



NIHCM YOUTH MENTAL HEALTH WEBINAR

ADDRESSING THE CRISIS OF CHILDREN'S MENTAL HEALTH

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US NATIONAL SCOPE: CHILDREN'S MENTAL HEALTH

73 million children
under 18 years of
age in US

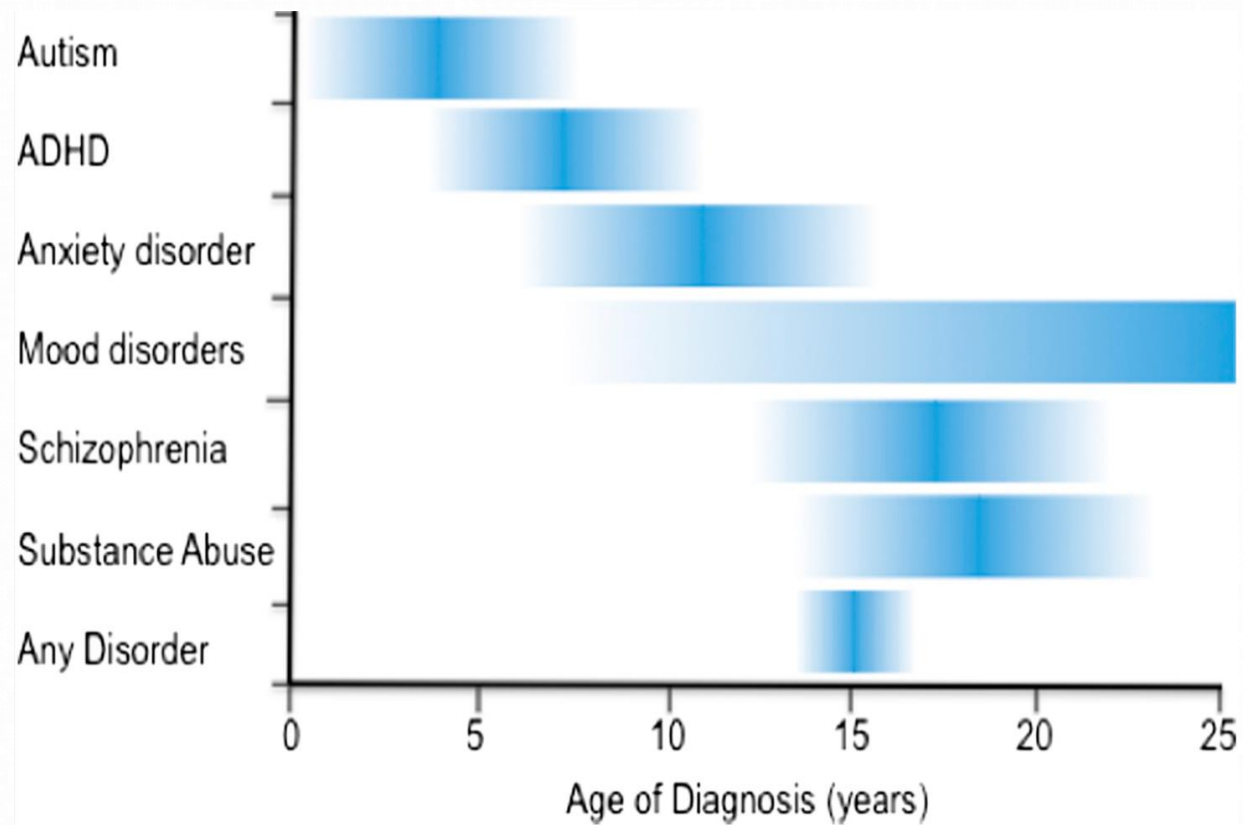
7.7 million children
with treatable mental
illness - less than $\frac{1}{2}$
received care

11 - year gap
between illness onset
and care initiation

22% of youth ages
13 to 18 experience
disease with severe
impairment during
lifetime

