

Position Statement on Psychiatric Hospitalization of Children and Adolescents

Reaffirmed, 2008

Approved by the Board of Trustees, June 1989

"Policy documents are approved by the APA Assembly and Board of Trustees...These are...position statements that define APA official policy on specific subjects..." – *APA Operations Manual*.

This statement is supported in principle by the American Academy of Child and Adolescent Psychiatry, the American Hospital Association, the Federation of American Health Systems, and the National Association of Private Psychiatric Hospitals. Other organizations are being invited to support the statement.

Admitting children and adolescents to a hospital for diagnosis and treatment of psychiatric disorders is a serious step for both youngsters and parents. As with any hospitalization, the decision to admit a child or adolescent should be based on medical necessity and the best interests of the patient (and where appropriate, his or her family). Financial interests of either the doctor or the hospital must never dominate these decisions.

The American Psychiatric Association believes that the vast majority of psychiatrists and hospitals act appropriately and ethically in the admission of children and adolescents for inpatient psychiatric care. We deplore any instance when a child or adolescent has been inappropriately hospitalized, especially when there are appropriate, equally effective, and less restrictive treatment settings available in the community and affordable to the patient.

Optimally, a psychiatrist—and where available a child and/or adolescent psychiatrist—should be responsible for the decision to admit a child or adolescent to the hospital, and then be responsible for evaluation, diagnosis, treatment planning, and discharge. Such decisions often involve the cooperation of other physicians and other mental health colleagues.

Background

In America today, many people with mental disorders, including children and adolescents, are not receiving the care they need. The National Institute of Mental Health estimates that only one in five persons with a mental disorder is receiving appropriate treatment, if any at all. The NIMH also estimates that 12 million children under the age of 18 suffer diagnosable psychiatric disorders including depression, suicidal behavior, combinations of psychiatric disorders and alcohol and drug abuse, multiple drug addictions, schizophrenia, and life-threatening compulsions, such as eating disorders.

Despite this clear need for care, there is a shortage of both inpatient and outpatient treatment facilities, and insufficient numbers of trained staff. As a result, large numbers of children and adolescents with diagnosable

disorders are not receiving the inpatient, day hospital, residential treatment and outpatient treatment that could help them.

Even in communities where such a spectrum of services exists, the treatment may not be paid for by employer-sponsored health insurance and managed care systems, which frequently are skewed toward hospitalization. Consequently, the choice may be between inpatient hospital care and either no care at all or inadequate care.

The unmet need for mental illness care, the shortage of an accessible range of services, and the recent phenomena of a general lessening of stigma, have led to a substantial increase in general hospital psychiatric beds and new psychiatric specialty hospitals. Hospitals have launched marketing campaigns to let the public know of the availability of these new or expanded facilities and services. All these factors have led to an increase in public demand for services.

Recommendations

It would be unconscionable to waste scarce health care dollars on inappropriate services of any kind, when many thousands are not getting the care they need. Wise clinical decisions based on admission and treatment criteria developed by physicians are essential. To this end, the American Psychiatric Association offers the following recommendations:

1. The American Psychiatric Association believes that the health of children and adolescents will be served best if psychiatrists—preferably child and/or adolescent psychiatrists—are responsible for all psychiatric admission decisions, treatment planning and discharge decisions. The Association urges psychiatrists to accept this responsibility. It reminds psychiatrists that in exercising this responsibility they must use not only their professional judgment but the code of ethics which requires that decisions to use medical intervention, including hospitalization, be based on the medical needs of the patient.
2. The American Psychiatric Association recommends that psychiatric and general hospitals, whenever possible, assign to psychiatrists the responsibility for admitting, treatment planning and discharge decisions, and that they respect their medical judgment. The Association recognizes that law in some states may allow otherwise. It further acknowledges that child and/or adolescent psychiatrists or other psychiatrists may not be available at all times for acute emergencies.

3. The American Psychiatric Association will continue to press for development of a full spectrum of adequate, financially available facilities and services for the diagnosis and treatment of all children and adolescents in need of psychiatric care, and it urges other professionals, hospitals, and other psychiatric facilities to do the same.

Resources

There are numerous resources available to help parents obtain information about psychiatric hospitalization and treatment:

American Academy of Child and Adolescent Psychiatry
3615 Wisconsin Avenue, N.W.
Washington, DC 20016 (202) 966-7300

American Psychiatric Association
Division of Public Affairs
1400 K Street, N.W.
Washington, DC 20005 (202) 682-6000

Association for Children and Adults with Learning Disabilities, Inc.
4156 Library Road
Pittsburgh, PA 15234 (412) 341-1515

National Alliance for the Mentally Ill
2101 Wilson Blvd., #302
Arlington, VA 22201 (703) 523-7600

National Clearinghouse for Alcohol and Drug Abuse Information
P.O. Box 2345
Rockville, MD 20852 (301) 468-2600

National Institute of Mental Health
5600 Fishers Lane
Rockville, MD 20857 (301) 443-4515

National Mental Health Association
1021 Prince Street
Alexandria, VA 22314 (703) 684-7722

National Association of Private Psychiatric Hospitals
1319 F Street, N.W.
Washington, DC 20004 (202) 393-6700