

# ISSUE BRIEF

## CHILDREN'S HEALTHY MENTAL DEVELOPMENT: WHAT STATE POLICYMAKERS NEED TO KNOW

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### IN THIS REPORT

*Research shows that experiences in the earliest years of life affect lifelong health outcomes and that those early years are full of opportunities to strengthen healthy physical and mental development.<sup>1,2</sup> This issue brief offers policymakers an action checklist for developing state policies and practices that support the healthy mental development of young children, and provides examples of such policies and practices already in place in Colorado. As well, the brief lists federal funding available to bolster state and local efforts to improve children's healthy mental development.*

### » THE CRITICAL CONNECTION: MENTAL HEALTH AND SCHOOL READINESS

Parents are their child's first and most important teachers, caregivers and protectors. Yet, parents need the help of teachers with instructional expertise, medical professionals able to respond to their children's health needs and safe neighborhoods where children can play.

Most importantly, parents must be able to provide nurturing and developmentally stimulating environments as their children's brains develop. Brain research shows the inextricable interplay between biology and environment in shaping very young children's mental development: their personality; temperament; behavioral responses to affection, danger and stress; inquisitiveness and how they learn. Research shows that experiences in the earliest years of life affect lifelong health outcomes and that those early years are full of opportunities to strengthen healthy physical and mental development.<sup>3,4</sup>



## » PROMOTION, PREVENTION AND TREATMENT

Healthy mental development includes cognitive, social, emotional, behavioral and psychological development. Most healthy mental development frameworks for children focus on three levels: promotion, prevention and treatment.<sup>5,6</sup> Key to any prevention or treatment strategy is the early identification of mental health risks or conditions.

### Promotion

Promotion services support healthy mental development by providing information to families with young children. These efforts may include broad-based public education campaigns and media efforts aimed at encouraging parents to play with their children. They may also include websites, telephone hotlines and social marketing efforts that provide information about healthy mental development, as well as routine developmental screenings in which health care providers share information and discuss with parents their children's mental and physical development. Primary child health practitioners are among parents' most trusted source of information, and well-child visits offer the opportunity for health promotion. Other effective sources of information about healthy mental development include early care and education providers, schools, libraries, community centers, 211 information and referral systems, public health agencies, and family and social support networks.

These promotional activities help raise much-needed awareness of the healthy mental development of young children among parents and the public. Results from parent surveys show that scientific knowledge about young children's healthy mental development is not always common knowledge. For example, a survey of parents of young children conducted in 2000 showed:

- 62% did not believe infants "take in" and "react to" their world until they are two months old when, in fact, learning and interaction begin at birth
- 55% did not believe infants can be affected by the moods of others when, in fact, infants are acutely aware of moods and conditions around them
- 51% believed children cannot be depressed until they are three years old when, in fact, infants as young as four months can experience depressive symptoms
- 51% believed a 15-month-old should be expected to be able to share toys with other children when, in fact, this behavior usually comes at a much later age
- 44% believed that picking up a three-month-old every time the child cries will spoil the child when, in fact, it is not possible to spoil a three-month-old with too much attention.

The survey also revealed that only one-third of parents believed they were fully ready to be parents at the birth of their child, and one-third felt they were very unready for parenting. Almost all wanted to learn more about parenting.<sup>7</sup>

### Prevention

Prevention efforts address specific family and community factors that jeopardize young children's healthy mental development. Demographic factors that are recognized to threaten a child's healthy mental development include poverty, single parenting, adolescent parenting, premature or low-weight births, and maternal parenting with limited education. The proportion of births that fall into one or more of these categories ranges from one-quarter to nearly half.<sup>8</sup> Prevention programs such as parenting education, home visitations and peer-support programs offer families in these situations information and support to protect their children's healthy physical and mental development.

Other family characteristics and parental behaviors that affect parental nurturing of children include parental depression, mental illness, addiction, immaturity, family violence and child-parent separation due to incarceration, abandonment, immigration issues and foster placement. These factors may affect as many as 15% to 25% of families with young children. Prevention services for children in this category often involve counseling, care coordination, and respite for parents and guardians.

