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## Early Childhood Mental Health: Innovative Practices in Family-Centered Services

This presentation reported on a study addressing mental health services for very young children and their families. Attention to the mental health needs of young children and their families has increased substantially in research, theory development, and intervention in recent years. Mental health services are increasingly considered necessary for very young children and their families as teachers, service providers, researchers, and advocates become more aware of mental, emotional, or behavioral challenges among children aged 0–5. Early childhood mental health services are focused on strengthening children's relationships with caregivers and promoting age-appropriate social and emotional skills, with the goal of improving the emotional and social well being of children aged 0–5 and their families (Knitzer, in press).

The study was supported by the Center for Mental Health Services (CMHS) and is part of the Comprehensive Community Mental Health Services for Children and their Families Program (also known as the Children's Mental Health Initiative). The aim of the study was to identify promising strategies and approaches to designing and delivering early childhood mental health services. We were not looking for a *perfect* early childhood system; rather, we were seeking out concrete practices that groups of people within a system of care had developed to meet the needs of

very young children and their families and that seemed to result in positive outcomes. To develop a picture of state-of-the-art practices in early childhood mental health services, we completed a literature review and visited four Community Mental Health Services for Children and Their Families Program communities and one community-based early childhood mental health service delivery site. We found a range of promising practices in each of the communities we visited and reached a number of conclusions.

## Description of Communities

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The following is a summary of the systems of care offering early childhood services that we visited:

### Children's Upstream Services Project, Vermont

- ◆ Service Area: Entire state, divided into 12 regions; funded since 1998 on current grant.
- ◆ Promising Practices: Community-based and coordinated/transdisciplinary services, individualized and comprehensive services.

### Community Wraparound Initiative, Illinois

- ◆ Service Area: Lyons, Riverside, and Proviso Townships; funded 1994–1999.
- ◆ Promising Practices: Individualized services; community-based, family-centered services with a high degree of family participation; coordinated services.

### KanFocus and Project Before, Southeastern Kansas

- ◆ Service Area: A 13-county area in rural, Southeastern Kansas; funded 1994–1999.
- ◆ Promising Practices: Individualized services, community-based services, coordinated services.

### The Kmiqhitahasultipon Program, Indian Township, Maine

- ◆ Service Area: Passamaquoddy Tribe of 900 community members, funded since 1997.
- ◆ Promising Practices: Coordinated services, individualized services, community-based services.

### Positive Education Program, Cleveland, Ohio

- ◆ Service Area: Cuyahoga County (including Cleveland), not on CMHS grant funds.
- ◆ Promising Practices: High level of family participation; focus on developmental needs, as well as strengths and resilience of child and family; family-centered services.

## Findings

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In our literature review and analysis of findings from site visits, we identified principles that reflected system of care principles tailored to the specific developmental issues of very young children and their families. Systems of care serving young children and their families are guided by similar values and practice guidelines as those for older children, but with greater knowledge and expertise related to early childhood developmental needs and the importance of nurturing environments. We found that services support the mental health of very young children when they are:

- ◆ **Focused on developmental needs.** *Awareness of age-appropriate behavior can help service providers offer appropriate supports and services to children and their families.* In one community, parents who enroll their children in the early childhood program commit to coming three times a week for 3 hours a day. For about 30 minutes each day, children and parents interact around certain tasks. After 20 minutes, the parents discuss the interaction with the session coach. In this way, parents gain valuable information regarding age-appropriate behavior for their children.
- ◆ **Family-centered.** *Services are designed according to the family's strengths, needs, and preferences.* In one meeting, team members and the family member disagreed on goals of the intervention and the mother's commitments. It was necessary to clarify assumptions and understandings. Everyone present was able to offer their input. The mother explained some of the reasons for her choices and actions, and the team reviewed the goals for the children and mother. In addition, they addressed plans for the children over the summer, which allowed the mother to work.

