Epidemiology and Public Health in Child and Adolescent Psychiatry

SYMPOSIUM TITLE: AACAMH symposium
EPIDEMIOLOGY AND DETECTION OF CHILD AND ADOLESCENT MENTAL HEALTH PROBLEMS ACROSS FOUR REGIONS OF AFRICA

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Objectives:

Almost 90% of the world's children and adolescents live in low resource settings where they constitute over half of the population. Unfortunately, despite the large numbers and proportion of children and adolescents in these settings, there is very little evidence available to policy makers to support the development of services due to a lack of epidemiological data that could inform policy and service provision for Child and Adolescent Mental Health (CAMH). CAMH Mental health problems are also poorly recognised by health professionals in this context.   This symposium brings to the fore the epidemiology and state of recognition of CAMH problems across four African countries representing the four geographical regions of the continent. Most of these are the first CAMH surveys of their kind in their respective countries.

Methods:

The objectives, methodology, results and implications for advocacy, policy development and implementation of studies on CAMH epidemiology and recognition carried out in Egypt, Ghana, Tanzania and Rwanda are presented.

Results:

The first presentation describes the problem of substance use among school adolescents in Egypt, a north African Country. The second presents data on the prevalence, patterns and social determinants of mental disorders and cognitive functioning among children and adolescents in an urban community in Ghana, West Africa. The next two are hospital based studies; one describing mental health problems among children and adolescents attending a tertiary health facility in Tanzania, and the other focusing on the recognition of mental health problems among child health care workers in Rwanda.

Conclusions:

The much-needed survey data to drive CAMH policy, advocacy, service development and implementation in Africa has started to trickle in. There is a need for this to be sustained.

Prevalence Updates of Substance Use Among Egyptian Adolescents

Presenter: Dr. Iman Gaber (email: dr_imangaber@yahoo.com)

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Introduction: Egypt is one of the important developing countries in the Middle East with 100 million populations, 33% below the age of 18. Studies show increase rate of substance use in young people.

Methodology: A socio-demographic questionnaire designed by the researchers was used to collect socio-demographic data from students in 3 governorates in Egypt as follows: Cairo, Menoufeya and Assiut . Also, children completed the self-report Arabic versions of The Strengths and Difficulties Questionnaire (SDQ), which was used as a general screener, and the diagnosis confirmed by experienced psychiatrists using DSM V criteria.

Results: A total of 10648 students participated in the study from 134 high schools. Most of the students started substance use at an age between 11 and 14 years old. The most commonly used substance was Nicotine (life-time prevalence 9%, 12-month prevalence 4.9%; last month prevalence 2.4%). This was followed by Benzodiazepines (lifetime prevalence 5.1%), Alcohol (lifetime 3.6%) and Organic Solvents (lifetime 3.1%). The most commonly used during the last 12 months was Alcohol (2.9%) followed by Organic Solvents (2.7%) and Cannabis (2.6%). The prevalence of the regular use of any substance was 1.5%, while the prevalence of the dependence syndrome was 0.9% (excluding nicotine dependence). The prevalence of intake, regular use and dependence were all higher among males (0.82% versus 0.35% among female students).

Conclusions: Substance use among adolescents is a significant problem among Egyptian adolescents. There is a need for urgent interventions by relevant stakeholders to prevent long term disability of youths in this context.

A Two-Stage Community Study of The Prevalence and Correlates of Mental Disorders and Cognitive Functioning of Children and Adolescents in Kumasi Ghana

Presenter: Dr. Kwabena Kusi-Mensah (email: kkusimensah@yahoo.com)

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Objectives:

This study assesses the prevalence, pattern and correlates of mental disorders and cognitive function among children and adolescents in an urban community in Kumasi, Ghana.

Methods:

This was a cross-sectional community-based epidemiological survey of 672 children aged 6 – 17 years. Mental disorders were diagnosed with the Kiddie- Schedule of Affective Disorders and Schizophrenia (K-SADS-PL DSM 5). Cognitive function was assessed using the Raven's Standard Progressive Matrices.

