



Growing Minds: Navigating Adolescent Mental Health in a Changing World

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Physician Presenters



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Case Introduction

Case: Alex, Age 11

- School avoidance
- Increasing worry about performance
- No prior treatment

Why Are We Here Today?

To help you navigate adolescent mental health in a changing world

- Adolescence is a pivotal time for emotional and psychological development.
- We will explore common mental health challenges facing adolescents today, including anxiety, depression, ADHD and social stressors, while offering practical guidance for early identification, intervention and family support.
- Learn about the comprehensive, evidence-based resources available to help young people navigate challenges, strengthen resilience and thrive.

Why This Matters?

Youth mental health is a public health priority

- ~ 1 in 7 youth experience a mental health disorder each year
 - Early onset: ~50% of all lifetime mental illness begins by age 14 and 75% by age 24
- Anxiety, ADHD and depression are most common
- Suicide is the 2nd leading cause of death among youth aged 10-24
- Despite slight improvements from 2021 peaks, 10-year trends show significant increases in suicidal ideation and mental health disorders
- Key drivers include increased screen time, social media usage and a decrease in in-person social connections
- Early identification changes outcomes

New Jersey Snapshot

What We're Seeing Locally

- New Jersey mirrors national trends but with particularly high rates of anxiety
- ~ 1 in 4 NJ youth report poor mental health
- Anxiety (~34%) and mood disorders (~16%) are common
- Strong system but navigation remains difficult

The Big 3 Conditions

Most common presentations

- Anxiety → worry, avoidance, physical complaints
- ADHD → inattention, impulsivity, school challenges
- Depression → irritability, withdrawal, low mood

KEY POINT: These often overlap and evolve over time

Treatment Basics

What Works

- **Therapy (CBT)** = first-line for anxiety/depression
- **Medications:**
 - SSRIs (anxiety/depression)
 - Stimulants (ADHD)
- **School supports** (504/IEP)
- **Family involvement is critical**

Levels of Care

Behavioral Health Continuum

- Primary care / school supports
- Outpatient therapy
- Psychiatry (medication)
- Intensive outpatient (IOP) / Partial Hospital Programs (PHP)
- Emergency/ inpatient
- Residential

KEY POINT: Match level of care to severity

Case Step 1: Anxiety

Where Care Starts

- Pediatrician identifies anxiety
- Referral to outpatient CBT therapist
- School support begins

→ **System entry points:** PCP, school

Case Step 2: ADHD

New Layer

- Ongoing academic struggles
- ADHD diagnosed

Resources

- Medication (PCP or psychiatry)
- 504 plan at school

→ **Now navigating:** medical + educational systems

Case Step 3: Escalation

More Complex Needs

- Mood symptoms + worsening function
- Family stress increasing

Next Steps

- Psychiatry referral
- Combined therapy + medication

Case Step 4: Higher Care

When Outpatient Isn't Enough

- School refusal, withdrawal

Intervention:

- Intensive Outpatient Program (IOP) / Partial Hospital Program (PHP)
- Care coordination (New Jersey Children's System of Care)

→ **System becomes more complex here**

Case Step 5: Emergencies

When there are safety concerns at home

- Suicidality
- Homicidality
- Struggling with reality

Intervention:

- Emergency Services
- Inpatient

→ Designed for short-term stabilization

Case Step 6: Long-term instability

When chronically unsafe at home

- Multiple hospitalizations
- Chronic suicidality/homicidality

Intervention:

- Residential (Short-term or Long-Term)

→ Very complex system, lots of options but can be difficult to access

Key Takeaways

What You Should Remember

- Youth mental health needs are common and increasing
- Conditions evolve – not just one diagnosis
- Treatment works, but navigation can be hard
- Start simple: PCP, school, therapy
- Know when to escalate care
- Collaborative care is often essential

WHO WE ARE: NEW JERSEY'S LARGEST HEALTH NETWORK - NATIONALLY RANKED PEDIATRIC & ADOLESCENT BEHAVIORAL HEALTH PROGRAMS

18 HOSPITALS

and 500+ patient care locations

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|---|------------------------------|---|-------------------------------------|
| 3 | Academic Medical Centers | 1 | Carrier Behavioral Health Hospital |
| 1 | University Teaching Hospital | 1 | Long Term Acute Care Hospital |
| 8 | Community Hospitals | 1 | Center for Discovery and Innovation |
| 2 | Rehabilitation Hospitals | 1 | School of Medicine |
| 2 | Children's Hospitals | 3 | Nursing Schools |

Opening in June 2026 is a specialized children's unit treating ages 7-12 on Carrier's campus, including an expansion of beds for ages 12+



Resources & Services:

Emergency/ Crisis Situations:

- EPS Units (all HMH medical centers) & in consults in our children's hospitals
- Urgent care (Freehold, Neptune, Eatontown, Clark, Lincoln Park)

Outpatient:

- Children's Program at JSUMC in Neptune (IOP, therapeutic nursery, individual, groups)
- Outpatient Behavioral Health (medication management) at Medical Group practices in Jackson, Brick, Neptune, Old Bridge, Hackensack and Manahawkin

Collaborative Care:

- Pediatric Psychiatry Collaborative (statewide)

Inpatient/ Residential:

- Carrier Clinic (currently 12 and up, soon to be 7 and up)

VISIT: HackensackMeridianHealth.org/HealthyMind

SCAN:



CALL: 1-844-HMH-WELL

Questions & Answers



Thank you for joining us!

Tune in next Wednesday at 5:30 PM for our webinar session:

Understanding Mental Health Treatment Options: From Traditional Therapies to Advanced Brain-Based Care