

Background and Objectives

- Aggression and mental health issues are frequently reported in youth with Developmental Disability (DD), and it is critical that research examines the various treatments that are used by youth and their families (e.g., Gadow et al., 2004; Gray & Mohr, 2004)
- Unfortunately, few children with DD receive evidence-based interventions for problem behaviours (Einfeld et al., 2006), and most studies on mental health treatments for children with DD focus on medication (Gray & Mohr, 2004)
- Furthermore, we know little about how child characteristics (i.e., age, diagnosis, and concurrence of aggression and mental health issues) predict which interventions will be used to treat aggression or mental health issues

Objectives:

- Report on the types of treatments received for aggression and mental health issues
- Investigate differences in treatment types in relation to child characteristics

Methods

- The Great Outcomes for Kids Impacted by Severe Developmental Disabilities (GO4KIDDS) project explores the health, wellbeing, and social inclusion of Canadian children with DD
- Participants
 - 376 parents of children with DD, aged 3 to 20 years ($M = 11.21$, $SD = 3.89$) have completed the GO4KIDDS survey online or by paper and pencil
- Measures
 - 2 questions regarding the frequency of aggression and mental health issues
 - 2 non-mutually exclusive lists of 7 treatment options for aggression and mental health issues

Results: Objective 1

- Of the total sample, 56.6% of parents reported that their child had problems with aggression or mental health:
 - 13.0% reported aggression only
 - 21.0% reported mental health issues only
 - 22.6% reported both
- The frequencies of the types of treatment(s) received for aggression or mental health issues are depicted in Figure 1
 - Informal behavioural therapy most common
 - Medication and other treatment (e.g. diet, occupational therapy, physiotherapy, expressive therapies) also frequently reported

