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Original article

Trends in Early Childhood Mental and Behavioral Disorders and Increasing Autism Diagnoses in Kazakhstan: A Decade of Change

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Abstract

The aim: This study investigates trends in the incidence of mental and behavioral disorders, including autism spectrum disorder, among children aged 0-5 years in Kazakhstan from 2012 to 2022. The research aims to understand the broader implications for public health policy and clinical practice within this Central Asian context.

Methods. Data were extracted from the Statistical Yearbooks of the Ministry of Health of the Republic of Kazakhstan, covering initial diagnoses of mental and behavioral disorders, symptoms, signs, and developmental deviations in children aged 0-5 years. The analysis included trends over a decade, focusing on both national and regional levels, particularly in Central Kazakhstan.

Results. The incidence of mental and behavioral disorders in children aged 0-5 years showed a consistent decline, from 1.2 per 1000 in 2012 to 0.3 per 1000 in 2022. Diagnoses related to symptoms and abnormalities fluctuated, with a notable spike in 2019 (15.6 per 1000), followed by a decline to 4.9 per 1000 by 2022. Conversely, ASD diagnoses increased significantly, with a fivefold rise in "Childhood Autism" and a fourfold rise in "Atypical Autism" from 2016 to 2022.

Conclusion. The findings reveal a decline in early childhood mental and behavioral disorder diagnoses, contrasted by a significant rise in autism diagnoses. These trends highlight the need for targeted public health strategies, enhanced early intervention programs, and greater awareness and diagnostic capacity for autism in Kazakhstan. Regional disparities, particularly in Central Kazakhstan, underscore the importance of equitable healthcare access across the country.

Keywords: Autism Spectrum Disorder, Mental Health, Early Childhood, Kazakhstan, Public Health, Epidemiology.

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Introduction

The rising global incidence of autism spectrum disorder (ASD) and other mental health disorders in children has garnered significant attention in recent years. While much of the existing research has focused on Western countries, there is an increasing need to understand these trends in diverse cultural and socio-economic contexts [1,2]. Kazakhstan, a nation at the crossroads of Eastern Europe and Central Asia, presents a unique case for examining the incidence and management of ASD and mental health disorders in children. This paper seeks to explore the current trends in the incidence of these conditions in Kazakhstan, shedding light on the broader implications for public health policy and clinical practice.

Kazakhstan, the largest landlocked country in the world, has undergone significant socio-economic changes since gaining independence from the Soviet Union in 1991. These changes have influenced various aspects of public health, including the mental health of its younger population. The transition from a centrally planned economy to a market economy has brought both opportunities and challenges, impacting the healthcare system's capacity to address emerging health issues, including mental health disorders and developmental conditions such as autism [3, 4].

Autism spectrum disorder is characterized by persistent deficits in social communication and interaction, along with restricted, repetitive patterns of behavior, interests, or activities [2]. The global prevalence of ASD has been increasing, prompting extensive research into potential genetic, environmental, and socio-cultural factors [5, 6]. However, data on the incidence and prevalence of ASD in Central Asian countries, including Kazakhstan, remain sparse. This lack of comprehensive data impedes the development of targeted interventions and policies that address the unique needs of children with ASD in these regions [3].

Similarly, the prevalence of other mental health disorders, such as anxiety, depression, and attention-deficit/hyperactivity disorder (ADHD), has also been rising globally [7–9]. These conditions can significantly impair a child's academic performance, social interactions, and overall quality of life [10–12]. In Kazakhstan, cultural stigma surrounding mental health issues further complicates the identification, diagnosis, and treatment of these disorders [13, 14]. Understanding the trends in the incidence of these conditions is crucial for developing effective public health strategies and reducing the long-term burden on individuals, families, and society.

The healthcare infrastructure in Kazakhstan has evolved considerably over the past few decades, with improvements in access to medical services and advancements in diagnostic technologies. However, disparities in healthcare access between urban and rural areas, along with varying levels of professional training and awareness among healthcare providers, continue to pose significant challenges [15]. Furthermore, the integration of mental health services into primary healthcare settings remains limited, affecting early detection and intervention efforts [16].

