

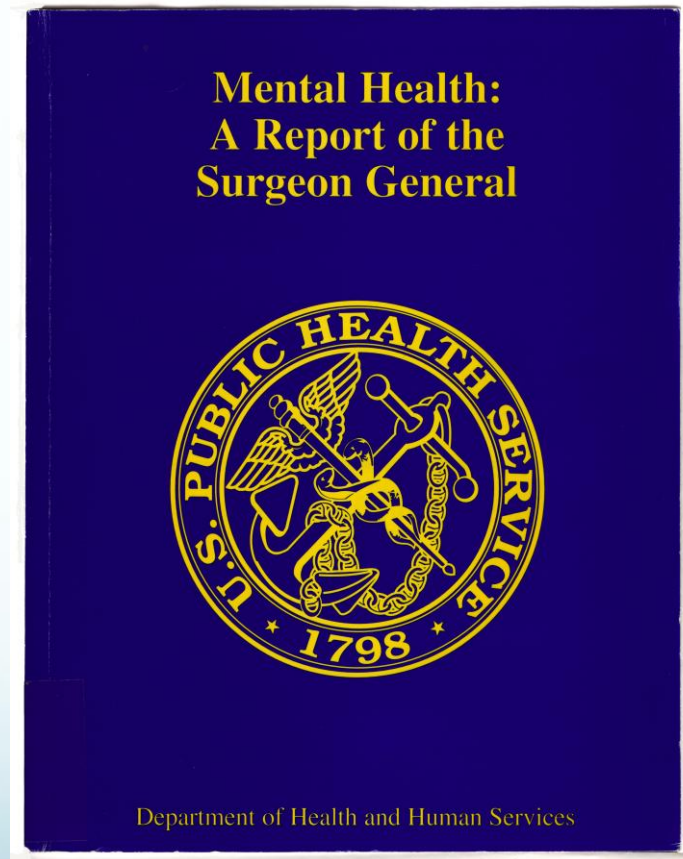


U.S. National Data on Prevalence of Mental Disorders in Children

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Mental disorders and mental health problems appear in families of all social classes and of all backgrounds. No one is immune.



