

Editor's Notes

Village

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As this readership knows, caring for the mental health of youth as a child and adolescent psychiatrist can take many forms. If it takes a village, as the adage goes, the child and adolescent psychiatrist is a villager with many duties—and opportunities.

Our job description might include helping manage disruptive behaviors in children with developmental disorders. It might require consulting with pediatricians on the intersection between the physical well-being and mental health of their patients. It could involve reflecting on how best to raise children and adolescents in a historical period of rapid technological change and sharing your guidance and expertise with parents who have questions, fear, and doubt. Or it might entail working with parents to help them understand and communicate how their own mental illness may impact their children. The list goes on.

The current issue of *JAACAP Connect* reflects this diverse range of opportunities we have to positively impact the lives of the patients with whom we work.

Ben Pope¹ offers a useful clinical perspective on managing the challenges that can result from changes in routine for children with autism spectrum disorder (ASD). He highlights applied behavior analysis, sensory integration therapy, and treating comorbid sleep and/or anxiety disorders with medication or psychotherapy.

Powell and colleagues² share guidance on how parents with substance use disorders can communicate effectively

with their children about their substance use. Current literature and guidelines are lacking regarding how such conversations should occur or how they might impact short- and long-term mental health outcomes for children and adolescents. The authors fill this gap and contribute to the literature by relying on core principles of child and adolescent psychiatry to offer recommendations on how best to communicate about this potentially sensitive topic.

Katei et al³ discuss self-harm and suicidality among children with atopic dermatitis, finding that this chronic skin condition is associated with impaired psychosocial functioning and elevated risk of mental health issues. In his Lab to Smartphone column, David Rettew emphasizes the importance of foundational influences on youth mental health as a retort to occasionally sensationalist—if also evidence-based—takes on the negative effects of social media, helicopter parenting, and the long-term effects of COVID-19.⁴ Finally, the pros and cons of telehealth interventions for ASD are highlighted by Wong and Chua.⁵

This issue is a reminder, then, of the many ways in which child and adolescent psychiatrists can positively impact the lives of our patients. A reminder that our village is a vulnerable one, but full of opportunity for those who wish to nourish it.

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