Infant Mental Health in Primary Care Settings

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Title: Baltimore Linking Actions for Unmet Needs in Children's Health (B-LAUNCH)

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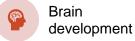
At the time of this presentation, Tom Coderre served as Acting Assistant Secretary for Mental Health and Substance Use at the Substance Abuse and Mental Health Services Administration (SAMHSA). The opinions expressed herein are the views of the speakers and do not reflect the official position of the Department of Health and Human Services (DHHS), or SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this presentation is intended or should be inferred.

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Infant and Early Mental Health Competencies

Foundation:















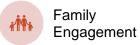


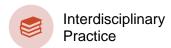




Promotion:







Prevention:



Supporting Developmental Vulnerability



Understanding Developmental Profiles



Trauma-Informed Practice



Creating
Pathways to
Services and
Supports

Early Intervention:



Theoretical Application



Learning with the Child and Family



Partnering with Parents/Caregive rs and Children



Formulation and Service Planning

Treatment:



Assessment, Formulation, and Diagnosis



Therapeutic Approaches



Planning

Module 1

Overview of Infant and Early Childhood Mental Health in Primary Care Settings

Today's Objectives

Define Infant and Early Childhood Mental Health (IECMH)

2 Understand the prevalence rates and outcomes of untreated early childhood mental health disorders

Describe medical and mental health providers' role in IECMH within a pediatric setting

Identify strategies to integrate mental health into busy pediatric workflow

Competencies Covered in this Module

- Child Development
- Recognizing Evidence-informed practices for Screening and Monitoring Development
- Family Centered Approach

Definition of Infant and Early Childhood Mental Health

Defining Early Childhood Mental Health Concerns

- Child abuse and neglect
- Divorce
- Domestic Violence
- Family mental health issues
- Natural disasters
- School crises
- Military deployment
- Grief and loss

- Behavioral
- Neurodevelopmental
- Psychiatric
- Somatic
- Psychological
- Emotional
- Social
- Impact of fetal substance exposure

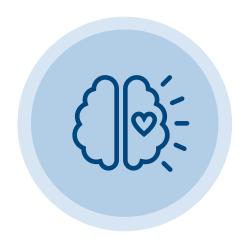
The Importance of Children's Mental Health





Grow Well & Love Well

Early childhood mental health is defined as the capacity to "grow well and love well."



Emotions



Relationships



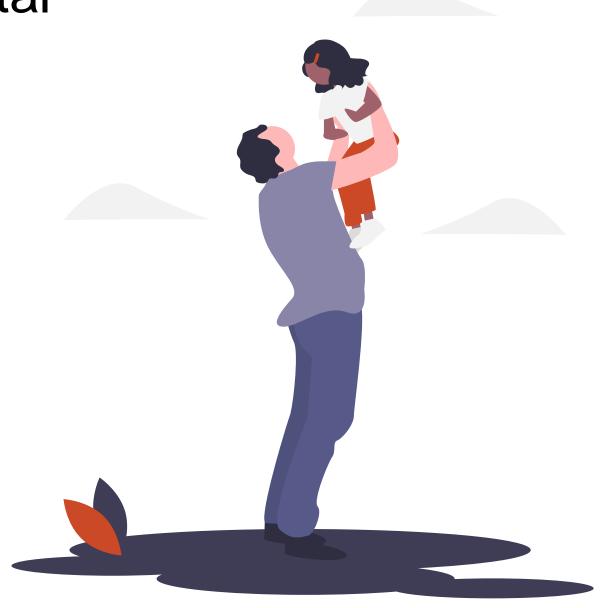
Culturally expected development

Prevalence of Early Childhood Mental Health Concerns

Early Childhood Mental Health Concerns

17%

of all children experience a mental health disorder in early childhood.