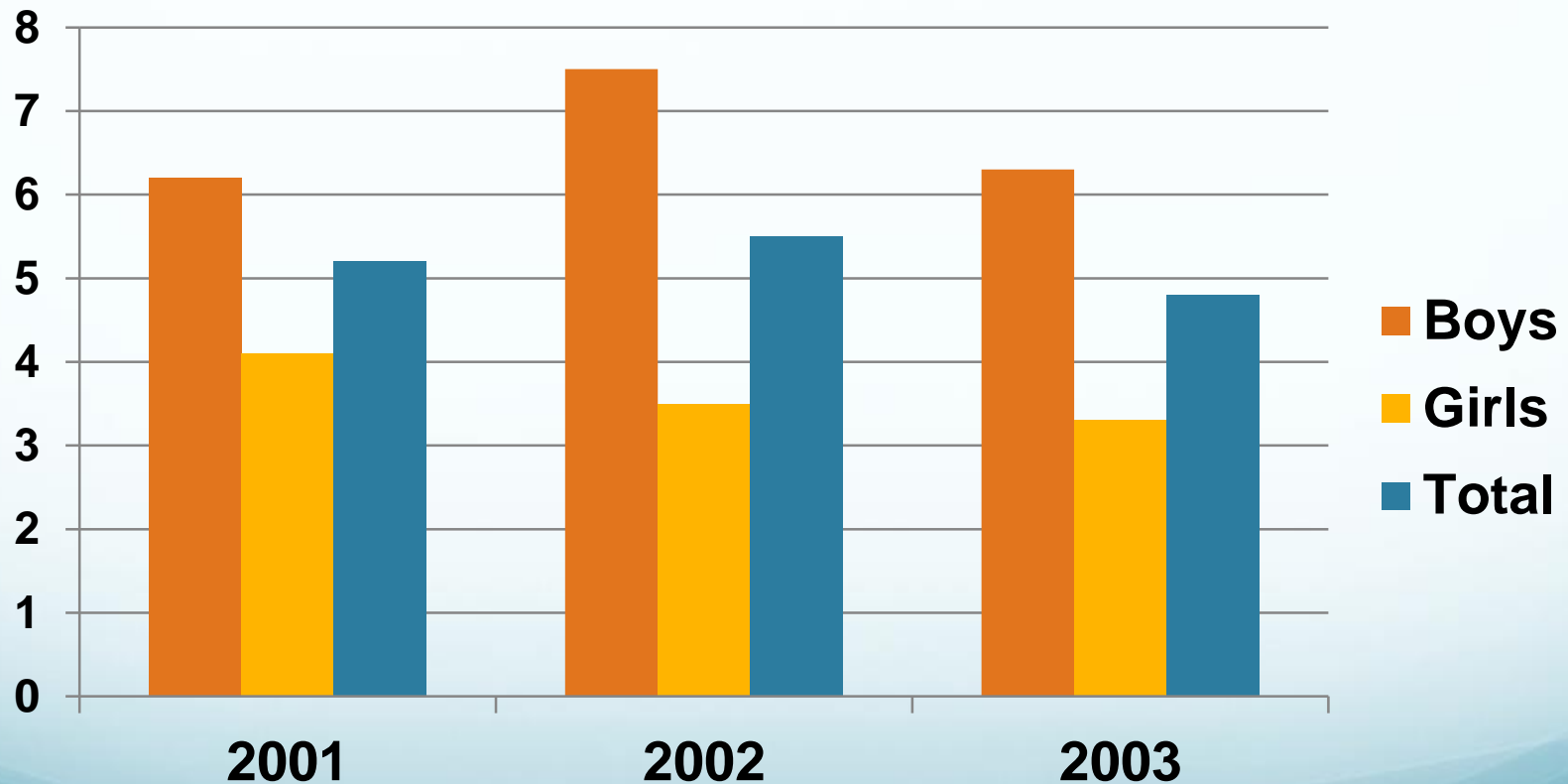
NIMH Initiatives in Child Mental Health Epidemiology

- **Included a parental dimensional rating scale of child mental health in National Health Interview Survey (NHIS)**
- **Added a structured diagnostic interview to the National Health and Nutrition Examination Survey (NHANES)**
- **Extended the National Comorbidity Survey-Replication (NCS-R) and the National Survey of American Life to Adolescents (NCS-A)**

Serious Emotional Disorder: National Health Interview Surveys

- Annual household survey of a nationally representative sample
- One adult and one child (ages 4-17) per household
- Sample sizes:
2001 = 10,367; 2002 = 9,512; 2003 = 9,399
- Strength and Difficulties Questionnaire (SDQ)(Goodman et al, 1997)

% U.S. Children with Severe Difficulties in Emotional or Behavioral Functioning: National Health Interview Survey



Simpson et al, 2003

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Prevalence and Treatment of Mental Disorders among US Children in the 2001–2004 NHANES

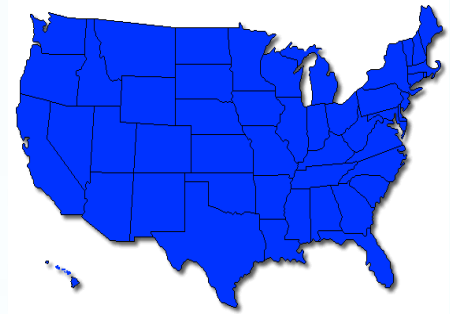
Kathleen Ries Merikangas, Jian-Ping He, Debra Brody, Prudence W.
Fisher, Karen Bourdon and Doreen S. Koretz

Published online Dec 14, 2009

NHANES Survey Methodology

- **Sample**
 - ✓ Mobile examination centers of 2001-2004 NHANES
 - ✓ Nationally representative probability sample of US
 - ✓ Complex, stratified, multistage, probability cluster design
- **Initial In-person Interview**
 - ✓ Computer-Assisted Personal Interview (CAPI) administered by trained interviewers
 - ✓ Diagnostic Interview for Children (DISC) (*Shaffer et al, 1996*)
- **Medical Examination Center Examination**
 - ✓ Administered by a physician; medical and health technicians; and dietary and health interviewers
- **Follow-up Questionnaires**
 - ✓ Telephone interview with survey staff using Computer-Assisted Telephone Interview (CATI) and a food frequency questionnaire

