

Infant-Early Childhood Mental Health in Home Visiting Programs Serving Diverse Families: Promising Strategies to Support Child and Family Well-Being

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National Center for Children in Poverty

Bank Street Graduate School of Education



Overview

- Background on methods used to gather information for the report and key IECMH strategies it presents
- Presentations on culturally tailored IECMH strategies and supports in three home visiting programs
- Highlights of recommendations in the report
- Reflections on advancing recommendations

Promoting Infant-Early Childhood and Parent Mental Health in Home Visiting Programs Serving Diverse Families:

PROMISING STRATEGIES TO SUPPORT CHILD AND FAMILY WELL-BEING

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NCCP National Center for Children in Poverty
Bank Street Graduate School of Education

Presenters

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Nikki Deason, Regional Infant & Early Childhood Mental Health Supervisor, Louisiana MIECHV

Paula Dye, Statewide Nurse Consultant, Louisiana MIECHV

Background: Home Visiting and IECMH

- Home visiting programs well-situated to support children's and families' mental health
- MIECHV and TMIECHV performance measures related to mental health
- Ensuring that home visiting programs are able to support the mental health needs of *all* children and families
- What IECMH strategies do exemplary home visiting programs serving diverse families use?

Methods

- Survey organizations to identify home visiting programs that provide exceptionally strong supports for IECMH, prioritizing programs serving racially, culturally, and linguistically diverse families
- Follow-up interviews to learn about 21 programs (including agencies delivering home visiting services, model developers, and state-level program administrators)
- Topical coding of interviews to identify key strategies that support IECMH

Key Strategies for Promoting IECMH in Home Visiting Programs Serving Diverse Families

- **Workforce**
 - Recruitment
 - Training and professional development
 - Reflective supervision and mental health consultation
 - Retention
- **Families**
 - Recruitment
 - Building close relationships between home visitors and families

Key Strategies for Promoting IECMH in Home Visiting Programs Serving Diverse Families

- **IECMH Supports**
 - Culturally tailored strategies
 - Evidence-based mental health interventions
 - Addressing concrete needs
- **Continuous Quality Improvement and Use of Data**
- **Systems-Level Supports**



Mission: to nurture the inherent potential in every child and family — equipping them with the tools to transform their own lives and strengthen their communities.



