

# The 15-Minute Relationship

**ROBERT McGRATH, Ph.D.**

Professor, Fairleigh Dickinson University  
Director, Integrated Care for the Underserved of  
Northeastern New Jersey

# The Need for Change

- In 2014, 18% of adults had a mental disorder in the prior year
- 13% of kids 8-15 had a mental disorder in the prior year
- Only 59% of adults with SMI and 51% of kids got treatment
- 2/3 of PCPs indicated they cannot access MH services, double any other specialty (Cunningham, 2009)

# Responses

- Put **lots more money** into mental health
- Are MH practices are **optimally cost-effective?**
  - **Stepped care**; minimally disruptive medicine (Leppin, et al., 2015; McGrath & O'Donohue, 2015)
  - National Institute for Health and Clinical Excellence (UK) Depression: The Treatment and Management of Depression in Adults (2010)
  - Cuijpers et al. (2010): MA of 21 studies found no difference between guided self-help and F2F tx
  - **Many patients are incapable of committing to 12 sessions**

# Mental vs Medical Health Care

	Mental Health Care
<b># sessions</b>	12 to
<b>Goal of the Relationship</b>	Achieving intimacy
<b>Goal of the Treatment</b>	Transformative experience

# Mental vs Medical Health Care

	Mental Health Care	Medical Health Care
<b># sessions</b>	12 to	1 to 2
<b>Goal of the Relationship</b>	Achieving intimacy	Achieving trust
<b>Goal of the Treatment</b>	Transformative experience	Functional stability

**The Relationship Still Matters!**

# Questions Raised by 15-Minute Interventions

- Is **psychotherapy for self-exploration** health care?
- What if the person can **improve enough** in 15 minutes?
- What if **life circumstances** don't allow normal treatment?
- What if this helps people who would **never come for treatment** otherwise?
- What if **seeing people earlier** means we can use brief interventions?
- What if our long-term model teaches us to **move more slowly than the patient can bear**?
- What if it **encourages delay** rather than agency in the patient?
- What if even **transformation** can happen in 15 minutes?

# Consultations in Pediatrics

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# General Issues

- Trauma
- Obesity
- Child abuse/neglect
- Somatic expression of anxiety
- School/social adjustment

# Post-Natal Visits

- Depression/anxiety (Edinburgh)
- Educational
- Stress
- Maternal attachment
- Family relationships/support

# Preschool

- **Modified Checklist for Autism in Toddlers (M-CHAT): 16-30 months**
- **Ages and Stages: 6-60 months**
- **Developmental milestones**
- **Developmental anxieties**
- **Typical behavioral issues:**
  - Tantrums
  - Sleeping
  - Eating
  - Aggression

# Early School-Age

- Learning issues: consider environmental factors
- ADD: Vanderbilt Assessment Scales
- Family stress
- Bullying

# Adolescents

- Eating disorders
- Depression/Suicidality: CES-D modified
- Bullying
- Risk behaviors: sex, SA, impulsivity

# Screening Instruments

- American Academy of Pediatrics

[https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Mental-Health/Documents/MH\\_ScreeningChart.pdf](https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Mental-Health/Documents/MH_ScreeningChart.pdf)

# General tools

- **Pediatric Symptom Checklist**
  - 17 items (short form)
  - Ages 4-16
- **Strengths and Difficulties**
  - 25 items
  - Ages 3-17

# Key Interventions

- **Younger kids**
  - Reducing parent anxiety
  - Watching and waiting
  - Anticipatory guidance
  - Targeted play therapy
- **All ages**
  - Parent training
  - Family intervention
  - School interventions