



Mindfully Navigating the Mental Health Care Needs of our Pediatric and Young Adult Patients in and after a Pandemic

Saturday, November 13, 2021
11:00 a.m. – 12:00 p.m.

Aaron McGuffin, MD & Cade Walker, OMS-IV

Presentation Disclosures

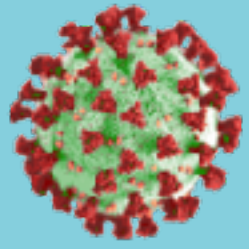
- **DISCLOSURES:**
 - We have no disclosures.

Learning Objectives :

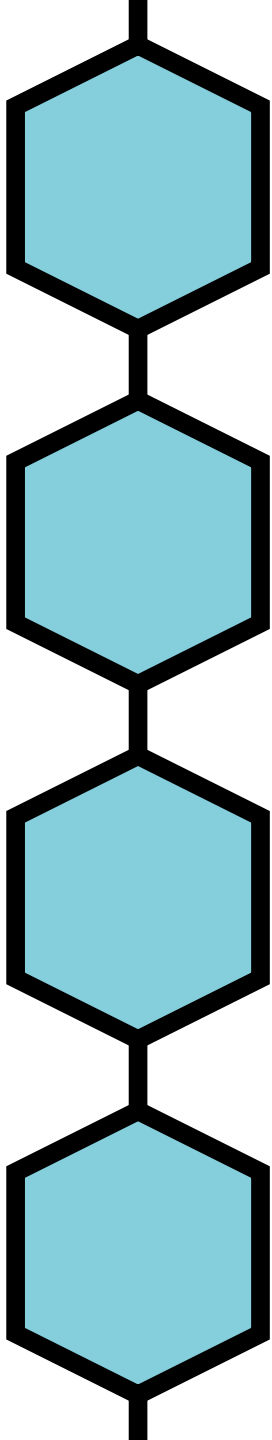
- 1. Describe the change in mental health statistics for children and young adults during the COVID pandemic.
- 2. Discuss the mental health impact on the lives of children and young adults during the COVID pandemic.
- 3. Describe how to assess for ongoing mental health concerns for children and young adults.
- 4. Discuss potential interventions to assist with mental health needs for children and young adults.

Change in
mental health
statistics for
children and
young adults
during the
COVID
pandemic.

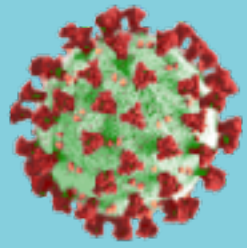




Studies Timeline



Recent Studies on Mental Health In Children During the COVID-19 Pandemic



Studies Timeline

Later Data

2020

China: Mental Health among Children in Home Confinement

2020

Texas: Change in Youth Mental Health in a Majority Hispanic/Latinx Sample

2021

Pediatric ED Visits for Mental Health Conditions

August 9,
2021

Meta analysis, combining 29 studies, on Global Prevalence of Depression & Anxiety in Children

JAMA Network

JAMA Pediatrics

Search All Enter Search Term

Research Letter

April 24, 2020

Mental Health Status Among Children in Home Confinement During the Coronavirus Disease 2019 Outbreak in Hubei Province, China

More ▾

Xinyan Xie, BA¹, Qi Xue, MPH¹, Yu Zhou, BA¹, et al

> Author Affiliations | Article Information

JAMA Pediatr. 2020;174(9):898-900 doi:10.1001/jama.pediatrics.2020.1619



https://upload.wikimedia.org/wikipedia/commons/thumb/a/ab/China_Hubei.svg/1000px-China_Hubei.svg.png

April 24, 2020

- One of the first signals that Child Mental Health was being affected by COVID-19 pandemic
- 1,784 children, grades 2-6 in Wuhan and Huangshi, restricted within home
- Tools used:
 - Children's Depression Inventory
 - Screening for Anxiety
- Primary Findings:
 - 18% acknowledged elevated anxiety
 - 37% with moderate worry of being infected by virus
 - 22% acknowledged elevated depressive symptoms
 - 52% with moderate worry of being infected by virus

Xie X, Xue Q, Zhou Y, et al. Mental Health Status Among Children in Home Confinement During the Coronavirus Disease 2019 Outbreak in Hubei Province, China. *JAMA Pediatr.* 2020;174(9):898-900. doi:10.1001/jama.pediatrics.2020.1619

Change in Youth Mental Health During the COVID-19 Pandemic in a Majority Hispanic/Latinx US Sample

Francesca Penner¹, Jessica Hernandez Ortiz¹, Carla Sharp²

Affiliations + expand

PMID: 33359408 DOI: 10.1016/j.jaac.2020.12.027



https://upload.wikimedia.org/wikipedia/commons/thumb/c/cc/Map_of_USA_TX.svg/1280px-Map_of_USA_TX.svg.png

April, 2020

- 322 children, grades 5-8, 72% Hispanic/Latinx
- Performed Pre & Post Stay-at-home orders
- Primary Findings:
 - Parent portion:
 - 28% reported feeling stressed
 - Student portion:
 - 24% reported feeling stressed
 - 26% reported feeling lonely
 - 49% reported contacting friends via technology
 - Lower mental health symptoms within better family functioning, supporting research that identifies better family functioning as a protective factor.

Morbidity and Mortality Weekly Report (*MMWR*)

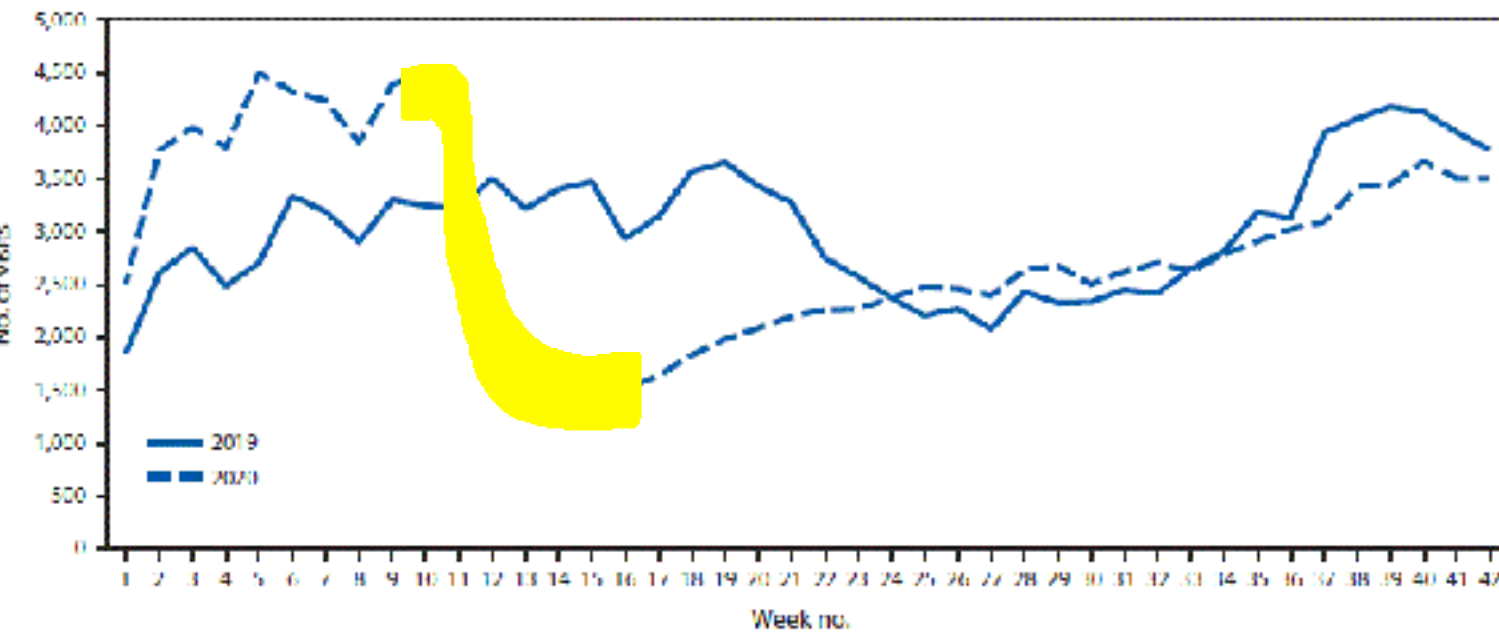
Mental Health–Related Emergency Department Visits Among Children Aged <18 Years During the COVID-19 Pandemic — United States, January 1–October 17, 2020

