



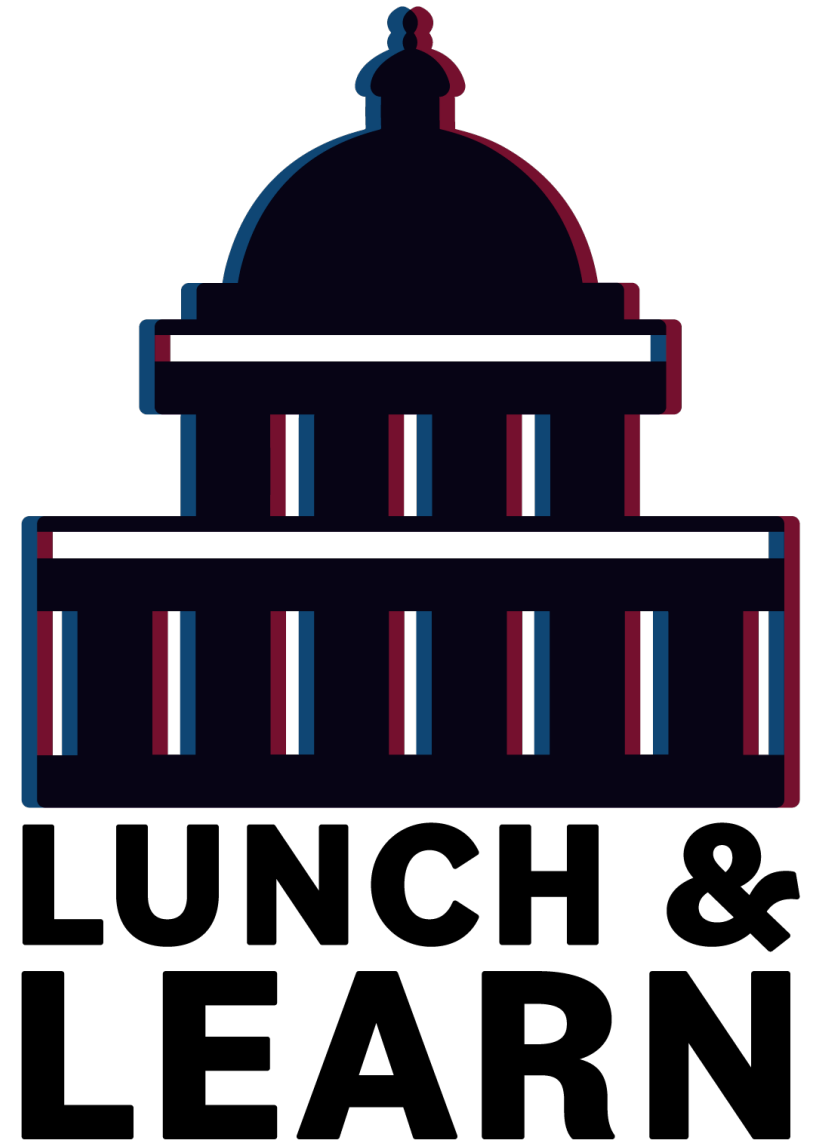
Child Mental Health in Texas

Taiwo Babatope, MD, MPH, MBA, ABPN

Assistant Professor of Psychiatry

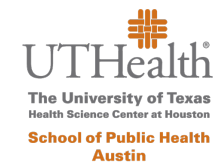
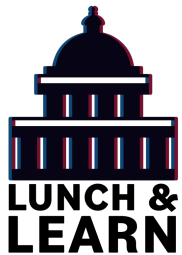
Louis A. Failace Department of Psychiatry and Behavioral Sciences

UTHealth Houston McGovern Medical School

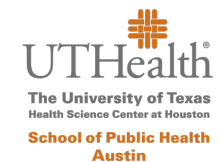
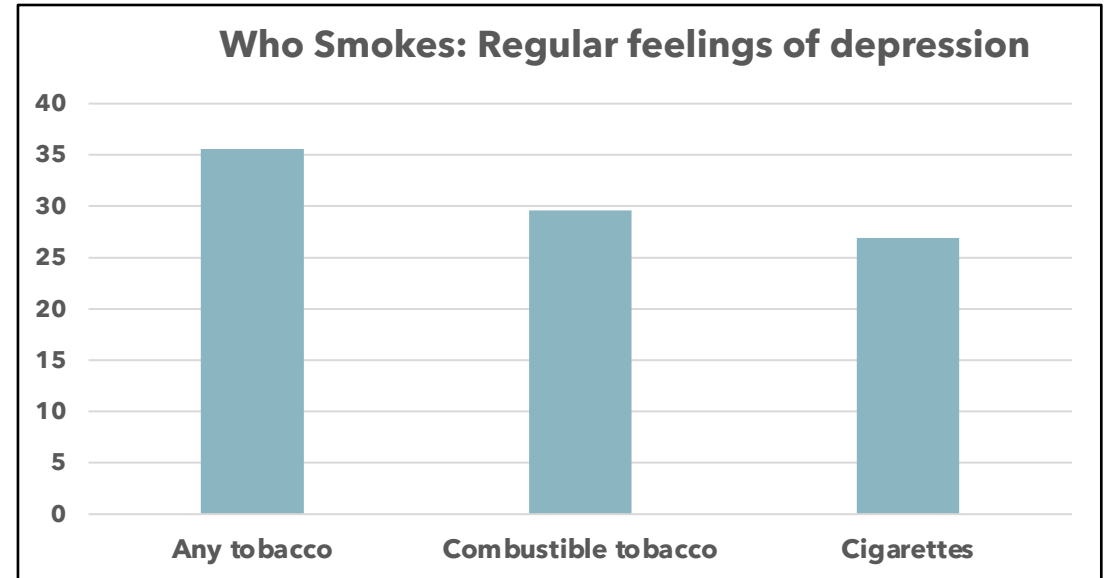
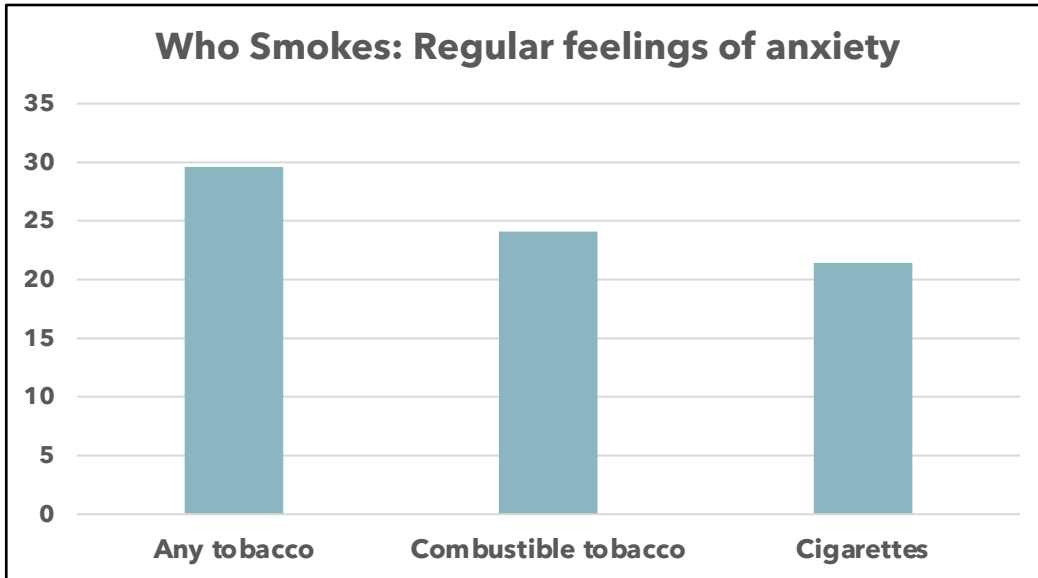


Welcome!

- Today's room is sponsored by Senator Bettencourt, thank you!
- About TX RPC
- New Health Policy Resources: Adverse Childhood Experiences (ACEs), Social Emotional Learning (SEL)
- Dr. Anna Wilkinson - Mental Health and Nicotine
- Dr. Taiwo Babatope - Child Mental Health in Texas
- Next Lunch & Learn: Maternal & Child Health - January 4, 2023



Mental Health and Nicotine



Mental Health/Nicotine Research

Which come first, symptoms of anxiety and depression or using nicotine?

How do depressive symptoms influence receptivity to tobacco marketing?

Identify the subgroups of college students for whom depressive symptoms have a strong influence on their use of nicotine

Do emotional responses (*affective reactivity*) influence use of nicotine in college students?

What is the role of nicotine use in suicide?

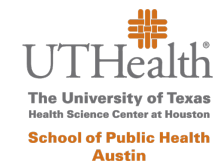


Implications



- Emotional responses interact with underlying genetic influences
- Nicotine sensitizes high risk individuals with impulsive dysregulation
- College students with depressive symptoms notice tobacco advertisements
- For some tobacco use leads to symptoms of anxiety and depression
- For other symptoms of anxiety and depression lead to tobacco use

One size does not fit all!





