Mental Health of Adolescents in 2023

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1991 LA TIMES

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Simon Wile; Pediatrician Studied Emotional Illness

L.A. TIMES ARCHIVES MAY 29, 1991 12 AM PT

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Simon Wile, a pediatrician who made house calls for 52 years before retiring, has died in his Beverly Hills home.

Wile, who was 88 when he died Sunday night, was president emeritus of Reiss-Davis Child Study Center.

He had viewed with great dismay the rapid increase in emotional disturbances among his patients. He devoted much of his career to studying the emotional aspects of physical illnesses suffered by the thousands of children he had cared for.

Fifty percent of inmates in mental institutions were under 21, he told an interviewer on the eve of his 1979 retirement. One of seven children had a significant mental or emotional disorder, he said.

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- He had viewed with great dismay the rapid increase in emotional disturbances among his patients.
- He devoted much of his career to studying the emotional aspects of physical illness suffered by the thousands of children he cared for.
- On the eve of his 1979 retirement, he told an interviewer that 50% of patients in mental institutions were under 21, and 1 in 7 children had a significant mental or emotional disorder.
- His patients ranged from sons and daughters of farmers outside Chicago to the children of Hollywood stars.



1991 NEW YORK TIMES

Epe New Jack Sinnes https://www.nytimes.com/1991/06/26/us/study-finds-mysterious-rise-inchildhood-cancer-rate.html

Study Finds Mysterious Rise In Childhood Cancer Rate

By Natalie Angier June 26, 1991



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- The overall rate of cancer among children is mounting steadily.
- A new study reports the increase for the two most common childhood malignancies, leukemia and brain tumors, is particularly sharp.
- Some scientists say another potential risk factor may be electromagnetic radiation, like that emitted by television sets, toaster ovens, and other common household devices.
- Researchers continue to quarrel over the link between electricity and cancer, but even the skeptics admit that they cannot dismiss it out of hand, and studies of electromagnetism as a possible cancer risk factor are proceeding.



18 Years Later.....2008 Report of Pediatric Cancer Research

NIH Public Access

Published in final edited form as: Semin Oncol. 2008 October : 35(5): 484-493. doi:10.1053/j.seminoncol.2008.07.008.

Progress in Childhood Cancer: 50 Years of Research

Collaboration, A Report from the Children's Oncology Group

Maura O'Leary, MD, Mark Krailo, PhD, James R. Anderson, PhD, and Gregory H. Reaman, MD Childran's Oncology Group: Group Chair's Office, Belhesda Maryland; Group Operations Office and Stafstical and Data Center, Arcadia California and Omaha, Nebraska

Abstract

The Children's Oncology Group (COG) recently celebrated the milestone of 50 years of pediatric clinical trials and collaborative research in oncology. Our group had its origins in the four legacy pediatric clinical trials groups: the Children's Cancer Group, the Pediatric Oncology Group, the National Wilms' Tumor Study Group and the Intergroup Rhabdomyosarcoma Study Group which merged in 2000 to form the COG. Over the last 50 years, the survival rates for childhood cancer have risen from 10% to almost 80%. Outcome in Acute Lymphoblastic Leukemia (ALL) has gone from a six month median survival to an 85% overall cure rate. We have modified therapies in most major diseases to tudice remission with the least amount of long term seque lae. Here we look back on our advances but also look forward to the next 50 years which will produce even more successful treatments that will be tailored to the specific patient translating the tools of molecular genetics. Experience has clearly proven that everything we know about the diagnosis and management of childhood cancer is a result of research and the dramatic historical decrease in most lifty from childhood cancer is directly related to cooperative group clinical research.