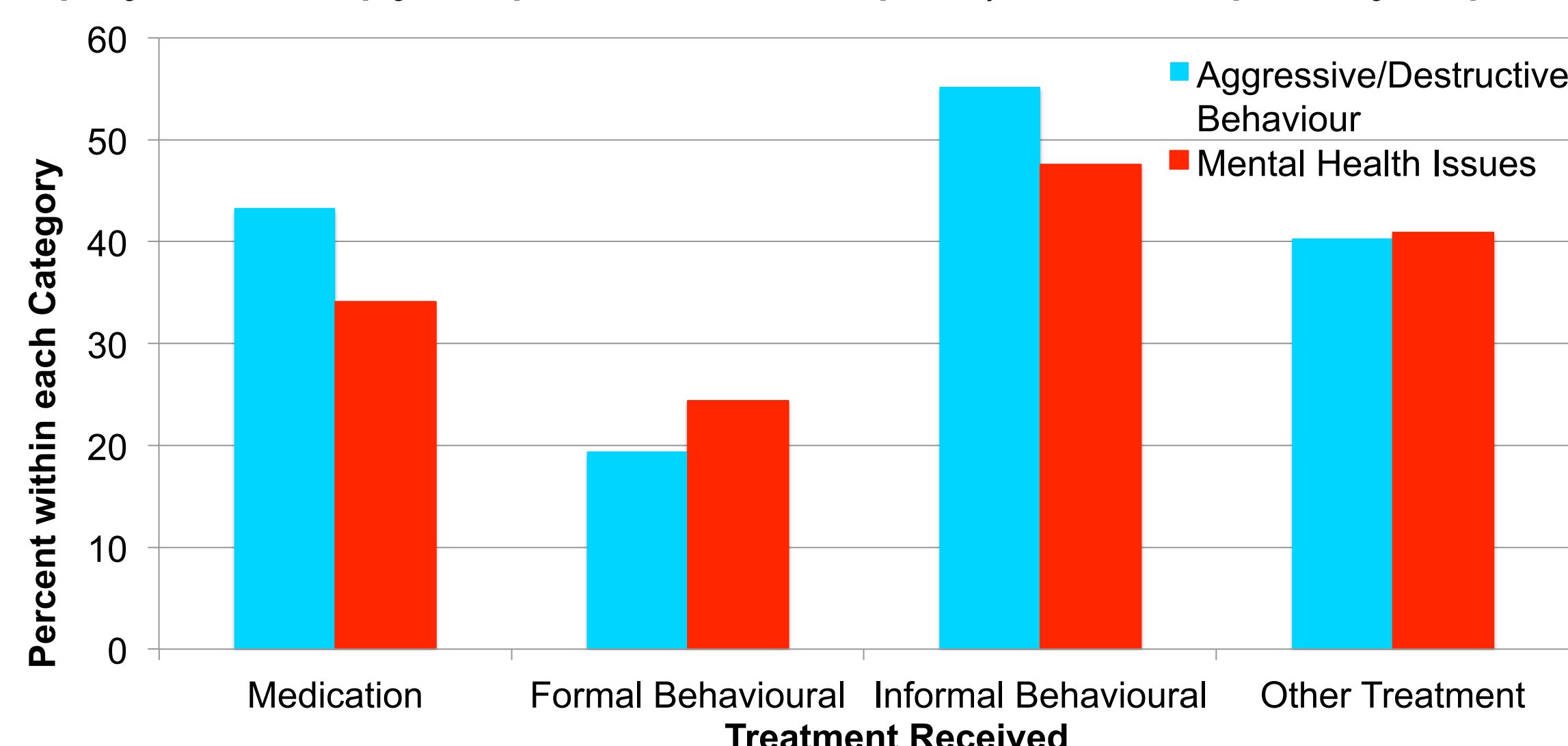


Figure 1. Types of treatment(s) received for aggression and mental health issues

Discussion and Directions for Future Research

- Types of treatment(s) received
 - Mental health issues were reported by 43.6% of parents with children with DD
 - Most commonly treated with informal behavioural therapy and other treatments (e.g. expressive therapies)
 - Aggression issues were reported by 35.6% of parents
 - Most commonly treated with informal behavioural therapy and medication
- Child Characteristics
 - In general, more children with ASD received treatment(s) for aggression or mental health issues than those without ASD
 - Older children were more likely to receive medication for aggression or mental health issues, whereas younger children tended to receive other types of treatment
 - Mental health treatments are not affected by the presence of aggression, but aggression treatments were affected by the presence of additional mental health issues

Results: Objective 2 – Child Characteristics & Aggression Treatments

Diagnosis

- Children with Autism Spectrum Disorder (ASD) access more treatment for aggression compared to children without ASD (all $ps < .01$; see Figure 2)