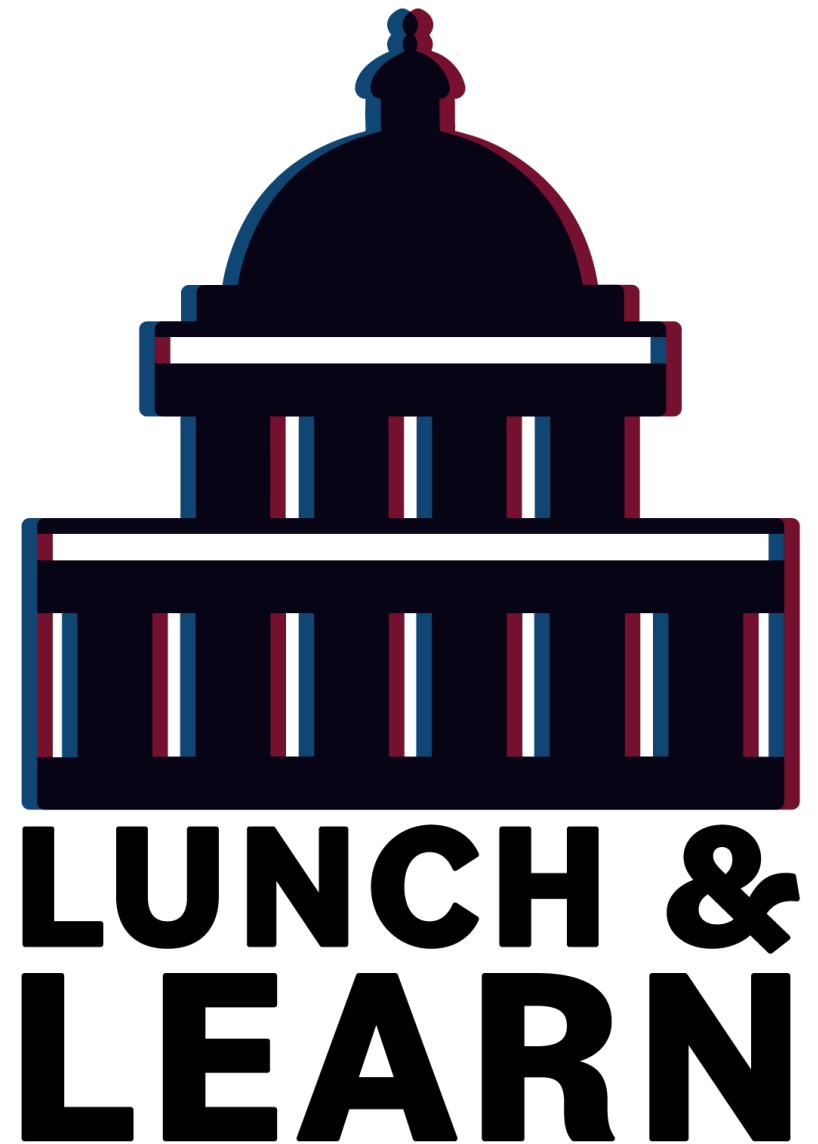
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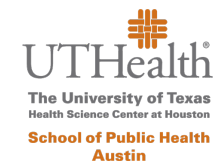
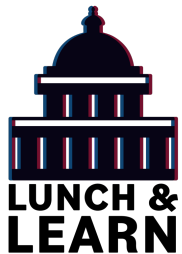
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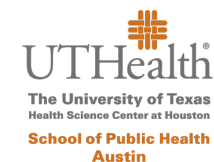
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2. Mental Health Access and Workforce shortage
3. Senate Bill 11 and the Texas Child Mental Health Consortium (TCMHCC)
4. TCMHCC Biennium Report and American Rescue Plan Act Expansion services
5. What's Next?

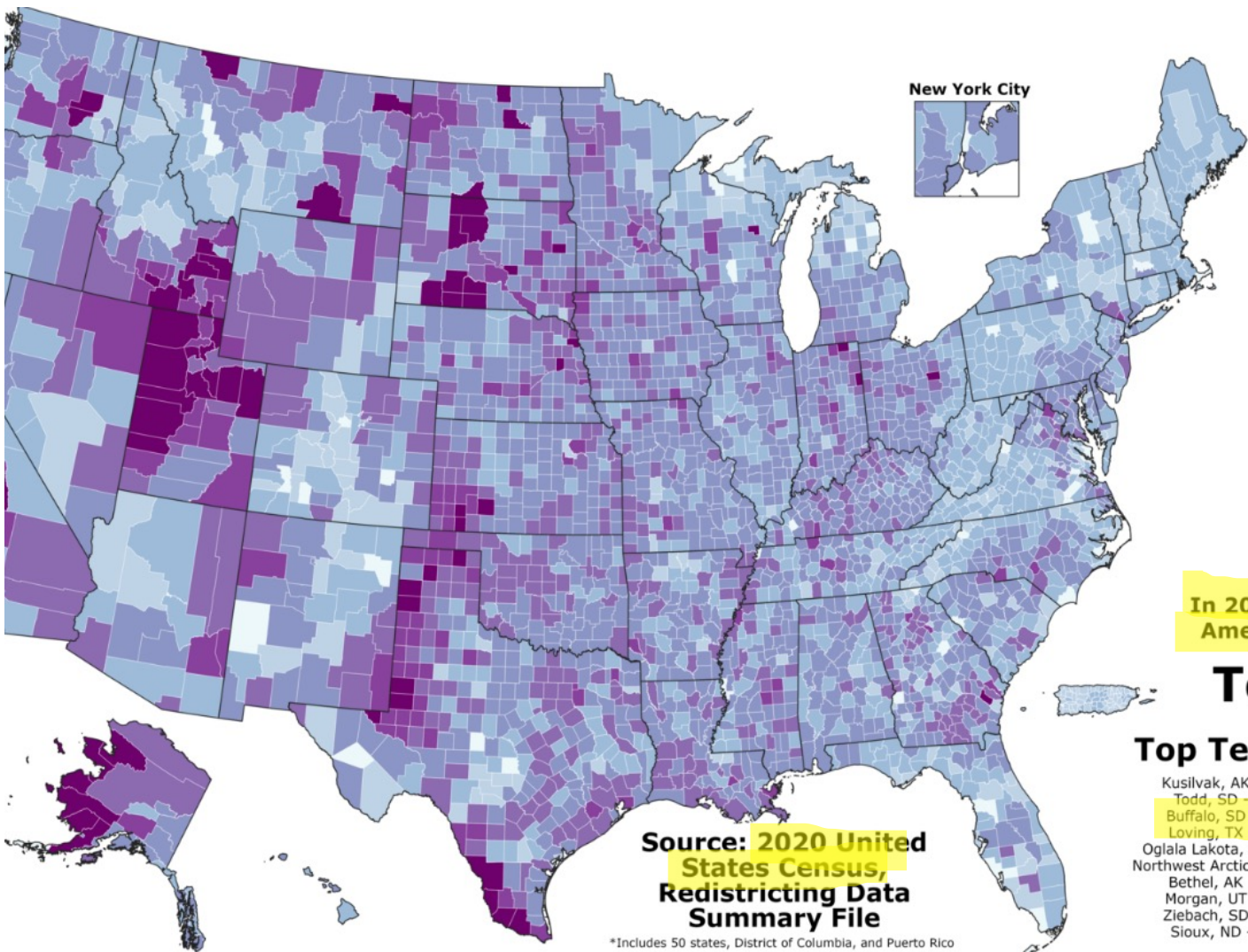


Child Mental Health Statistics

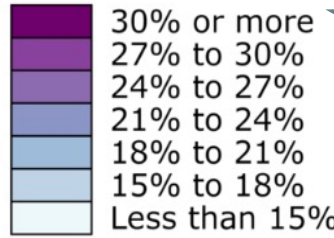
- **50% of all lifetime mental illness** begins by age 14, and 75% by age 24
- **1 in 6 U.S. youth** aged 6-17 experience a mental health disorder each year (roughly 7.7 million)
- 50.6% of U.S. youth aged 6-17 with a mental health disorder **received treatment in 2016**
- The average delay between onset of mental illness symptoms and treatment is 11 years
- Suicide is **the 2nd leading cause** of death among people aged 10-14



U.S. Youth Population



% Population below the age of 18



More than 73 million Americans under the age of 18 in 2020



1 out of every 10 persons under the age of 18 in the U.S. lives in Texas

In 2020, there were 73,666,971* Americans below the age of 18.

