

# Children's Mental Health

## DEFINITION

*Children's mental health* is the number of acute care hospitalizations of children under age 18 with a primary diagnosis of a mental disorder. Hospitalization is the most intensive type of treatment for mental disorders and represents only one type of treatment category on a broad continuum available to children with mental health concerns in Rhode Island.

## SIGNIFICANCE

Mental health in childhood and adolescence is defined as the achievement of expected developmental, cognitive, social, and emotional milestones and the ability to use effective coping skills. Mental health influences children's health and behavior at home, in school, and in the community. Mental health conditions can impair daily functioning, prevent or affect academic achievement, increase involvement with the juvenile justice and child welfare systems, result in high treatment costs, diminish family incomes, and increase the risk for suicide. Children with mental health issues are also likely to have other chronic health conditions.<sup>1,2,3,4</sup>

Mental health problems affect children of all backgrounds. In 2022, more than one in four (28.7%) children ages three to 17 had a mental, emotional, or behavioral health problem in Rhode Island.<sup>5</sup> However, many

children and youth have trouble getting mental health treatment. In Rhode Island in 2022, more than half (59%) of children ages three to 17 who needed mental health treatment or counseling had a problem obtaining needed care.<sup>6</sup>

Risk factors for childhood mental health disorders include environmental factors like prenatal exposure to toxins (including alcohol), physical or sexual abuse, adverse childhood experiences, toxic stress, a family history of mental health issues, involvement with the juvenile justice and child welfare systems, and living in poverty.<sup>7,8,9</sup>

Nationally, children and youth were experiencing mental health challenges before the COVID-19 pandemic, but since the onset of the pandemic, the number of children experiencing anxiety and depression has increased.<sup>10</sup> In 2022, Rhode Island pediatric and behavioral health organizations declared a Child and Adolescent Mental Health State of Emergency.<sup>11</sup> Kids' Link RI, a behavioral health triage service and referral network, saw an increase in calls during the pandemic. In FY 2023, there were 7,921 calls to Kids' Link RI. The number of calls peaked in FY 2021 (9,702), when there were twice as many calls received as in FY 2019, before the onset of the pandemic (4,849).<sup>12,13</sup>



## Continuum of Mental Health Care Throughout the Life Course

★ Mental health systems tend to be crisis-driven with disproportionate spending on high-end care and inadequate investments in prevention and community-based services.<sup>14,15,16</sup> Increasing the availability of outpatient services could reduce dependency on higher-end care by intervening prior to mental health crises.<sup>17</sup> Collaboration across systems connected to youth mental health needs -- primary care/pediatrician offices, schools, community organizations, child welfare programs, and child care centers -- is crucial.<sup>18,19</sup>

★ In Rhode Island, Community Mental Health Organizations (CMHOs) are the primary source of public mental health treatment services for children and adults.<sup>20</sup> During 2023, 4,399 children under age 18 were treated at CMHOs.<sup>21</sup> Rhode Island also has a growing number of Certified Community Behavioral Health Clinics (CCBHCs) that provide a comprehensive range of services to individuals with behavioral health needs.<sup>22</sup>

★ Mental health conditions and mental wellness must be addressed throughout all stages of life, including early childhood and as youth transition to adults.<sup>23</sup> Infants who do not develop secure attachment with at least one caregiver are at risk for learning delays, relationship dysfunction, difficulty expressing emotions, and future mental health disorders.<sup>24,25</sup> Children with mental health diagnoses often continue to have mental health needs and require a proper transition into the adult behavioral health system.<sup>26</sup>



## Disparities in Mental Health Needs and Care

★ Children living in poverty are two to three times more likely to develop mental health conditions than their peers.<sup>27</sup> In State Fiscal Year (SFY) 2023, 25% (32,597) of children under age 19 enrolled in Medicaid/RIte Care had a mental health diagnosis.<sup>28</sup>

★ In SFY 2023, 959 children under age 19 enrolled in Medicaid/RIte Care were hospitalized due to a mental health related condition (down from 1,096 in SFY 2021), and 2,598 children had a mental health related emergency department visit (up from 2,246 in SFY 2021).<sup>29</sup>

★ In 2023, LGBTQ+ Rhode Island high school students reported higher rates of sadness and hopelessness than their peers.<sup>30</sup> LGBTQ+ students, as well as Youth of Color, are more likely to have had their mental health impacted by the COVID-19 pandemic and have additional barriers to accessing and receiving adequate mental health treatment.<sup>31</sup>

## Psychiatric Hospitals

Children Under Age 18 Treated at Rhode Island Psychiatric Hospitals, October 1, 2022 – September 30, 2023 (FFY 2023)