> The Children's Oncology Group (COG) is an international research organization, supported principally by the National Cancer Institute (NCI). This group has evolved from the very first of the cooperative cancer clinical trials groups in 1955. Primarily through the conduct of clinical trials, COG is devoted to the development of new treatments and cures for the cancers of infants, children, adolescents, and young adults. In addition, the Group conducts research on the biology of these cancers, their causes, and the long-term outcomes of patients treated on group studies. COG membership includes over 5,000 pediatric cancer specialists in approximately 230 pediatric medical centers in the United States, Canada, Switzerland, the Netherlands, Australia, and New Zealand. At COG institutions, multidisciplinary teams consisting of physicians, basic scientists, nurses, psychologists, pharmacists and other specialists use their specialty skills in the diagnosis, management and investigation of childhood cancer. The mission of the COG is to cure and prevent childhood and adolescent cancer through scientific discovery and compassionate care. To accomplish its mission, the COG has several objectives that include the design and conduct of clinical trials to define the optimal treatment of pediatric cancers, the conduct of correlative laboratory investigations which are expected to translate into new, more effective and less toxic therapies, the conduct of epidemiologic investigations to identify possible associations and causes of childhood cancer for eventual therapeutic

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- Over the last 50 years, the survival rates for childhood cancer have risen from 10% to almost 80%.
- Outcome in Acute Lymphoblastic Leukemia (ALL) has gone from a six month median survival to an 85% overall cure rate.
- We have modified therapies in most major diseases to induce remission with the least amount of long term sequelae.

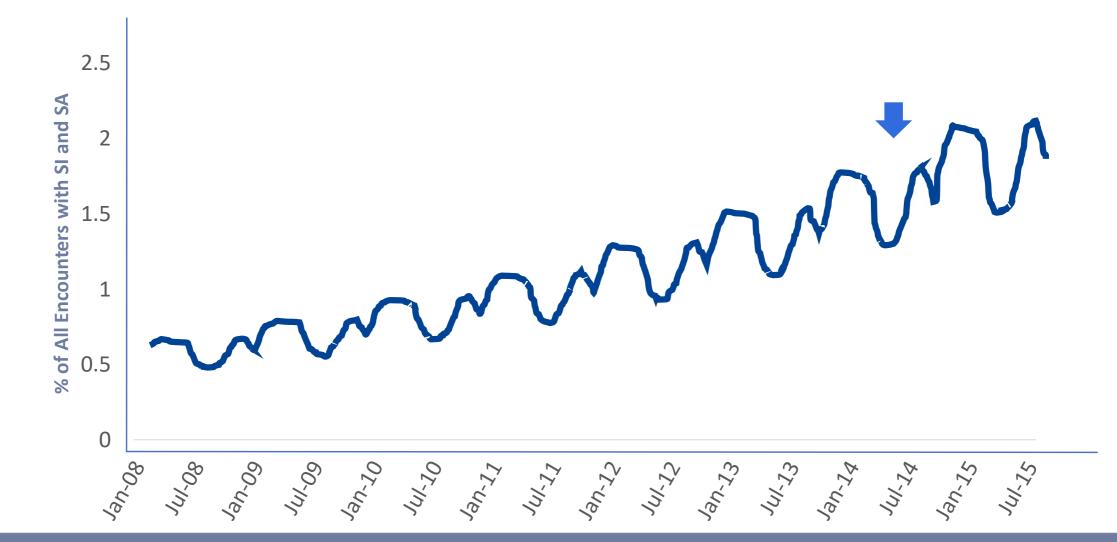


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Pinancial Disclosure Obligations: None

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Suicide Encounters Across 31 US Children's Hospitals (2008 – 2015) Plemmons et al 2018





30 Years after 1991 New York Times Report

NATIONAL CANCER INSTITUTE 2021

- In FY 2021, funds available to the NCI totaled \$6.35 billion, including:
 - \$50 million for the Childhood Cancer Data Initiative
 - \$28 million for Childhood Cancer Survivorship, Treatment, Access, and Research (STAR) Act.
- This reflects an increase of 1.6% and \$99.3 million from the previous fiscal year.

AMERICAN CANCER SOCIETY 2023

- How common is pediatric cancer?
- About 9,910 children in the United States under the age of 15 will be diagnosed with cancer in 2023.
- Childhood cancer rates, which rose slightly for the past few decades, have stabilized since 2010.
- Survival rates for pediatric cancer
- Because of major treatment advances in recent decades, 85% of children with cancer now survive 5 years or more.