NHANES Sample



Informant	Age	Total N
Parents	8-15	3,082
Youths	8-19	8,447

Lifetime Prevalence of Mental Disorders in U.S. Adolescents: Results from the National Comorbidity Survey Replication– Adolescent Supplement (NCS-A)

Kathleen Ries Merikangas, Ph.D., Jian-ping He, M.Sc., Marcy Burstein, Ph.D.,
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Methods: NCS-A

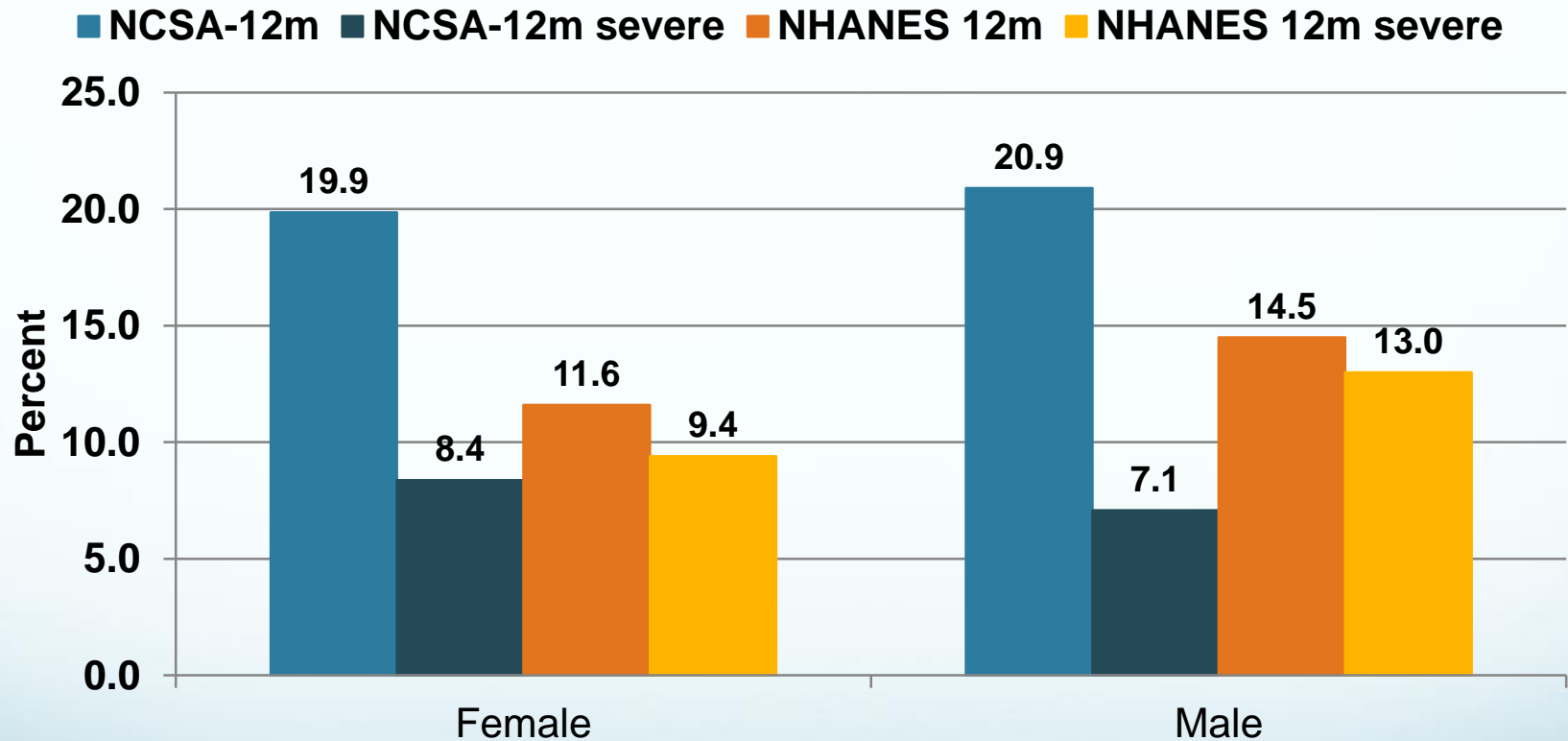
- Dual household-school sampling frame
- A modified version of the World Health Organization (WHO) Composite International Diagnostic Interview Version 3.0 (CIDI)
- Parent/surrogate self administered questionnaire on adolescent mental health