Community conditions also can place children at risk. Young children living in violent neighborhoods can experience stress disorders just like adults, with excessive stress known to be damaging to the developing brain.<sup>9</sup> Children also may absorb the prejudice, intolerance and stereotyping they encounter in their own homes and communities, whether affluent or impoverished. While 3% of all young children live in neighborhoods characterized by high levels of child-raising risk, 20% of African-American and 25% of Hispanic children live in these neighborhoods.<sup>10</sup> Community-building efforts to eliminate personal prejudice and institutional racism may be needed to address these challenges.<sup>11</sup>

### Treatment

Young children can have mental health conditions that require professional attention and treatment. In addition to requiring diagnosis and clinical response, these conditions can strain even the most resilient and well-resourced parents. Parents, family members and foster parents are integral to young children's mental health care and treatment. Emphasis must be placed on training and supporting parents and caregivers who may need periodic respite and assistance to sustain their own mental well-being, as well as providing appropriate child mental health services.

The same holds true when children have developmental disabilities, including mental retardation, Down's syndrome and other biological conditions that restrict developmental progress. Parents need access to information, their own support systems and advocates who help to ensure their children are integrated into the everyday life of their communities.

While the proportion of young children with significant mental health or developmental disabilities is much smaller than those in other categories, these conditions still affect at least 5% to 10% of all young children.<sup>12</sup> Treatment programs can respond to social, emotional, behavioral and developmental concerns in young children.

### Early Identification and Response

Early identification of mental health risks or conditions is key to successful prevention and treatment programs. Early identification and treatment of child mental health conditions can mitigate, if not eliminate, many otherwise negative impacts for children. Visits with child health practitioners provide the opportunity for screening and early identification across the range of biological, environmental, family and social conditions that affect children's healthy mental development. Early care, education and family resource programs also can help identify and respond to risks and conditions.<sup>13</sup> In order to engage health care providers in early identification efforts, however, they must believe there are opportunities to go beyond screening and to follow-up with a prevention or treatment strategy.<sup>14,15</sup>

## THE ROLE OF RACE, LANGUAGE, GENDER AND CULTURE

Young children who are marginalized because of gender, race, physical appearance, disability or language develop adaptive responses that can include withdrawal, anger and frustration. Most research on how racism and social exclusion affect mental health has been conducted on older children and adults, but the implications for young children are clear: children can become aware of differences in skin color, gender, dress, language and custom at an early age. Young children who are excluded or treated differently because of any of these factors can internalize prejudice in relation to their own self worth. Young children also can learn to engage in exclusionary and discriminatory practices, acquiring a lack of tolerance and appreciation for others. Promoting children's healthy mental development includes such things as giving attention to young children learning to appreciate diversity and including others, even when they are different.<sup>16,17,18</sup>

## » STATE ACTION CHECKLIST

Policymakers and other advocates can draw upon exemplary strategies adopted by leading states and further customize their efforts to ensure all young children have opportunities for healthy mental development. This checklist provides strategies to incorporate healthy mental development into early childhood systems.

### **Planning and Governance**

- Incorporate healthy mental development into the goals of early childhood systems, and include individuals with expertise in healthy mental development in the planning process
- Embed equity and diversity issues into the goals of early childhood systems, and include leadership from diverse communities
- Develop strategic plans, based upon comprehensive needs assessments, to build services and systems to ensure healthy mental development for young children

### **Promotion**

- Emphasize healthy mental development of young children in health promotion activities
- Use multiple communication and social marketing efforts through public health agencies, cooperative extension offices, libraries, schools and medical practices
- Develop child mental health promotional materials for different audiences including parents, grandparents, child care workers and civic organizations
- Ingrain healthy mental development into messages about children's readiness for and success in school