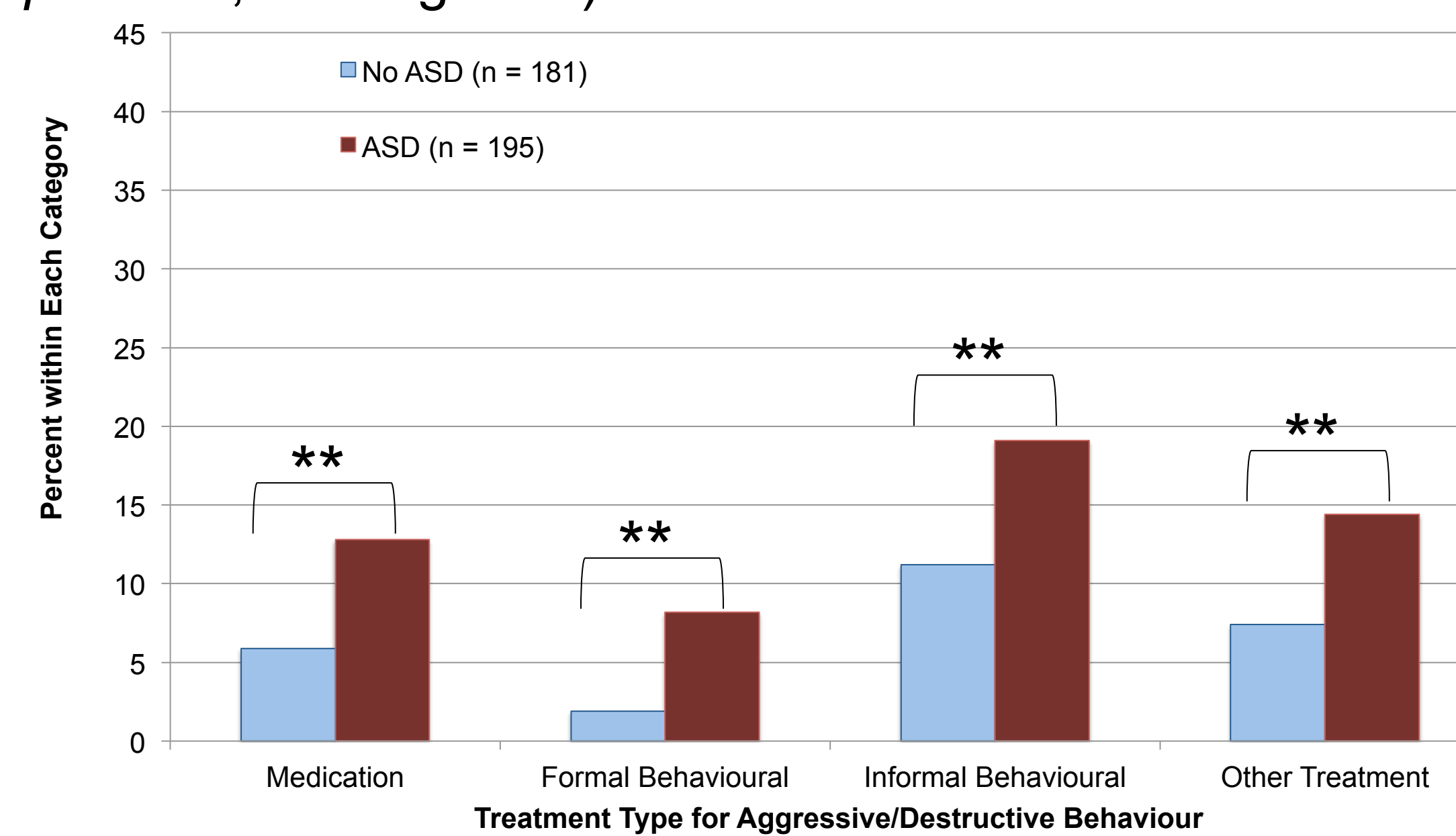


Figure 2. Types of treatment(s) received for aggression for children with and without ASD; ** $p < .01$

Age

- Children over 12 years of age were more likely than those under 12 years of age to receive medication to treat aggression ($p = .02$; see Figure 3)