NCS-A Sample



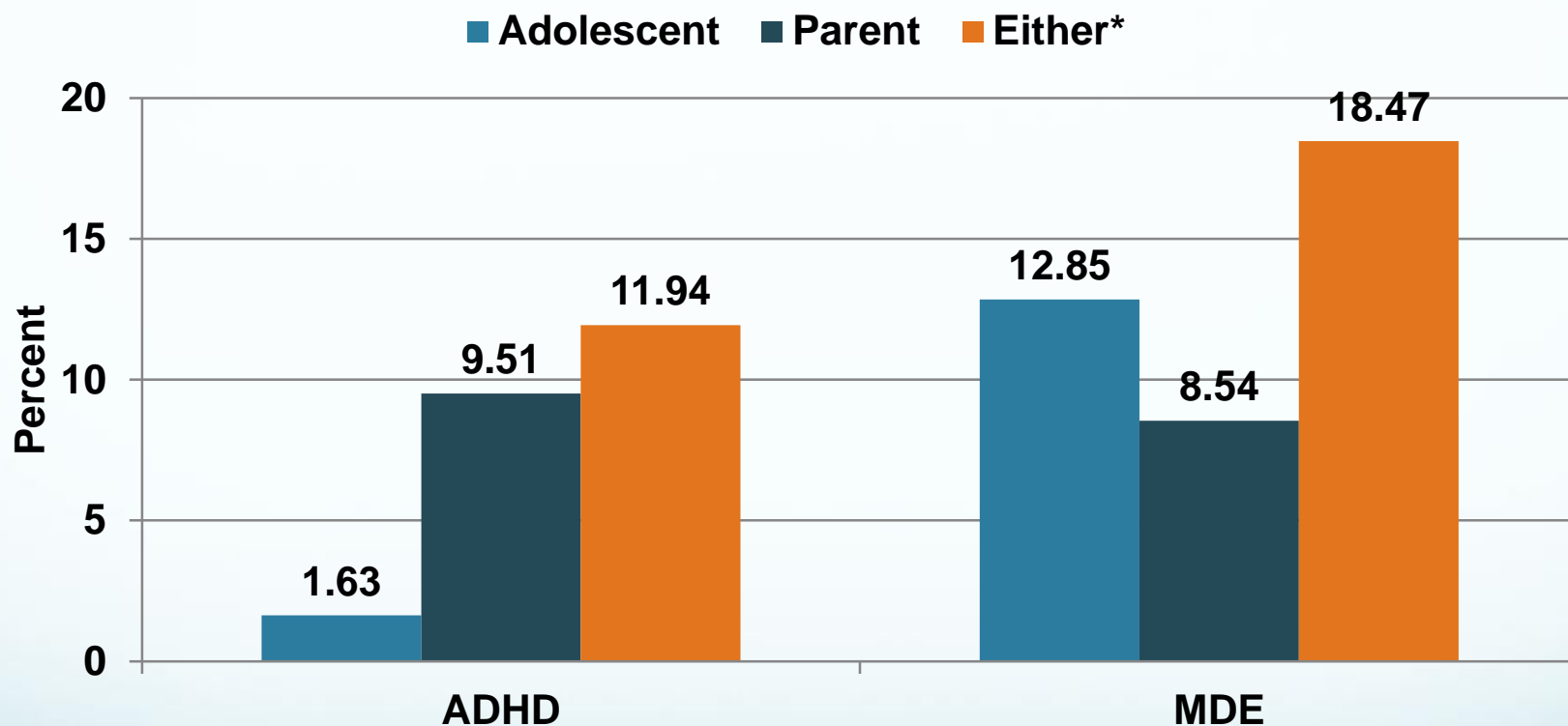
Informant	Age	Total N
Parent	13-18	6,491
Youths	13-18	10,123

