

Mental Health Issues in Children: Signs, Symptoms, and Services

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Faculty

Gayla Caddell, MS
Child and Resource Specialist
Division of Mental Illness and
Substance Abuse Services
Alabama Department of Mental Health

A National Issue

- In 2000, Surgeon General's report on Children's Mental Health:

"The burden of suffering experienced by children with mental health needs and their families has created a health crisis in this country."



A National Issue

- In 2003, the President's New Freedom Commission on Mental Health concluded:

"No other illnesses damage so many children so seriously."

What is Mental Health?

- Mental Health
 - The achievement of expected developmental cognitive, social, and emotional milestones
- Mental Disorder
 - Disturbances in thought, mood, and/or behavior that affect one's functioning

What is Mental Health?

- One in five or 20% of children experience signs and symptoms of a mental disorder at some time resulting in at least minimum impairment in functioning
- One in ten or 10% have a serious emotional disturbance resulting in significant functional impairment

Risk Factors and Signs

- Etiology
 - Hereditary
 - Genetics
 - Biology
 - Chemical imbalance of the brain
 - Abnormalities in central nervous system

Risk Factors and Signs

- Psychosocial
 - Stressful life events
- Signs of mental illness in a young child may be quite different than in an older child or adult

Barriers to Seeking Treatment

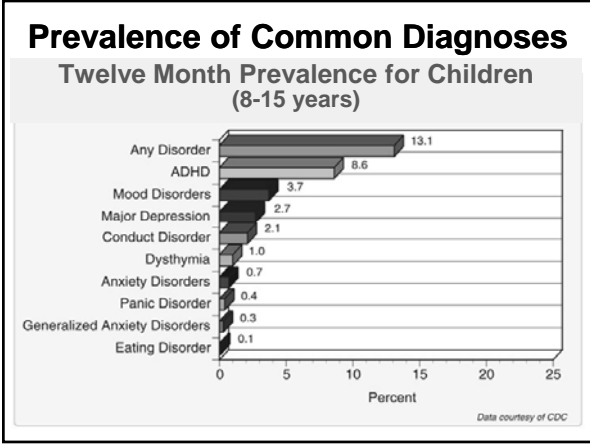
- Four out of five children needing mental health services do not receive them... Why?
 - Structural barriers
 - Barriers related to perceptions of mental health problems
 - Barriers related to perceptions about mental health services

Barriers to Seeking Treatment

- Untreated mental disorders can lead to school failure, family and peer relationship problems, substance abuse, violence, and even suicide

Common Disorders in Children and Adolescents

- Attention Deficit Hyperactivity Disorder (ADHD)
- Disruptive behavior disorders
- Anxiety disorders
- Mood disorders
- Suicide



ADHD

- **Most common**
 - **Affects 3 to 4 million in America**
- **Boys are 4 times more likely than girls to be diagnosed with ADHD**
- **Symptoms across two or more settings for long time (onset before age 7) causing significant impairment in functioning**

ADHD

- **Three subtypes:**
 - **Predominately hyperactive-impulsive**
 - **Predominantly inattentive**
 - **Combined hyperactive-impulsive and inattentive**
 - **Most children have this type**

ADHD Symptoms and Treatment

- **Impulsivity**
 - **Acts without thinking, blurts out answers in school, interrupts others, difficulty awaiting turn**
- **Hyperactivity**
 - **Always moving, talking, climbing**

ADHD Symptoms and Treatment

- **Inattention**
 - **Daydreams, easily sidetracked/distracted, does not seem to listen, difficulty organizing tasks, loses items, fails to finish work**
- **Treatment**
 - **Behavioral therapy, medication, and structure**

Child Behavioral Disorders

- **All kids misbehave at times**
- **A behavioral disorder is a pattern of aggressive, hostile, or disruptive behavior for more than 6 months**

Child Behavioral Disorders

- **Common types:**
 - **Conduct Disorder**
 - **Persistent pattern in which the basic rights of others and important social norms and rules are violated**

Child Behavioral Disorders

- **Oppositional Defiant Disorder**
 - **Pattern of negative, hostile, and defiant behavior without the more serious violations of basic rights of others**

Child Behavioral Disorders

- **Warning signs include:**
 - **Harming or threatening self, others, or pets**
 - **Damaging property**
 - **Lying or stealing**
 - **Not doing well in school or skipping**

Child Behavioral Disorders

- **Early smoking, drinking, or drug use**
- **Early sexual activity**
- **Frequent tantrums and arguments**
- **Consistent hostility towards authority figures**

Anxiety Disorders

- **Much of our anxiety is normal and needed**
- **Persistent, intense anxiety that disrupts daily routine is a mental health problem**

Anxiety Disorders

- **Most common types in children:**
 - **Generalized Anxiety Disorder**
 - **Obsessive-Compulsive Disorder**
 - **Separation Anxiety Disorder**
 - **Post-traumatic Stress Disorder (PTSD)**
 - **Social Phobia (Social Anxiety Disorder)**

Mood Disorders: Depression

- **Approximately 8% of 12-17year olds in U.S. experienced at least one major depressive episode last year**
 - **SAMHSA News Release, April 2011**
- **Girls are more likely than boys to experience depression**

Mood Disorders: Depression

- **Forms of depression**
 - **Major depressive disorder**
 - **Severe, disabling symptoms that interfere with daily activities such as eating, sleeping, working, school, pleasurable activities**

Mood Disorders: Depression

- **Dysthymic disorder**
 - **Milder symptoms, chronic**
 - **Average duration of dysthymic period in C and A is about four years**
- **Depression NOS**
 - **Some symptoms but not enough for diagnosis**