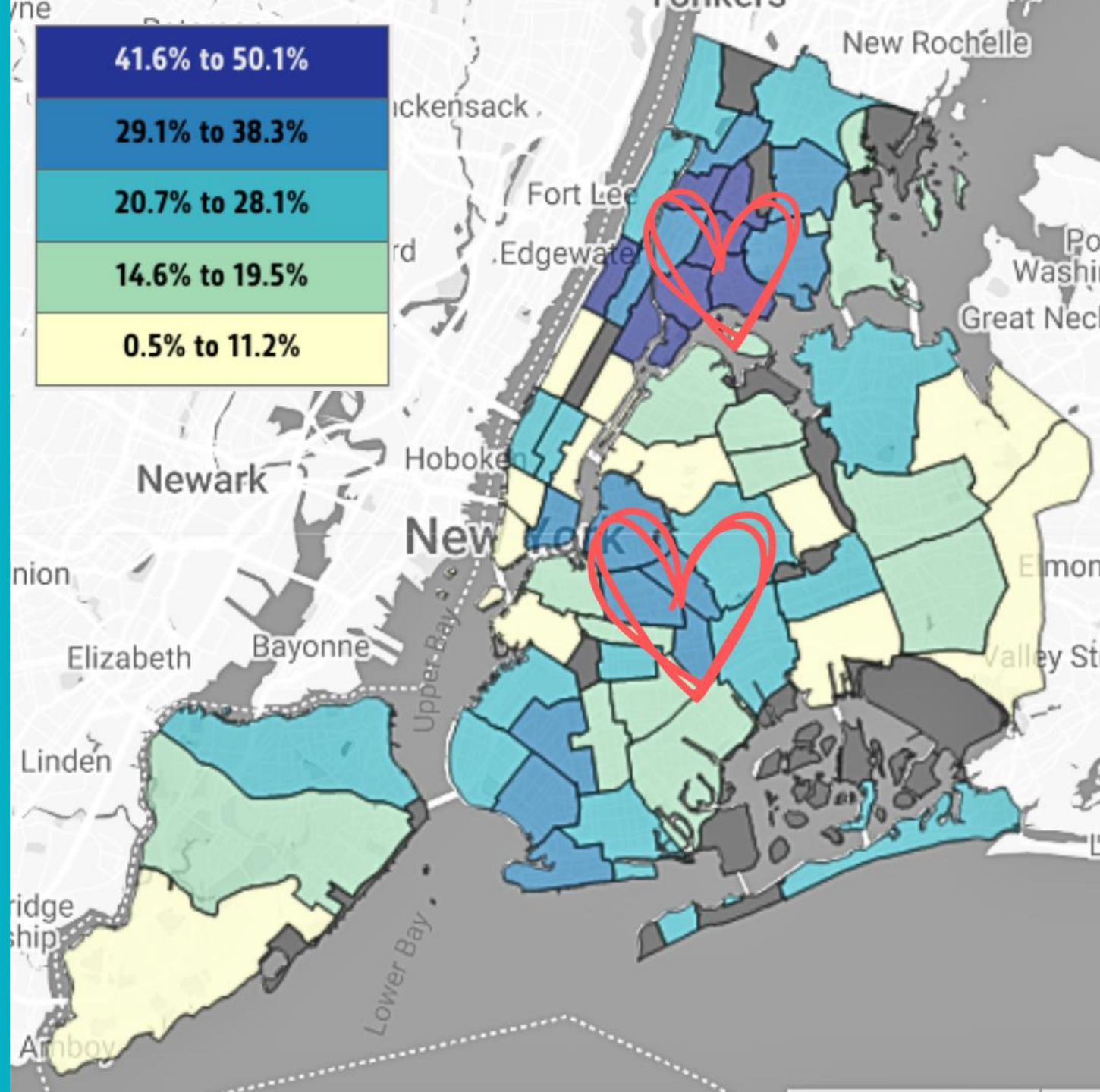
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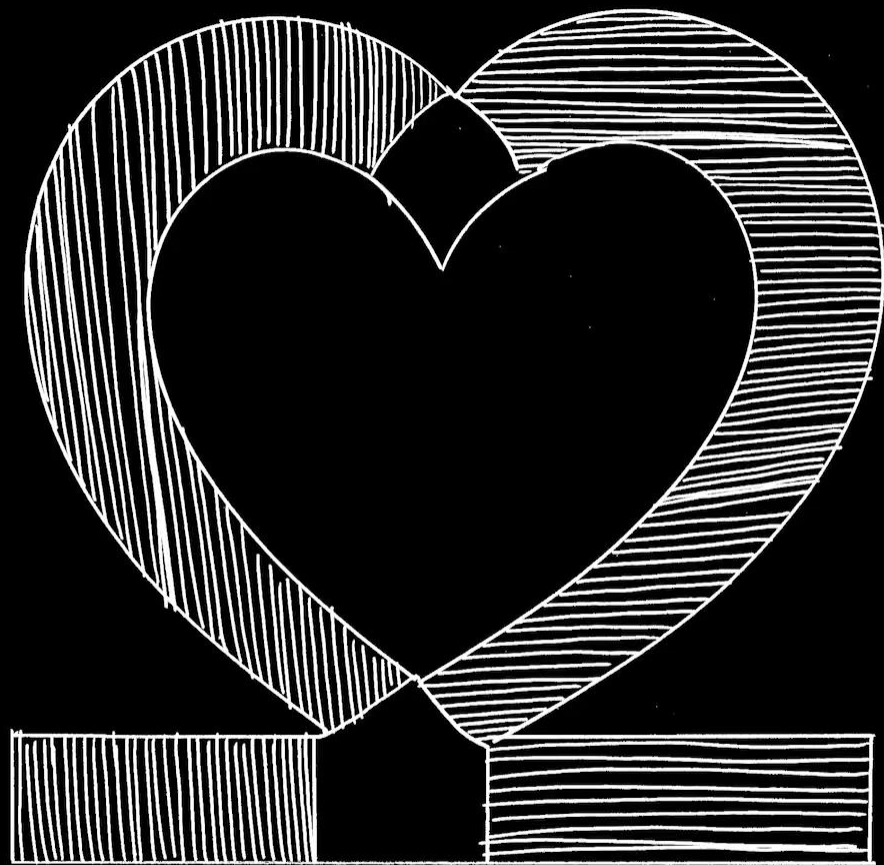