- ◆ **Individualized.** *Programs and services respect families' values; beliefs; and racial, ethnic, cultural, and socioeconomic backgrounds.* Services based off the reservation have been and are available to people in the Passamaquoddy community. However, these services have not always served children and their families well. Except for one person, all of the staff at the Maine program speak Passamaquoddy and are able to offer services in the language families prefer.
- ◆ **Comprehensive.** *Service arrays include a variety of interventions.* Offering support to a parent as he or she completes a Graduate Equivalency Degree or attempt to obtain employment may be as useful as parenting classes. In one system of care, parent-staff accompany parents and their children to settings outside of the home (such as grocery shopping or the library). In this way, parents and staff can practice how to work with their children in these settings.
- ◆ **Community-based.** *Community-based interventions are provided in the natural environments of young children and their families and incorporate informal community supports.* In one community, services to very young children often begin even before the child is born, with program staff visiting a pregnant mother and offering support. Regular meetings with the soon-to-be mother (and sometimes father) ensure that a strong relationship between the parents and program staff is in place when the child is born; thus, when the child is born, the mother and provider are in a good place to address the needs of the child.
- ◆ **Coordinated.** *Families may interact regularly with multiple service providers. Services from different agencies complement each other when there is coordination.* At one of the communities we visited, staff who provide services to very young children have worked hard to develop and maintain links with informal and formal supports throughout the communities. This has meant investing in long-term relationships with staff at other agencies in the early childhood community, as well as building connections with informal support networks that exist on a neighborhood to neighborhood basis.
- ◆ **Built on a high level of family participation.** *Families of children who have received mental health services are uniquely able to offer services to other parents.* In one community, parent-staff give tours to parents interested in the program; observe parent-child interaction in structured sessions; record parent and child behavior during sessions; discuss the sessions with parents immediately afterwards; work as classroom coaches in the day, afternoon, and evening classrooms; and actively participate in team meetings.
- ◆ **Built on strengths and resilience.** *Interventions are designed to promote resilience by enhancing self-esteem, improving coping strategies, and increasing social support.* In one community, the video process allowed a mother to observe her own interactions with her young daughter. After watching the video, she noticed how close she felt to her daughter and how well she knew her. Seeing her own interaction with her daughter, and observing the closeness of the relationship on the screen, gave the mother a new sense of encouragement to stay sober.

## Directions for Further Research and Practice

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Research and practice in early childhood mental health is at a relatively early stage of development, and there is a need for further research to inform practice and policy developments. Systematic evaluations using both qualitative and quantitative methods are needed to identify effective processes and positive outcomes of early childhood mental health services for young children and their families. The research team identified a number of key questions to guide future research and practice innovations in early childhood mental health:

- ◆ How can service providers in early childhood mental health keep current with new knowledge of brain development and incorporate this knowledge in their work with children and their families?
- ◆ What kinds of diagnostic, assessment, and evaluation tools are needed for young children and their families?

- ◆ What kinds of culturally sensitive approaches to assessment and intervention are needed to individualize services?
- ◆ What knowledge do service providers need to understand the interactions between risk factors and resilience in order to improve outreach and early intervention while working from a strengths perspective?
- ◆ What are the optimal processes of family participation and the supports needed to facilitate participation according to parents' preferences?
- ◆ With family members beginning to play many roles in early childhood mental health services, what knowledge is needed so that family members can play complementary roles with providers in designing and delivering early childhood mental health services?
- ◆ How can administrators structure programs so that families have meaningful roles in a system of care?
- ◆ What are the benefits of coordinated and trans-disciplinary approaches and how can they be achieved?
- ◆ How can service providers build upon existing formal and informal supports in communities?

## The Policy Context

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Further research and practice developments will occur within a policy context that is far from ideal for supporting the kinds of comprehensive, family-centered, resilience-oriented approaches to early childhood mental health that were identified and described in this study. For example, there is growing knowledge of the

value of intervening early with young children who are at risk of developing serious emotional disorders, but there is no single entity with policy level responsibility for meeting the mental health needs of young children. Services are lacking in many communities and are fragmented in most communities where they do exist. There is a need for a coordinated advocacy voice to speak for the needs of young children and for improved access and coordination in service delivery.

This presentation emphasized the important roles of families in meeting the mental health needs of young children. However, families must deal with the potentially negative consequences of policy changes, such as the Personal Responsibility and Work Opportunity Act (Temporary Assistance for Needy Families, TANF). There is a need for further research on the effects of this legislation on the healthy development of young children. Like other service delivery innovations, developments and enhancements of early childhood mental health services are occurring in a climate where funding is an ongoing challenge. The imperative is to pursue knowledge development and policy/practice innovations in early childhood mental health, because there is developing evidence that investment in community-based early intervention may reduce the demand for more restrictive interventions later.

## Reference

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Knitzer, J. (in press). Early childhood mental health services: A policy and systems development perspective. In J. P. Shonkoff & S. J. Meisels (Eds.), *Handbook of early childhood intervention*. New York: Cambridge UP.