This research article aims to fill the existing knowledge gap by providing a comprehensive analysis of the trends in the incidence of autism and other mental health disorders among children in Kazakhstan. Using data from national health databases, clinical studies, and educational records, we will examine the prevalence rates, demographic factors, and potential risk factors associated with these conditions. Additionally, we will explore the existing healthcare policies and practices related to the diagnosis, treatment, and support of children with ASD and mental health disorders in Kazakhstan.

By contextualizing the findings within the broader global trends and considering the unique socio-cultural landscape of Kazakhstan, this study hopes to contribute valuable insights to the field of child mental health.

Materials and methods

Data on the initial diagnosis of mental and behavioral disorders, as well as symptoms, signs, and deviations from typical behavior among children aged 0-5 years was derived from Statistical Yearbooks of Ministry of Health of Republic of Kazakhstan from 2012 to 2022. These compilations offer comprehensive statistical data regarding the operations of healthcare institutions and key health indicators pertaining to the population of the Republic of Kazakhstan. The healthcare regulatory body supplies healthcare entities with standardized forms for administrative data collection, organized by region, and compiles summary forms for the Republic of Kazakhstan. These are then transmitted to the national statistical authority. Utilizing this data, the healthcare regulatory body calculates public health metrics and evaluates healthcare organizations' performance. It conducts statistical analyses at both regional and national levels.

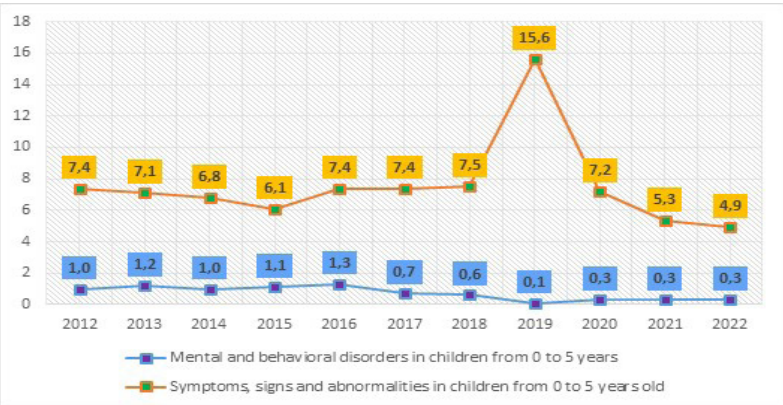


Figure 1 - Kazakhstan trends in the initial diagnosis of mental and behavioral disorders, symptoms, signs and deviations from the typical development in children from 0 to 5 years old per 1000 children from 0 to 5 years old

Results

According to Figure 1 mental and behavioral disorders diagnosis in children from 0 to 5 years demonstrated a consistent decline in the number of diagnoses over the study period. In 2012, approximately 1.2 children out of 1000 received initial diagnoses related to mental and behavioral disorders.

By 2022, this number decreased significantly to around 0.3 diagnoses per 1000 children. In 2012, about 7.4 children per 1000 received diagnoses related to symptoms, signs, or abnormalities. Over the years, this category fluctuated but generally followed a downward trajectory. A remarkable spike occurred in 2019, with diagnoses reaching 15.6 per 1000 children. By 2022, the number of diagnoses in this category declined back to approximately 4.9 per 1000 children.

Figure 2 indicates a significant increase in symptoms, signs, and abnormalities in children aged 0 to 5 years from 2017 to 2019 in Central Kazakhstan region, followed by a sharp decrease in 2020. Overall, the prevalence of mental and behavioral disorders in children aged 0 to 5 years remained relatively stable throughout the decade, ranging from 2.7 in 2012 to 1.8 in 2022, being higher than the national average. The incidence of mental and behavioral disorders among children aged 0 to 5 years in Central Kazakhstan differs notably from the overall trend observed in Kazakhstan.

