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MENTAL HEALTH PROFESSIONALS CHAT

Staff at Spaulding Youth Center discuss the mental health challenges facing children following an unprecedented and stressful year.

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MENTAL HEALTH

A growing psychological crisis in children

Roundtable of mental health experts discuss the issues kids face

By **TEDDY ROSENBLUTH**

Monitor staff

Spaulling Academy & Family Services, a 500 acre campus in Northfield, offers services for children with neurological, emotional and developmental challenges. Recently the facility grew its medical team to keep up with the growing demand for psychiatric care.

The *Monitor* sat down with some of New Hampshire's top child mental health experts from Spaulding to discuss the growing psychological crisis facing kids across the state.

The roundtable included comments from Amanda Champagne, the executive director of residential services, Chandra Miller, the medical director, Nick Lefebvre, the health services director as well as two new psychiatrists at the facility: Gregg Rogers and Terrie McCafferty.

What are the primary mental health issues facing children in New Hampshire?

Terrie McCafferty: I would say that COVID has seriously impacted the junior high school and high school students. Some do well with online learning, some do not. They may have underlying conditions that were not requiring mental health services, but I believe that COVID has brought out a lot of those. We are seeing significant depression and anxiety. I'm also seeing family systems having significant problems where parents are working at home with children, and they're trying to get their work done on one computer and the kids are on another computer, and, you know, all kinds of parenting and behavioral issues are starting to happen.

Gregg Rogers: can say that grammar school, elementary school, junior high and high schoolers are being affected. There's anxiety, depression and initially a lot of social isolation. When schools opened up it's improved somewhat but I would say that, definitely the kids with pre existing anxiety, depression, along with a genetic component definitely exacerbate symptoms and it's been a difficult course. Before the pandemic I had about maybe two, three week waitlist and now I'm at at least two months. So it's, it's been tough to sort of respond in different ways to accommodate the demand.

How are kids at Spaulding handling some of the changes COVID has brought?

Amanda Champagne: We have worked really hard as an organization to get our kids out into the community – advocating for themselves, learning how to save money for an object that they really want, going in and buying, going to fairs, going to activities. We have students that have real jobs at Taco Bell and different things like that, or they're do-



Nick Lefebvre



Chandra Miller

Courtesy photos

ing volunteer opportunities.

So those are some of the the major impacts that kids have faced. We can't go into the community. So, you know, we work through that with them so that's been a real challenge. Also not being able to go see their families has been another one. And then, you know, just the kids wanting to be able to get in the van on a Saturday and go to the ocean for the day and get ice cream on the way back.

We do have a community here, but we've had to separate them from other houses so we have a kid that lives in one house that has a best friend that lives in another house. We're trying to restrict that for safety purposes. So really trying to balance that's the best way we can.

Do you expect these mental health challenges to follow a generation of kids or will the issues resolve themselves once schools and society start opening up again?

TM: Sometimes children inherit predispositions towards conditions. Sometimes I think of this as a situational depression, and it's depression that's been brought on because of the situation that we're facing in our country. The good news is sadly, there will be other adverse situations that we face. The good news is that we can teach those skills. So the next time they experience an adverse situation, hopefully it doesn't put them into a spiral of very deep depression, that's not to say that they won't need some services but this is a great opportunity to treat people, very early on in my opinion.

GR: there's going to be different situations. Clearly, the pandemic has caused vulnerable families to be less functional and for those kids. We know that there are less reported cases of abuse and neglect because people aren't seeing the kids that aren't in school. So, there's potential for that to turn into something bigger, but I would say kids are resilient. Now if you sit there in a supportive family, I certainly think as things settle down, having enriching, buffering relationships in your life is going to ensure that you recover and maybe get back to your baseline if you experience some anxiety as a result of all this.

Chandra Miller: there will be some of the younger generation going through this that will continue to struggle and will continue to need assistance and therapies. There'll be others that overcome it and get back to the baseline. I think part of that will come down to how much the supports around them are put into place.

Where are the gaps in mental health resources for children?

CM: from my experience, I think one of the biggest gaps is just the

availability of providers. I think that more recently there's been an increased awareness of the need for these providers, but it takes time to catch up – you can't just have providers that appear overnight.

TM: I think there's lots of barriers. One of the very first barriers, is to be get to basically get on the panels for reimbursement for insurance companies. And this is not an easy process can take up to 120 days. Becoming a provider for Medicaid can even be worse. Additionally, reimbursement rates are really sad, quite frankly.

People who come into this field get burned out very quickly. And part of that is large case loads, part of that is not very good reimbursements and not necessarily really good benefits. So I think there's a number of factors that play into why we don't have enough counselors. The other factor is college is very expensive. People think, well if I have to pay this for education and this is what I'm going to make, they tend not to look at this field, which is really too bad, because a lot of people I think would go into human services if things were different.

GR: I completely agree. Our therapists would come in and see some of the most difficult cases most difficult patients and they don't last very long and they leave. I watch them come and go, and they're great when they're around, but then the patients have to start again with a new therapist. It's difficult for them.

How do you combat staff burnout at Spaulding?

AC: Some of the things that we do is just being able to, you know just laugh and not have to just business as usual. Over the last year with COVID, we've done pizza parties we've done parades, you know, we had a staff member bake a whole boatload of rainbow cookies that they handed out.

Actual page view:

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