

RASHID

(6th Grader)

Rashid has diagnosis of AD/HD and learning disability in reading and written language. He is a sixth grader who attends a day treatment clinic operated by the Department of Mental Health for three hours daily. His school placement is in a special day class for students with a variety of disabilities. Although the majority of students in the day treatment clinic have a diagnosis of emotional disturbance, Rashid does not at this time.

Rashid began to exhibit anxiety attacks in his fourth grade year. These include shortness of breath, hyperventilating, and agitated body movements. Poor decisions have often occurred during these episodes. Medication has helped somewhat, but mood fluctuations have not yet diminished and providers continue to explore alternative diagnoses: intermittent rage disorder, and emerging bipolar disorder are currently under discussion. There is a strong family history of mental disorders (bipolar: father, chronic depression: grandparents on both sides, psychotic episodes requiring medication: mother). Rashid was removed from his home in his fourth grade year due to neglect and abuse. He currently resides with a foster family, the third since his removal. Neither parent is in contact with Rashid (father is now incarcerated, mother's whereabouts are unknown). Grandparents are occasionally in contact.

Prior to the fourth grade, Rashid was a quiet, compliant student, though poor peer relationships were noted. Risky behavior has included running away from school and climbing to high placed on fences when frustrated over an assignment or when altercations have occurred during recess games involving balls. Rashid does not readily accept group consensus and arguments often ensue when he perceives his desires may not be met in a variety of activities. He has a good relationship with his teacher and the classroom aide and altercations have frequently been avoided due to their use of de-escalation strategies, especially the four-step method, when he is frustrated. When there is a substitute, or when other teachers are involved in supervising recess, difficulties often ensue. Rashid is not yet mainstreamed into any general education classes.



How will a BSP support Rashid in addition to mental health treatment?

Will accommodation planning affect behavior and emotional status?