	BRADLEY HOSPITAL GENERAL PSYCHIATRIC SERVICES		BRADLEY HOSPITAL DEVELOPMENTAL DISABILITIES PROGRAM		BUTLER HOSPITAL ADOLESCENT PSYCHIATRIC SERVICES	
	# TREATED	AVERAGE LENGTH OF STAY	# TREATED	AVERAGE LENGTH OF STAY	# TREATED	AVERAGE LENGTH OF STAY
Inpatient	551	33 days	116	54 days	545	9 days
Residential	144	84 days**	39	5.1 years	--	--
Partial Hospitalization	893	42 visits	130	42 visits	785	5 visits
Home-Based	0	NA	19	16 visits	--	--
Outpatient**	3,903	NA	45	NA	368	NA

Source: Lifespan, 2022-2023 and Butler Hospital, 2022-2023. Programs can have overlapping enrollment. Number treated is based on the hospital census (i.e., the number of patients seen in any program during FFY 2023). The average length of stay is based on discharges. \*\*Outpatient services includes Bradley and Hasbro Outpatient Services.

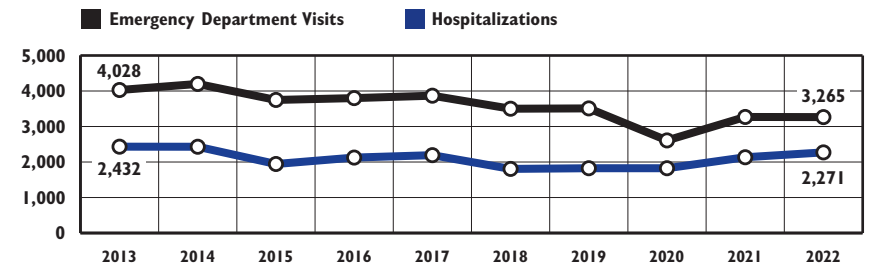
-- = Service not offered. NA = Data not available for this service.

★ The two hospitals in Rhode Island that specialize in providing intensive inpatient treatment and psychiatric care to children and youth are Bradley Hospital and Butler Hospital.<sup>32</sup> The most common diagnoses for youth treated at Butler or Bradley Hospitals in FFY 2023 in an inpatient setting were depressive disorders, anxiety disorders, adjustment disorders, and childhood/adolescent disorders.<sup>33,34</sup>

★ In Federal Fiscal Year (FFY) 2023, there were 673 children and youth awaiting psychiatric inpatient admission (psychiatric boarding), compared to FFY 2022 when there were 1,144 boarders. The average wait time for psychiatric admission in FFY 2023 was 3.5 days, compared to 6.2 days in FFY 2022. In FFY 2023, an average of two children per day were ready to leave the psychiatric hospital but were unable due to a lack of step-down availability or there being no other safe placement (including at home).<sup>35,36</sup>

★ Bradley Hospital has a Developmental Disabilities Program that offers highly specialized inpatient and residential services to children and adolescents who show signs of serious emotional and behavioral problems in addition to developmental disabilities. Lifespan School Solutions owns and operates six Bradley schools and four community-based classrooms/public school partnerships. The programs had an average daily enrollment of 396 students in FFY 2023.<sup>37</sup>

## Emergency Care for Primary Diagnosis of Mental Disorder, Children Under Age 18, Rhode Island, 2013-2022\*



Source: Rhode Island Department of Health, Hospital Discharge Database, 2013-2022. \*Data are for emergency department visits and hospitalizations, not children. Children may visit the emergency department or be hospitalized more than once. Emergency department counts include all visits regardless of outcome and are not comparable to previous Factbooks. Note: Effective October 1, 2015, the International Classification of Disease (ICD) codes changed from the 9th classification to the 10th classification, which may impact comparability across the years.

★ In 2022, there were 3,265 emergency department visits and 2,271 hospitalizations of Rhode Island children with a primary diagnosis of mental disorder.<sup>38</sup> Of these emergency department visits, 60% were of children enrolled in RIte Care/Medicaid and 36% had commercial insurance.<sup>39</sup>

## Suicide Among Rhode Island Children and Youth

★ Children and youth with mental health conditions are at increased risk for suicide.<sup>40</sup> In 2023, 36% of Rhode Island high school students reported feeling sad or hopeless for more than two weeks during the past year. Girls were twice as likely as boys to report these feelings. In 2023, 9% of Rhode Island high school students reported attempting suicide one or more times during the past year.<sup>41</sup>

★ In Rhode Island between 2018 and 2022, there were 2,448 emergency department visits and 1,349 hospitalizations of youth ages 13 to 19 due to suicide attempts or intentional self-harm.<sup>42</sup> Suicidal or self-injurious behavior accounted for 10% of the reasons for calls to Kids’ Link RI during FY 2023.<sup>43</sup>

★ Twelve children ages 15 to 19 died due to suicide in Rhode Island between 2018-2022.<sup>44</sup>

(References are on page 179)