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# What is Infant/Early Childhood Mental Health (IECMH)?

## 37th Native American Child and Family Conference

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March 13, 2018

# Learning Objectives:

Participants will:

- Recognize the importance of promoting mental health for very young children and their families
- Identify concrete strategies and program services to support mental health of young children and their families.
- Explore the effectiveness of their current mental health services.



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# Definition:

## Infant Early Childhood Mental Health

The developing capacity of infants and young children to:

- experience, regulate, and express emotions in socially acceptable ways
- form close and secure adult and peer relationships
- explore the environment and learn

all in the context of family, community, and culture.

Adapted from ZERO TO THREE, 2001



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# Definition of Infant Early Childhood Mental Health Activity



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# What Does IECMH look like? Optimal Mental Health



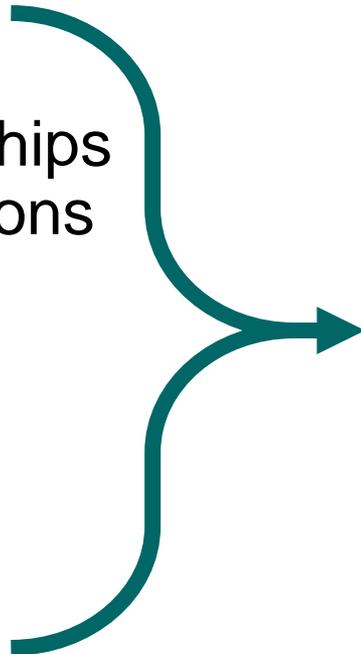
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# Children's Developing Mental Health

Capacity to:

- Form relationships
- Express emotions
- Explore with security



Capacity to:

- Feel confidence/ competence
- Develop relationships
- Make friends
- Persist
- Follow directions
- Be emotionally literate
- Manage emotions
- Be empathetic

Birth

Five



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# Early Childhood Mental Health is Synonymous with Social Emotional Development

Emotional well-being and social competence ...are the bricks and mortar that comprise the foundation of human development.

National Scientific Council on the Developing Child, 2007



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# Understanding Behavior Has Meaning: Behavior Expresses

- I want something
- I want to escape from something



# Infants Communicate in Many Ways

**Gaze aversion -  
(looking away)**

**Yawning**

- Dull look

**Vocalization**

- Giggling
- Crying
- Squealing

**Expressions**

- Pushing out of the lips
- Wrinkling the brow
- Lip grimace; lip compression
- Smiling
- Tongue show
- Brow raising



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# Infants Communicate in Many Ways: Movements

- Pulling away
- Joining of hands
- Arching back, stiffening
- Clinging posture
- Lowering the head
- Hand to eye
- Hand to ear
- Hand to mouth
- Hand to stomach
- Reaching for caregiver



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# Understanding Challenging Behavior

***What we are referring to when we say “challenging behavior”?***

- Any repeated pattern of behavior that interferes with learning or engagement in pro-social interactions with peers and adults
- Behaviors that are not responsive to the use of developmentally appropriate guidance procedures



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# Understanding Challenging Behavior