7%Emotional and motor regulation difficulties

25% Feeding problems

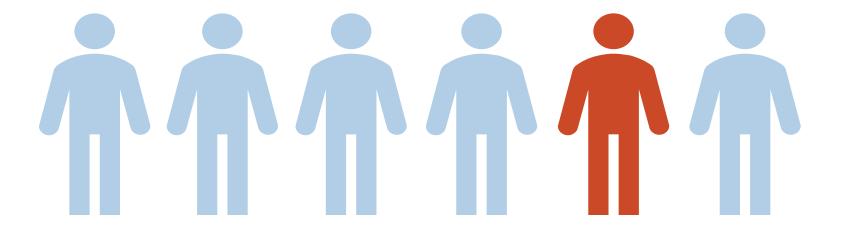
1%
Reactive attachment disorder

10-20% Anxiety disorder

2%
Depression

1 in 6 children

have a developmental delay or disability



Course of Mental Illness

- Disruptive behavior disorders (including ADHD and ODD), are among the most diagnosed and stable disorders in children.
- Symptoms evident as early as 1 to 3 years of age. Often continue into later childhood and adolescence
- Symptoms were related to:
 - Disruptions to family life/activities
 - Parent-reported worry about behaviors
- Higher risk for children with family history of psychopathology, exposure to childhood adversity, and low SES



<25%

of young children identified with behavioral problems receive treatment





Changes in Children's Health in USA

- Reduction of serious infections and disease
- Increases in treatment and recovery rates for acute illnesses
- Increases in metabolic and mental health conditions

Early Intervention Opportunities in Primary Care

1000 Days

270 Days during pregnancy

+

365 days Year 1

4

365 days Year

=

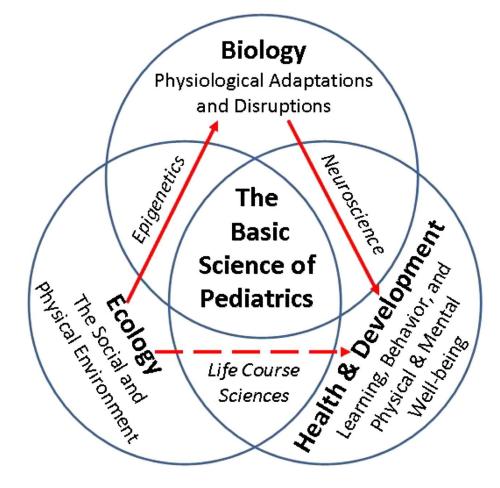
1,000 Days of Opportunity



Primary Care Perspective

 Infancy is an optimal time to prevent psychosocial problems

 Foundation for children's mental health starts in infancy



Garner, A. S., Shonkoff, J. P., Siegel, B. S., Dobbins, M. I., Earls, M. F., McGuinn, L., ... & Wood, D. L. (2012).

Pediatrics as a Frontline Provider

- 25% of the 150 million child visits per year for primary health care have a psychological problem associated with the presenting problem
- 20% of such visits are prompted by mental health concerns



