



American Academy of Pediatrics



**Remarks of David T. Tayloe, Jr., MD, FAAP
President, American Academy of Pediatrics**

before the

**Committee on the Prevention of Mental Disorders and Substance
Abuse Among Children, Youth and Young Adults**

“Research Advances and Promising Interventions”

Institute of Medicine

March 25, 2009

Department of Federal Affairs
601 Thirteenth Street, N.W.
Suite 400 North
Washington, D.C. 20005
202-347-8600 / 800-336-5475 / Fax 202-393-6137

Thank you very much for inviting the American Academy of Pediatrics (AAP) to comment on the recent report from the National Research Council (NRC) and the Institutes of Medicine (IOM), *“Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities.”*

The AAP is an organization of 60,000 pediatricians, pediatric medical sub-specialists, and pediatric surgical specialists dedicated to the health, safety, and well being of infants, children, adolescents and young adults. It is a non-profit, professional association which maintains a tax-exempt status, 501(c)3.

The AAP commends the committee for its thorough review of the issues surrounding children’s mental health concerns; consideration of interventions and recommendations at the federal, state, and community levels; and implications for clinical practice, policy development, and future research.

The Academy has been troubled by statistics that show increasing mental health conditions occurring in children and adolescents and a shortage of health professionals capable of addressing such conditions. In response to our growing concern about the emotional and mental health needs of children, the AAP established a task force in 2004 comprised of expert pediatricians and representatives of patient groups, psychiatric, and other mental health services provider organizations. Among the several goals of the task force is to educate pediatricians on screening, diagnosis, and treatment of common mental health conditions in children. A summary of the work of the task force is appended to this memo. Our intent is to enhance the skills and capabilities of the primary care workforce to prevent and treat, in early phase, the growing numbers of mental health conditions in young people. We will use *Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities* as a resource in developing our action plan for promoting mental health and addressing mental health issues in the medical home.

Mental health promotion, healthy development, and early identification of mental health concerns are emphasized among AAP efforts including Bright Futures, early education and child care, the Connected Kids and Practicing Safety programs, and Mental Health Task Force activities. Our Board of Directors recently approved “Early Brain and Child Development” as the next major strategic priority for the Academy. The AAP also has translational research and quality improvement initiatives that lend themselves to evaluating and improving mental health care in real-life community practice (Pediatric Research in the Office Setting (PROS), Quality Improvement Innovation Network (QuIIN), Chapter Alliance for Quality Improvement (CAQI)).

While the AAP has focused on the provision of clinical guidance and education for the AAP membership, topics for a research agenda have been suggested. These include the following:

- Role of self-esteem in reducing the incidence of unplanned pregnancy, youth violence, and adolescent obesity
- Translation of effective interventions to different communities and among different target populations to achieve mental health equity
- Impact of early brain development strategies, parenting education, and quality childcare on the mental health of children
- Strategies for preventing family violence, substance abuse, and child abuse/neglect, major causes of Adverse Child Outcomes (ACE)
- Identification of successful models of culturally effective mental health promotion programs (e.g., nurse home visiting/nurse-family partnership programs)
- Effectiveness of community-wide strategies for mental health promotion in improving mental health outcomes of children and adolescents
- Identification of interventions that improve outcomes of at-risk children and reduce school dropout

There are several opportunities within the federal system to advance this research agenda:

The federal government has honed its focus on comparative effectiveness research; children's mental health should be a priority area.

There are research and demonstration projects across several federal agencies, such as the National Institutes of Health, Centers for Disease Control and Prevention, and the Maternal and Child Health Bureau. Stronger coordination across these agencies can better build a pipeline of pediatric research that is relevant to both community and practice settings.

There have been some important new additions to the federal data system at the National Center for Health Statistics – e.g., the National Survey of Children's Health and the National Survey of Children with Special Health Care Needs – that provide not only national, but also state-level data to track children's health (including behavioral health). These systems – which make data more actionable at state levels – should be enhanced.

There is a need to focus on the interface between behavioral and educational problems, mental health, family mental illness, and substance use/abuse issues because of the frequency of “co-morbidity” in our population and the likelihood that more than one family member will be affected by one or more of these conditions. The family-centered approach within the medical home model of the Academy lends itself to addressing the holistic needs of the family.

The Academy is aware of the very recent IOM report, *Beyond the HIPAA Privacy Rule: Enhancing Privacy, Improving Health Through Research*^{*}, and the implications of HIPAA on research that involves children and adolescents. Adolescents need to be included in research with recognition of their responsibility and ability to consent to minimal and low risk research, when they have the right to consent to their involvement in health care, so that we can answer effectiveness questions about the care they receive.

Thank you for the opportunity to provide information on AAP activities for promoting healthy development and early identification and treatment of children with mental health care concerns, to comment on your very detailed publication, and to attend the March 25 meeting. The AAP welcomes further dialogue with the NRC and IOM to discuss the proposed strategies for promoting mental health and preventing mental illness in pediatric primary care settings.