***What we are referring to when we say “challenging behavior”?***

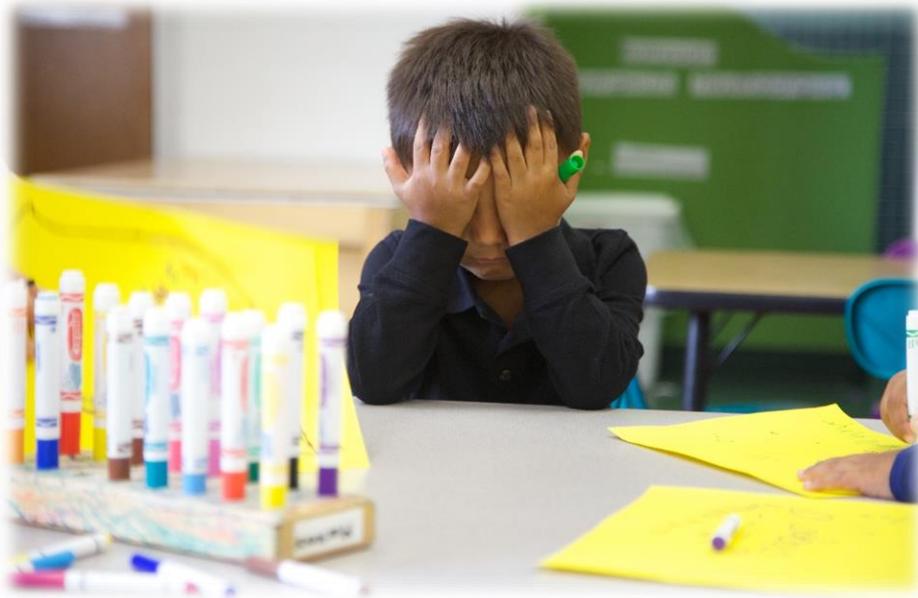
- Defined by caregiver.
- Challenges caregivers sense of competence



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# What is Challenging Behavior?



- Intensity
- Frequency
- Duration



# Video Discussion

- What might this behavior be communicating?
- How do you think this parent feels?
- What might help the parent feel better?



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# Continuum of Emotional Expression

Social Withdrawing.....Acting Out

*Two different and extreme  
forms of emotional expression*



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# Acting-Out Behaviors

- Fussing
- Inconsolable crying
- Frequent or intense tantrums
- Pushing
- Hitting
- Biting
- Frequent throwing of things or knocking things down or destroying property
- Persistent refusal to allow or participate in activities
- Harm to self or others



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# Social Withdrawing Behaviors

- Pulling away while being held
- Rarely cooing, babbling or talking
- Looking sad
- Not showing preference for caregiver
- Not making eye contact
- Whining
- Being overly complaint or avoidant with caregiver
- Diminished efforts to use communications skills that have previously been used



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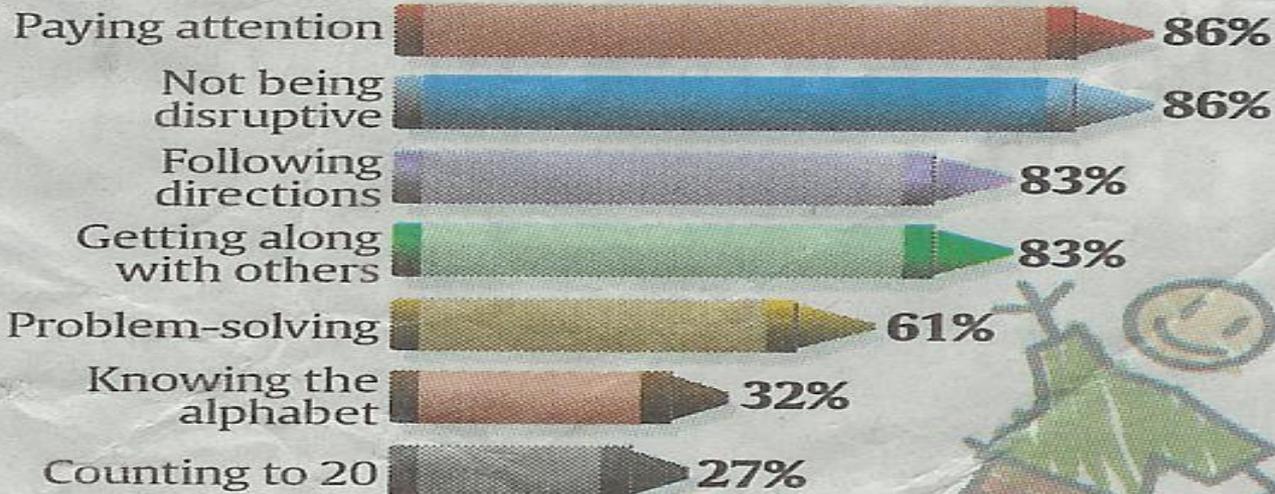
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# Why is IECMH so important?