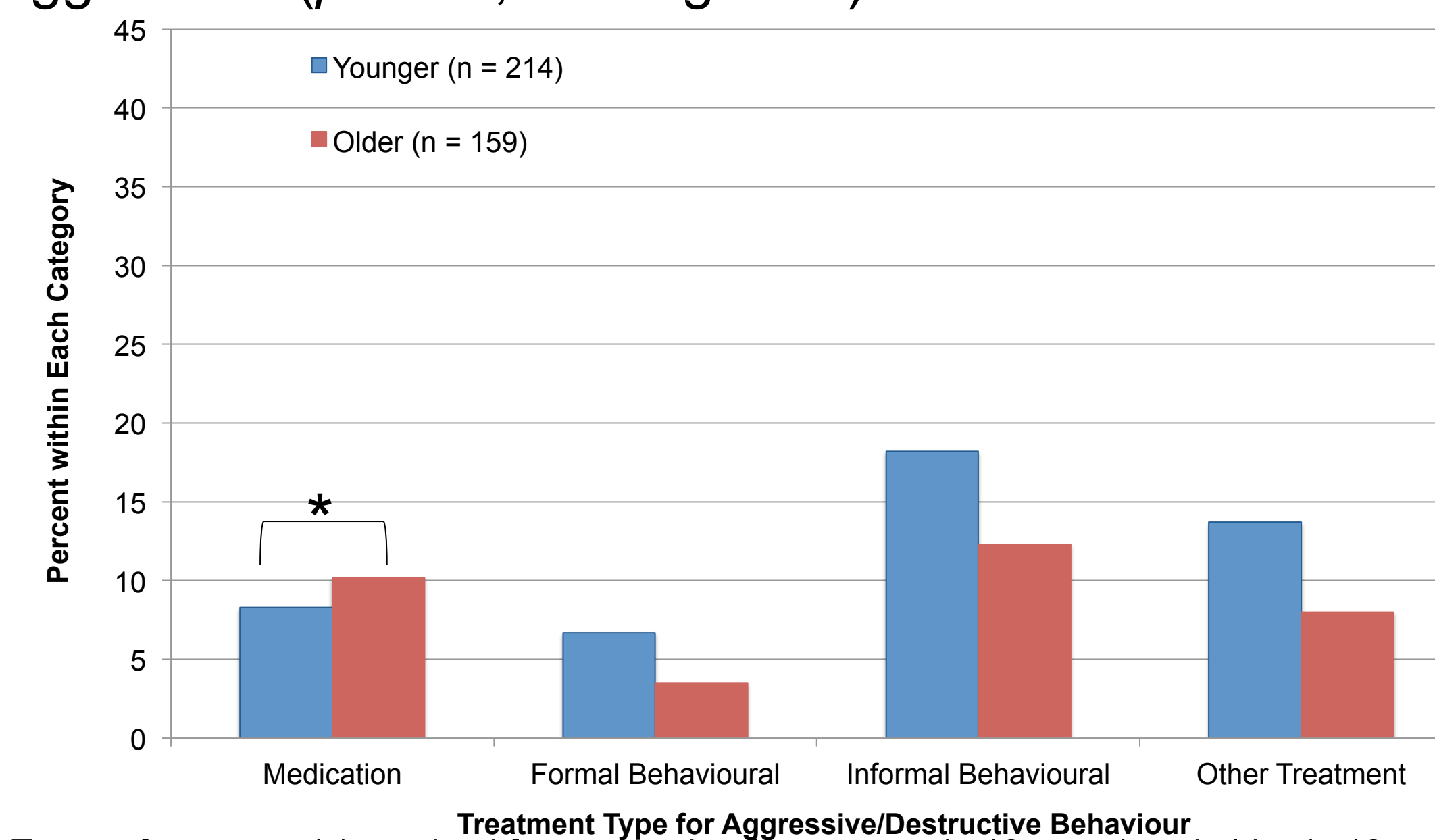


Figure 3. Types of treatment(s) received for aggression for younger (< 12 years) and older (≥ 12 years) children; * $p < .05$

Aggression and Mental Health Issues

- Children with both aggression and mental health issues were more likely to receive medication ($p < .01$) and informal behavioural therapy ($p = .03$) (see Figure 4)

