

Mental health disorders include all diagnosable emotional, behavioral, and mental illnesses. In children, symptoms of mental health disorders tend to be similar to feelings that every child experiences, such as sadness, anger, suspicion, excitement, withdrawal, and loneliness. The difference between a disorder and a normal feeling is the extent to which the feelings become so powerful as to overwhelm and interfere with the activities of normal life or cause the child to suffer (Murphey, Barry & Vaughn, 2013). Studies find that 50% of mental illnesses begin by the age of 14 (National Alliance on Mental Illness [NAMI], 2019).

OVERVIEW OF MENTAL HEALTH DISORDERS IN CHILDREN

In the United States, “about 20% of children suffer from a diagnosable mental illness during a given year. Further, nearly 5 million children and adolescents suffer from a serious mental illness (one that significantly interferes with their day-to-day life)” (WebMD, 2018b).

Biology and environment are the two main factors contributing to the onset of mental health disorders. Examples of biological factors that can contribute to the onset of a mental health disorder include genes, chemical imbalances throughout the body, and damage to the central nervous system (Mayo Clinic, 2019).

The Mayo Clinic (2019) lists the following as possible risk factors contributing to mental health disorders:

- Genetics (certain genes may increase risk of developing mental illness)
- Pre-natal exposure to toxins (such as

viruses, drugs, alcohol)

- Negative life experiences (such as witnessing or being the victim of physical or sexual abuse, loss of a loved one, drive-by shootings, muggings, or other disasters)
- Brain chemistry (hormonal imbalances can be affected by both life experiences and biological factors)

A few years ago, research began to examine the interaction between biological and environmental factors. This body of research focuses on how genetic predispositions to mental illness increase sensitivity to environmental factors. “Just as the absence of disease does not adequately define physical health, mental health consists of more than the absence of mental disorders” (Murphey, Barry & Vaughn, 2013, p.1). Researchers recognize mental health as falling along a continuum that fluctuates over time. Consequently, the onset of the mental illness is attributed to both factors, and if an individual is never exposed to an environmental trigger, or they do not have the genetic predisposition, they may never develop a mental disorder. There are a variety of diagnosable mental disorders, and whether the cause is attributed to biology, environment, or both depends on the type of disorder an individual presents (Murphey, Barry & Vaughn, 2013).

TYPES OF MENTAL HEALTH DISORDERS IN CHILDREN

“In the United States, about 1 in 6 children aged 3 to 17 years of age have one or more developmental or behavioral disabilities ...” (Centers for Disease Control and Prevention [CDC], 2019b). Some of the most common disorders in children include:

Anxiety Disorders

- Characterized by excessive fear, worry, or uneasiness
- An estimated one in eight children have an anxiety disorder
- Includes: generalized anxiety disorder, obsessive-compulsive disorder, panic disorder, post-traumatic stress disorder, separation anxiety disorder, social anxiety disorder, selective mutism, and phobias

(Anxiety and Depression Association of America [ADAA], n.d.)

Attention-deficit/Hyperactivity Disorder (ADHD)

- Inability to focus attention, impulsive, and easily distracted
- Occurs in approximately 9.4% of children aged 2-17

(CDC, 2018)

Autism

- Characterized by difficulty interacting and communicating with others
- Children are at increased risk for other mental health disorders
- Affects an average of 1 in every 59 children

(CDC, 2019a)

Bipolar Disorder

- Characterized by exaggerated mood swings, ranging from extreme highs (manic episode) to extreme lows (depression)
- Recurrent throughout life
- May be difficult to diagnose in children due to co-occurrence of anxiety disorders and ADHD
- One-third of the 3.4 million children and adolescents with depression in the U.S. may be experiencing the early onset of bipolar disorder

(Mental Health America, 2019)

Conduct Disorder

- A group of behavioral and emotional problems characterized by great difficulty following rules and behaving in a socially acceptable way
- Often linked with ADHD
- Can be an early sign of depression or bipolar disorder
- More common in boys

(MedlinePlus, 2019a)

Depression

- Marked by changes in emotions, motivation, physical well-being, and thoughts
- Affects up to 3% of children and 8% of teens
- More common in boys under age 10
- By age 16, more common in girls
- Higher risk if depression present in family history

