# **CHILD CASE STUDY: BOBBY**

RaSheeda McNeil

School of Community Care Counseling, Liberty University

## **Author Note**

RaSheeda McNeil

I have no known conflict of interest to disclose.

Correspondence concerning this article should be addressed to

RaSheeda McNeil

Email: RMCNEIL2@Liberty.edu

### **Brief Summary**

Bobby is a 9 year old little boy who has suffered more than one trauma in his life. Bobby is currently being raised in a single parent household with his mother due to the untimely murder of his father. During the years that his father was alive Bobby and his mother was physically and emotionally abused. Bobby witnessed his father beating his mother. Child Protective Services (CPS) has been involved numerous times due to several altercations between Bobby's parents and due to neglect of Bobby. Bobby's mother lied to CPS regarding the abuse towards Bobby. Bobby's parents are both substance abusers. Bobby has been known to wear dirty clothing, be unwashed, hungry, and found wandering unsupervised outside even as a toddler. Bobby's father has been in and out of prison serving time averaging three to four months. Bobby witnessed drug addicts at his house threatening to kill his father who ended up being murdered a few days later. The case was never solved.

After Bobby's father was murdered Bobby was raised by his mother and grandmother. His grandmother was "contracted" out to take care of Bobby. Bobby's mother was unable to provide for them financially. The mother sleeps most of the time probably due to drug abuse or depression leaving Bobby to defend for himself. Bobby was sexually abused by a maintenance man traumatizing Bobby. Bobby was made to perform sexual acts on the maintenance man and receive sexual acts. Bobby feared for his mother's life because the maintenance man threaten that he would hurt the mother if Bobby did not submit to the abuse. The sexual abuse lasted for a few weeks. Bobby finally told someone and Bobby had to endure a trial that is still pending. Bobby avoids going outside to avoid seeing his abuser who is out on bail or watching certain cartoons that trigger the sexual abuse. Bobby has had recent outburst at school with recent fighting incidents. Bobby is unsure if his mother loves him, struggles with the abusive memories of his father and sexual abuse from his maintenance man, has nightmares, flashbacks, trouble sleeping, anger outburst, lashes out, negative talking, low self-esteem, poor concentration, ADHD symptoms, withdraw, and anxiety. Bobby just returned home to his mother after being in foster care for three months. Bobby deals with bullying and teasing at school so much that Bobby either isolates himself from other kids or lashing out at other kids. Bobby lacks suicidal tendencies and the desire to self-harm however, he has expressed that he wants to hurt the kids who tease him. Bobby loves his mother but not sure if his mother loves him. Bobby feels helpless as a child against his abuser, his father, and with his mother.

#### **Brief Trauma Questionnaire Interpretation**

Bobby took the Brief Trauma Questionnaire. Bobby scored no on 7 out of the 10 questions. Bobby answered yes to questions 5, 7, and 9. Bobby answered yes that before the age of 16 he was physically punished or beaten by a parent which was his father. Bobby shared that his father was physically abusive to he and his mother so bad that CPS was involved. Bobby was removed from the home more than once. Bobby answered yes to has anyone ever pressured him into unwanted sexual contact. Bobby was shared that he was sexually assaulted by the maintenance man. He was not physically injured but he was mentally injured. Bobby answered yes to a family member dying violently. Bobby shared during session that his father was murdered a few days after a drug addicted showed up at their house threatening to kill his father.

#### Life Stressor Checklist – Revised Interpretation

Bobby completed the life stressor checklist. Using option 2 for the scoring Bobby scored a 50. Bobby scored a 5 on Question 4. Bobby father went to jail repeatedly and it affected his life

due to his mother was not financially stable. Bobby scored a 5 on Question 6 regarding being placed in foster care. Bobby was placed in foster care numerous times and was recently returned to his mother. Bobby shared that he is not sure that his mother loves him. Bobby answered yes to question 9 regarding financial issues. Bobby's mother could not afford to take care of him hindering Bobby from being clean, fed, and well kept. Bobby has moved around numerous times since the death of his father.

Bobby answered yes for questions 11, 12, and 17. Bobby shared that he and his mother were emotionally and physically abused by his father and that CPS was involved more than once. He shared that he felt that he was a "bad child" because his father verbally abused him. His selfesteem decreased due to the lack of love from his parents. Bobby's father called him ugly to his face. He went to school unclean and the money for food was spent on drugs. He was found wondering as a toddler and unsupervised. His father was found murdered after Bobby witnessed his father being threaten. The case is still a cold case.

Bobby answered yes to questions 16, 22, 25, and 27, and 30. Bobby shared that before the age of 16 he witness and was involved in domestic violence in his home between his parents. Before the age of 16 he was attacked physically and verbally by his father. His father called him names and beat him so bad he left marks on Bobby's body. Before the age of 16 he was sexually assaulted by the maintenance man numerous times which he has PTSD from. He has dreams about the abuse from his father and the sexual assault. The abuser threaten to hurt his mother if Bobby did not conform. He is more withdrawn and anger causing him to act out in school via physically fights.