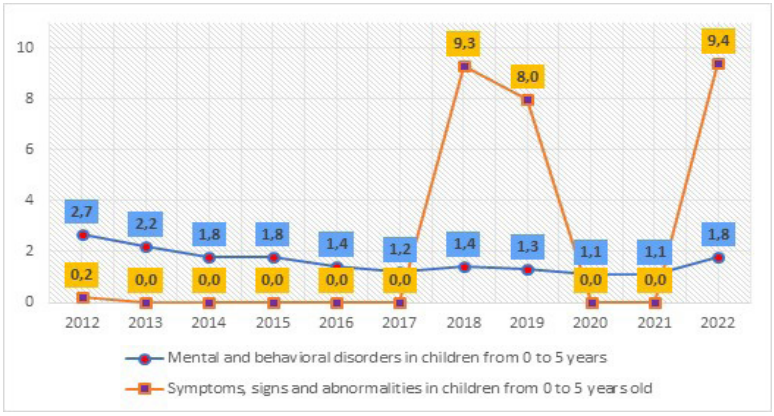


Figure 2 - Central Kazakhstan trends in initial diagnosis of mental and behavioral disorders, symptoms, signs and deviations from the typical development in children from 0 to 5 years old per 1000 children from 0 to 5 years old

The trends in the incidence of "Childhood Autism" and "Atypical Autism" in Kazakhstan over a six-year period are depicted in Figure 3. The data show a significant increase in diagnoses: the number of newly diagnosed cases of "Childhood Autism" per 100,000 children aged 0-17 years has increased fivefold, while the number of newly diagnosed cases of "Atypical Autism" per 100,000 children in the same age group has increased fourfold.

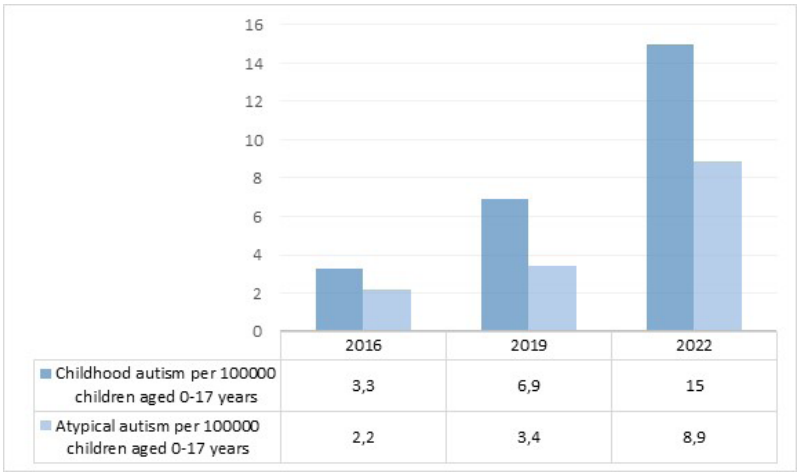


Figure 3 - Incidence of Childhood Autism and Atypical Autism per 100000 children aged 0-17 years from 2016 to 2022

Discussion

The trends observed in our data reflect significant changes in the diagnosis rates of mental, behavioral, and autism spectrum disorders in Kazakhstan, influenced by various factors such as advancements in healthcare, shifts in societal awareness, changes in diagnostic criteria, and regional differences.

The data shows a consistent decline in the diagnosis of mental and behavioral disorders among children aged 0 to 5 years over the decade. In 2012, approximately 1.2 per 1000 children received initial diagnoses, a figure that declined to about 0.3 per 1000 by 2022. This significant reduction could be attributed to several factors. Advancements in early detection and intervention programs over the years may have led to earlier diagnosis and treatment, reducing the need for formal diagnoses at later stages [17]. Modifications in diagnostic criteria could also play a role; if thresholds

were raised or the focus shifted to more severe cases, fewer children might be diagnosed [18]. Additionally, public health policies that prioritize mental health screening and intervention could have contributed to early identification and support for at-risk children, thus reducing the incidence of formal diagnoses [19, 20].

The category of diagnoses related to symptoms, signs, or abnormalities exhibited fluctuations, with a notable spike in 2019 - reaching 15.6 per 1000 children - followed by a decline to 4.9 per 1000 in 2022. Several factors could explain these fluctuations. The spike observed in 2019 may be linked to targeted health initiatives or screening programs in specific regions, such as Central Kazakhstan, where an increase in diagnoses was noted between 2017 and 2019. Such programs could have temporarily raised the detection rate of various symptoms and abnormalities. Increased awareness among parents and healthcare professionals during specific periods might have also led to higher reporting rates, driven by public health campaigns emphasizing the importance of early childhood health [21]. Furthermore, environmental or social factors unique to certain regions or periods could have influenced these fluctuations, with economic stress, changes in social services, or environmental events temporarily affecting child health and diagnosis rates [22–24].

