## CHILDREN'S MENTAL HEALTH

While investments have been made to improve Virginia's mental health system, far too many children continue to lack access to high quality services. Increasing access and coordination of mental health care leads to better health outcomes for children.

Mental health disorders can start early in childhood.



In Virginia, over half of all children with public health insurance who are diagnosed with a mental health condition are under the age of 12

Children's mental health disorders are prevalent across Virginia.



major depressive episode in the past year



seriously considered attempting suicide in the past year

Access to mental health treatment is limited in Virginia.



who experienced a major depressive episode did not receive any mental health treatment

Nationally, children of color have similar rates of mental health diagnoses, yet they are less likely to receive treatment than their White peers.



Latinx 9 visits

Black

VOICES FOR VIRGINIA'S CHILDREN 2019 Election Guide

17 visits

## CHILDREN'S MENTAL HEALTH

## **Questions for Candidates**

**#VAVotes4Kids** 

- MEDICAID IMPROVEMENTS: Virginia's Medicaid-covered mental health services reflect a crisis-oriented approach with an overreliance on intensive treatment services and less focus on prevention. Efforts are underway to transform the behavioral health system to ensure consistency, comprehensive care, and more effective services for children and adults. What do you think about the current behavioral health system transformation efforts and would you support the continuation if elected?
- EARLY CHILDHOOD: Significant mental health problems can and do occur in young children. In fact, nearly 4,000 children 0-3 with public health insurance in Virginia had a mental health diagnosis in 2017. What steps should Virginia take to improve access to early childhood mental health services for Virginia's youngest children and their families?
- SCHOOL-BASED SERVICES: During the 2016-17 school year, 50% of school threat assessments conducted were related to self-harm. Research tells us that children and adolescents with access to mental health services in school are ten times more likely to seek care. School-based health centers can be useful settings to collaboratively address students' physical and mental health needs. What steps, if any, should Virginia take to develop a robust array of school-based behavioral health services?
- YOUTH SUICIDE: Nationally, suicide is the second-leading cause of death among children and youth ages 10 to 24. In Virginia, rates of suicide in this same age group have increased over 66% since 2010. However, these rates are not consistent across racial and ethnic groups. Rates of suicide for Black children have increased by 115% compared to White children and youth, who experienced a still startling 51% increase of youth suicides. What steps should Virginia take to address this growing public health crisis of youth suicide for all children?
- WORKFORCE: In Virginia, there is a critical shortage of licensed mental health professionals available to treat children and adolescents in need of care. Workforce shortages are exacerbated by high turnover, an aging workforce, and low reimbursement rates. What policy solutions would you propose to resolve this critical shortage of mental health providers in Virginia?
- EQUITY + MENTAL HEALTH: Nationwide, one in five youth live with a mental health condition, yet the majority of youth who need care do not receive it. Barriers to access include lack of or limited health insurance, social stigma, and under-identification. Research shows that children of color, in particular, are less likely to receive needed mental health care. Even when they do receive care, there is great variation in the quality of care they receive compared to their peers. What policy solutions would you propose to address race disparities in mental health care?





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