

The State of Infant and Early Childhood Mental Health in Indiana

Dr. Katherine Herron

June 2023



INDIANA INSTITUTE ON DISABILITY AND COMMUNITY
EARLY CHILDHOOD CENTER

WHO WE ARE

The Early Childhood Center is one of seven research centers and an Indiana University disability-focused library at the Indiana Institute on Disability and Community (IIDC).



OUR MISSION

The Early Childhood Center designs visionary solutions, grounded in research, together with programs serving young children and their families.

OUR VISION

The Early Childhood Center envisions a world where all early childhood programs:

- Prioritize inclusive services based on high standards and current research.
- Ensure that all young children and their families experience equitable access to the same learning and play environments as their peers so that they can develop socially, academically and become contributing members of their communities.
- Have administrators and practitioners who confidently embrace, facilitate, and support high quality inclusive services to ensure that all children and families can contribute to their communities to the maximum extent possible.

Acknowledgements

We wish to thank the Centers for Disease Control and Prevention, the Association of University Centers on Disability and Infancy Onward for their generous funding of this project.

We would also like to express our gratitude to L. Dalton Gibson for his services assembling the report.

Thank you to Dr. Walton (IU School of Social Work), Wendy Harrold, Executive Director of Data Strategy, DMHA and DCS for their willingness to share the CANS data.

Introduction

“The early years are viewed as a time of heightened neuroplasticity, punctuated by specific sensitive periods, which represent key developmental windows...As such, prevention or intervention efforts during those time periods are likely uniquely powerful windows of opportunity for correcting early deviations from mental well-being, potentially shifting mental health trajectories for life.” – Stephen Buka, Sc.D.¹⁷



The term infant/early childhood mental health (IECMH) can be confusing. When lay people contemplate mental health, they often focus on diagnoses and clinical services. While a small percentage (10-15%⁵) of children may benefit from a formal diagnosis and related services, infant/early childhood mental health for most children depends on strong, stable caregivers. These relationships allow young children to safely experience emotions and learn from the world around them. The data in this report is organized by **Zero to Three’s** definition of infant/ early childhood mental health, which 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.” ⁵

Why Infant and Early Childhood Mental Health Matters



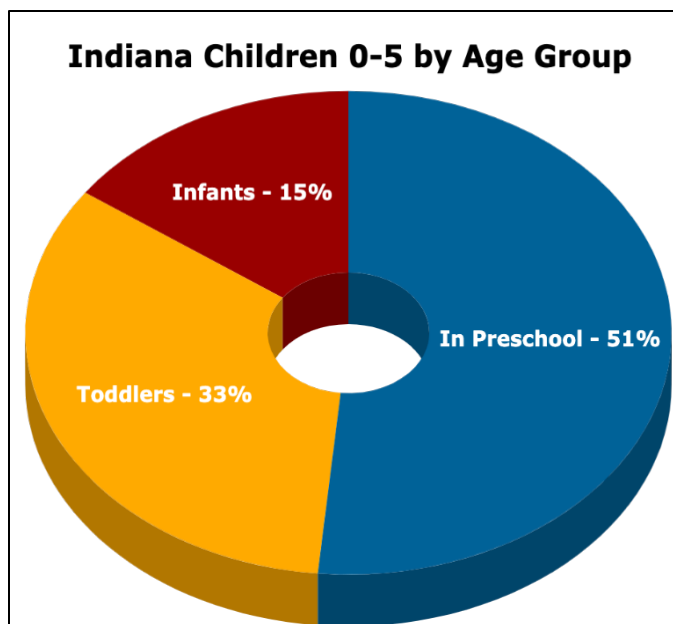
“Infant mental health is the foundation for development of healthy relationships and lifelong mental health. Infants are vulnerable to the negative impact of stress and trauma, and the effects can be long-lasting.” -

Samantha Meltzer-Brody, MD, MPH, Director of the UNC Perinatal Psychiatry Program.

Early childhood is a critical period for brain development and experiences during early childhood can shape a child’s mental, emotional, and social development throughout their lifetime. By promoting positive mental health outcomes in early childhood, we can prevent mental health problems later in life. Research has shown that early interventions and support for young children and their families can improve outcomes for children, reduce the risk of later mental health problems, and promote healthy development. By developing strong, integrated infant/early childhood mental health supports into existing systems, we can reduce the need for future healthcare and social service interventions.

