DATE: March 12, 2023

TO: Representative Rob Nosse, Chair

Representatives Christine Goodwin and Travis Nelson, Vice-Chairs Members of the House Committee on Behavioral Health and Health Care

FROM: Alanna Braun, MD, FAAP

Oregon Pediatric Society Board Immediate Past President

SUBJECT: HB 3126 – Support Emergency Behavioral Health Services for Children

For the record, my name is Alanna Braun, MD, and I am a pediatrician and the immediate past board president of the Oregon Pediatric Society (OPS), the state chapter of the American Academy of Pediatrics (AAP). I write today in strong support of HB 3126.

In a 2021 joint statement, the AAP, the American Academy of Child and Adolescent Psychiatry, and the Children's Hospital Association declared a National State of Emergency in child and adolescent mental health. This is an old problem that has been exacerbated by the stress of the COVID-19 pandemic; suicide has been the first or second leading cause of death for youth ages 10-24 in Oregon for years.

Every week, I spend hours working with and for my primary care patients trying to find and access behavioral health resources in their communities. There are simply not enough resources available for children, both for long-term mental health support to prevent behavioral health crises in the first place, and for emergency services after they have reached that crisis point.

Over the course of the pandemic, emergency department visits for mental health emergencies skyrocketed, which showed us how broken our already strained system is. A paper published in *Pediatrics* in February 2023 looked at emergency mental health visits and their outcomes across the country. Even as emergency room visits are continuing to rise for behavioral health concerns, we do not have adequate resources to help these children when they are discharged from the emergency room, which occurs in most cases. Less than a third of these children had appropriate behavioral health follow up within a week of discharge, and less than 60% had follow up within *thirty days* of their emergency visit. Often, because children do not have access to timely follow up, they spend longer in the emergency room, which does them a disservice and limits care that can be provided to other families in crisis.

Oregon children need more options and access for mental health care, and HB 3126 offers a great starting point. We need to build a better system of behavioral health care before and after mental health crises, to help young people heal and to prevent future



emergency department visits and self-harm. The Oregon Pediatric Society strongly supports HB 3126 as an important step in supporting children and families and urges you to vote yes on this important legislation.

REFERENCES

AAP-AACAP-CHA Declaration of a National Emergency in Child and Adolescent Mental Health, October 2021. https://www.aap.org/en/advocacy/child-and-adolescent-healthy-mental-development/aap-aacap-cha-declaration-of-a-national-emergency-in-child-and-adolescent-mental-health/

Hoffmann JA, Krass P, Rodean J, et al. *Follow-up After Pediatric Mental Health Emergency Visits*. Pediatrics. 2023;151(3):e2022057383