Erasma
Beras-Monticciolo
Community



Dr. Kristin
Bernard
Research





this is
POWER
OF
TWO

What's Often Tried

- Long-term programs lasting many months or years
- Interventions delivered by licensed social workers
- Emphasis on teaching parenting practices

Hurdles to Success

- Difficult to sustain engagement over long period of time
- Costly to implement with advanced degree staff
- Teaching parenting skills does not create behavioral change on its own



Power of Two Approach

- Time-efficient, effective program with **sustained results**
- ABC **reinforces what parents are doing well**, making **parents feel respected**
- Advanced degree not required. Our team includes people with **wide range of life experiences who are knowledgeable about our communities**
- Respond to Social Determinants of Health by **providing additional resources and referrals**.



COVID-19 Response

Tech Assessments

- Assessed **tech needs**
- **Provided technology** for remote sessions (TeleABC)
- Developed **remote curriculum**

Team Support

- **Modified+hybrid schedules**
- Supplemental **supervision**
- **Peer support groups**
- 6-month subscription to **Unwinding Anxiety**
- Program Continuity Committee

Community Support

- Created **comprehensive resource guide** for families and partners
- Delivered diapers and other **essentials** to families hit hardest
- Provided **factual information** about COVID-19 to families, debunking myths and fears



Challenges

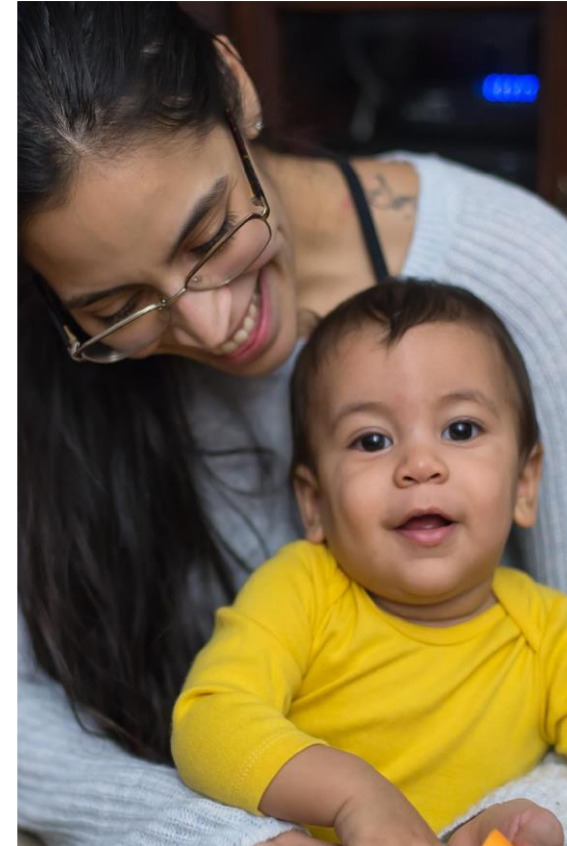
Post-COVID



Budget Cuts



Fundraising
Landscape





Cheyenne River Sioux Tribe

Crow Creek Sioux Tribe

Flandreau Santee Sioux Tribe

Lower Brule Sioux Tribe

Mandan, Hidatsa, & Arikara
Nation
(Three Affiliated Tribes)

Oglala Sioux Tribe

Omaha Tribe of Nebraska

Ponca Tribe of Nebraska

Rosebud Sioux Tribe

Sac & Fox Tribe of the
Mississippi in Iowa
(Meskwaki Nation)

Santee Sioux Tribe of
Nebraska

Sisseton-Wahpeton Oyate of
the Lake Traverse Reservation

Spirit Lake Tribe

Standing Rock Sioux Tribe

Trenton Indian Service Area

Turtle Mountain Band of
Chippewa Indians

Winnebago Tribe of Nebraska

Yankton Sioux Tribe

Great Plains Tribal Leaders Health Board (GPTLHB) Mother and Babies

Terri Rattler, Program Manager

GP-Tribal Maternal, Infant, Early Childhood Home Visiting Program

Background

- GPTLHB
 - Home Visiting Services
 - Healthy Start
 - Indigenous LAUNCH
 - GP-TMIECHV
- Lake Traverse Indian Reservation
 - Strengthening & Encouraging Families



