



# Emergency Care and the Pediatric Mental Health Crisis



*In the United States, pediatric mental health has become a national emergency.*

**2nd**

Suicide is the 2nd leading cause of death for children over age 10.<sup>1</sup>

**1 in 5**

children ages 3-17 in the U.S. have a mental, emotional, developmental, or behavioral disorder.<sup>2</sup>

**7-8%**

of adolescents attempt suicide each year.<sup>3</sup>

## How does it affect EDs?

Emergency departments (EDs) are often the front door to care for children in crisis. Utilization for pediatric mental health visits increased by 8% annually between 2015 and 2020 while all other visits increased by 1.5% annually.<sup>4</sup> EDs may struggle to meet the growing and complex needs of these children.

## EMSC Resources for Emergency Clinicians

PEAK: Suicide	PEAK: Agitation	ED STOP Suicide QI Collaborative Resources
<b>For EDs and EMS</b>	<b>For EDs and EMS</b>	<b>For EDs</b>
Clinical resources for suicide screening and prevention—including practice guidelines.	Clinical resources to assist in caring for children experiencing agitation.	Resources and recordings focused on screening and treatment options for pediatric suicide.



Access these resources and more at:  
<https://emscimprovement.center/domains/mental-health>

View references here: <https://bit.ly/mh-flyer-refs>

The Emergency Medical Services for Children Innovation and Improvement Center resource is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award (U07MC37471) totaling \$2.5M with 0 percent financed with nongovernmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, visit HRSA.gov.