Weekly / November 13, 2020 / 69(45);1675–1680

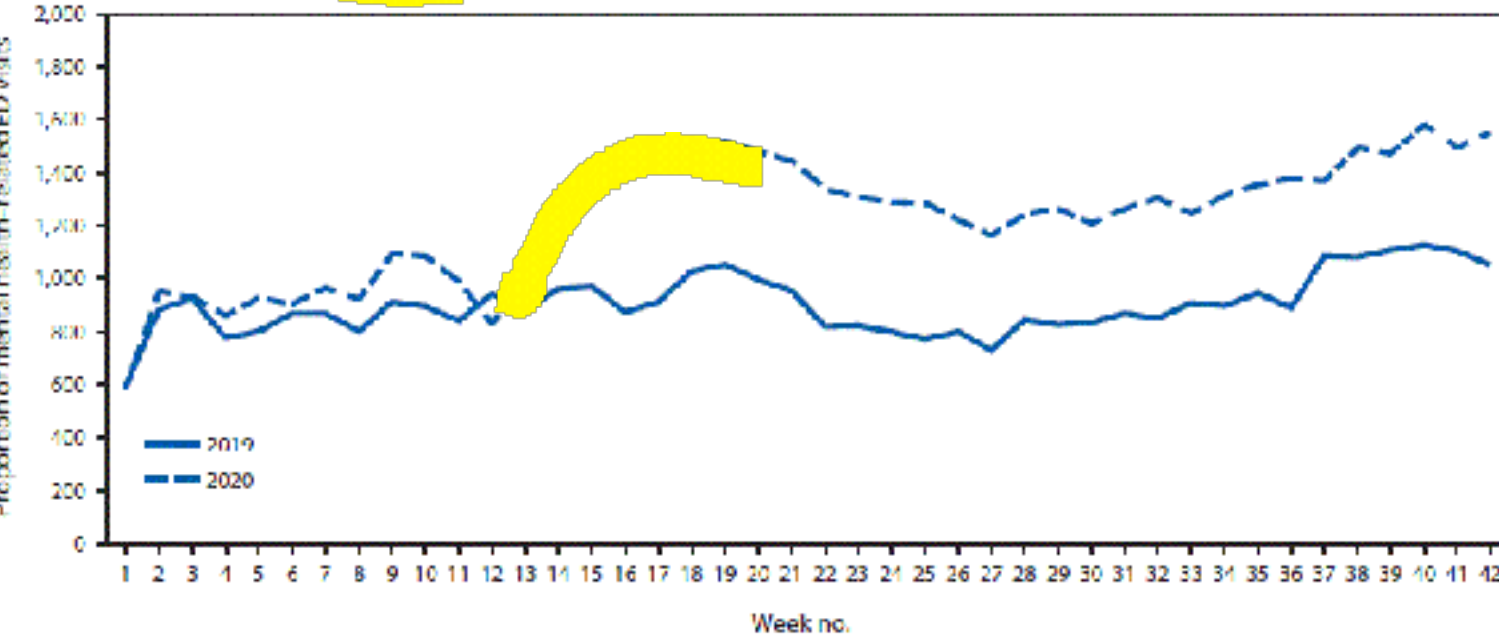
Rebecca T. Leeb, PhD¹; Rebecca H. Bitsko, PhD¹; Lakshmi Radhakrishnan, MPH²; Pedro Martinez, MPH³; Rashid Njai, PhD⁴; Kristin M. Holland, PhD⁵ ([View author affiliations](#))

- Children Mental Health Visits to the Emergency Department
- Comparison of 2019 visits to 2020 visits
- January 1, 2019 - October 17, 2020
- Primary Findings:
 - Despite a 43% decreased in ED visits in children <18 years old following school closures, there was a 66% proportional increase in mental health visits

A. Mental health related ED visits



Proportion of mental health-related ED visits



- March 16 to April 11
 - 120% decrease in number of Mental Health ED visits of children

- April 14 to April 21
 - 70% increase in proportion of visits for MH were increased
 - 70% increase in Mental Health ED visits of children

US Pediatric Emergency Department Visits for Mental Health Conditions During the COVID-19 Pandemic

Polina Krass^{1 2 3}, Evan Dalton^{3 4}, Stephanie K Doupnik^{3 4 5 6}, Jeremy Esposito^{6 7}

Affiliations + expand

PMID: 33929525 PMCID: PMC8087951 DOI: 10.1001/jamanetworkopen.2021.8533

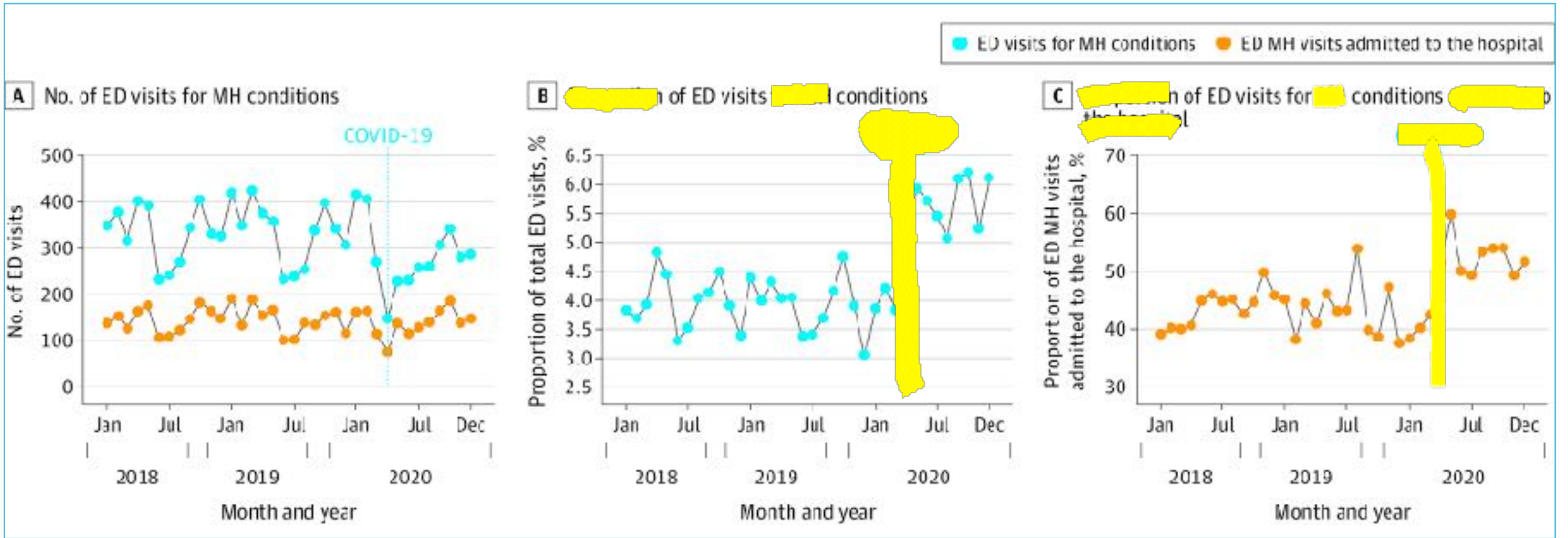


https://upload.wikimedia.org/wikipedia/commons/thumb/1f/Pennsylvania_in_United_States_%28US48%29.png/1200px-Pennsylvania_in_United_States_%28US48%29.png

April 1, 2021

Krass P, Dalton E, Doupnik SK, Esposito J. US Pediatric Emergency Department Visits for Mental Health Conditions During the COVID-19 Pandemic. JAMA Netw Open. 2021 Apr 1;4(4):e218533. doi: 10.1001/jamanetworkopen.2021.8533. PMID: 33929525; PMCID: PMC8087951.

