



Bright Futures™

prevention and health promotion for infants,
children, adolescents, and their families™

The Bright Futures Guidelines,
Third Edition
Health Promotion Information Sheet

PROMOTING MENTAL HEALTH

The Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescents, Third Edition features 10 health promotion themes. These state-of-the-art discussions focus on topics of key importance to families and health care professionals in their common mission to promote the health and well-being of children from birth through adolescence. These 10 themes are also woven into the 31 health supervision visits.



What you'll find in the "Promoting Mental Health" chapter

Overview: Setting the stage

Establishing mental health and emotional well-being is arguably the core task of the developing child and those who care for him. Because cultures may differ in their conceptions of mental health, it is important for the health care professional to learn about family members' perception of a mentally healthy individual and their goals for raising their child. In their shared work to raise a child, parents, family, community, and professionals commit to fostering the development of a child's sense of connectedness, self-worth and joyfulness, intellectual growth, and the many brain functions that define mental health. Because of its overwhelming importance to overall health and because mental health risks and problems are all too common, Bright Futures has designated promoting mental health as one of two significant challenges to child and adolescent health for this edition of the Guidelines.

In-depth: Exploring the topic

The introductory section of the chapter discusses the prevalence and trends in mental health problems among children and adolescents, the need for mental health screening and referral, and the importance of addressing the mental health of children and youth with special health care needs.

The chapter also looks at mental health issues unique to each developmental stage, along with evidence on the effectiveness of relevant health promotion interventions.

Infancy: Birth to 11 Months

- Patterns of attachment
- Challenges to the development of mental health, including infant well-being, child maltreatment and neglect, shaken baby syndrome, and caring for the family facing infant illness or death

Early Childhood: 1 to 4 Years

- Patterns of attachment
- Challenges to the development of mental health, including behavioral patterns and early identification of autistic spectrum disorders

Middle Childhood: 5 to 10 Years

- Patterns of attachment and connection
- Challenges to the development of mental health, including protective factors; learning disabilities and attention-deficit/hyperactivity disorder; anxiety disorders; mood disorders; bullying; early substance abuse, and; conduct disturbances



Adolescence: 11 to 21 Years

- Patterns of attachment and connection
- Challenges to the development of mental health
- Mental health concerns, such as depression and anxiety; deficits in attention, cognition, and learning; conduct disturbances; suicide, and; substance use and abuse

How the theme of “Promoting Mental Health” fits into Bright Futures visits

Each Bright Futures health supervision visit is structured around *five priority topics* that help focus the health care professional’s guidance to parents and children. Some priorities are unique to a particular visit; others are featured often and their components evolve in concert with the child’s development.

These examples of priorities, taken from selected visits, show how Bright Futures helps health care professionals talk to families about promoting mental health during each developmental stage:

Infancy: 1 Month Visit

Parental (maternal) well-being, including postpartum depression, clinical depression, substance abuse, and other issues for new mothers, such as plans to return to work or school, breastfeeding plans, and child care

Early Childhood: 18 Month Visit

Child development and behavior, including adaptation to nonparental care, anticipation of return to clinging, and other changes connected with new cognitive gains

Middle Childhood: 9 and 10 Year Visits

Development and mental health, including emotional security and self-esteem; family communication and family time; temper problems and setting reasonable limits; friends; school performance; readiness for middle school, and; sexuality, including pubertal onset, personal hygiene, initiation of growth spurt, menstruation and ejaculation, loss of “baby fat” and accretion of muscle, and sexual safety

Middle Adolescence: 15 to 17 Year Visits

Emotional well-being, including coping, mood regulation and mental health, and sexuality.

Additional Resources on Promoting Mental Health

- American Academy of Pediatrics aap.org
- HealthyChildren.org, American Academy of Pediatrics healthychildren.org
- Maternal and Child Health Bureau, Health Resources and Services Administration mchb.hrsa.gov
- Family Voices IMPACT on Health & Wellness for Families fv.impact.org
- American Academy of Pediatrics, *Connected Kids* Clinical Guide (AAP safety curriculum) aap.org/ConnectedKids/ClinicalGuide.pdf
- National Institute of Mental Health, Child and Adolescent Mental Health nimh.nih.gov
- Centers for Disease Control and Prevention, Children’s Mental Health cdc.gov
- Olweus Bullying Prevention Program clemsun.edu/olweus

Bright Futures is a national health care promotion and disease prevention initiative that uses a developmentally-based approach to address children’s health needs in the context of family and community.

Bright Futures Health Promotion Themes

Family Support	Physical Activity
Child Development	Oral Health
Mental Health	Safety and Injury Prevention
Healthy Weight	Community Relationships and Resources
Healthy Nutrition	Healthy Sexual Development and Sexuality

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