## USA TODAY Snapshots

### Early on, social skills trump smarts

Percentage of 800 kindergarten teachers surveyed who say these skills are essential or very important:



Source: Mason-Dixon Polling for Fight Crime: Invest in Kids

By Julia Neyman and Alejandro Gonzalez, USA TODAY



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# Infant Early Childhood Mental Health in EHS/HS



## Outline

- ▶ Part 1301—Program Governance
- ▶ **Part 1302—Program Operations**
  - 1302.1 Overview
  - ▶ 1302 Subpart A—Eligibility, Recruitment, Selection, Enrollment, and Attendance
  - ▶ 1302 Subpart B—Program Structure
  - ▶ 1302 Subpart C—Education and Child Development Program Services
  - ▶ **1302 Subpart D—Health Program Services**
    - 1302.40 Purpose.
    - 1302.41 Collaboration and communication with parents.
    - 1302.42 Child health status and care.
    - 1302.43 Oral health practices.
    - 1302.44 Child nutrition.
    - **[1302.45 Child mental health and social and emotional well-being.](#)**
    - 1302.46 Family support services for health, nutrition, and mental health.
    - 1302.47 Safety practices.
  - ▶ 1302 Subpart E—Family and Community Engagement Program Services

## 1302.45 Child mental health and social and emotional well-being.

(a) *Wellness promotion.* To support a program-wide culture that promotes children's mental health, social and emotional well-being, and overall health, a program must:

- (1) Provide supports for effective classroom management and positive learning environments; supportive teacher practices; and, strategies for supporting children with challenging behaviors and other social, emotional, and mental health concerns;
- (2) Secure mental health consultation services on a schedule of sufficient and consistent frequency to ensure a mental health consultant is available to partner with staff and families in a timely and effective manner;
- (3) Obtain parental consent for mental health consultation services at enrollment; and,
- (4) Build community partnerships to facilitate access to additional mental health resources and services, as needed.

(b) *Mental health consultants.* A program must ensure mental health consultants assist:

- (1) The program to implement strategies to identify and support children with mental health and social and emotional concerns;
- (2) Teachers, including family child care providers, to improve classroom management and teacher practices through strategies that include using classroom observations and consultations to address teacher and individual child needs and creating physical and cultural environments that promote positive mental health and social and emotional functioning;
- (3) Other staff, including home visitors, to meet children's mental health and social and emotional needs through strategies that include observation and consultation;
- (4) Staff to address prevalent child mental health concerns, including internalizing problems such as appearing withdrawn and externalizing problems such as challenging behaviors; and,
- (5) In helping both parents and staff to understand mental health and access mental health interventions, if needed.
- (6) In the implementation of the policies to limit suspension and prohibit expulsion as described in §1302.17.



# 1302.45 - Child mental health and social and emotional well-being

- Mental health consultation in all program models:
  - Role of consultants w/teachers, parents, home visitors, and other staff
  - Utilization of consultants
  - Obtaining parental consent



# Infant Early Childhood Mental Health in EHS/HS

- Promotion
- Prevention
- Intervention

Children, Families, and Staff



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# Promotion



Activities that enhance social and emotional wellness for all children



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# Let's Watch



clip 1.1



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# Video Reflections

- How did you feel watching the video clips?
- How did the caregivers promote a secure relationship?
- How did the caregivers assist the child to explore the environment and learn?
- How did the caregivers promote the context of culture, family, and community?



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# When it Works Well



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# Video Reflection Discussion

- How did she use her relationship with the parent to help the child?
- How might the parent have felt as a result of this situation?
- How do you in your program engage parents to bring in their culture and caregiving practices into your work with their children?
- How might this interaction prevent challenging behavior?