Sex-Specific Prevalence of 12-month Mental Disorders by Sex, NCS-A (13-18y) and NHANES (8-15y)



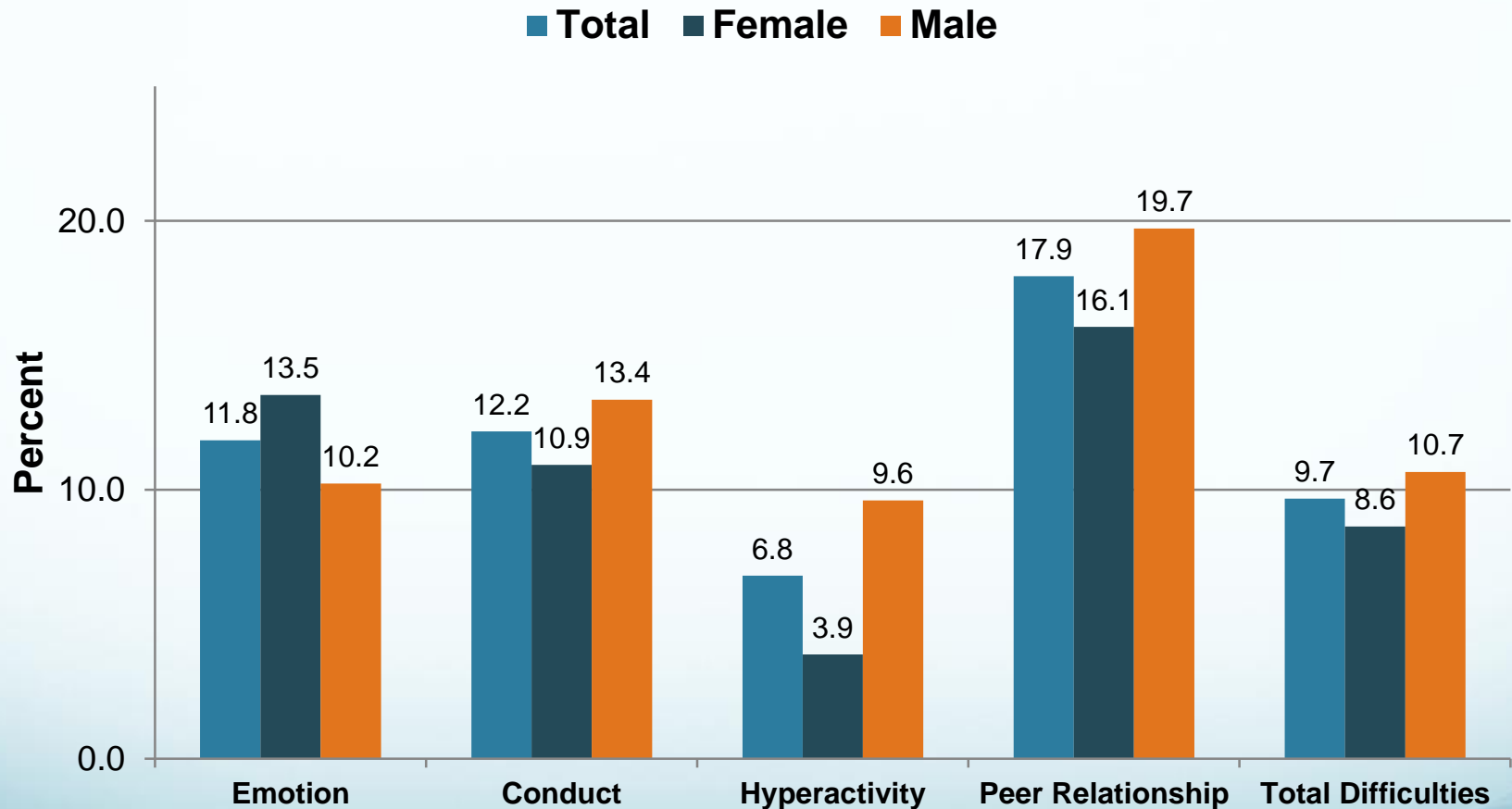
*Any Mental Disorder included anxiety (GAD/Panic), mood (MDD/Dysthymia), ADHD, Conduct, Eating