- Study from Philadelphia
 - Based on Electronic Health Records of ED Mental Health visits
 - 5-25 years old
 - April 2020 to December 2020
- Primary Findings:
 - Increased Proportion of Mental Health visits
 - 4% → 5.7%
 - Increased Risk associated with specific Modifiers
 - Female
 - White
 - Commercially Insured
 - >12 years old



Mental Health ED Visits of children

JAMA Network

JAMA Pediatrics

Search All Enter Search T

New Online Views **47,401** Citations **4** Altmetric **1987**

Original Investigation

August 9, 2021

Global Prevalence of Depressive and Anxiety Symptoms in Children and Adolescents During COVID-19

A Meta-analysis

Nicole Racine, PhD, RPsych^{1,2}; Brae Anne McArthur, PhD, RPsych^{1,2}; Jessica E. Cooke, MSc^{1,2}; et al

> Author Affiliations | Article Information

JAMA Pediatr. Published online August 9, 2021. doi:10.1001/jamapediatrics.2021.2482

- Meta-analysis of 29 studies involving 80,879 participants
- Primary Findings:
 - First year of COVID-19 Pandemic:
 - 25.2% of youth had increased depression symptoms
 - 20.5% of youth had increased anxiety symptoms
 - Significant Moderators:
 - Older Age
 - Female

August 09, 2021

Assessing for ongoing mental health concerns for children and young adults.



PERFORM MENTAL
HEALTH SCREENINGS



INQUIRE ABOUT
SUICIDAL IDEATION



PROVIDE RESOURCES/
PRINTOUTS TO PATIENTS

Systems Based Practice

- **“Are we doing what we know we should be?”**
- Recommendation: Set aside a time with your health care team to review current practices for managing mental health in your practice
 - How are we screening our patients?
 - Who is responsible for this?
 - Where does information end up? Paper? EHR?
 - Are PCPs actually seeing the results? How do we know?
 - If results are abnormal, what are our next steps?
 - Do we have ready made handouts with to give to our patients with advice/online resources/apps?
 - Do we have an up-to-date referral list for community mental health resources for our pediatric patients?
 - How are we following up with our patients?

Mental Health Screenings for Youth

Recommendations for screening for Depression & Anxiety in children



- USPSTF (United States Preventive Services Task Force) and AAP (American Academy of Pediatrics)
 - Recommend screening for **MDD in Adolescents 12-18**
 - Insufficient evidence for children < 12 years old.
 - Does not currently recommend screening for GAD (current research ongoing)

USPSTF

[https://
www.uspreventiveservicestaskforce.org/
uspstf/document/
RecommendationStatementFinal/
depression-in-children-and-adolescents-
screening](https://www.uspreventiveservicestaskforce.org/uspstf/document/RecommendationStatementFinal/depression-in-children-and-adolescents-screening)

February, 2016

AAP

[https://pediatrics.aappublications.org/content/141/3/
e20174081](https://pediatrics.aappublications.org/content/141/3/e20174081)

March, 2018

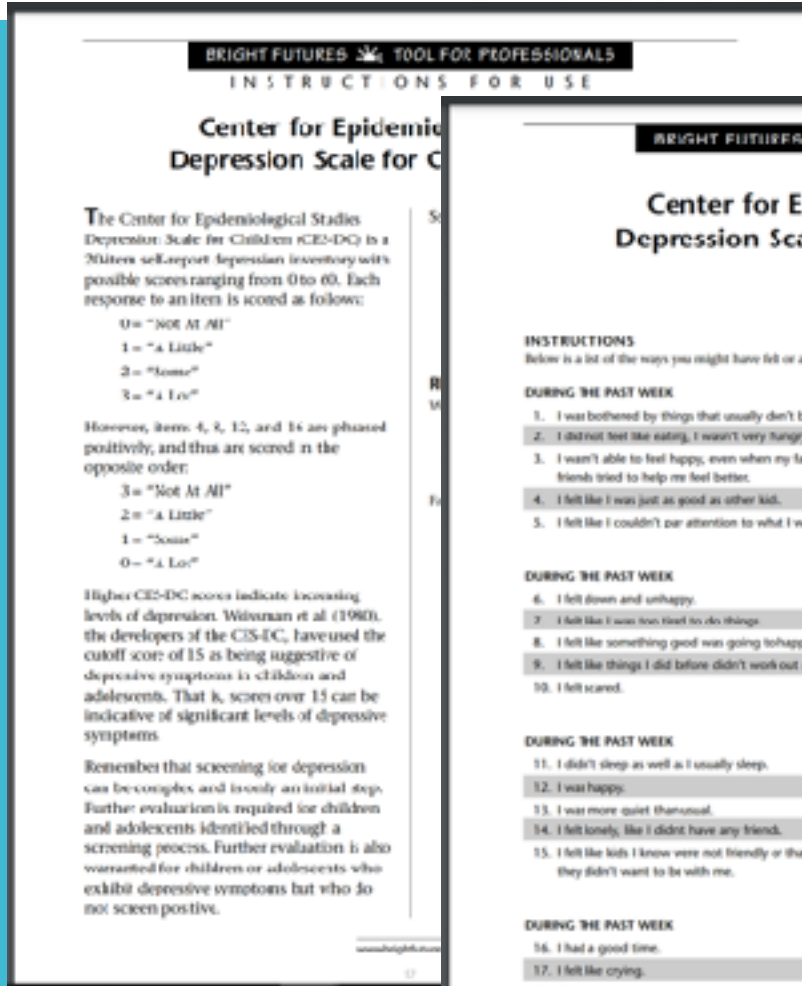
Mental Health Screenings for Youth

Major Depressive Disorder (MDD)



- Types of Screenings for MDD in children
 - All Ages
 - Two Question Screening
 - 1. Little Interest or pleasure in doing things?
 - 2. Feeling down, hopeless, or depressed?
 - Ages 6-17
 - CES-DC
 - “Center for Epidemiological Studies Depression Scale for Children”
 - Completed by Youth or Parent
 - Ages 13-18
 - PHQ-9
 - Can monitor Severity & Track response/remission
 - Includes Suicide Ideation question
- Screen at least annually, consider at each visit
- **Time Out: Is our team incorporating a consistent and accurate method of screening?**

Mental Health Screenings for Youth



BRIGHT FUTURES TOOL FOR PROFESSIONALS

Center for Epidemiological Studies Depression Scale for Children (CES-DC)

Number _____
Score _____

INSTRUCTIONS
Below is a list of the ways you might have felt or acted. Please check how much you have felt this way during the past week.

DURING THE PAST WEEK	Not At All	A Little	Some	A Lot
1. I was bothered by things that usually don't bother me.	___	___	___	___
2. I did not feel like eating, I wasn't very hungry.	___	___	___	___
3. I wasn't able to feel happy, even when my family or friends tried to help me feel better.	___	___	___	___
4. I felt like I was just as good as other kids.	___	___	___	___
5. I felt like I couldn't pay attention to what I was doing.	___	___	___	___

DURING THE PAST WEEK	Not At All	A Little	Some	A Lot
6. I felt down and unhappy.	___	___	___	___
7. I felt like I was too tired to do things.	___	___	___	___
8. I felt like something good was going to happen.	___	___	___	___
9. I felt like things I did before didn't work out right.	___	___	___	___
10. I felt scared.	___	___	___	___

DURING THE PAST WEEK	Not At All	A Little	Some	A Lot
11. I didn't sleep as well as I usually sleep.	___	___	___	___
12. I was happy.	___	___	___	___
13. I was more quiet than usual.	___	___	___	___
14. I felt lonely, like I didn't have any friends.	___	___	___	___
15. I felt like kids I know were not friendly or that they didn't want to be with me.	___	___	___	___

DURING THE PAST WEEK	Not At All	A Little	Some	A Lot
16. I had a good time.	___	___	___	___
17. I felt like crying.	___	___	___	___
18. I felt sad.	___	___	___	___
19. I felt people didn't like me.	___	___	___	___
20. It was hard to get started doing things.	___	___	___	___

www.brightfutures.org

- MDD

- Ages 6-17

- CES-DC

- "Center for Epidemiological Studies Depression Scale for Children"

- Completed by Youth or Parent

Mental Health Screenings for Youth

PHQ-9: Modified for Teens

Name: _____ Clinician: _____ Date: _____

Instructions: How often have you been bothered by each of the following symptoms during the past two weeks? For each symptom put an "X" in the box beneath the answer that best describes how you have been feeling.