(WebMD, 2018a)

Eating Disorders

- Anorexia is characterized by significant undereating out of an intense fear of becoming overweight
- Bulimia involves overeating and later purging the food through either vomiting or excessive use of laxatives to prevent weight gain
- Binge eating includes extreme overeating in a short time without purging, often resulting in obesity
- 59% of teens attempt to lose weight
- 90% of teens that develop an eating disorder are girls

(National Institute of Mental Health [NIMH], 2017; WebMD, 2017)

Oppositional Defiant Disorder (ODD)

- Marked by a “pattern of disobedient, hostile, and defiant behavior toward authority figures”
- May start as early as preschool; typically, by age 8
- Affects 20% of the school-age population
- More common in boys than girls

(MedlinePlus, 2019b)

Schizophrenia

- Psychotic periods involving hallucinations, withdrawal from others, and loss of contact with reality
- Difficult to diagnose in children under 12
- Affects more boys in childhood, but equally affects boys and girls by mid-teen years

(University of Rochester Medical Center, 2019)

Although this is not a comprehensive list, it demonstrates the wide variety of mental health disorders afflicting the nation’s youth. Without the proper treatment and diagnosis, a mental illness will become more difficult to treat and

may last throughout adulthood. In addition, it may cause challenges that prevent children from communicating effectively, which may inhibit their level of education (CDC, 2019b).

PREVENTION AND EARLY INTERVENTION PROGRAMS

The field of mental health focusing on children and adolescents has slowly emerged over the last few decades revealing a body of research about the most critical stages of social and cognitive development for young people. This has been accompanied by a number of effective programs focusing on early intervention and prevention of mental disorders in children and adolescents.

The Edna Bennett Pierce Prevention Research Center, located at Pennsylvania State University, provides research, technical assistance, and program development in prevention science including mental health prevention programs for youth. Since its inception in 1998, this center has become an international leader in youth prevention research and program development (PennState, 2017).

While the idea of preventing mental illness in young people is relatively new, there are some promising programs that appear to alleviate mental health risks.

PATHS

Promoting Alternative Thinking Strategies, also known as PATHS, is a “comprehensive in-school curriculum designed to enhance social competence and prevent or reduce behavior and emotional problems, with an emphasis on emotional awareness and self-regulation” (Child Trends, 2017). Findings indicate that PATHS improved social and emotional competence and decreased social withdrawal in pre-school children.

Fast Track

Fast Track is an intervention involving children at high risk for aggression and violence. The intervention begins in first grade and continues through tenth grade with a focus on school and family risk factors, including communication between parents and schools. The most recent

results found that at age 25, those who were in the program “are happier, have fewer psychiatric and substance abuse problems, are less likely to have risky sex, and are arrested less often for severe violence and drug-related crimes” than those in the control group (Child Trends, 2015).

Big Brothers Big Sisters of America (BBBSA)

The popular BBBSA program has also been found to be effective for preventing various mental health illnesses. The BBBSA program is focused on making one-on-one matches between child and mentor through a school or community based program. Children who participated in this mentoring program reported that they were less likely than their peers to engage in fighting and violent behaviors and to skip school. These children also reported that they perceived their family relationships more positively (BBBSA, 2019).

CODIP

The **Children of Divorce Intervention Project (CODIP)** attempts to alleviate the connection between mental health problems and children of divorced parents. This program equips children whose parents have begun the divorce process with a supportive outlet to discuss the divorce. It counters any unrealistic perceptions or beliefs children may have about divorce, and builds problem solving and adaptive coping skills (Children’s Institute, n.d.).

Mindfulness Interventions

“In many schools, mindfulness practices are used to address students’ anxiety and depression, as well as to help them build coping skills and positive mindsets” (Gutierrez, Krachman, Scherer, West, & Gabrieli, 2019, p.5). While there are many definitions of mindfulness, in essence it is “the practice of being aware of your body, mind, and feelings in the present moment, thought to create a feeling of calm” (Cambridge Dictionary quoted in Moore, 2019).

There are a variety of ways to teach mindfulness in K-12 schools, all of which include “focused attention, social competencies, and emotional self-regulation” (Meiklejohn, et al. 2012, p.10).