Total: 22.0%*

Top Ten (%)

- Kusilvak, AK - 40.88%
- Todd, SD - 39.75%
- Buffalo, SD - 38.60%
- Loving, TX - 37.50%
- Oglala Lakota, SD - 37.06%
- Northwest Arctic, AK - 36.02%
- Bethel, AK - 35.02%
- Morgan, UT - 34.97%
- Ziebach, SD - 34.94%
- Sioux, ND - 34.74%

Top Ten (#)

- Los Angeles, CA - 2,054,218
- Harris, TX - 1,211,561
- Cook, IL - 1,103,139
- Maricopa, AZ - 1,038,182
- San Diego, CA - 689,866
- Orange, CA - 667,331
- Dallas, TX - 640,961
- Kings, NY - 595,703
- Riverside, CA - 594,680
- San Bernardino, CA - 552,612

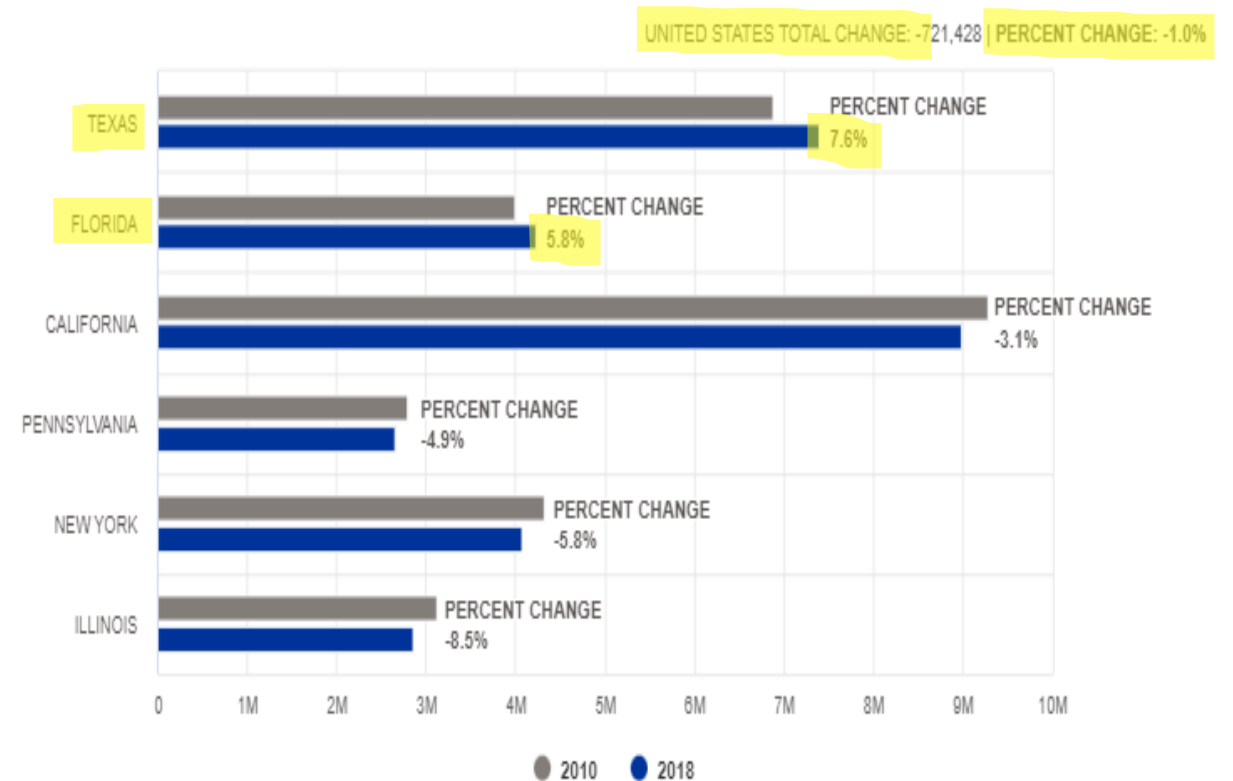
Source: 2020 United States Census, Redistricting Data Summary File

*Includes 50 states, District of Columbia, and Puerto Rico

Epidemiological and Demographic Issue

- Between 2010- 2018, Texas saw the **highest rate of under-18 population growth** among the six most populous states
- In four of the six most populous states, the under-18 population fell in this period – as it did in the U.S. as a whole

EXHIBIT 4: CHANGE IN THE UNDER-18 POPULATION OF THE U.S. AND THE SIX LARGEST STATES, 2010-2018



Texas Youth Population

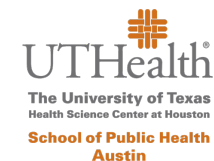
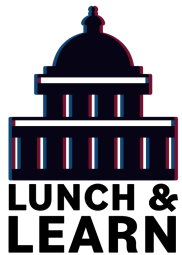
There are over 7 million children under the age of 18 in Texas

Table 1: Child Population by Age and Race/Ethnicity, 2018

	Number of Children		Percent of Children Who Are							
	Under 5	Under 18	Children of Color	White	Hispanic	Black	Asian	Two or More Races	American Indian/Alaska Native	Native Hawaiian/Other Pacific Islander
Tennessee	406,574	1,506,220	35.0	65.0	10.0	19.0	1.9	3.8	0.2	0.1
Texas	2,024,126	7,398,099	68.6	31.4	49.5	11.8	4.4	2.7	0.2	0.1
Utah	253,004	932,462	26.5	73.5	17.9	1.2	1.8	3.6	0.9	1.1

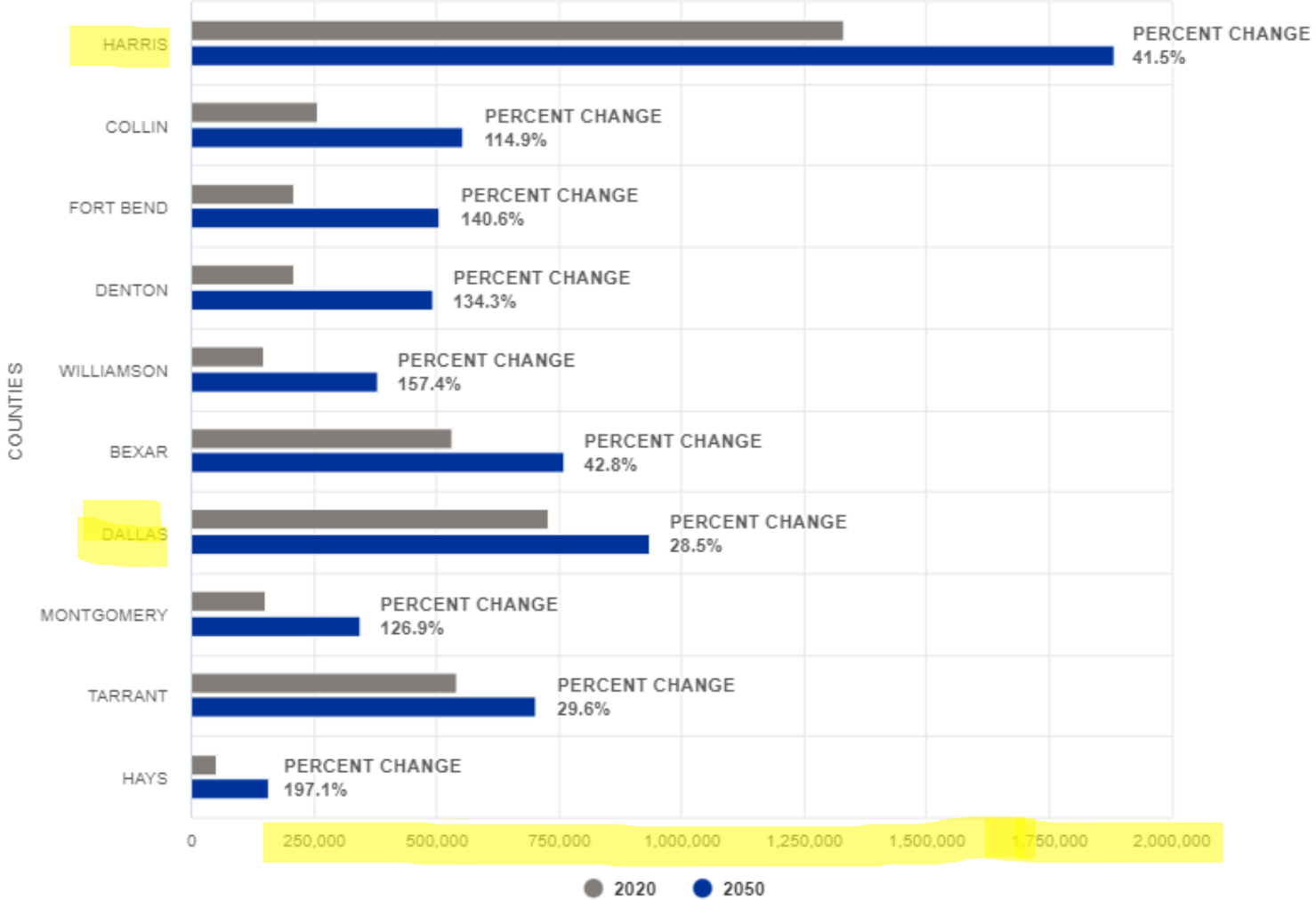
Looking towards 2050...

- Texas Demographic Center (TDC) predicts a *43% rise in the under-18 population by 2050* (or 3.2 million more children)
- By 2050, **22.7 percent of Texas' population will be under 18.**
- *Urban counties to top the list* in numerical growth, with Harris County alone adding more than 500,000 children by 2050.
- Most of the 10 Texas counties with the highest projected under-18 growth will more than double their child population



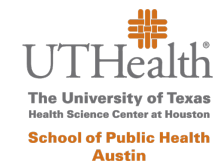
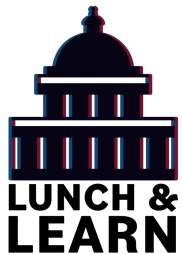
Looking towards 2050...

