

## Herr Research Center for Children and Social Policy at Erikson Institute

### EARLY CHILDHOOD MENTAL HEALTH POLICY IN THE MIDWEST REGION

#### Fact Sheet – October 2008

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Policy interest in early childhood mental health (ECMH) issues has increased substantially during the past several years. This represents a critical shift from past practice, when the consideration of child mental health issues focused almost exclusively on school-age children and adolescents. In part, this change reflects policymakers' receptivity to research findings demonstrating the importance of social-emotional development during the first five years of life, particularly as linked to recent advances in the scientific understanding of brain development.<sup>1</sup> Greater attention also comes in response to increased concern that a substantial and perhaps growing number of young children have significant social-emotional and/or mental health issues.<sup>2</sup>

This fact sheet describes preliminary findings from the Herr Research Center study, Early Childhood Mental Health Policy in the Midwest Region, supported by the United States Department of Justice. The Herr Research Center initiated this two-year study to gain further understanding of early childhood mental health services and policies in the Midwest region comprising Illinois, Michigan, and Wisconsin. The findings highlight successes and challenges each of these states have faced in their efforts to create an ECMH system and suggest potential action steps to assist in moving that work forward.

#### Study Overview

The purpose of the study was to provide systematic information to local policy stakeholders to advance an improved system of mental health services for children birth to age five in Illinois, Michigan, and Wisconsin. The study examined state successes and challenges in three areas related to ECMH policy: 1) screening and assessment, 2) mental health consultation, and 3) workforce development and training. Specific state-level questions included:

- What are the ECMH screening and assessment policies for children birth to age five?
- What initiatives govern the demand and supply for ECMH consultation services?
- What policies support the workforce qualifications and training of ECMH providers?

Data sources used to address these questions included published literature reviews, public documents, proceedings from relevant policy meetings and conferences, and semi-structured interviews with leading policy stakeholders in Illinois, Michigan, and Wisconsin.

## Preliminary Findings

Although each state has met with its own unique successes and challenges in its work to create an ECMH system, the data described in Table 1 illustrate some common themes across the three states and suggest opportunities for them to learn from each other. Common challenges include:

- Lack of consensus about defining “early childhood mental health.”
- Little discussion of cultural considerations in defining or providing services.
- Discontinuity between identification of ECMH concerns and service provision.
- Developing and training a professional ECMH workforce.
- Minimum cross-agency planning to maximize the use of existing funding streams.

**Table 1: Successes and Challenges in Illinois, Michigan and Wisconsin around ECMH efforts**

| State            | Successes   | Challenges   |
|------------------|---|--|
| <b>Illinois</b>  | <ul style="list-style-type: none"> <li>• Active infant mental health association</li> <li>• Several state initiatives to increase public awareness of ECMH issues</li> <li>• Momentum behind building a workforce and ECMH credential system</li> <li>• Increase in ECMH consultants working in a variety of public and private settings</li> <li>• Active association for infant mental health</li> <li>• Strong collaborative relationships between public/private agencies, advocates, practitioners, and researchers</li> </ul> | <ul style="list-style-type: none"> <li>• Limited professional workforce</li> <li>• Gap between the availability of professionals who can provide treatment and availability of services</li> <li>• Limited training opportunities for providers for advanced skill building</li> <li>• Limited ECMH services in normative settings, such as in pediatric and OB/GYN offices</li> <li>• Long-term funding needs are not secure</li> </ul> |
| <b>Michigan</b>  | <ul style="list-style-type: none"> <li>• Active and long-standing infant mental health association</li> <li>• Widely recognized professional endorsement and competency program</li> <li>• Long history in workforce development</li> <li>• Strong collaborative relationships between public/private agencies, advocates, practitioners, and researchers</li> <li>• State mandates that physicians use a standardized screening tool to identify social-emotional issues</li> </ul>  | <ul style="list-style-type: none"> <li>• Funding for services and workforce training</li> <li>• Limited availability of ECMH content and training at the college level</li> <li>• Infrastructure linking promotion, prevention, and intervention services</li> <li>• Need for better screening and assessment procedures, particularly for maternal depression</li> </ul>  |
| <b>Wisconsin</b> | <ul style="list-style-type: none"> <li>• Recently formed Wisconsin’s Alliance for Infant Mental Health</li> <li>• Several initiatives to increase public awareness of ECMH issues</li> <li>• Developed an Infant/Early Childhood Mental Health Plan included in the state’s Kids First Agenda</li> <li>• Creation of county-level infant mental health task forces and clinical programs highlighting ECMH in the training curriculum</li> </ul>  | <ul style="list-style-type: none"> <li>• Limited participation in the infant mental health association</li> <li>• Limited capacity to address ECMH across disciplines</li> <li>• A lack of available training programs to develop the workforce</li> <li>• Absence of a substantial political infrastructure to support and build capacity for supporting and funding ECMH services</li> </ul>   |

