Addressing the Mental Health Needs of Young Children and Their Families





National Children's Mental Health Awareness Day-May 6, 2010

How Does Mental Health Affect Young Children and Their Families?

Young children experience mental health challenges that impact early learning, social interactions, and the overall well-being of their families. It is estimated that between 9% and 14% of children from birth to 5 years of age experience social and emotional problems that negatively affect their functioning and development.1 Among babies, signs of depression can include inconsolable crying, slow growth, and sleep problems.²

Mental health challenges among young children occur within the context of early childhood growth and development, during which children develop selfcontrol and learn to tolerate frustration.³ For example, although temper tantrums may be developmentally normal for toddlers, tantrums characterized by selfdestructive behaviors or aggressive behavior toward people or property can indicate that emotional and behavioral problems are present. A young child who withdraws regularly from social situations and experiences fear when interacting with others may have mental health needs 5

Children's early mental health challenges may impact their preschool success. Children in state-funded pre-kindergarten programs are expelled at more than three times the rate of students in grades K-12.6 Expulsion of preschoolers, infants, and toddlers in less regulated private childcare can be as high as 13 times the rate of older children and youth. Many childcare programs ask families to withdraw their very young children because of behaviors such as

hitting and biting. Disruptive behaviors like these are the most common reason preschool children receive mental health services.8

Providing effective age-appropriate services and supports to young children and their families, however, has immediate as well as lifelong benefits. Young children who receive effective age-appropriate services and supports are more likely to complete high school, have fewer contacts with law enforcement, and improve their ability to live independently. This short report describes social and emotional outcomes for young children from birth through 8 years of age and their families, a subset of all children and youth who receive services in systems of care.



How Are Systems of Care Helping Young Children and Their Families?

What Are Systems of Care? The Comprehensive Community Mental Health Services for Children and Their Families Program, administered through the Substance Abuse

and Mental Health Services Administration, funds systems of care, a community-based service delivery model that promotes positive mental health outcomes for children and youth from birth through 21 years of age and their families. The focus on providing familydriven, culturally and linguistically competent, and evidence-based services and supports in systems of care is ideally suited to addressing the mental health needs of young children and their families.



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration Center for Mental Health Services www.samhsa.gov





Who Refers Young Children to Systems of Care?

•	Schools and daycare centers	25%
•	Mental health agencies, clinics, providers	25%
•	Caregivers	18%
•	Child welfare agencies	12%
•	Physical health care providers	4%



Systems of care facilitate coordination among each child's service providers, including preschools, schools, child protective services, primary care, and mental health providers. Families partner with public and private organizations to develop individualized service plans for their children that build on child and family strengths to establish

effective services and supports in the least restrictive settings possible. Systems of care help children, youth, and families thrive at home, in school, and in the community throughout their lives.¹⁰

Why Young Children's Social-Emotional Well-Being Is Important

- Tailoring programs and services to individual child needs can promote the success of young children in preschool and school environments.¹¹
- Children who enter kindergarten with effective social skills generally have an easier time developing relationships with peers and do better in school.¹² Young children's social and emotional skills are strong predictors of academic success in the first grade.¹³
- Studies of the cost-effectiveness of early childhood interventions indicate that providing appropriate and effective services and supports to young children can result in positive outcomes in areas such as educational attainment, delinquency and crime, and earnings. These positive outcomes translate into dollar benefits for the larger community as a whole.

Focusing on Early Childhood in Systems of Care

Wraparound Oregon: Treating Very Young Children

Can very young children have mental health issues? "Absolutely," says Rob Abrams, M.S.W., Project Director of Wraparound Oregon: Early Childhood at the Multnomah Education Service District in Portland, OR. But many people still don't believe that's true.

"When people hear that we have 2-year-olds with severe depression in our program, they ask, 'How can that be?'" said Mr. Abrams. "We hear that not only from the public, but also from professionals."

How do you treat very young children? "We're not going to take a 3-year-old to a therapist's office for 50 minutes of talk therapy," Mr. Abrams smiled.

Instead, the process begins with a family being assigned a facilitator and a "parent partner," parents and grandparents who can make a strong connection to new participants because they have gone through the process themselves. Next, the family works with an interdisciplinary team to uncover its strengths and needs. "Families come back and say, 'We never knew we had these strengths,'" said Mr. Abrams. "That in and of itself is healing."

