

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”

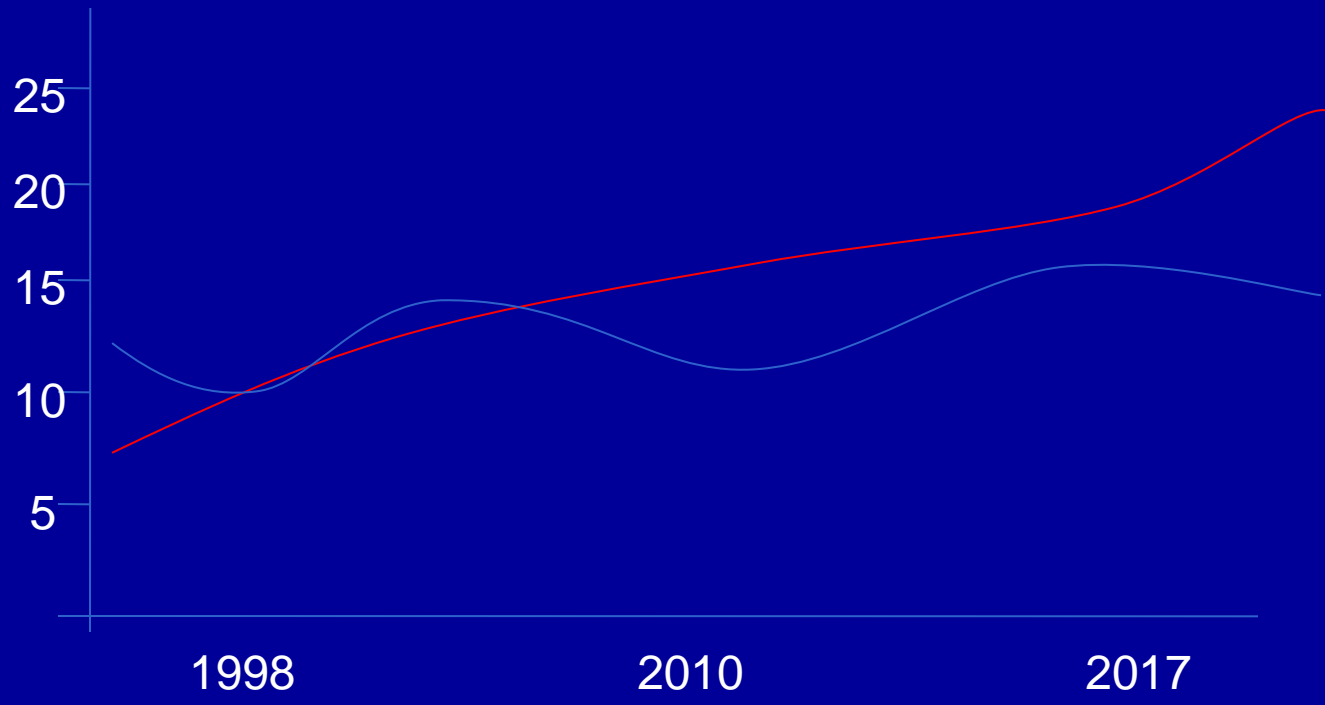
Introduction

- 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