	0 Not at all	1 Several Days	2 More than Half the Days	3 Nearly Every Day
1. Feeling down, depressed, or hopeless?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Little interest or pleasure in doing things?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Trouble falling asleep, staying asleep, or sleeping too much?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Poor appetite, weight loss, or overeating?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Feeling tired or having little energy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Feeling bad about yourself - or feeling that you are a failure or that you have let yourself or your family down?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Trouble concentrating on things like school work, reading, or watching TV?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Moving or speaking so slowly that other people would have noticed? Or the opposite - being so fidgety or restless that you were moving around a lot more than usual?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Thoughts that you would be better off dead, or of hurting yourself in some way?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

In the past year have you felt depressed or sad most days, even if you had
 Yes No

If you are experiencing any of the problems on this form, how difficult is
 so your work, take care of things at home or getting along with other people?
 Not difficult at all Somewhat difficult Very difficult

Has there been a time in the past year when you have had serious thoughts?
 Yes No

Have you EVER in your life ever tried to kill yourself or made a suicide attempt?
 Yes No

"If you have had thoughts that you would be better off dead or please discuss this with your Health Care Clinician, go to school."

PHQ-9 USE ONLY: Scoring score:

Modified with permission from the U.S. Dept. of Health and Human Services, Williams & Wilkins, and the U.S. Dept. of Education, 2002.

Scoring the PHQ-9 modified for Teens

Scoring the PHQ-9 modified for teens is very but involves thinking about several different aspects of depression.

To use the PHQ-9 as a diagnostic aid for Major Depressive Disorder:

- Questions 1 and 2 need to be endorsed as a "2" or "3"
- Need five or more positive symptoms (positive is defined by a "2" or "3" in questions 1-5 and by a "1", "2", or "3" in question 9).
- The functional impairment question (How difficult...) needs to be rated at least as "somewhat difficult."

To use the PHQ-9 to screen for all types of depression or other mental illness:

- All positive answers (positive is defined by a "2" or "3" in questions 1-5 and by a "1", "2", or "3" in question 9) should be followed up by interview.
- A total PHQ-9 score ≥ 10 (see below for instructions on how to obtain a total score) has a good sensitivity and specificity for MDD.

To use the PHQ-9 to aid in the diagnosis of dysthymia:

- The dysthymia question (In the past year...) should be endorsed as "yes."

To use the PHQ-9 to screen for suicide risk:

- All positive answers to question 9 as well as the two additional suicide items MUST be followed up by a clinical interview.

To use the PHQ-9 to obtain a total score and assess depressive severity:

- Add up the numbers endorsed for questions 1-9 and obtain a total score.
- See Table below:

Total Score	Depression Severity
0-4	No or Minimal depression
5-9	Mild depression
10-14	Moderate depression
15-19	Moderately severe depression
20-27	Severe depression

- MDD
 - Ages 13-18
 - PHQ-9: Modified for Teens
 - Can monitor Severity & Track response/remission
 - Includes Suicide Ideation question

Mental Health Screenings for Youth

Generalized Anxiety Disorder (GAD)



- Types of Screenings for GAD in children
 - Ages 8-18
 - **SCARED**
 - 2 pages filled out by Pediatric Patient
 - 2 pages filled out by Parent
 - Ages 12+
 - **GAD-7**
 - Can monitor Severity and Track response/remission

Mental Health Screenings for Youth

● GAD

● Ages 8-18

● SCARED

- "Screen for Child Anxiety Related Disorders"
- 2 pages filled out by Pediatric Patient
- 2 pages filled out by Parent

Screen for Child Anxiety Related Disorders (SCARED)

Child Version - Page 1 of 2 (To be filled out by the CHILD)

Name: _____ Date: _____

Directions:
Circle the
letter that
best describes
how often
you feel
this way.

Screen for Child Anxiety Related Disorders (SCARED)

Child Version - Page 2 of 2 (To be filled out by the CHILD)

Name: _____

Directions:
Circle the
letter that
best describes
how often
you feel
this way.

Screen for Child Anxiety Related Disorders (SCARED)

Parent Version - Page 1 of 2 (To be filled out by the PARENT)

Name: _____

Directions:
Circle the
letter that
best describes
how often
you feel
this way.

Screen for Child Anxiety Related Disorders (SCARED)

Parent Version - Page 2 of 2 (To be filled out by the PARENT)

	0 Not true at all	1 Somewhat true/ sometimes true	2 Very true or often true
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SCARED Rating Scale Scoring Aide

Use with Parent and Child Versions

Question	Child Version	Parent Version	Separation Anxiety Disorder	Generalized Anxiety Disorder	School Avoidance
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99					
100					
Total	GAD _C	GAD _P	SA	GAD	SA

0 = not true or hardly true
1 = somewhat true or sometimes true
2 = very true or often true

SCORING

A total score of **≥ 25** may indicate the presence of an **Anxiety Disorder**. Scores higher than 30 are more specific.

A score of **7** for items 1, 6, 9, 12, 15, 18, 19, 22, 24, 27, 30, 34, 35 may indicate **Panic Disorder** or **Significant Somatic Symptoms**.

A score of **9** for items 5, 7, 14, 21, 23, 26, 33, 35, 37 may indicate **Generalized Anxiety Disorder**.

A score of **5** for items 4, 8, 13, 16, 20, 25, 28, 31 may indicate **Separation Anxiety Disorder**.

A score of **8** for items 3, 10, 26, 32, 38, 40, 41 may indicate **Social Anxiety Disorder**.

A score of **3** for items 2, 11, 17, 36 may indicate **Significant School Avoidance**.

Total Anxiety is 25

Mental Health Screenings for Youth

GENERALIZED ANXIETY DISORDER 7-ITEM (GAD-7) SCALE				
Over the <u>last 2 weeks</u> , how often have you been bothered by any of the following problems? (Use "✓" to indicate your answer)	Not at all	Several days	More than half the days	Nearly every day
	1. Feeling nervous, anxious, or on edge	<input checked="" type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
2. Not being able to stop or control worrying	<input checked="" type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
3. Worrying too much about different things	<input checked="" type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
4. Trouble relaxing	<input checked="" type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
5. Being so restless that it's hard to sit still	<input checked="" type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
6. Becoming easily annoyed or irritable	<input checked="" type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
7. Feeling afraid as if something awful might happen	<input checked="" type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

Total Score: 0

A score of 4 or higher indicates the presence of Anxiety symptoms and seeking help is recommended.

If you'd like to schedule an appointment with Bright Futures Psychiatry, [click here](#) to complete the appointment request form or visit <https://www.brightfuturespsychiatry.com/appointments/request>.

If you checked off any problems, how difficult have these made it for you to do your work, take care of things at home, or get along with other people?

Not difficult at all Somewhat difficult Very difficult Extremely difficult

Source: Spitzer RL, Kroenke K, Williams JBW, Lowe B. A brief measure for assessing generalized anxiety disorder. Arch Intern Med. 2002;162:1096-1107.

