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Infant and Early Childhood Mental Health (IECMH) Policy 101

December 3, 2020
Session 1 of 5

Introductions- IECMH Team



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Let's Take a Poll :
Q1: What is your Primary
Professional Role?



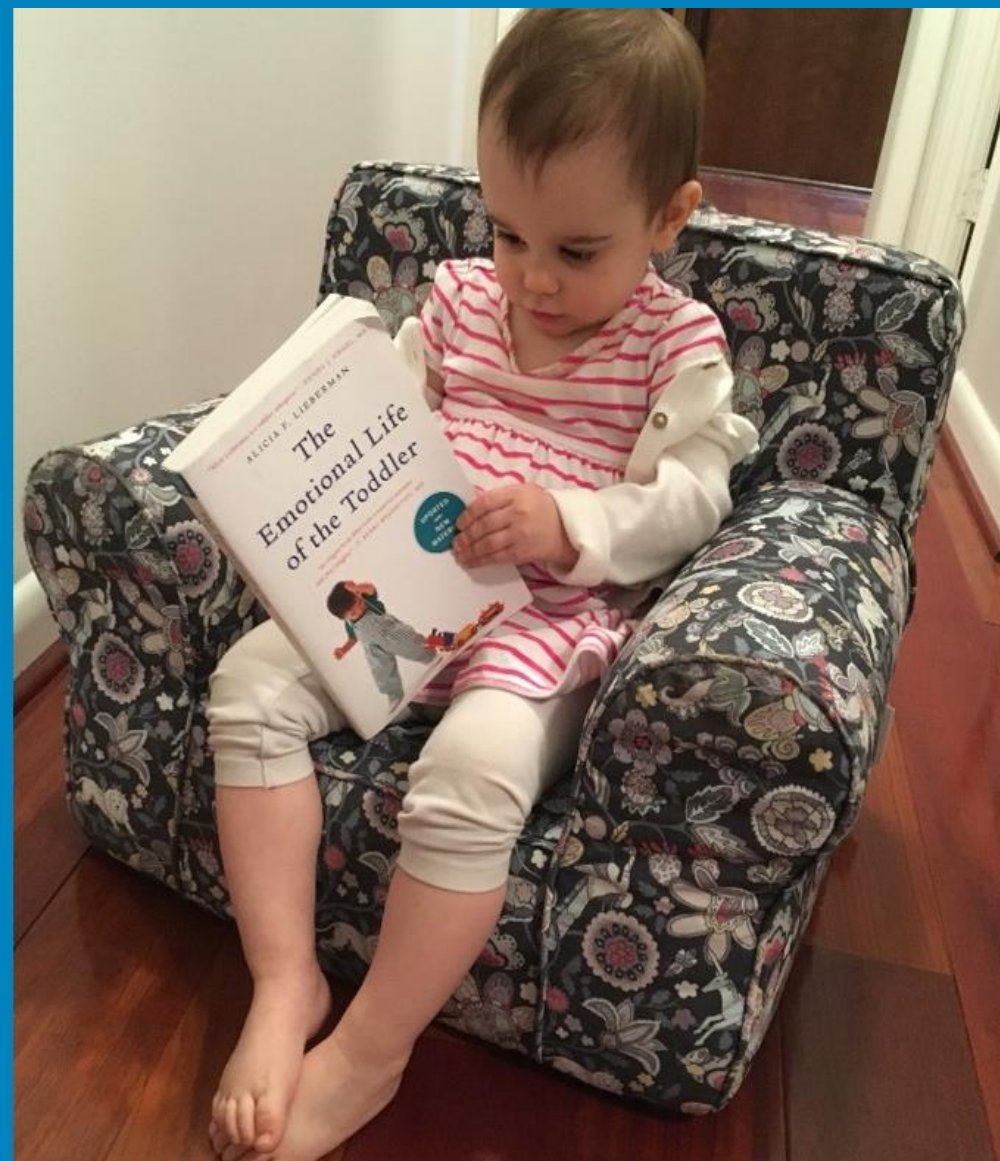
Today's Agenda: IECMH Policy 101

- What is IECMH?
- Why is IECMH important?
- How is IECMH developed
- Prevalence and the importance of addressing problems early
- The cost of early adversity and the benefits of IECMH investment
- What can policymakers do to advance IECMH?
 - Centering racial equity in policy and systems building
 - Themes of IECMH policymaking
- ZTT's Federal Perinatal and IECMH Policy Agenda for the coming year
- Ready for action?
- Webinars to come
- Resources to check out for more on IECMH policy

What is IECMH?



