

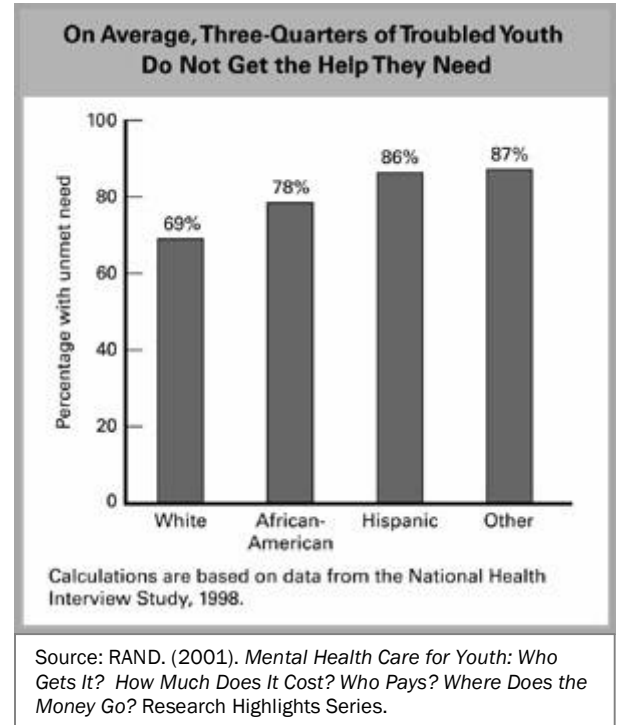


What Docs Should Know About... Infant Mental Health

www.DocsForTots.org

Enhanced promotion of positive mental health early in children's lives can foster healthy development and prevent later mental health problems.

- Infant mental health is the healthy social and emotional development of a child from birth to age three. The field of infant mental health has three guiding components: promoting healthy social and emotional development, preventing mental health problems, and treating mental health problems in infants in the context of their families.
- Infant mental health is crucial because patterns of social-emotional functioning that begin in infancy impact children's school readiness and achievement and continue throughout life.
- The U.S. Surgeon General notes that 1 in 10 children under 18 suffer from mental health issues significant enough to cause some level of impairment;¹ however, fewer than 20 percent of these children receive treatment. In addition, treating adolescents for mental health problems is much more costly than treating young children.²



Addressing infant mental health requires a focus on parent mental health and on the needs of the entire family.

- Positive early relationships and attachments to a primary caregiver are critical to the social and emotional development of young children.³
- Risk factors for infant mental health problems include repeated exposure to violence, persistent fear and stress, abuse and neglect, severe chronic maternal depression, biological factors such as prematurity and low birth weight, and conditions associated with prenatal substance abuse.⁴
- Programs that successfully promote mental health in very young children focus on parent mental health and on the needs of the entire family. Findings from the evaluation of Project RISE (Raising Infants in Secure Environments), a Starting Early Starting Small (SESS) initiative that provides intensive case management and family support, indicate that study participation was associated with more positive interactions between mothers and infants, as well as with decreased behavior problems in preschool children and increases in language skills.⁵

¹ Department of Health and Human Services. (2000). Report of the Surgeon General's Conference on Children's Mental Health: A National Action Agenda. <http://www.hhs.gov/surgeongeneral/topics/cmh/childreport.htm>.

² RAND. (2001). *Mental Health Care for Youth: Who Gets It? How Much Does It Cost? Who Pays? Where Does the Money Go?* Research Highlights Series. http://www.rand.org/pubs/research_briefs/RB4541/index1.html.

³ Shonkoff, J., and Phillips, D. (Eds.). (2001). *From neurons to neighborhoods: The science of early childhood development*. Washington, DC: National Academy Press.

⁴ Osofsky, J. D. (2004). Statement of Dr. Joy D. Osofsky before the subcommittee on substance abuse and mental health services, committee on health, education, labor and pensions. April 28, 2004. Zero To Three Policy Center, <http://www.zerotothree.org/policy/pdf/imhtestimony.pdf>.

⁵ Rosman, E., Perry, D.F., and Kaufmann, R. (2003). *Promoting healthy social-emotional and behavioral outcomes to young children in urban environments: Critical issues and successful strategies*. Washington, D.C.: Georgetown University Center for Child and Human Development.

Infant mental health problems often go undetected, and many of the existing child service programs that support at-risk children and families do not have an infant mental health component.

- It is important that professionals working with young children become well-versed with early risk factors for infant mental health problems and informed about available screenings and interventions, as early identification is critical in preventing and treating mental health problems in young children.
 - Early Head Start and Part C Early Intervention have components aimed at infant mental health, but only some children are eligible for those programs. Other services for young children often lack coordinated infant mental health components, including child care, child welfare services, and pediatric and family health care.
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Docs can advocate for increased infant mental health services and raise awareness concerning mental health issues for young children.

- Docs can support parents by discussing healthy parenting and child development, and ensuring that families are receiving services they may be eligible for such as Part C, Head Start, child care subsidies, TANF (welfare), and WIC.
- Docs can collaborate with existing early childhood providers and programs to coordinate infant mental health services for at-risk families in their community.
- Docs can advocate for expanding infant mental health services, and for training and conducting professional development programs relating to assessments and interventions for early childhood professionals. Contact Docs For Tots (dft@DocsForTots.org) for help in advocating for infant mental health.

Additional Resources

- Docs For Tots, What Docs Should Know About...Part C, Early Head Start, Quality Child care, www.DocsForTots.org
- SAMHSA's National Mental Health Information Center, Child and Adolescent Mental Health, <http://www.mentalhealth.samhsa.gov/child/childhealth.asp>.
- ZERO TO THREE, Infant Mental Health Resource Center, <http://www.zerotothree.org/imh/>
- Florida State University Center for Prevention & Early Intervention Policy, <http://www.fsu.edu/~cpeip/>

