

ISSUE:

Immediate action is needed to expand the child and adolescent psychiatry (CAP) workforce in the face of growing unmet mental health needs of America's youth.

BACKGROUND:

- America's child and adolescent population currently numbers 75 million.
- **Mental illness impacts 1 in 5 of America's young people.** 50% of all lifetime cases of mental illness begin by age 14; 75% by age 24.
- CAPs number only some 8,000. Credible estimates place current U.S. need at over 30,000 CAPs.
- Wait times to see a CAP now average 7.5 weeks, even as incidence of wide-ranging mental health, developmental, and behavioral disorders grows nationally.
- Physicians are not filling available seats in specialized CAP training programs for a number of reasons, including staggering medical student loan debt.

Last Congress, the U.S. House of Representatives passed comprehensive mental health reform legislation that would have brought pediatric psychiatry subspecialty fellows or trainees into the National Health Service Corps (NHSC), which provides loan relief to eligible physicians. The House-adopted bill contained (1) clarifying definitions to cover child and adolescent psychiatry, (2) listing children as an underserved population for needed medical services, and (3) ensuring that child and adolescent psychiatry training sites and programs meet eligibility criteria. Unfortunately, this provision was dropped by negotiators in the final version of the 21st Century Cures Act, into which many other important mental health reforms were folded prior to enactment.

Right now, NHSC provides medical education loan relief for physicians who have successfully completed *general* pediatrics or *general* psychiatry residency training programs and ended training. As pediatric subspecialists, CAPs are still in educational training for at least 2 years after their prerequisite *general* residency. **Trainees, who go on to specialize in child and adolescent psychiatry have no meaningful and widely available opportunity to practice child and adolescent psychiatry through the current NHSC loan relief program.**

Under NHSC program requirements, physicians must be formally attached to a comprehensive community based facility, and the law prohibits them from locating in inpatient facilities. Such legal limitations amount to exclusion of CAP trainees in NHSC loan repayment programs.

CONGRESSIONAL ASK:

• Please co-sponsor H.R. ___ or S. 989, "Ensuring Children's Access to Specialty Care Act of 2017," introduced by Sens. Roy Blunt (R-MO), Jack Reed (D-RI), to include pediatric subspecialists in the NHSC loan relief program.

American Association of Child & Adolescent Psychiatry