Medical experts recommended earlier this week that pediatricians routinely screen all children ages 8 to 18 for anxiety. New York magazine mused aloud “Why are kids so sad?” The Seattle Times ran a column about Black youth suicide, which has soared 60% since 2017, and noted that Black children younger than 13 are now twice as likely to kill themselves as their white peers.

Clinicians, lawmakers, media – everyone seems to agree that children’s mental health issues are specific to children. The American Academy of Pediatrics routinely says that we cannot treat children simply as “little adults,” an admonition that politicians and practitioners must rigorously apply to children’s mental health.

One of the first and most obvious places to start is with the national 988 Suicide and Crisis Lifeline.

First Focus on Children hosts three child mental health experts Thursday, Oct. 20 at 2pm to discuss why — and how — states must tailor implementation of the 988 line to the specific needs of children. Experts include:

- **Elizabeth Manley**, senior health advisor, University of Maryland and former Assistant Commissioner, Children's System of Care, New Jersey
- **Sheamekah Williams**, Director of Children, Youth, and Family Services, Oklahoma
- **Tim Marshall**, senior advisor, Univeristy of Maryland and former Director of Community Mental Health, Connecticut

The panel will tackle how to design effective systems to respond to child and youth behavioral health crises, the benefits of mobile response systems, and the challenges in creating systems best suited to children.

States are currently in the process of implementing the 988 Suicide and Crisis Lifeline, and child advocates are calling on them to meet the needs of children from the start. Children's needs can be very different from adults', and states — with assistance from the federal government — must design and create these systems to meet the needs of children, youth, and families from the beginning rather than retrofit them into an adult-designed system later. To date, 16 states have enacted legislation to implement 988. Of these states, only three have had one or more child- or youth-specific planning provisions included in their legislation.

Space is limited, so please register ASAP for this virtual briefing. All registrants will be sent slides and a recording from the briefing.
This conversation is part of a weeklong series of virtual briefings and advocacy to mark the first anniversary since the Children’s Hospital Association, American Academy of Pediatrics, and American Academy of Child and Adolescent Psychiatry declared the kids’ mental health crisis a national emergency and launched the Sound the Alarm for Kids Campaign. The campaign seeks to raise awareness of the national emergency in child and adolescent mental health accelerated by the pandemic.