

OREGON MEDICAL ASSOCIATION
BOARD OF TRUSTEES
FEBRUARY 5, 2022

RESOLUTION NO. 10

1 INTRODUCED BY: Kirk Wolfe, MD, DFAACAP, DFAPA, OMA Trustee; Mary
2 McCarthy, MD, OMA Trustee
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4 SUBJECT: Addressing the Crisis in Youth Mental Health in Oregon
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6 WHEREAS, the American Academy of Pediatrics (AAP), the American
7 Academy of Child and Adolescent Psychiatry (AACAP), and
8 the Children's Hospital Alliance have formally declared a
9 national crisis with children's mental health. More than
10 140,000 children in the United States lost a primary and/or
11 secondary caregiver with the pandemic, with youth of color
12 disproportionately impacted. Between March and October
13 2020, the percentage of emergency department visits for
14 children with mental health emergencies rose by 24 percent
15 for children ages 5-11, and by 31 percent for children ages
16 12-17; and
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18 WHEREAS, the crisis of youth mental health is even worse in Oregon,
19 with 2022 (*published 10/19/21*) youth data by Mental
20 Health America ranking Oregon #45 of 51 states related to
21 higher prevalence of mental illness and lower rates of
22 access to care. The state annual prevalence of youth with
23 major depressive episode (MDE) was highest in Oregon at
24 18.6 percent, with Oregon's rate of severe MDE more than
25 33 percent above the national average. The state prevalence
26 of substance use disorder was highest in Oregon at 5.77
27 percent, more than 41 percent above the national average;
28 and
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30 WHEREAS, the incidence of major depression and substance use are
31 leading risk factors for death by suicide, the #1 cause of
32 death in Oregon youth age 10-24 in 2018 and the #2 cause
33 of death in 2019. Be It therefore
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35 **RESOLVED,** **that the OMA conduct an awareness campaign on the**
36 **crisis of youth mental health and substance use, and**
37 **risk for suicide, with Oregon legislative representatives,**
38 **physicians, and physician assistants; and be it further**
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40 **RESOLVED,** **that the OMA recommend a state study on whether**
41 **mental health parity is being fully implemented in**
42 **Oregon; and be it further**
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1 **RESOLVED,** **that the OMA support improved state and federal**
2 **funding dedicated to ensuring all youth, from infancy to**
3 **transitional age youth, can access evidence-based**
4 **mental health and substance use screening, diagnosis**
5 **and treatment to appropriately address their needs,**
6 **with particular emphasis on meeting the needs of**
7 **under-resourced populations; and be it further**

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9 **RESOLVED,** **that the OMA promote the adoption of effective and**
10 **financially stable mental health care in primary care**
11 **pediatrics and family practice, including clinical**
12 **strategies and effective models of payment.**

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14 References
15 [Pediaticians, Child and Adolescent Psychiatrists and Children’s Hospitals Declare National Emergency in](#)
16 [Children’s Mental Health](#)
17 [Mental Health America Youth Data 2022](#)
18 Brent et al, [Psychiatric Risk Factors for Teen Suicide](#), JAACAP, 1993, 32, 3: 521-529.
19 Rideout, et al, [Emergency Department Encounters Among Youth With Suicidal Thoughts or Behaviors During](#)
20 [the COVID-19 Pandemic](#), JAMA Psychiatry, 2021.
21 [OHA Center for Health Statistics: Leading Causes of Death Data Dashboard. Access November 9, 2021](#)
22 [Youth Suicide Intervention and Prevention Plan Annual Report 2020](#)
23 [OHA News Release](#) from March 2021 with 2019 data and discussion on 2020 preliminary data
24 [More than 140,000 U.S. children lost a primary or secondary caregiver due to the COVID-19 pandemic](#)
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