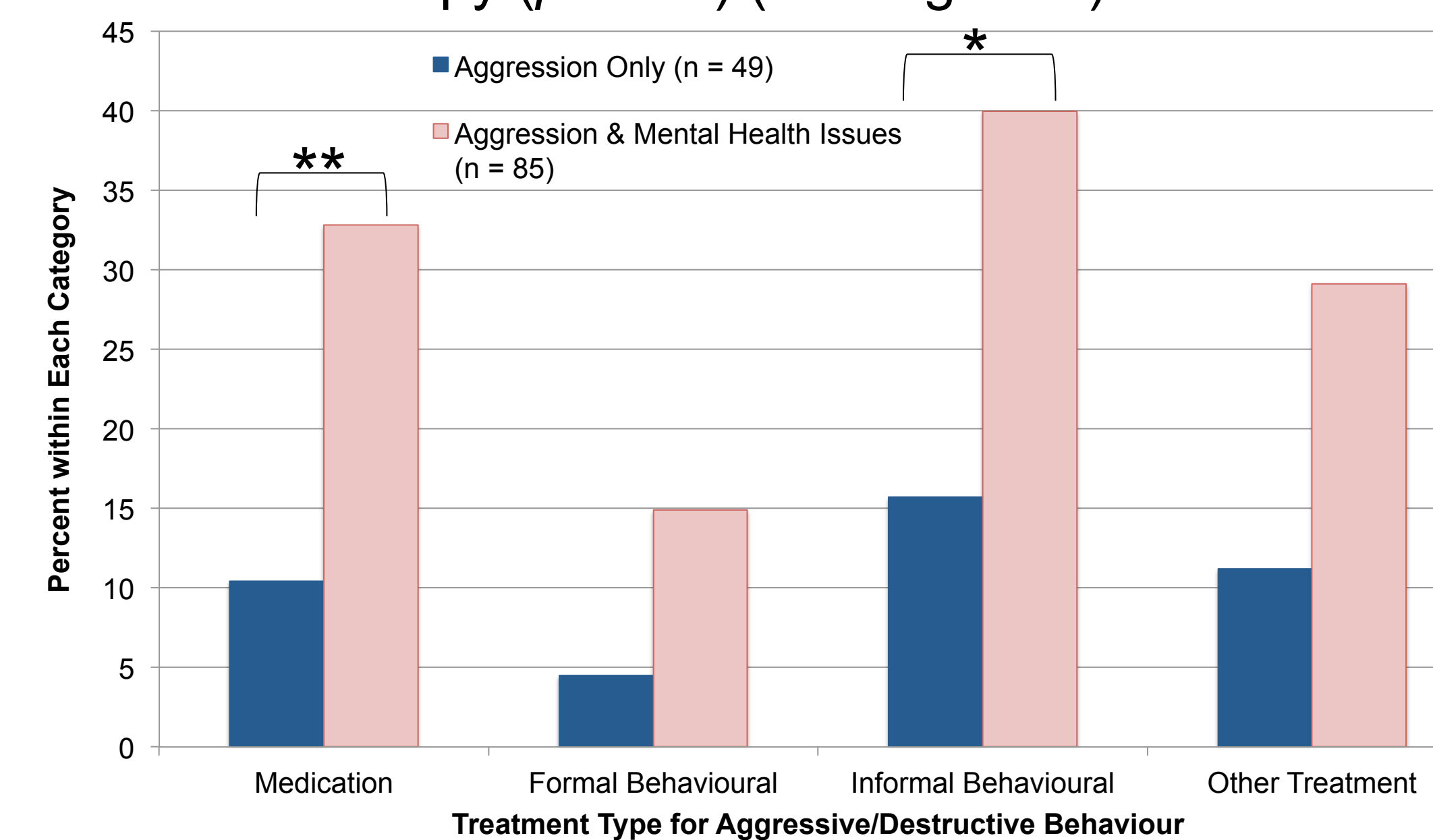


Figure 4. Types of treatment(s) received for aggression in children with aggression and/or mental health issues; * $p < .05$, ** $p < .01$

Results: Objective 2 – Child Characteristics & Mental Health Treatments

Diagnosis

- Other than medication, children with ASD access more treatment for mental health issues compared to children without ASD (all $ps < .01$; see Figure 5)