While the length and frequency of programs varies according to the specific curricula, they all generally target “awareness of inner/outer experiences [and] include: focused attention on breath and sensory experiences; awareness of thoughts and emotions; movement practices; and caring or kindness practices” (Meiklejohn, et al. 2012,p.10).

Research into the effectiveness of Mindfulness interventions in a variety of settings has exploded in recent years. There were 842 journal publications on the topic of Mindfulness in 2018 alone (American Mindfulness Research Association, 2019). One review of 33 independent studies in which a total of 3,666 children and adolescents participated in mindfulness-based interventions concluded that significant positive effects were demonstrated for the outcome categories of:

- Mindfulness
- Executive functioning
- Attention
- Depression
- Anxiety/stress
- Negatives behaviors

(Dunning, et al., 2019).

TREATMENT

One of the most popular forms of treatment for mental health disorders is psychotherapy. There are many forms of psychotherapy but the main goal is to help individuals understand their illness and teach them strategies to deal with stress and unhealthy thoughts and behaviors.

Cognitive Behavior Therapy (CBT) is one of the most effective psychotherapies for children and adolescents. It requires active participation by the therapist and the patient in order to identify distorted or unhelpful thinking patterns, recognize and change inaccurate beliefs, relate to others in more positive ways, and change behaviors accordingly. CBT has been proven to be an effective long term treatment for depression and anxiety disorders in children and adolescents (American Academy of Child & Adolescent Psychiatry [AACAP], 2019).

Dialectical Behavior Therapy (DBT) is often used “to treat older adolescents who have chronic suicidal feelings/thoughts [or] engage in intentionally self-harmful behaviors” (AACAP, 2019). In a combination of group and individual counseling sessions, the teen is encouraged to take responsibility for his/her problems and learn to identify how they work through conflict and negative emotions (AACAP, 2019).

Family Therapy is another type of psychotherapy implemented in treating youth mental health disorders. Family Therapy operates under the assumption that a patient’s relationship with his/her family is important to successfully manage a mental health disorder. Family members are expected to attend sessions to work on improving family relations. In children and adolescents, Family Therapy has shown to be effective in treating drug and alcohol abuse, behavior issues, and eating disorders (AACAP, 2019; Society of Clinical Child & Adolescent Psychology [SSCAP], 2017).

Play therapy is used exclusively with children, usually ages 3-12, and involves the use of toys and games to help a child identify and talk about his or her feelings, as well as establish communication with a therapist. A therapist can sometimes better understand a child's problems by watching how he or she plays. Play therapy has been used to treat behavioral problems such as anger management as well as behavioral disorders such as conduct disorders, anxiety, depression, and ADHD (Association for Play Therapy, n.d.).

In addition to psychosocial therapies, children diagnosed with a mental health disorder may also be prescribed medications to reduce and help control the symptoms of the mental disorder. Whether or not a physician prescribes medication depends on the severity and type of mental disorder (NIMH, 2016).

LOCAL PROGRAMS

In the San Antonio area, a wide variety of hospitals, university-based programs, non-profit agencies, and religious institutions provide counseling services for children experiencing mental health issues, often on a

sliding scale basis and for Medicaid and Medicare patients. The Network of Care for Behavioral Health (n.d.) lists a multitude of services that provide mental health care to children and families. The following lists facilities found on the website as well as known care providers (not an exhaustive list):

- *Avalon Social Services* offers in-office and in-home services (Medicaid)
- *Baptist Child & Family Services (BCFS)* – STAR Program youth ages 0-17 and their families (free)
- *Center for Health Care Services* - early childhood intervention, ages 3-17 (sliding scale)
- *CentroMed or El Centro del Barrio* (sliding fee scale)
- *Children's Advocacy Center of Comal County* provides a child-friendly, non-institutional forensic interview to children that allege abuse including counseling/ treatment (New Braunfels)
- *Children's Bereavement Center* (n.d.) provides outpatient mental health counseling and therapy for children who have experienced a loss
- *Clarity Child Guidance Center* (inpatient, outpatient, & psychology services for children and adolescents) (sliding scale)
- *ChildSafe* provides counseling to children and non-offending family members dealing with sexual abuse
- *Communicare Health Centers* (various locations) provides behavioral health services (Medicaid & Medicare, sliding scale)
- *Communities in Schools of San Antonio (CIS-SA)* provides family and child counseling at no charge for students enrolled in 11 local school districts (free)
- *Connections Individual & Family Services* provides emergency shelter and counselling