30 Years After 1991 LA Times Report

CDC 2021 Youth Risk Behavior Survey

- How common is pediatric depression?
- In 2021, 44% of high school students reported feeling so sad or hopeless that they could not engage in their regular activities for at least two weeks during the previous year.
- On average, 15 million US adolescents are enrolled in high school, therefore 44% of high school students amounts to over 6 million adolescents who feel sad and hopeless.
- Almost 60% of female students experienced persistent feelings of sadness or hopelessness during the past year and nearly 25% made a suicide plan.
- Close to 70% of LGBQ+ students experienced persistent feelings of sadness or hopelessness during the past year and more than 50% had poor mental health during the past 30 days. Almost 25% attempted suicide during the past year



Systemic Challenges in Mental Health



Historic Stigma

Plaguing investment in mental health services



Untreated Disorders

Undiagnosed issues with downstream adverse effects



Workforce Gaps

A shortage of services driven by a lack of funding

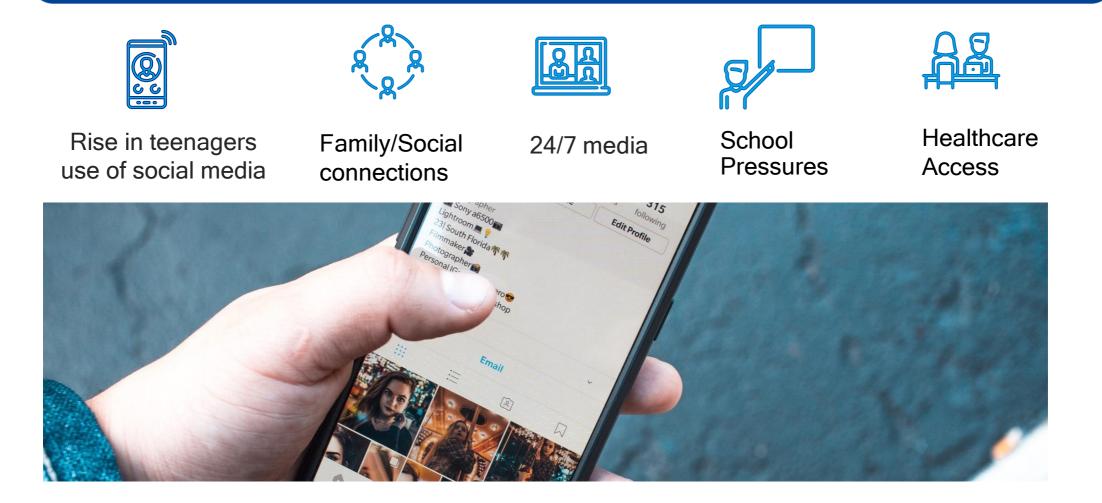


Healthcare Inequities

Racial, geographic and socio-economic disparities



Social Determinants of Health



9



All Stacked Up And No Place To Go

Psychiatric patients are being warehoused in Portland's emergency rooms in growing numbers.

In Psychiatric Emergencies, Emergency Rooms Not Always Safe

Communities need specially-designed psychiatric emergency departments. Private insurance companies should provide more and better community care for persons with psychiatric problems, and more community alternative programs for persons in emotional distress should be developed.

02/04/2013 02:57 pm ET I Updated Apr 06, 2013

Most ER Doctors Don't Believe The Mental Health System Is Working For Patients



Report: Pa. hospitals in need of psychiatric care beds

by Patti Mengers Jan 16, 2014 Comments



mental illness, failing to receive the care they most desperately need.