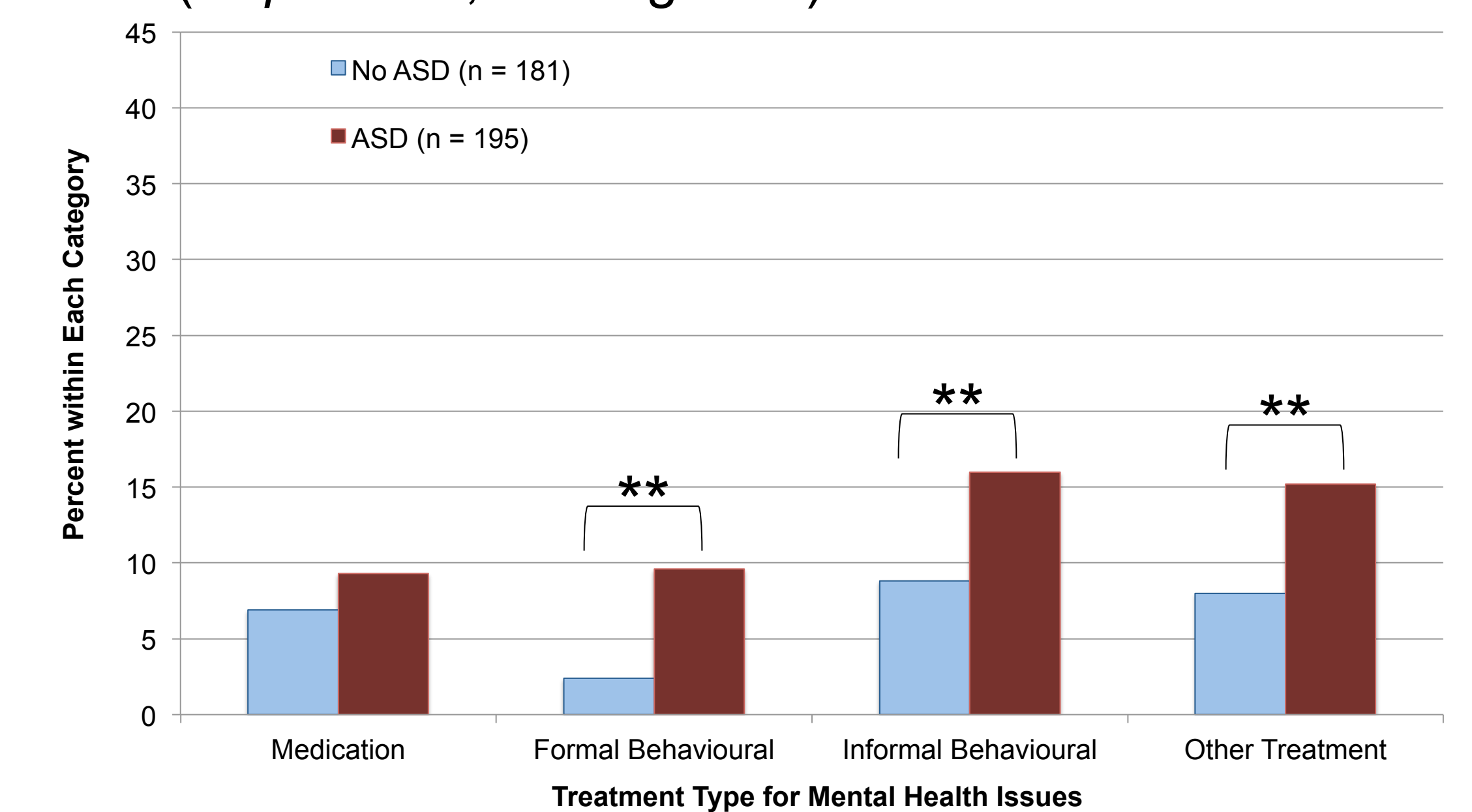


Figure 5. Types of treatment(s) received for mental health issues for children with and without ASD; ** $p < .01$

Age

- More children 12 years of age and older received medication for mental health issues than those under 12 ($p < .01$; see Figure 6)