## Potential Action Steps

- Clarify the definition of early childhood mental health to increase ability to communicate about needed services and supports and involve all relevant stakeholders.
- Strengthen professional associations to increase their multi-disciplinary focus and their visibility throughout the entire state, and to coordinate with higher education institution and training centers.
- Create a centralized department or interagency task force to organize and systematize ECMH funding, services, and programs across agencies and disciplines.
- Increase participation of Medicaid and private health insurance organizations in ECMH conversations.
- Increase attention to cultural considerations in defining and providing services, including using culturally valid and reliable assessment tools across the state.
- Create training programs that are connected to competency systems and standards.

## Conclusion

Preliminary findings from the ECMH Policy in the Midwest Region study indicate that Illinois, Michigan, and Wisconsin face common challenges in their efforts to create an ECMH system, including how best to define early childhood mental health. Despite these challenges, each state also has been successful in reaching key milestones in their efforts, including increasing public awareness about early childhood mental health. The unique successes of each of the three states provide opportunities for them to learn from each as they continue to work to build their ECMH systems. The potential action steps we have described in this fact sheet can provide some starting points from which this work might occur.

### Coming Soon!

More detailed findings from the ECMH Policy in the Midwest Region study will be released in the following outlets in the coming months.

- Research Report: Findings of the full study will be published in a forthcoming Herr Research Center for Children and Social Policy report in January 2009.
- Policy Briefs: Findings leading to policy recommendations will distributed to inform key stakeholders on issues surrounding ECMH assessment and screening, mental health consultation, and workforce development in January 2009.
- Presentations: Findings from the study will be presented at the Zero to Three's National Training Institute, December 5-7, 2008 in Los Angeles, California.

## About the Herr Research Center

The Herr Research Center for Children and Social Policy informs, guides, and supports effective early childhood policy in the Great Lakes region. Unique in its regional approach, the center brings together perspectives from policy and research to promote the well-being of young children from zero to age eight and their families. Our researchers design and conduct original research, evaluations, and analysis on the optimal organizational design, funding mechanisms, monitoring practices, and implementation strategies of early childhood programs and services. We then channel this knowledge to state and local legislators, program administrators, advocates, foundation officials, and other participants in the policy process to improve the overall effectiveness of programs and policies for young children and their families.

The Herr Research Center for Children and Social Policy at Erikson Institute builds on the work of an applied research center established at Erikson in 1997 with generous gifts from the Jeffrey Herr family. The center expanded its mission in 2005 with additional funding from the Herr family and from the McCormick, Joyce, and Spencer Foundations and the Children's Initiative, a project of the Pritzker Family Foundation.

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<sup>1</sup> National Research Council and Institute of Medicine (2000). *From Neurons to Neighborhoods: The Science of Early Childhood Development*. Committee on Integrating the Science of Early Childhood Development. Jack P. Shonkoff and Deborah A. Phillips, (Eds). Board on Children, Youth, and Families, Commission on Behavioral and Social Sciences and Education. Washington, D.C.: National Academy Press.

<sup>2</sup> U.S. Public Health Service, *Report of the Surgeon General's Conference on Children's Mental Health: A National Action Agenda*. Washington, DC: Department of Health and Human Services, 2000; Kenny, H., Oliver, L., & Popp, J. (2002). *Mental Health Services for Children: An Overview*. Washington, D.C.: National Conference of State Legislatures.