Early Detection



We Know What Works

Preventive measures



Tailored interventions



Sensitive Periods of Development

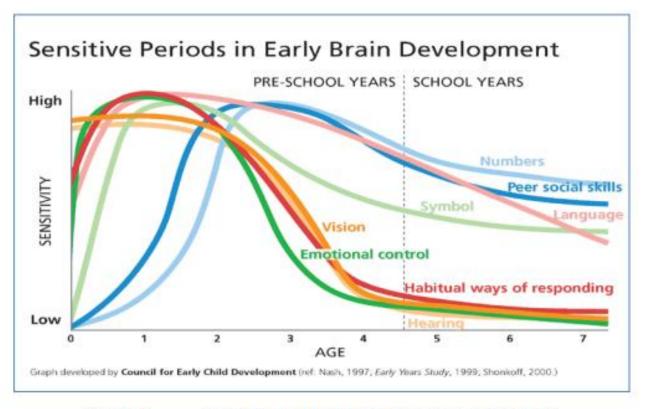


Figure 1 Sensitive periods in early brain development

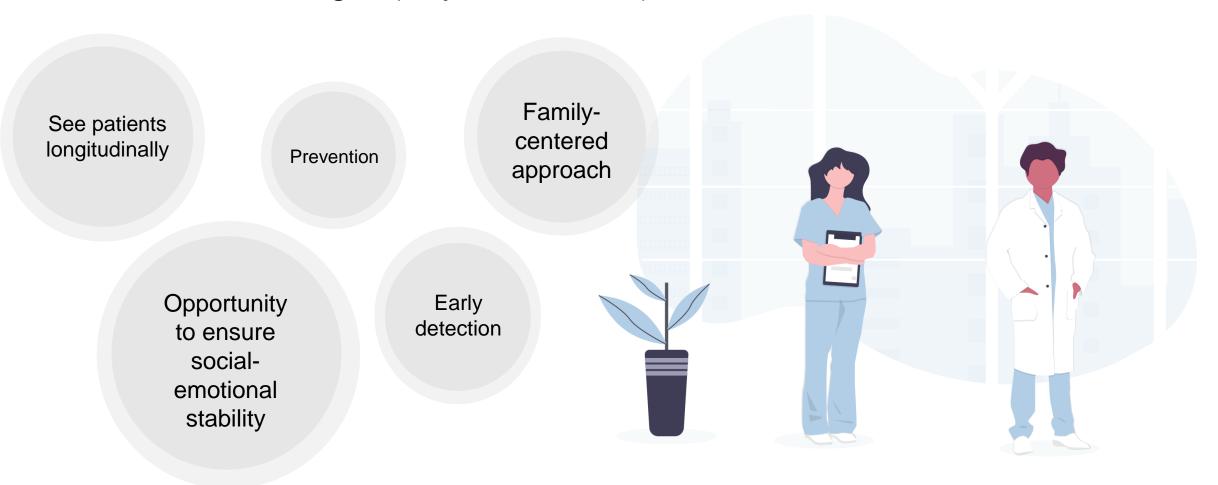
Brain architecture is developed in a bottom-up sequential manner, and is especially sensitive to environments and experiences in the early years (Council for Early Child Development, 2010).

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Role of Primary Care

Role of Primary Care

"Pediatric Advantage" (Foy et al., 2019)



Role of Primary Care

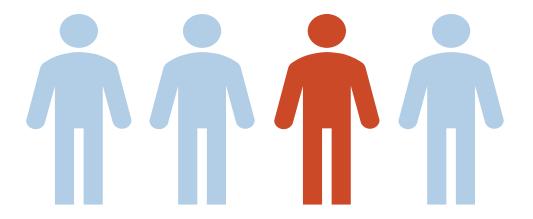
- Mental health needs are high among children; unmet need is especially high among children under 6 years (94%) (Kataoka, Zhang, & Wells, 2002)
- Pediatricians are often the first professional to whom parents express concern regarding social-emotional and behavioral problems (Ellingson, Briggs-Gowan, Carter, & Horwitz, 2004)
- Pediatricians play a role in addressing chronic stress and adverse early childhood experiences (ACEs)





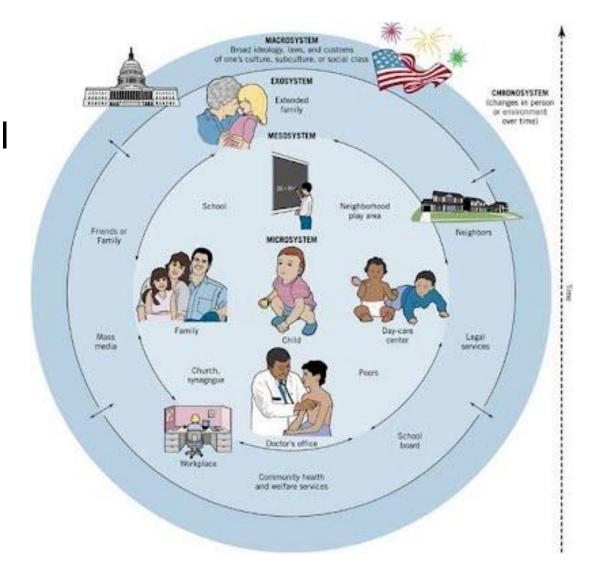
Only 1 in 4 children

with a mental health condition, including developmental delays and disability, is identified by the primary care provider



Pediatrics Essential Role in Detection

In fact, the best predictor of a PCP identifying a child's mental health problem is whether parents draw the PCPs attention to the issues rather than any PCP-initiated procedure





