

Editor's Notes

On the Importance of Deep Listening

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As the country transitions to a new administration, uncertainty abounds. At this juncture, the various changes being implemented at the federal level will almost certainly have adverse consequences for child and adolescent mental health and well-being. Specifically, dramatic changes proposed at the National Institutes of Health, in immigration policy, and in federal entitlement programs would impact countless youth nationwide.

It is too soon to say who or what will suffer the greatest consequences. Among the most vulnerable include not only youth at large, but also children and adolescents from minoritized populations, such as transgender youth and those from ethnically diverse backgrounds. Alongside the other AACAP journals, we reaffirm our commitment to publishing outstanding research that seeks to understand the impact of structural and social determinants of health on these populations.¹

Two articles in the current issue concern the types of critical programs that may be at greatest risk. Chen et al² argue that school-based health centers should utilize telehealth models to deliver mental health care that reaches children and adolescents who would otherwise not have access. Youth from racially and ethnically minoritized groups, rural areas, and low-income families stand to benefit the most from such programs. As such, and as the authors note, telehealth utilization within school-based health centers can enable more equitable access to mental health care.

Further, Rivera-Rodriguez et al³ highlight mental health disparities between Latine children and non-Latine White children and argue that school-based health centers offer a solution to this vexing and persistent problem. They describe one school-based mental health program in New York City as an exemplar. This program offers multidisciplinary and comprehensive mental health services such as psychological and psychiatric evaluation and management, case management, preventative services for patients, and psychoeducation, among others.

It is important to note, however, that many school-based mental health programs rely in part or entirely on federal funding via the School-Based Mental Health grant program, Medicaid, the Bipartisan Safer Communities Act, and Project AWARE (Advancing Wellness and Resiliency in Education). Reductions in federal funding for such programs are a

real possibility with the proposed changes and will disproportionately impact the most vulnerable youth.

Both personally and professionally, I am wrestling with how to keep up with, metabolize, and respond to the assortment of changes being proposed and implemented at the federal level. As a parent, I think often about how my children will be impacted; as a psychiatrist, my child and adolescent patients come to mind.

There is no single right way as a parent or professional to process and respond to these developments. And yet, one article from this issue might unexpectedly point us in the right direction. Lanza and Lu⁴ introduce the notion of “whole-body listening,” a term they use to describe a “holistic conceptualization of what it means to listen.” The authors helpfully offer the Whole-Body Listening Framework for clinicians to use with parents to improve communication with their children. The authors implore parents to listen with their ears, of course, but also their eyes, heart, brain, mouth, hands, and feet.

They reason that listening with the heart allows one to empathize with their child; listening with the brain allows them to interpret and synthesize the problems their child is facing; and listening with their hands and feet—the most important kind of listening, according to the authors—demonstrates commitment to change. I encourage the reader to listen deeply, as it were, to what they have to offer.

As I reviewed their timely guidance to parents and clinicians, I could not help but think that the authors were also speaking to the readers as citizens, guiding us on how best to meet our current uncertainties. It occurred to me that deep and embodied listening, with all our senses, is a way through these times—deeply listening to the news, yes, but more importantly, to the concerns of our families, our patients, our neighbors, our communities, and our countrymen and women, especially the most vulnerable among us. Listening with our hearts, brains, hands, and feet will allow us to empathize with those most in need, synthesize the critical issues we are facing, and mobilize to effect change.

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