Boston Children's Pediatric Mental Health Emergencies – FY 2023

Variable	FY 2023 (Q1)
	N (%)
Total Mental Health Presentations	489
Adolescents (12 – 17 years)	386 (79%)
Female sex	305 (62%)
Cisgender	426 (87%)
Past Mental Health History	415 (85%)
Presenting problem: suicide ideation/self-harm	323 (66%)
Presenting problem: physical aggression	150 (31%)



Where the world comes for answers

Adolescent Health – 2023 CDC Report

CDC 2021 Youth Risk and Behavior Survey

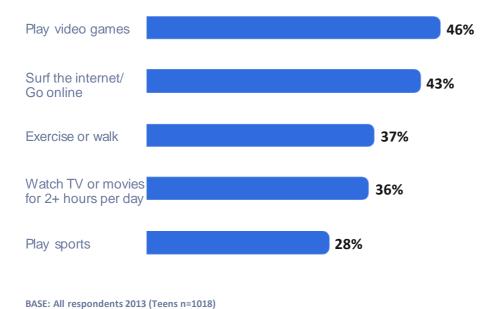
- Increase experiences of violence
- increases in the proportion of youth who did not go to school because of safety concerns
- increases among female students experiencing sexual violence by anyone and being forced to have sex
- decrease protective sexual behaviors (i.e., condom use, sexually transmitted disease (STD) testing, and HIV testing)
- increases among male students experiencing electronic bullying.
- Missing from CDC Youth Assessment? SCREEN TIME/SOCIAL MEDIA USE!
- A growing body of evidence has found that teen brains can be structurally changed by spending long spans of time playing games, watching videos and other activities on digital screens (i.e., "screen time").
- The COVID-19 pandemic led to youth having higher screen time
- What is concerning is that data show screen time has not decreased after seclusion measures were lifted



Teenagers and Technology

More teens engage in sedentery activities to cope with stress than physical activities

STRESS MANAGEMENT TECHNIQUES OF TEENS



A 2022 Pew Research Center survey of 13-17 year-olds

97% Use the internet daily

46% are online almost constantly

More than half of US teens have experienced cyberbullying online or on their cellphones



Adolescent Mental Health – 2023 CDC Report

CDC 2021 Youth Risk and Behavior Survey

- Risky sexual behavior (ever and current sexual activity and having four or more lifetime sexual partners)
 - Sexual behaviors improving for all students, but especially for Black and Hispanic students
 - Proportion of Asian students who engage in risky sexual behaviors is significantly lower than their peers from other racial and ethnic groups.
- Substance use
- Black students less likely than almost all other students to currently use alcohol, but more likely than Asian, Hispanic, or White students to currently use marijuana
- Bullying
- Decrease in the proportion of youth who were bullied at school.
- Black students were less likely than most other groups to experience bullying at school.





Long Term Outcomes of Adolescent Depression (Copeland et al 2021)

- 1336 individuals prospectively assessed from childhood into adulthood (1993 2015)
- Childhood/adolescent depression associated with elevated rates of adult anxiety, depression and substance abuse disorders.
- Childhood/adolescent depression status is also associated with worse adult functional outcomes:
 - worse physical health
 - risky/criminal behavior
 - early parenthood
 - reduced educational attainment
 - unemployment and reduced financial attainment
 - impaired social function.
- Major public health burden



Long Term Outcomes of Adolescent Depression (Copeland et al 2021)

- Adolescent-onset depression is more strongly associated with adult outcomes compared to childhood-onset depression
- Surprisingly, the depression-adult outcome associations do not show a clear sex-specific pattern, given that females are twice as likely to be depressed in adolescence.
- The cumulative exposure to depression and depressive symptoms is as important as whether a child/adolescent ever met criteria for depression.
- It is not merely a diagnosis of depression that is associated with long-term outcomes, but the persistence of elevated levels of depressive symptoms (such as described in the CDC YRBS).
- Use of specialty mental health services among children/adolescents with depression was associated with lower risk for any adult psychiatric disorder, particularly anxiety disorder, but not with improved functional outcomes.



