

# [Case study review: eric](https://assignbuster.com/case-study-review-eric/)

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Case StudyReview: Eric

Introduction

When children seemed difficult to understand, have school adjustment problems, and achievement concerns, what most people think is that these children suffer from attention deficit hyperactivity disorder. So prevalent (it seems) is the disorder or the problem that many myths have crossed upon people’s and parent’s minds regarding the disorder or even who may have this “ disease.”  Questions people want answered include whether this is a disease, who are commonly afflicted, what are the signs and symptoms, the prevalence of the “ disorder,” treatments and interventions developed and prevention, if there are any.

a. What new information did you acquire as a result of reviewing this case study?

The primaryresponsibilityof any practitioner is the proper assessment to eliminate the probable reasons for the child’s conduct. This is to evaluate properly that the child will not be mistaken to have the disorder.

The specialist uses all the available information he/she can get to piece together a profile on the child and the probability of ADHD. He or she will gatheracademicand medical records history; make observations on the child during tasks that require focus as in reading assignments and math problems. If identified as exhibiting behavior problems such as hyperactivity, impulsivity and inattention which had been significant and long-standing, then ADHD is indeed present. When a child is diagnosed as having ADHD, thefamilycan then act on the problem, make choices on what medications or therapy to implement. Moreover, the child can be assisted as he/she makes adjustments on the demands of academics or options on appropriate schooling for their child. Consequently, a combination of medical, emotional/psychological and educational interventions can be sought by parents of children with the disorder (Barkley, 2002).

b. How does the information presented in the case study compare with the information presented in your course textbook?

The cases study served as a clarification of the information in the textbook. It illuminates the reader as well, to consider very important and essential facts in the case such as the complications that the parents’ seeming misunderstanding might have on the child’s behavior. In addition, the possible case of Eric having Oppositional Defiant Disorder and how this has made the case complicated. Helping these children to function normally and for them to achieve their potential is very important. Parents should show their unconditional understanding by patiently giving their attention and guidance. Some even seek the help of the publiceducationsystem by coordinating with guidance counselors (Wender, 2002).

c. What questions do you have after reviewing this case?

The presentation of ODD or oppositional defiant disorder has indeed complicated the case. My personal view is that probably this is present in the child but simply as a development of the parents’ unhealthy ways of parenting Eric. My question simply points to the inadequacy of the parents to properly instill to Eric the right instructions and/or discipline.   
d. How might the person profiled in this case be affected by his or her spiritual development?

The crucial thing is of course, the spiritual perspective that is apparently lacking in many of the interventions ordiagnosticplans. Spiritual development has a major role in the development of proper assessment of one’s world whether, in Eric’s case, referring to the parents or to the Eric.   
e. If Jesus were a therapist responding to the person profiled in this case, how would you expect Him to respond?   
The primary focus would be on the parents who should be receiving a proper rebuke first; the father whoseleadershipis in great question and the mother who does not know at all what a child should be trained with in the first place. If Jesus would have taken the place of the therapist, Eric would be definitely given a dose of love and affection and then provided adequate boundaries to follow.

Reference:

1.      Barkley, Russell A. PhD. (2000) Taking Charge of ADHD, New York: The Guilford     Press.

2.      Wender, PH. Pharmacotherapy of attention-deficit/hyperactivity in adults. Journal of     Clinical Psychiatry, 1998; 59 (supplement 7): 76-79.

3.      Wender, Paul H. 2002. ADHD: Attention-Deficit Hyperactivity Disorder in Children and Adults, Oxford University Press.

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