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The developing capacity of a child from birth to age five to:

- Experience, express and regulate **emotions**;
- Form close, secure interpersonal **relationships**; and
- **Explore** their environment and learn;

All in the context of family, community, and culture¹

Infant and Early Childhood Mental Health

The foundation of all future development



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Everyone who touches the life of a child can promote social and emotional well-being

Social and emotional development, or **infant and early childhood mental health**, is the developing capacity of a child from birth to 5 years old to...



Form close and secure **adult and peer relationships...**



Experience, manage and express a **full range of emotions...**



Explore the environment and learn...

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



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Continuum of IECMH Supports & Services



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Promotion



Prevention

Developmentally
Appropriate
Assessment and
Diagnosis



Treatment



Increasing intensity and specialization of services and supports



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Why is IECMH Important?



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- It is the **foundation** for all future development
- ALL experiences make an **impact**
- Infants and young children **can** and **do** experience mental health problems



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How is IECMH Developed?

- **All** early experiences shape the developing brain and can have lifelong impacts
- Brain development is dependent on relationships
- The brain forms **more than a million** neural connections **each second** in the first years of life²
- Baby's mental health is dependent on the mental health and well-being of their primary caregiver(s)



Prevalence and the Importance of Addressing Problems Early



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- Young children experience mental health issues at roughly the same rates as older children, ranging from 10-16%^{3,4,5}
- Young children in child care are expelled at a rate 13 times higher than all K-12 expulsions *combined*.⁶
 - Black preschoolers are more than 2 times as likely to be expelled than their white peers⁶

Intervening Early can Redirect the Trajectory!



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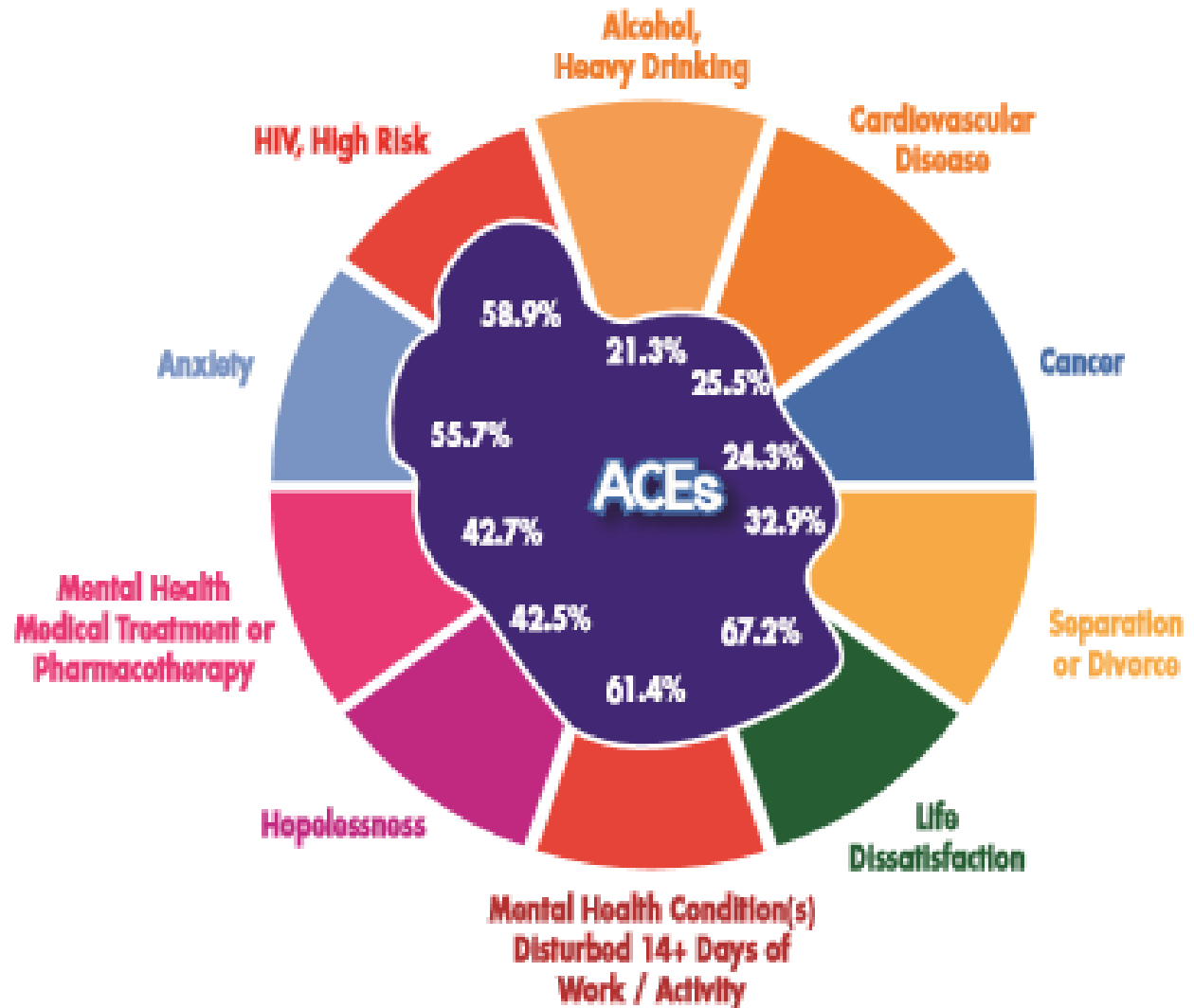