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# Program Strategies for Promoting Early Childhood Mental Health

- Incorporate high quality social emotional programs into your everyday practices
- Share information regularly about mental health
- Take care of yourself!
- Reflective practice



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# Prevention



Minimizes social and emotional risk factors and reduces the likelihood of mental health problems developing or intensifying



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Infant Toddler CSEFEL video 2.3



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# What promotion and prevention activities/strategies does your program implement?

- For Children?
- For Families?
- For Staff?



# Additional Ideas for Prevention

- Promotion activities
- Screening, assessment, ongoing observation
- Helping children to gain skills in self-regulation
- Helping children to notice their own feelings
- Practice and model self-regulation
- Address family risk factors
- Support staff who are feeling challenged



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# Intervention



These services support families of children exhibiting or diagnosed with mental health or behavioral problems that need further support and attention

# Intervention Tips

- Positive communication with family
- Referral to pediatrician
- Individualized approach
- Using a team approach to develop a plan



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# Intervention in Action



CSEFEL infant toddler video 3.6

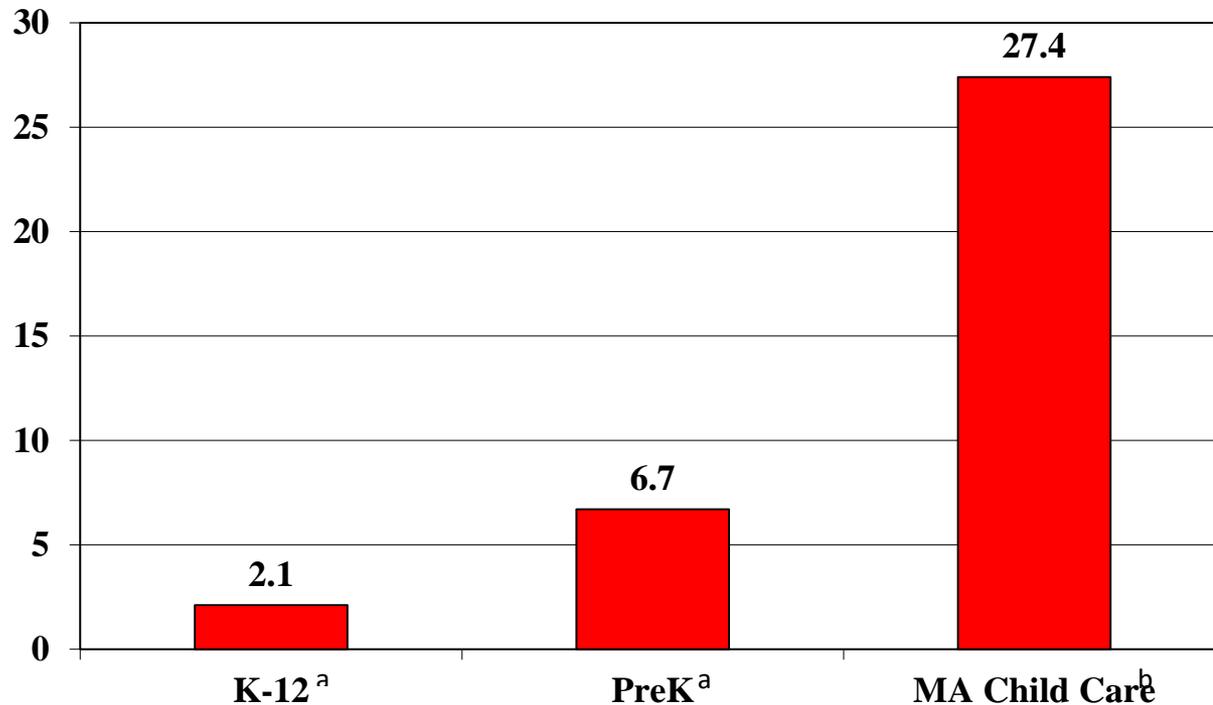


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# Expulsion and Suspension in Early Childhood Settings

# Expulsion Rates (per 1,000)



a. Gilliam, WS (2005). Prekindergarteners left behind: Expulsion Rates in state prekindergarten programs. *FCD Policy Brief, Series No. 3*. Available: [www.ziglercenter.yale.edu/publications/briefs.html](http://www.ziglercenter.yale.edu/publications/briefs.html)

b. Gilliam, WS & Shahar, G (2006). Preschool and child care expulsion and suspension: Rates and predictors in one state. *Infants and Young Children, 19*, 228-245.