11% of 8-11 year
old's experience
severe impairment

PSYCHIATRIC DISORDERS ONSET DURING CHILDHOOD AND ADOLESCENCE



ACCESS TO CARE

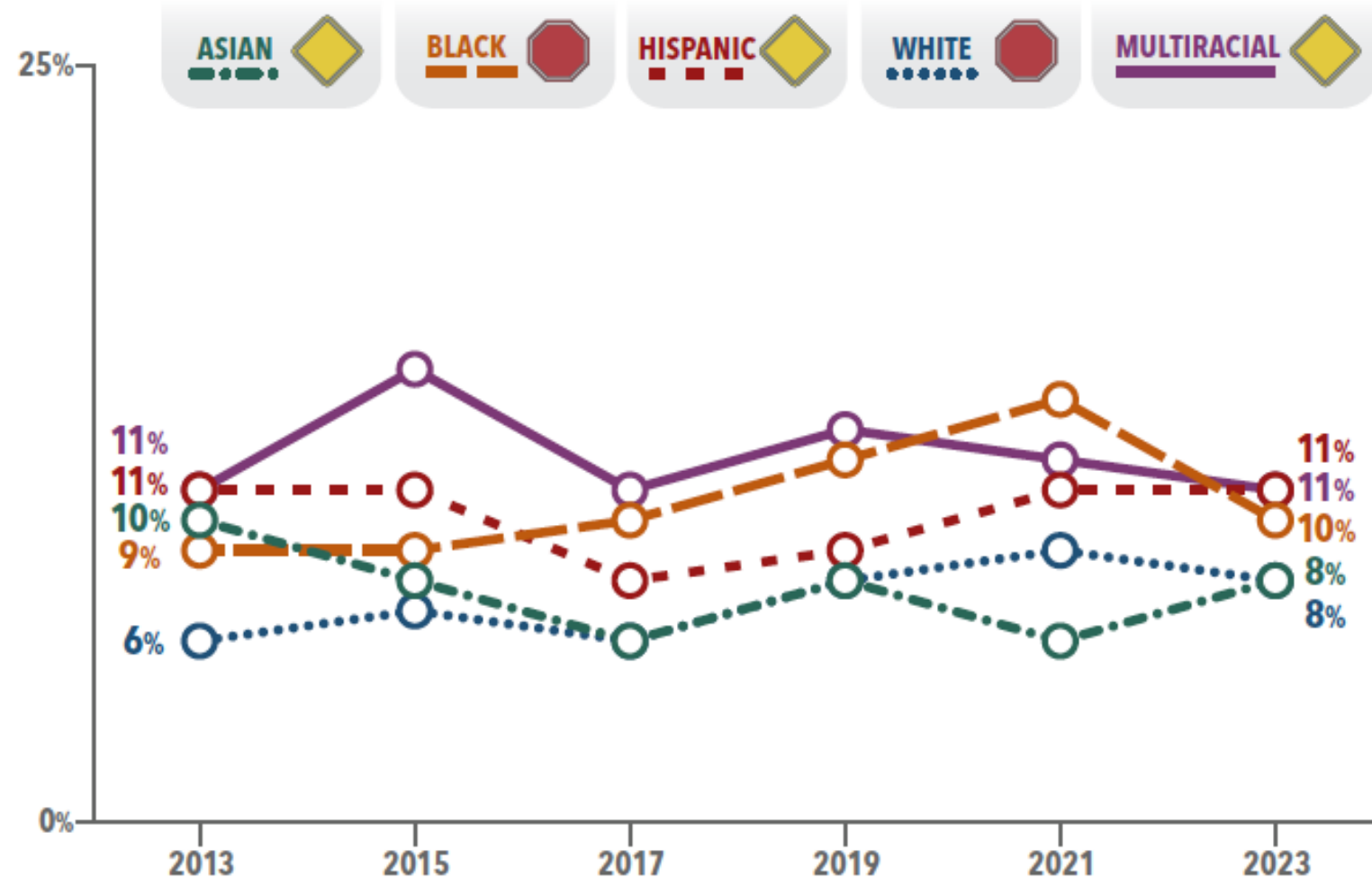
- 10-11 - YEAR GAP BETWEEN ILLNESS ONSET AND CARE INITIATION
- APPROXIMATELY 20% REPORT RECEIVING CARE (2021 -2022)
- 54% REPORT HAVING DIFFICULTY GETTING CARE
- 20% REPORT UNMET MENTAL HEALTH NEEDS
- FOR ADOLESCENTS WITH MDD, 40-50% REPORT NO MENTAL HEALTH TREATMENT IN THE LAST YEAR
- YOUNG CHILDREN: 2-8 YEARS , 72% OF FAMILIES REPORTED NOT BEING ABLE TO GET AN APPT OR LOCAL UNAVAILABILITY
- FAILURE TO RECEIVE TREATMENT FOR MENTAL HEALTH CONDITIONS WHEN IDENTIFIED IMPACTS LONG TERM OUTCOMES FOR. YOUTH THROUGHOUT THEIR LIFESPAN



