



SIMON FRASER
UNIVERSITY

Faculty of Health Sciences
Children's Health Policy Centre



December 2006

Mental Health and Developmental Disabilities in Children

A RESEARCH SUMMARY FROM THE
Children's Health Policy Centre

FACULTY OF HEALTH SCIENCES, SIMON FRASER UNIVERSITY

Our Research Reviews

In 2003, the BC Ministry of Children and Family Development (MCFD) made a long-term commitment to improving the mental health of children and youth in the province. The resulting five-year *Child and Youth Mental Health Plan* for BC takes a coordinated approach to strengthening prevention and treatment services, monitoring outcomes for children's mental health and enhancing public accountability for programs and services.

Our program supports the MCFD *Plan* by reviewing the best available research evidence on effective strategies for preventing and treating a variety of children's mental health problems, and by making recommendations to inform the development of related policies and services. Our full report on Mental Health and Developmental Disabilities in Children is available on our website at: www.childhealthpolicy.sfu.ca

Understanding Developmental Disabilities in Children and Youth

Developmental disabilities are conditions affecting a range of social and cognitive functions including communications, learning, and interpreting and responding to social cues. Specific examples include pervasive developmental disabilities (including autism and Asperger's disorder), mental retardation and fetal alcohol syndrome. Approximately 30 per cent of children with developmental disabilities also suffer from co-occurring mental disorders. Mental disorders are characterized by significant disturbances in behaviours, mood or thought processes with associated distress and impairment. Clinical diagnoses are made based on multiple reports from parents, teachers, health professionals and young people themselves. All types of mental disorders, including mood, anxiety and

If You Have Concerns About Your Child or Youth

The BC Ministry of Children and Family Development (MCFD) provides a wide range of direct clinical services and targeted community supports for children and youth at-risk or dealing with mental health problems, and for their families.

For more information, please contact your local MCFD office (listed in the Blue or Government Pages of the phone book) or visit: www.mcf.gov.bc.ca/mental_health/help.htm

To learn more about *BC's Child & Youth Mental Health Plan*, please visit: www.mcf.gov.bc.ca/mental_health

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psychotic disorders, can occur in children with developmental disabilities. Additionally, children with developmental disabilities have an increased vulnerability to mental health problems relative to typically developed children.

When possible, it is important to deal with underlying social or biological issues that may cause mental disorders and developmental disabilities to develop. While research to date suggests a biological origin for developmental disabilities, including specific genetic syndromes, it is important to consider how environmental factors can interact with biology as some children develop. Although it is not known why children with developmental disabilities are more vulnerable to mental disorders, a number of risk factors have been identified. These include negative social conditions, such as rejection and stigmatization, and limited coping skills.

Although we do not fully know what causes mental health problems in children and youth with developmental disabilities, we do know there are effective strategies for treating these conditions.

Treating Mental Health Problems in Children and Youth with Developmental Disabilities

Review Results

It is crucial that children and youth with established developmental disabilities get the care they need. But research shows that this is not always the case. Large studies in Canada and elsewhere have demonstrated that only about one in four young people with mental health problems (or 25%) currently receive specialized treatment services.

To reduce the overall number of children and youth who suffer from developmental disabilities and mental health problems, we must both treat children with existing problems and implement effective programs to prevent problems from occurring.

Our research summarized findings from relevant systematic reviews published between 1994 and 2005 on treating mental disorders in young people with developmental disabilities (ages 0-18). In total, 66 reviews were retrieved. Of these, 12 met our inclusion criteria. Most reviews focused on treating the underlying developmental disabilities in children with pervasive developmental disorders and mental retardation. No reviews specifically assessed treatments for Fetal Alcohol Syndrome or for co-existing mental disorders in children with developmental disabilities.



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- Rates of children impacted by developmental disabilities range from 0.3% for pervasive developmental disorders to 1% for mental retardation.
- Developmental disabilities are typically more stable over time while mental disorders tend to be relapsing or remitting.
- Some core deficits found in children and youth with developmental disabilities may be improved by using effective psychosocial treatments.
- Medication use should be limited to severe situations and should always include careful monitoring.

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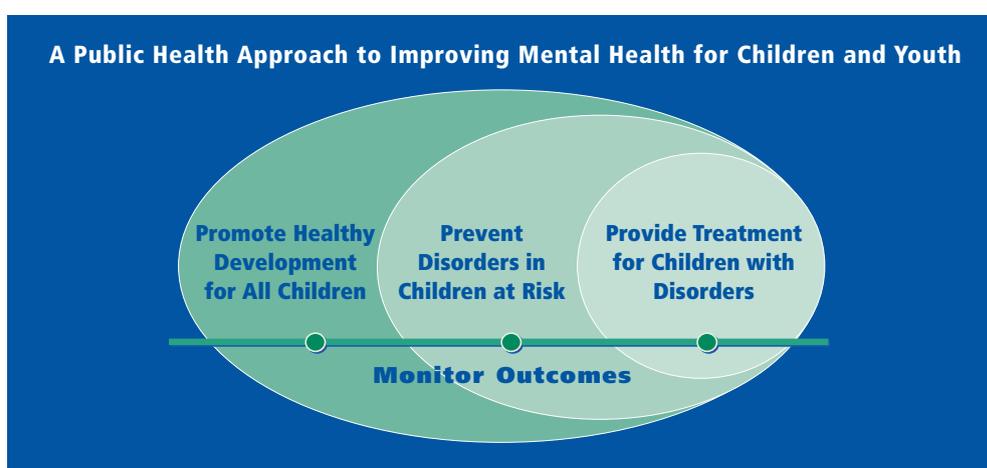
The Children's Health Policy Centre is part of the Faculty of Health Sciences at Simon Fraser University. We provide research, education and policy consultation services to build a broad public health strategy to improve the mental health and well-being of children and youth in British Columbia and Canada.

Effective Treatment

Some psychosocial interventions are effective in treating the core symptoms of pervasive developmental disorders. Parent-mediated, peer-mediated and behavioural interventions can produce some improvements in language and cognitive and behavioural functioning. Similarly, some psychosocial interventions are effective in improving functional abilities in children with mental retardation. Both behavioural and self-determination interventions may improve competencies such as social and daily living skills. Refer to our full report for a medication which may help reduce self-injurious behaviours among children with mental retardation. Medications should only be used with careful monitoring given the potential for side effects.

Recommendations from the Research

- Treatment intervention for mental health problems in children with developmental disabilities should be modeled after approaches supported by the research for specific mental disorders. For example, CBT approaches recommended for treating anxiety and depression can be modified and combined with psychosocial intervention for developmental disabilities.
- New research focusing on developmental disabilities and co-existing mental disorders is strongly needed.



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