Early Onset Schizophrenia: Resources for School Psychologists

A review of

Identifying, Assessing, and Treating Early Onset Schizophrenia at School
by Huijun Li, Melissa Pearrow, and Shane R. Jimerson

Reviewed by
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Early onset schizophrenia (EOS) is a relatively rare disorder. In Identifying, Assessing, and Treating Early Onset Schizophrenia at School, Huijun Li, Melissa Pearrow, and Shane R. Jimerson indicate “that about 1 in 10,000 children will develop some form of schizophrenic disorder, with childhood-onset schizophrenia (COS, onset prior to 12 years) occurring in roughly one in 40,000 children” (p. 1). This is in contrast to disorders that are more prevalent in children: attention deficit/hyperactivity disorder, 8.6 percent; depression, 3.7 percent; conduct disorder, 2.1 percent; anxiety disorder, 7 percent; eating disorder, 0.1 percent (National Institute of Mental Health, 2009); and autism spectrum disorder, 0.9 percent (Centers for Disease Control and Prevention, 2006).

Perhaps the rareness of this disorder may account for the relatively limited resources available; nevertheless, the problem is a very real one for the children afflicted with
childhood schizophrenia and for their families. School psychologists and other mental health professionals can certainly benefit from research-based information regarding assessment and interventions available for the identification and treatment of children with this disorder.

Li et al.’s book represents an important resource in the field. The authors present information on EOS from the perspective of the school psychologist and related mental health providers. The authors discuss how the disorder affects school success, in terms of both cognitive and social skills deficits, and they emphasize the importance of early identification and intervention. Their purported goal is to provide “school psychologists, as well as other child mental health professionals, and parents, essential information needed to be better prepared to identify and address the needs of students with EOS” (p. 8).

As such, Li et al. provide a summary of the available literature on etiology, prevalence, screening, diagnostic assessment, psychoeducational assessment, and treatment of EOS. They also include relevant information on federal laws regarding educational services for students with EOS (Section 504 of the Rehabilitation Act of 1973 and the Individuals with Disabilities Education Improvement Act of 2004). Summary tables are included throughout, and there is also a very helpful appendix detailing several websites that the reader can consult regarding general resources, journal articles, diagnostic interviews, and rating scales, as well as advocacy and family support services.

The chapter on the etiology of EOS includes up-to-date references on genetics, as well as the pre-, peri-, and postnatal risks associated with the development of EOS. The authors also present findings on the neurobiology of EOS, including brain anatomy and chemistry (although depicting brain scan images of gray matter loss might have made their descriptions even more salient).

Whereas the information on neurobiology could have been expanded given the recent research in this area, the chapter on prevalence appears to be much too long and unnecessarily detailed in contrast with the rest of the book. For example, the authors include two separate seven-and-a-half-page tables listing prevalence studies from the last 33 years adapted from another source. (Incidentally, although they cite “McGrath et al., 2004,” this reference is not included in the authors’ reference list.) Given the purported goal of this volume, it would have been better for the authors to just summarize the essential information from these tables in the narrative.

The chapter on case finding and screening does present useful information for both parents and professionals on the early warning signs of the disorder and includes tables on risks and symptoms of the disorder (again reprinted from other documents). In addition, relevant screening instruments are described, and their validity and reliability information is included, along with copies of actual screening and assessment instruments (e.g., they include the Prodromal Questionnaire—Brief Version; Lowey & Cannon, 2008; Brief Psychiatric Rating Scale—Children; Mullins, Pfefferbaum, Schultz, & Overall, 1986), which can be useful tools for evaluators.
The two chapters on assessment include descriptions of potential test instruments and procedures, and they describe the differences between clinical and psychoeducational evaluations for EOS. This is an important distinction because the diagnosis of the disorder according to Diagnostic and Statistical Manual of Mental Disorders (4th ed., text rev.; American Psychiatric Association, 2000) criteria may vary from the eligibility criteria for school special education services—a fact that does not always appear to be clear to independent psychologists.

The information on treatment includes considerations based on developmental level, as well as phase of the disorder (acute, recovery, and maintenance). Pharmacological interventions are well described, with a handy table included on generic names, brand names, and dosages for most of the typically prescribed medications. Various psychosocial interventions are also recommended.

Although the authors quote Asarnow, Thompson, and McGrath (2004), who indicated that there are “no published randomized controlled trials evaluating psychosocial treatments for schizophrenia in youth” (p. 184), they do not seem to emphasize this point enough and recommend psychosocial treatments that have not been validated on children even though they may have been shown to have some support for their use with adults. For example, the authors recommend cognitive behavioral therapy, although, according to Stewart and Renshaw (2009), there is little empirical evidence to support this recommendation.

Social skills training is also advocated, although Dulmus and Smyth (2000) stated that although this technique might have merit, “a review of the literature does not indicate that any social skills training research has been conducted on children to date with early-onset schizophrenia” (p. 61). In addition, Li et al. recommend supportive and personal therapy, family interventions, and wrap-around services.

Although I understand that the authors need to provide some promising avenues for intervention, I believe that they should not recommend these treatments and should make clearer the fact that these treatments still need empirical support, especially because the Society of Clinical Child and Adolescent Psychology (n.d.) does not list any evidence-based treatment for EOS. However, the table that the authors provide on educational interventions—modifications and accommodations—may be helpful for teachers and may provide possible avenues for research as to their efficacy.

In general, this book can serve as a short, handy reference for school psychologists, other mental health professionals, and parents. The authors have consolidated much of the limited information available on this relatively rare disorder and presented it in an accessible format.

Identifying, Assessing, and Treating Early Onset Schizophrenia at School is part of the Developmental Psychopathology at School series edited by Shane Jimerson and Stephen Brock. These books provide information on mental health issues affecting children and adolescents that can be useful additions to a busy practitioner’s library. Other books in this series have focused on such topics as autism (Brock, Jimerson, & Hansen, 2006), attention
deficit hyperactivity disorder (Brock, Jimerson, & Hansen, 2009), dyslexia (Christo, Davis, & Brock, 2009), conduct disorder (Hughes, Crothers, & Jimerson, 2008), posttraumatic stress disorder (Nickerson, Reeves, Brock, & Jimerson, 2009), and self-injury (Miller & Brock, 2010).

References


