

Assessment

What: Systematically gather information including administering standardized checklists to understand child or youth emotional and behavioral problems.

Why? Evidence-based treatment targets specific clinical problems in a focused, active, step-by-step way. Assessments help identify the main specific problem to start focusing on (even when more than 1). Feedback on the assessment helps establish a collaborative therapeutic alliance with the child and caregiver(s) on the identified problem and the activities in therapy (active practice of new skills) that will help.

How?

Structured clinical interview: focus on the problem or need that brought the child/youth to therapy.

Meet with child and family separately or together depending on clinical problem and age and explain the process, how long it will take, and the purpose. Ask them to describe the problem or concern and their goals. Learn as much as possible about: **ONSET** *when did the problem start?*; **DURATION** *how long?*; **FREQUENCY** *How frequently does it happen?*, **INTENSITY** *How bad does it get?*, **CONTEXT** *When does it usually happen? What happens right before/right after?*; **INTERFERENCE** *Describe how interferes w his/.her functioning.*, **PRIOR EFFORTS & RESPONSE** *Tell me what you've done/tried to manage or change the problem. How have those worked?* Praise them for coming to therapy and being willing to try something new.

NOTE: Gather only information required by the setting to begin treatment. Be **minimalist** so treatment can start sooner! Comprehensive (e.g., development milestones, genogram) NOT always required.

Screen for trauma exposure: Give a checklist. Explain as routine. Acknowledge and validate within session.

Administer & give feedback on standardized checklists:

Provide Feedback: Score immediately, if possible and give results in session (or at next session). Discuss what they mean and elicit client response. ****See Assessment Feedback Cheat Sheets.**** Describe what you have learned from interview, checklists and observations about the clinical problem and need, individual and family strengths, family goals. Elicit active feedback.

Observe interactions. When possible have the child and caregiver(s) together for some part of the assessment with opportunity, formal or informal, for them to interact to provide insight into the parent-child relationship with specific reference to engaging parents/caregivers.

Agree on a Treatment Goal and Plan. Jointly establish agreement on the primary clinical problem(s), and in cases of more than one, where to start. Describe treatment activities. ****see and use Psychoeducation handouts.****

Points to Remember:

- Assessment is ongoing throughout therapy. There is no need find out everything/give every checklist during the first or a “formal” assessment session. Clients will tell what they think is important.
- You may need to meet with caregiver alone to understand the problem (for behavior problems especially).