To that end, the objective of this report is to compile data from a number of existing data sources (15 statewide needs assessments, databases, state data from national surveys) as well as data gathered by the investigator to emphasize the need for coordinated mental health supports in Indiana for both young children and their caregivers.

Indiana has over half a million children from birth through age five, which comprises 6.3% of the state's total population. Over 80,000 babies are born in Indiana each year.⁴ Many of these young children will meet social and emotional milestones without formal support. Some, however, will encounter obstacles along the way.



The data in this report is organized by the definition of infant/early childhood mental health. The developing capacity of the child from birth to 5 years old is to:



Form close and secure adult and peer relationships

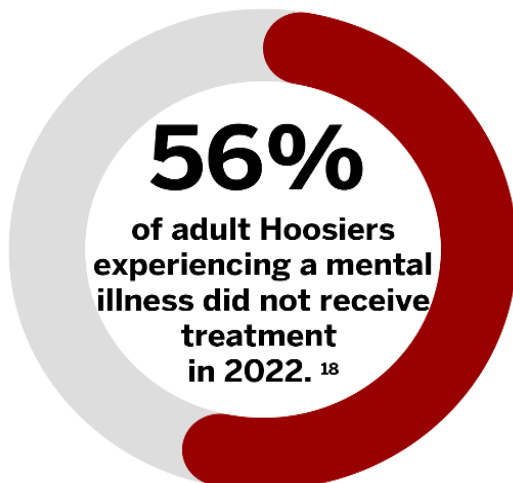
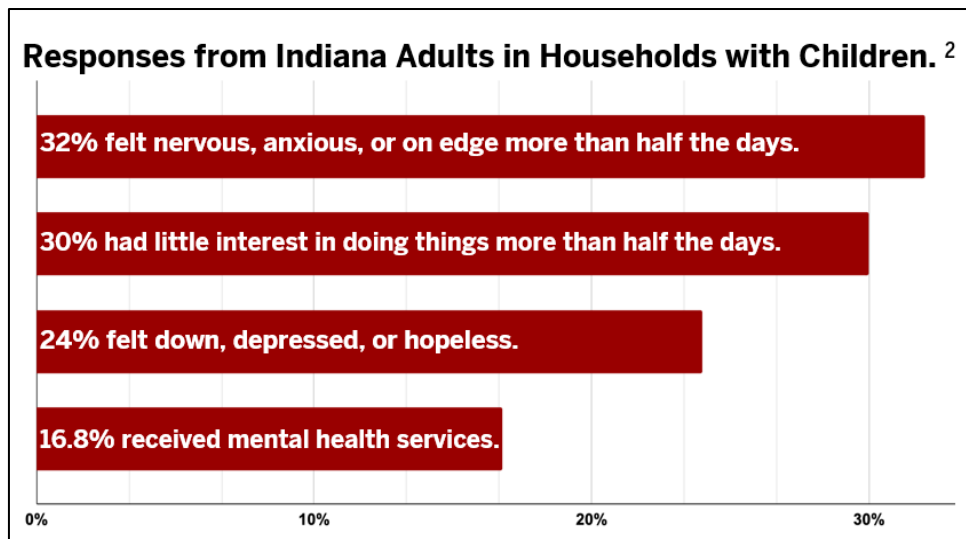
Experience, manage, and express a full range of emotions



Explore the environment and learn—
all in the context of family, community, and culture.⁵

Developing Capacity to Form Close and Secure Adult and Peer Relationships

The mental health of children depends in large part on the mental health of their caregivers. Indiana data demonstrates that a significant number of Hoosier adults with children are struggling with their own mental health issues.



Each year, it is reported that over 1.1 million Hoosier adults struggle with at least one mental health issue. During 2022, it was noted that 56% of these adults did not receive any form of mental health treatment. ¹⁸

Not only is untreated mental health costly, but it occurs more frequently among caregivers who are also managing the stress of poverty. Research indicates that in low-income households, over half of all infants are being raised by mothers who are struggling with some form of depression. ¹⁶

