

Partnering for the World's Children



Why Collaborations Are Important

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KEYWORDS

• Children • Mental health • Global • Psychiatric disorders • Collaboration

KEY POINTS

- Most psychiatric disorders have their onset in childhood and adolescence when prevention and early intervention can prevent a lifetime of suffering, disability and stigma.
- We share in a global responsibility to transcend cultural and political boundaries to identify childhood-onset psychiatric illness as an international public health crisis.
- The often intertwined contributions of psychosocial, economic, political, cultural, religious, and community variables have an enormous psychological impact on the lives of children and both their physical and mental health.
- Today's problems of poverty and violence will never subside unless we invest in the physical, mental, and emotional development of the next generations.
- We are now in the unique position of having potentially increased the scientific knowledge through research to start addressing these issues in a comprehensive way.
- We must be able to collaborate with colleagues across the world to pursue common goals.

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INTRODUCTION

Today's world finds few places in which children can live in peace, free from violence, deprivation, strife, and hardship; a sad reality. These youth, children, and adolescents of the world, are our future and yet we are permitting them to be exposed and vulnerable to the worst perils of our times.¹ Each and every day millions of children globally are deprived of their right to live in safety, with adequate food, water, shelter, education, and health care, as well as the chance to be reared in caring and loving families with supportive community environments. Daily, children in every corner of the world face the possibility of being kidnapped, killed, orphaned, abandoned, neglected, and/or abused. The reasons are manifold: political, environmental, economic, psychosocial, physical, and even medical or psychiatric illness in their caregivers. And, because of the impoverishment of many families, as well as the disruption of traditional family structures, an increasing number of children have to fend for themselves on the streets. Although the reasons are well known or even understood, there is still no organized move to end this tragedy for our children. The most recent World Health Organization (WHO) Atlas report suggests that the number of children and adolescents facing significant adversity is growing at an alarming rate, and that increasing numbers of children are at risk of deprivation, damaged health, developmental disruption, and premature death.² With such a severe, chronic problem, the question becomes: Who will stand up for the world's children?"

BACKGROUND

Mental health is but one part of a child's overall health, development, and ability to learn. The developing brain is a fragile part of each child's body that depends on physical and emotional sustenance from caregivers and the environment. According to the National Institute of Mental Health (NIMH), in the United States, at any point in time, 1 in 5 children has a diagnosable mental disorder and 1 in 10 suffers from a psychiatric illness that is severe enough to impair how they function at home, school and/or in the community.^{3,4} The vast majority of psychiatric illnesses appear in childhood and adolescence (50% by age 14 years and 75% by age 24), but the average lag time between the onset of symptoms and the initiation of treatment is 8 to 10 years, even though it has been demonstrated that early diagnosis and intervention for these disorders will impact their prevalence and course, as well as the level of impairment in adult life.^{3,4} If children are not screened and treated, these childhood-onset psychiatric disorders persist and contribute to a cycle of school failure, poor employment opportunities, poverty, and suffering that will then affect their descendants.

Children and youth with untreated psychiatric illness have more difficulties in school, more involvement with the criminal justice system, and fewer stable and long-term placements in the child welfare system than do their peers. Although psychiatric disorders impact children from all types of families and at all economic levels, there are certain conditions that can increase the needs for mental health services. Many of the world's children are subject to the most significant of these conditions: living in poverty, witnessing violence, or having a parent who suffers from depression. There are well-researched associations between socioeconomic status and indices of both physical and mental health.^{5,6} We need to seize all opportunities to improve health care for millions of children around the world, and we must be able to collaborate, remain organized, and share common goals, so we can speak with one voice on the world stage.

Often, because of the trauma and turmoil in their lives, children and youth in the child welfare and juvenile justice systems have a higher prevalence of psychiatric disorder

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