Racism can determine which children receive more supported education by segregation of students to certain zip codes with schools that may not have the same resources as other children in different zip codes. Lack of educational resources can lead to students in these areas feeling neglected, depressed, anxious, and unmotivated to learn. These students who may need mental health services due to these barriers do not always receive the services needed. Racism can also affect the how students who need mental health services receive these services which can ultimately affect how these students succeed in educational endeavors.

Finances has been one of the leading causes of telepsychiatry being underutilized in area where the services are the most needed. In the fall of 2018, the percentage of students who attended high-poverty schools was highest for Black students (45 percent), followed by Hispanic students (44 percent), American Indian/Alaska Native students (37 percent), Pacific Islander students (24 percent), students of two or more races (17 percent), Asian students (14 percent), and White students (8 percent) (Irwin, V et al., 2021).

With the shortage of pediatric psychiatrists in most areas, telepsychiatry may increase accessibility of psychiatric care in schools.

**Introduction**

Overcoming barriers to telepsychiatry in public schools: Evaluation of mental health providers and school administrator’s knowledge of barriers to implementing telepsychiatry in public schools.

**Purpose**

Identify barriers to implementing telepsychiatry in public schools where the most students are underserved and use this as a model to implement a telepsychiatry program in this area.

To help identify barriers that inhibits telepsychiatry in public schools, literary search will be conducted.

The primary outcome is to identify barriers to implementing telepsychiatry in public schools such as financial resources, availability of providers, transportation, internet access for students, and computer access for students.

Secondary outcomes include implementing a telepsychiatry program in Shelby County Public Schools in Memphis, TN.

**Beginning Interventions**

Ensure more eligible children and adolescents qualify for Title funding. Reevaluate formulations that determine eligibility for Title funding. Require all Title I schools have access to telepsychiatry. Utilize Title IV funding to provide internet and computer access for telepsychiatry. Create programs from Title IV funding that enhance and promote telepsychiatry. Identify barriers to implementing a school telepsychiatry program in Shelby County Public Schools in Memphis, TN. Propose a model to create a school telepsychiatry program in this area based on findings.

**References**


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