- Young children, **including infants**, can and do show early warning signs of mental health disorders
- Serious mental health problems can manifest without intervention
- Early identification and treatment can redirect the trajectory from "at risk" to the path for well-being and success



The Cost of Early Adversity

- The Institute of Medicine estimates that the ensuing indirect and direct costs of ACEs total **\$247 billion annually**⁷, impacting federal and state spending on health care, education, child welfare, criminal justice, child welfare, and economic productivity.⁸





The Benefits of IECMH Investment

- Parent-Child Interaction Therapy (PCIT) showed a **return of investment of \$3.64 per dollar**⁹
 - In families at risk of child maltreatment: reduced child maltreatment potential and lower rates of future referrals to child welfare systems¹⁰
- Child Parent Psychotherapy (CPP) has shown significant cost-associated impacts including:
 - Healthcare:**
 - In children, improvements in child cortisol patterns, PTSD symptoms, comorbid conditions¹¹⁻¹⁹
 - In caregivers, decline in maternal psychiatric symptoms¹¹⁻¹⁹
 - Education:**
 - Improvements in behavior problems, aggression, and cognitive performance¹¹⁻¹⁹
 - Child Welfare:**
 - In families involved with the child welfare system: reduced recidivism rates, reduced placement in foster care²⁰, and fewer placement changes for preschoolers already in foster care²¹



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What Can Policy Makers Do to Advance IECMH?

Centering Equity: Questions to consider in every recommendation, policy, or practice



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Diversity-Informed Tenets for Work with Infants, Children, and Families



THE TENETS

DIVERSITY-INFORMED TENETS FOR WORK
WITH INFANTS, CHILDREN & FAMILIES

Diversity-informed practice is a dynamic system of beliefs and values that strives for the highest levels of diversity, inclusion and equity.

Diversity-informed practice recognizes the historic and contemporary systems of oppression that shape interactions between individuals, organizations and systems of care. Diversity-informed practice seeks the highest possible standard of equity, inclusivity and justice in all spheres of practice: teaching and training, research and writing, public policy and advocacy and direct service.²²

Rooting in the Tenets:

- How is privilege and power shaping this?
- What assumptions are being made?
- Who is benefitting from this? Who is being further marginalized?
- What can we do to ensure that all families have access, equity, and justice?

