Addressing the Mental Health Panorama for Child And Youth with Special Health Care Needs (CYSHCN)

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INTRODUCTION

• Child mental health is an emerging public health issue (CDC, 2019)
• According to the 2016 National Survey of Children’s Health, nearly 1 in 7 US children has a mental condition and half go untreated (Whitney et al, 2019, 389)
• 1 in every 5 children has a mental health, behavioral, or emotional disorder, but only 20% are treated (CDC, 2019)
• Moreover, another report published in 2019 discusses that children with complex care have more unmet needs

OBJECTIVE

• To assess how can we improve mental health in CYSHCN
• To explore how we can address inequities in health care that are prevalent in special health care, especially in underserved groups
• To analyze the use of technology, specifically telemedicine
• To predict family-centered models for children with complex needs that can be part of the solution to the mental health problem

METHODS

Using Pubmed, the methodology was adapted from the PRISMA guidelines

- Identified the inclusion/exclusion criteria
  • Rural/ underserved
  • Child Health
  • Telemental health
  • Telemedicine
- Searched for MeSH terms using the inclusion criteria. Then, built the search term appendix.
  • The abstracts were read. If they did not pertain to the topic or if they included exclusion criteria, then the articles were not used.
- Using Project ECHO: Autism data, the practitioners’ needs and future topics were analyzed

RESULTS

Figure 1: Depression, Anxiety, and Behavioral Disorders, by Age (CDC, 2019)

Table 1: Unmet need for therapy among children with ASD compared to other CSHCN (Benevides et al, 2015)

<table>
<thead>
<tr>
<th></th>
<th>ASD (n = 1,902)</th>
<th>Other CSHCN (n = 8,884)</th>
<th>p</th>
<th>r</th>
</tr>
</thead>
<tbody>
<tr>
<td>Received any mental health services in past year</td>
<td>90.3 [95.7-95.5]</td>
<td>88.1 [88.4-88.1]</td>
<td>&lt;.001</td>
<td>90.3 [95.7-95.5]</td>
</tr>
<tr>
<td>No</td>
<td>9.7 [4.2-15.3]</td>
<td>11.9 [8.9-15.3]</td>
<td></td>
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</tbody>
</table>

Figure 2: Distribution of Developmental and Behavioral Pediatrician (DBP) providers in the US (ABP, 2017)

“Moving knowledge not patients” – Project ECHO

SUMMARY

• CYSHCN have more unmet needs and they don’t get addressed
• There is a current shortage of medical specialists caring for CYSHCN
• The ECHO model has proven to be cost-saving, increase participant’s knowledge, and provides patient accessibility to quality healthcare
• Over 80% of Project ECHO participants mentioned that they want to know how to approach mental health issues such as diagnosis, screenings, and medication

CONCLUSIONS

• Teleconferencing programs may be a feasible model to improve mental health by moving knowledge not patients
• Based on participants’ needs, mental health educational programs are needed to improve provider’s knowledge and self-efficacy
• Evaluating effectiveness of teleconferencing programs challenges through research

STRENGTHS & LIMITATIONS

• There is overwhelming evidence that mental health is an issue in this country
• Telemedicine has addressed social determinants of health
• Teleconferencing programs benefit providers serving underserved and rural populations
• Measuring patient outcomes is a challenge due to the anonymous data
• More research data is needed in patient outcomes to improve current evidence and measure impact of this program

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