In contrast to the decline in mental and behavioral disorder diagnoses, the data reveals a substantial increase in autism spectrum disorder (ASD) diagnoses in Kazakhstan over the six-year period. Diagnoses of "Childhood Autism" increased fivefold, while those of "Atypical Autism" increased fourfold among children aged 0-17 years. This rise is likely due to improved awareness of ASD among parents and healthcare providers, coupled with enhanced diagnostic capacity. As global knowledge about autism has expanded, more children are being recognized and diagnosed earlier, contributing to the sharp increase in diagnoses [25]. Changes in diagnostic criteria, which have become more inclusive of a broader spectrum of symptoms, could also result in more children being diagnosed with ASD, including those with milder or atypical forms that might have been overlooked in the past. The increase in diagnoses may further reflect improvements in Kazakhstan's healthcare infrastructure, particularly in the area of specialized services for developmental disorders. As more facilities and professionals become equipped to diagnose and manage autism, diagnosis rates naturally rise. The data also highlights regional variations, with Central Kazakhstan experiencing different trends compared to the national average. This suggests that regional factors, such as differences in healthcare access, public health policies, or socio-economic conditions, might significantly influence diagnosis rates.

These observed trends have significant implications for public health in Kazakhstan. The decline in mental and behavioral disorder diagnoses among young children suggests improvements in early intervention and possibly a shift in focus toward prevention. However, the substantial increase in autism diagnoses indicates a growing need for specialized services and support systems for children with ASD and their families. The rise in autism diagnoses creates an urgent demand for specialized educational, behavioral, and medical services. Early intervention programs are crucial in improving outcomes for children with ASD, and Kazakhstan will need to continue expanding these services to meet the increasing need. The differences in diagnosis trends between Central Kazakhstan and the national average underscore the importance of addressing regional disparities in healthcare access and quality. Public health strategies must be tailored to regional needs to ensure equitable access to services across the country. The trends also emphasize the need for ongoing development and refinement of mental health policies in Kazakhstan, particularly those targeting early childhood. Integrating mental and behavioral health into primary healthcare services could help maintain and even accelerate the decline in disorder diagnoses. Furthermore, as the number of children diagnosed with autism rises, there is a growing need for widespread autism awareness campaigns and professional training. Educating the public and healthcare providers about the signs, symptoms, and management of ASD can facilitate earlier diagnosis and intervention, ultimately improving the quality of life for affected children [26,27].

Conclusions

The trends observed in mental, behavioral, and autism diagnoses among children in Kazakhstan reflect both positive developments and emerging challenges in the country's public health landscape. While the decline in mental and behavioral disorder diagnoses is encouraging, the significant rise in autism diagnoses necessitates a strategic response. Ensuring that Kazakhstan's healthcare system can meet the needs of all children, particularly those with developmental disorders, will require continued investment in healthcare infrastructure, professional training, and public awareness campaigns. Addressing regional disparities and ensuring equitable access to services across the country will be essential for the well-being of Kazakhstan's youngest citizens.

Conflict of interests. Authors declare the absence of a conflict of interest.

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Author contributions. Conceptualization – K.N.; methodology – K.N., B.O., M.L., and N.D.; formal analysis – K.N.; writing (original draft preparation) – K.N. and M.L.; writing (review and edition) – B.O. and N.D. All authors have read, agreed to release version of a manuscript and signed the Author's right transfer form.

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Жас балалардағы психикалық және мінез-құлық бұзылыстары саласындағы үрдістер және Қазақстанда аутизм диагноздарының өсуі: өзгерістердің онжылдығы

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Түйіндеме

Зерттеудің мақсаты: Бұл зерттеу 2012 жылдан 2022 жылға дейін Қазақстанда 0-5 жас аралығындағы балалар арасында психикалық және мінез-құлық бұзылыстарымен, соның ішінде аутизм спектрінің бұзылуымен сырқаттанушылық тенденцияларын зерттейді. Зерттеудің мақсаты-Орталық Азия контекстіндегі Қоғамдық денсаулық сақтау саясаты мен клиникалық тәжірибенің кеңірек салдарын түсіну.