Results: Life-time prevalence was 30.4%, and current prevalence was 18.6%, with anxiety-related disorders being the commonest. On multivariate analysis, no active reading habit (OR 2.86, 95% CI- 1.01 – 9.3) being in the 3rd wealth quintile (OR 12.5; 95% CI- 1.39- 274.0) or 4th wealth quintile vs highest quintile (OR 8.93; 95% CI- 1.16 – 10.5), and primary school children without caregiver supervision of homework (OR 3.54; 95% CI- 1.16- 10.5) all had greater odds of having a mental disorder. Further, age, type of religion, reading habit, internet access, being in the highest wealth quintile, and repeating a class ($p < 0.005$) were independently predictive of cognitive functioning.

Conclusions: This study showed the prevalence in Ghana to be comparable to the literature. It further showed that poverty-related factors correlated with childhood mental disorders and cognitive functioning.

Prevalence and patterns of child mental health problems in a tertiary health facility in Dodoma, Tanzania

Presenter: Dr Gema Simbee

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Background: Research on child and adolescent mental disorders in Tanzania is scarce. This study aimed to determine the magnitude and patterns of neuropsychiatric morbidity among children and young persons at a tertiary referral facility in Tanzania.

Methodology: A cross sectional study was conducted at the CAMH clinic of a tertiary referral facility, in Dodoma. Two groups of participants were recruited: 354 children/young persons aged 6-24 years and their caregivers were recruited consecutively from clinic attenders. The interview instruments included a custom-designed Socio-demographic Questionnaire, the WHO Modified Encounter Form, the Kiddie Schedule for Affective Disorders and Schizophrenia Present and Lifetime version, DSM 5, 2016 (K-SADS-PL DSM 5, 2016), the Children Global Assessment Scale (C-GAS), Modified Patients Assessment Care for Chronic Conditions (PACIC) and Modified Assessment of Chronic Illness Care for Mental Illness (ACIC).

Results: The most common conditions in these CAMH clinical attenders was epilepsy (56.5%), Intellectual Disability (17.5%), schizophrenia (16.4%), psychosis due to general medical condition (13.6%) and depression (10.2%); with 45% comorbidity. Parents were the main care initiators (89.0%); 47.0% used the non-medical care pathways in their first contact of care whereas 15.0% went directly to the tertiary facility.

Conclusion: Concerted efforts aiming to promote public awareness and services utilization are urgently required; as well as effective integration of CAMH services into district and primary care clinics.

Knowledge and Attitudes in Relation to Child and Adolescent Mental Health Among Doctors and Nurses Working in Paediatric Units at Tertiary Health Facilities in Rwanda

Presenter: Dr. Athanase Hategekimana

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Background: Mental health problems though common among paediatric patients are often not recognized by health professionals. There is a dearth of research about the recognition of mental health problems among paediatric clinicians in Low- and Middle-Income countries Like Rwanda.

Methodology: This was a cross-sectional study conducted in 3 of 4 national referral hospitals offering tertiary healthcare services in Rwanda. A total of 155 nurses and 48 doctors completed a questionnaire to assess their general child and adolescent mental health knowledge as well as knowledge specific to a paediatric setting, their attributions and stigmatizing attitudes.

Results: The response rate was 75%. The analysis showed that 33 (21.9%) nurses and 3 (6%) doctors (p=0.017) did not know about other modalities of treatment for mental illness aside medications. A third of nurses (37.4 %) and 75% of doctors (p<0.001) also believed that education about mental illness should focus on mother (caregiver) only, rather than on the child or adolescent. Being a nurse was identified as predictor of insufficient knowledge.

 With respect to attitudes, 49 (32.7%) nurses and 6 (13%) doctors (p=0.041) believed that adolescents with psychotic illness were very dangerous.   Also, 50 (33.1%) nurses and 2 (4.2%) doctors (p<0.001) did not believe that all health care providers have a responsibility to identify and or treat children and adolescent with mental illness. Being a nurse, insufficient knowledge of CAMH, and a shorter length of working experience were the independent predictors of negative attitudes.

Conclusion: The study highlights that doctors and nurses in Rwanda had insufficient knowledge and negative attitudes about Child and Adolescent Mental Health. Urgent intervention is needed to ensure that mental health is promoted in paediatric settings in Rwanda.