

# **Trends in Child and Adolescent Mental Health**

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# Learning Objectives

- **Evaluating prevalence trend of child & adolescent psychiatric disorder across time**
- **Understanding interactive complexity of etiological aspect**
- **Reasoning shifting of CAMH service pattern and priority**
- **Briefing the importance of trend analyses**

# Introduction

- **Estimated that throughout the Globe at least 1 in 10 children and adolescents has mental health problem**
- **The rates of mental health problems are increasing among children and adolescents**
- **In USA, 1 in 5 children and adolescents reported to have mental health problems**

(WHO 2009; Knof et al 2008)

# Introduction

- Mentally sick children develop as sick adults who do not able to take part in productive activities with their full potentials
- Overall, calculated immediate and ultimate loss and burden predicated as “huge”

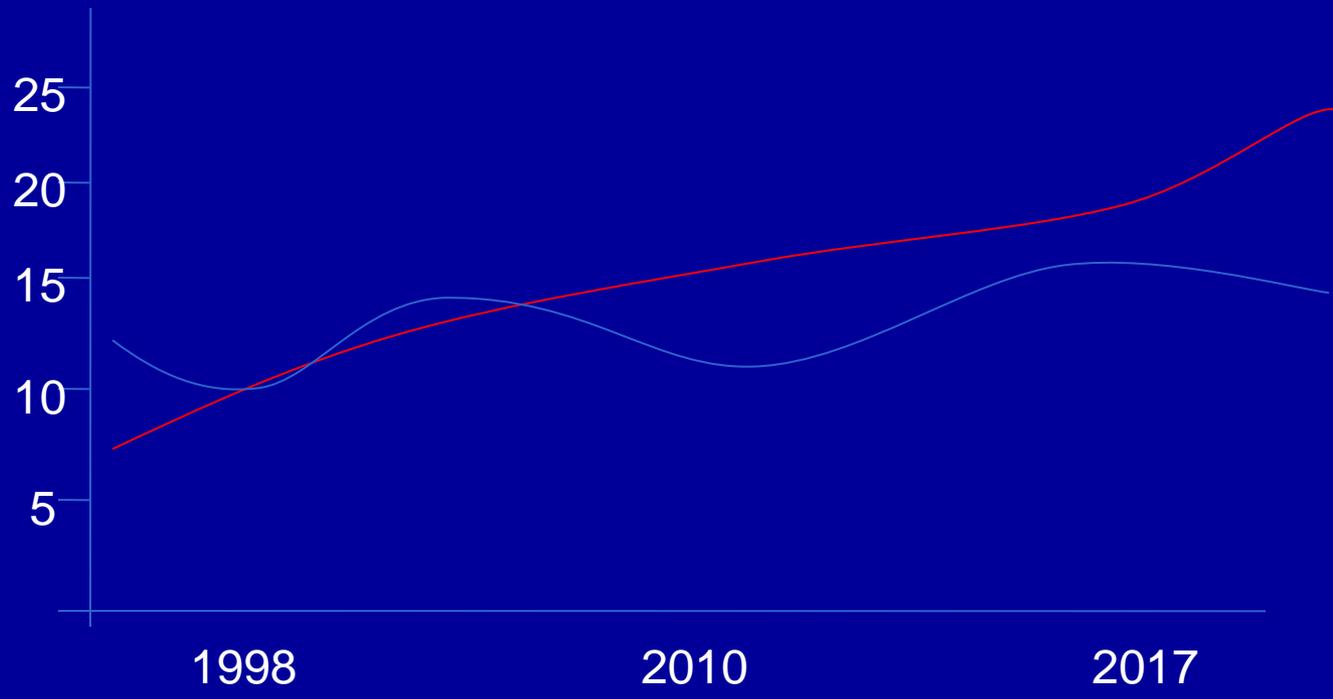
# Introduction

- This understanding increasingly prioritizes CAMH and causes rapid emergence of services and related tasks
- Trend analyses of child and adolescent mental health contribute further for rational understanding of the problems and relevancy of the tasks