Barriers

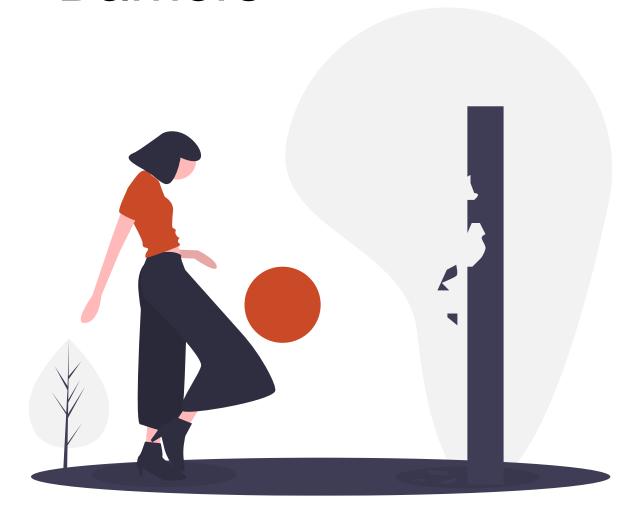


Training/Competence

- 2013 national data indicates that:
 - 57% of pediatricians consistently treat ADHD
 - <25% treating any other disorder
- Providers reported this is due to inadequate training in treatment of Mental Health
- Lack of confidence in addressing mental health

Time Limitations

Barriers



- Parents rarely bring up mental health concerns during PCP visits
- Screeners are being completed in only about 1 out of 5 visits
- Close-ended questions from providers

Integrating Mental Health into Busy Pediatric Workflow

DEVELOPMENTAL SURVEILLANCE **OR MONITORING**

DEVELOPMENTAL SCREENING

Done by parents, teachers & health professionals

Both look for

developmental milestones

Important for tracking

signs of development

& identifying concerns

On-going process begins at birth

> Sample Tool: "Learn the Signs. Act Early." Milestones Checklist

Formal process recommended by the AAP at 9, 18, 24, or 30 months

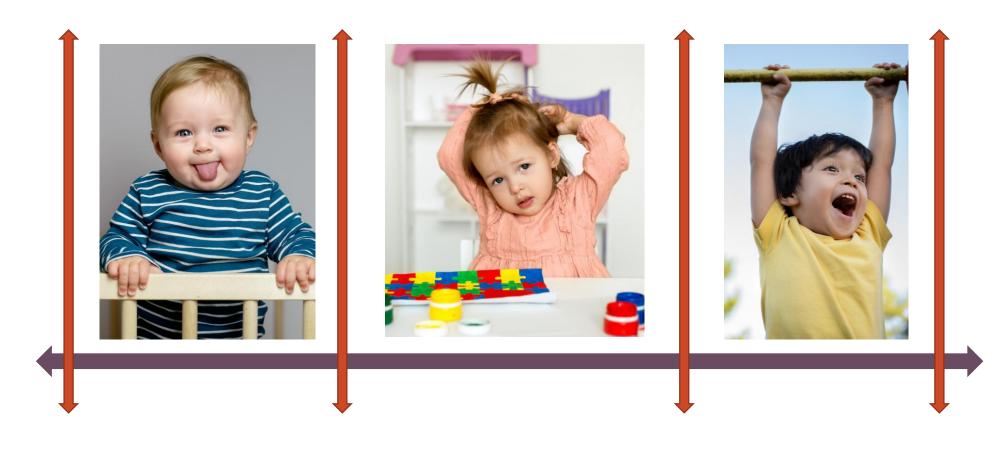
> Done by health professionals or by special training

Uses a valid screening tool

Sample Tool: Ages & Stages Questionniare

teachers with

Surveillance vs Screening



9 Months 18 Months 24 Months 30 Months

Approach to Surveillance



Ask about and attend to parent concerns



Observe parentchild interactions



Record findings and plans



Maintain a developmental history



Identify risk and protective factors



Collaborate with other professionals

•"What changes have you seen in your child's development since our last visit?"