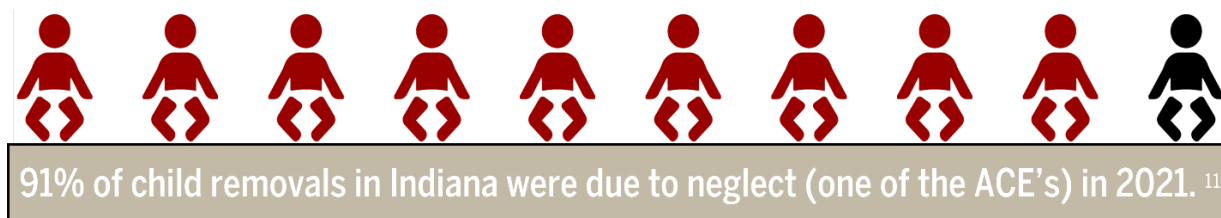


Untreated mental illnesses costs Indiana at least \$4.15 billion annually. ¹⁸



To develop the capacity to form close and secure adult and peer relationships, children need warm and responsive caregivers. Adult mental health struggles can be a barrier to these relationships, as can exposure to Adverse Childhood Experiences (ACE's).

According to the CDC, ACEs are associated with toxic stress and can have lasting, negative effects on health, well-being and as well as life opportunities. However, ACEs do not equal trauma. Many factors, including frequency, duration, intensity, and the presence of protective factors play a role in the impact of ACEs.



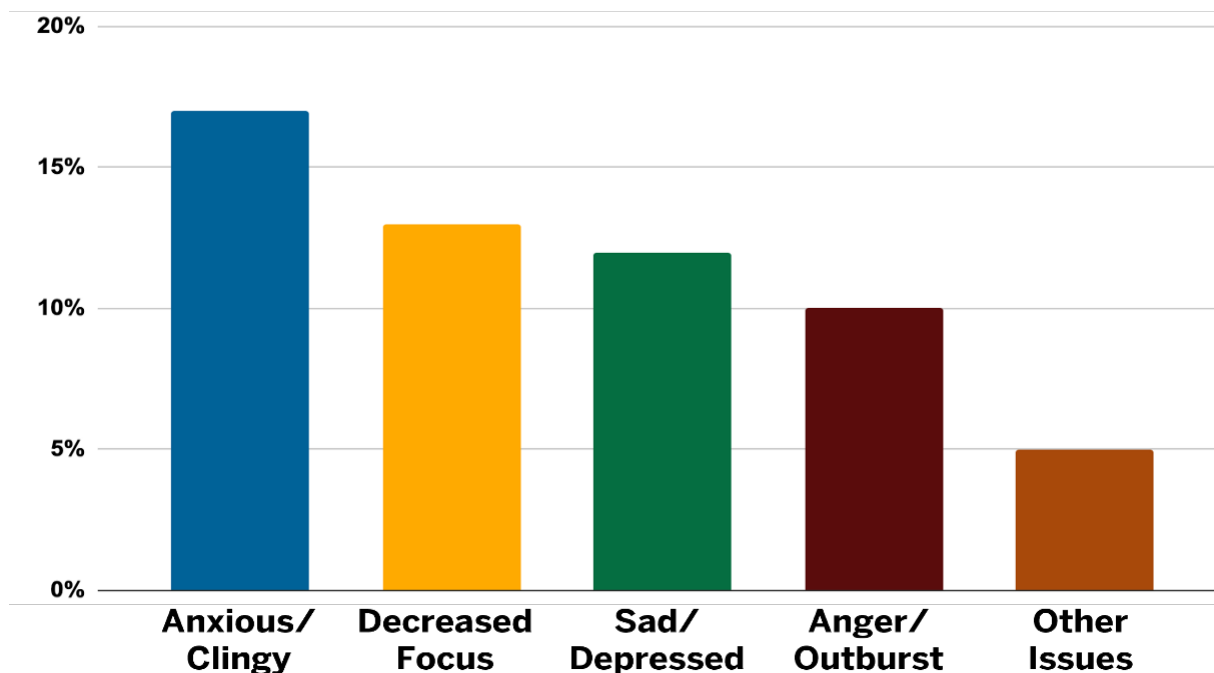
Children also need opportunities to connect with others beyond their primary caregivers. 40% of Indiana Parents report that their child does not live in a supportive neighborhood. This barrier to building community connections is higher for Black and Latinx families than for white families.