EXHIBIT 6: TOP TEXAS COUNTIES FOR PROJECTED UNDER-18 POPULATION GROWTH, 2020-2050



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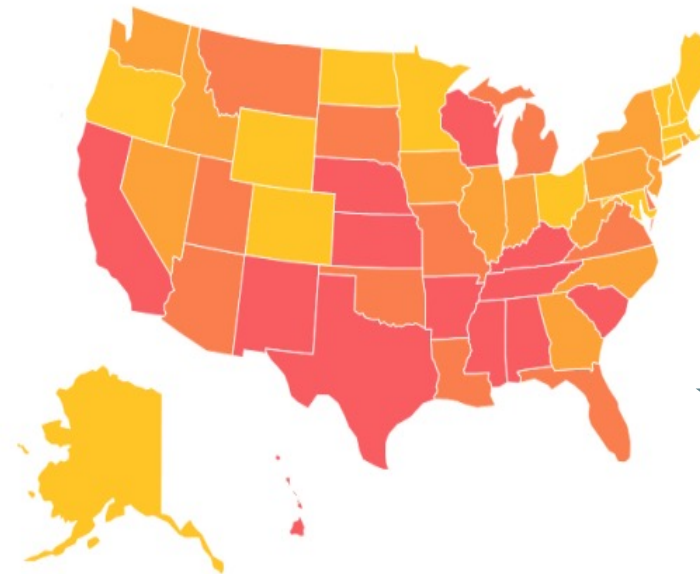


The State of Mental Health in America, 2019 report.

- **Texas ranks last among the 50 states and Washington, D.C., for youth access to mental health care.**
- 71.3% of youth in Texas with go untreated, compared with the national average of 61.5%.

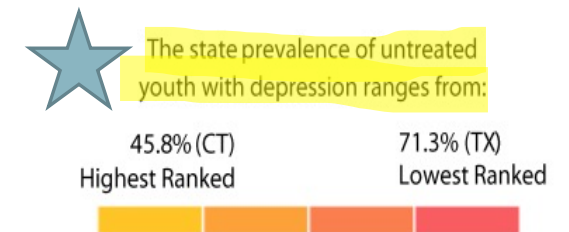
Youth Access to Care

Youth with MDE who Did Not Receive Mental Health Services



61.5% of youth with major depression do not receive any mental health treatment.

Youth experiencing MDE continue to go untreated. Among the top ranked states almost 50% of youth are not receiving the mental health services they need.



Impact of the Pandemic

Prior to the pandemic, rates of childhood mental health concerns and suicide had been rising steadily for at least a decade, but COVID pandemic has worsened it!

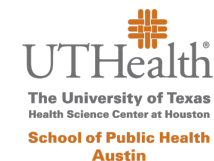
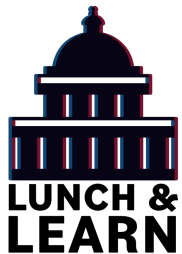
Mar-Oct 2020: CDC researchers quantified the toll

Emergency Department (ED) Mental health emergencies

- rose by 24% for children ages 5- 11 years
- rose by 31% for children ages 12-17 years.

Suicide attempts *increased nearly 51% among girls ages 12-17 yrs. in early 2021* (compared to the same period in 2019).

More than 140,000 U.S. children experienced the loss of a caregiver- *children of color disproportionately impacted.*

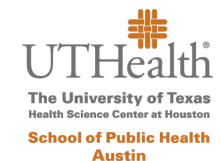


There is a Youth Mental Health Crisis in the United States

With the **COVID-19**, the onslaught of social media, and escalating gun violence, **the youth mental health crisis has exploded.**

The American Academy of Pediatrics (AAP), American Academy of Child and Adolescent Psychiatry (AACAP) and Children's Hospital Association (CHA) declared a **national emergency in children's mental health**, citing the serious toll of the COVID-19 pandemic on top of existing challenges.

The **U.S Surgeon General has issued a public health advisory** calling for a comprehensive, coordinated response to the needs of young people.



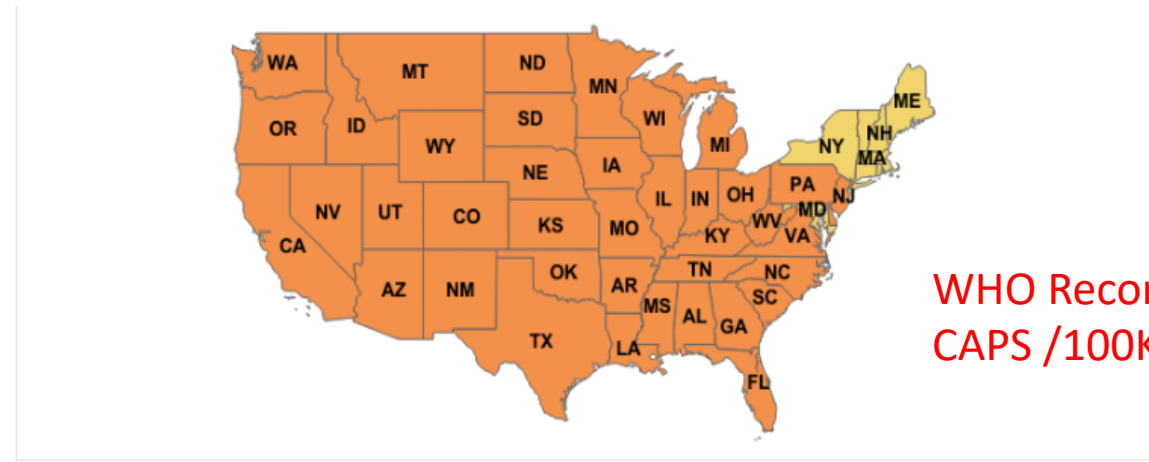
Workforce to address mental health crises

Practicing Child and Adolescent Psychiatrists State: * Hover for Data Source
 Use the filter menu to the right to interact with this dashboard * Hover for Tips & Definitions

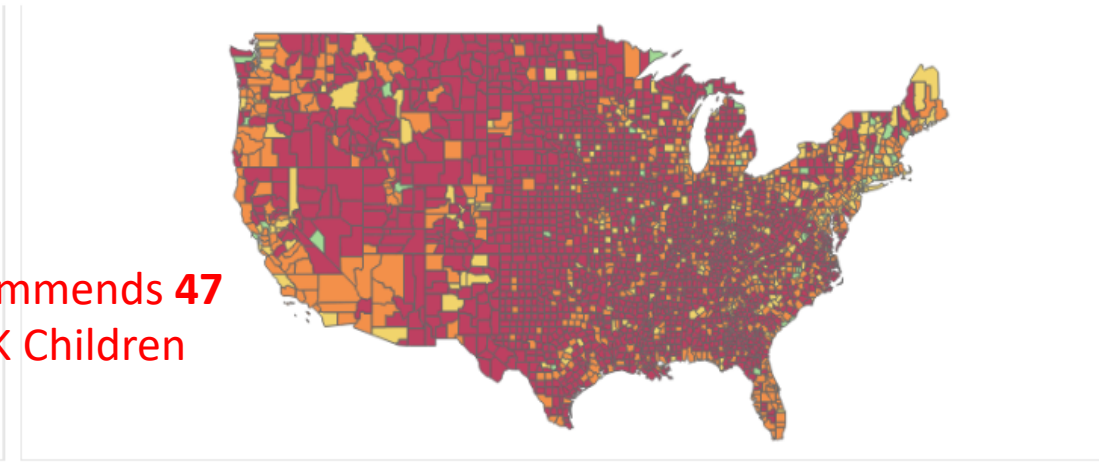
AMERICAN ACADEMY OF
CHILD & ADOLESCENT
PSYCHIATRY
WWW.AACAP.ORG

Total CAPs	Number of Children < 18	Number of CAPs/100k Children	Average CAP Age
10,597	74,077,738	14	52

State Map
 Mostly Sufficient Supply (>=47) | High Shortage (18-46)* | Severe Shortage (1-17)* | No CAPs



County Map
 Mostly Sufficient Supply (>=47) | High Shortage (18-46)* | Severe Shortage (1-17)* | No CAPs