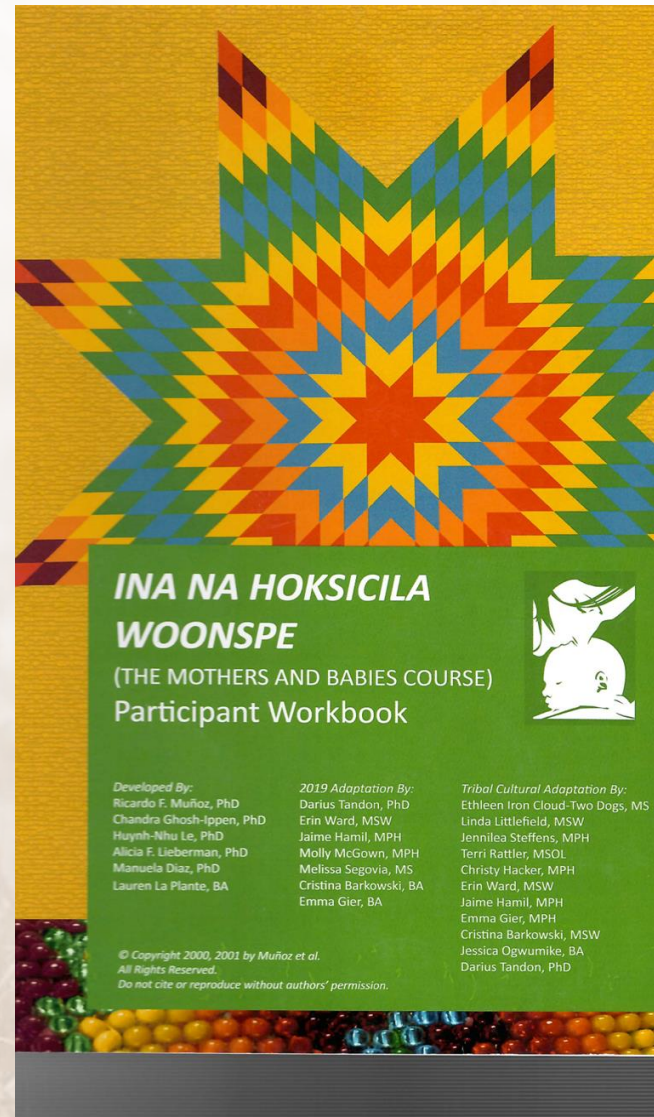
Mothers and Babies

- What it is
- The need
- Training



Adaptation Journey

- Idea
- Languages
- Worksheet



1. *INIPi* (purification lodge ceremony) / Go to ceremony
2. *WAZILYA* (smudge) / Pray
3. Go to a Powow
4. Go harvesting with friends or family
- pick chokecherries,
pejuta (medicine - sage, cedar),
timpsila (wild turnip) or
cheyaka (wild mint tea)
5. Work outdoors (e.g., gardening)
6. Beading
7. Make a *WOKPAN* (spirit tool kit)
*see additional resource on *WOKPAN*
- Appendix C in Facilitator Guide
8. Listen to music
9. Take a shower or warm bath
10. Spend time with friends
11. Go for a walk
12. Go to church
13. Pray / Communicate with the Creator
14. Daydream
15. Write poetry
16. Sing
17. Take a nap
18. Watch TV
19. Meeting friends for a cup of tea or coffee
20. Practice a relaxation exercise -
deep breathing
21. Exercise
22. Cook
23. Dance
24. Read a book or magazine
25. Other _____
26. Other _____



Journey continued

- Implementation

- Postpartum
- Prenatal
- All

- Support

- Northwestern University of IL

How to complete the Mood Scale:

Every night, before going to bed, circle the number (between 1-9), which indicates how you felt that day. There is no right or wrong answer.

- If your mood is average, (not high nor low), circle number 5
- If it is better than average, circle a number higher than 5
- If it is worse than average, circle a number lower than 5

We find that it is easiest to keep the scale by the bed so that before you go to bed, you can think about your day and rate your mood for the day.