Lifetime Prevalence of ADHD and MDE by Different Informants, NCS-A

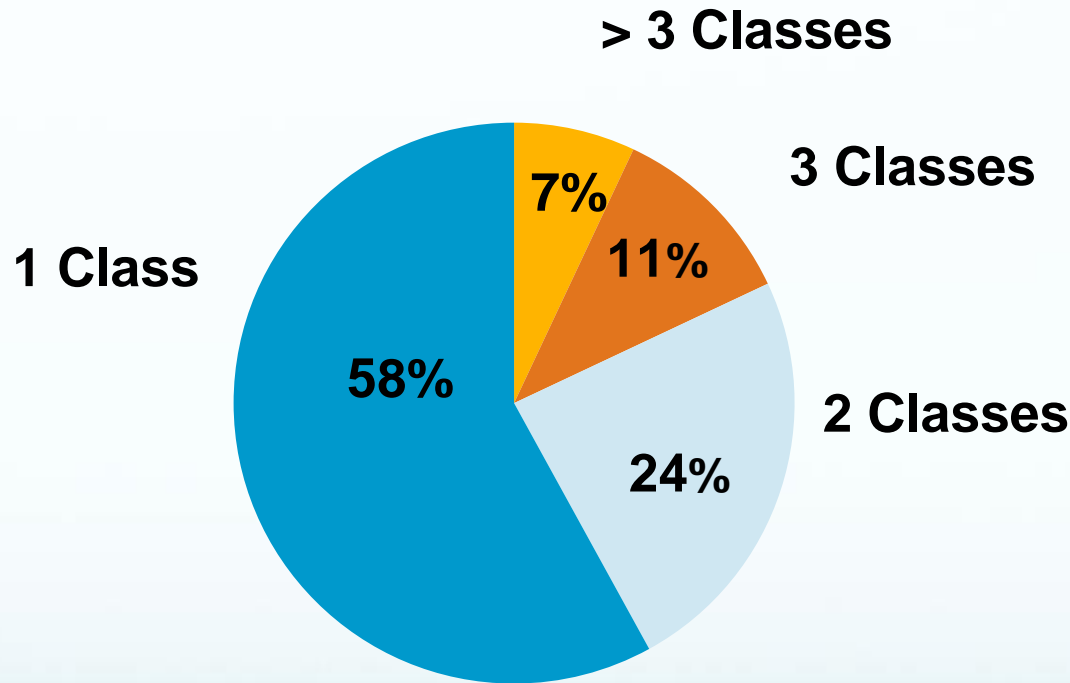


*Adolescent and parent's reports were combined at symptom level using 'OR' rule.

Percent of adolescents with severe difficulties (SDQ) in the past 6 months by domain, NCS-A