- GAD
 - Ages 12+
 - GAD-7
 - Can monitor severity and track response/remission

Ask about Suicidal Ideation

	Past Month	
1) Have you wished you were dead or wished you could go to sleep and not wake up?		
2) Have you actually had any thoughts about killing yourself?		
If YES to 2, answer questions 3, 4, 5 and 6 If NO to 2, go directly to question 6		
3) Have you thought about how you might do this?		
4) Have you had any intention of acting on these thoughts of killing yourself, as opposed to you have the thoughts but you definitely would not act on them?	High Risk	
5) Have you started to work out or worked out the details of how to kill yourself? Do you intend to carry out this plan?	High Risk	
Always Ask Question 6	Lite-time	Past 3 Months
6) Have you done anything, started to do anything, or prepared to do anything to end your life? <small>Examples: Collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, held a gun but changed your mind, cut yourself, tried to hang yourself, etc.</small>		High Risk

- If you don't ask, you often won't know.
- Remember: Asking about Suicide does NOT increase likelihood of suicide or self-harm.
 - It can be a difficult conversation to have.
- The Columbia Protocol (C-SSRS)
 - The Lighthouse Project
 - Identify Risk, Prevent Suicide



Any **YES** indicates that someone should seek a behavioral health referral. However, if the answer to 4, 5 or 6 is **YES**, seek **immediate help**: go to the emergency room, call 1-800-273-8255, text 741741 or call 911 and **STAY WITH THEM** until they can be evaluated.



Columbia Protocol app available

About the Project ▾

The Columbia Protocol (C-SSRS) ▾

The Protocol in Action ▾

Triage and Risk Identification

Ask about Suicidal Ideation



Statistics prior to the COVID-19 Pandemic

- Of those dying by suicide, approximately 45% will have seen their primary care provider within the month before their death, while only 20% will have seen a mental health professional in that period.
 - Luoma JB, Martin CE, Pearson JL. Contact with mental health and primary care providers before suicide: a review of the evidence. *Am J Psychiatry*. 2002;159:909–916.
- A large representative longitudinal study found that 83% of suicide victims received health care services in the year prior to death, and 50% received services in the month prior.
 - Ahmedani BK, Simon GE, Stewart C, et al. Health care contacts in the year before suicide death. *J Gen Intern Med*. 2014;29:870–877.

Ask about Suicidal Ideation



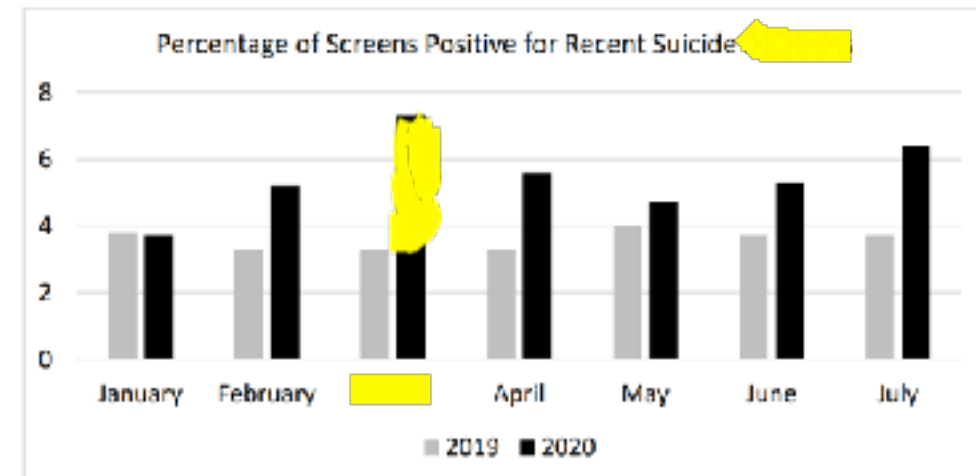
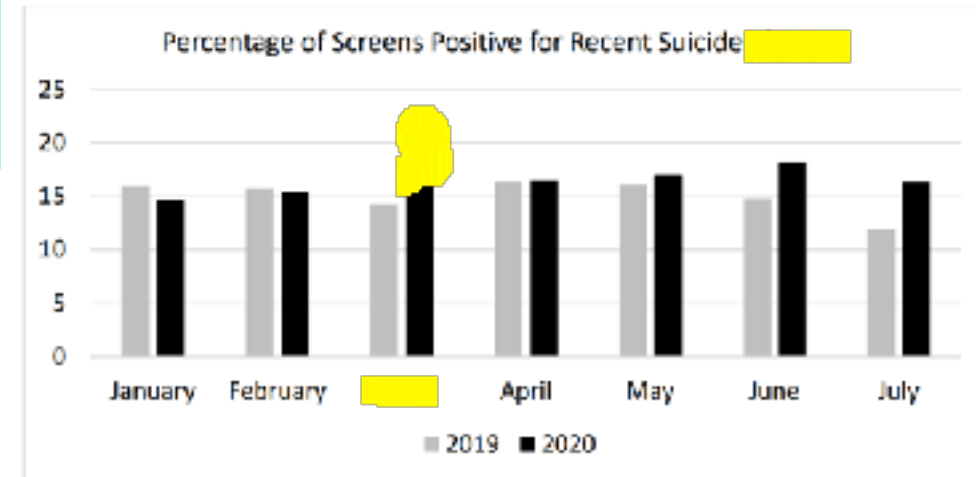
PEDIATRICS

OFFICIAL JOURNAL OF THE AMERICAN ACADEMY OF PEDIATRICS

Suicide Ideation and Attempts in a Pediatric Emergency Department Before and During COVID-19

Ryan M. Hill, PhD, Katrina Rufino, PhD, Sherin Kurian, MD, Johanna Saxena, BS, BA, Kirti Saxena, MD, Laurel Williams, DO

Figure 2. Rates of Positive Screens for Suicide Ideation and Attempt, January-July



Ask about Suicidal Ideation



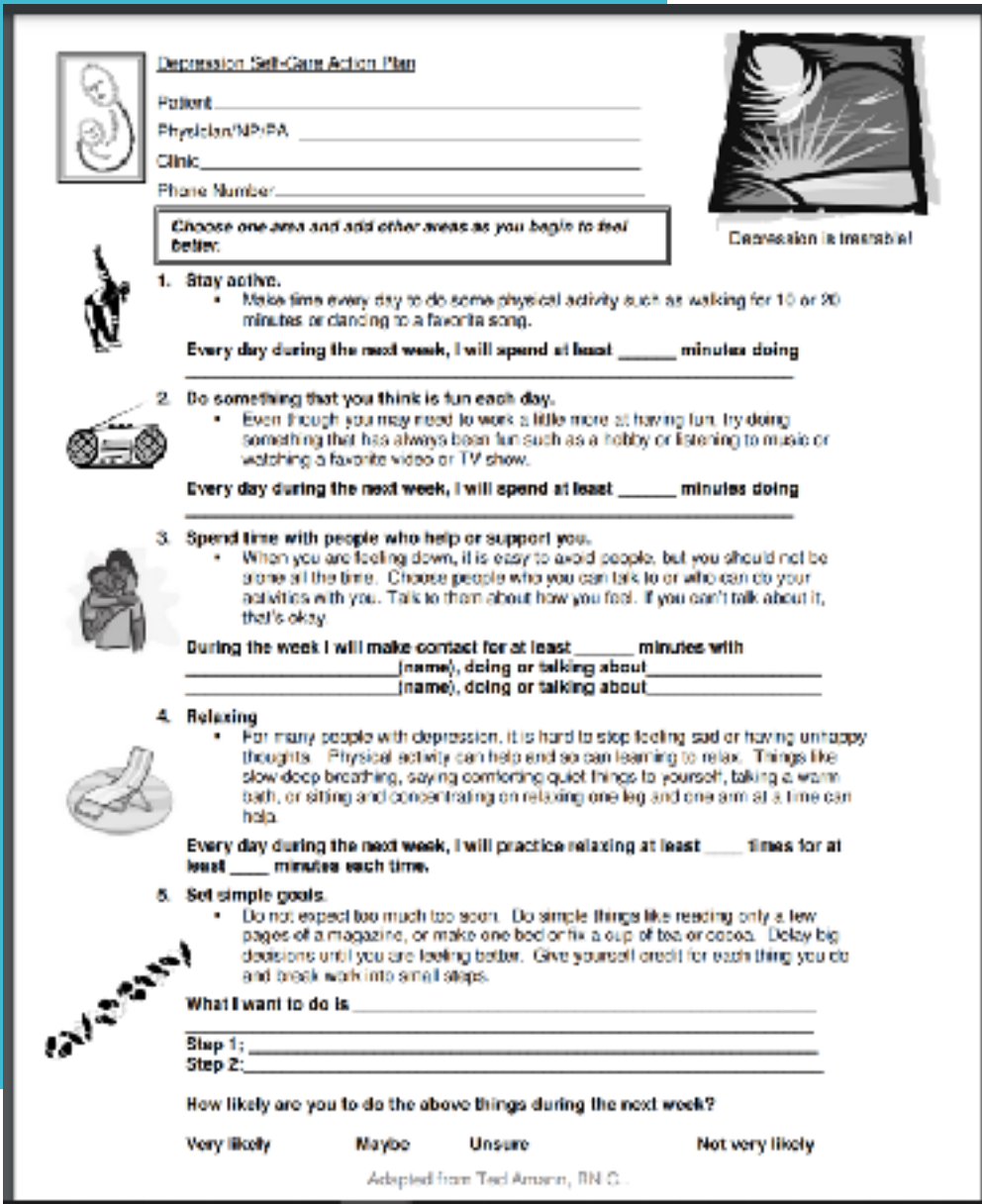
- “Rates of positive suicide risk screens for youth seeking care in a pediatric Emergency Department during the 2020 COVID-19 pandemic were statistically elevated, as compared with the same period the year prior. These data indicate that **the effects of the pandemic, broadly defined, may be associated with increased rates of suicide ideation among youth, ages 11-21.**”