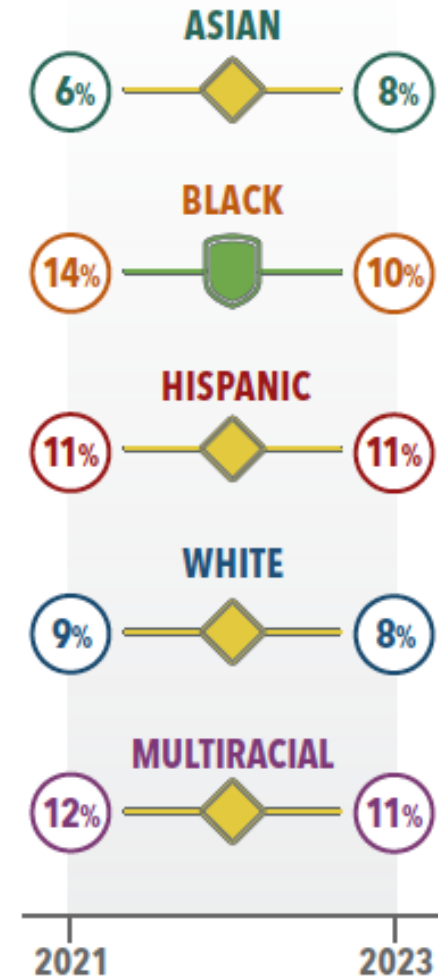
<https://www.cdc.gov/injury/wisqars/fatal.html>; WHITNEY DG, PETERSON MD. JAMA PEDIATRICS 2019; ANNIE E CASEY: YOUTH MENTAL HEALTH STATISTICS 2025;

CENTERS FOR DISEASE CONTROL AND PREVENTION. DATA AND STATISTICS ON CHILDREN'S MENTAL HEALTH. LAST REVIEWED MARCH 8, 2023. ACCESSED APRIL 5, 2026
[HTTPS://WWW.CDC.GOV/CHILDRENSMENTALHEALTH/DATA. HTML](https://www.cdc.gov/childrensmentalhealth/data.html); : MENG JF, WIZNITZER E. FACTORS ASSOCIATED WITH NOT RECEIVING MENTAL HEALTH SERVICES AMONG CHILDREN WITH A MENTAL DISORDER IN EARLY CHILDHOOD IN THE UNITED STATES, 2021–2022. PREV CHRONIC DIS 2024;21:240126. DOI: [HTTP://DX.DOI.ORG/10.5888/PCD21.240126](http://dx.doi.org/10.5888/pcd21.240126).

