

Stronger effort needed to prevent mental, emotional, and behavioral disorders in young people

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The federal government should make preventing mental, emotional, and behavioral disorders and promoting mental health in young people a national priority, says a new report from the National Research Council and Institute of Medicine. These disorders -- which include depression, anxiety, conduct disorder, and substance abuse -- are about as common as fractured limbs in children and adolescents. Collectively, they take a tremendous toll on the well-being of young people and their families, costing the U.S. an estimated \$247 billion annually, the report says.

Research has shown that a number of programs are effective at preventing these problems and promoting mental health, the report says. Such programs could be implemented more broadly, but currently there is no clear federal presence to lead these efforts. The White House should create an entity that can coordinate agency initiatives in this area, set public goals for prevention, and provide needed research and funding to achieve them, said the committee that wrote the report.

"There is a substantial gap between what is known about preventing mental, emotional, and behavioral disorders and what is actually being done," said Kenneth E. Warner, committee chair and dean of the University of Michigan School of Public Health. "It is no longer accurate to argue that these disorders can never be prevented. Many can. The nation is well-positioned to equip young people with the skills and habits needed to live healthy, happy, and productive lives in caring

relationships. But we need to develop the systems to deliver effective prevention programs to a far wider group of children and adolescents."

Most mental, emotional, and behavioral disorders have their roots in childhood and adolescence, the report notes. Among adults who have experienced these disorders, more than half report the onset as occurring in childhood or early adolescence. In any given year, an estimated 14 percent to 20 percent of young people have one of these disorders.

First symptoms typically occur two to four years before the onset of a full-blown disorder - creating a window of opportunity when preventive programs might make a difference, the report says. And some programs have shown effectiveness at preventing specific disorders in at-risk groups. For example, the Clarke Cognitive-Behavioral Prevention Intervention, which focuses on helping adolescents at risk for depression learn to cope with stress, has prevented episodes of major depression in several controlled experiments.

Other programs have demonstrated broader preventive effects in general populations of young people, the report says. Programs that can be offered in family or educational settings show particular promise in promoting mental health and addressing major risk factors.

One example of an effective school-based program is the Good Behavior Game, which divides elementary school classes into teams and reinforces desirable behaviors with rewards such as extra free time and other privileges. Studies have shown that the program significantly reduces aggressive and disruptive behavior during first grade. The one-year intervention also has benefits over the long term, lowering the students' risk of alcohol and drug abuse, as well as rates of suicidal thoughts and attempts. And it significantly reduces the likelihood that highly aggressive boys will be diagnosed with antisocial personality disorder as adults. Research has shown that programs that focus on enhancing social

and emotional skills can also improve students' academic performance, the report notes.

Still other programs improve children's mental health and behavior by enhancing parenting skills, the report says. The Positive Parenting Program, for example, uses a range of approaches, from a television series on how to handle common child-rearing problems to in-person skills training for parents struggling to handle children's aggressiveness or lack of cooperation. These methods have been shown to lower kids' disruptive behaviors, a positive change that persisted one year later.

The report recommends that the White House create an entity to lead a broad implementation of evidence-based prevention approaches and to direct research on interventions. The new leadership body should set public goals for preventing specific disorders and promoting mental health and provide the funding to achieve them. The departments of Education, Justice, and Health and Human Services should align their resources and programs with this strategy. These agencies should also fund state, county, and community efforts to implement and improve evidence-based programs. At the same time, the report cautions, federal and state agencies should not support programs that lack empirical evidence, even if they have community endorsement.

The committee also urged continued research to build understanding of what interventions work for whom and when, and how best to implement them. The National Institutes of Health should develop a comprehensive 10-year plan to research ways to promote mental health and prevent mental, emotional, and behavioral disorders in young people. In addition, agencies and foundations should establish equality in research funding between ways to prevent mental and behavioral disorders and ways to treat these problems, the report says; currently, the balance is weighted toward research on treatment.

The report also discusses screening programs that attempt to identify children with risk factors for mental, emotional, or behavioral disorders. Screening can be helpful for targeting interventions, but it should be used only if it meets certain criteria, including that the disorders to be prevented are a serious threat to mental health and that there is an effective intervention to address the risks or early symptoms. Parents should be given detailed information about the purpose and methods of screening, and the wishes of those who don't want their children included should be respected. Without community acceptance and sufficient capacity to respond to the needs identified, screening is of limited value, the committee noted. It added that approaches to connecting screening with specific interventions need to be tested.

Source: National Academy of Sciences

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