DATE:	MON	TUE	WED	THU	FRI	SAT	SUN
BEST MOOD	9	9	9	9	9	9	9
	8	8	8	8	8	8	8
	7	7	7	7	7	7	7
	6	6	6	6	6	6	6
AVERAGE	5	5	5	5	5	5	5
WORST MOOD	4	4	4	4	4	4	4
	3	3	3	3	3	3	3
	2	2	2	2	2	2	2
	1	1	1	1	1	1	1

Every day or some days you can keep a journal of your thoughts, ideas, or dreams. Jot down on the lines below the mood chart.

Examples:

Today I felt great. I played with my baby and read a book to her. I thought of how thankful I am having this beautiful little baby.

I am having a rough day. I think my baby may be sick, all he does is cry. I need to get a ride to the clinic. I hope my day gets better.

Tribal MIECHV is supported by funds from the Administration for Children and Families (HHS-2018-ACF-OCC-TI-1365). The program is being implemented in partnership with the Sisseton-Wahpeton Oyate of the Lake Traverse Reservation.



Success and Lessons learned



- Participants
- 2 years
- Success story
- To share the lessons
- Ask MBs to make one for dads

Thank you

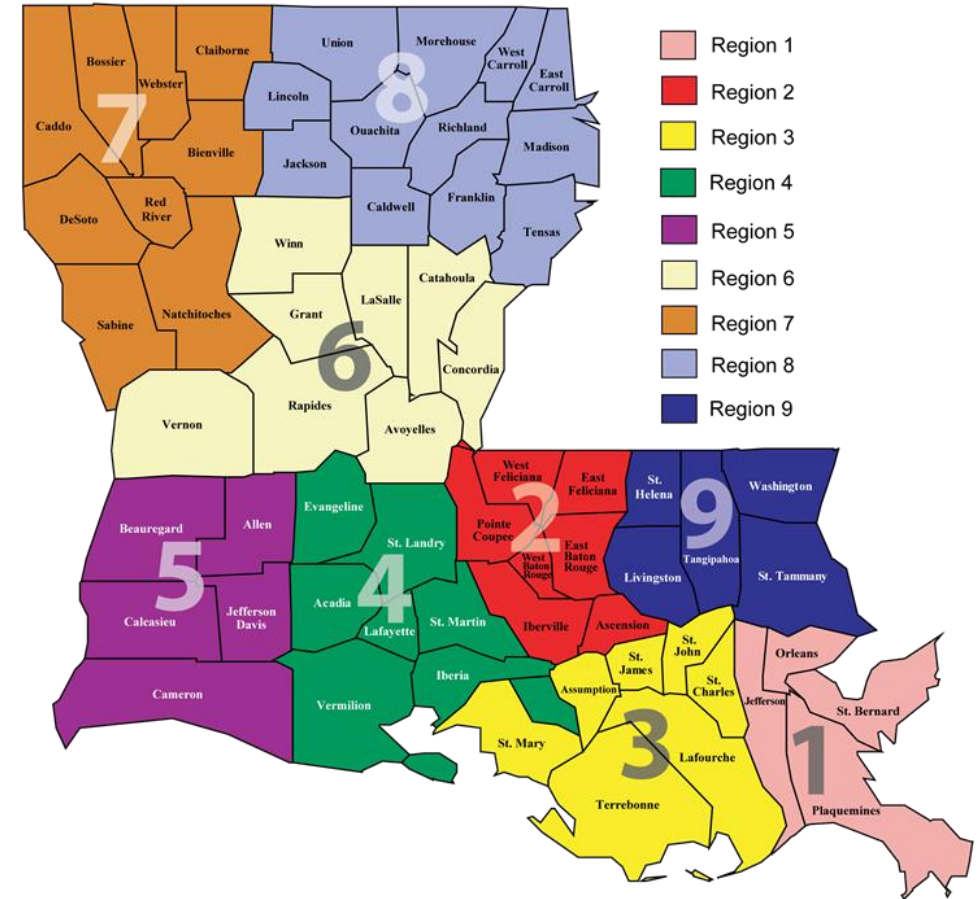


Infant & Early Childhood Mental Health Consultation

Louisiana MIECHV

Team Make Up

- 18 Home Visiting teams administering either Nurse Family Partnership or Parents as Teachers models
- 9 Infant and Early Childhood Mental Health Clinical Specialists (IECMHCS)
- 2 Regional Infant & Early Childhood Mental Health Supervisors
- Statewide Mental Health Consultation Manager



