

Source: Halfon, Neal & Paul W. Newacheck. (1999). Prevalence and impact of parent-reported disabling mental health conditions among U.S. children. *Journal of the American Academy of Child and Adolescent Psychiatry*, 38(5), 600-609.
E. Jane Costello. (1999) Commentary. *Journal of the American Academy of Child and Adolescent Psychiatry*, 38(5), 610-613.

A set of two articles on prevalence and impact of mental health conditions among children in the United States is likely to promote a lively discussion. The main article, by Halfon and Newacheck, reports prevalence rates based on reports by parents who participated in the National Health Interview Survey in 1992, 1993, or 1994. Altogether, this involves 99,513 parents. The second article is a commentary by Jane Costello on the findings from the larger study.

Parents were first asked if their children experienced a long-term “disability” in their ability to perform their major social role. This major social role was defined as play for pre-school children, and attending school for school-age children. For those children who were identified as being disabled in performing that role, parents were then asked to give their perception of the reason for the disability. Using this approach, it was estimated that 2.13% of children under 18 years of age suffered from a “mental health condition” that resulted in a long-term reduction in the child’s ability to perform their major social role. The most common reported causes of disability were mental retardation, attention-deficit hyperactivity disorder, and learning disabilities, two of which are not typically considered an emotional or behavioral disorder. The estimate derived from this method is a much lower estimate than other estimates of “serious emotional disturbance.” For example, the CMHS report estimated that 9 to 13 percent of children between the ages of 9 and 17 have a serious emotional disturbance.

In responding to the article, Costello discredits the method used in the National Health Interview Survey. She suggests that, “Asking parents or adolescents to diagnose mental illness by choosing from a list of labels or brief descriptions is so far from producing a valid prevalence estimate that it has long been abandoned by psychiatric epidemiology... It does not seem unreasonable to expect that the NHIS approach, using a single informant and a very few questions, is likely to err in the direction of underestimating the prevalence of disabling childhood mental illness.”

Costello further points out that the definition of “disability” is also limited. It refers to only one area of functioning and would therefore exclude children whose disability is reflected in the home and/or in the community. With its focus on activity limitation, it also excludes students who are in special classes or in special schools, since they are attending schools. Also, the sample in the NHIS survey excludes children who are not living with their own family, a group for which there is likely to be a higher prevalence of disorders.

Costello does point out that a strength of the article by Halfon and Newacheck is their effort to gather information about the impact of illness. They do this by measuring the number of days in bed and the number of days absent from school due to the disorder. As Costello emphasizes, unfortunately these are narrow definitions of impact. “Impact or burden of child mental illness needs to be measured in ways that include its effects on the family such as inability to work or reduced hours worked, friction with family members, social restrictions, shame, and guilt.”

Despite the numerous methodological problems in the article by Halfon and Newacheck, it is likely to receive considerable attention because it was based on an extremely large national sample, and was published in a prestigious journal. If the results are taken seriously, it can cause policy makers to underestimate the need for services for children with emotional disorders and their families. Fortunately, the article is paired with a response by a distinguished researcher, and the response does an excellent job of pointing out the shortcomings of the original research.