Centering Racial Equity: Questions to consider in every recommendation, policy, or practice



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Who is included (or benefits) from this policy and who is excluded (or is harmed, intentionally or unintentionally) in this policy? And how?

What role is race playing in this policy?

Who benefits and who is harmed in this policy?

How is race connected to power in this policy?

How does this policy connect to the patterns of racism (historically and currently)?

How can this policy challenge or disrupt this pattern?



5 Key Themes of IECMH Policy and Systems Building



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1. Raise public awareness of IECMH



5 Key Themes of IECMH Policy and Systems Building



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1. Raise public awareness of IECMH
2. Establish cross-agency and stakeholder IECMH leadership

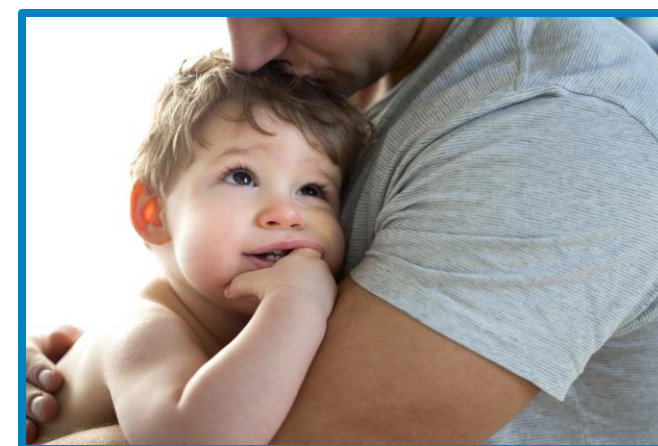


5 Key Themes of IECMH Policy and Systems Building



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1. Raise public awareness of IECMH
2. Establish cross-agency and stakeholder IECMH leadership
3. Develop IECMH professional capacity and competence for all who touch the lives of infants, young children, and their families



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2. Establish cross-agency and stakeholder IECMH leadership
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4. Invest in promotion and prevention through relationship-based strategies embedded in early childhood settings



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4. Invest in promotion and prevention through relationship-based strategies embedded in early childhood settings
5. Ensure adequate funding from an array of sources for high-quality services



A Look at ZTT's Perinatal and IECMH Federal Policy Agenda



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- **Increase the size, diversity, and quality of the clinical workforce**
 - Establish the IECMH Clinical Leadership Program
 - Loan repayment for mental health professionals
- **Expand data and research capacity**
 - Increase national data collection
 - Fund the National Institute of Mental Health to support research
- **Expand systems-building capacity and increase multigenerational access to high-quality services**
 - Extend Medicaid coverage to 12 months postpartum and to all children birth to age 3
 - Fund CDC Learn the Signs, Act Early Program's expansion
 - Pursue CMS action on IECMH service delivery including preventive behavioral health
 - Increase funding for grant programs that support perinatal and IECMH



Ready for Action?

- Determine who in your state has an interest in IECMH?
 - Association for Infant Mental Health?
 - State director/coordinator of IECMH? For perinatal mental health?
 - Advocacy organizations?
 - University-based centers or training programs?
 - State government council, advisory group, working group?
- Build relationships with leaders in Medicaid, Mental/Behavioral Health, Title V, and other invested divisions.
- Ask questions about what exists for young children in your state. Ask how resources are used to support infants and toddlers with mental health needs. Learn more about your federal funding streams, including:
 - CCDF
 - MHBG
 - Title V

Do Policies in Your State Effectively Support IECMH?