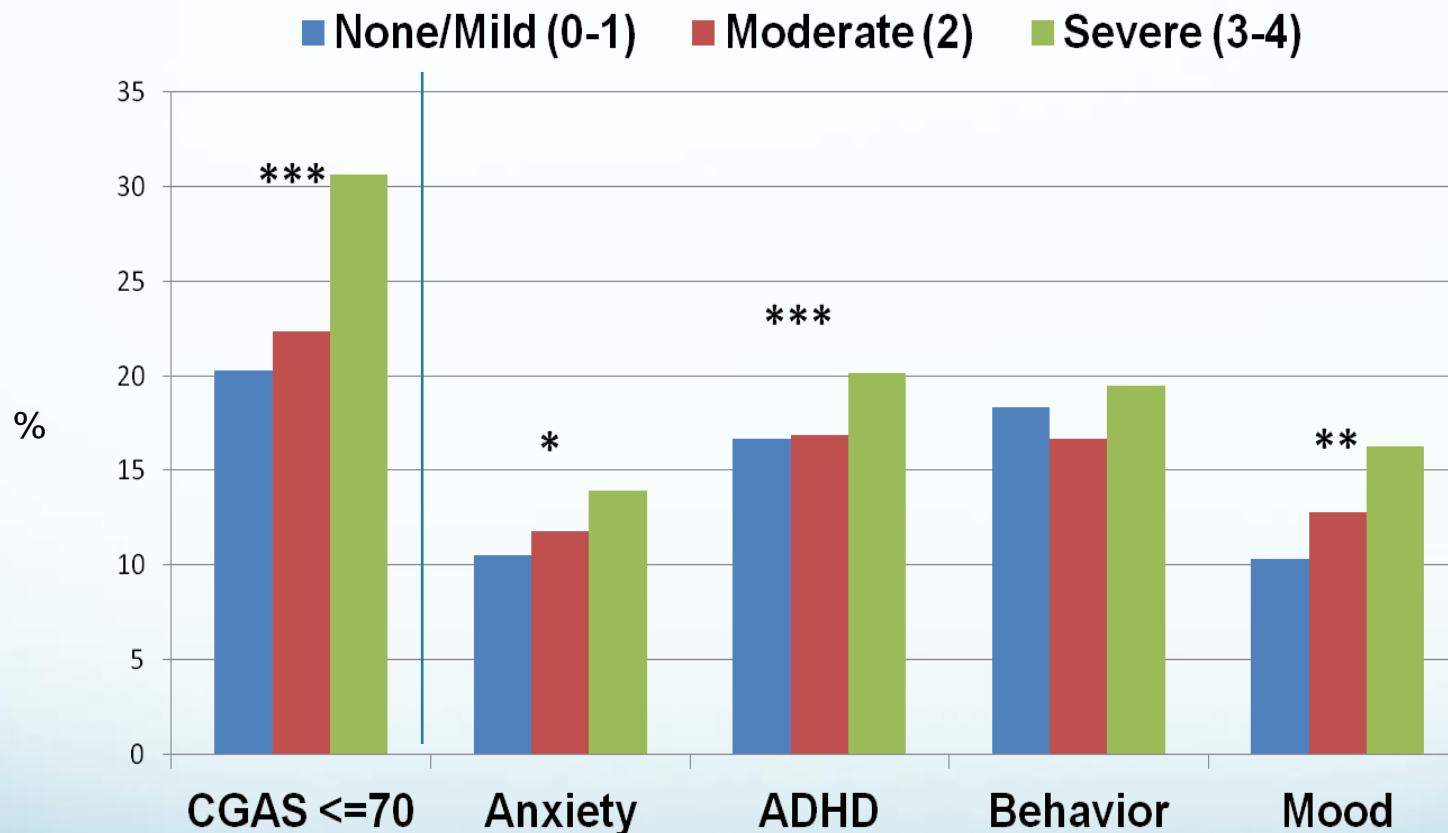


Number of Classes of Disorders Among Youth with Any Disorder: NCS-A



Merikangas et al, 2010

Prevalence of Mental Disorders by Severity of Medical Disorders (n=9014)



U Penn Neurodevelopmental Genomics Study,
Merikangas et al, 2013

Contributions of Population Diagnostic Surveys

- **Magnitude and sociodemographic correlates of different disorders**
- **Patterns of service use by sector**
- **Phenomenology and subtypes of disorders**
- **Patterns of comorbidity across mental disorders and with substance use/disorders and physical disorders**

Limitations of Population Diagnostic Studies

- **Cross-sectional**
- **Lack of comprehensive assessment of disorders under age 13**
- **Symptoms of the most severe disorders, such as psychosis and pervasive developmental disorders, are not included**
- **Informant variation (parent vs child) & lack of teacher report**

Challenges in Diagnoses for SED

- 12 month prevalence rates, though more reliable, don't account for prior history
- Solely based on DSM system, that has limited predictive or biologic validity
 - ✓ Categorical level with arbitrary thresholds
 - ✓ Unique to US -- lack of international comparability with ICD-10
- Comorbidity, both mental and physical, is pervasive
- Difficulty in defining SED below age 6

NCS-A Investigators

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