



PROMOTING THE EMOTIONAL WELL-BEING OF CHILDREN AND FAMILIES

Using Mental Health Strategies to Move the Early Childhood Agenda and Promote School Readiness (SEPTEMBER 2000)

OVERVIEW

Early experiences set the stage for how children relate to other children, how they relate to adults, how they manage anger, and how they feel about themselves. These experiences also influence how well children will do in school. This issue brief highlights emerging strategies to: (1) promote the emotional wellness of young children and their families, including those most at risk; (2) enhance the skills of the families and other caregivers who nurture and support young children; and (3) ensure that those who need specialized services get them.

A FRAMEWORK FOR INTERVENTION

Consistent with research and clinical knowledge, strategies should be targeted to prevention, early intervention, and intensive early childhood mental health in order to:

- Enhance the emotional and behavioral well-being of young children, particularly those whose emotional development is compromised by virtue of poverty or other environmental or biological risk factors.
- Help families of young children address whatever barriers they face to ensure that, as children's first nurturers and teachers, their children's emotional development is healthy.
- Expand the competencies of non-familial caregivers (e.g., child care providers, home visitors, Early Head Start and Head Start staff, health care providers) to promote the emotional well-being of young children and families.
- Ensure that young children experiencing atypical emotional and behavioral development and their families have access to needed services and supports.

STRATEGIES

Strategy 1: Providing mental health consultation to child care and early learning programs.

Early childhood mental health consultation brings mental health expertise to where the children and families are in the same way that school-based mental health services bring mental health expertise to where older children are. Four examples are highlighted:

- The High-Quality Child Care Mental Health Consultation Program, San Francisco, California
- Day Care Plus, Cuyahoga County, Ohio
- Starting Early Starting Smart (SESS), an 11 site public-private initiative in Head Start, child care, and health settings
- Free to Grow: Head Start Partnerships to Promote Substance-Free Communities

Strategy 2: Enhancing mental health support to home-visiting programs.

Mental health strategies in home visiting programs are designed to help staff work more effectively with families affected by substance abuse, domestic violence, and mental illness—especially depression—who have infants and toddlers. Four examples are highlighted:

- California Safe and Healthy Families (Cal-SAHF)
- Vermont’s Healthy Babies home visiting program
- Baltimore’s federally funded Healthy Start home visiting program
- Project BEFORE (Bridging Empowers Families to Overcome Risks and Excel)

Strategy 3: Promoting relationship-based prevention strategies in the context of early health care.

Health settings also provide powerful opportunities to engage in prevention activities designed to promote healthy parent-child relationships before problems surface. Two examples are highlighted:

- Reach Out and Read, Boston Medical Center, Boston, Massachusetts
- Healthy Steps: A National Demonstration of the Commonwealth Fund

Strategy 4: Promoting the emotional wellness of young children and their families through a statewide approach.

Most initiatives focused on enhancing the emotional well-being of young children, their families, and their caregivers have been developed as individual or countywide programs. But one state, Vermont, is developing a statewide effort.

- The Children’s Upstream Project (CUPS), Vermont

KEY CONCLUSIONS

1. Paying attention to the emotional well-being of young children, especially the most vulnerable, their families, and their other caregivers is intimately related to ensuring early school success.
2. No one system has claimed lead responsibility for this group of children; real progress is dependent upon partnerships.
3. Building blocks and entry points to develop strategies to promote the emotional well-being of even the most high-risk young children and families—and those who care for and work with them—exist in every community and every state.
4. The emerging body of practice knowledge about early childhood mental health strategies provides a basis for other programs and communities to use.
5. The policy and funding challenges to making this knowledge and these building blocks work for young children and families cannot be minimized, but creative fiscal and other strategies to sustain the efforts are emerging.
6. Additional service system and outcome-related research is crucial, linked to widely shared goals for young children, including emotional readiness for school.

For more information about programs pursuing these strategies and contact information, as well as research citations, please refer to *Promoting the Emotional Well-Being of Children and Families—Policy Reprint: Using Mental Health Strategies to Move the Early Childhood Agenda and Promote School Readiness* by Jane Knitzer. Copies of the full publication are available at the NCCP website—www.nccp.org; E-mail: info@nccp.org.

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