

Meeting Mental Health Needs of Children



New Hampshire's Experience
with Serving Children in
Child Care Programs

The Long and Winding Road

- 1993 – IDEA Part H (now Part C) surveyed all providers regarding professional development needs: #1 need - Infant Mental Health
- 1995 – First NH Infant Mental Health Conference
- 1996 – N.H. Association for Infant Mental Health founded



Development of Regional Interagency Infant Mental Health Teams

- 1999 – NHAIMH looked for a way to develop infant mental health treatment and consultation capacity in NH
- The NHAIMH President was selected as a Zero to Three Harris Fellow with the plan to develop regional interagency teams as the project
- State Administrators for children's mental health, IDEA Part C and Part B, Head Start State Collaboration, and Maternal and Child Health signed on to the project



Development of Regional Interagency Infant Mental Health Teams

- Teams have had the following representation: parent, mental health center, private mental health provider, IDEA Part C and Part B, Head Start, child care, pediatric medical, child protection, home visiting, and substance abuse
- Teams began meeting monthly to develop and implement an annual action plan that addresses the infant and early childhood mental health needs in the region



Development of Regional Interagency Infant Mental Health Teams

- 2000 - A collaborative of State administrators braided funding and selected a contractor to monitor regional annual action plans and representation, as well as provide TA and funding, \$3,000 per team



NHAIMH Survey of Licensed Child Care Programs

- 2001 – Anecdotal evidence of child care expulsion was dismissed or viewed as occurring in a single city in the state.
- Survey mailed to NH's 1,100 licensed child care programs:
 - how many children, age birth to 6, have been asked to leave (been expelled from) your program
 - Of the children who have enrolled in your program, how many had been expelled from another program before enrolling in yours
 - Of those children who had been previously expelled from another program, how many were later expelled from your program?



NHAIMH Survey of Licensed Child Care Programs

- **367 or 29%:** Rate of response from all licensed child care settings
- **194 or 53%:** The number of respondents who, in a 15-month period, had enrolled at least one child previously expelled from another child care setting and/or had expelled at least one child
- 84 children had been expelled from a previous program and then from the respondents' programs



Child Care Inclusion Contract

- 2002 - Based on the Expulsion Survey, the Child Development Bureau contracted with an agency to provide direct child care program consultation
- Most consultants are primarily early childhood care and education experts, all have strong early childhood education/experience
- Behavior issues were found to be:
 - 70% child care quality or teacher/child issues
 - 20% Biologically based issues such as autistic spectrum or sensory integration disorder
 - 10% true behavioral/mental health issues



Strengthening Families Through Early Care and Education

- Child care programs are the natural fit for facilitating the development of protective factors in the families they serve
 - Parental resilience
 - Social connections
 - Knowledge of parenting and child development
 - Concrete support in times of need
 - Social and emotional competence of children



Strengthening Families Through Early Care and Education

Articulation
between training
& college credits

ECE Faculty

Professional
Development
System

Early
childhood training
organizations

Strengthening
Families
embedded in
child care practice

Child Care
R&R

Co-training
child welfare &
child care

Individual
credentialing

Child abuse
prevention
guidebook

Mentoring and
Technical Assistance

Child care
program
Quality Rating
System



2006 Data

- 14 Regional Interagency Infant Mental Health Teams:
 - Provided mental health consultations to child care programs
 - Developed/disseminated consumer education materials
 - Provided education/training to increase awareness and understanding of early childhood mental health issues
 - Engaged in efforts to increase the capacity of IMH providers/professionals
 - Identified and responded to gaps in community resources and services
 - Delivered outreach efforts to the community's pediatric health providers



2006 Data

- Child Care Inclusion Contract
 - Provided a total of 844 hours of service to child care providers
 - Services were provided to 127 different programs statewide
 - Ninety percent of requests for assistance were child-specific; children ranged in age from 6 months to 6 years.
 - Based on consultation requests, child care providers struggled most significantly with boys, 3 to 4 years old. Seventy-seven percent of child-specific requests were regarding boys; of these, 66% were 3 to 4 years of age.
 - Nearly all children for whom consultation was requested were at risk for expulsion; of those children, 6% were expelled from their program despite the consultation provided due to persistent extreme behavioral concerns and/or safety issues.



2006 Data

- Child Care Inclusion Contract
 - Follow up evaluation 3-6 months post consultation revealed that 91% of the providers were still employed at their program and 81% of the children either remained enrolled or left their program for reasons unrelated to their special needs.
 - PTAN sponsored or co-sponsored 26 regional training sessions attended by 395 child care providers (805 total participants); 18 trainings were designed specifically to meet the unique needs of each region's child care providers.



Without These Supports?

- In 2006, approximately 100 children would have been expelled from child care programs due to easily addressed behavior issues
- Children with serious behavioral health issues would not receive services
- Vulnerable children would be at greater risk for developing behavioral health issues