### **Early Identification and Response**

- Expand developmental surveillance in primary and preventive health care for young children
- Expand developmental surveillance within other young-child-serving systems, including early care and education programs
- Use different approaches to ensure that the early identification of mental health risks or conditions is followed by referral and response. This can be supported by the adoption of exemplary practices, Medicaid reimbursements, formal links to Part C (the federal early intervention program for infants and toddlers with disabilities), the definition and promotion of medical homes, and the provision of care coordination
- Promote cross-disciplinary training and credentialing in child healthy mental development within other young-child-serving systems, including early care and education programs
- Provide child care providers, educators and others who serve young children and their families with health care consultants and other means by which to access mental health care
- Place special emphasis on developing intentional strategies to address health disparities and prevent children's social exclusion

### **Prevention and Treatment**

- Develop home visitation, parenting education and facilitated peer support group programs for families of young children with risk factors, with a clear focus on healthy mental development
- Ensure reimbursement for comprehensive approaches to children's healthy development within Medicaid and CHIP programs
- Provide for mental health parity in health insurance coverage, particularly for children and around children's healthy mental development
- Develop workforce strategies to ensure needed expertise about mental health in young children
- Develop strategies to address the community factors that place children at risk and that address recognized demographic and community factors related to disparities in children's healthy mental development.

» **COLORADO EXAMPLES****Unified Vision: The Early Childhood Colorado Framework***State Action Checklist – Planning and Governance*

The Early Childhood Colorado Framework is nationally recognized for its comprehensive and integrated approach to achieving the goal that all children are valued, healthy and thriving. Developed under the leadership of Colorado Lieutenant Governor Barbara O'Brien, with active involvement of more than 40 early childhood groups, the framework includes social and emotional development as a core element of early childhood development, with early learning, family support and health. The framework emphasizes achieving outcomes related to access, quality and equity, and recognizing and responding to variations in cultures, languages and abilities. For more information, visit <http://www.earlychildhoodcolorado.org>.

**Colorado Blue Ribbon Policy Council for Early Childhood Mental Health***State Action Checklist – Planning and Governance*

The Colorado Blue Ribbon Policy Council for Early Childhood Mental Health, established in 2003 and composed of federal and state government representatives, families, legislators and health care providers, researchers and advocacy groups, developed a strategic plan based on a comprehensive needs assessment of young children's social, emotional and mental health needs. The Council is reviewing the plan to determine whether federal health reform law provides opportunities to the state to implement provisions of the strategic plan. For more information, visit [http://www.earlychildhoodcolorado.org/state\\_initiatives](http://www.earlychildhoodcolorado.org/state_initiatives).

**Health Promotion***State Action Checklist – Promotion*

With funding from Substance Abuse and Mental Health Services Administration (SAMHSA), Project BLOOM (Building Leveraging Opportunities and Ongoing Mechanisms for Children's Mental Health) engaged in a social marketing campaign to educate parents on children's social and emotional needs. The campaign included What's Bugging You bookmarks and emphasis in mental health month (in May) on books and resources about children's social and emotional development. For more information, contact [Claudia.Zundel@state.co.us](mailto:Claudia.Zundel@state.co.us).

**Mental Health Consultants to Early Care Programs***State Action Checklist – Early Identification and Response*

Colorado has used Temporary Assistance for Needy Families (TANF) and other funding to support mental health consultants so that they might better address social issues and emotional concerns through early care and education programs. Kid Connects has been recognized by Georgetown University as an exemplary model, and Colorado has developed a comprehensive toolkit for use by early childhood programs. For more information, visit <http://www.pffac.org/index.php?s=80&cat=33>.

**Strategic Planning and Knowledge Development***State Action Checklist – Early Identification and Response*

Three divisions of the Colorado Department of Human Services have funded a Social Emotional Competence and Inclusion Center at the University of Colorado Denver. The Center's mission is to increase the use of evidenced-based practices in early care and education settings that improve the social and emotional competence of children ages 0-5. For more information, visit <http://www.pyramidplus.org>.

**Systems of Care: Project BLOOM***State Action Checklist – Prevention and Treatment*

Project BLOOM is developing comprehensive systems of care for young children and their families in El Paso, Fremont and Mesa counties and the City of Aurora. Although the children receiving services under the grant are those with serious emotional disturbances, each community provides a continuum of services and supports from promotion to prevention and treatment. This framework supports families and strengthens community connections, with particular emphasis on connections to each county's Early Childhood Council. For more information, contact [Claudia.Zundel@state.co.us](mailto:Claudia.Zundel@state.co.us).

