

CARE DEFICIT ASSESSMENT SERIES

With the assistance of the Joint Physician Advocacy Committee, the AMA is releasing a series of issue papers relating to different aspects of the COVID-19 care deficit. These talking points are for you in case of conversations with patients or others.

ISSUE 1 PEDIATRIC MENTAL HEALTH – PHYSICIAN TALKING POINTS

Children and Youth have been Seriously Affected by Pandemic Disruption.

- School is where children develop their identity and sense of self with their peers and they have struggled with lockdowns, being in and out of school and reduced social contact.
- These disruptions have reduced:
 - Access to sport and play to socialize and manage anxiety.
 - School structure, social connection, literacy and education.
- The pandemic has increased an already large demand for pediatric mental health services.
- Access to supports may improve as COVID-19 wanes, but it will take a long time to catch up on delayed care.
- It will take all of us, working together to recover from the care deficit.

Impact on Patients

- Children are experiencing delayed diagnoses that can exacerbate mental health issues.
 - more pediatric emergency department visits
 - o more incidents of mental health, self-harm and eating disorders
 - o children may "age out" of available supports before many of these issues are addressed
 - Parents struggle to pay for medications and supports, as many prescriptions are not fully covered and therapists or aides may incur additional costs.
- Patients and their families wait six months or much longer for behavioural consults from a reduced group of clinics.
- Doctors will need to monitor if the ending of mask mandates and cohorts create increased anxiety among children, but the choices made by families need to be supported.

Solutions

- There are ongoing systemic barriers to seamless care, including:
 - o lack of affordable therapists
 - \circ $\,$ siloed care in and out of AHS $\,$
 - o fees or cARP challenges to engaging physicians in this care
 - o severe shortages in some areas
- We need more mental health literacy within communities, schools and families, e.g., ADHD; learning disabilities; anxiety; how to access supports; understanding importance of sleep, nutrition, resiliency and technology.
- We need more wrap-around care for children experiencing mental health struggles and needing specialized care including counselors, nurses, social workers and dependable psychiatric follow-up.
 - o Individual community doctors can't support these needs long-term and require teams to support care delivery.
 - o Demand for wrap-around mental health services will likely increase following the pandemic.

What's Needed in the Long Run

- Most of these are chronic system issues that existed prior to COVID-19, now worsened by increased demand for mental health supports and the system's inability to keep up.
- Physicians believe solutions could include:
 - Building capacity for a robust Health Human Resources Team to address brain drain, implement needs-based planning and develop specialized expertise.
 - o Improving access to mental health therapists and psychiatry services throughout the province.
 - Addressing the need for school-based programming, as this is where children spend most of their time.
 - Revisiting the aging-out policy to allow for continuity of care.
 - Centralizing resources for clinicians and family.