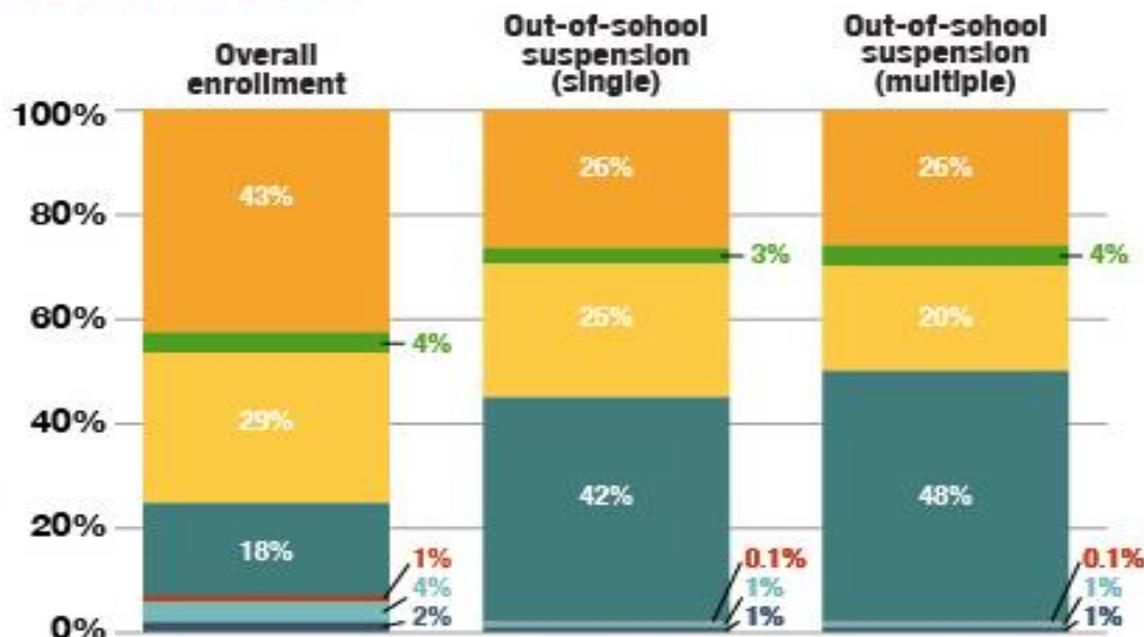
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# Suspension Rates

## Disparity in Discipline Starts in Preschool

Less than 1 percent of the 1 million students in preschool in 2011-12 were suspended from school. But that translates into roughly 8,000 3- and 4-year-olds. More than 2,500 were suspended more than once.



SOURCE: U.S. Department of Education, Office for Civil Rights, Civil Rights Data Collection, 2011-12



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# What do these practices look like?

- In-school suspensions

Removal or exclusion of the child from the classroom.

- Out-of-school suspensions

Temporary removal of the child from the program.

- Expulsions

Permanent removal or dismissal from the program.

- Soft-expulsions

Practices that leave the family with little choice but to withdraw their child.



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# Why does this matter?

- The beginning years of any child's life are critical for building the early foundation of learning, health and wellness.
- Often the children most in need of intervention are the ones expelled from the system.
- Expulsion or suspension early in a child's education predicts negative academic and life outcomes later in life.

