

# Children's Health in Wisconsin

Sarina Schrager, MD, MS, *WMJ* Editor-in-Chief

Children's health encompasses physical, social, and psychological components. For a child to be healthy, they need to have access to food, shelter, and loving relationships. Clinicians who take care of children understand that there are many factors (some out of our control) that can impact a child's health and well-being—including access to health care.

Children without health insurance are less likely to get routine screenings and preventive interventions. Data from 2019 show that 3.8% of children in Wisconsin do not have health insurance, ranking the state 17th out of 51 (including the District of Columbia).<sup>1</sup> And while Wisconsin ranks highly (12/51) for the overall health of children based on high-quality public education and low rates of uninsured children,<sup>2</sup> these numbers are lower for children of color.<sup>3</sup> Both African American and LatinX children have higher rates of being uninsured.<sup>1</sup> Further, data regarding the mental health of children in Wisconsin is less favorable. Based on 2016 data, Wisconsin ranked 42nd for youth mental health.<sup>2</sup> This ranking included high depression rates among children and low levels of treatment for this population. Over 20% of Wisconsin children have been diagnosed with anxiety, depression, behavioral issues, attention deficit hyperactivity disorder, or other mental health disorders.<sup>2</sup> Objectively, those are very high numbers and mean that 1 in 5 kids in the state has been diagnosed with a mental health condition.

Alcohol use among youth in Wisconsin is also at epidemic proportions and exceeds the national average at several age levels.<sup>4</sup> In 9th grade, half of all Wisconsin youth have tried

alcohol compared to 43% on average in the rest of the US.<sup>4</sup> This number increases up to two-thirds by the time these kids reach 12th grade.

Further exacerbating these issues is the impact of the COVID-19 pandemic. We know that the pandemic has affected the educational progress of many children due to school closings and inconsistent access or lack of support for virtual schooling options. Many children in Wisconsin do not have access to reliable high-speed internet and do not have adults at home who can help them complete schoolwork, which has led to many children falling behind academically. The lack of social interaction, as well as the isolation of being at home and not at school, have contributed to the worsened mental health of both children and adolescents.<sup>5</sup>

Indeed, the pandemic has affected several different aspects of mental health. Admissions

for eating disorders among adolescents increased significantly during the first year of the pandemic.<sup>6</sup> Overdoses are at an epidemic proportion, with over 100,000 people dying of

overdoses in 2021 alone.<sup>7</sup> It is unclear how the pandemic has affected youth's use of alcohol and other substances.<sup>5</sup> However, over the last year, Wisconsin youth are above the national average for misuse of opioids and other pain medications.<sup>8</sup>

Several papers in this issue of the *WMJ* discuss issues around caring for children—in general, and during this pandemic. Falk et al evaluated a widespread COVID-19 testing campaign in a secondary school in Southeastern Wisconsin during the early part of the pandemic. They found challenges in completing the testing in a low-prevalence, high mask-wearing area and suggest instead focusing efforts on COVID vaccination and other preventive strategies.<sup>9</sup> Liljestrom and colleagues looked at hospitalization rates for asthma, bronchiolitis, and bacterial pneumonia before and during the pandemic. Not surprisingly,

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they found significantly decreased hospitalization rates for these conditions during the pandemic compared to previous years.<sup>10</sup> This study provides more evidence that isolating and mask-wearing decrease transmission of all respiratory illnesses. Lehrer et al report on disparities in childhood immunization rates exacerbated by the pandemic,<sup>11</sup> and in a commentary calling for increased COVID vaccinations of children, Soung discusses the incidence of multisystem inflammatory syndrome in children after a COVID-19 infection.<sup>12</sup> Even though this is an uncommon condition, it is potentially life-threatening, providing evidence to support universal vaccination of children.

In another paper, Chelinski et al evaluated unconscious bias among a cohort of pediatricians in an academic department in Milwaukee.<sup>13</sup> The clinicians were asked to complete a survey that measured their biases and then given some sample clinical vignettes to see if their decision-making was affected by a child's race or ethnicity. The survey found that there were some unconscious biases present but that the decision-making (based on the vignette) was not significantly affected. This is a small study but underscores the importance of self-reflection on how we treat patients differently.

Other topics included in this issue related to the health of children include nutritional infantile failure to thrive (Marten et al),<sup>14</sup>

return rates in pediatric patients treated for croup (Udoh et al),<sup>15</sup> and current practice and rationale for prescribing dexamethasone for pediatric patients hospitalized for asthma (Nelipovich et al).<sup>16</sup>

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Patrick J. Knight, Partner



Kristen N. Nelson, Associate

330 East Kilbourn Avenue, Suite 1170, Milwaukee, WI 53202 • 414-271-1440

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**WMJ**

*WMJ* (ISSN 1098-1861) is published through a collaboration between The Medical College of Wisconsin and The University of Wisconsin School of Medicine and Public Health. The mission of *WMJ* is to provide an opportunity to publish original research, case reports, review articles, and essays about current medical and public health issues.

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