Child/Adolescent Mental Health Support Pathway

I observe some concerning attitudes/behaviors in my child.

1. Is the behavior/attitude age-appropriate?

- **Yes** → Continue observing
- **No** → Continue to Step 2

2. Has it lasted more than several weeks or is it worsening?

- **Yes** → Continue to step 3
- **No** → Monitor and provide support

3. Is it interfering with school, family life, friendships, or daily functioning?

- **Yes** → Schedule an evaluation with a child mental health professional.
- **No** → Discuss with pediatrician at the next visit.

4. Are there concerns about learning, attention, autism, trauma, or a mental health diagnosis?

- **Yes** → Seek a comprehensive psychological evaluation.
- **No** → Begin with a child mental health professional, who can determine whether additional testing is needed.

5. Are there safety concerns (suicidal thoughts, severe aggression, abuse, psychosis)?

- **Yes** → Seek immediate professional or emergency help. See suicide prevention pathway (link)

CARE RESOURCES