Where the world comes for answers

2022 Federal Goals for Mental Health Reform

- Expanding the Mental Health Workforce \$700m in program funding to expand the pipeline
- **Provider Burnout** signing of the Lorna Breen Health Care Provider Protection Act into law, which includes \$135m in investments to train providers on suicide prevention and behavioral health, among other priorities.
- Training a Diverse Group of Paraprofessionals "major new multi-year funding" to support mental health transformation. Award \$225m in training programs to increase the number of community health workers (CHWs) and other health support workers
- **Peer Specialists** Development and support of a national certified peer specialist program, integrating peer mental health workforce professionals as part of the broader strategy
- **Tele-and Virtual Mental Health** Work with Congress to ensure coverage of tele-behavioral health across health plans and support the delivery of telemedicine across state lines.
- Mental Health Parity Proposes behavioral health consumer protections such that all health plans cover robust behavioral health services with an adequate provider network



2022 Federal Goals for Mental Health Reform

- "988" Crisis Response Line Outlines an additional \$700m to staff the mental health service crisis hotline
- Primary Care and Mental Health Integration Doubles the funding for primary and mental health integration programs; plans to test payment models supporting whole-person care via health integration
- Online and Social Media Efforts Outlines a broader strategy encompassing online protections for youth and investments in research on social media's mental harm on youth
- Mental Health Support in Schools Provides \$1b to help schools hire additional counselors and other health professionals
- Early Childhood and School-Based Interventions Expands early childhood and school-based intervention services and supports with an infusion of more than \$70m.



Massachusetts Behavioral Health Roadmap

ural Support for Access	Centralized Front Door to Treatment	An easy way for anyone seeking behavioral health treatment to find and access the treatment they need, through a central phone line
	Access to Provider Networks & Services through Insurance	Strengthened behavioral health provider networks and expanded behavioral health service coverage in both MassHealth and private insurance
	Administrative Simplification	Dramatically simplified and standardized administrative processes to reduce provider burden and make provider participation in MassHealth/insurance easier
Structural	Workforce Competency	Targeted support to increase competency and diversification of clinical + non clinical workforce; increase provider participation in insurance , including MassHealth
Treatment Services	Integrated	New payment models and incentives for PCPs that integrate behavioral health
	Primary Care	treatment to promote early intervention, increase access, and reduce siloes
	Outpatient Treatment	Community Behavioral Health Centers with access to real-time urgent care and evidence-based, integrated mental health and addiction treatment for all ages
	Urgent/ Crisis Treatment	24/7 community crisis response to avoid ED visits and hospitalization through 24/7 on-site and mobile crisis intervention; 24/7 Crisis Stabilization for youth and adults
	Acute/24-hour Treatment	More inpatient psychiatric beds; strengthens 24-hour substance use disorder treatment to address co-occurring needs and better meet patient needs



Where the world comes for answers

7

Massachusetts Behavioral Health Roadmap Components



Other investments/reforms: inpatient bed capacity & expand Masshealth coverage





A Case Study



- In 1997, a Black girl was born in Columbus, Ohio the third child of four children.
- Her biological father left the family when she was very young and her biological mother struggled with drug and alcohol problems.
- The girl and her three siblings were often left hungry in her early life, with a stray cat who roamed the house given food over them. "She always fed it but she never fed us," she said of her biological mother.



A Case Study



- After neighbors raised concerns with social workers, the girl and her siblings were all placed in foster care.
- They were in and out of the foster care system experiencing social, economic hardship and academic disruption until they were adopted by family members several years later.
- The girl was diagnosed with ADHD during childhood.
- At the age of 6, she became involved in sports.
- However, as a teenager, she was sexually molested by a trusted adult.



Childhood Protective Factors (SAMHSA)





Simone Biles: A Portrait of Resilience



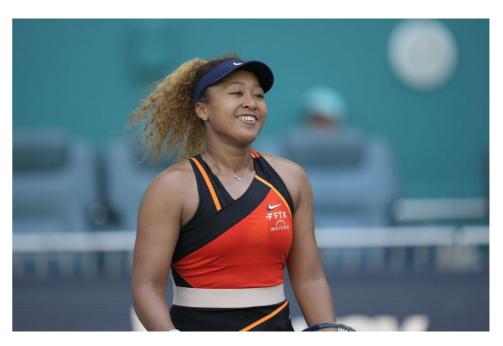






Young Adult Mental Health Advocates







All Hands on Deck for Mental Health!





Thank You



