


# *Children's Mental Health Visits Have Shot Up, Research Shows*

Doctor's visits for children's anxiety rose by more than 250 percent over 10 years, according to a study of nearly two million children.

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By **Ellen Barry**

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A study of insurance claims for 1.8 million children found that the number of families raising mental health issues at visits to general practitioners rose sharply over a decade, with anxiety by far the fastest-growing complaint.

The study, which was published on Monday in the journal JAMA Network Open, found that the number of pediatric visits rose to 9.7 percent in 2023 from 5.7 percent in 2014.

The study included all insurance claims for children from ages 1 to 18 in Massachusetts, for a total of more than 1.8 million children. Visits were counted as mental health visits if a diagnostic code was included in the claim, either because the child or the family raised the issue or because the child screened positive for mental health symptoms during the visit.

Visits for anxiety rose by more than 250 percent during that period, to 6.1 percent in 2023 from 1.7 percent in 2014.

Megan Cole Brahim, an associate professor of population medicine at Harvard Medical School and an author of the paper, said her team had been surprised by “the rapid increase in pediatric anxiety visits in particular, which just far outpaced the growth of all other mental health diagnoses.”

Smaller increases were seen for attention deficit and hyperactivity disorder, or A.D.H.D., which rose to 6.7 percent from 5.0 percent; depression, which rose to 1.6 percent from 1.2 percent over the same period; autism spectrum disorder, which rose to 2.0 percent from 0.5 percent; and trauma, which rose to 1.6 percent from 0.8 percent.

The fact that reports of anxiety so far outstripped the other conditions that were screened for, Dr. Brahim said, suggests “that there’s a true underlying change in symptoms.”

She said the findings suggest that behavioral health services, like psychotherapy, should be integrated into primary care to make it easier for families to access them.

“One in 10 children who walk through the door of primary care have a mental health need that comes up during their visit,” she said. “The magnitude of these issues is surprising.”

A.D.H.D. remained the most common mental health need noted at primary care visits during the study, though anxiety became nearly as common by the end of the study period.

Though the coronavirus pandemic clearly exacerbated pediatric mental health problems, Dr. Brahim said, the trends found in the study preceded it.

Increased screening for pediatric mental health could also be a contributing factor, she said. In 2022, the U.S. Preventive Services Task Force, a volunteer panel composed of medical experts, recommended that all children ages 8 and older be screened for anxiety in primary care settings. But this occurred late in the study period, and so did not account for the rise in anxiety, Dr. Brahim said.

“I think that, because of this, it’s likely that documented rates of anxiety will probably continue to rise over time, much beyond the study period we examined here,” she said.

The new study comes as Health Secretary Robert F. Kennedy Jr. begins a multipronged effort to curb the prescription of psychiatric medications.

Dr. Robert L. Trestman, the chairman of psychiatry and behavioral medicine at Virginia Tech’s Carilion School of Medicine, who was not involved in the study, said the findings were consistent with his experience overseeing a psychiatric system in Western Virginia.

He said there was a well-established rise in suicidal thoughts, which he said is “pretty unambiguously tied to social media.” Increasing mental health problems among children, he said, will affect developmental trajectories and “will have profound impact in the years ahead.”

But, he said, primary care physicians typically have “12 minutes” to spend with a patient. When they identify a problem, their options for providing treatments are limited by insurance reimbursement and a shortage of child psychiatrists.

Therapy may be appropriate, he said, but “who is going to provide it?” Insurance frequently does not cover therapy, and families may not be able to take time off school or work to attend sessions.

As a result, he said, medication is frequently the most accessible treatment for children in distress.

“To simply argue that children are getting too much medication misses the point,” he said. “The pill is not perfect, but it helps them to function and manage their symptoms. If you take away the one thing that is helping, what happens next?”

**Ellen Barry** is a reporter covering mental health for The Times.