Experiencing, Managing, and Expressing a Full Range of Emotions

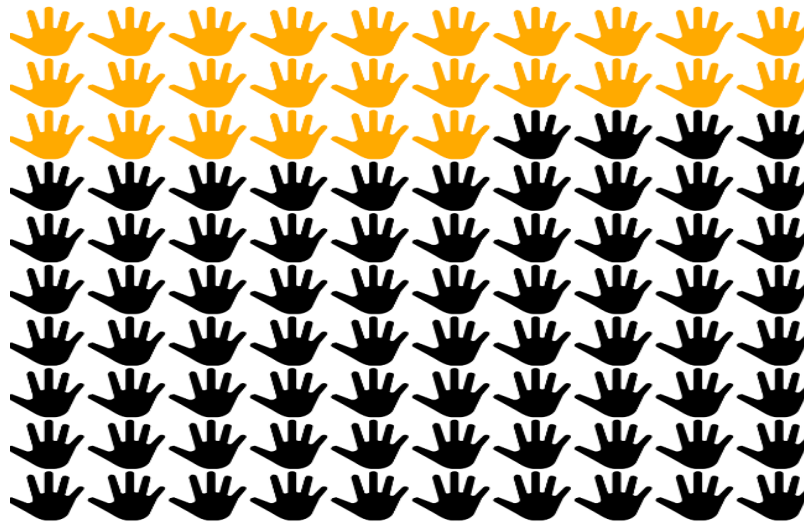
When young children have stable, safe relationships, they learn to experience, manage, and express a full range of emotions.

While we do not have Indiana specific data that directly addresses the extent to which caregivers are supporting young children to handle emotions within themselves or others, we do have data suggesting that young children are struggling with emotions:

Percent of Hoosier Parents/Guardians Identifying the Following Behavioral Concerns in Their Children. ²



26% of Indiana children aged 3-17 have one or more emotional, behavioral, or developmental conditions (compared to 22% nationally).⁶

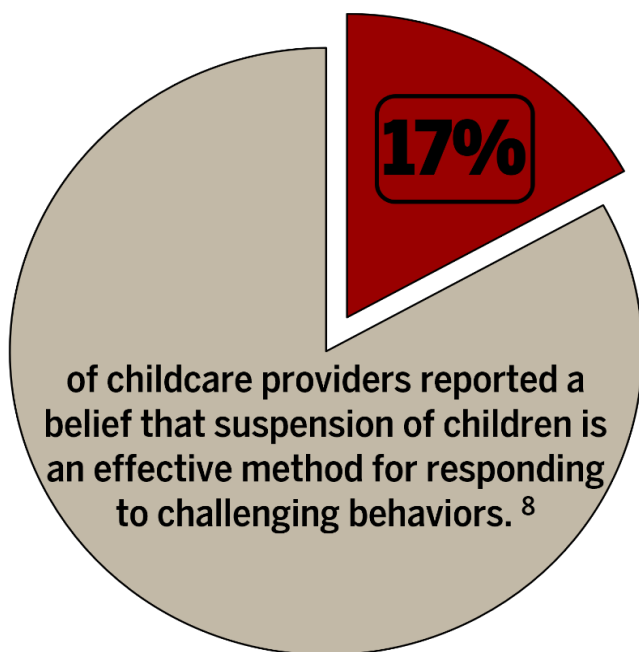
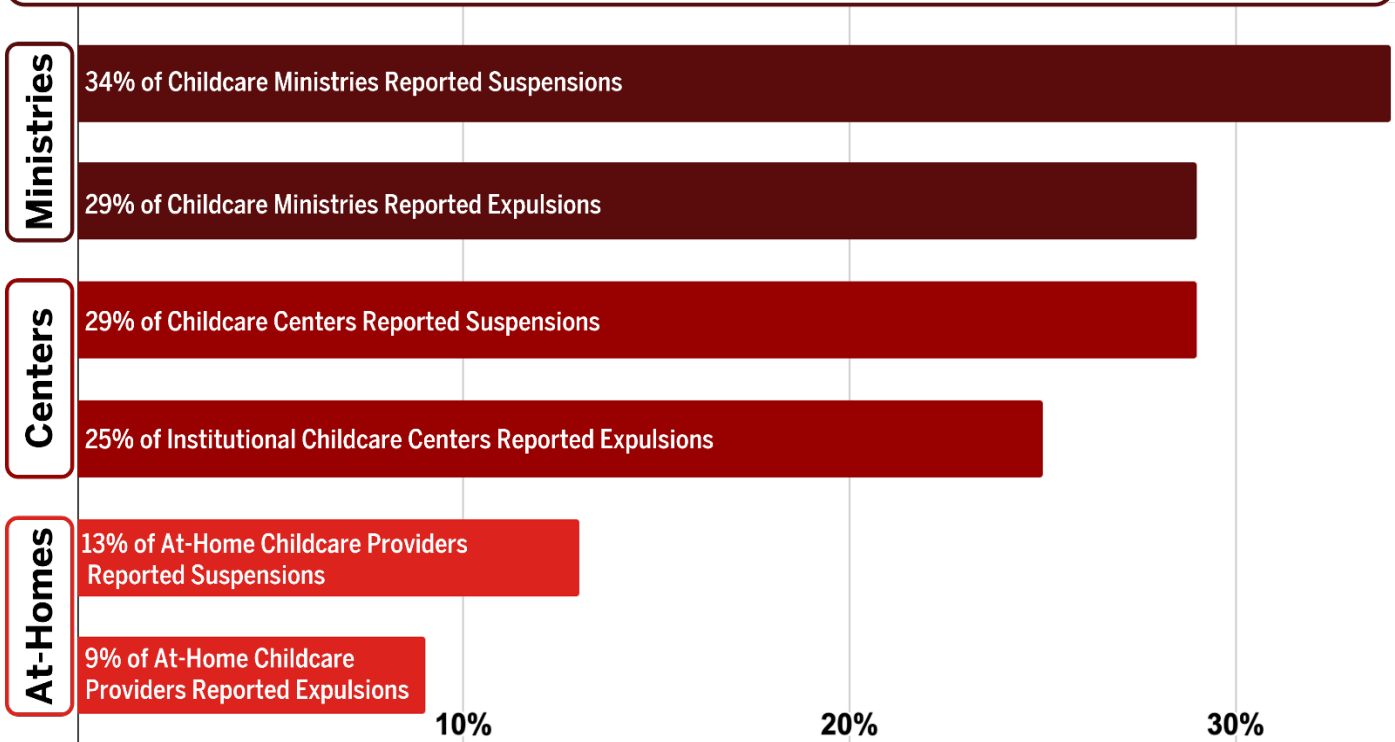


