

Why Coordination Matters More Than Ever in Child Behavioral Health



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There are many conversations happening today about mental health and the barriers families face in accessing care. From workforce shortages and rising rates of suicidal behavior to long wait times and a lack of psychiatric beds, these challenges are real. One issue that receives far less attention is not the absence of care, but the absence of care coordination.

This is particularly true in child and adolescent psychiatry.

An adolescent patient is never just a patient. They are a child, a sibling, a student and a member of a family navigating a complex web of relationships, responsibilities and systems. Their care may involve parents who deserve input on treatment decisions, foster care agencies, school districts, special education programs, primary care providers, therapists, hospitals, and state agencies. Successful outcomes for these children depend not only on the quality of clinical care, but on whether these systems are working together.

You cannot effectively treat a child without coordinating the ecosystem around that child.

Yet families are often expected to serve as the coordinators themselves. They navigate confusing referral pathways, inaccurate insurance directories, language barriers, fragmented communication among providers and a healthcare system that can be difficult to access and hard to understand. For many families, the challenge lies in finding a safe path through these systems as much as a treatment plan that works.

At Cambridge Health Alliance (CHA), we know better coordination results in better care for our patients.

Mental health care becomes more effective when it moves closer to where children live, learn and grow. One example is our partnership with Somerville High School, where CHA has embedded a behavioral health urgent care team directly within the school setting. The team works closely with teachers, students and families to identify mental health concerns early, provide short-term interventions and connect students to ongoing support. By bringing behavioral health services into an environment where children spend much of their time, we can identify needs earlier, support families more effectively and help prevent mental health challenges

before they escalate into crises. We've seen measurable success with this program and see opportunities to scale to additional school systems in our communities.

A central care hub, rooted in community needs, keeps support local and relevant. This philosophy guides our Community Behavioral Health Centers (CBHCs). These centers bring together behavioral health urgent care, mobile crisis services and outpatient behavioral health care under one coordinated model. These centers include family support specialists who are team members that are not clinicians but play a critical role in helping families navigate the system. Family support specialists understand the challenges families face and answer questions, connect parents with resources, conduct outreach and help ensure children remain engaged in care. They serve as guides through a fragmented system and help families stay connected to the services children need.

Ultimately, improving child and adolescent behavioral health requires building stronger connections between providers, schools, families, community organizations and public agencies. It requires recognition that children's outcomes are shaped and impacted by the systems surrounding them every day.

At CHA, our approach combines community partnerships, school collaboration, equity-focused care and cross-system collaboration. By bringing these elements together, we are working to create a model of care that helps children and families thrive.

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