4

#### Clinician-Administered PTSD Scale for Children/Adolescents Interpretation

Under Criterion A Bobby met the criteria because he was sexual abused and physically abused by his father. Bobby scored a 10 B Sev core and 4 B Sx score. Bobby shared that he has unwanted dreams, distress, and memories from his trauma. He shared that he wakes up at night and cannot go back to sleep. He shared that sometimes he sees images awake. Bobby scored an 8 for C Sev and 2 for C Sx. He avoids outside and watching certain cartoons that he watched with his abuser. Bobby scored a 24 for D Sev and a 6 for D Sx. He has poor concentration and shared that he is told that all the time. He shared that he is detached from people because he is afraid he will get hurt again, he loss interest in playing outside, and believes that he is a bad kid.

Bobby had a 12 E Sev and 5 E Sx score. He does not want to self-harm but he shared that he had numerous fights in school. He admitted that he wants to hurts the other kids due to anger and has problems concentrating unless it's something he wants to pay attention too. Bobby shared that he has sleep disturbances due to nightmares of his trauma. Bobby's total Sev core was a 54 and his total Sx score was a 17.

Bobby scored an 8 and a 2 for Criteria G. He has social impairment. He rarely goes outside and does not want to engage with other kids. Bobby's global severity was rated a 3. Since it is the first session global improvement cannot be measured. Bobby dissociative symptoms score was a 2. He depersonalizes regarding his father. He shared that they don't talk about it as if it never happened. Bobby met the criteria for PTSD.

## **Primary and Secondary Diagnostic Impressions**

Bobby's primary diagnosis is clearly **Posttraumatic Stress Disorder F43.10 Severe** (American Psychiatric Association, 2013). He completed the Clinician-Administered PTSD scale and scored very high. Bobby suffers from being sexual abused by his maintenance man and

being physically abused by his father. Bobby shared that he witnessed his mother being beaten and his father calling him ugly. Bobby has flashbacks and dreams from all of the abuse he has endured. Dreams, flashbacks, avoidance of stimuli associated with traumatic events, distressing memories of the traumatic events (American Psychiatric Association, 2013). Bobby possibly witness his father's killer threaten to kill him days before his father died. Bobby feared that his abuser would harm his mother if Bobby did not submit to his sexual advances. Bobby has anger outburst due to his trauma. Bobby has anxiety and tries to avoid places and things that reminds him of the sexual abuse such as certain cartoons and outside. Bobby isolates himself by staying to himself during school and stays in his room most of the time by himself. Bobby rarely goes outside to avoid bullying and his abuser. Under Criteria A: Bobby has been exposure to actual or threatened death, serious injury, or sexual violence by directly experiencing trauma, witnessing in person, the events as it occurred to others (American Psychiatric Association, 2013).

Major Depressive Disorder, Moderate to Severe F32.1 (American Psychiatric Association, 2013). Bobby meets the description of having a social impairment. Bobby is withdrawn from family and friends. He lacks motivation to do the things he once enjoyed doing such as going outside although he did not go outside much. He shared that he experiences poor sleeping habits, lack of motivation, and poor concentration unless he wants to concentrate. Bobby has low self-esteem. Bobby shared that he was bullied at school for not being clean, mother did not defend him, father degraded him, and that he felt unloved. Due to sexual abuse Bobby struggles with feelings of helplessness and fear that he will see his abuser again.

Bobby has **Acute Stress Disorder, Moderate to Severe, F43.0** (American Psychiatric Association, 2013). Bobby was sexually abuse about eight months ago by the maintenance man.

Bobby shared that after the sexual abuse he wanted to be alone even the more. Bobby stated that he avoids places and watching cartoons that trigger the memories. Bobby does not go outside as much as he did before. Bobby shared that he has intrusive, unpleasant, flashbacks, and dreams of his trauma. He has poor concentration, irritability, poor sleeping habits, and wants to be alone even the more. He shared that he wakes up feeling yucky after dreams of the incident. He shared that his dreams happen when he is awake and those started after the sexual abuse.

## Primary Diagnosis with Culture/Gender Issues, Suicidal Risks

Less than 1 per 100,000 children commit suicide under the age of 14 (Centers for Disease Control, 1997). Boys actually commit suicide more than girls. However, according to regression analyses girls scored higher on reactive aggression as it relates to suicide (Greening, 2010). Boys are expected to be strong and not show emotions whereas girls are allowed to show their emotions more. Boys in some cultures are looked at as being weak when they cry. Girls are allowed to cry and accepted as the weaker vessel.

# Secondary Diagnosis with Culture/Gender Issues, Suicidal Risks

Males are more than likely than females to commit suicide and less likely to attend counseling. There are significant differences in males and females regarding suicide and suicide attempts. Females are more than likely to report suicide and receive counseling (Swahn & Bossarte, 2007). Depression affects males and females but seeking counseling is where there is a significant difference. Boys tend to withdraw from others more when dealing with depression. Girls are more likely to speak to their friends and family about their issues. Girls are viewed as better communicators of their feelings.

