



Utah Parent Center
Special needs, extraordinary potential

Emotional Disturbance Information Sheet

Emotional Disturbance

The mental health of our children is a natural and important concern for us all. The fact is, many mental disorders have their beginnings in childhood or adolescence, yet may go undiagnosed and untreated for years. (1)

We refer to mental disorders using different “umbrella” terms such as emotional disturbance, behavioral disorders, or mental illness. Beneath these umbrella terms, there is actually a wide range of specific conditions that differ from one another in their characteristics and treatment. These include (but are not limited to):

- anxiety disorders;
- bipolar disorder (sometimes called manic-depression);
- conduct disorders;
- eating disorders;
- obsessive-compulsive disorder (OCD); and
- psychotic disorders.

You may be reading this fact sheet with one of these specific disorders in mind, or you may be looking for information about emotional disturbances in general. In either case, keep reading to find out what different emotional disturbances have in common, how they are defined in federal law, and where to find more detailed information on specific disorders.

Definition

We’ve chosen to use the term “emotional disturbance” in this fact sheet because that is the term used in the nation’s special education law, the Individuals with Disabilities Education Act (IDEA).

IDEA defines emotional disturbance as follows:

“...a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child’s educational performance:

- A. An inability to learn that cannot be explained by intellectual, sensory, or health factors.*
- B. An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.*
- C. Inappropriate types of behavior or feelings under normal circumstances.*
- D. A general pervasive mood of unhappiness or depression.*
- E. A tendency to develop physical symptoms or fears associated with personal or school problems.” (2)*

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As defined by IDEA, emotional disturbance includes schizophrenia but does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance. (3)

Characteristics

As is evident in IDEA's definition, emotional disturbances can affect an individual in areas beyond the emotional. Depending on the specific mental disorder involved, a person's physical, social, or cognitive skills may also be affected. The National Alliance on Mental Illness (NAMI) puts this very well:

Mental illnesses are medical conditions that disrupt a person's thinking, feeling, mood, ability to relate to others and daily functioning. Just as diabetes is a disorder of the pancreas, mental illnesses are medical conditions that often result in a diminished capacity for coping with the ordinary demands of life. (4)

Some of the characteristics and behaviors seen in children who have an emotional disturbance include:

- Hyperactivity (short attention span, impulsiveness);
- Aggression or self-injurious behavior (acting out, fighting);
- Withdrawal (not interacting socially with others, excessive fear or anxiety);
- Immaturity (inappropriate crying, temper tantrums, poor coping skills); and
- Learning difficulties (academically performing below grade level).
- Children with the most serious emotional disturbances may exhibit distorted thinking, excessive anxiety, bizarre motor acts, and abnormal mood swings.

Many children who do not have emotional disturbance may display some of these same behaviors at various times during their development. However, when children have an emotional disturbance, these behaviors continue over long periods of time. Their behavior signals that they are not coping with their environment or peers.

Causes

No one knows the actual cause or causes of emotional disturbance, although several factors—heredity, brain disorder, diet, stress, and family functioning—have been suggested and vigorously researched. A great deal of research goes on every day, but to date, researchers have not found that any of these factors are the direct cause of behavioral or emotional problems.

According to NAMI, mental illnesses can affect persons of any age, race, religion, or income. Further, mental illnesses are not the result of personal weakness, lack of character, or poor upbringing. Mental illnesses are treatable. Most people diagnosed with a serious mental illness can experience relief from their symptoms by actively participating in an individual treatment plan. (5)

Frequency

According to the CDC (Centers for Disease Control and Prevention), approximately 8.3 million children (14.5%) aged 4–17 years have parents who've talked with a health care provider or

school staff about the child's emotional or behavioral difficulties. (6) Nearly 2.9 million children have been prescribed medication for these difficulties. (7)

Help for School-Aged Children

IDEA requires that special education and related services be made available free of charge to every eligible child with a disability, including preschoolers (ages 3-21). These services are specially designed to address the child's individual needs associated with the disability—in this case, emotional disturbance, as defined by IDEA (and further specified by states). In the 2003-2004 school year, more than 484,000 children and youth with emotional disturbance received these services to address their individual needs related to emotional disturbance. (8)

Determining a child's eligibility for special education and related services begins with a full and individual evaluation of the child. Under IDEA, this evaluation is provided free of charge in public schools.

There is a lot to know about the special education process, much of which you can learn here can be found on the Utah Parent Center website, especially:

- [Parents as Partners in the IEP Process Parent Handbook](#)
- [An Overview of the Special Education Process](#)
- [Referral and Evaluation](#)
- [Eligibility for Special Education](#)
- [Developing the IEP](#)

A Look at Specific Emotional Disturbances

As we mentioned, emotional disturbance is a commonly used umbrella term for a number of different mental disorders. Let's take a brief look at some of the most common of these.

Anxiety Disorders

We all experience anxiety from time to time, but for many people, including children, anxiety can be excessive, persistent, seemingly uncontrollable, and overwhelming. An irrational fear of everyday situations may be involved. This high level of anxiety is a definite warning sign that a person may have an anxiety disorder.

