



New Mexico

A Steady Drumbeat Provides a Perfect Overture to Advance Infant and Early Childhood Mental Health

his policy vignette highlights efforts in New Mexico to advance infant and early childhood mental health (IECMH). Consistent pressure from both inside and outside government over a number of years contributed to the development of shared goals across departments, investments in workforce knowledge and capacity, and a state commitment to invest in IECMH. The vignette also shares key lessons learned.

the Innovation

The New Mexico Children, Youth & Families Department (CYFD) leads a collaborative effort including multiple state departments and the University of New Mexico to promote the use of a common language to accurately assess the social, emotional, and developmental needs of infants and young children. Together, state leaders set goals to develop a continuum of behavioral and emotional health services that are connected through referrals and patient information, and to incorporate use of the DC:0-5: Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood (DC:0– 5^{TM}) into the continuum by all types of providers.

the Impetus

"The ZERO TO THREE meeting in Minnesota in 2018 provided the exposure that was necessary to inspire conversations and action. Without that, we did not have the port of entry to advance the work," said Soledad Martinez of CYFD. Following this meeting of the IECMH Financing Policy Project (IECMH-FPP), in which New Mexico was a participant, the state was invited in 2019 to participate in the Harris Professional Development Network (PDN). Martinez notes that the CYFD division director who oversees behavioral health participated in the Harris PDN meeting and found herself surrounded by "all of the baby people at once," and that had a tremendous influence.

the Process

Since 2012, Martinez has been working to raise awareness in the state about IECMH. It required a steady drumbeat. That is now paying off, with significant markers of progress that have built on each other. These include participation in the ZERO TO THREE IECMH-FPP convening in Minnesota in 2018, followed by participation in the Harris PDN and the establishment of an official infant mental health unit within the CYFD in 2019, and, most recently, a \$1 million investment in IECMH by the state for FY2020.

Following the Minnesota meeting, the New Mexico team developed overall goals and subcommittees to work on a statewide IECMH agenda. Subcommittees examine policy and practice related to (a) promotion; (b) prevention; (c) assessment, diagnosis, and treatment; (d) regulations and reimbursement; and (e) finance. A multiagency steering committee guides all of the work.

For example, goals of the promotion subcommittee are to develop:

- a map of all current services;
- a story using statistics to demonstrate the need for social and emotional health education, attachment theory, and a common language across all pertinent providers by utilizing the DC:0–5; and
- an informal campaign for parents through collaboration with the Preschool Development Grant Birth through Five, early learning organizations, and the New Mexico Association for Infant Mental Health.

Forming these carefully defined subcommittees and ensuring cross-agency representation on each was strategic. "If we have all of these people from all departments coming to meetings to understand DC:0–5, they will begin to recognize the need and usefulness across the promotion to treatment continuum. They will see how DC: 0-5 can be used in a child care setting, home visiting, child welfare, maternal and child health, behavioral health, etc. and then there will be a big enough voice to require—or *demand*—the DC:0–5 is used to assess infants and young children's mental health," said Martinez.

In addition to leading this cross-agency work, Martinez's work within CYFD is bringing about change in that department. Importantly, in 2019, the new Cabinet Secretary integrated language about infants and young children into the department's strategic planning process. "Awareness in the department of babies and young children is heightened," said Martinez. However, it is still a work in progress. For example, there have been challenges in implementing IECMH-informed practice within child protective services, where sometimes the focus on safety competes with the IECMH relational and science-based approach that prioritizes baby-centered transitions. This is front and center as the state is implementing the Family First Prevention Services Act. With influence from the Tulane model for Infant Mental Health Teams. the state has been providing clinical services to



Babies have problems and if we do not deal with those problems now, they will be bigger later. Everyone knows this, but they don't always understand what to do. We are working to change that." – Soledad Pilar Martinez, Infant/Early

Childhood Program Director of Children's Behavioral Health Division, Children, Youth and Families Department



babies in foster care. Because these infants have experienced many traumatic events, the CYFD Infant and Early Childhood Section has provided the trauma-informed, evidence-based clinical protocol of Child Parent Psychotherapy (CPP).

Leaders in the state realize that workforce development is essential in order for IECMH practice to reach new heights. The close relationship between CYFD and Dr. Marcia Moriarta at the University of New Mexico has been key. "Soledad and I have been working together for 10 or 12 years. Representing the state government and flagship university, we continuously looked for ways to get the two bureaucracies to work together and provide the infrastructure for training. Over this time we moved into new positions where we could provide more visibility to the issues and have a greater impact," said Moriarta. Together, they have created opportunities aimed at enhancing clinical competence with the goal to have all those working with babies across systems are competent in IECMH, and CPP in particular. With funding from the state, the University of New Mexico offers Infant Mental Health Theory to Practice courses. Currently, there are 40 people from across 10 agencies and two indigenous communities participating in this training. World-renowned IECMH expert Dr. Alicia Lieberman is providing training for a fourth cohort in CPP. Dr. Lieberman also supports the New Mexico Infant Mental Health Community of Practice of approximately 75 clinicians who are engaged in trauma-informed clinical practice. The University also started a clinical psychology internship and a postdoctoral track, both focused on IECMH. This inside-outside government partnership between CYFD and the University of New Mexico has been key in advancing the workforce development efforts.

Financing

CYFD successfully achieved a \$1 million increase in funding for IECMH in the FY2020 state budget. These funds will be ongoing. Currently they are being used to support the work with foster parents and the children in their care, as well as to fund additional capacity building for licensed clinicians to attend the Infant Mental Health Theory to Practice course at the University of New Mexico. CYFD pays for nonproductive time, travel, and per diem for clinicians to attend the course. Conversations continue with Medicaid in the Human Services Department to address issues related to reimbursement for IECMH services.

next Steps

A 3-year project plan will continue to guide the work. The effort continues to have representatives from every department coming to the subcommittee meetings. In addition, leaders continue

I knew this was about the long term. We would not accomplish all of our goals in one or two administrations." – Soledad Pilar Martinez, Infant/Early

Childhood Program Director of Children's Behavioral Health Division, Children, Youth and Families Department to work with the New Mexico Human Services Department to incorporate the DC:0–5 into Medicaid policy by requiring the use of DC:0–5 when assessing young children under the age of 5.

important Lessons

- Build and maintain relationships with allies especially during times of challenge. Focus on the benevolence of the relationship and keep the goal of healthy baby outcomes in mind.
- Sometimes you need to slow the work down so all can see the connections and the role they can play in advancing IECMH.
- Make sure decisions are driven by data. And use that data to tell stories about the difference made when IECMH practices and policies are in place.

for more Information

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