WHO Recommends 47 CAPS /100K Children



Number of CAPs by Age Group



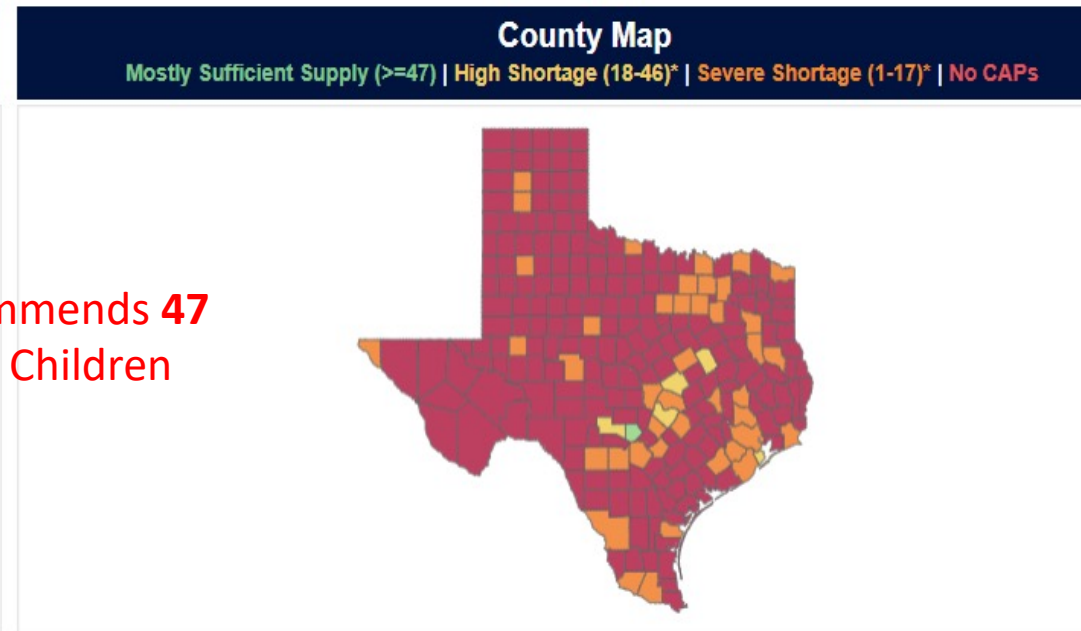
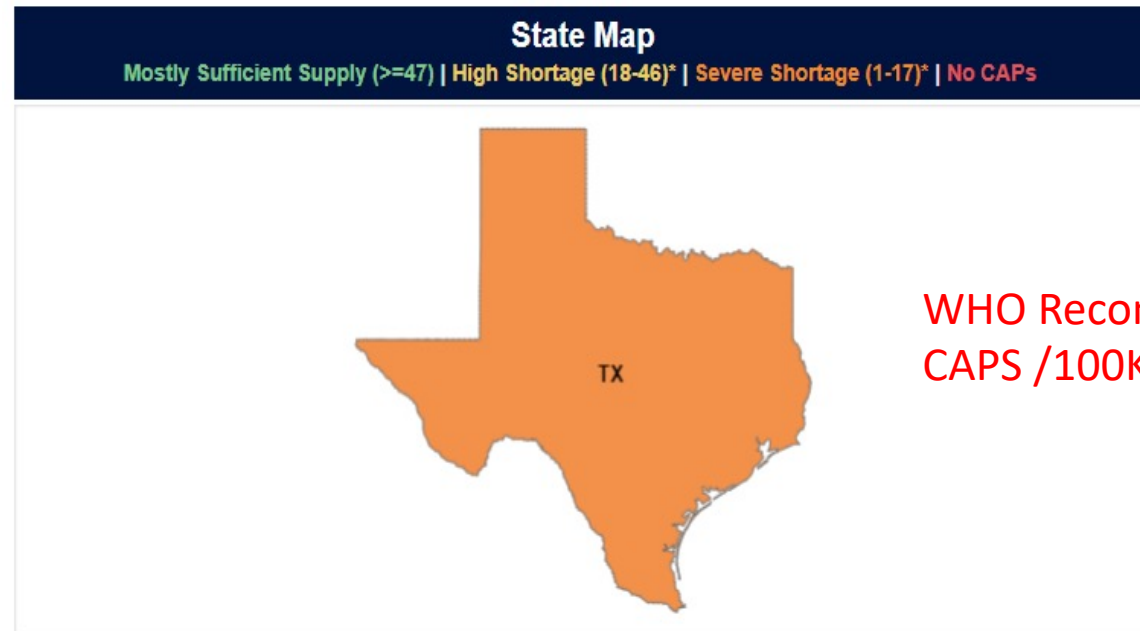
Breakdown by County

Texas Workforce: Child Psychiatrists shortage

Practicing Child and Adolescent Psychiatrists State: Texas * Hover for Data Source
Use the filter menu to the right to interact with this dashboard * Hover for Tips & Definitions

AMERICAN ACADEMY OF CHILD & ADOLESCENT PSYCHIATRY
WWW.AACAP.ORG

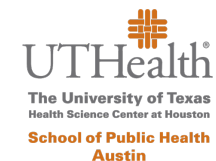
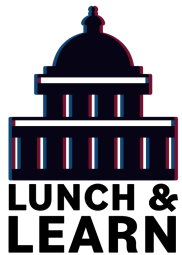
Total CAPs	Number of Children < 18	Number of CAPs/100k Children	Average CAP Age
745	7,338,445	10	51



WHO Recommends **47**
CAPS /100K Children

Key Takeaways

- High mental health prevalence, ***low access to treatment***
- **Pandemic** led to worsening mental health outcomes
- Projected growth in Texas youth population
- Child and Adolescent Psychiatrists – **workforce shortage**
- There is significant delay between diagnosis and treatment.



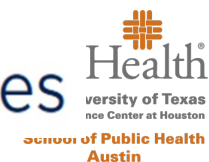
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Louis A. Faillace, MD, Department of

Psychiatry and Behavioral Sciences



Texas Legislature



Unprecedented investments in mental health

Senate Bill 10 establishes the **Texas Child Mental Health Care Consortium (TCMHCC)** to foster collaboration among our state medical schools, promote and coordinate mental health research, and help address workforce issues.

Senate Bill 11 by Sen. Larry Taylor and House sponsor Rep. Dennis Bonnen, M.D. became very important when SB 10 died on a point of order in the Texas House. Later that same evening, Dr. Zerwas added SB 10 as an amendment to SB 11 and brought it back to life.

SB 10

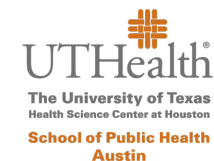
SPONSORS



Jane Nelson
(R - Flower Mound)



Rep. John Zerwas
(R - Richmond)



TCMHCC Initiatives

Child Psychiatry Access Network (CPAN) — behavioral health consultation services and training opportunities for pediatricians and Primary Care Providers (PCP).

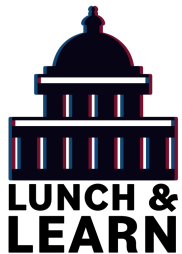
Texas Child Health Access Through Telemedicine (TCHAT) — Telemedicine to assist schools in identifying and assessing behavioral health needs, and providing access to mental health services

Community Psychiatry Workforce Expansion (CPWE) — Full-time psychiatrists funded at facilities operated by community mental health centers, with trainee rotations established at these facilities.

Child and Adolescent Psychiatry Fellowships (CAP) — promote expansion of the number of child and adolescent psychiatry trainee positions

Research — promote and coordinate mental health research across state university systems.

- **Youth Depression and Suicide Research Network**
- **Childhood Trauma Research Network.**