## » FEDERAL FUNDING TO HELP STATES ADDRESS HEALTHY MENTAL DEVELOPMENT

States can tap federal funding to bolster state and local efforts to improve children's healthy mental development, raise the visibility of innovative practices, and enhance states' planning and data systems. Federal funding opportunities include:<sup>19, 20</sup>

### Treatment

- *Supplemental Security Income* and *Medicaid* programs provide resources for children and adults with disabilities and medical needs, including mental disorders requiring complex treatments.
- *Medicaid's Early, Periodic, Screening, Diagnosis and Treatment (EPSDT)* provision recognizes developmental, treatment and health maintenance services for children.<sup>21</sup>
- *Individuals with Disabilities Education Act (IDEA)* offers early intervention funding (Part C) for states to identify and address developmental issues among infants and toddlers. Preschool-aged children with developmental delays and disabilities are addressed in Part B.
- *Federal Title IV-E* provides entitlement funding to children who are in foster care, or at risk of such placement, and requires children be provided with Medicaid and Part C services.

### Prevention and Promotion

- *Medicaid and IDEA* offer states the opportunity to provide some preventive health services to support children's healthy mental development. Some family-centered services can be covered under Medicaid, but they must be directly tied to the child's health plan as a medically necessary service.
- *Head Start*, and particularly *Early Head Start*, has a strong emphasis on strengthening parent and child interactions for families in poverty and children with recognized disabilities.
- *Child Abuse Prevention and Treatment (CAPTA)* grants to states offer opportunities for investments in prevention and treatment services for young children and their families, and require that Part C services be offered to families with infants and toddlers that enter the state child protective service system.
- *Project LAUNCH* grants, administered under the Substance Abuse and Mental Health Services Administration, are targeted at improving all early childhood and school systems to ensure all children achieve physical, social, emotional, behavioral and cognitive milestones.
- *Temporary Assistance to Needy Families (TANF)* funds can be used for a variety of preventive services for families with young children.
- A number of different provisions in the *Patient Protection and Affordable Health Care Act (PPACA)* of 2010 can be used by states to strengthen preventive and developmental health services and enhance health promotion. This includes state funding specifically for evidence-based home visitation programs and a Prevention Trust Fund that emphasizes health promotion.<sup>22</sup>

PPACA also establishes new expectations for primary care for children under private and public health insurance plans. For the first time, the federal government has established a group health plan and health insurance issuer mandate, with no cost-sharing requirements, for certain preventive child health services, based upon the American Academy of Pediatrics' *Bright Futures* guidelines.<sup>23</sup> States will play a major role in monitoring and enforcing this provision and ensuring reimbursements are sufficient to enable health care providers to conduct comprehensive assessments and provide follow-up services.

### Planning and Implementation

- *Comprehensive Community Mental Health Services Program for Children and their Families* commits resources to state planning and infrastructure-building efforts focused on child and adolescent mental health, with an emphasis on seriously emotionally-disturbed children.
- *Early Childhood Comprehensive Systems Initiative* provides grants to states to do cross-system planning in developing comprehensive early childhood systems.
- *Early Childhood Advisory Council* grants, funded under the American Recovery and Reinvestment Act (ARRA), provide support for needs assessment and systems development activities in creating early childhood systems.
- The *Institute of Educational Science* offers grants to states to develop longitudinal statewide databases of publicly enrolled K-12 students, with increasing focus on adding early childhood data.

## » CONCLUSIONS

Failing to take advantage of opportunities to support young children's healthy physical and mental development can lead to significant societal and individual costs. To support the healthy mental development of young children, policymakers and advocates can draw upon exemplary strategies for mental health promotion, prevention and treatment. The State Action Checklist provides policymakers with a useful tool to develop policies that have been shown to effectively support the healthy mental development of young children.

## » ACKNOWLEDGMENT

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