Additional data from SPARK Learning Lab further illuminates the situation. SPARK Learning Lab is an online portal developed specifically for Indiana educators. The data provided on the next page is derived from a 2022 SPARK Professional Development needs assessment, which gathered responses from diverse childcare settings across Indiana. It offers invaluable insights into the current practices and beliefs related to child discipline in these settings.



24% of all referrals from SPARK between 10/1/20 to 12/30/22 are for behavioral issues or concerns.⁷

Percentage of SPARKS Childcare Provider Respondents Reporting Child Suspension or Expulsion in the Last 12 Months Sorted by Provider Type ¹⁹

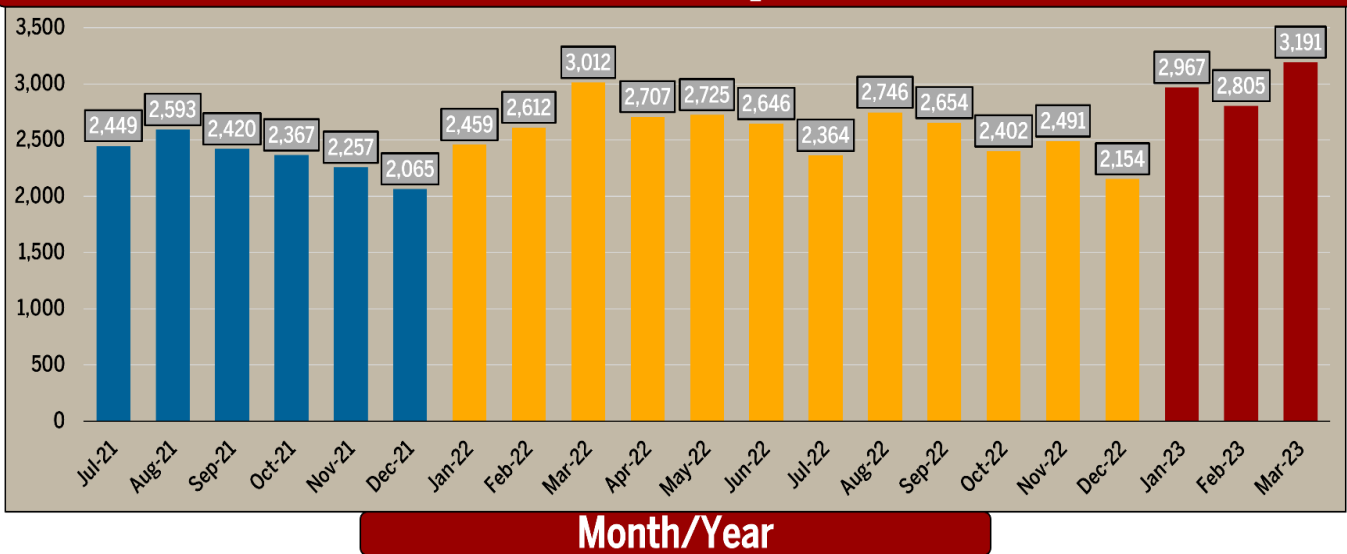


Additionally, 36% of respondents acknowledged that they did not follow the steps prescribed by the **OECOSL Suspension and Expulsion Policy Guidance for Programs**.



Another potential indicator of social emotional challenges in Indiana’s young children may be a steady increase in referrals to First Steps, Indiana’s early intervention system. These referrals include behavior and social emotional concerns as well as other developmental concerns related to communication, motor skills and cognition.⁸

