

# Report: Mental health crises spike among youth

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Emergency room visits for mental health crises spiked among children, teens and young adults from 2011 to 2020, researchers from UConn School of Medicine and other institutions report in the May 2 issue of

the *Journal of the American Medical Association (JAMA)*. The increase continues a disturbing trend first noted in 2006, and underscores the need for socio-behavioral interventions.

Concerns about young adult, teen and child mental health have risen in the wake of the isolation and disruptions of the COVID-19 pandemic. But American youth's mental health troubles began more than a decade before the pandemic, according to data from emergency departments in hospitals nationwide.

UConn School of Medicine psychiatric epidemiologist T. Greg Rhee and colleagues from the Mayo Clinic, Columbia University Irving Medical Center, Yale University School of Medicine and the VA Connecticut Healthcare System analyzed data from the 2011-2020 National Hospital Ambulatory Medical Care Survey (NHAMCS). NHAMCS is an annual survey of hospitals across the US.

The ten years of survey results included 49,519 mental health-related visits for youth from the ages of 6 to 24 years old. They looked at the reasons for the visits, the length of stay, and the treatment offered, as well as the sex, ethnicity and geographic location of the patient.

Their results showed strikingly similar trends across all youth groups and regions of the country: mental health-related visits rose every year, climbing from 7.7% of all pediatric emergency visits in 2011 to 13.1% of all pediatric emergency visits in 2020. And the proportion of mental health emergency visits for suicide-related causes increased as well, from less than 1% to more than 4% of pediatric visits.

"We knew it was increasing over time, but this is the first nationwide study to look at this since 2016," says Rhee. "Our results suggest that a growing number of youth have unmet mental health needs in the community, but the [emergency department](#) is not the optimal treatment

setting for children with mental health needs," Rhee says.

The study results show largely similar trends across all regions of the country, and all races and ethnicities. And the rise in emergency mental health visits and suicide-related causes has been touching younger and [younger children](#) over time, as well as rising amid adolescents 12-17 and [young adults](#) aged 18-24. Until recently, suicide-related issues in [elementary school](#) aged children were vanishingly rare.

"We don't know why [younger generations](#) are starting to be more at risk for suicide, but evidence-based suicide prevention efforts should include children and early adolescents," Rhee said. Studies have shown, for example, that programs to help preschoolers manage their emotions lead to reduced [mental health](#) problems in adolescence.

**More information:** Tanner J. Bommersbach et al, National Trends in Mental Health–Related Emergency Department Visits Among Youth, 2011-2020, *JAMA* (2023). [DOI: 10.1001/jama.2023.4809](https://doi.org/10.1001/jama.2023.4809)

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