

# The Basics of Infant and Early Childhood Mental Health: A Briefing Paper

Early experiences matter—a lot. In the first years of life, more than 1 million new neural connections are formed every second. Babies' earliest relationships and experiences shape the architecture of their brain, creating a foundation on which future development and learning unfolds. Babies who engage with responsive, consistent, nurturing caregivers and who are living in safe and economically secure environments are more likely to have strong emotional health—also referred to as infant and early childhood mental health (IECMH; see the box on p. 2 for definitions of this and other key terms). As they mature, their emotional health supports growth and well-being in other essential areas including physical development and health, cognitive skills, language and literacy, social skills, and even their approach to learning and readiness for school. When emotional health is compromised, so too is development across these other areas, leaving children more susceptible to poor health, poor educational performance, and even criminal justice involvement over the course of their lives.<sup>2</sup> Promoting the emotional health of infants and young children should be underscored as an essential ingredient for a bright future for all infants and young children.





During the infant and toddler years, there are many opportunities to promote emotional health, to prevent emotional disturbances from taking root, and to treat mental health problems before they can manifest into more severe problems later in life. Policymakers need to support a continuum of services delivered by trained professionals with a financing mechanism that covers the cost of services. Investing early in supporting the mental health of infants and young children will yield benefits later and will allow states to forgo much more costly interventions that all too often result when mental health challenges go unaddressed.

This briefing paper will introduce IECMH, discuss why it is important, and provide policy recommendations.

# What Is Infant and Early Childhood Mental Health?

IECMH is the developing capacity of the 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; and explore the environment and learn—all in the context of family, community, and culture. Experts from a range of disciplines consider IECMH to be the foundation of healthy, lifelong development.

IECMH is also a term used to describe the full continuum of services and supports (i.e., promotion, prevention, and treatment) necessary to promote healthy development, prevent mental health problems, and treat mental health disorders.

## Why Is IECMH Important?

While positive early childhood experiences promote strong emotional health, negative experiences can adversely impact brain development, with serious lifelong consequences. When an infant or young child's emotional health deteriorates significantly, they can, and do, experience mental health problems. Approximately 9.5%–14.2% of children birth to 5 years old experience emotional, relational, or behavioral disturbance.<sup>3</sup> Young children who live in families dealing with parental loss, substance abuse, mental illness, or exposure to trauma are at heightened risk of developing IECMH disorders.<sup>4</sup> And the stressors of poverty can multiply these risks. If untreated, IECMH disorders can have detrimental effects on every aspect of a child's development (i.e., physical, cognitive, communication, sensory, emotional, social, and motor skills) and the child's ability to succeed in school and in life. In fact, young children who do not achieve early social and emotional milestones perform poorly in the early school years and are at higher risk for school problems and juvenile delinquency later in life. However, when mental health concerns are identified early, there are services that can redirect the course and place children who are at risk on a pathway for healthy development. Early and accurate identification of mental health disorders requires a developmentally specific diagnostic classification system such as  $DC:0-5^{TM}$ : Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood (DC:0-5). Research demonstrates that early prevention and treatment is more beneficial and cost-effective than attempting to treat emotional difficulties and their effects on learning and health after they become more serious. 6 For example, evidence-based child trauma treatments such as Parent-Child Interaction Therapy (PCIT) return \$3.64 per dollar of cost.7

Policymakers can and should take an active role in promoting the kinds of services and supports that prevent and, if necessary, treat mental health issues. Because of the early onset of emotional and behavioral disorders, the Institute of Medicine estimates that their ensuing indirect and direct costs total \$247 billion annually,8 impacting federal and state spending on health care, education, child welfare, criminal justice, child welfare, and economic productivity.9 A full continuum of services—from promotion to prevention to treatment—is needed to best support babies, young children, and the significant adults in their lives.

# **Recommendations for Policymakers**

While there is no single remedy to prevent or treat IECMH disorders, policymakers can use evidence-based strategies and explore promising approaches to improve outcomes for infants, young children, and their families. The following recommendations, examples of actions policymakers can take to improve and advance IECMH, first appeared in *Planting Seeds in* 

## **Policy Recommendations in Brief**

- 1. Establish cross-agency leadership for IECMH.
- 2. Ensure Medicaid payment for IECMH services.
- 3. Invest in prevention through mental health consultation.
- 4. Train the workforce on IECMH.
- 5. Raise public awareness of IECMH.

#### **Key Terms**

#### Infant and Early Childhood Mental Health:

Infant and early childhood mental health (IECMH) is the developing capacity of the 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; and explore the environment and learn—all in the context of family, community, and culture.

**Promotion:** Promotion of healthy emotional development focuses on supporting the well-being of all children. It might involve programs to educate parents and other caregivers about the role they play in creating responsive and nurturing environments for young children.

Prevention: Prevention approaches, such as IECMH consultation, can help identify and support children who are at risk of developing mental health problems. Child care settings, pediatric offices, home visiting programs, and other early childhood programs can provide screening and support aimed at addressing the situations that cause children to be at risk.