Teach Coping Strategies



- Mindfulness
- Gratitude Journal
- Breathing Techniques
 - Diaphragmatic Breathing
 - Activates parasympathetic response
- Exercise
- Diet

Give Printouts to your Patient



Depression Self-Care Action Plan

Patient: _____
Physician/NP/PA: _____
Clinic: _____
Phone Number: _____

Choose one area and add other areas as you begin to feel better.

1. Stay active.
• Make time every day to do some physical activity such as walking for 10 or 20 minutes or dancing to a favorite song.
Every day during the next week, I will spend at least _____ minutes doing _____

2. Do something that you think is fun each day.
• Even though you may need to work a little more at having fun, try doing something that has always been fun such as a hobby or listening to music or watching a favorite video or TV show.
Every day during the next week, I will spend at least _____ minutes doing _____

3. Spend time with people who help or support you.
• When you are feeling down, it is easy to avoid people, but you should not be alone all the time. Choose people who you can talk to or who can do your activities with you. Talk to them about how you feel. If you can't talk about it, that's okay.
During the week I will make contact for at least _____ minutes with _____ (name), doing or talking about _____ (name), doing or talking about _____

4. Relaxing
• For many people with depression, it is hard to stop feeling sad or having unhappy thoughts. Physical activity can help and so can learning to relax. Things like slow deep breathing, saying comforting quiet things to yourself, taking a warm bath, or sitting and concentrating on relaxing one leg and one arm at a time can help.
Every day during the next week, I will practice relaxing at least _____ times for at least _____ minutes each time.

5. Set simple goals.
• Do not expect too much too soon. Do simple things like reading only a few pages of a magazine, or make one bed or fix a cup of tea or coffee. Delay big decisions until you are feeling better. Give yourself credit for each thing you do and break work into small steps.

What I want to do is _____
Step 1: _____
Step 2: _____

How likely are you to do the above things during the next week?
Very likely Maybe Unsure Not very likely

Adapted from Ted Amann, RN, C.

- Example 1:
 - Depression Self-Care Action Plan
 - AAFP website
 - Provides opportunity for pediatric patients to set simple goals

https://www.aafp.org/dam/AAFP/documents/patient_care/nrn/depression-self-care-action-plan.pdf

Give Printouts to your Patient

- Example 2:
 - Exercise is Medicine handouts, from the American College of Sports Medicine



Being Active with Your Young Child

Exercise is Medicine | AMERICAN COLLEGE OF SPORTS MEDICINE

Ages 6-12 Years

IN SHORT: Kids need 60 minutes of physical activity every day. This includes activity for their hearts, muscles and bones. Exercise should be vigorous on 3 days of the week, 75 to 90 minutes here and there. Write a note for 30-45 minutes. If it's good!

Keep it Simple
Help your child to assess and move around more often to walk the dog, ride a bike, touch football, dance in their room. See how fast they can get up the stairs! Find opportunities to encourage activity throughout the day. Make it fun!

Star Wars Fun
If they love it, they'll do it. Are they interested in soccer? Dance? Skateboarding? Drawing? Jumping? Swimming? Double-Dutch? Frisbee? Have fun with them. They'll be social and active too.

Less Screen Time
Your child should spend no more than 2 hours per day on screen time. Turn off screens at least 1 hour before bedtime. Keep bedrooms cool, dark and quiet. They'll sleep better in the classroom and on the playground.

Sleep
Occasionally 6-12 years old need 9-12 hours of sleep each day including naps. Turn off screens at least 1 hour before bedtime. Keep bedrooms cool, dark and quiet. They'll sleep better in the classroom and on the playground.






Grade Schoolers - Active THEIR Way

The activities below cover towards the recommended daily amount. Mix it up. Find what works for your child - before, during or after school. Think about "active snacks" just like food snacks. Do fun things together as a family. Jump around during TV commercials.

Vigorous-Intensity Aerobic Activity
Running, bike riding, basketball, soccer, basketball, tag, flag football, jump rope, martial arts, hip hop dancing

Moderate-Intensity Aerobic Activity
Bike riding, bike riding, swimming, walking, and fun games like baseball, softball

Muscle Strengthening
Weightlifting with proper supervision, climbing, walling, yoga, etc.

Bone Strengthening
Hopping, jumping, jumping, running, sports with jumping, fast movements and changes of direction

Copyright © 2018 Exercise is Medicine



Being Active as a Teen

Exercise is Medicine | AMERICAN COLLEGE OF SPORTS MEDICINE

Aerobic Activity

Aerobic activity increases your heart rate and breathing and will improve your stamina. Find fun ways to do moderate-intensity activity (like a track walk, hiking, active video games) or vigorous activity (like soccer, basketball, running, hip hop dancing, tennis).

What?	How often?	How hard?	How much?
Aerobic cardiovascular activity	Every day to improve activity on at least 3 of those days	Varies by intensity level (if you're not, very hard)	As part of 60 minutes of daily activity

Remember: Be active because that's what you do. To lose weight do twice as much activity. Don't forget to warm up and cool down. Gradually increase your physical time.

Muscle Strengthening

Exercise that challenges your muscles includes weight-lifting using hand weights, resistance bands, weight machines or your own body (for example, push-ups, chair squats, planks). You can also get stronger through activities like climbing, walling, yoga and games like tag or tag. Why? Your muscles and bones are very strong. You want to do!

What?	How often?	How hard?	How much?
Strength training or muscle-challenging activities	Two or more days/week. 2-3 times a day is best	Strength training: 80% up to medium or hard effort	2-3 repetitions using good form

Remember: Get help from a certified athletic trainer, strength coach, or exercise professional. They can teach you the right way to do exercises and how to breathe properly.

Bone Building

Be active! Be active! Challenge your bones at least 3 days/week. Bone is most sensitive to loading during this time in your life. NOW is your opportunity to build strong bones to protect you from developing osteoporosis later.