IECMHCS

- **Licensed Mental Health Providers**
- **All current staff have completed an intensive Infant & Early Childhood Mental Health training program through Tulane**
- **Each IECMHCS has been trained in Reflective Practice**
- **All current IECMHCSs received training in Child Parent Psychotherapy**

Goals of Consultation in MIECHV

- Build capacity of home visitors to provide relationship-focused, trauma-informed care, and culturally sensitive support to families who have mental health concerns while paying particular attention to the parent-child dyad
- Increase home visitors' application of knowledge and skills to address the mental health needs of families served

Role of IECMHCS

- Active participation in MIECHV team case conferences
- Provide case specific consultation to Family Support Coaching Professionals
- Provide bi-weekly or monthly support to team supervisors to build reflective capacity
- Provide prescribed quarterly in-services to home visiting teams. Additional in-services are offered based on team specific needs
- Complete joint visits with Family Support Coaching Professionals and clients to further assess family needs and enhance consultation recommendations
- Provide a limited amount of evidenced based treatment to the mother-baby dyad
- Network with community to partners to identify and enhance mental health services and supports for MIECHV families
- Support reflective practice within teams
- Co-facilitate reflective practice groups with team supervisors and Regional Nurse Managers

Support for Consultation

- Each IECMHCS participates in bi-weekly Reflective Supervision with their Regional Infant & Early Childhood Mental Health Supervisor, with additional meetings scheduled as needed
- IECMHCS participate in a statewide IMH team meeting. A case is presented, and team provides reflective consultation during the case presentation
- Access to Provider to Provider Consultation Line (PPCL) to receive psychiatric consultation when needed

Consultation Process

- FSCP and IECMHCS meet at a minimum of once per month
- In addition to monthly consultation, FSCP can request consultation as needed
- Automatic consultation exists for:
 - PHQ-9 scores of ≥ 10
 - GAD-7 scores of ≥ 10
 - Suicidal ideation
 - Trauma history
 - Parent child relationship concerns
 - Current substance use
 - Intimate partner violence
- Frequency of consultation is determined based on the acuity level of the MIECHV client

Outcomes

- **Our last evaluation yielded the following outcomes:**
 - Home visiting staff experienced a statistically significant increase in knowledge following prescribed in-services
 - Focus groups demonstrated home visiting staff gained increased self-awareness and learned strategies for self care to cope with their job's emotional challenges
 - MIECHV families had an increased connection to community mental health resources . IECMHCS staff are valuable allies for navigating the often times challenging community mental health referral and linkage process

Data

- We are currently working with MIECHV data analysts to update our data collection and reporting systems
- With changes to data system, our goal is to identify primary topics of consultation, the number of families (including the number of children) served through consultation, and track changes at the family level
- Pre/post content questionnaires are completed with quarterly in-services to evaluate knowledge change among home visiting staff
- Surveys are completed yearly by team supervisors and home visitors regarding use/understanding/benefit of consultation

Challenges

- **COVID required we provide remote consultation**
 - This increased our skills in providing remote consultation, allowing teams to be served by consultants regardless of their physical location
- **Measuring the impact of consultation on family outcomes**
 - The data team is helping the IECMH leadership team to identify methods to track client progress in mental health screeners over time
- **Changes in team composition**
 - As home visiting team size has shifted, it's offered the opportunity for the IECMH leadership team to evaluate team specific needs to determine consultation strategies to implement
- **Changing data systems**
 - This is allowing the IECMH team to work closely with the data team to identify data to better measure client specific outcomes
- **Identifying a sustainable, long term funding source**
 - The statewide leadership team is thinking creatively about how to adjust the model so that work towards capacity building and education goals continue despite less funding being available

Successes

- **Being embedded in teams**
 - IECMHCS builds positive working relationships with home visiting staff, providing a parallel process of relationship based work
 - Continuity in consultation – IECMHCS is familiar with home visitor and their case load
 - Consistency in consultation
- **Providing prescribed quarterly in-services has allowed for increase in knowledge acquisition. Each team receives the same in-service material. Pre and post tests are completed to show knowledge gain**

Report Recommendations

- Recruit and retain a diverse home visiting workforce with providers who come from the same communities as the families served by the programs
- Invest in training and supports for home visitors to develop positive relationships with families and address IECMH needs
- Strengthen strategies to address families' basic needs/provide concrete supports
- Embed mental health interventions that can be implemented by home visitors without college degrees

Report Recommendations

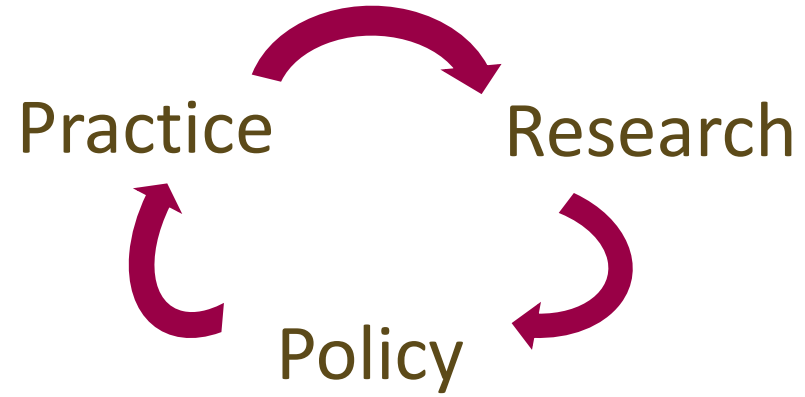
- Support connecting families to culturally responsive IECMH treatment services when needed
- Consider program adaptations that retain fidelity while increasing cultural responsiveness for different groups of families
- Invest in studies that examine the potential benefits of IECMH and family mental health-related strategies tailored to needs of diverse families



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Policy and Systems



How to advance recommendations

- Policies and funding are implemented and/or administered at the federal, state, and local level.
- Find out how home visiting is implemented and/or administered in your state.
- Take recommendations to legislators, state administrators, Early Learning Councils
- Investigate non-traditional funding streams outside of home visiting.

Workforce Considerations

- Recruitment:
 - Apprenticeship programs
 - Scholarships/loan forgiveness
 - Hiring bonuses
- Compensation and benefits
- Workforce well-being

Equity

The value-based concept that seeks to ensure that all people have access to the biological, economic, political, and social resources needed to optimally develop and achieve wellbeing. A central premise of equity is the acknowledgement that all people begin their developmental journey with differing levels of resources related to and/or determined by social positioning factors such as race, ethnicity, class, gender, ability, sexuality, and nationality. Realizing equity will require unequal distribution of resources based on the needs of each individual.

From: Core Concepts of the Diversity-Informed Tenets for Work with Infants, Children, and Families.

Addressing Racial Equity in Policy-Making

- Proactively seek to eliminate inequities and advance equity.
- Identify clear goals, objectives, and measurable outcomes.
- Engage the community in decision-making processes.
- Identify who will benefit or be burdened, examine potential unintended consequences, and develop strategies to advance equity.
- Develop mechanisms for successful implementation and evaluation of impact.

From: [RacialEquityAlliance.org](https://www.racialequityalliance.org/), the Local and Regional Government Alliance on Race and Equity [GARE-Racial Equity Toolkit.pdf \(racialequityalliance.org\)](#):

What can you do?

- Sign up for Action Alerts
- Vote or register people to vote
- ILGA.gov and congress.gov



What can you do?

- During legislative session:
 - File witness slips
 - Budget advocacy (federal and state)
- Join statewide or local councils or attend meetings:
 - Early Learning Councils
 - Advocacy coalitions
- Raise public awareness
- Find your elected official
- Start Early's Advocacy in Action Series:



<https://www.startearly.org/event/Illinois-advocacy-in-action-series/>



**Every child has equitable
opportunity to reach their full
potential to thrive in school
and in life.**

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Q&A

Report available at:

<https://www.nccp.org/publication/iecmh-hv-report/>

PRiSM: Promoting Research-informed State IECMH
Policies and Scaled Initiatives

<https://www.nccp.org/prism-project/>

Please contact us with any questions or comments:

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