Data from the national evaluation of the system of care program demonstrate social and emotional improvement from program entry to 6 months after beginning services for children 8 years and younger and their families. All improvements over time are statistically significant.

Who Are the Young Children Who Receive Services in Systems of Care? Young children are referred to systems of care for a wide range of behaviors and experiences. Two-thirds of caregivers of children aged 6 to 8 years report that their children had experienced nightmares. One-half of caregivers of children from birth to 5 years of age report that their children could not stand having things out of place; 55% report that their children were not eating well.

Young children's mental health symptoms impact the well-being of caregivers and families. Caregivers of young children entering systems of care report that their own emotional well-being and their family lives are significantly strained due to their child's problems.





Healthy development in young children includes both physical and mental health. For example, nearly one in six children under age 9 years (17%) entering systems of care have asthma. Because primary care providers see children for their physical health needs, they play an important role in the early identification of mental health

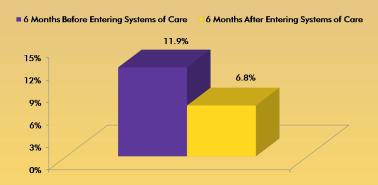
concerns. Systems of care provide a well-established framework for collaboration among providers to facilitate access to needed mental health services and supports.

Young Children and Their Families Improve in Systems of Care

The social and emotional well-being of young children begins to improve within 6 months after entering services in systems of care. The family lives of children in systems of care, including caregivers' levels of strain, also improve within 6 months of services.

Settings: Changing afterschool and childcare arrangements can be detrimental to the well-being of young children and their families. ¹⁴ Within 6 months after entering systems of care, the number of children aged 8 years and younger changing afterschool or childcare settings fell by nearly 43%.

Stabilization of Afterschool or Childcare Attendance



Multiple Afterschool or Childcare Settings Due to the Child's Behavioral or Emotional Problems (n = 278)

"Effective services and supports for families and caregivers help give very young children a solid foundation for a productive future."

-Rob Abrams, M.S.W.

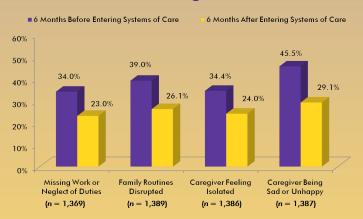


Behavioral and Emotional Problems:

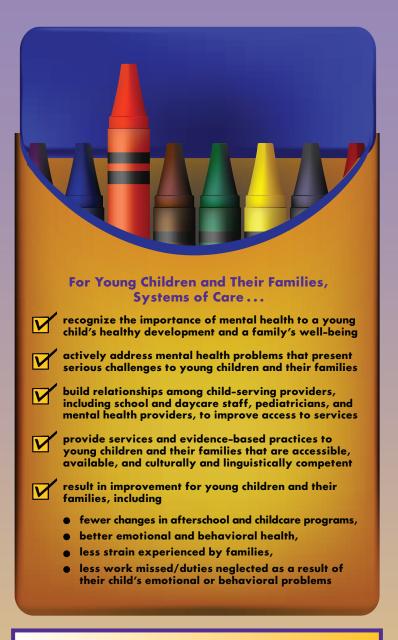
Behavioral and emotional symptoms decreased among nearly one-third of the children (31%) within the first 6 months after entering systems of care.*

Reduced Strain Felt by Families: Nearly onethird fewer caregivers reported high levels of feeling sad or unhappy, feeling isolated, having family routines disrupted, or missing work/neglecting duties as a result of their child's emotional or behavioral problems.

Stabilization of Caregivers and Families







Study Background

Children and youth receiving services in federally funded systems of care range in age from birth through 21 years. To be eligible for services, they must have, or have had at any time during the past year, an emotional, socioemotional, behavioral, or mental disorder that meets standardized diagnostic criteria, is of sufficient duration, and affects child or youth functioning in home, school, and/or community, or requires intervention by multiple child-serving agencies.

Short report findings are based upon data collected by the national evaluation of system of care communities initially funded from 2002 through 2006. Young children in this national evaluation sample entered systems of care from 2003 through 2009. Data are reported for the 2,207 young children in the evaluation with complete data at entry into services.

"I have seen my child become more open and willing to talk more about the past. Our bond is getting closer and stronger. My daughter is becoming more of her own person. I have gained support . . . these workers are more willing to be there for the family . . . they are willing to try to talk about things that are happening with my daughter and they try to reassure me."

—Brandy, from Building Blocks, Southeastern CT.

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