Weight-bearing activity (put's on your feet) like running, tennis, jump rope	Jumping and hopping	Using fast movements and changing direction like soccer, basketball, dance	Muscle strengthening exercises
Weight-bearing activity (put's on your feet) like running, tennis, jump rope	Jumping and hopping	Using fast movements and changing direction like soccer, basketball, dance	Muscle strengthening exercises

How will you get started this week? _____

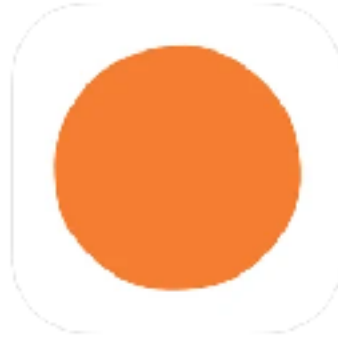
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Recommend Mobile Apps



- Since most providers can't always spend an extended amount of time with adolescent patients, apps can be another option clinicians can recommend
 - Can use on a Smartphone or Tablet
 - Some are for younger children, while others are for older adolescents/teens that can be used into adulthood

List of Helpful
Apps to
recommend to
patients &
parents



Headspace: Meditation & Sleep

Stress less, Relax, Sleep

[Headspace Inc.](#)

Designed for iPad

#18 in Health & Fitness

★★★★★ 4.9 - 849.7K Ratings

Free - Offers In-App Purchases



Calm: Sleep & Meditation

Focus, Relax, Sounds, Health

[Calm.com](#)

Designed for iPad

#13 in Health & Fitness

★★★★★ 4.8 - 1.5M Ratings

Free - Offers In-App Purchases



CBT-i Coach 12+

US Department of Veterans Affairs (VA)

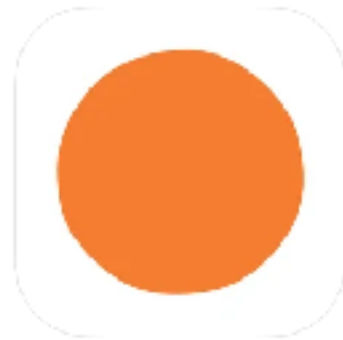
Designed for iPhone

★★★★★ 3.9 - 82 Ratings

Free

Recommend Mobile Apps

Choose from hundreds of guided meditations on managing stress and everyday anxiety, sleep, focus, and mind-body health. Build your practice your way with meditations for every experience level and lifestyle — including short, 3-minute sessions that fit into a busy schedule.



Headspace: Meditation & Sleep 4.4

Stress less, Relax, Sleep

[Headspace Inc.](#)

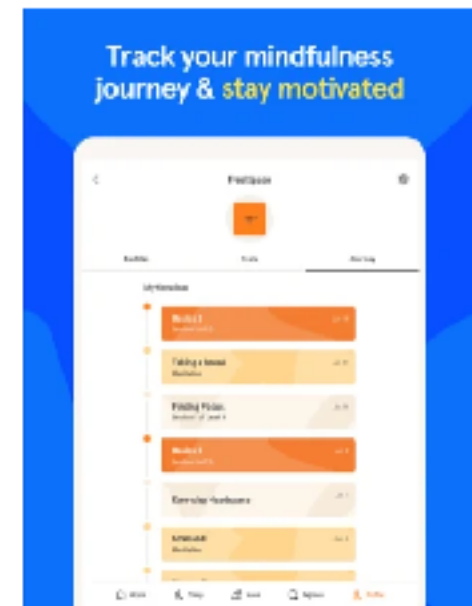
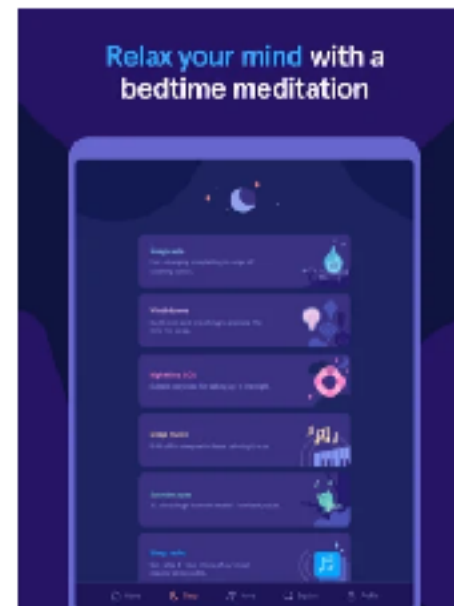
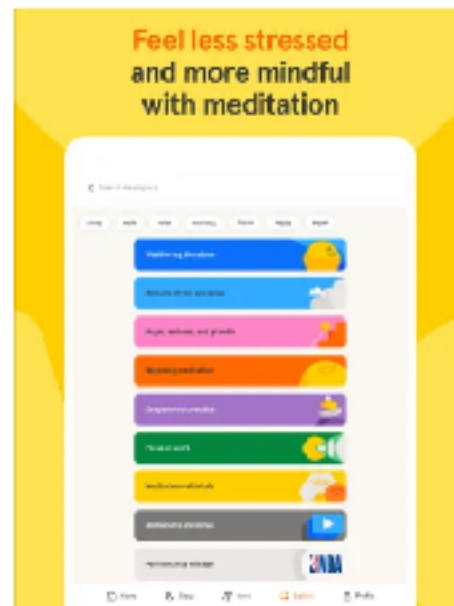
Designed for iPad

#16 in Health & Fitness

★★★★★ 4.5 • 445.7K Ratings

Free • Offers In-App Purchases

Screenshots [iPad](#) [iPhone](#) [Apple Watch](#) [iMessage](#)



Recommend Mobile Apps

Improve sleep, lower stress, and lessen anxiety with guided meditations, Sleep Stories, breathing programs, stretching exercises, and relaxing music.



Calm: Sleep & Meditation

Focus, Relax, Sounds, Health

[Calm.com](https://calm.com)

Designed for iPad

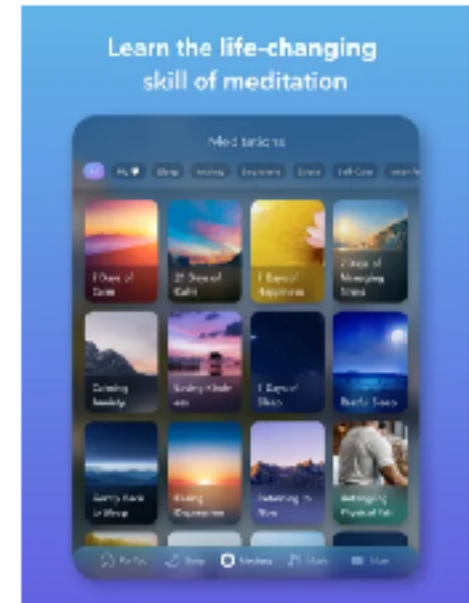
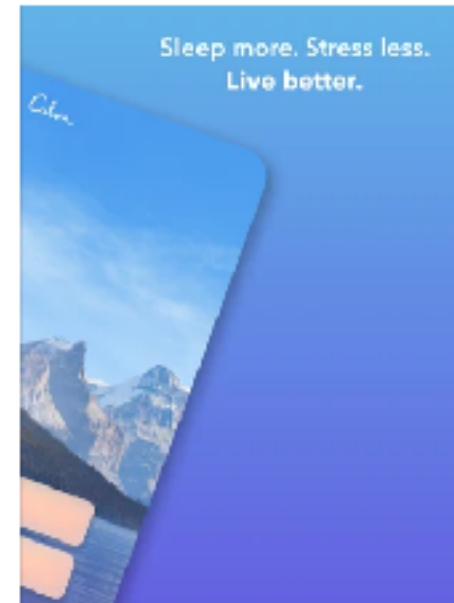
#13 in Health & Fitness

★★★★★ 4.8 - 10M Ratings

Free · Offers in-App Purchases

Screenshots

[iPad](#) [iPhone](#) [Apple TV](#) [Apple Watch](#)



