Philadelphia's Next Mayor Must Prioritize Kids' Mental Health

Philadelphia is facing a crisis in children's mental health. In 2019, 40% of Philadelphia students reported feeling sad or hopeless almost every day, and 22% had considered suicide. This mental health crisis is rooted in and directly connected to systemic causes that have only been exacerbated by the COVID-19 pandemic, such as:

- The Gun Violence Epidemic: The gun violence that our city's youth is experiencing is of unprecedented proportions, which suggests a severe impact on our children's mental health as a result. A study conducted by Penn Medicine using 2021 Philadelphia gun violence data found that children living within 4-5 blocks of a shooting have increased odds of a mental health-related pediatric emergency department visit. In this same time period, rates of suicidal ideation and deaths by suicide have increased among high school students. Children's mental wellness is a violence prevention strategy.
- Structural Racism and Inequity: Exposure to both structural and personally mediated racism and discrimination has been identified as a prominent social driver of mental health, as highlighted in <u>the American Academy of Pediatrics'</u> policy statement. Such exposure has been shown to negatively impact the social-emotional and behavioral development of young children. Yet, the Philadelphia mental health system is primarily run by white leadership that does not understand the experience of racism and its effects on mental health. Philadelphia lacks a behavioral health workforce that is culturally responsive and representative of the vulnerable youth in our city. Racism has contributed heavily to the mental health crisis our children are experiencing.

• Systemic Poverty and Mental Health: Childhood poverty is well recognized in research as an indicator of poor mental health outcomes. Of the 350,000 children living in Philadelphia, about 290,000 rely on the services administered and managed by Community Behavioral Health (CBH). This means the city is the service delivery mechanism for 83% of the children in the city. These services are severely underdeveloped to meet the complex needs of our children.

The bottom line is that 138 children have been victims of a shooting in 2023 alone; 16 of these shootings were fatal. Children across the city see this violence and wonder not if, but when it will happen to them. Our children are living in a constant state of stress and fear. Yet, the city's mental health system has not taken a leadership role in the strategy to address gun violence.

In the summer of 2023, several key stakeholders were consulted, including parents of children with mental health challenges; school counselors and nurses; teachers; behavioral health providers; and behavioral health administrators. The stakeholders identified the following three priorities to address the children's mental health crisis in Philadelphia.

- 1. Increase availability of and access to quality mental health supports in schools
- 2. Increase access to mental health services for children outside of school.
- 3. Reform the behavioral health resources and supports for children ages 0-3.

Priority 1: Increase availability of and access to quality schoolbased mental health services

Only 57 of the 217 schools in the Philadelphia school district have access to quality targeted mental health supports (STEP program).

The STEP program has served around 25,000 students annually, representing just 12% of the district's total student population. While intensive mental health supports are available in all schools, utilization of these services remains low.

1a. Appointing a DBHIDS Commissioner and CEO of CBH who will fully undertake the development of the school-based mental health system, including quality assurance and increased utilization.

1b. Appointing school board members that will follow through on the prioritization of student mental health and wellness.

1c. Make increased access to quality mental health services for kids in schools a top priority for your time as mayor.

1d. Direct CBH and DBH to deepen their effort and expand resources to work with the District to increase the mental health and wellbeing of all youth in Philadelphia by ensuring the availability of services and supports across all three tier of the multi-tiered system of support.

Comprehensive Mental Health System of Supports

Tier One: Universal mental health supports Proactive mental wellness resources through safe school climate, social emotional learning curriculums, and support from staff trained in Mental Health First Aid and Healing Centered Engagement practices.

Tier Two: Targeted mental health supports

Students who need more support receive targeted, brief interventions from trained school counselors and/or behavioral health professionals. These services can be funded through Medicaid if structured appropriately. The mayor must direct city funds to support these services for youth not covered by Community Behavioral Health.

Tier Three: Intensive mental health supports

Students who need the most intensive level of mental health services are able to access these services easily, without bureaucratic barriers to hinder the process.*

Priority 2: Increase access to mental health services for children outside of school.

Zero training or connection to support.

2a. Direct DBHIDS and CBH take a leadership role in partnership with the city's Out of School Time and Violence Prevention offices to build the capacity and resources for Out of School Time providers and other extracurricular programs so they can support the mental health needs of the children served by programming.

2b. Extend the reach of Tier One/universal supports in schools to promote mental health and wellness into out of school time programs.

2c. Direct DBHIDS/CBH to commit resources to implement Healing Centered Engagement practices across school-based behavioral health providers.

Priority 3: Reform existing behavioral health resources and support for children ages 0-3.

"Emotional disturbance" comprises less than .1% of the children enrolled in Early Intervention programming in Philadelphia, yet over 20% of suspensions and expulsions are attributed to problematic behaviors. The Early Intervention system is the earliest stage of the school to prison pipeline. Philadelphia's Early Intervention part C (birth to three years old) should be the best program in the state. Unfortunately, the city is failing to administer effective intervention programs.

3a. The next mayor must develop a turnaround plan to revamp the city's delivery of these services within six months that boost utilization and quality of services.

3b. Create an Early Childhood Division within DBHIDS/CBH to amplify the priority of early childhood mental health.

Sample elements of an Early Intervention Turnaround Plan are attached in Appendix A.

Conclusion

Addressing the youth mental health crisis in Philadelphia requires strong leadership at every level that can disseminate clear vision and build community buy-in. To accomplish the above priorities, the next mayor must appoint a Commissioner of DBHIDS and a Chief Executive Officer of CBH with the following qualities:

• Technical qualities

- Deep understanding of children's mental health from a trauma-informed perspective.
- Public health expertise in systems-level implementation and administration.
- Understanding of poverty, racism, and violence as adverse childhood experiences and the underpinning of mental illness
- Takes a prevention approach to mental health that builds community-level and individual resilience.

• Leadership qualities

- Strong advocate for the children of Philadelphia
- Ability to communicate directly with Philadelphia's communities

Appendix A: Sample elements of an Early Intervention Turnaround Plan

- 1. The city's program must ensure there is seamless transition between the state-run Eary Intervention Part B program (3-5 year olds).
- 2. Develop outcomes that will measure process improvement, program quality, and child-centered outcomes of the revamped Early Intervention system.
 - a. Every child is guaranteed screening within X days
 - b. Every child is guaranteed service within X days after screening
 - c. Track utilization over time to measure whether families persist with the service as an indicator of quality of the service
- 3. Upon the execution of the Early Intervention Turnaround Plan, the mayor can take the following actions to improve the system:
 - Builds service coordination and referral pathways across Community
 Behavioral Health and Early Intervention agencies, establishing seamless
 access to qualified services
 - b. Increase the number of families served by clinical interventions among children birth to five years old.
 - c. Develop and promote centralized local resource library to include essential information on functions of agencies within Early Intervention and Behavioral Health to include common sample forms, explanations of use, direct contact information, and endorsed technical assistance and training resources.
 - d. Embed collaboration tools in Early Intervention Service Provider protocols to promote consultative early intervention service model in early learning settings.
 - e. Establish a mechanism for regular, reciprocal feedback between early learning programs and Early Intervention and Behavioral Health agencies.

Supporting Writers

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About The Kids Campaign

The Kids' Campaign is the first of its kind in Philadelphia – a nonpartisan effort that is not backing a candidate for Mayor and that defines the election solely on the safety of children and youth. Through candidate questionnaires and forums, The Kids' Campaign will share with voting parents and young adults the information they need to determine which candidate will keep Philly's children safe. Learn more about The Kids Campaign at www.thekidscampaign.org.