- to youth ages 5-17 (no fees) (New Braunfels)
- *Daughters of Charity* (various locations) provides crisis intervention (free)
- *Ecumenical Center for Religion and Health* (sliding scale)
- *Family Service Association* provides in-home and office-based counseling for children and families (sliding scale)
- *Family Violence Prevention Services* includes specialized services for homeless children and children exposed to family violence (no fee)
- *Hope Hospice Children's Grief Program* provides support groups, a variety of grief camps and retreats, and counseling for children ages 3-17 and their parents/ guardians who are grieving the death of a loved one (no fees)(New Braunfels)
- *Jewish Family and Children's Service* includes specialized services for homeless children (low or no charge)
- *JOVEN-* focuses on prevention in at-risk youth (free)
- *Methodist Healthcare Ministries* (n.d.) provides a variety of community counseling services on a sliding scale (various locations)
- *Omni Layne Counseling* provides counseling, therapy, and in-home counseling to youth, adults, & families (Medicare, Medicaid, and most insurances)
- *RecoveryWerks!* Provides substance abuse counseling for teens and their families free of charge (Canyon Lake)
- *Roy Maas' Youth Alternatives (RMYA) Counseling Center* provides services to youth and families in crisis (free)
- *The Rape Crisis Center* (n.d.) (free) includes Play Therapy
- *St. PJ's Home* provides services to children in residence as well as the community (sliding scale)

