuals with these disorders at an early age. The result may be increased financial support for training, caregiver education, assessment and provision of such evidence-based programs and practices in Tarrant County.

### **Needed Policies to Support this Recommendation**

The Externalizing Learning Community identified several policies needed to address the implementation and monitoring of the **Quest for Competency** pilot project in relation to Mental Health Connection's Standards of Care. Additionally, in keeping with Mental

Health Connection's mission statement, the needed policies and procedures should include:

- The development of a service philosophy statement
- The development of a logic model that includes core values, principles, strategies, short-term outcomes, medium-term outcomes, and long-term outcomes
- The development of a performance and quality improvement monitoring system that includes:
  - Annual work plan
  - Inputs, outputs and outcomes
  - Measurement and assessment tools
  - Monitoring of outputs and outcomes on a monthly, quarterly and annual basis
  - Feedback mechanism to share information
  - Grievance policies and procedures
  - Development of a task force and/or action plans to address discrepancies in benchmarks

Important to the implementation of the **Quest for Competency** pilot project is the support of the community, which will be utilizing this pilot project both as providers and as consumers. The policies and procedures will need to clearly outline what is expected from organizations, practitioners, researchers, consumers and the community to increase the likelihood of the pilot project's success and to maintain fidelity to the components of the pilot project. Additionally, participation in the program will require time and resources from all involved, and the policies and procedures should clarify the responsibilities and expectations of each of the participants including confidentiality agreements and participation in research and evaluation.

### **Implementation and Action Plan**

A framework for the implementation of the **Quest for Competency** pilot includes identifying a task force consisting of members from the Externalizing Disorders Learning Community, Mental Health Connection members and other key players to:

- Identify local, state and/or national experts to train, coach and provide consultation on core components in Parent Management Techniques and Cognitive Behavioral Therapy in addressing externalizing disorders. The experts should include methodologies and assessment tools.
- Identify professionals who will participate in the **Quest for Competency** pilot project (private practitioners, organizations, agencies, schools and hospitals).
- Identify researchers to evaluate and test for fidelity of the **Quest for Competency** pilot project, including the development of an evaluation instrument.
- Determine the process for referral, assessment, intake and tracking of clients participating in the pilot.

- Schedule and coordinate training in Parent Management Techniques and Cognitive Behavioral Therapy practices, as well as ongoing consultation and coaching with identified expert.
- Develop a sustainability plan, including identification of local community experts who can provide future training for agency staff across Tarrant County.

The Externalizing Disorders Learning Community also recommends the creation of a community-wide needs assessment. This assessment will identify all evidence-based mental health programs and practices currently being utilized in Tarrant County. The assessment also should include the fidelity of the currently implemented evidence-based programs and practices. It also will identify the need for additional evidence-based programs and practices in order to bridge the gap between mental health service providers and consumers.

### **Strategies for Keeping the Knowledge Current and Widely Shared**

In any endeavor, the key to long-term success and sustainability is keeping it “new” long after its beginning has passed. The effort to assess the needs, identify evidence-based practices to meet those needs, and provide training, information and up-to-date in Tarrant County is both bold and different. It is also necessary for the future development of mental health treatments in Tarrant County.

The Externalizing Disorders Learning Community therefore proposes the following to keep community knowledge about the best evidence-based programs and practices current, fresh and usable by all mental health providers in Tarrant County:

- Document the community needs as they relate to mental health.
- Identify community leaders who are recognized and who will be heard by the community to recommend the utilization, development and growth of the best evidence-based programs and practices available to meet those community needs. Agencies that use the best evidence-based programs and practices could be recognized publicly through public relations efforts and the media.
- Utilize the Mental Health Connection Website to maintain a list of current evidence-based programs and practices being utilized in the community for specific mental health issues.
- Provide consumers with the contact information so they can learn more about the evidence-based programs and practices, including ways to connect with providers.
- Maintain a list of current research in the field on the website. Update that list monthly for review and study.
- Provide web links for journal and research articles to identify the evidence-based programs and practices currently in use in the community and to identify new ones.
- Work with community leaders to develop a support system for implementation of evidence-based programs and practices in the community.

- Provide training and ongoing consultation to those seeking to utilize an evidence-based program or practice.
- Arrange for professionals to come to Tarrant County, where they will discuss the value of evidence-based programs and practices.
- Conduct a symposium every three years to address the links and gaps between research, practice and policy in the community.
- Review current evidence-based programs and practices offered in the community and have researchers audit them for compliance.
- Conduct a cost/benefit analysis of the evidence-based programs and practices.
- Invite businesses, organizations, practitioners, hospitals, schools, universities, researchers, local representatives and state representatives to be a part of Mental Health Connection and participate in the pilot project.