Әдістері. Деректер Қазақстан Республикасы Денсаулық сақтау министрлігінің психикалық және мінез-құлық бұзылыстарының бастапқы диагноздарын, 0-5 жас аралығындағы балалардағы симптомдарды, белгілерді және дамуындағы ауытқуларды қамтитын статистикалық жылнамаларынан алынды. Талдау ұлттық және өңірлік деңгейлерге, әсіресе Орталық Қазақстанда ерекше назар аудара отырып, онжылдықтағы үрдістерді қамтыды.

Нәтижесі. 0-ден 5 жасқа дейінгі балалардағы психикалық және мінез-құлық бұзылыстарының жиілігі 2012 жылы 1000-ға шаққанда 1,2-ден 2022 жылы 1000-ға шаққанда 0,3-ке дейін тұрақты төмендеуді көрсетті. Симптомдар мен ауытқуларға байланысты диагноздар өзгеріп отырды, 2019 жылы айтарлықтай өсу байқалды (1000-ға 15,6), содан кейін 2022 жылға қарай 1000-ға 4,9-ға дейін төмендеді. Керісінше, ASD диагноздары айтарлықтай өсті, 2016 жылдан 2022 жылға дейін "Балалық аутизмнің" 5 есе және "атипті аутизмнің" 4 есе өсуі.

Қорытынды. Нәтижелер ерте балалық шақтағы психикалық және мінез-құлық бұзылыстарының диагностикасының төмендеуін көрсетеді, яғни Аутизм диагнозының айтарлықтай өсуімен салыстырғанда. Бұл тенденциялар қоғамдық денсаулық сақтаудың мақсатты стратегияларының, ерте араласудың кеңейтілген бағдарламаларының және Қазақстандағы аутизм үшін көбірек хабардарлық пен диагностикалық мүмкіндіктердің қажеттілігін көрсетеді. Өңірлік айырмашылықтар, әсіресе орталық Қазақстанда, бүкіл ел бойынша денсаулық сақтауға тең қолжетімділіктің маңыздылығын атап көрсетеді.

Түйін сөздер: аутизм спектрінің бұзылуы, психикалық денсаулық, ерте балалық шақ, Қазақстан, қоғамдық денсаулық, эпидемиология.

Тенденции в области психических и поведенческих расстройств у детей раннего возраста и рост числа диагнозов аутизма в Казахстане: Десятилетие перемен

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Резюме

Цель исследования: В этом исследовании изучаются тенденции заболеваемости психическими и поведенческими расстройствами, включая расстройства аутистического спектра, среди детей в возрасте от 0 до 5 лет в Казахстане с 2012 по 2022 год. Целью исследования является понимание более широких последствий для политики общественного здравоохранения и клинической практики в центральноазиатском контексте.

Методы. Данные были получены из статистических ежегодников Министерства здравоохранения Республики Казахстан, охватывающих первичные диагнозы психических и поведенческих расстройств, симптомы, признаки и отклонения в развитии у детей в возрасте от 0 до 5 лет. Анализ включал тенденции за десятилетие, уделяя особое внимание как национальному, так и региональному уровням, особенно в Центральном Казахстане.

Результаты. Заболеваемость психическими и поведенческими расстройствами у детей в возрасте от 0 до 5 лет показала устойчивое снижение с 1,2 на 1000 в 2012 году до 0,3 на 1000 в 2022 году. Диагнозы, связанные с симптомами и отклонениями, колебались, с заметным всплеском в 2019 году (15,6 на 1000), за которым последовало снижение до 4,9 на 1000 к 2022 году. Напротив, диагнозы РАС значительно возросли, с пятикратным ростом «детского аутизма» и четырехкратным ростом «атипичного аутизма» с 2016 по 2022 год.

Выводы. Результаты показывают снижение диагностики психических и поведенческих расстройств в раннем детском возрасте, контрастирующее со значительным ростом диагностики аутизма. Эти тенденции подчеркивают необходимость целевых стратегий общественного здравоохранения, расширенных программ раннего вмешательства и большей осведомленности и диагностических возможностей для аутизма в Казахстане. Региональные различия, особенно в центральном Казахстане, подчеркивают важность равного доступа к здравоохранению по всей стране.

Ключевые слова: расстройства аутистического спектра, психическое здоровье, раннее детство, Казахстан, общественное здоровье, эпидемиология.