**Treatment:** Treatment focuses on specialized interventions for infants, toddlers, and families who are already exhibiting symptoms of mental health challenges. **Treatment** is provided by staff who have advanced training in IECMH



# Selected Behaviors That Warrant Concern Infants and Toddlers (Birth to 3 Years Old)<sup>10</sup>

- Chronic eating or sleeping difficulties
- Inconsolable "fussiness" or irritability
- Incessant crying with little ability to be consoled
- Extreme upset when left with another adult
- Inability to adapt to new situations
- Easily startled or alarmed by routine events
- Inability to establish relationships with other children or adults
- Excessive hitting, biting, and pushing of other children or very withdrawn behavior
- Flat affect (shows little to no emotion at all)

#### Preschoolers (3 to 5 Years Old)

- Engages in compulsive activities (e.g., play enacted in a specific order, hand washing, repeating words silently)
- Throws wild, despairing tantrums
- Withdrawn; shows little interest in social interaction
- Displays repeated aggressive or impulsive behavior
- Difficulty playing with others
- Little or no communication; lack of language
- Loss of earlier developmental achievements
- Anxious and fearful in most situations

Fertile Ground: Actions Every Policymaker Should Take to Advance Infant and Early Childhood Mental Health. For a more detailed discussion of these strategies, please visit www.zerotothree.org/resources/1221-planting-seeds-infertile-ground-steps-every-policymaker-should-take-to-advance-infant-and-early-childhood-mental-health

- Establish cross-agency leadership for IECMH. Improving IECMH outcomes requires leadership. To ensure coordination and accountability and to drive a statewide IECMH strategy, the state should designate an accountable person (or team) to develop IECMH policies, make programmatic and funding recommendations, manage implementation, and monitor the state's progress. It is helpful to have an identified IECMH lead person within each early childhood delivery system such as child care, home visiting, early intervention, child welfare, and health. Cross-agency collaboration is critical to integrate and prioritize IECMH policies across otherwise siloed state entities and funding streams.
- Ensure Medicaid payment for IECMH services.

  Nearly 50% of children under 6 years old receive health care coverage through Medicaid or CHIP.<sup>11</sup>

  States should leverage Medicaid payment to support IECMH prevention, assessment, diagnosis, and treatment services for children and their families. In many states, contracts with Medicaid Managed Care Organizations or accountable provider-led organizations can serve as a lever. The contracts with these providers can include specific promotion and prevention strategies to support emotional health.
- Invest in prevention through mental health consultation. An early childhood mental health consultation system involves a consultant with mental health expertise working collaboratively with programs, their staff, and families to improve their ability to prevent and identify mental health issues among children in their care. <sup>12</sup> Mental health consultation helps reduce problem behaviors in young children and, more broadly, promotes positive emotional development. <sup>13</sup>
- Train the workforce on IECMH. Embedding IECMH education and competency standards in mental health, social work, health care, and early childhood education professionals' training, coursework, and on-going professional development provide opportunities to build a workforce that understands IECMH and is prepared to identify situations that threaten children's healthy emotional development.

 Raise public awareness of IECMH. Developing public health campaigns, educational materials, and other efforts aimed both at parents of young children and at providers can help build public awareness of the importance of promoting emotional health and of preventing and treating IECMH disorders.

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## **Endnotes**

- 1 Center on the Developing Child. (2009). Five numbers to remember about early childhood development (Brief). Retrieved from www.developingchild.harvard.edu
- 2 ZERO TO THREE. (2016). Planting 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-policymaker-should-take-to-advance-infant-and-early-childhood-mental-health
- 2 Brauner, C. B., & Stephens, C. B. (2006). Estimating the prevalence of early childhood serious emotional/behavioral disorders: Challenges and recommendations. *Public Health Reports*, 121(3), 303–310. Available from <a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1525276/">www.ncbi.nlm.nih.gov/pmc/articles/PMC1525276/</a>
- 4 Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., ...Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) study. *American Journal of Preventive Medicine*, 14(4), 245–258.
- 5 Raver, C. (2002). Emotions matter: Making the case for the role of young children's emotional development for early school readiness. Social Policy Report of the Society for Research in Child Development, 16(1) 3–23.
- 6 National Scientific Council on the Developing Child. (2010). Persistent fear and anxiety can affect young children's learning and development, Working Paper No. 9. from <a href="http://developingchild.harvard.edu/resources/persistent-fear-and-anxiety-can-affect-young-childrens-learning-and-development">http://developingchild.harvard.edu/resources/persistent-fear-and-anxiety-can-affect-young-childrens-learning-and-development</a>
- 7 Aos, 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/rptfiles/04-07-3901a.pdf
- 8 American 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 <a href="https://www.aacap.org/App\_Themes/AACAP/docs/Advocacy/policy\_resources/Children%27s\_Mental\_Health\_Fact\_Sheet\_FINAL.pdf">https://www.aacap.org/App\_Themes/AACAP/docs/Advocacy/policy\_resources/Children%27s\_Mental\_Health\_Fact\_Sheet\_FINAL.pdf</a>
- 9 ZERO TO THREE. (2016). Planting 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-policymaker-should-take-to-advance-infant-and-early-childhood-mental-health
- 10 ZERO TO THREE. (2016). DC:0-5™: Diagnostic classification of mental health and developmental disorders of infancy and early childhood (DC:0-5). Washington, DC: Author.
- 11 Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., ...Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) study. American Journal of Preventive Medicine, 14(4), 245–258.
- 12 Cohen, E., and Kaufmann, R. Early Childhood Mental Health Consultation. DHHS Pub. No. CMHS-SVP0151. Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, 2005. Retrieved from <a href="http://store.samhsa.gov/shin/content/SVP05-0151/SVP05-0151.pdf">http://store.samhsa.gov/shin/content/SVP05-0151/SVP05-0151.pdf</a>
- 13 Cohen, E., and Kaufmann, R. Early Childhood Mental Health Consultation. DHHS Pub. No. CMHS-SVP0151. Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, 2005. Retrieved from <a href="http://store.samhsa.gov/shin/content/SVP05-0151.pdf">http://store.samhsa.gov/shin/content/SVP05-0151.pdf</a>