As with the term emotional disturbance, "anxiety disorder" is an umbrella term that actually refers to several distinct disabilities that share the core characteristic of irrational fear: generalized anxiety disorder (GAD), obsessive-compulsive disorder (OCD), panic disorder, posttraumatic stress disorder (PTSD), social anxiety disorder (also called social phobia), and specific phobias. (9)

According to the Anxiety Disorders Association of America, anxiety disorders are the most common psychiatric illnesses affecting children and adults. (10) They are also highly treatable. Unfortunately, only about 1/3 of those affected receive treatment. (11)

Bipolar Disorder

Also known as manic-depressive illness, bipolar disorder is a serious medical condition that causes dramatic mood swings from overly “high” and/or irritable to sad and hopeless, and then back again, often with periods of normal mood in between. Severe changes in energy and behavior go along with these changes in mood. (12)

For most people with bipolar disorder, these mood swings and related symptoms can be stabilized over time using an approach that combines medication and psychosocial treatment. (13)

Conduct Disorder

Conduct disorder refers to a group of behavioral and emotional problems in youngsters. Children and adolescents with this disorder have great difficulty following rules and behaving in a socially acceptable way. (14) This may include some of the following behaviors:

- aggression to people and animals;
- destruction of property;
- deceitfulness, lying, or stealing; or
- truancy or other serious violations of rules. (15)

Although conduct disorder is one of the most difficult behavior disorders to treat, young people often benefit from a range of services that include:

- training for parents on how to handle child or adolescent behavior;
- family therapy;
- training in problem solving skills for children or adolescents; and
- community-based services that focus on the young person within the context of family and community influences. (16)

Eating Disorders

Eating disorders are characterized by extremes in eating behavior—either too much or too little—or feelings of extreme distress or concern about body weight or shape. Females are much more likely than males to develop an eating disorder. (17)

Anorexia nervosa and bulimia nervosa are the two most common types of eating disorders. Anorexia nervosa is characterized by self-starvation and dramatic loss of weight. Bulimia nervosa involves a cycle of binge eating, then self-induced vomiting or purging. Both of these disorders are potentially life-threatening. (18)

Binge eating is also considered an eating disorder. It’s characterized by eating excessive amounts of food, while feeling unable to control how much or what is eaten. Unlike with bulimia, people who binge eat usually do not purge afterward by vomiting or using laxatives. (19)

According to the National Eating Disorders Association:

The most effective and long-lasting treatment for an eating disorder is some form of psychotherapy or counseling, coupled with careful attention to medical and nutritional needs. Some medications have been shown to be helpful. Ideally, whatever treatment is offered should

be tailored to the individual, and this will vary according to both the severity of the disorder and the patient's individual problems, needs, and strengths. (20)

Obsessive-Compulsive Disorder

Often referred to as OCD, obsessive-compulsive disorder is actually considered an anxiety disorder (which was discussed earlier in this fact sheet). OCD is characterized by recurrent, unwanted thoughts (obsessions) and/or repetitive behaviors (compulsions). Repetitive behaviors (handwashing, counting, checking, or cleaning) are often performed with the hope of preventing obsessive thoughts or making them go away. Performing these so-called "rituals," however, provides only temporary relief, and not performing them markedly increases anxiety. (21)

A large body of scientific evidence suggests that OCD results from a chemical imbalance in the brain. (22) Treatment for most people with OCD should include one or more of the following:

- therapist trained in behavior therapy;
- Cognitive Behavior Therapy (CBT);
- medication (usually an antidepressant). (23)

Psychotic Disorders

"Psychotic disorders" is another umbrella term used to refer to severe mental disorders that cause abnormal thinking and perceptions. Two of the main symptoms are delusions and hallucinations. Delusions are false beliefs, such as thinking that someone is plotting against you. Hallucinations are false perceptions, such as hearing, seeing, or feeling something that is not there. Schizophrenia is one type of psychotic disorder. (24) There are others as well.

Treatment for psychotic disorders will differ from person to person, depending on the specific disorder involved. Most are treated with a combination of medications and psychotherapy (a type of counseling). (25)

More about School

As mentioned, emotional disturbance is one of the categories of disability specified in IDEA. This means that a child with an emotional disturbance may be eligible for special education and related services in public school. These services can be of tremendous help to students who have an emotional disturbance.

Typically, educational programs for children with an emotional disturbance need to include attention to providing emotional and behavioral support as well as helping them to master academics, develop social skills, and increase self-awareness, self-control, and self-esteem. A large body of research exists regarding methods of providing students with positive behavioral support (PBS) in the school environment, so that problem behaviors are minimized and positive, appropriate behaviors are fostered. (See the resource section at the end of this fact sheet for more information on PBS.) It is also important to know that, within the school setting:

For a child whose behavior impedes learning (including the learning of others), the team developing the child's Individualized Education Program (IEP) needs to consider, if appropriate, strategies to address that behavior, including positive behavioral interventions, strategies, and supports.