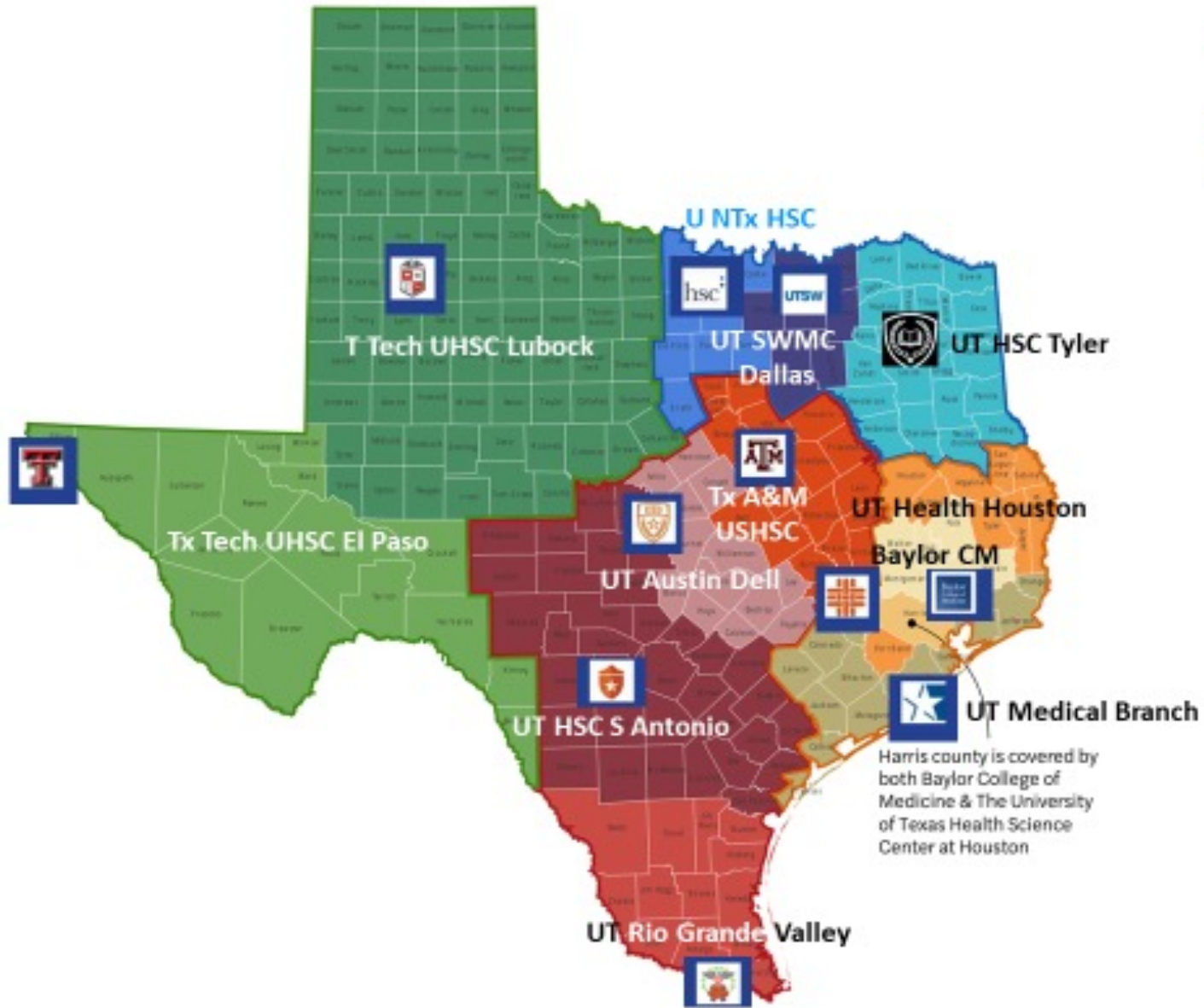




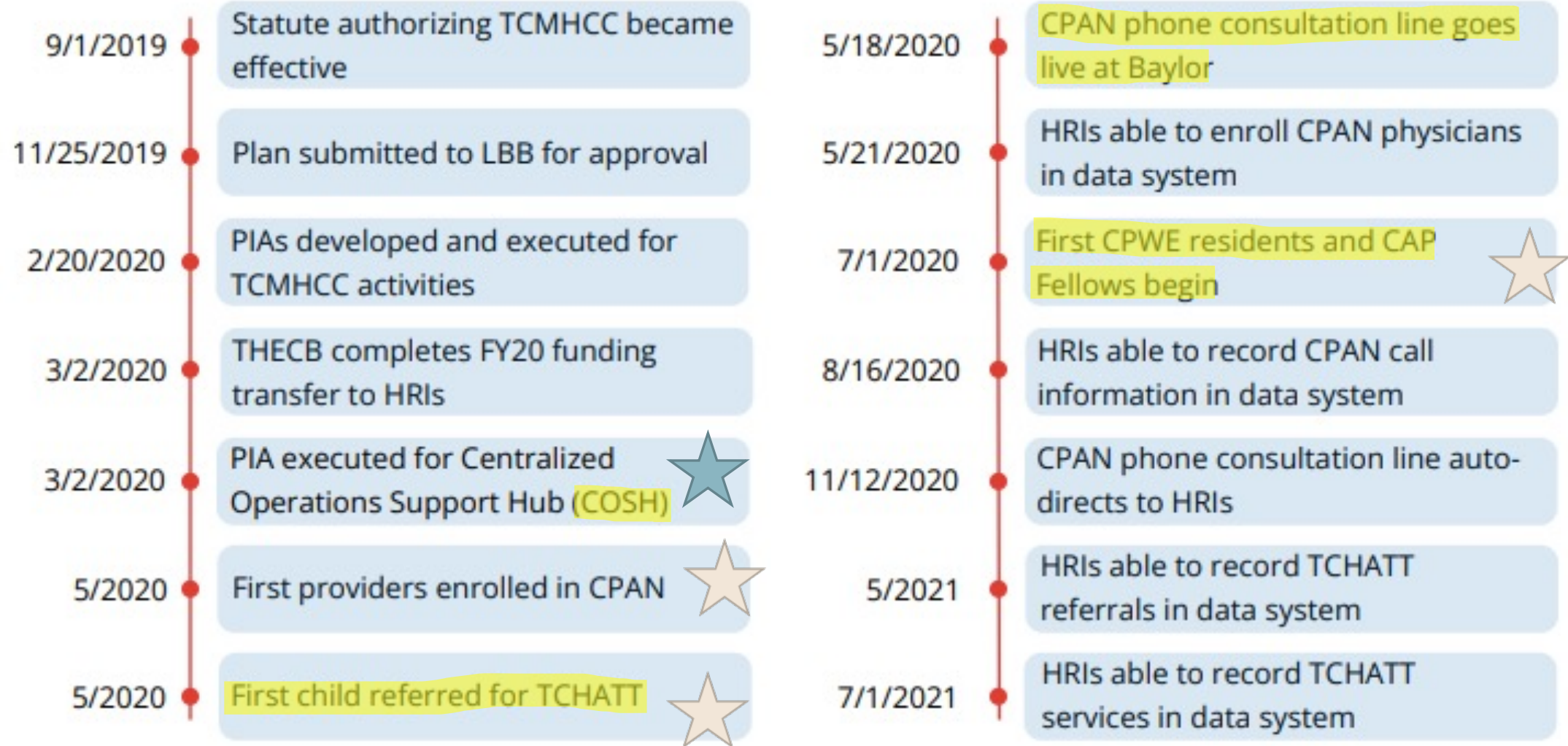
tcmhcc

Texas Child Mental Health Care Consortium

Senate Bill 11

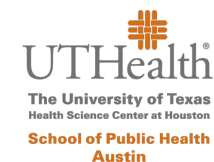


TCMHCC TIMELINE FOR SERVICES AND DATA SYSTEMS



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tcmhcc

Texas Child Mental Health Care Consortium

CPAN

TCHATT

CPWE

The Texas Child Mental Health Care Consortium

WEBSITE: <https://tcmhcc.utsystem.edu/>



— Summary Report —

2020 - 2021 Biennium

CPAN

Child Psychiatry Access Network

Primary goal is to enhance PCPs' capacity to care for children and adolescents with specific mental health needs and to support referral to specialty care when indicated



PROGRAM METRICS



4,854
Physicians

Number of Primary Care
Providers Enrolled in CPAN



99%

Percent of Phone Calls Answered within 5
Minutes (February - July, 2021)



3,891

Number of CPAN
Consultation Calls



19%

Percentage of Enrolled PCPs Using
Consultation at Least Once



99%

Percentage of PCPs Reporting
Satisfaction with CPAN Consult

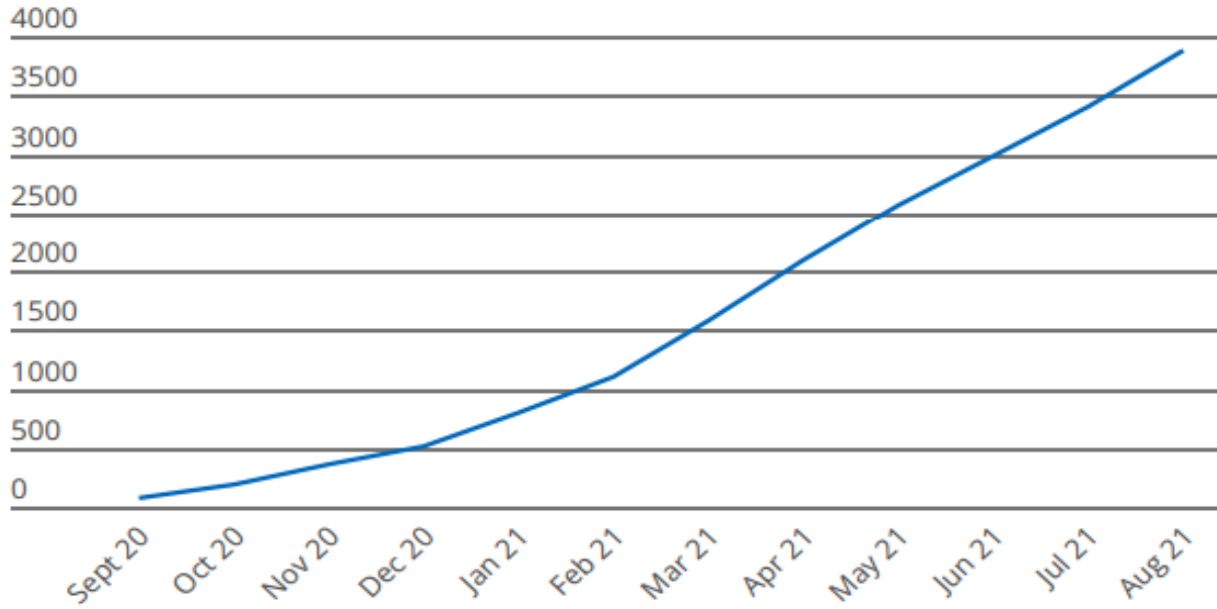


75%

Percentage of PCPs Reporting Comfort with
Managing Care After Consult

Note: All metrics represent data for SFY 2021 or enrollment as of August 31, 2021, unless otherwise noted.

