



Howard Meltzer
Deborah Lader
Tania Corbin
Robert Goodman
Tamsin Ford

The report of a
survey carried out
in 2002/2003 by the
Office for National
Statistics on behalf of
the Welsh Assembly
Government

The mental health of young people looked after by local authorities in Wales

5.1 General health and physical complaints

Introduction

This section looks at the extent to which general health, in particular physical complaints, co-occur with mental disorders among children and young people looked after by local authorities in Wales. In the survey, data were collected on several aspects of the health of children. All information on the child's health came from the interview with the carer.

The topics covered were:

- General health.
- Presence or absence of specified physical complaints.
- Medication.
- Life threatening illnesses.
- Accidents and injuries.

Specific physical complaints were chosen on the basis of their common occurrence in childhood and adolescence (e.g. asthma), findings from previous research showing a strong association with mental disorders (e.g. epilepsy), problems frequently mentioned by parents during the general population survey (e.g. food allergies) and their inclusion in other national mental health surveys.

Previous research has shown that children with physical health problems or disabilities seem especially vulnerable to mental health problems. Rutter (1970) found in the Isle of Wight studies that children with asthma, epilepsy and neurological disorders in general were far more likely than the general population to have a mental disorder. In a national survey of disabled children in Great Britain, mental and behavioural problems were found among a large proportion of children with physical disabilities (Bone and Meltzer, 1989). They also found that nearly all the children with the most severe disabilities had a mental health disability.

In the present study, carers were also asked if they thought the children had emotional problems, behavioural problems, hyperactivity or learning difficulties. The section concludes with a comparison of parents' perceptions with the clinical evaluation of emotional, behavioural and hyperkinetic disorders. Specific learning difficulties in relation to mental disorders are discussed in Chapter 6.

Tables showing data for children with and without mental disorders are presented, but there were no statistically significant differences for any of the topics.

General health

The child's general health was rated by carers on a five-point scale: very good, good, fair, bad or very bad. The overall percentage of children with a fair, bad or very bad rating was 12% – very similar to that found in Scotland (13%) but slightly higher than that in England (8%). (Table 5.1)

Physical complaints

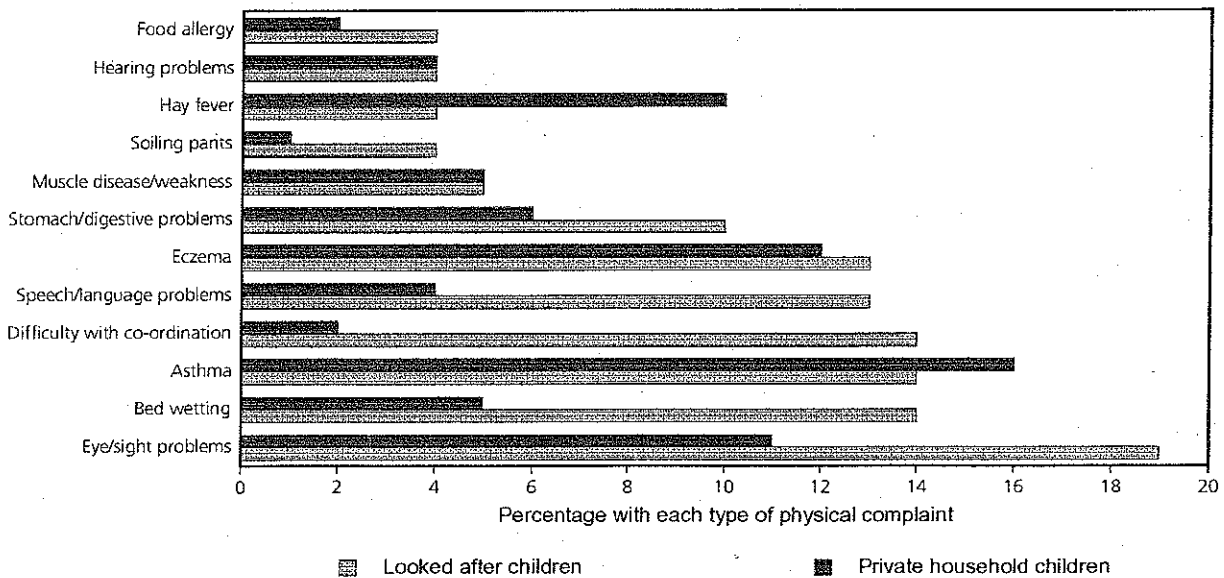
This section looks in more detail at specific physical complaints. Physical complaints can vary in their severity, chronicity, and treatability. This survey did not cover these aspects; the respondent just said "yes" if the child had the health problem or condition presented on three lists (see overleaf).

Two-thirds of all looked after children were reported to have at least one physical complaint. The most commonly reported physical complaints among the sample were: eye and/or sight problems (18%), asthma (14%), speech or language problems (13%), bed wetting (12%), difficulty with co-ordination (12%) and eczema (12%), quite different to those found in the private household survey. (Figure 5.1)

There was very little difference in the distribution of physical complaints by country. (Table 5.3)

Asthma	Hyperactivity	Diabetes
Eczema	Behavioural problems	Obesity
Hay fever	Emotional problems	Cystic fibrosis
Glue ear or otitis media or grommets	Learning difficulties	Spina bifida
Bed wetting	Dyslexia	Kidney, urinary tract problems
Soiling pants	Cerebral palsy	Missing fingers, hands, arms, toes, feet or legs
Stomach or digestive problems or tummy pains	Migraine or severe headaches	Any stiffness or deformity of the foot, leg, fingers, arms or back
A heart problem	Chronic Fatigue Syndrome	Any muscle disease or weakness
Any blood disorder	Eye or sight problems	Any difficulty with co-ordination
Epilepsy	Speech or language problems	A condition present since birth such as club foot or cleft palate
Food allergy	Hearing problems	Cancer
Some other allergy		

Figure 5.1 Percentage of young people with physical complaints among looked after and private household children



These results are remarkably similar to a study carried out in Spain of 776 young people entering foster care over a six-year period. Olivan Gonzalvo (1999) reports that among these children 66.1% had abnormality in at least one body system. Although the rate of health problems in vision (18%) was very close to the rates in Great Britain, the most frequent health problem in the Spanish study was odontology – an area not covered in the Great Britain surveys.

However, a study by Chernoff *et al* (1994) looked at the health of children entering foster care in a middle-sized city in the US over a two-year period.

They reported that over 90% had problems in at least one body system: 25% failed the vision screen and 15% the hearing screen.

Medication

This section looks at the use of medication among children with mental disorders. Carers were provided with a list of 14 types of medication that are commonly used in the treatment of childhood mental disorders and were asked to say whether the child was taking any of them.