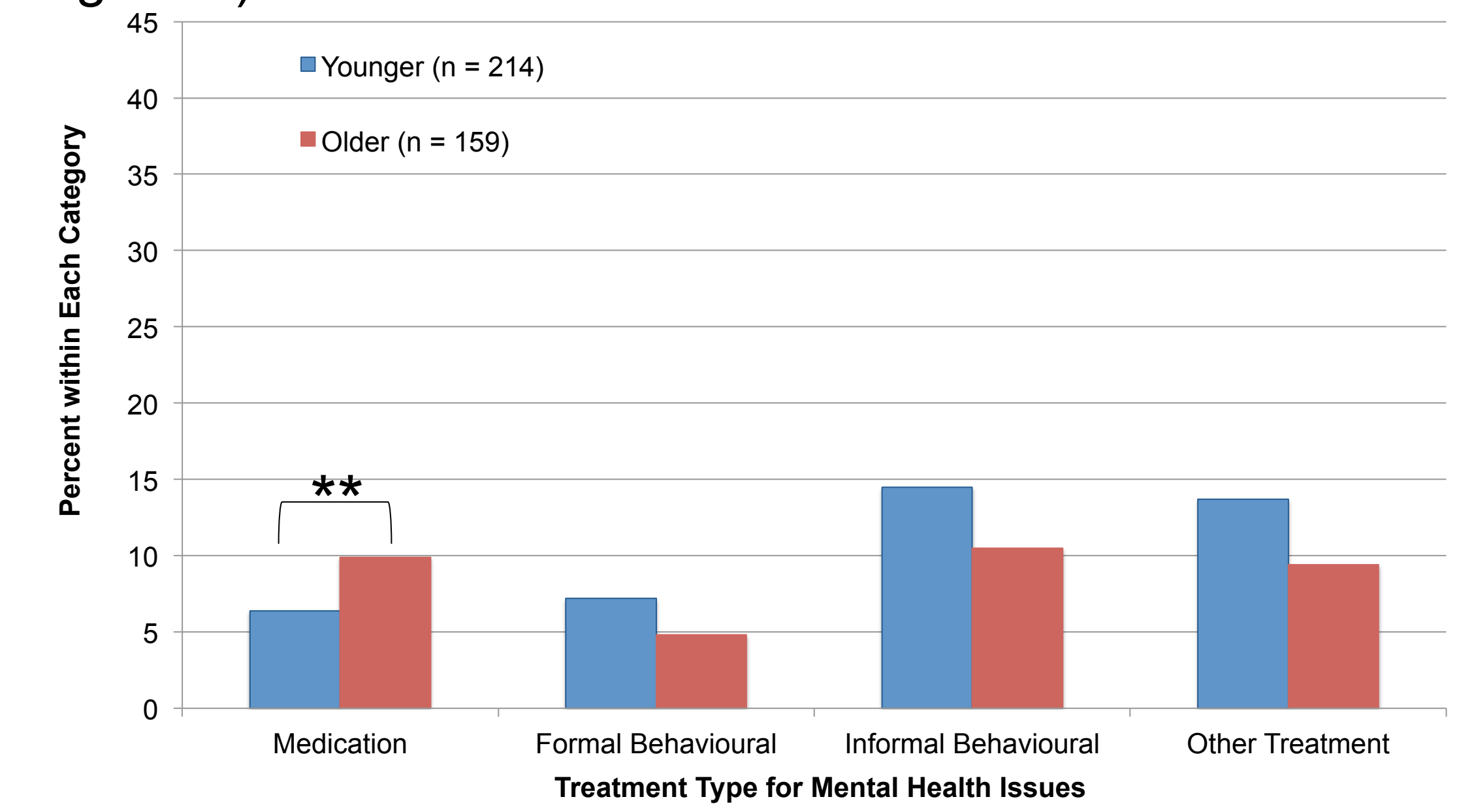


Figure 6. Types of treatment(s) received for mental health issues for younger (<12 years) and older (≥ 12 years) children; ** $p < .01$

Aggression and Mental Health Issues

- There were no significant differences in types of mental health treatments received by children with and without aggression (see Figure 7)