CUMULATIVE NUMBER OF CPAN CONSULTATION CALLS



★ Child Psychiatry Access Network (CPAN) [\(888\) 901-CPAN](tel:(888)901-CPAN)

MESSAGES FROM CPAN ENROLLEES



Appreciate the service very much. This is a huge savings of resources and allows me to meet the needs of my patients in their medical home!

The new phone system coverage has been excellent, as it allows [us] to speak directly and very fast with the psychiatrist on call, statewide! Great idea!

This is exactly the help small, rural communities need to help with the mental health of our children.



tcmhcc

TCHATT

Texas Child Health Access Through Telemedicine

School-based mental health services across the diverse regions of Texas, including areas with mental health workforce shortages.

Provides:

- mental health assessments for students
- Short-term, psychiatric medication management and/or counseling services,
- Referral access when care transition is needed.



PROGRAM METRICS



218

Districts

2,311

Campuses

Number of School Districts and Campuses Enrolled in TCHATT



1,746,322

Students

Number of Students Able to Access TCHATT Care (Covered Lives)



5,702

Number of Students Served in TCHATT



13,041

Number of TCHATT Encounters

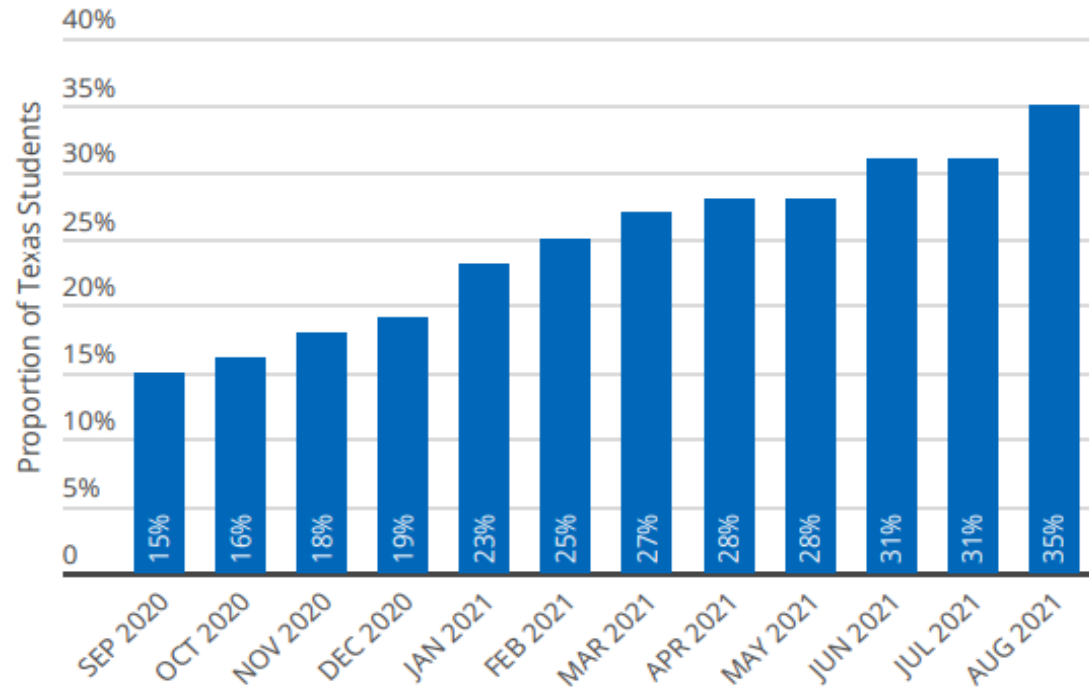


2,063

Number of Students Referred for Ongoing Services Following TCHATT

Note: All metrics represent data for SFY 2021 or enrollment as of August 31, 2021.

PERCENTAGE OF ALL TEXAS STUDENTS COVERED THROUGH TCHAT BY MONTH



Texas Child Health Access Through Telemedicine (TCHAT)

MESSAGES FROM FAMILIES IN TCHAT



I enjoyed the service; glad the program was created for families that need help. Wouldn't have made it without the TCHAT team

Absolutely pleased with the TCHAT service. You guys have been a blessing to children and families during such a difficult time. Wonderful experience. [Therapist] was incredibly patient, warm, sweet, flexible, accommodating, and knowledgeable.

CPWE

Community Psychiatry Workforce Expansion

Establishment of training rotations and academic medical director to support psychiatry training in communities

Community Agencies with HRI Partnerships

- The Harris Center for MH & IDD
- StarCare Specialty Health
- El Paso Child Guidance Center
- Aliviane, Inc.
- Gulf Bend Center
- Andrews Center
- Metrocare Services
- Emergence Health Network
- JPS Healthcare
- Texana Center
- Center for Healthcare Services
- Hill Country MH & IDD
- Gulf Coast Center



PROGRAM METRICS



8.9

Academic
Medical Director

Number of Faculty and Residents Assigned

15.7

Psychiatry
Residents



3,763

Individuals Served

Number of Unique Individuals Served



8,228

Visits

Number of Unique Service Visits



79%

Children

Proportion of Individuals Served
Who are Children

Note: All metrics represent data for SFY 2021. CPWE metrics may under-represent program accomplishments, as data were not available at all HRIs.

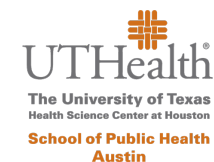
American Resuce Plan Act (ARPA) funds

- In the Fall of 2021, the **Consortium was appropriated \$113 million** to enhance and expand initiatives in response to the impact of COVID-19 pandemic.

Section 8 of Senate Bill 8 provides time-limited federal resources to:

“...support the operations and expansion of the Texas Child Mental Health Care Consortium to **expand mental health initiatives for children, pregnant women, and women who are up to one year postpartum** during the two-year period beginning on the effective date of this Act.”

-Implementation of these new components varies by region and Health-Related Institution (HRI).



Filter on Institution Name or Program Category by clicking on the boxes below. You can select more than one box by holding down the CTRL key while making your selection.

Health Related Institution

Select all	TTUHSC	UTHSCSA	UTSW
BCM	TTUHSC EP	UTHSCT	
Dell	UNTHSC	UTMB	
TAMUHSC	UTHSCH	UTRGV	

Program Category

Enhancements and Expansions of CPAN Initiatives	Expansion of the Texas MH Workforce
Enhancements and Expansions of TCHAT Initiatives	

ARPA Projects by Participating Institution and Program Category

Initiative

- Additional Child Fellows / Child practicum for psychology grad students / child & adolescent psychology internship
- Additional Consults - Direct Services
- Additional Sessions As Needed
- Cover more TCHAT Regions
- CPAN DM / Text Add-On
- LMHA Telehealth Services
- LPC / LCSW / NP Training
- Pediatric Collaborative Care
- Perinatal CPAN
- Suicide Prevention (YAM)
- Suicide Prevention Intervention (FISP) / Zero Suicide ECHO
- TCHAT Bilingual Trauma
- TCHAT evidence based face to face and telehealth groups
- TCHAT/CPAN Anxiety Services
- Trauma-Focused Expansion
- Youth SUD Expansion





TCMHCC. Texas Child Mental Health Care Consortium. SB-11.

Executive Director: Taiwo Babatope, MD, MBA, MPH



ARPA. American Rescue Plan Act. SB-8. (N=12 Projects. 12,337,509\$)

Program Director: Cesar Soutullo, MD, PhD



• C-PAN. Child Psychiatry Access Network. Medical Director: Taiwo Babatope, MD

- | | | |
|---|----------------------------|---------|
| • Additional Consults – Direct Services | Dr. Babatope & Yen | 594,614 |
| • C-PAN DM/Text Add on | Dr. Babatope & Yen | 153,244 |
| • Suicide Prevention FISP | Dr. Babatope & Yen | 183,535 |
| • Pediatric Collaborative Care | Dr. Soutullo, Shukla & Yin | |



• T-CHATT. Texas Child Health Access Through Telemedicine. Medical Director: Taha Ali, MD

- | | | |
|--|-------------------------|-----------|
| • Additional Sessions | Dr. Babatope | 690,525 |
| • Region Expansion | Dr. Babatope | 1,126,125 |
| • Suicide Prevention. YAM Youth Awareness MH | Drs Soutullo & Soares | 1,253,480 |
| • Anxiety / Covid-19 | Drs. Zunta-Soares | 867,002 |
| • Trauma-Focused Expansion | Dr. Taylor | 2,002,638 |
| • Adolescent SUD | Drs. Soutullo & Yammine | 827,411 |



• CPWE. Community Psychiatry Workforce Expansion. Medical Directors: Dr V. John & T. Babatope

- | | | |
|--|------------------------|-----------|
| • LHMA Local Mental Health Authorities | Drs. Oyelakin | 2,026,173 |
| • LPC/LCSW/NP Training/Fellowship | Dr. Hamilton & Jacob | 1,702,542 |
| • Additional Child Fellows (CAP)/Psychology Interns) | Drs. Pearson, Babatope | 910,272 |



SB 11 Team -UT Houston



CPWE

ARPA YAM

ARPA



Trauma



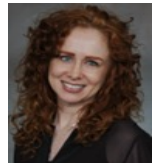
SUD



Interns



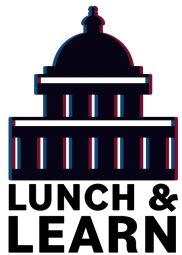
SW
Fellows



Anx

Agenda

1. Under-18 Population in the US and Texas
2. Mental Health Access and Workforce shortage
3. Senate Bill 11 and the Texas Child Mental Health Consortium (TCMHCC)
4. TCMHCC Biennium Report and American Rescue Plan Act Expansion services
5. What's Next?