 Ask about age-specific skills in the various domains of development

Developmental Screening

- Algorithm for screening at 9, 18 and 30 months (24 months if expected difficulty with 30 month visit attendance)
- Recommend developmental surveillance at every well child visit



Why Screen Development

- Screening is effective
- Mental illness and developmental delays may lead to multiple negative outcomes
- Meets criteria for US Preventive Services Task Force:
 - Common,
 - · Significant morbidity,
 - Effective screening and treatments



The Case for Behavioral and Emotional Screening: Evidence of Efficacy

- Prospective cohort analysis of ASQ-SE completed on 3169 children 6-36 months
- 711 (22.4%) scored above risk cut off
- 170 were re-screened and those who had intervention from a psychologist had significant (p=0.01) improvement in ASQ-SE scores than did peers who declined intervention

The Case for Routine Behavioral and Emotional Screening

Estimates report that

1 in 8 children

with identified mental health problems receive treatment



Fewer than 50%

of those with clinically significant behavioral and emotional problems are detected Clinical ability to identify B/E problems in primary care setting by judgment alone range from 14% to 54% sensitivity





Clinicians are **less likely** to identify problems in **minority or non-English speaking** children

Developmental Screeners

- What are practices using?
 - *Ages and Stages
 Questionnaires ASQ
 - *Parents' Evaluation of Developmental Status PEDS
 - Preschool Developmental Questionnaire (PDQ)
 - Bayley Infant Neurodevelopmental Screener (BINS)
 - The Survey of Well-Being for Young Children (SWYC)







Behavioral and Emotional Screens

Tool	Age	Items	Completed by	Public
Baby Pediatric Syptom Checklist	2-17 mo	12	parent	٧
Preschool Pediatric Symptom Checklist	18-60 mo	18	parent	٧
Pediatric Symptom Checklist	4-17 y	17 or 35	Parent/youth	٧
Strengths and Difficulties Question	3-17 y	25	parent/teacher	٧
Survey of Wellbeing in Young Children		9	parent	٧
Bright Futures Questionnaire	0-21		parent	٧
Ages and Stages Social/Emotional	6-60 mo	19-33	parent	







Anticipatory Guidance

 Providers in pediatric settings anticipate emerging issues that a child and family may face and provide guidance

To be effective, anticipatory guidance must be:

Timely

Appropriate

Relevant

Parents Universal Worries

- Is my baby alright?
- Am I a good enough parent?

T. Berry Brazelton, M.D.



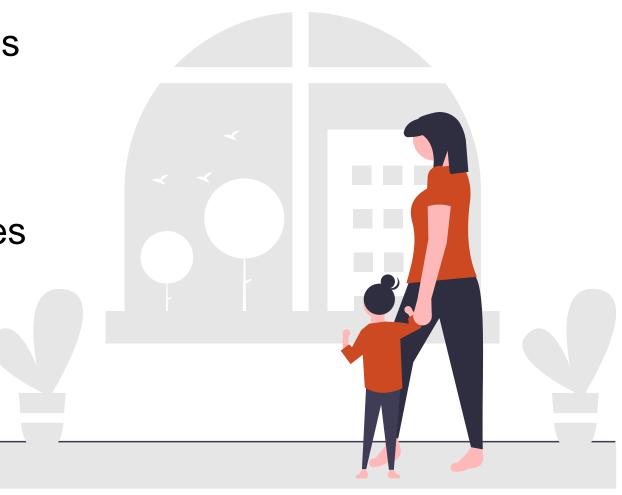
Seeing the Child and Family

- What ha it been like to be ____'s parent?
- Is there anything you would like to think about together?
- Are we getting to what is most on your mind today?

Early Intervention Works!

 Early detection and prevention is critical to improving outcomes

 Supporting healthy early childhood development produces substantial educational, social and financial benefits



Take Home Points

- Foundation for health and human capacity
- Long period to grow and program the brain for successful adaptation to the environment and culture
- Exceptional capacity to learn and critical period for relational, social and emotional development

"No health without mental health"

-World Health Organization

Early Childhood Resources

- "Learn the Signs. Act Early" www.cdc.gov/actearly
- This website provides information and free resources on developmental milestones, developmental monitoring, and acting early on concerns
- Provides information on when infant and toddler behaviors are developmentally appropriate and when they are not

Resources

- Bright Futures (aap.org)
- Birth to 5: Watch Me Thrive! | The Administration for Children and Families (hhs.gov)
- Developmental Surveillance Resources for Healthcare Providers | CDC
- CDC's Developmental Milestones | CDC
- Watch Me! Celebrating Milestones and Sharing Concerns |
 CDC

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