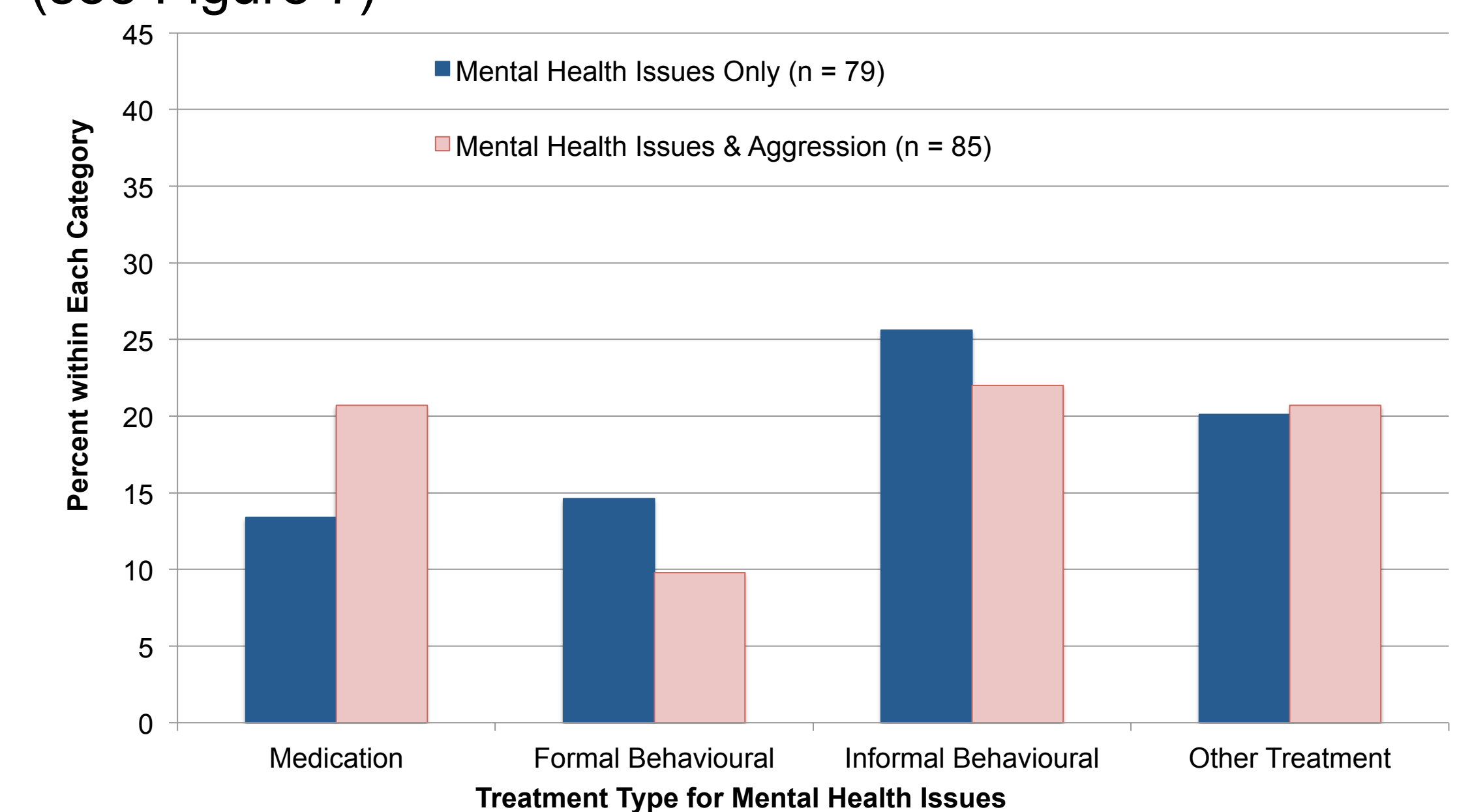


Figure 7. Types of mental health treatment(s) received by children with and without aggression issues

Limitations and Future Directions

- Limitations
 - Parent report
 - No definition of “informal behavioural treatment”
 - No specific information on dosage or type of medication prescribed
 - Did not take into account other diagnoses
- Further Directions
 - Further research on family and systemic contexts is needed to better understand how child characteristics affect types of treatments received for aggression and mental health in children with DD