

POSTERS

3797374 - PO1 CATEGORY: SCREEN

Early identification of and facilitation for children with symptoms of ADHD in preschool

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Children with ADHD spend most of their day in kindergarten or preschool. To ensure positive development it is essential that preschool staff have good knowledge of facilitation and teaching of preschool children with ADHD.

This study sought to increase knowledge of early identification of ADHD symptoms in pre-school aged children, and education and facilitation for those children for preschool staff, educational advisors and parents. The study investigated whether a teaching and supervision program for professionals and parents would increase the knowledge of early symptoms associated with ADHD, and of facilitation and education for those children.

The educational team and parents of 15 pre-school children with symptoms associated with ADHD were included in the study. Pre-program focus group interviews assessed participants' expectations, current knowledge and attitudes. In addition to serve as a baseline measure the information from these interviews influenced the content of the teaching and supervision program (TSP). The TSP included lectures, group assignments with supervision, and bring-home assignments between teaching sessions. The themess for the teaching and supervision program were; (1) General information on ADHD, (2) Assessment and parent-professional cooperation, (3) Facilitation for children with ADHD symptoms, (4) Effective strategies for challenging behaviors, (5) Risk- and success factors for inclusion. The post-program focus-group interviews assessed self-experienced learning and changes in attitudes.

The analysis of focus group interviews and notes participating teams made during assignments indicates that participants experience increased knowledge in early identification of symptoms associate with ADHD in pre-school aged children, Further the analysis clearly indicated that participation in the TSP lead to increased knowledge on facilitation and education of pre-school children with symptoms associated with ADHD, and that the participation in this study lead to changes in educational practices.

This study implemented a model to increase competence in professionals and parents in ADHD related behaviors. This study indicates that this model is effective in increasing knowledge and alter practices. ESSENCE 2018

CATEGORY: SCREEN -

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Objectives: Slovenia has a long tradition of a broad network of primary care paediatricians and systematic examination of children, including neurological examinations and developmental screening tests. There is also a network of developmental departments and in bigger towns mental health departments. This enables early detection and intervention for children with ESSENCE.

Method: We did an overview of the follow-up of children, who visited one of the developmental departments at the Community Health Centre in Ljubijana. Primary care paediatricians sent us the children with perinatal risk factors, abnormalities at neurological examination, or atypical/abnormal development.

Results: There were 429 children born in 2009. In 20% of the children the problems were more complex and the multidisciplinary approach was needed. In these cases we cooperated with the mental health department and kindergartens. Among the 429 children there were 175 children with perinatal risk factors.

Conclusion: The network of primary care paediatricians and the system of systematic examinations offer a good opportunity for early detection of children with ESSENCE. The network of multidisciplinary teams is required to offer the follow-up and early intervention to those with developmental problems, as well as good coordination between health care, educational and social system.

> 3870460 - P03 CATEGORY: SCREEN -

3859575 - PO2

Development and initial validation of the ESSENCE-Q South Slavic language versions

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22

Objectives: To translate the ESSENCE-Q screening instrument for neurodevelopmental disorders into South Slavic languages, namely Bosnian, Bulgarian, Croatian, Macedonian, Montenegrin, Serbian, and Slovenian.

Methods: The ESSENCE-Q (12 items, possible total scores 0-24) was translated into languages abovementioned in a multiple-step process. Afterwards, it was administered via interviews with one parent for a total of 112 children under the age of 6 assessed for developmental difficulties. Forty of the screened children had one or more neurodevelopmental disorders (NDDs).

Results: The translated questionnaires have appropriate content and face validity, with sound conceptual, item, semantic, and operational equivalence with the original. Only two items were found to be incomprehensive ("Motor development/milestones" and "Funny spells/absences). Thus, slight modifications were applied, preserving the original meaning. On average, children with NDDs had significantly higher scores than healthy children or children with psychological symptoms not related to NDDs (F(df) = 38.27(2), p < 0.001). Based on receiver operating characteristics analysis, an optimal cut-off of ≥4 had 85% sensitivity and 72.2% specificity.

Conclusions: The ESSENCE-Q versions developed in this study have promising measurement properties when screening for children with NDDs in countries speaking South Slavic languages.

> 3871065 - PO4 CATEGORY: SCREEN

Screening for neurodevelopmental disorders in clinical settings with the ESSENCE-Q South Slavic language versions

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Objectives: To test the sensitivity and specificity of the parent form of the ESSENCE-Q South Slavic language versions as a screening instrument for neurodevelopmental disorders (NDDs) in clinical settings. ESSENCE 2018

Methods: Children under the age of 6 assessed for developmental problems from seven centers in Bosnia and Herzegovina, Bulgaria, Croatia, Macedonia, Montenegro, Serbia, and Slovenia were included. Forty eight children had one or more NDDs, while 86 were of normal development. One parent per child completed the ESSENCE-Q with 12 items (possible scores 0-24).

Results: Cronbach's alpha for the total score was 0.91. The area under the curve (AUC) was 0.96, where an optimal cut-off \geq 3 had sensitivity of 0.96 (95% confidence interval [CI]: [0.86, 0.99] and specificity of 0.84 (95% Ct [0.75, 0.91]). The diagnostic accuracy was similar when screening boys and girls separately (Youden index was 0.78 and 0.79, respectively), while it was greater when screening children aged 12-36 months than children aged 37-72 months (Youden index was 0.86 and 0.57, respectively).

Conclusions: The ESSENCE-Q South Slavic language versions completed by parents could be used as a screening tool to identify children with NDDs in clinical settings. The screening instrument might have greater diagnostic accuracy when screening younger than older children, but this trend should be further confirmed.

> 3871326 - P05 CATEGORY: SCREEN

Comparing the evidence and "lessons learned" with developmental and social-emotional screening between Scandinavia and the USA

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Objectives: What are the "lessons learned" and research opportunities to improve the early identification of developmental-behavioral delays and at-risk conditions using the Ages & Stages Questionnaire (ASQ) and ASQ:Social-Emotional (ASQ:SE) in Scandinavian and United States (US) populations?

Methods: A comparative review was performed investigating the use of the ASQ and ASQ:SE in Denmark, Norway, Sweden and the US. Selection criteria included peer-viewed studies over the past 20 years in the birth-through-five-year age group.

Results: The Danish, Norwegian and Swedish ASQ have not been properly re-normed and validated. The ASQ:SE is only available in Danish. The Norwegian ASQ is out-of-date. The Swedish ASQ is not commercially available. Danish ASQ and ASQ:SE studies show promise for home visit and preschool settings. In US medical settings, periodically administering the ASQ and ASQ:SE has been proven to be feasible, and dramatically improves early detection and intervention rates. In Scandinavia and the US, there is insufficient evidence that screening improves outcomes over time.

Conclusions: US studies highlight many practical lessons about implementing the ASQ and ASQ:SE. In Scandinavia, research opportunities exist to improve early detection rates with universal screening. Randomized controlled trials are needed to investigate outcomes in screened versus unscreened cohorts.

24