10-Year Trend by Race & Ethnicity



2-Year Change by Race & Ethnicity

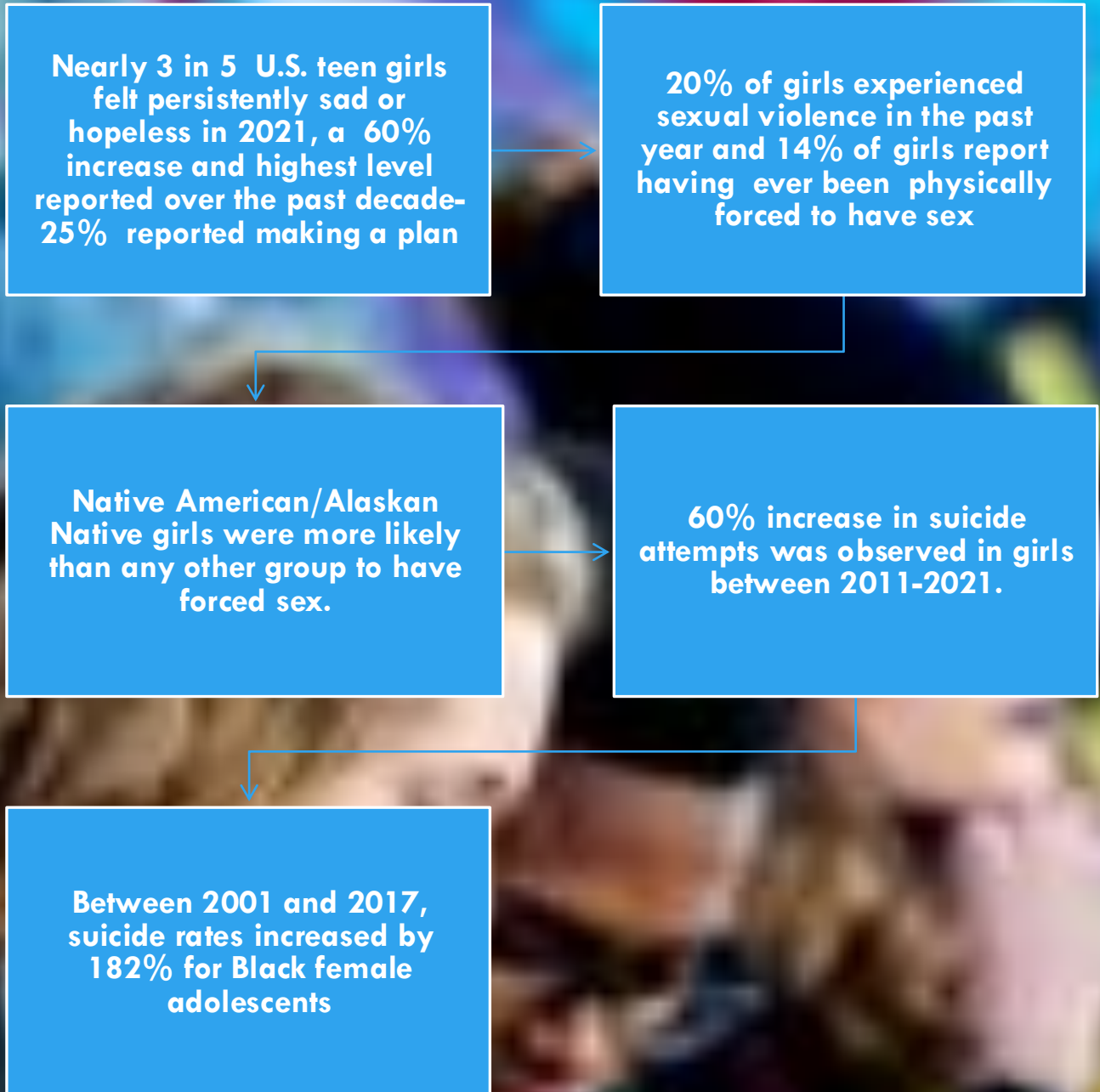


The percentage of Black students who attempted suicide increased from 2013 to 2023 but decreased from 2021 to 2023. The percentage of White students who attempted suicide increased from 2013 to 2023 but did not change from 2021 to 2023. The percentage of students from all other groups who attempted suicide did not change across both time periods.