Number of Child Referrals per Month Statewide





Often requests for professional development indicate current problems. According to the Maternal, Infant and Early Childhood Home Visiting (MIECHV) needs assessment, social and emotional growth consistently was ranked as a high or

crucial priority for further focus and additional resource allocation. Furthermore, alongside these other important considerations, the MIECHV stakeholders shared their priority requests for focused coaching and deeper professional development; these priority areas show where additional resources and attention can be most beneficial in supporting our children's growth and wellbeing. ¹³

The areas identified were:

◦ INFANT TODDLER MENTAL HEALTH

◦ SOCIAL-EMOTIONAL LEARNING

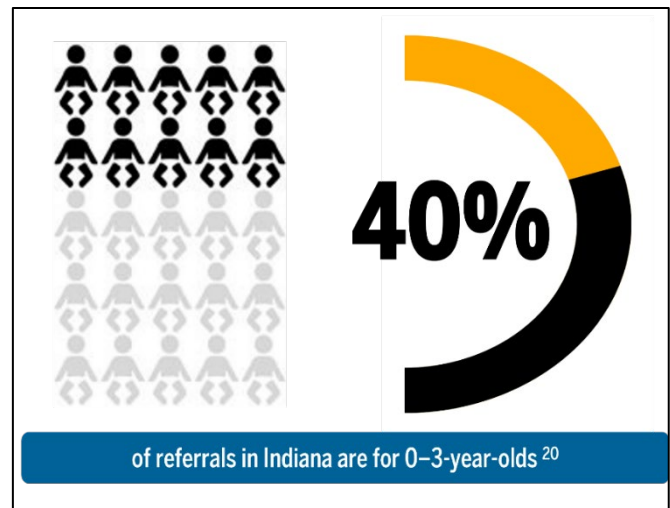
◦ TRAUMA SUPPORT

◦ BEHAVIORAL MANAGEMENT

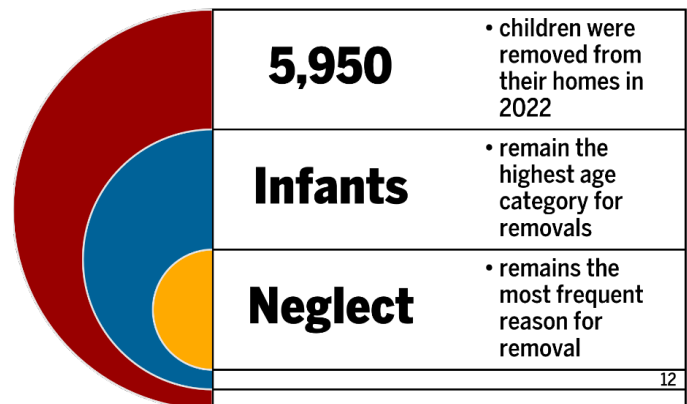
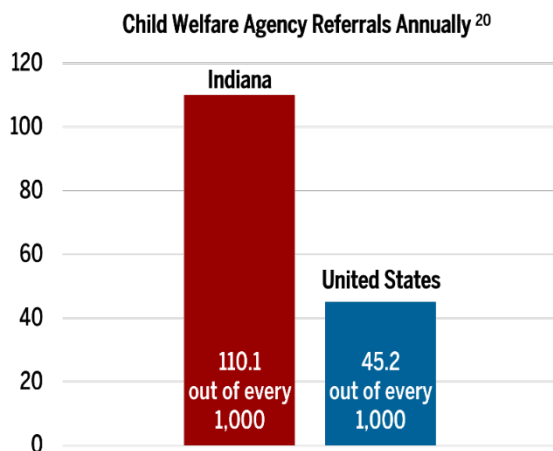
Children Need Opportunities to Explore Their Environment and to Learn