Students eligible for special education services under the category of emotional disturbance may have IEPs that include psychological or counseling services. These are important related services available under IDEA and are to be provided by a qualified social worker, psychologist, guidance counselor, or other qualified personnel.

Other Considerations

Children and adolescents with an emotional disturbance should receive services based on their individual needs, and everyone involved in their education or care needs to be well-informed about the care that they are receiving. It's important to coordinate services between home, school, and community, keeping the communication channels open between all parties involved.

The Importance of Support

Families often need help in understanding their child's disability and how to address the needs that arise from the disability. Help is available from psychiatrists, psychologists, and other mental health professionals that work in the public or private sector. There is also a network of mental health support operating in every state as well as locally.

To locate systems of support in your community or state, visit the organizations we've listed below. They can connect you with local resources, including support groups that provide connection and understanding, information, referral, and advocacy for those living with emotional disturbance.

Mental Health America | 1.800.969.6642

<http://www.mentalhealthamerica.net/find-affiliate>

NAMI | National Alliance on Mental Illness | 1.800.950.NAMI

http://www.nami.org/template.cfm?section=Your_Local_Nami

National Mental Health Consumers' Self-Help Clearinghouse

1.800.553.4539 | <http://www.cdsdirectory.org/>

There are also support groups available from organizations that address specific mental disorders under the umbrella term of emotional disturbance. See the resources at the end of this fact sheet to identify some of these groups.

Utah Mental Health Resources

CHADD of Utah (Children and Adults with Attention-Deficit/Hyperactivity Disorder)
(801) 537-7878, www.chaddofutah.com CHADD is an all-volunteer organization providing education, advocacy and support for individuals with ADHD.

Family Resource Facilitators

Statewide list of FRF's: <http://allieswithfamilies.org/facilitator/>

The Family Resource Facilitator Project Vision: "To transform the child and adolescent mental health and substance abuse services by placing the youth and his/her family at the heart of any and all treatment and service options." This will be accomplished by FRFs providing assistance to families and youth in accessing appropriate mental health services within their communities and to develop a meaningful, educated and authentic voice for policy change and advocacy.

Allies with Families

(801) 433-2595, www.allieswithfamilies.org

Allies with Families is a Utah chapter of the Federation of Families for Children's Mental Health, an organization of families supporting families by sharing experiences and strengths. Allies with Families was created in 1991 to offer practical support and resources for parents and their children and youth who face serious emotional, behavioral, and mental health challenges. It was created to support all families in the state of Utah looking for peer support and information regarding statewide mental health services and supports.

NAMI Utah (National Alliance on Mental Illness)

(801) 323-9900 or Toll-free (877) 230-6264, www.namiut.org

NAMI is a nonprofit, grassroots, self-help, support and advocacy organization of consumers, families, and friends of people with severe mental illnesses, such as schizophrenia, schizoaffective disorder, bipolar disorder, major depressive disorder, obsessive-compulsive disorder, panic and other severe anxiety disorders, attention deficit/hyperactivity disorder, and other severe and persistent mental illnesses that affect the brain.

New Frontiers for Families

(435) 676-2599, www.newfrontiersforfamilies.org/

New Frontiers for Families uses the Wraparound process to bring providers, educators, businesses, community leaders and neighbors together in order to empower families to succeed at home, at school and in their communities by listening and working together to create services and supports that meet their needs.

Navigating the Mental Health System

For those who are insured: Contact your insurance company for a list of providers.

For those who are uninsured there are still providers/agencies in the community who can provide services including:

- Valley Mental Health – Centralized Intake is 1-888-949-4864 or 801-270-6550.
Advise the person you speak with that you or the person you are calling for is unfunded. Your contact information will be taken and someone from VMH will get back to you.
- Polizzi Clinic – 801-277-774
The Polizzi Clinic is only for individuals with severe and persistent mental illness who are uninsured.
- Psychiatric and Behavioral Solutions – 801-467-1200
- Fourth Street Clinic – 801-364-0058
An individual must be homeless to receive services such as psychiatric and other medical care.
- Hopeful Beginnings – 801-979-1351
Sliding Fee scale; takes approximately one week to be seen for medication management and 24 hrs. to be seen for therapy.

Other Mental Health Resources

- Department of Workforce Services – 801-524-9000 to apply for Medicaid and for general assistance
- Local Mental Health Authority (LMHA) – The LMHA is responsible for providing community mental health and substance use disorder services. In Salt Lake County the Local Mental Health Authority is “Optum.” Optum traditionally serves those with Medicaid and/or Medicare but can help all members in the community find access to mental health and/or substance abuse treatment.
- Salt Lake County Member Handbook and Provider Directory: www.optumhealthslco.com under the Consumers and Family tab. Find information about what services are/are not available to you; how to access mental health or substance abuse services; providers in the community.
- Mental Health Hotline: (801) 773-7060
- 211 Information Line: (801) 264-7669 or 211

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