Mood Disorders: Depression

- **For children:**
 - **Pretend to be sick, refuse to go to school, cling to parent or worried parent may die, sulk, trouble at school, negative, grouchy, feel misunderstood, aggression**
- **Treatment**
 - **Medication with cognitive-behavioral therapy**

Mood Disorders: Bipolar Disorder

- **Sometimes called Manic-depressive Disorder**
- **Episodes of mania and depression**
 - **Unusual shifts in mood and energy**

Mood Disorders: Bipolar Disorder

- **Mania/Hypomania**
 - **Feel energetic, confident, and special**
 - **Engage in risky behaviors**
 - **Rapid or loud speech**
 - **Racing thoughts**

Mood Disorders: Bipolar Disorder

- **Early-onset bipolar disorder (symptoms appear in childhood) may be more severe than later onset**
 - **May have symptoms more often, switch moods more frequently, and have more mixed episodes**
 - **Both manic and depressive symptoms**

Mood Disorders: Bipolar Disorder

- **Treatment**
 - Medication to control symptoms and therapy

Suicide

- Evidence suggests that over 90% of children and adolescents that commit suicide have a mental disorder
 - Common mood disorder or anxiety disorder
- Third leading cause of death 15 - 24 year olds

Suicide

- Sixth leading cause of death 5-14 year olds
- Boys are about 4 times more likely to commit suicide than girls
 - Girls are twice as likely to attempt
- 4 out of 5 teens who attempt give clear warnings:
 - Direct or indirect threats

Suicide

- Verbal hints: “I won’t be around much longer”
- Putting affairs in order – giving away favorite possessions
- Sudden cheerfulness after period of depression
- Hallucinations or bizarre thoughts

Suicide: What Can You Do?

- Talk open and honest
 - Do you feel depressed or think about suicide? Listen.
- Let them know you care and want to help
- Give resource information or refer them to someone who can
- Alert key adults in child’s life

Suicide: What Can You Do?

- Seek professional help
- Trust your instincts, if situation is serious seek immediate help

Services

- **Public/private/faith-based**
- **Most services are community based and can include:**
 - **Outpatient (individual, group, family), in-home, case management, doctors, school-based, physician-medication**

Services

- **Residential services for severe needs**
 - **Time limited**
- **Hospitalization for psychiatric stabilization**
- **Providers include:**
 - **Psychiatrist, Psychologist, LCSW, LPC, MSW, MS, LMFT, and others**

Helping Children Deal with Disaster or Trauma

- **Children are sensitive and struggle to make sense of trauma**
- **Severe trauma can alter brain activity patterns in children that can lead to mental, emotional, and behavioral disorders**
- **Children’s reactions to trauma can be immediate or may appear much later**

Reaction to Disaster and Trauma

- **Influences on child’s reaction**
 - **Parents’ reaction**
 - **How much destruction or injury or death child is exposed to**
 - **Child’s age/developmental level**
 - **Prior experiences**

Signs to Watch for After Disaster or Trauma

- **Children**
 - **Regress to an earlier behavioral stage**
 - **Thumb sucking, bedwetting, baby talk in younger children**
 - **Older children may asked to be fed or dressed**

Signs to Watch for After Disaster or Trauma

- **Become afraid of strangers, animals, darkness, or “monsters”**
- **Cling to parent or teacher**
- **Become very attached to safe place**
- **Changes in eating and sleeping**
- **Unexplainable aches and pains**

Signs to Watch for After Disaster or Trauma

- Exhibit disobedience, speech difficulties, aggression, or withdrawal
- Tell exaggerated stories of event or talk about it repeatedly
 - Play may act out the event

Signs to Watch for After Disaster or Trauma

- Adolescents
 - Vague physical complaints and may abandon chores, schoolwork, and other responsibilities
 - May compete for attention from parents and teachers or withdraw

Signs to Watch for After Disaster or Trauma

- Become disruptive at home or in the classroom
- Experiment with high-risk behaviors such as alcohol use, drug use, self harm, or dangerous activities

Signs to Watch for After Disaster or Trauma

- Opinions of peers are very important and less concern about relating well with adults
- Older teens may experience feelings of helplessness and guilt because they are unable to assume adult responsibilities
 - May also deny extent of their emotional reaction to the trauma

How to Help

- Reassure children they are safe
- Provide children with opportunities to talk
- Answer questions at level child understands
- Admit you can't answer all their questions

How to Help

- Monitor adult conversations and media exposure
- Help children understand that a wide range of reactions is normal
- Encourage children to express their feelings to adults who can help them understand their emotions

How to Help

- **Help child identify good things such as heroic actions, assistance offered by others, and families working together**

Additional Information

- **National Alliance for the Mentally Ill**
– www.NAMI.org
- **American Academy of Pediatrics**
– www.aap.org
- **American Academy of Child and Adolescent Psychiatry**
– www.aacap.org

Additional Information

- **National Institute of Mental Health**
– www.nimh.nih.gov
- **Mental Health America**
– www.mentalhealthamerica.net
- **U.S. National Library of Medicine (Medline Plus)**
– www.nlm.nih.gov

Additional Information

- **Substance Abuse and Mental Health Services Administration**
– **1-877-SAMHSA-7 (1-877-726-4727)**
– www.samhsa.gov
- **Centers for Disease Control and Prevention**
– www.cdc.gov

Additional Information

- **The National Child Traumatic Stress Network**
– www.NCTSN.org

Contact Information

Gayla Caddell, MS
Child and Adolescent Resource Specialist for Mental Illness Services
Division of Mental Illness and Substance Abuse Services
Alabama Department of Mental Health
Gayla.Caddell@mh.alabama.gov