

# Ecological perspectives critical thinking sample

[Technology](#), [Development](#)



## **Introduction**

“ Children with Special Health Care Needs” (2005) article summarizes the findings of a research developed in Los Angeles County that investigated the children with special health care needs (SHCNs) in the period 2002 – 2003 and the challenges related to their health conditions. A series of interesting findings were reported in this article. In Los Angeles County, in 2002 – 2003, there were 15% of children that required SHCNs, with different racial, ethnical, cultural or income levels. Actually, these categories were found to determine the children’s access to the appropriate treatment. As such, the study found that for Latino population or low income families it was more complicated to benefit of health insurance or to access the medical care treatment for children diagnosed with SHCNs, because of the language barriers or transportation issues. Likewise, a serious problem propelled in this article was the fact that usually the children who require SHCNs are identified as such when they reach the school age, which delays the process of intervening on their treatment in the period when the greatest benefits would be registered through proper care.

## **Literature**

The fact that the study revealed that 15% of the Los Angeles County children manifest SHCNs and that among these there are many families that have difficulties in accessing the medical care treatment suggests the intervention of the local authorities for facilitating the conditions for these families to obtain the required medication. As the article “ Children with Special Care Needs” (2005) indicates at the recommendations of the American Academy

of Pediatrics, all children with SHCNs should benefit of a “ medical home”, assuring a dedicated pediatrician in the communities where SHCNs children were identified, developing strong relations between their families and the health care providers or the schools (p. 4).

Other studies recommend an early intervention for the children with SHCNs, from the birth to the age of 5, which is considered a critical period in the child’s brain development, because interactions between the child and the caregiver can shape the brain’s architecture, helping the child into developing learning abilities and growing up as a normal adult (“ Early Intervention”, 2009). Other studies indicate that in addition to the fact that a 3, 5 percentage of American families that have children with SHCNs do not benefit at all of insurance for medicating their children, while from those who do benefit, one – third of the respondents to the study considered that the insurance did not cover the children’s needs or that the charges were unreasonable (“ The National Survey”, 2007). The same study prompts for the early screening intervention for detecting specific conditions that might fall into the category of special health care need and also an ongoing assessment for determining if the identified conditions would develop into other medical problems, in order to treat them as soon as possible (“ The National Survey”, 2007).

The community – based system of care identified in the “ Children with Special Health Care Needs” (2005) article is also identified as an effective intervention measure in other studies that treat the corresponding medication of children with SHCNs (“ The National Survey”, 2007), from which there can be assumed that this is a practical method for intervening in

children's treatment, offering on-going support and detecting from time eventual complications that might appear. Likewise, following the analysis of the report, there can be also assumed that an early identification of the special health care needs in children is possible by applying several tools that proved to be effective, such as " PEDS (Parents' Evaluation of Developmental Status), The ages and Stages Questionnaires and the Child Developmental Inventories", but care providers and other care givers need to be informed about the efficiency and mode of applying these tools (" Children with Special Care Needs", 2005, p. 5),

Actually, the early diagnosis of the special health care needs children or of the complications that might develop in a previously identified child with SHCNs is the main argument contained in " Children with Special Health Care Needs" (2005) report that could help in planning interventions in community health. The actions applied in the community and exemplified in the report, such as the development of " Learn the Signs. Act Early" public awareness campaign, sustained by the Centers for Disease Control and Prevention (CDC) aided by national partners, could serve as good practice models that could be applied in other communities for supporting the families with low financial possibilities, different races, ethnicities or cultures to detect the SHCNs in their children and prevent any further complications to develop by immediately taking action under the control of expertized professionals. The case management procedure, applied within community, was another useful procedure, identified in another report, which tracks the children with special health care needs from a specific community, providing standardized care plans based on the identified special need and adapted care, specific to the

information obtained from the household visits, where specialized care providers are attending the children with SHCNs, evaluating the degree of meeting a caring goal (Hawkins, Diehl – Svrjcek & Dunbar, 2006).

Practically, such actions should be structured and implemented with the help of the entire community, involving regional centers and national agencies, having the general understanding and knowhow for distributing the corresponding resources in communities by a system meant to match the identified SHCNs with the corresponding care givers specialists, just as the examined article suggests (“ Children with Special Care Needs”, 2005).

The screening tools such as the 10 questions PEDS, the Ages and Stages Questionnaire or the Child Developmental Intervention (“ Children with Special Care Needs”, 2005) are practical information that could be used in public policy planning, providing a comprehensive understanding to the care givers and other authorities involved in care giving or in assuring support for local communities. Likewise, information regarding the effect of the lack of community – based support on the low income families should be included in the project, with a focus on race and ethnical challenges in benefiting of the medical insurance for the children with SHCNs, as the article reports them. Aspects regarding the financial contributions and regarding how the policy should be applied, including the fines and consequences for not applying the procedures included in the policy should constitute a special section of the public policy planning.

## **Conclusion**

Community – based medical care system for children with special health care needs is the key for detecting their problems from an early stage and for

providing dedicated care for preventing the further development of specific health conditions. Such care system should be available throughout U. S. communities and not only, facilitating the access of health care benefits for the families with low incomes, or the residents with different races and ethnicities or cultural background who otherwise are at risk of not benefiting of their rightful medical insurances. The article “ Children with Special Care Needs” (2005) has identified practical tools and information that could be further utilized for planning interventions in community health, such as the ability of diagnosing the children with SHCNs by employing screening tools and by involving the local, regional or national agencies for a professional distribution of the resources according to communities’ needs. Based on the gathered information, the public policy planning should include comprehensive knowledge about how certain guidelines and procedures should be applied in communities for achieving positive caring results, as well as specific fines or consequences for failing to meet the requirements settled by the dispositions included in the public policy planning.

## References

Children with special health care needs. (2005). Los Angeles: County of Los Angeles Department of Health Services Public Health.

Early intervention for young children with special health care needs. (2009) Minnesota: Minnesota Department of Health Fact Sheet.

Hawkins, M., R., Siehl-Svrjcek, B. & Dunbar, L., J. (2006) “ Caring for children with special healthcare needs in the managed care environment”.

Lippincott’s Case Management. Vol. 11, no. 4, pp. 216 – 223.

The national survey of children with special health care needs chartbook

<https://assignbuster.com/ecological-perspectives-critical-thinking-sample/>

2005 – 2006. (2007). U. S. Department of Health and Human Services  
Human Resources and Services Administration.