David T. Tayloe, Jr., MD, FAAP
President
American Academy of Pediatrics

^{*} “*Beyond the HIPAA Privacy Rule: Enhancing Privacy, Improving Health Through Research*,” Institute of Medicine Committee on Health Research and Privacy of Health Information, 2009. This report concludes that the HIPAA Privacy Rule does not protect privacy as well as it should, and that, as currently implemented, impedes important health research. The Committee recommends an entirely new approach to protecting privacy in health research.

American Academy of Pediatrics Mental Health Initiatives



About the Task Force on Mental Health

The American Academy of Pediatrics (AAP) Task Force on Mental Health was formed in 2004 by the AAP Board of Directors. It is chaired by Jane M. Foy, MD and is comprised of 10 AAP members, 5 AAP member consultants, and liaisons from the American Academy of Child and Adolescent Psychiatry, the American Psychological Association, the Child Neurology Society, the National Alliance on Mental Illness, the National Association of Social Workers, the National Medical Association, and the Society for Adolescent Medicine. These collaborative partnerships have been instrumental in tool development for enhancing the work of primary care clinicians in the delivery of mental health care. AAP members should be aware of the following

resources that are forthcoming from the Task Force on Mental Health.

Strategies for Systems Change in Children's Mental Health: A Chapter Action Kit*

Developed in collaboration with the Department of Community, State, and Chapter Affairs, the *Chapter Action Kit* outlines numerous strategies that AAP chapters can use to improve children's mental health programs and services in their state. Included in the tool kit is a summary of collaborative programs around the country involving mental health services interfacing with pediatric clinical care settings. This kit is **currently** available at www.aap.org/mentalhealth.

Educational Opportunities

The following teleconferences* are **currently** available at www.aap.org/mentalhealth:

1. *Collaborative Models in Rural Pediatrics: Integrating Mental Health*
2. *The 15 Minute Mental Health Visit*
3. *Partnering to Address Mental Health Concerns in Early Education and Child Care* (This event will take place on March 23, 2009)

An online PediaLink module on providing collaborative care of children's mental health is under development and will be available fall 2009.

Improving Mental Health Services in Primary Care: Reducing Administrative and Financial Barriers to Access and Collaboration*

This forthcoming white paper on administrative and financial barriers to collaborative mental health care is jointly developed with the American Academy of Child and Adolescent Psychiatry and will be helpful to advocacy efforts at the local, regional, and national levels.

The Future of Pediatrics: Mental Health Competencies for the Care of Children and Adolescents in Primary Care Settings

This forthcoming policy statement on mental health competencies for primary care clinicians was jointly developed with the AAP Committee on Psychosocial Aspects of Child and Family Health. This statement will be helpful in developing and guiding continuing medical education opportunities for practicing clinicians and assisting training programs in formulating curricula.



* Developed with support from the *Improving Mental Health in Primary Care Through Access, Collaboration, and Training (IMPACT)* grant (G95MC05434) to the AAP from the US Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau.

Enhancing Pediatric Mental Health Care: Strategies to Prepare a Community

This guidance describes approaches to enhancing pediatric mental health services at the community level. Included in this forthcoming report are models of collaboration involving primary care clinicians, mental health professionals, schools, and youth-serving agencies.

Enhancing Pediatric Mental Health Care: Strategies to Prepare a Primary Care Practice

This forthcoming report describes approaches to enhancing mental health care provided in the medical home setting. Included in this report are suggestions for assessing a practice's capacity to provide mental health care, establishing a business framework for mental health services, developing clinical relationships with mental health professionals, applying chronic care principles to children with mental health concerns, collecting data, using care plans, improving identification of mental health concerns, and more.

Clinical Algorithms for Mental Health Care, Birth to 21 Years

This forthcoming report serves as a practical guide for an idealized clinical process of mental health practice in primary care settings. Algorithm 1 represents prevention, early identification, initial assessment, and initial intervention. Algorithm 2 represents further assessment and care of children with identified problems not responsive to initial intervention. Each step of the algorithms will be keyed to the requisite competencies and the procedural codes used to bill for the activities in that step.

Mental Health Clinical Tool Kit

This forthcoming tool kit will consist of tools to assist primary care clinicians with implementation of the process described by the algorithms including screening, diagnosing, and managing mental health conditions in practice.

For more information, please contact:

Linda Paul, MPH
Manager, Committees and Sections
Section on Developmental and Behavioral Pediatrics
and Task Force on Mental Health
American Academy of Pediatrics
141 Northwest Point Blvd.
Elk Grove Village, IL 60007
Phone: 847/434-7787
Email: lpaul@aap.org
Web site: www.aap.org/mentalhealth



** Developed with support from the Improving Mental Health in Primary Care Through Access, Collaboration, and Training (IMPACT) grant (G95MC05434) to the AAP from the US Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau.*