

## Inquiry opens into state of childhood in the UK

Andrew Cole *London*

The Children's Society this week launched the United Kingdom's first national inquiry into the state of childhood, amid growing concerns that the pressures of modern life are causing increased mental health problems in children.

Research to be published shortly in the *Journal of Social Indicators Research* shows that children in the UK currently have lower levels of wellbeing, measured by such things as health, education, wealth, and relationships, than nearly every other country in the European Union.

And a recent report from the BMA's board of science shows that one in 10 children in this country has a mental health problem, and children in care and from poorer backgrounds are most at risk (*BMJ* 2006;332:1471).

Launching its inquiry this week, The Children's Society, a voluntary organisation of the Church of England, said that a "climate of fear and confusion" surrounded young people today.

Its own survey of 8000 children was released to coincide with the inquiry and shows that key concerns are bullying and peer pressure as well as a fear of crime and the impact of drugs. Seven per cent of children said they were often bullied and another 24% had experienced bullying.

The inquiry is chaired by Professor Judith Dunn, a child development psychologist at the Institute of Psychiatry, King's College, London. The panel of 12 members will include the children's commissioner, Al Aynsley-Green. In the next eight weeks the inquiry will take evidence from children and other interested groups. The final report will be published in 2008.

"There is clearly a mood in the UK that as a society we have got some important things wrong about childhood," said Bob Reitemeier, chief executive of the society. "We need to turn this into positive action."

Arguments about whether children's mental health problems were worse than in the past



Seven in 10 children in northern Europe see their classmates as "kind and helpful" but only two in five in the UK take that view

missed the point. "When we look at the comparisons with Europe we don't need to debate whether it's on the increase but need to accept that it's a problem. Frankly it's too high, and we need to do something about it," said Mr Reitemeier.

Lord Layard, a member of the inquiry, said that a World Health Organization study showed that 70% of children throughout northern Europe thought that their classmates were kind and helpful. But in Britain and Russia that sank to little more than 40%.

The launch of the inquiry comes a week after 110 teachers, psychiatrists, and children's authors wrote to the *Daily Telegraph* saying that aspects of modern life such as advertising, computers, and "overly academic, test driven" primary schools could be responsible for the rising incidence of depression and behavioural problems in childhood. □

The Children's Society report, *Good Childhood? A Question for our Times*, is available at [www.goodchildhood.org.uk](http://www.goodchildhood.org.uk).

## Try psychology before drugs for children with mental problems

Janice Hopkins Tanne *New York*

Children and adolescents with behavioural and mental health problems often receive inadequate care and treatment, says the American Psychological Association in a comprehensive report.

They get drugs that have not been well tested in children but often don't get psychological treatments, which are less risky, because these are more time consuming and expensive.

The report was compiled over two years, in which time there were substantial changes in the treatment of children and adolescents with mental health problems. Drugs are used to

treat children despite a lack of scientific evidence for safety and effectiveness, and psychosocial treatments are not used because of funding problems and lack of clinicians, the association says.

In the United States, the use of antipsychotic drugs to treat children with behavioural and mental health problems increased fivefold between 1993 and 2002.

As many as 15% of US children and adolescents have a mental disorder that causes some functional impairment, the report says. But only one in five of these children are treated by "appropriately trained mental health professionals."

Many interventions decrease symptoms in the short term, but insufficient evidence shows their effectiveness on the child's functioning in daily life and on long term effectiveness.

The report considers attention-deficit/hyperactivity disorder, oppositional defiant disorder, conduct disorder, Tourette's syn-

drome and tic disorder, obsessive-compulsive disorder, anxiety disorders, depression and suicidality, bipolar disorder, schizophrenia spectrum disorder, autism spectrum disorder, and elimination disorder.

It gives information about specific psychosocial, psychopharmacological, and combined treatments for each disorder, including an efficacy table.

"For many... psychotropic agents, issues of safety have not been explored, particularly for long-term usage," the report cautions, mentioning recent concerns about the safety of antidepressants in children and adolescents.

Also, response to drug treatment may be influenced by sex, ethnic group, sexual orientation, physical disability, socioeconomic status, culture, and religious preference, but few data show their effects. "Most of the evidence is limited to acute symptomatic improvement, with only limited attention paid to

functional outcomes, long-term durability, and safety of treatments," the report says.

Few studies have considered which treatments should be used first. Decisions should be guided "by the balance between anticipated benefits and possible harms of treatment choices (including absence of treatment)."

"For most of the disorders reviewed... there are psychosocial treatments that are solidly grounded in empirical support as stand-alone treatments. The preponderance of available evidence indicates that psychosocial treatments are safer than psychoactive medications. Therefore the working group recommends that in most cases psychosocial interventions be considered first," the report says. □

The report, *Psychopharmacological, Psychosocial, and Combined Interventions for Childhood Disorders: Evidence Base, Contextual Factors, and Future Directions*, is available at [www.apa.org/pi/cyf/childmeds.pdf](http://www.apa.org/pi/cyf/childmeds.pdf).