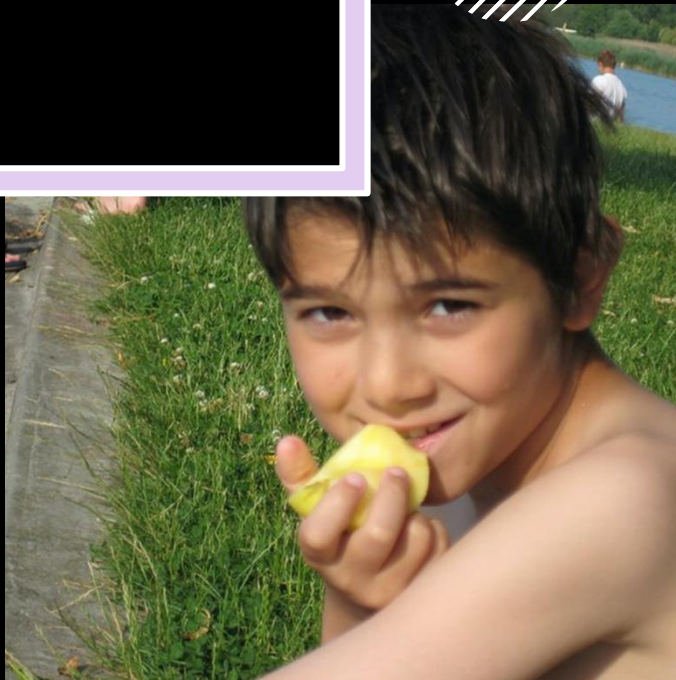
The Suffering Is Not Equally Distributed

Black, Latino, Native American/AAPI youth

- *significantly less likely to receive mental health or general medical services for mental disorders.*
- *More likely to experience trauma, have access to fewer services than non-minoritized peers,*
- *More likely to be poor, insured by Medicaid or uninsured*
- *More likely to present to Emergency Departments, and less likely to receive follow up mental health care following discharge*



