

CLINICAL PSYCHOPATHOLOGICAL COMPARATIVE ANALYSIS
OF MILDLY MENTALLY RETARTED ADOLESCENTS IN A
SPECIALIZED BOARDING SCHOOL

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Relevance. Comorbid severe mental health problems complicating intellectual disability are a common and pressing public health problem. Although these problems are known to begin in early childhood, little is known about how they develop over time and whether they persist into adulthood.

The aim of the study was to study the course of psychopathology in a representative population of adolescents with mental retardation.

Materials and methods. Design, setting, and participants: Participants in the Child-to-Adult Development Study, an epidemiological cohort of 57 children and adolescents recruited in 2022 from health and education institutions that provided services to children with intellectual disabilities aged 5 to 12.5 years . in 6 rural sites and in Bukhara city. Statistical analysis was performed using the Fisher-Student method. Changes over time were assessed in the total behavior problems score and the 5 subscale DBC scores were modeled using growth curve analysis.

Results: High baseline levels of behavioral and emotional disorders declined very slowly over time, remaining high in young adulthood, declining by 1.05 per year on the DBC Total scale Behavior Problem Score . Overall severity of psychopathology was similar across the mild-to-severe intellectual disability range (mean overall behavior problems score was approximately 44 points). Psychopathology decreased more in boys than in girls over time (boys starting with scores 2.61 points higher at baseline and ending with scores 2.57 points lower at wave 4), and to a greater extent in participants with mild intellectual disability compared with those with severe or profound intellectual disability, who differed from scores 0.53 points lower at baseline to a difference of 6.98 points compared with severely impaired children by wave 4. This trend was observed in each of the subscales except the social impairment subscale , which increased over time. The prevalence of participants meeting criteria for serious psychopathology or a specific mental disorder decreased from 41% in Wave 1 to 31% in Wave 4. Few of the participants (10%) with psychopathology received mental health interventions during the study period.

Conclusion: These results indicate that the problem of psychopathology comorbid with intellectual disability is serious and persistent and point to the need for effective mental health interventions.

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