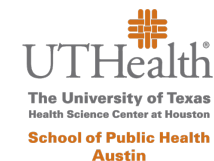
What's Next for us?



Child mental health concerns continue to be on the rise, as the younger population rises
ARPA funds are time-limited (January 1, 2022 - December 31, 2023.)

Child Psychiatrist Shortage:

- More than 50% of Child Psychiatrists are expected to reach retirement age by 2025.
- Primary care providers cannot safely fill the void created by of a lack of psychiatrists
- By not treating mental illness, we increase school dropouts-lower graduation rates, increase teen pregnancy, accidents, violence/ encounter with JJS (due to impulsivity and substance use) and ultimately increase risk for suicidality



Texas is still at the heart of medical possibilities

Dr. Michael DeBakey and Dr. Denton Cooley, competed to pull off heart surgeries

Dr. Red Duke's Life Flight toted urgent-care patients across the Texas landscape to Memorial Hermann

Patients from across the world travel to MD Anderson for innovative cancer treatments

Newly constructed beds opening statewide, investments on our campus (\$125 million Dunn construction, research funding, PTSD treatment for vets, subacute program research.



Primary Short-term Goals

Continue to build and Expand on Consortium/ARPA Initiatives

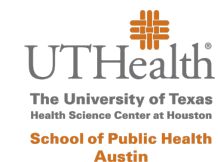
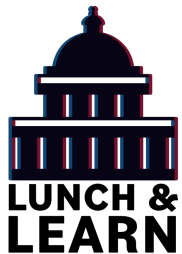
- Psychiatrists lead a multidisciplinary team that could include advanced practice providers, psychologists, nurses, therapists and a variety of other mental health professionals
- Psychiatrists act as consultant/advisor to primary care providers, provide school-based health care professionals and others to expand care to underserved areas
- Leverage telehealth technology to improve access and continuity of care

Increase support and training for all Mental Health Professionals- *UTHealth's proposed school of behavioral sciences*

Provide support to Pediatric, Family Medicine, OBGYN training for training and collaborative care models to ensure adherence/continuity of care

Creating a better, more integrated system of care throughout our region can multiply the impact of the child psychiatrist.

However, It will take time and investment



Long term Goals

Increase federal and state role in funding mental health services.

Improve access to telemedicine across the state.

Support effective models of school-based mental health care
(TCHATT)

Accelerate integration of mental health care in primary care pediatrics
(CPAN, PeriPan)

Strengthen efforts to reduce the risk of suicide in children and adolescents (YAM, Safety-A).

Address ongoing challenges of the acute care needs of children and adolescents (Children's hospitals with MH access)

Fully fund community-based systems of care that connect families to evidence-based interventions
(CPWE)

Promote and pay for trauma-informed care services. (TIC, **TF-CBT**)

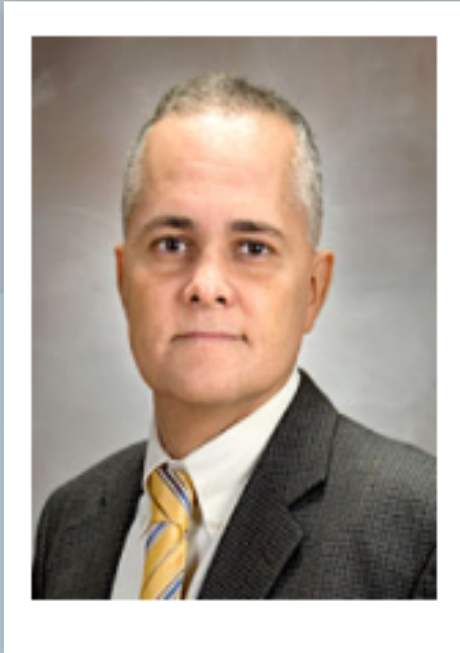
Address workforce challenges and shortages so that children can access mental health services

Support workforce and capacity for 988 suicide and crises lifeline

Supportive housing, supportive education, childcare, Assertive Community Treatment (ACT)

Advance policies that ensure compliance with mental health parity laws

Special Thanks



Jair C. Soares, M.D., Ph.D.

Vice President for Behavioral Health.

Professor, Chairman, and Pat Rutherford
Chair in Psychiatry



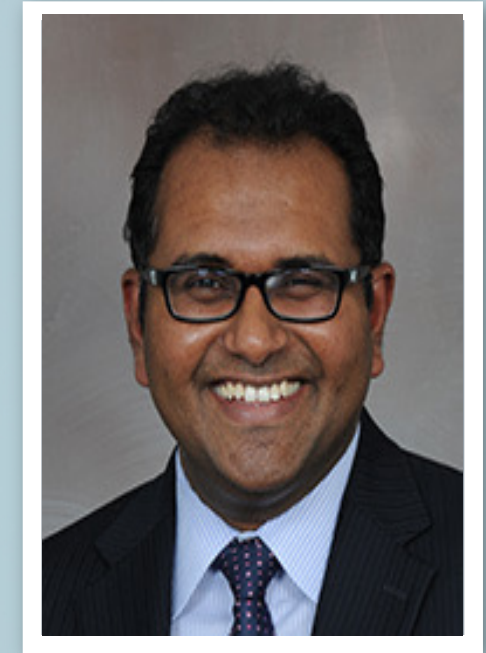
Cesar A. Soutullo MD, PhD

Professor, Vice Chair and
Chief of Child and Adolescent
Psychiatry



Mary Lopez, MBA

Director Management
Operations , Department of
Psychiatry



Vineeth John, MD, MBA

Professor, Vice Chair of
Education and Program
Director of the Psychiatry
Residency Program

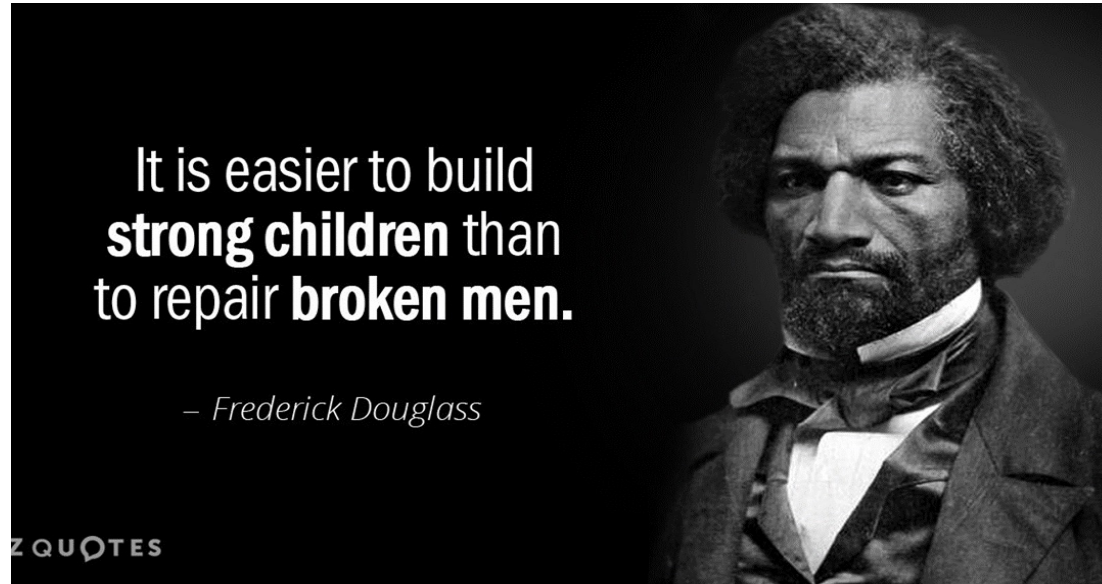
Thank you for listening



tcmhcc



Texas Research-to-Policy
— Collaboration Project —



Thank you

Taiwo Babatope, MD, MPH, MBA.

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TX RPC Resources

TX RPC Resources

[Go.uth.edu/RPCResources](https://go.uth.edu/RPCResources)

TX RPC Newsletter Archive

[Go.uth.edu/RPCResources](https://go.uth.edu/RPCResources)

Texas Child Health Status Reports

[Go.uth.edu/TexasChildHealth](https://go.uth.edu/TexasChildHealth)

Michael & Susan Dell Center Webinars

[Go.uth.edu/TexasChildHealth](https://go.uth.edu/TexasChildHealth)

Texas Legislative Bill Tracker

[Go.uth.edu/LegTracker](https://go.uth.edu/LegTracker)

Scan to view our Legislative Initiatives:

