



**ZERO TO THREE**  
Early connections last a lifetime

## New York State Association of County Health Officials (NYSACHO) Presentation

# *How Early Intervention Programs Can Address Social-Emotional and Mental Health Needs of Children and Families: Post-COVID*

Presenters:

**Debbie Cheatham, RN, MS, DNP, Director – ECDHS: Evidence to Impact Center, ZERO TO THREE**

**Andy Gomm, MSW, Consultant, Early Childhood Technical Assistance (ECTA) Center**

# RAPID – EC Parent Survey

- Families with young children are continuing to suffer from the challenges of the pandemic.
  - Families reported that
    - *“struggles with well-being and emotional distress were mentioned [as an ongoing challenge] more consistently than any other topic across families overall and across families grouped by income and race.”*
- **Struggles with Well-being and Emotional Distress During the Pandemic**
  - 42% of all families reported struggling with well-being and emotional distress as one of the top 3 challenges overall, and
  - A third of the families in the —high income, lower income, White, Black, and Latinx demographic groups reported struggling with well-being and emotional distress.
- Parents and their children are feeling anxious, depressed, lonely, stressed, burnt out, and unable to cope.

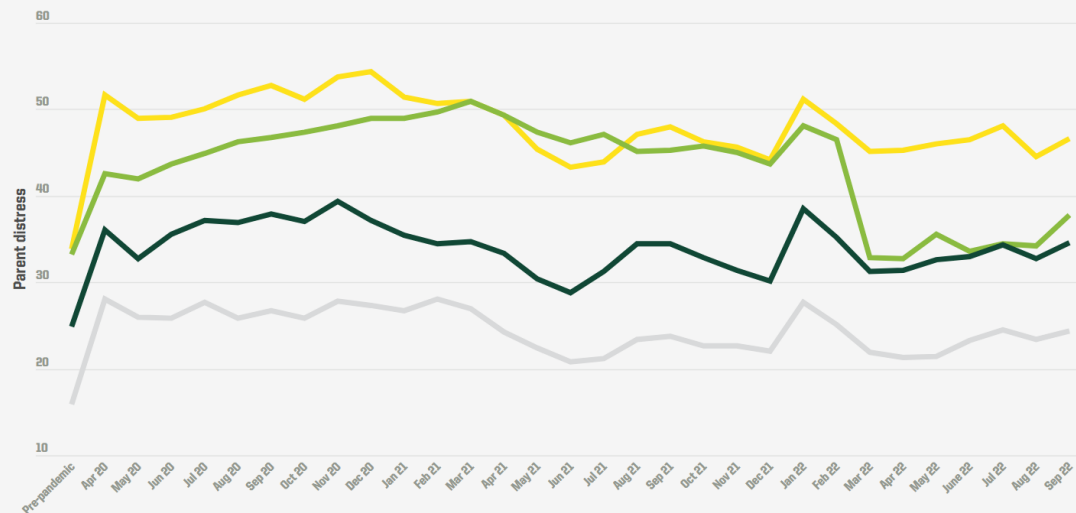
# RAPID – EC Well-Being Data

RAPID-EC DATA DROPS

## PARENT WELL-BEING OVER TIME

Four symptoms (described below) are plotted to represent parent distress. Responses for each symptom were averaged to create a single score and transformed to a range of 0-100 for each caregiver at each month.

- **Stress:** Caregivers responded to the question "Stress means a situation in which a person feels tense, restless, nervous or anxious or is unable to sleep at night because his/her mind is troubled all the time. Have you felt this kind of stress in the past week?"
- **Loneliness:** Caregivers reported how often they felt lonely.
- **Anxiety:** Caregivers reported how often they were bothered by "feeling nervous, anxious, and on edge" and "not feeling able to stop or control worrying."
- **Depression:** Caregivers reported how often they were bothered by "feeling down, depressed, or hopeless" and "little interest or pleasure in doing things."



Download Stress Loneliness Anxiety Depression

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RAPID-EC DATA DROPS

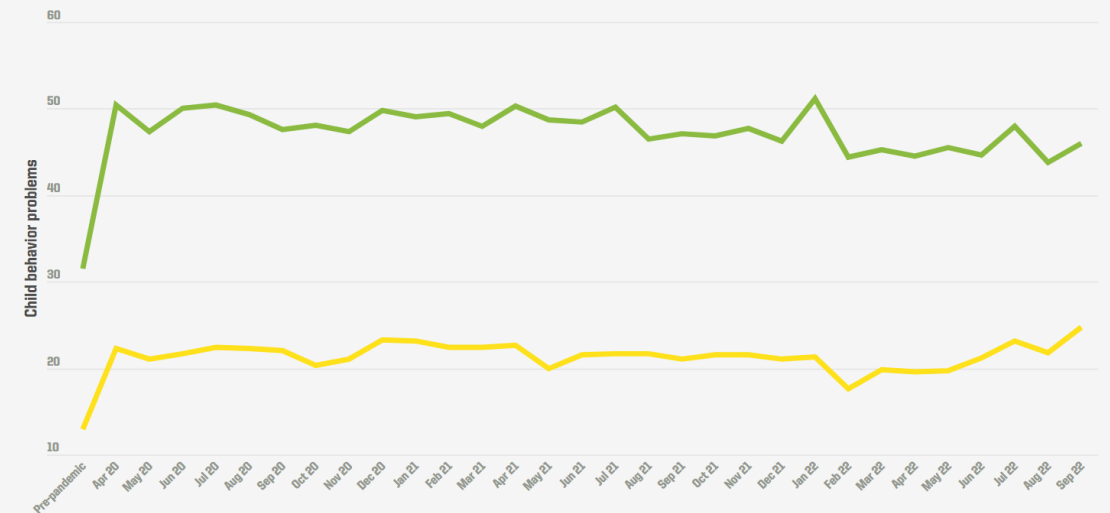
## CHILD WELL-BEING OVER TIME

How the data was calculated:

**Child externalizing behaviors:** Caregivers reported how much the phrase "fussy or defiant" fits their child's behavior in the last week on a scale from 0 (Not true) to 2 (Often true or very true).

**Child internalizing behaviors:** Caregivers reported how much the phrase "too fearful or anxious" fits their child's behavior in the last week on a scale from 0 (Not true) to 2 (Often true or very true).

Responses were rescaled so that 0 was the minimum possible response and 100 was the maximum possible response, to facilitate aggregation.



Download Child externalizing symptoms Child internalizing symptoms

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# Overview of Impact of COVID

## ZERO TO THREE partnership work with The Education Trust ([The Education Trust \(edtrust.org\)](https://edtrust.org))

- COVID-19 pandemic made delivering early intervention services more challenging and exacerbated racial inequities in health and education
- Survey of state coordinators of early intervention services in fall 2020
- Focus was on Black and Latino families, families with limited English proficiency, and families with low incomes.
- 29 coordinators responded, and questions were related to:
  - referral rates,
  - wait times from referral to evaluation, and
  - early intervention service rate changes for the specific populations
- Overall referral rates have dropped.
  - 5 states reported decreased referrals for Black and Latino families and families with limited English proficiency.
  - 4 states reported decreased referrals for families with low incomes.

# Wait Times and Service Rates

- WAIT TIMES FROM REFERRAL TO EVALUATION - many children had to wait longer than usual to receive an evaluation and to establish eligibility for EI.
  - 10 states had an overall increase in wait times,
  - 4 reported no significant change, and 2 reported a decrease.
  - 18 states did not have data to report.
- EARLY INTERVENTION SERVICE RATES - overall, fewer children have received early intervention services.
  - 15 states reported decreased service rates and, one stated had higher rates of service.
  - Rates dropped in:
    - 5 states for Black children and children from families with limited English proficiency.
    - 7 states for Latino children, and
    - 4 states for children from families with low incomes.
  - Many states did not have data to report.

# Challenges and Bright Spots

- Challenges:
  - Identifying & locating children who are potentially eligible for services.
  - Delivering services at the same level of quality and at the same frequency as before the pandemic.
  - Identifying & locating children from families with limited English proficiency and families with low incomes.
  - Inequities in access to technology (including broadband internet) for high-quality virtual visits.
  - Transitioning from early intervention to preschool services.
  - Varying levels of comfort with virtual evaluations and service delivery among providers.
    - Helping families understand the value of virtual services.
- Bright Spots:
  - Virtual visits increased family engagement in some states and provided interventionists an opportunity to hone their family coaching skills.
  - Enhanced technological capabilities - pandemic prompted some states to modernize their technological capabilities for early intervention.
  - Better collaboration - programs across the country developed new ways to support each other and share information about what is and isn't working.

# References

- Rapid Assessment of Pandemic Impact on Development-Early Childhood (RAPID-EC) [RAPID Survey \(rapidsurveyproject.com\)](https://rapidsurveyproject.com)
- The Impact of COVID-19 on Early Intervention: How States Can Support Our Youngest Learners: [The-Impact-of-COVID-19-on-Early-Intervention-How-States-Can-Support-Our-Youngest-Learners-May-2021.pdf \(edtrust.org\)](https://edtrust.org/wp-content/uploads/2021/05/The-Impact-of-COVID-19-on-Early-Intervention-How-States-Can-Support-Our-Youngest-Learners-May-2021.pdf)

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THANK YOU!

ecta

# **Infant & Early Childhood Mental Health (IECMH) and EI (Part C)**

New York State Presentation  
August 25, 2022



# Presenters

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# Agenda

- IECMH national project and TA
- IECMH Background – why synergy between IECMH and EI (Part C) makes sense
- IECMH Policies and Practice Considerations:
  - *Screening, Assessment and Eligibility*
  - *Practices and Services*
  - *Workforce & Professional Development*
  - *Funding and Partnerships*
- Q&A



# IECMH and EI Part C – Briefing Paper and TA

- Briefing Paper (PDF); web version & Planning tool  
<https://ectacenter.org/topics/iecmh/iecmh-partc.asp>
- New IECMH topic page  
<https://ectacenter.org/topics/iecmh/>
- Webinars conducted in July and posted
- Cross State cohort (fall 2022) - NY is one of 8 states selected



Briefing Paper: Infant and Early Childhood Mental Health and Early Intervention (Part C):

Policies and practices for supporting the social and emotional development and mental health of infants and toddlers in the context of parent-child relationships

May 2022

**ecta** Early Childhood  
Technical Assistance Center

## The IECMH and EI Part C Workgroup – National partners



# Potential partners

NYS – Association for  
Infant Mental Health

NYS – Office of  
Mental Health

State IECMH lead

Advocacy and  
Philanthropic  
organizations

NY Pyramid Model  
State Leadership  
Team

NY Medicaid

University Centers for  
Excellence in  
Developmental Disabilities  
Education (UCEDD)

Existing cross  
program IECMH  
collaborative  
efforts





# Defining Infant & Early Childhood Mental Health (IECMH)

## AS IT RELATES TO YOUNG CHILDREN:

*“developing capacity of a child birth to 5 years old to form close and secure adult and peer relationships, experience, manage and express a full range of emotions, and explore the environment and learn – all in the context of family, community and culture”* [ZERO TO THREE](#)

## AS IT RELATES TO A PROFESSIONAL FIELD

*“An interdisciplinary field dedicated to understanding and promoting the social and emotional well-being of all infants, young children, and families within the context of secure and nurturing relationships. Infant mental health also refers to the social and emotional well-being of an infant or toddler within the context of a relationship, culture, and community”* [Alliance for the Advancement of Infant Mental Health \(AAIMH\)](#)

# Increase focus on the importance of social-emotional development and mental health

Adverse Childhood Experiences (ACEs) can lead to lifelong developmental and mental health issues

Early brain development is dependent on nurturing relationships

Young children, including infants, *can and do* show early warning signs of mental health disorders

Trauma and toxic stress can result in serious mental health issues

Resilience of children experiencing trauma is promoted through stable caring relationships



# *Continuum of IECMH Supports & Services*

Increasing intensity and specialization of services and supports



Promotion



Prevention

Developmentally  
Appropriate  
Assessment and  
Diagnosis



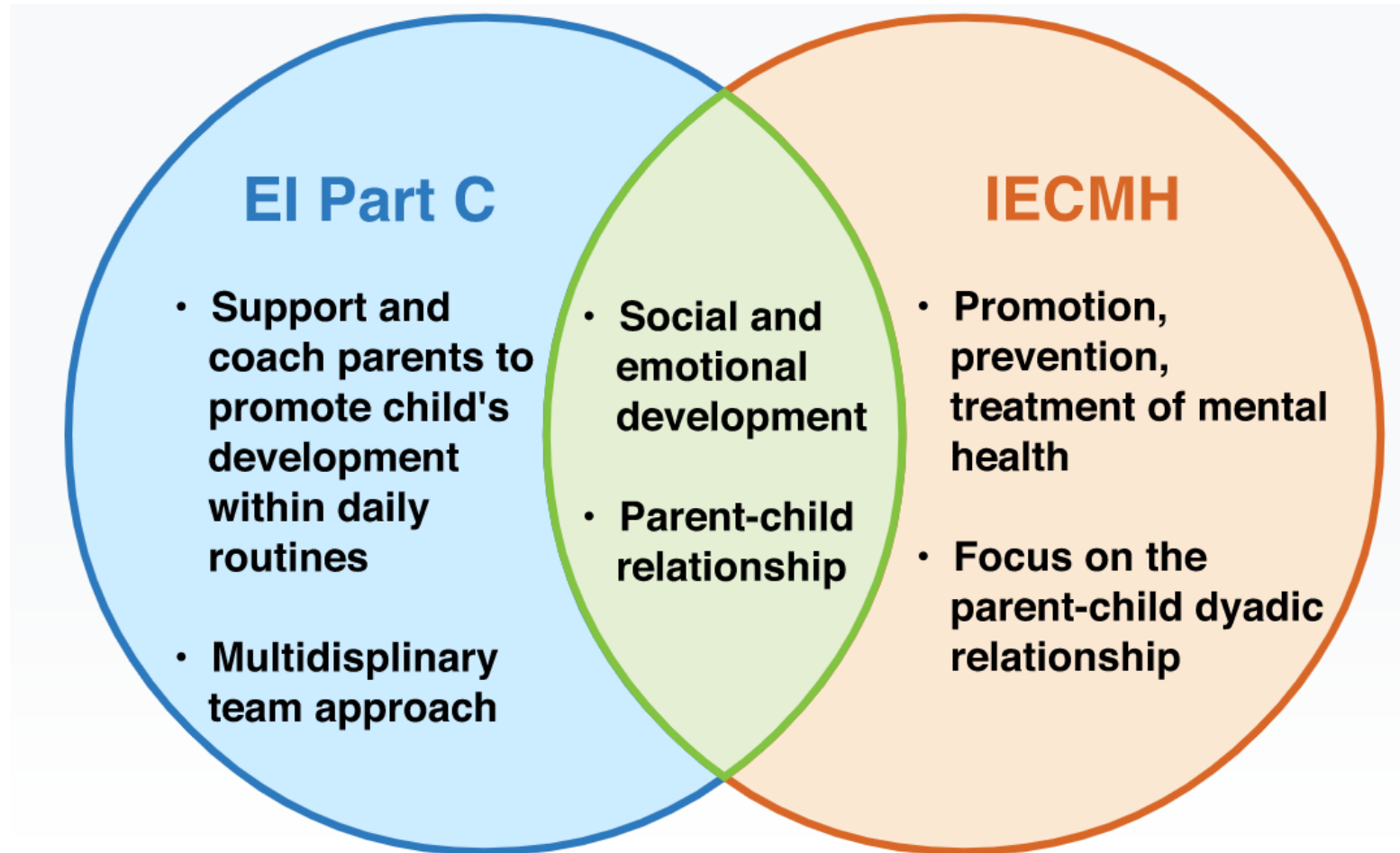
Treatment

Part C/Early Intervention





# Intersection between Early Intervention (Part C) and IECMH



# IECMH – Referral, Screening, Assessment & Eligibility Considerations

- **Referral** - Outreach to child welfare, domestic violence other social service agencies.
- **Screening** - Promote use of social and emotional screening tools; Promote access to postpartum / perinatal mood disorders screening
- **Eligibility Criteria** - Incorporate mental health conditions in states establish conditions list; explore at risk category
- **Evaluation and Assessment** - Include mental health professional / IMH training on multidisciplinary team; Use of tools focused on social & emotional development; use of classifications such as the DC:0–5™



# IECMH Practices and Services Considerations

## Preventive-Intervention

- **Reflective Practice\*** – reflecting and wondering about the emotional needs of the parent and child and their responses.
  - **Pyramid Model** – use of fidelity instruments, coaching and partnering with families to promote social & emotional development.
  - **FAN Approach** - a conceptual model and a practical tool for family engagement and reflective practice.
  - **IECMH Consultation** – consultants support the capacity of individual practitioners and teams.
  - **NEAR@Home** a home visiting approach that incorporates core elements for effective home visits to help strengthen families that incorporates reflective supervision and a trauma-sensitive approach.
- \*Supported through regular reflective supervision/consultation

# IECMH Practices and Services Considerations

## Treatment

### *Dyadic therapy*

Conducted by a trained clinician that addresses the parent-child relationship through observation of parent-child interactions and coaching. Examples:

- *Parent-Child Interaction Therapy (PCIT)*
- *Attachment and Biobehavioral Catch-up (ABC)*
- *Child-Parent Psychotherapy (CPP)*

### *Parenting programs*

Often facilitated group that promote parent-child relationships and parenting strategies .

Examples:

- *Circle of Security*
- *Triple P Parenting.*
- *Incredible Years*



# Workforce and Professional Development Considerations

- **Competencies** - Incorporate IECMH practices into EI Part C competencies
- **Practice-Based Coaching** – focused observation; reflection & feedback; shared goals & action planning
- **Professional Development** – workshops, conference sessions and keynotes
- **Endorsement** – through associations of IMH
- **Reflective Supervision / Consultation** – regularly scheduled time for individuals or groups to reflect and explore their feelings, emotional responses, challenges and growth opportunities for their practice.



# Funding and Partnership Considerations

## *Systems Funding (PD, infrastructure:*

- Preschool Development Grant (Birth – 5)
- American Recovery Plan Act (ARPA)
- SAMSHA grants
- Philanthropy / Foundations
- Collaborative state IECMH initiatives
- Children's mental health agency / IECMH office
- State Associations IMH (AIMH)

## *Funding services Outside of EI (Part C)*

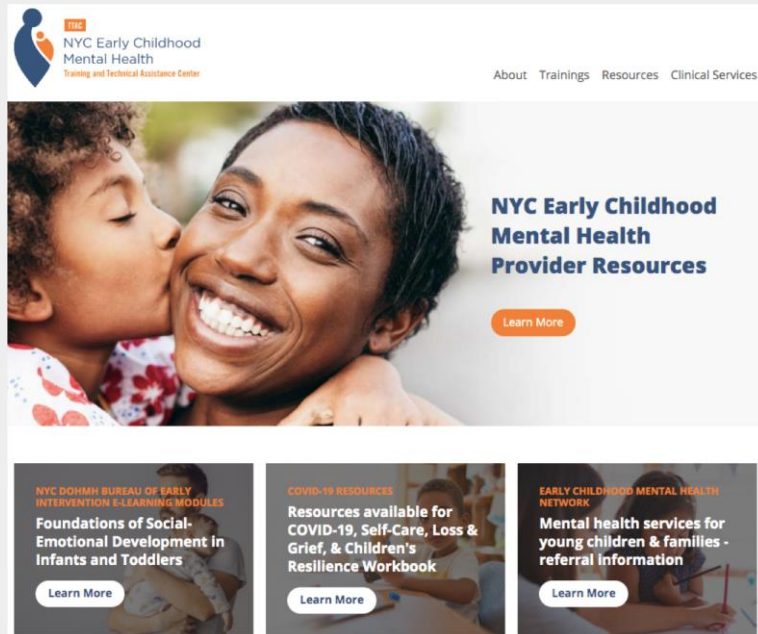
- Children's mental health offices
- IECMH offices
- Child welfare agencies
- Cross program initiatives

## *Funding services within EI (Part C)*

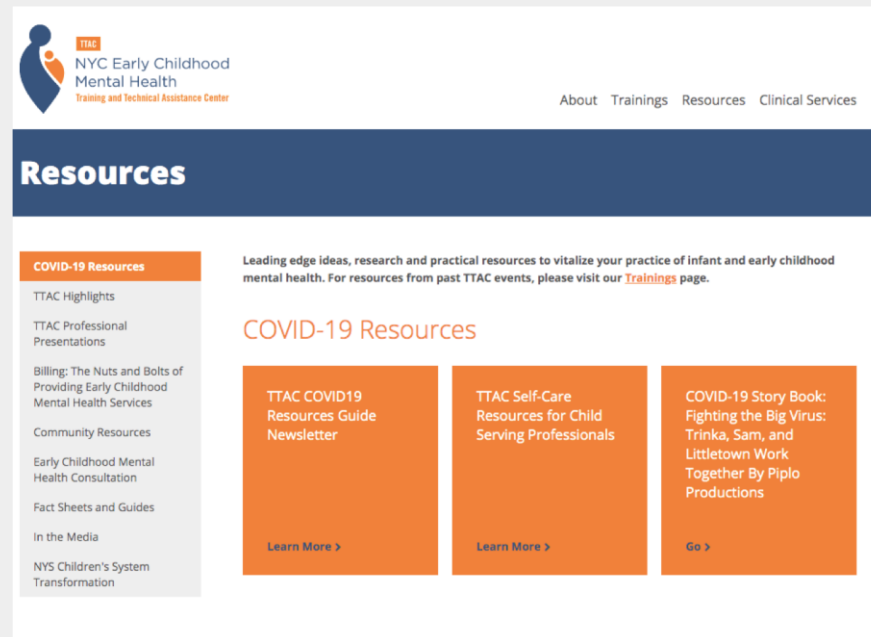
- IDEA Part C includes— Psychology, Social work, Counseling (Family Training Counseling Home visits)
- Medicaid – coding (services and diagnosis)



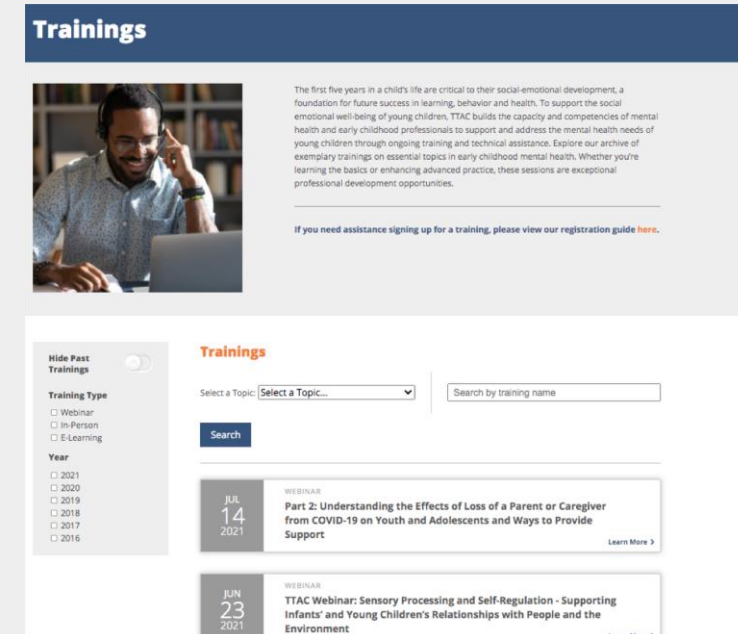
# Potential State Level IECMH Technical Assistance Resources



TTAC Home Page



TTAC Resources Page



TTAC Trainings Page



# NYC Training and Technical Assistance Contacts

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ECMH Network  
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# Questions Answers

# Contact Information

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Thank You!! 😊