BARRIERS TO MENTAL HEALTH CARE



WORK FORCE SHORTAGES: 70% OF COUNTIES
IN US WITHOUT CHILD PSYCHIATRISTS

FINANCIAL/INSURANCE: HEALTH PLANS LACK
ADEQUATE MENTAL HEALTH BENEFITS

LONG WAIT TIMES

SOCIAL/PERCEPTUAL: 85% OF YOUTH BELIEVE
THAT THEY COULD HANDLE THEIR OWN
PROBLEMS; STIGMA AND PRIVACY CONCERNS

DISPARITIES EXIST: BLACK AND HISPANIC YOUTH
LESS LIKELY TO RECEIVE MH
TREATMENT/MEDICATIONS

GEOGRAPHY: RURAL LESS LIKELY TO RECEIVE
TELEHEALTH OR SPECIALIST TREATMENT

INCOME DISPARITIES



AAP, AACAP, CHA declare national emergency in children's mental health

October 19, 2021



**Pediatricians, CAPs, and Children's
Hospitals Declare National Emergency**

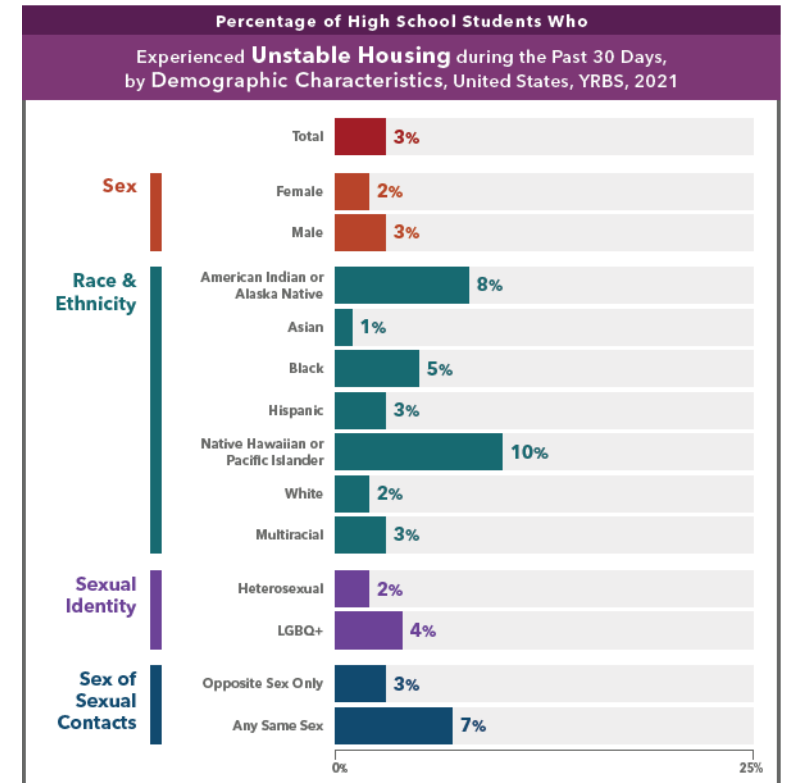
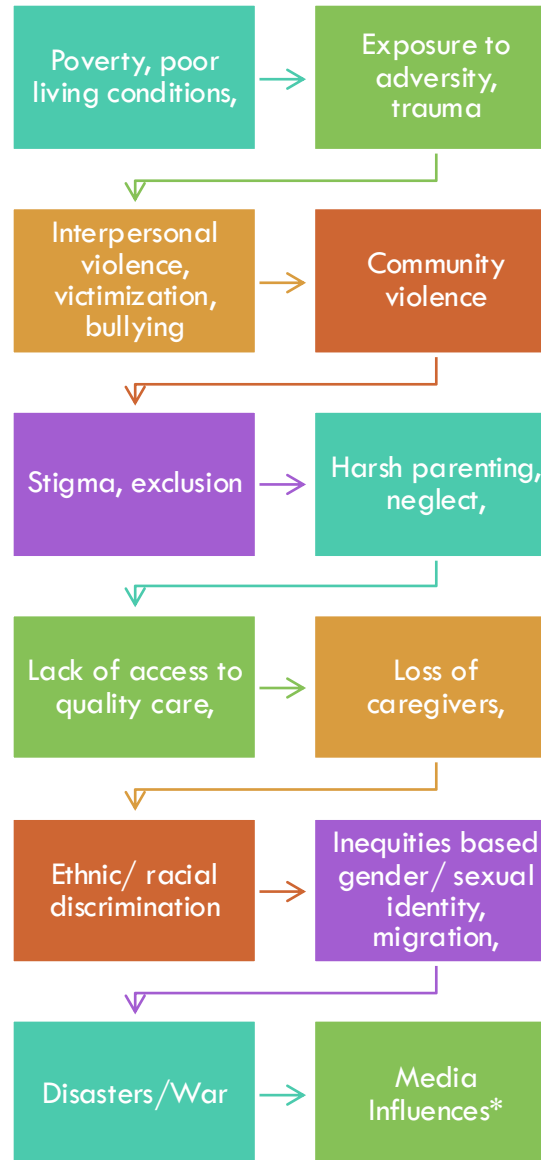
AACAP, AAP, and CHA call on policymakers
at all levels of government to act swiftly to
address mental health crisis.

U.S. Pediatricians, Psychiatrists Declare 'Emergency' in Child Mental Health

Youngsters already faced significant mental health challenges, and the pandemic has made them worse, leading child health care groups say.

Oct. 19, 2021, at 11:56 a.m.

FACTORS THAT DERAIL NORMAL SOCIAL AND EMOTIONAL DEVELOPMENT IMPOSE RISK FOR IMPAIRED MENTAL HEALTH



EFFECTIVE STRATEGIES EXIST FOR PREVENTION AND TREATMENT OF MENTAL HEALTH CONDITIONS

Prevention in primary care, schools and other community settings have demonstrated effectiveness

Parenting interventions are available to prevent onset and/or relapse of many mental health conditions

Psychotherapies to obtain remission are available for mental health disorders impacting children

Pharmacotherapies are available for pediatric mental health disorders impacting children- although not as many as for adults



WHAT MORE CAN WE DO? CREATIVE APPROACHES FOR EXPANDED ACCESS



Increasing the ease with which children and adolescents can work on their MH independently through digital self-help tools (Digital Health)



Creating more efficient first-response systems in MH care



Addressing the shortage of skilled MH workers by developing more efficient training and supervision mechanisms (non-specialist providers)

