How This Guide Is Organized

Bright Futures in Practice: Mental Health is designed to be read in two ways: (1) cover-to-cover, to enhance understanding of mental health promotion in a developmental context, and (2) as a “how-to” manual, by turning directly to specific issues or problems. An annotated table of contents and an index are provided, as well as links throughout the guide to other relevant sections on specific topics. To provide balance and be inclusive, gender pronouns are alternated throughout the guide.

The guide has three parts or components: developmental chapters, bridge topics on specific problems and disorders, and the Mental Health Tool Kit (Bright Futures in Practice: Mental Health—Volume II. Tool Kit). An introductory chapter, Making Mental Health Supervision Accessible, reviews the current context for the provision of mental health services, including topics such as continuity of care, collaboration, cultural competency, and reimbursement issues.

Developmental Chapters

The first part of the guide is organized developmentally, with chapters on infancy, early childhood, middle childhood, and adolescence. The developmental chapters provide primary care health professionals with

- Key information on each stage of child and adolescent development;
- Tips for preventive efforts and for addressing areas of concern;
- Suggestions for office practice and building partnership with the community;
- A developmental checklist;
- References to the bridge topics and to tools for both the professional and the family; and
- References to teaching cases developed by the Bright Futures Center for Education in Child Growth and Development, Behavior, and Adolescent Health.1

Each developmental chapter is divided into four sections reflecting spheres of child and adolescent functioning: self, family, friends, and community. Each section begins with applicable health supervision questions drawn from Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents. These questions are related to the key points discussed in the section of the mental health guide and help the health professional link the two guides. Although the health supervision questions can initiate a dialogue with the family, it is important to allow adequate time during the visit.

1The Bright Futures Teaching Cases are available on the Web at www.pedicases.org, or in print by calling (617) 355-CASE (2273). More than 25 self-contained educational modules are available, covering topics in child growth, development, behavior, and adolescent health. Each module consists of a case abstract, a statement of goals and objectives, a facilitator’s guide to leading discussion, a case narrative, an annotated bibliography, teaching handouts, and evaluation forms. The materials were written and edited by faculty from Children’s Hospital in Boston and Harvard Medical School with sponsorship from the Health Resources and Services Administration’s Maternal and Child Health Bureau and Genentech Foundation. The cases have been reviewed by nationally recognized experts and have been pilot-tested and evaluated in pediatric residency programs across the United States.
for parents, children, and adolescents to raise their own questions and concerns.

**Bridge Topics**

The second part of the guide contains bridge topics that address the most common mental health problems and mental disorders occurring in childhood and adolescence. Each chapter is a quick primer for the primary care health professional on the diagnosis, severity, and primary care management of specific disorders. These chapters form a bridge from promotion and prevention to early recognition and management of mental health problems and mental disorders. The bridge topics are designed to help primary care health professionals traverse the continuum of care from clinical preventive services to assessment, diagnosis, and targeted interventions. Bridge topics cover

- Criteria for specific problems and disorders, based on *The Classification of Child and Adolescent Mental Diagnoses in Primary Care: Diagnostic and Statistical Manual for Primary Care (DSM-PC) Child and Adolescent Version* and the *Diagnostic and Statistical Manual of Mental Disorders* (4th ed., text revision) (DSM-IV-TR).²,³
- Early identification.
- Interventions based on functioning in the context of self, family, friends, and school and community.
- Use of a wide range of office-based and community resources.
- Referral for specialized mental health services as indicated.

The mental health problems and mental disorders discussed in the bridge topics are linked to specific references in DSM–IV–TR and DSM-PC, and selected materials and diagnostic criteria from these manuals are reproduced in the appendix.

**Mental Health Tool Kit**

The third component of the mental health guide is the *Mental Health Tool Kit*. The tool kit is a companion volume of tools to assist health professionals in screening, education, and health care management. The tool kit includes handouts for families on issues ranging from sibling adjustment to recognizing symptoms of depression.

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²The *Diagnostic and Statistical Manual of Mental Disorders* (4th ed., text revision) (DSM-IV-TR), developed by the American Psychiatric Association, and *The Classification of Child and Adolescent Mental Diagnoses in Primary Care: Diagnostic and Statistical Manual for Primary Care (DSM-PC) Child and Adolescent Version*, developed by the American Academy of Pediatrics, are classification systems for mental health problems and mental disorders. DSM-IV-TR provides a comprehensive classification of recognized psychiatric disorders. DSM-PC focuses on developmental variations in behavior, problems, and mental disorders likely to be encountered in primary care practice with children and adolescents. These manuals can assist the health professional in recognizing and diagnosing mental health problems and mental disorders, provide a common language for discussion and research, and establish coding criteria for reimbursement.

³The *Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood* (*Diagnostic Classification: 0–3*) is another resource for primary care health professionals who provide care for children ages birth to 3 years, and for their families. DC: 0–3 contains axes and diagnostic categories that define new constructs arising out of clinical and research experience with infants, young children, and their families. DC: 0–3 provides a framework for identifying strengths and weaknesses in infants or young children and the caregiving environment, and for creating, in partnership with the family, a developmentally appropriate, comprehensive treatment or management plan.