# Trends of prevalence

- Epidemiological researches indicate long term trend of increasing prevalence
- Critical evaluation, meta analyses and cohort studies concluded that prevalence is more or less same across time with periodic plateau

(Merikangas 2018, Collishaw 2016, Maughan et al 2008)



# Trends of prevalence

- Issue between observed change and “real” change is rational
- Method factors are main reason of this difference namely,
  - ascertainment/participation rate
  - sampling
  - measures/defining disorders
  - method of assessment/informant

# Trends of prevalence

Recognized difference was found in

- transitional period of life- childhood to adolescence, adolescence to young adults
- adolescents-trends of increased prevalence

(Brent 2018 ;Costello et al 2011; Collishaw 2016)

# Trends of prevalence

## Changes of individual disorder was found

- Increase rate of ASD, Depressive disorder, Substance use disorder, Conduct disorder
- Decrease rate of SAD, Phobias, ADHD

(Brent 2018 ,Maughan et al 20005)

# Trends of prevalence

## Changes of particular condition

- Increase rate of self harm and suicide, youth crime, insomnia, isolation, stress

## Emergence of new problems

- Behavioral addiction, cyberbullying

(Brent 2018, Zych et al 2016)

# Trends of prevalence

## Gender difference found among adolescents

- Increase rate of depression, self harm among girls
- Increase rate of suicide among boys

## Commonality

- Increased conduct problems in both genders

# Trends of etiology

## Most notable contributory factors

- Early childhood adversity- maltreatment, bad parenting
- Epigenetics-life long/intergenerational changes

# Trends of etiology

## Most notable contributory factors

- Increased exposure to toxic stress-long lasting, frequent or strong intensity
- Deregulation of daily life- insomnia, altered circadian rhythm

# Trends of etiology

Etiology becomes more complex and/or complex by nature as evident by

- Gene-childhood trauma-impaired brain plasticity-inheritability
- Isolation-bullying-insomnia-rhythm dysregulation-impaired general functioning

# Trends of service

- **There is increased trend of service utilization, referrals that is evident of increased awareness at all level**
- **Increased trends of innovative biopsychosocial approaches**

# Trends of service

- **Increased trends of collaborative approach and involvement**
- **Increased trend of examining cost-effectiveness of innovative models**
- **Increased trained of holistic competency of the professionals**

# Trends of intervention

## Wellness intervention

- Exercise
- Good nutrition
- Meditation

# Trends of intervention

## Wellness intervention

- It works in treatment, prevention and improve outcome
- Exercise reduces symptoms of depression, aggression and improve functioning

(Hudziak et al 2018; Dopp et al 2018)

# Trends of intervention

## Integrated care

- Child/Adolescent Psychiatry-Pediatric liaison
  - Paradigm shift in training and competency
  - Screening(depression screening for adolescents)
  - treatment and prevention
- Integration with primary care
- Integration with maternal child health

(Kraft 2018)

# Trends of intervention

## Paradigm shift in Team-based care

- Diverse team
- Need based team
- Integrated team

# Trends of intervention

## School-based mental health care

- Improve early identification
- Assessment
- Diagnoses and
- Appropriate referral/treatment

# Trends of intervention

## Preventive care

- Family first prevention
- Breast feeding
- Relationship-as a ‘vital sign’
- Training, parenting
- Increased resiliency
- Support-home visit, using telehealth

(Kapur et al 2018; Stonely et al 2018, Brent et al 2018)

# Conclusions

- **Long term trends of child psychiatric disorders are more or less same with ups and downs of some specific disorders**
- **Trends of increased prevalence among adolescents are truly evident. Depression and suicide are increasingly alarming**
- **There is extreme need to resolve the methodological limitations of research**

# Conclusions

- **Early childhood adversity is the most critical contributor**
- **Advances in biogenetic research will certainly contribute in early detection and treatment**
- **Increased trend of preventive intervention influences the overall apaches of CAMHS**

# Conclusions

- **Monitoring trends is essential for service planning, identifying risk factors, guiding research and developing innovative treatment in this field**
- **Limited data on trends of child and adolescent mental health that need to be addressed**

*It is easier to built strong children than to repaid  
broken men.*

*- Frederick Douglass*



Thank you all