

# President's Message

## Addressing Unmet Needs

By Thomas F. Anders, M.D.

I am proud of our profession for its effort to increase and improve access to treatment for children and adolescents with mental illnesses and for its emphasis on *quality* treatment. In 2006, child and adolescent psychiatrists advocated at the local, state, and federal levels for more pathways to comprehensive treatment. Our organization, the leading authority on children and adolescents' mental illnesses, continues to press for change for our most vulnerable population.

In 2006, the AACAP convened two summits of allied mental health organizations to extend child and adolescent psychiatrists' reach. Leaders from the Autism Society of America (ASA), the Child and Adolescent Bipolar Foundation (CABF), Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD), the Federation of Families for Children's Mental Health (FFCMH), Mental Health America (MHA), and the National Alliance on Mental Illness (NAMI) met in March and August to address areas of mutual concern. A legislative action committee combats misinformation disseminated by anti-psychiatry groups. This joint committee is monitoring state legislation that imposes barriers on identifying mental illness and service delivery, providing model legislation,

educating state legislators about children's mental health, and coordinating with state and local chapters and advocacy leaders affiliated with the summit's national organizations.

Achievements at the national level were significant. In May, the AACAP arranged 140 legislative visits for more than 100 child and adolescent psychiatrists to educate legislators about bills that affect children's mental health. Seven families living with mental illnesses, coordinated by NAMI, accompanied our members to the Hill and contributed their experiences in coping with the mental health care delivery system. The AACAP's staff provided group briefings, informational packets, and guidance on follow-up messages. More congressional sponsors of the Child Health Care Crisis Relief Act, signed on in 2006 than ever before.

We have also educated thousands of families in 2006. Our video: *"ADHD: a Guide for Families"* was televised in five major cities—Atlanta, Cleveland, Miami, St. Louis, and Washington, D.C.—distributed by CHADD, and posted on our Web site, [www.aacap.org](http://www.aacap.org). The video and its guidebook provide easy-to-understand information on the symptoms of ADHD, how parents can work with physicians to find appropriate treatment, how parents can enlist the support of schools, and how to help children with ADHD feel more confident and secure.



Our Web site was redesigned in 2006 and achieved an important first by offering online continuing medical education credit for the January Psychopharmacology Update Institute. This milestone is a prelude to eAACAP—the educational effort that will share peer-reviewed science with families, physicians, educators, and other mental health professionals.

We made progress on our 10-year priority—increasing the number of child and adolescent psychiatrists. The AACAP's members used the news media to bring attention to the shortage by taking part in more than 200 media interviews and writing letters to the editor and opinion-editorials to show how the issue impacts communities.

We also advanced our recruitment goal through a persistent focus on the teachers of

*To create a worthwhile future, we must invest in our future – our children.*

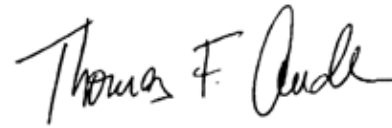
child and adolescent psychiatry. The third group of teaching scholars to attend the Harvard Macy Institute for Educators was selected in 2006. This program enhances the expertise of child and adolescent psychiatry educators and helps them form strategies to generate more time to teach about the field. Due to the generosity of the Lasdon Foundation's contribution to **Jon Shaw, M.D.**, the 2006 AACAP Teaching Scholars group was expanded from six to eight. In all, 21 AACAP members have participated in the program over the past three years. Program alumni lead courses at their home institutions and participate in teaching training institutes at the AACAP's Annual Meetings.

Though we have taken steps to address the workforce shortage and to advocate on behalf of children and adolescents, many challenges remain to families' access to quality treatment. Our *Campaign for America's Kids – Access Initiative* was developed to meet these challenges directly. Led by **Alan Axelson, M.D.**, eight pilot projects have been funded to date. I am hopeful that these projects will be expanded in other areas of the country and supported by additional local and national funding.

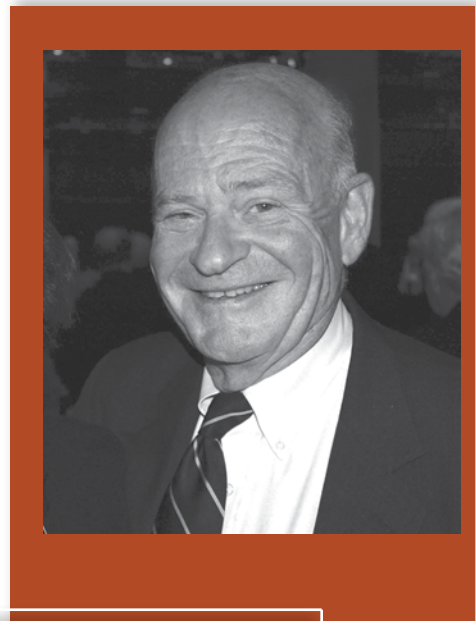
Therefore, we turn our attention to the future, filled with optimism but conscious of the many challenges we face: pervasive

stigma associated with mental illnesses, too few appropriately trained mental health practitioners, and limits on mental health care delivery. Together, we must go forward to create more pathways to access. After all, to create a worthwhile future, we must invest in our future—our children.

Sincerely,



Thomas F. Anders, M.D.  
President



Left to right: President Anders with JAACAP Editor Designate Andrés Martín, M.D., M.P.H., and Virginia Anthony, AACAP Executive Director



Center: Educating about children's mental health



Right: AACAP leaders and members of allied mental health organizations convene at the AACAP National Headquarters for a biannual Mental Health Summit