



Review article

Anxiety disorders in children and adolescents with intellectual disability: Prevalence and assessment

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ABSTRACT

Children and adolescents with intellectual disability are known to experience mental health disorders, but anxiety disorders in this population have received relatively little attention. Firstly, this paper provides a review of published studies reporting prevalence rates of anxiety disorders in children and adolescents with intellectual disability. Secondly, the paper reviews measures of anxiety that have been evaluated in children/adolescents with intellectual disability, and details the associated psychometric properties. Seven studies reporting prevalence rates of anxiety disorders in this population were identified, with reported rates varying from 3% to 22%. Two-one studies evaluating a measure of anxiety in a sample of children/adolescents with intellectual disability were identified. While these studies indicate that several measures show promise, further evaluation studies are needed; particularly those that evaluate the capacity of measures to screen for anxiety disorders, not only measure symptoms.

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Contents

1. Introduction	176
2. Method	176
3. Results	177
3.1. Overview of literature review	177
3.2. Prevalence studies	178
3.3. Anxiety measures	178
3.4. Evaluation studies	182
3.4.1. Evaluation of broad-based measures	182
3.4.2. Evaluation of anxiety measures	186
4. Discussion and conclusions	187
References	188

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1. Introduction

The mental health of individuals with intellectual disability (ID) has received growing attention over recent years. Little more than forty years ago, it was widely presumed that individuals with ID could not experience mental health problems (Matson, Belva, Hattier, & Matson, 2012), however the elevated rates of mental health problems among individuals with ID is now well established (Dekker, Koot, van der Ende, & Verhulst, 2002; Einfeld & Tonge, 1996; Totsika, Hastings, Emerson, Lancaster, & Berridge, 2011). Although reported prevalence rates vary, population studies of children and adolescents with ID have repeatedly identified rates of comorbid mental health problems at 30–40% (Einfeld & Tonge, 1996; Linna et al., 1999; Rutter, Tizard, & Whitmore, 1970; Totsika et al., 2011). Relatively fewer studies have incorporated full psychiatric assessments (thus enabling diagnoses of mental health disorders), however, it is noteworthy that three studies that did, conducted in the UK, the Netherlands and Norway, report strikingly similar rates (36–39%) of DSM/ICD mental health disorders among children and adolescents with ID (Dekker & Koot, 2003; Emerson & Hatton, 2007; Stromme & Diseth, 2000). These figures are markedly higher than corresponding estimates of 8–17% in typically developing populations of young people (Costello, Mustillo, Erkanli, Keeler, & Angold, 2003; Emerson & Hatton, 2007; Merikangas et al., 2010; Roberts, Roberts, & Xing, 2007).

With a larger literature base surrounding the mental health of typically developing children and adolescents, prevalence rates of specific mental health disorders are now better established, and anxiety disorders consistently emerge near the top of the list (Costello et al., 2003; Emerson & Hatton, 2007; Roberts et al., 2007). In contrast, efforts to establish corresponding prevalence rates of specific disorders, including anxiety disorders, among young people with ID is still in its infancy. The first aim of this paper is to review this emerging literature, and detail current best estimates of the prevalence of anxiety disorders among children and adolescents with ID.

Recognition that mental health disorders not only exist, but also are highly prevalent among young people with ID has prompted interest in the development and evaluation of measures designed to identify these disorders in this population. Unique challenges associated with identifying a mental illness within the context of an intellectual disability have been identified, including, 'diagnostic overshadowing' – falsely attributing symptoms of mental illness to the intellectual disability (Reiss, Levitan, & Szyszko, 1982) – and the atypical and varying presentation of mental illness in this population (Bailey & Andrews, 2003; Cooper, Melville, & Einfeld, 2003). Such barriers to accurate diagnosis of mental health disorders among individuals with ID have highlighted the need for a targeted approach to mental health assessment in this population. A number of comprehensive broad-based questionnaires designed to identify mental health problems in young people with ID exist (e.g. the Developmental Behaviour Checklist, Einfeld & Tonge, 2002; Nisonger Child Behaviour Rating Form, Aman, Tassé, Rojahn, & Hammer, 1996); and others designed for typically developing populations have been evaluated in young people with ID (e.g. the Child Behaviour Checklist, Achenbach, 1991a). However, the development and evaluation of measures to detect specific mental health disorders, including anxiety disorders, has received less attention. Recent reviews have provided comprehensive evaluations of existing measures for identifying anxiety (Hermans, van der Pas, & Evenhuis, 2011) and depression (Hermans & Evenhuis, 2010) in adults with ID; however studies evaluating measures in younger populations with ID are lacking. This paper aims to provide a corresponding review of existing anxiety measures evaluated in samples of children and adolescents with ID. Measures of anxiety that have been evaluated in children and/or adolescents with ID were identified and findings relating to the associated psychometric properties detailed.

2. Method

A systematic review of the literature was conducted in order to (i) identify studies that have reported prevalence rates of anxiety disorders among children and/or adolescents with ID; (ii) identify measures (questionnaires, checklists or interviews) designed to detect anxiety that have been evaluated in a sample of children and/or adolescents with ID; and (iii) document reported reliability (internal consistency, test–retest, inter-rater) and validity (convergent/divergent, criterion, predictive) associated with each measure in children and/or adolescents with ID.

The literature review was conducted in April 2014, and included three stages. Firstly, electronic databases (OVID Medline, PsychInfo) were searched using the search terms detailed in Table 1. Search terms in the four groups were combined with 'AND' and abstracts published in journal articles since 1980 were searched. Next, references lists in selected papers and citations of selected papers/measures were reviewed. Finally, the contents page (titles/abstracts) of leading disability journals published since 2009 were reviewed (Journal of Intellectual Disability Research; Research in Developmental Disabilities; Journal of Applied Research in Intellectual Disabilities; American Journal on Intellectual and Developmental Disabilities; Intellectual and Developmental Disabilities; International Journal of Developmental Disabilities; Journal of Intellectual and Developmental Disability; Journal of Autism and Developmental Disorders; British Journal of Learning Disabilities).

In selecting anxiety prevalence studies for inclusion, the following criteria were applied: (i) study reported prevalence rate of any anxiety disorder based on a psychiatric interview and the application of DSM/ICD diagnostic criteria; (ii) at least 70% of the sample were aged 17 or less with an intellectual disability (or developmental delay); (iii) a representative sample of children and/or adolescents with intellectual disability (or developmental delay) was used, with a minimum of $n = 50$; (iv) paper was available in English. Prevalence studies were excluded if: (i) reported prevalence rates were measured using only screening measures or medical records; (ii) only rates of OCD or PTSD were reported; (iii) the sample only included individuals with autism spectrum disorder or individuals with intellectual disability from one specific etiological group

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