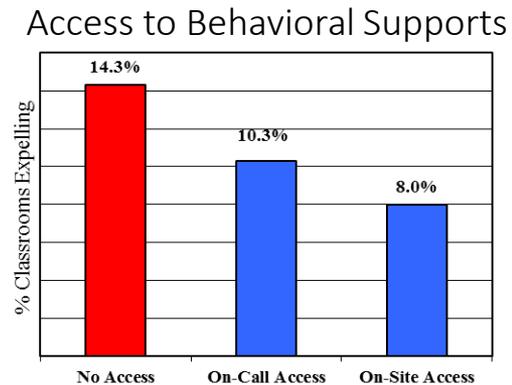
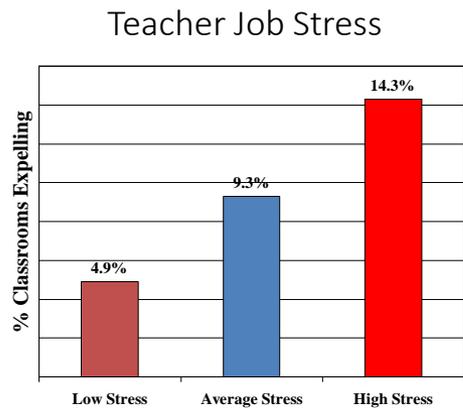
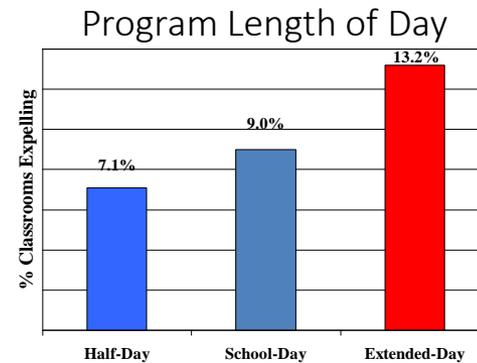
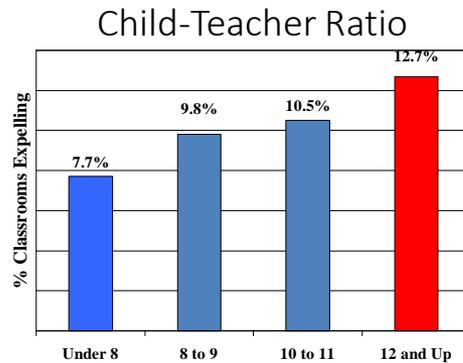


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# Many Factors Predict Preschool Expulsion



# 1302.17 Suspension and Expulsion

**Goal:** Codifies long standing practice to not expel children from Head Start programs

- Prohibits expulsion and severely limits suspension
- Provides steps for programs related to challenging behaviors
- Elaborates on engaging mental health consultants described in 1302.45 mental health and social and emotional well being regulation

# Linking 1302.45 and 1302.17

- Mental health consultants' role in eliminating expulsions and limiting suspensions – linking back to 1302.17
- Prevention focused
- Collaboration with staff and parents
- Utilization of community resources



# Infant/ early childhood mental health is linked to family well being.



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# Family Well-Being an Outcome of EHS Family Engagement

## PARENT, FAMILY AND COMMUNITY ENGAGEMENT FRAMEWORK



# 1302.41 - Collaboration and communication with parents



Requires programs collaborate and communicate with parents about their children's health in a linguistically and culturally appropriate manner and communicate with them about health needs and concerns in a timely manner.