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Expanding IECMH Supports and Services: A Planning Tool for States and Communities can help you:

- Inform and organize cross-system planning efforts
- Inventory existing resources, policies and programs
- Identify gaps and missing linkages
- Align policy with best practice

Explores 6 areas:

- Effective messaging that builds public will
- Comprehensive system-wide planning and infrastructure
- Strong workforce capacity and professional development
- Embedding IECMH across child-serving systems
- Access to a robust continuum of supports and services
- Properly financed system



IECMH Resources



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- [How to Talk About IECMH Infographic](#)
- [State of Babies Yearbook](#)
- [Diversity-Informed Tenets for Work with Infants, Children, and Families](#)
- [EPIC – Empowered Parents in Community](#)
- [GARE: The Local and Regional Government Alliance on Race and Equity](#)
- [The Racial Equity Institute](#)
- [We Are: Working to Extend Anti-Racist Education](#)
- [Exploring State Strategies for Financing Infant and Early Childhood Mental Health Assessment, Diagnosis, and Treatment](#)
- [Infant and Early Childhood Mental Health Policy Series](#)
- [Expanding Infant and Early Childhood Mental Health Supports and Services: A Planning Tool for States and Communities](#)
- [Planting Seeds in Fertile Ground: Actions Every Policymaker Should Take to Advance Infant and Early Childhood Mental Health](#)
- [Building Back Better: ZTT's Transition Plan](#)
- [Join Think Babies!](#)



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Let's Take A Poll
Q2: What new resources
from ZERO TO THREE and our
partners would be most useful
to you?
(Limit 3)



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Webinars To Come:

Session 2: February 4 - State Stories of IECMH Policy Innovation

- Raising Public Awareness of IECMH
- Establish Cross-Agency and Stakeholder IECMH Leadership
- Develop IECMH Professional Capacity and Competence for All Who Touch the Lives of Infants, Young Children, and Their Families

Session 3: March 25 – State Stories of IECMH Policy Innovation

- Invest in Promotion and Prevention Through MH
- Ensure an Array of Funding including Medicaid for IECMH Services

Session 4: Mid-April – IECMH Advocacy

Session 5: Mid-May - Opportunity for Questions and Reflective Dialogue





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Many THANKS!!!





