6-27-2016

Benefits and Barriers to evidence-based behavioral health
Services for Children with ADHD in Georgia

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Recommended Citation
Snyder, Angie; DiGirolamo, Ann; Martinez, Amanda; and Smith, Colleen, "Benefits and Barriers to evidence-based behavioral health Services for Children with ADHD in Georgia" (2016). GHPC Materials. 121. https://scholarworks.gsu.edu/ghpc_materials/121

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ADHD treatment. This project characterizes perceived benefits and barriers to receiving behavioral treatment among parents of young children with ADHD. Therefore, these findings suggest a misalignment between current practice and best practice for Medicaid claims data in Georgia. The American Academy of Pediatrics (AAP) recommends behavioral therapy as first-line treatment of ADHD, 53% were receiving behavioral therapy and 40% were taking medication for treatment; similar results were found with attention-deficit/hyperactivity disorder diagnosis (ADHD). Among preschoolers with special health care needs who had a diagnosis

Findings from the 2010-11 National Survey of Children's Health suggest that approximately 194,000 preschoolers had a current

PRINCIPAL FINDINGS
Parents noted exploring a variety of interventions and services to address their children's ADHD behavior, including behavioral therapy, medication treatment and alternative therapies such as diet/nutrition, physical activity and increased sleep. They noted a constant search for answers and ways to manage their child's condition. In addition, several key themes emerged in the areas of therapy, medication treatment and alternative therapies such as diet/nutrition, physical activity and increased sleep. They noted a constant search for answers and ways to manage their child's condition. In addition, several key themes emerged in the areas of

Behavioral Treatment for ADHD

Lack of knowledge of available treatment, lack of time for therapy, lack of access to services, cost, perceived stigma from others, and perceived barriers from providers.

"The school put ADHD/ODD. She did not tell me to follow up with her or where to go. I got the results but did not know where to go. So I had to do the research." "This is a 12 hour pill. She gets it at 7 in the morning. It is gone by 5:30. Gone. I can't even get homework done. So, there's no way I'm gonna have time for our major therapy sessions." "When I was looking for someone to assess my son, one psychologist told me that for insurance he had an appointment 2-3 months in advance. But if I was paying cash, he could see me the next day." "When we started, he got meds, and we were seeing the psychologist. The pediatrician's office was like, 'Oh well, if he's on meds, you don't need to see anybody.'" "With my daughter, no behavioral therapy. Just suspending and putting her in the corner. The pediatrician was like, 'Oh well, if he's on meds, you don't need to see anybody.'" "...the evenings with him are lots of screaming...you would think I was murdering my children." "I have to hide food because if it's there it's gonna get eaten. I can't keep anything." "You either go online or you read or talk with parents and you hear something's working and then you try that. Because you're searching for the magic pill...these 50 things haven't worked but I guess I'll try another 50 things. So you just keep trying."