#### Recommendations

## **Recommendation 1**

I strongly recommend Intensive In-Home therapy. Intensive In-Home therapy should take place 3 to 4 days a week at Bobby's home. The sessions will include one on one therapy for Bobby and family therapy for Bobby and his mother. Bobby's mother needs therapy as well and her participation is vital. I will encourage her to lead by example in therapy so that her son can follow. The Bible teaches us to set an example for others in conduct (2 Timothy 2:15). If she does not seek individual therapy the availability for Intensive In-Home will allow her to receive some level of therapy. During these counseling sessions I recommend role playing to communicate each other's perspectives. Bobby can play his mother during certain situations providing her insight from his perspective. Doll play will be recommended to demonstrate a proper mother and son relationship and can be used to demonstrate how to handle bullying. Doll play allows Bobby to have a voice via character when he feels that his voice cannot be heard directly during discussion. Since Bobby and his mother has experienced domestic violence a crisis plan will be developed. A crisis plan will be develop for the family that Bobby will have a say on what to do if he or his mother are every abused again. A crisis plan provides clients confidence in knowing what steps to take if an issue that they fear arises and helps clients identify healthy support systems.

#### **Recommendation 2**

Mindfulness Therapy is another recommendation for Bobby. To decrease anxiety, depression, stress, anger, fear, helplessness and increase self-awareness, confidence, and focus mindfulness therapy will be introduced during individual counseling. Kid friendly CBTs using guided imagery games appropriate to Bobby's age will be used. Therapistaid.com is a helpful site

8

that will be provided to Bobby and his mother will encouragement to complete at least one quick CBT daily. Progressive muscle relaxation, meditation, and breathing techniques are also available via CBTs on the website that the counselor or parent can complete with Bobby. As the counselor I will do each one at least one time but then encourage Bobby's mother to participate with Bobby. I will encourage Bobby to complete the exercises alone when he feels that he needs his body or mind to relax. Mediation therapy also increases focus which will help Bobby with his ADHD symptoms.

#### **Recommendation 3**

Art Therapy and Journaling will be combined for Recommendation 3. A new technique that I used is journaling using words and art. Art can sometimes express what words cannot. Every client does not enjoy verbalizing or writing down their feelings. Art therapy serves as an emotional outlet without being intrusive for children (Dunn-Snow, 2000). It allows clients to use colors, shapes, and pictures to express their emotions. Art therapy allows I will provide a few art therapy books that are age appropriate for Bobby. I will encourage his mother to draw and or color with him. I will ask Bobby to write words under the pictures to assist Bobby with expressing himself. Sometimes I will allow Bobby to use Black and Red to demonstrate anger to release it. However, I will encourage Bobby to stay away from Black and Red colors and encourage bright happy colors to redirect negative feelings to positive feelings. I will encourage Bobby to complete Art Therapy pictures at least 3 times a week then discuss the pictures during intensive in-home.

#### References

- American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders. (5th ed.). Washington, DC.: Author
- Centers for Disease Control. (1997). Rates of homicide, suicide, and firearm-related death among children, Morbidity and Mortality patients. Weekly Report, 46, 101–105.

Dunn-Snow, P., & D'Amelio, G. (2000). How art teachers can enhance artmaking as a therapeutic experience: Art therapy and art education. *Art Education*, *53*(3), 46-53.
 <a href="http://ezproxy.liberty.edu/login?qurl=https%3A%2F%2Fwww.proquest.com">http://ezproxy.liberty.edu/login?qurl=https%3A%2F%2Fwww.proquest.com</a>
 <a href="https%2Fscholarly-journals%2Fhow-art-teachers-can-enhance-artmaking-as%2Fdocview">http://ezproxy.liberty.edu/login?qurl=https%3A%2F%2Fwww.proquest.com</a>
 <a href="https%2Fscholarly-journals%2Fhow-art-teachers-can-enhance-artmaking-as%2Fdocview">http://ezproxy.liberty.edu/login?qurl=https%3A%2F%2Fwww.proquest.com</a>
 <a href="https%2Fscholarly-journals%2Fhow-art-teachers-can-enhance-artmaking-as%2Fdocview">http://ezproxy.liberty.edu/login?qurl=https%3A%2F%2Fwww.proquest.com</a>
 <a href="https%2Fscholarly-journals%2Fhow-art-teachers-can-enhance-artmaking-as%2Fdocview">https//exprox/art-teachers-can-enhance-artmaking-as%2Fdocview</a>
 <a href="https%2F199396851%2Fse-2%3Faccountid%3D12085">http://exprox/art-teachers-can-enhance-artmaking-as%2Fdocview</a>

- Greening, L., Stoppelbein, L., Luebbe, A., & Fite, P. J. (2010). Aggression and the Risk for
  Suicidal Behaviors among Children. *Suicide & Life Threatening Behavior*, 40(4), 33745. <u>http://dx.doi.org.ezproxy.liberty.edu/10.1521/suli.2010.40.4.337</u>
- Swahn, M. H., & Bossarte, R. M. (2007). Gender, early alcohol use, and suicide ideation and attempts. *Journal of Adolescent Health*, 41, 175-181.