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References



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- ¹Zero To Three. (2001). *Definition of infant mental health*. Washington, DC: Zero to Three Infant Mental Health Steering Committee.
- ²Center on the Developing Child. (2009). Five numbers to remember about early childhood development (Brief). Retrieved from www.developingchild.harvard.edu
- ³Angold, A., & Egger, H. L. (2007). Preschool psychopathology: Lessons for the lifespan. *Journal of Child Psychology and Psychiatry, and Allied Disciplines*, 48(10), 961–966. <https://doi.org/10.1111/j.1469-7610.2007.01832.x>
- ⁴Costello, E. J., Mustillo, S., Erkanli, A., Keeler, G., & Angold, A. (2003). Prevalence and development of psychiatric disorders in childhood and adolescence. *Archives of General Psychiatry*, 60(8), 837–844. <https://doi.org/10.1001/archpsyc.60.8.837>
- ⁵Egger, H.L., Erkanli, A., Keeler, G., Potts, E., Walter, B.K., & Angold, A. (2006). Test-retest reliability of the Preschool Age Psychiatric Assessment (PAPA). *Journal of the American Academy of Child and Adolescent Psychiatry*, 45(5), 538–549. <https://doi.org/10.1097/01.chi.0000205705.711>
- ⁶Gilliam, W. S. (2005). Prekindergarteners left behind: Expulsion rates in state prekindergarten systems. New Haven, CT: Yale University Child Study Center. <https://medicine.yale.edu/childstudy/zipler/publications/National%20Prek%20Study%20expulsion%2034774%20284%205379%20v1.pdf>
- ⁷American Academy of Child and Adolescent Psychiatry, American School Counselor Association, The Balanced Mind Foundation, Children and Adults with Attention-Deficit/Hyperactivity Disorder, Mental Health America, and National Alliance on Mental Illness. (2013). Improving Lives, Avoiding Tragedies (Fact Sheet). Retrieved from www.aacap.org/App_Themes/AACAP/docs/Advocacy/policy_resources/Children%27s_Mental_Health_Fact_Sheet_FINAL.pdf
- ⁸Planting seeds in fertile ground: Actions every policymaker should take to advance infant and early childhood mental health. Retrieved from www.zerotothree.org/resources/1221-planting-seeds-in-fertile-ground-steps-every-policy-maker-should-take-to-advance-infant-and-early-childhood-mental-health
- ⁹Aos, S., Lieb, R., Mayfield, J., Miller, M., & Pennucci, A. (2004). Benefits and costs of prevention and early intervention programs for youth: Technical appendix. Retrieved from www.wsipp.wa.gov/rofiles/04-07-3901a.pdf
- ¹⁰Thomas, R., & Zimmer-Gembeck, M. J. (2012). Parent-child interaction therapy: An evidence-based treatment for child maltreatment. *Child Maltreatment*, 17(3), 253–266. <https://doi.org/10.1177/1077559512459555>
- ¹¹Cicchetti, D., Rogosch, F. A., & Toth, S. L. (2000). The efficacy of toddler-parent psychotherapy for fostering cognitive development in offspring of depressed mothers. *Journal of Abnormal Child Psychology*, 28(2), 135–148. <https://doi.org/10.1023/a:1005118713814>
- ¹²Cicchetti, D., Rogosch, F. A., & Toth, S. L. (2006). Fostering secure attachment in infant in maltreating families through preventive interventions. *Development and Psychopathology*, 18(3), 623–649. <https://doi.org/10.1017/s0954579406060329>
- ¹³Cicchetti, D., Toth, S. L., & Rogosch, F. A. (1999). The efficacy of toddler-parent psychotherapy to increase attachment security in offspring of depressed mothers. *Attachment and Human Development*, 1(1), 34–66. <https://doi.org/10.1080/14616739900134021>
- ¹⁴Ghosh Ippen, C., Harris, W. W., Van Horn, P., & Lieberman, A. F. (2011). Traumatic and stressful events in early childhood: Can treatment help those at highest risk? *Child Abuse and Neglect*, 35(7), 504–513. <https://doi.org/10.1016/j.chiabu.2011.03.009>
- ¹⁵Lieberman, A. F., Ghosh Ippen, C., & Van Horn, P. (2006). Child-parent psychotherapy: 6-month follow-up of a randomized controlled trial. *Journal of the American Academy of Child and Adolescent Psychiatry*, 45(8), 913-918. <https://doi.org/10.1097/01.chi.0000222784.03735.92>
- ¹⁶Lieberman, A. F., Weston, D., & Pawl, J. H. (1991). Preventive intervention and outcome with anxiously attached dyads. *Child Development*, 62(1), 199-209.
- ¹⁷Lieberman, A. F., Van Horn, P., & Ghosh Ippen, C. (2005). Toward evidence-based treatment: Child parent psychotherapy with preschoolers exposed to marital violence. *Journal of the American Academy of Child and Adolescent Psychiatry*, 44(12), 1241-1248. <https://doi.org/10.1097/01.chi.0000181047.597>
- ¹⁸Pickreign Stronach, E., Toth, S., Rogosch, F., & Cicchetti, D. (2013). Preventive interventions and sustained attachment security in maltreated children. *Development and Psychopathology*, 25(4, Pt. 1), 919-930. <https://doi.org/10.1017/s0954579413000278>
- ¹⁹Toth, S. L., Maughan, A., Manly, J. T., Spagnola, M., & Cicchetti, D. (2002). The relative efficacy of two interventions in altering maltreated preschool children's representational models: Implications for attachment theory. *Developmental Psychopathology*, 14(4), 877–908. <https://doi.org/10.1017/s095457940200411x>
- ²⁰Manly, J.T., Toth, S.L., & Cicchetti, D. (2016). Follow-up of randomized controlled trial of Child-Parent Psychotherapy and a Preschool Psychoeducational Intervention. Unpublished data.
- ²¹Habib, M., Schneider, A., Knoverek, A., Van Horn, P., Hastings, J., Kisiel, C., et al. (2008, November). *Partnerships that work: Applications of trauma-focused interventions for children and adolescents* [Poster presentation]. International Society for Traumatic Stress Studies, Chicago, IL.
- ²²Diversity Informed Tenets. (2020). Overview of the tenets. Retrieved from <https://diversityinformedtenets.org/the-tenets/overview>
- ²³EPIC. (2020). Empowered Parents in Community. <https://www.epic-nc.org>