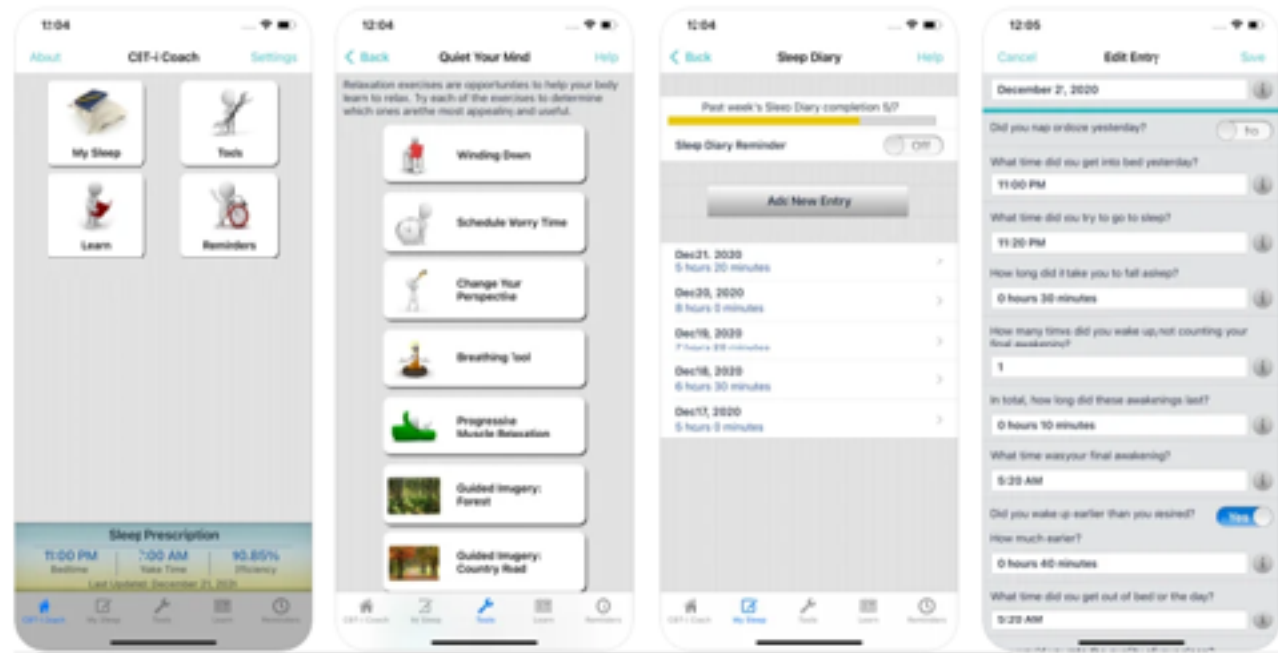
Recommend Mobile Apps

For people who are engaged in Cognitive Behavioral Therapy for insomnia with a health provider, or who have experienced insomnia and want to improve sleep habits.



CBT-i Coach 12+
US Department of Veterans Affairs (VA)
Designed for iPhone
★★★★☆ 3.0 • 82 Ratings
Free

iPhone Screenshots



Mobile App utilization in other States

The State of Utah has utilized an app that has helped save teen lives during the COVID-19 Pandemic.

<https://safeut.org/>

HOW CAN SAFEUT HELP?

SafeUT is a crisis chat and tip line that provides real-time crisis intervention for students through live chat and a confidential tip program—right from your smartphone. [Learn more.](#)

SafeUT Frontline focuses on connecting Utah's frontline workers, law enforcement, fire/EMS, healthcare professionals, and their families with experienced, licensed mental health professionals. [Learn more.](#)

SafeUT National Guard is designed for Utah Air and Army National Guard members, civilian personnel, and their families, linking them to licensed mental health professionals trained to understand their unique challenges. [Learn more.](#)



CONFIDENTIALITY



REAL-TIME COMMUNICATION



24/7/365 SERVICE

https://www.youtube.com/watch?v=5fnBUjYg_ak

Mental Health Care Needs Family Medicine Now more than Ever

- Screening for physical and mental health
- Source of resources for families
- Referrals to therapists or psychiatrists

THE COLLABORATIVE CARE MODEL



Utilization of
Telehealth to
assist with
mental health
needs for
children and
young adults.



TELEMEDICINE





“Telehealth is shown to be effective in decreasing obstacles youth face in seeking treatment for depression, anxiety, and suicide”¹

Telemedicine and e-Health, Vol 26, No. 11 | Original Research

Telehealth Increases Access to Care for Children Dealing with Suicidality, Depression, and Anxiety in Rural Emergency Departments

Roseanne Moody Fairchild , Shiao-Fen Feng-Kue, Hicham Rahmouri, and Dariel Hardesty

Published online: 5 Nov 2020 | <https://doi.org/10.1089/tmj.2019.3253>



Recommendations for Telehealth during COVID-19



Notification of Enforcement Discretion for Telehealth Remote Communications During the COVID-19 Nationwide Public Health Emergency

Covered health care providers that seek additional privacy protections for telehealth while using video communication products should provide such services through technology vendors that are [HIPAA](#) compliant and will enter into [HIPAA](#) business associate agreements (BAAs) in connection with the provision of their video communication products. The list below includes some vendors that represent that they provide HIPAA-compliant video communication products and that they will enter into a [HIPAA](#) BAA.

- Skype for Business / Microsoft Teams
- Updox
- VSee
- Zoom for Healthcare
- Doxy.me
- Google G Suite Hangouts Meet
- Cisco Webex Meetings / Webex Teams
- Amazon Chime
- GoToMeeting
- Spruce Health Care Messenger

Additional information about [HIPAA](#) Security Rule safeguards is available at <https://www.hhs.gov/ohrt/for-professionals/security-guidance/index.html>.

HealthIT.gov has technical assistance on telehealth at <http://www.healthit.gov/telehealth>.

Helpful Links

Mental Health Screenings for Youth

- CES-DC (Center for Epidemiological Studies Depression Scale for Children)
 - https://www.brightfutures.org/mentalhealth/pdf/professionals/bridges/ces_dc.pdf
- PHQ-9: Modified for Teens
 - https://www.aacap.org/App_Themes/AACAP/docs/member_resources/toolbox_for_clinical_practice_and_outcomes/symptoms/GLAD-PC_PHQ-9.pdf
- SCARE (Screen for Child Anxiety Related Disorders) Rating Scale
 - <https://www.ohsu.edu/sites/default/files/2019-06/SCARED-form-Parent-and-Child-version.pdf>
- GAD-7 (for Ages 12+)
 - <https://www.brightfuturespsychiatry.com/wp-content/uploads/2019/02/GAD-7.pdf>

Resources for Patients

- Self-Care Action Plan for Depression
 - https://www.aafp.org/dam/AAFP/documents/patient_care/nrn/depression-self-care-action-plan.pdf
- Being Active with your Young Child
 - https://www.exerciseismedicine.org/wp-content/uploads/2021/04/EIM_Rx-for-Health_Being-Active-with-Your-Young-Child.pdf
- Being Active as a Teen
 - https://www.exerciseismedicine.org/wp-content/uploads/2021/04/EIM_Rx-for-Health_Teens.pdf



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- 8. Hill RM, Rufino K, Kurian S, Saxena J, Saxena K, Williams L. Suicide ideation and attempts in a pediatric emergency department before and during COVID-19. *Pediatrics.* 2020; doi: 10.1542/peds.2020-029280



Images & Additional Resources utilized

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- https://upload.wikimedia.org/wikipedia/commons/thumb/c/cc/Map_of_USA_TX.svg/1280px-Map_of_USA_TX.svg.png
- Pexels Free Images from pexels.com. Monstera, Ron Lach, Cottonbro, Shvets Production, Pavel Danilyuk, Rodnae Productions, Tima Miroshnichenko, Shvets Productions, Maksim Goncharenok, Markus Spiske, Pixabay, Anthony Shkraba, Andrei Kotovikov, Elijah O'Donnell, Polina Zimmerman, Edward Jenner, Julia Cameron, Myicahel Tamburini, Anna Shvets, Julia M Cameron. <https://www.pexels.com/>
- Some resources involving children during quarantine during COVID-19 pandemic by Bonnie T. Zima, MD, MPH; Lindsay Fazio, PhD; Lauren Oshman, MD, MPH, FAAFP.
- https://upload.wikimedia.org/wikipedia/commons/thumb/f/f9/Pennsylvania_in_United_States_%28US48%29.svg/1200px-Pennsylvania_in_United_States_%28US48%29.svg.png
- <https://gfyecat.com/ajarfloweryjumpingbean-coronavirus-transparent-covid19-sticker>