REFERENCES

- American Academy of Child & Adolescent Psychiatry (AACAP). (2019). *Psychotherapies for children and adolescents: Different Types*. Retrieved from https://www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/FFF-Guide/Psychotherapies-For-Children-And-Adolescents-086.aspx
- American Mindfulness Research Association. (2019). *AMRA resources and services*. Retrieved from <https://goamra.org/resources/>
- Anxiety and Depression Association of America (ADAA). (n.d.). *Children and teens*. Retrieved July 2, 2019, from <https://www.adaa.org/living-with-anxiety/children>
- Association for Play Therapy. (n.d.). *Why play therapy?* Retrieved July 2, 2019 from <https://www.a4pt.org/page/WhyPlayTherapy>
- Big Brothers Big Sisters of America (BBBSA). (2019). *2018 Big Brothers Big Sisters of America Annual Impact Report*. Retrieved from <https://www.bbbs.org/wp-content/uploads/2018-BBBSA-Annual-Impact-Report.pdf>
- Centers for Disease Control and Prevention (CDC). (2018). *Attention-deficit/hyperactivity disorder (ADHD)*. Retrieved from <https://www.cdc.gov/ncbddd/adhd/data.html>
- Centers for Disease Control and Prevention (CDC). (2019a). *Autism spectrum disorders (ASD): Data & statistics on Autism spectrum disorders*. Retrieved from <https://www.cdc.gov/ncbddd/autism/data.html>
- Centers for Disease Control and Prevention (CDC). (2019b). *Child development: Developmental monitoring and screening*. Retrieved from <https://www.cdc.gov/ncbddd/childdevelopment/screening.html>
- Child Trends. (2015). *Fast track*. Retrieved from <http://www.childtrends.org/programs/fast-track-prevention-project/>
- Child Trends. (2017). *Promoting alternative thinking strategies (PATHS) for preschool*. Retrieved from <http://www.childtrends.org/programs/promoting-alternative-thinking-strategies-paths-for-preschool/>
- Children's Bereavement Center of South Texas. (n.d.). *What we do*. Retrieved July 2, 2019 from <https://cbcst.org/what-we-do/>
- Children's Institute. (n.d.) *Children of divorce intervention program (CODIP)*. Retrieved July 2, 2019, from <https://www.childrensinstitute.net/programs-and-services/codip>
- Dunning, D., Griffiths, K., Kuyken, W., Crane, C., Foulkes, L., Parker, J., Dalgleish, T. (2019). *Research review: The effects of mindfulness-based interventions on cognition and mental health in children and adolescents – a meta-analysis of randomized controlled trials*. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/30345511>
- Family Violence Prevention Services (FVPS). (n.d.). *Our services*. Retrieved July 2, 2019, from <https://fvps.org/our-services/>
- Gutierrez, A., Krachman, S., Scherer, E., West, M., and Gabrieli, J. (2019). *Mindfulness in the classroom: Learning from a school-based mindfulness intervention through the Boston Charter Research Collaborative*. Retrieved from <https://www.transformingeducation.org/wp-content/uploads/2019/01/2019-BCRC-Mindfulness-Brief.pdf>
- Haven for Hope. (n.d.). *Our partners*. Retrieved July 2, 2019 from <https://www.havenforhope.org/OurPartners>
- Mayo Clinic. (2019). *Mental illness: Causes & risk factors*. Retrieved from <http://www.mayoclinic.org/diseases-conditions/mental-illness/basics/definition/con-20033813>
- MedlinePlus. (2019a). *Conduct disorder*. Retrieved from <https://medlineplus.gov/ency/article/000919.htm>
- MedlinePlus. (2019b). *Oppositional defiant disorder*. Retrieved from <https://medlineplus.gov/ency/article/001537.htm>
- Meiklejohn, J., Phillips, C., Freedman, M., Griffin, M., Biegel, G., Roach, A., ...Saltzman, A. (2012). *Integrating mindfulness training into K-12 education: Fostering the resilience of teachers and students*. Retrieved from <http://www.mindfuleducation.org/wp-content/uploads/2015/01/IMEK-12-ARTICLE-IN-JOURNAL-MINDFULNESS-ONLINE-VERSION-1.pdf>
- Mental Health America. (2019). *Bipolar disorder in children*. Retrieved from <http://www.mentalhealthamerica.net/conditions/bipolar-disorder-children>
- Methodist Healthcare Ministries (MHM). (n.d.). *Services*. Retrieved July 2, 2019, from <http://www.mhm.org/services>
- Moore, C. (2019). *What is mindfulness? Definition + benefits (incl psychology)*. Retrieved from <https://positivepsychology.com/what-is-mindfulness/>
- Murphey, D., Barry, M., & Vaughn, B. (2013). *Adolescent health highlight: Mental health disorders*. Retrieved from http://www.childtrends.org/wp-content/uploads/2013/03/Child_Trends-2013_01_01_AHH_MentalDisordersI.pdf
- National Alliance on Mental Illness (NAMI). (2019). *Mental health facts: Children & teens*. Retrieved from <https://www.nami.org/NAMI/media/NAMI-Media/Infographics/Children-MH-Facts-NAMI.pdf>
- National Institute of Mental Health (NIMH). (2016). *Mental health medications*. Retrieved from <https://www.nimh.nih.gov/health/topics/mental-health-medications/index.shtml>
- National Institute of Mental Health (NIMH). (2017). *Eating disorders*. Retrieved from <https://www.nimh.nih.gov/health/statistics/prevalence/eating-disorders-among-children.shtml>
- Network of Care for Behavioral Health. (n.d.). *Bexar County*. Retrieved July 2, 2019, from <http://bexar.tx.networkofcare.org/aging/services/keyword.aspx?k=counseling&a=Bexar&z>
- PennState. (2017). *About us*. Retrieved from <http://prevention.psu.edu/pages/about-us>
- The Rape Crisis Center. (n.d.). *Services*. Retrieved July 2, 2019 from <http://rapecrisis.com/counseling/>
- Society of Clinical Child & Adolescent Psychology (SCCAP). (2017). *Family therapy*. Retrieved from <https://effectivechildtherapy.org/therapies/what-is-family-therapy/>
- University of Rochester Medical Center. (2019). *Schizophrenia in children*. Retrieved from <https://www.urmc.rochester.edu/encyclopedia/content.aspx?contenttypeid=90&contentid=P02581>
- WebMD (2017). *Understanding eating disorders in teens*. Retrieved from <https://www.webmd.com/mental-health/eating-disorders/understanding-eating-disorders-teens#1>
- WebMD. (2018a). *Depression in children*. Retrieved from <http://www.webmd.com/depression/guide/depression-children#1>
- WebMD. (2018b). *Mental illness in children*. Retrieved from <http://www.webmd.com/anxiety-panic/mental-health-illness-in-children>