# Depression: A Major Barrier

- More than half (52%) of EHS mothers reported enough depressive symptoms to be considered depressed.
- 18% of EHS fathers reported enough symptoms to be considered depressed
- More than 20% of Americans will experience a depressive episode in their lifetime

[http://www.acf.hhs.gov/sites/default/files/opre/research\\_brief\\_depression.pdf](http://www.acf.hhs.gov/sites/default/files/opre/research_brief_depression.pdf)



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ECMHC.org

# Five Action Steps to Address Maternal Depression in Early Head Start Programs

- Identify families
- Train staff
- Provide reflective supervision
- Connect families
- Reduce stigma



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### Inventory of Tools for Screening/Assessing Maternal Depression

Screening Tool	Completed or Administered by	Primary Audience	Number of Items/Completion Time	Website
<b>Tools available at no cost</b>				
Patient Health Questionnaire- 2 (PHQ-2)	Completed by patient or administered by a clinician	Screens for depressive symptomatology in the <b>general population</b>	2 items, Less than 1 minute	<a href="http://www.cqaimh.org/pdf/tool_phq2.pdf">http://www.cqaimh.org/pdf/tool_phq2.pdf</a>
Patient Health Questionnaire-9 (PHQ-9)	Completed by patient	Measures depressive symptomatology in the <b>general population</b>	9 items, 5-10 minutes	<a href="http://www.phqscreeners.com/pdfs/02_PHQ-9/English.pdf">http://www.phqscreeners.com/pdfs/02_PHQ-9/English.pdf</a>
Edinburgh Postnatal Depression Scale	Completed by patient	Measures depressive symptomatology in <b>postnatal women</b>	10 items, 5-10 minutes	<a href="http://www.fresno.ucsf.edu/pediatrics/downloads/edinburghscale.pdf">http://www.fresno.ucsf.edu/pediatrics/downloads/edinburghscale.pdf</a>
Center for Epidemiologic Studies Depression Scale (CES-D)	Completed by patient	Measures depressive symptomatology in the <b>general population</b>	20 items, 5-10 minutes	<a href="http://www.chcr.brown.edu/ccoc/cesdscale.pdf">http://www.chcr.brown.edu/ccoc/cesdscale.pdf</a>
Hamilton Rating Scale for Depression (HAM-D)	Administered by clinician	Measures depressive symptomatology in the <b>general population</b>	21 items, 15-20 minutes	<a href="http://healthnet.umassmed.edu/mhealth/HAMD.pdf">http://healthnet.umassmed.edu/mhealth/HAMD.pdf</a>
<b>Tools available through purchase from the publisher</b>				
Beck Depression Inventory (BDI) Fast Screen for Medical Patients	Completed by patient	Measures depressive symptomatology in the <b>general population</b> , designed for medical patients	7 items, less than five minutes	<a href="http://www.psychcorp.com/">http://www.psychcorp.com/</a>
Postpartum Depression Screening Scale (PPSS)	Completed by patient	Measures depressive symptomatology in <b>postnatal women</b>	35 items, 5-10 minutes	<a href="http://www.wpspublish.com/">www.wpspublish.com/</a>

# Screening Resources

# ECMHC.org



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# Key Messages

- Promotion of mental health happens through everyday interactions and dialogue
- Children's mental health is connected to the well being of their primary caregivers (i.e. parents and others who care for them)



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# Key Messages

- Intentional practices to prevent mental health problems from developing and worsening are effective
- Intervention strategies that are individualized to the unique meaning of the behavior as well as the unique needs of the family are most successful
- Trusting relationships among staff, families and children are essential.



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# Wrap-Up

- Evaluation/Feedback
- What questions do you still have?
- What will you remember?
- What will you do differently?



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# To Continue the Discussion, Join MyPeers



Email [health@ecetta.info](mailto:health@ecetta.info) and say “I’d like to join MyPeers”

# MyPeers Mental Health Consultation Community



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... Edit Post Tools ▾

**MUST READ**

## Welcome to the Infant/Early Childhood Mental Health Co... ⚡

*Written by Sunyoung Ahn in Mental Health Consultation* · Updated Feb 28, 2017 1:05 PM EST · 70 Views

This is an online peer learning community for Head Start leaders and related personnel (e.g., mental health, disabilities and other managers; mental health consultants; TA providers and policy makers) to share resources, network with each other, and provide support to improve or access mental health consultation services.

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