In addition to having safe, secure relationships and the chance to learn how to identify, express and manage emotions, young children also need to explore and learn. What barriers might there be to children exploring and learning?

Children need safe environments before they can explore and learn. Both nationally, and in Indiana, referrals made to child welfare agencies are more likely to be infants and toddlers (age 0-3) than any other group.



Young children are NOT always in safe and secure environments.



Yet another barrier for infants and children to explore the environment is unsafe or insecure housing.



1 of out every 5 Hoosier households with children who are renting report being very or somewhat likely to be evicted within the next 60 days.²



While childcare is not necessary for children to explore and learn, access to high quality childcare/preschool is often often an important source of developmentally appropriate, positive experiences for young children. Unfortunately, childcare is not always an option, even for families who need it to work.



70% of children in Indiana have all available parents working ¹⁴



Only 23% of children 0-5 are enrolled in some form of childcare ¹⁴



of children in care, only 47% are in programs rated Paths to Quality level 3 or 4 ¹⁴



55% of Hoosier families reside in a childcare desert ¹⁴

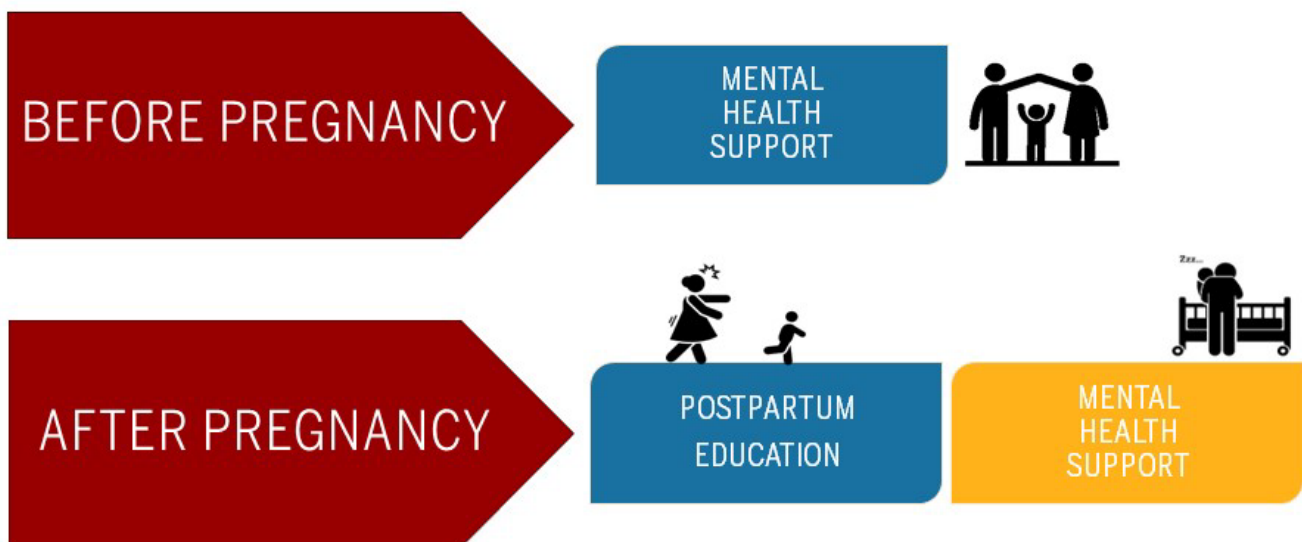


39% of 3- and 4-year-olds are not in preschool ¹⁴

How Does Indiana Support Families with Young Children to Address Mental Health Challenges

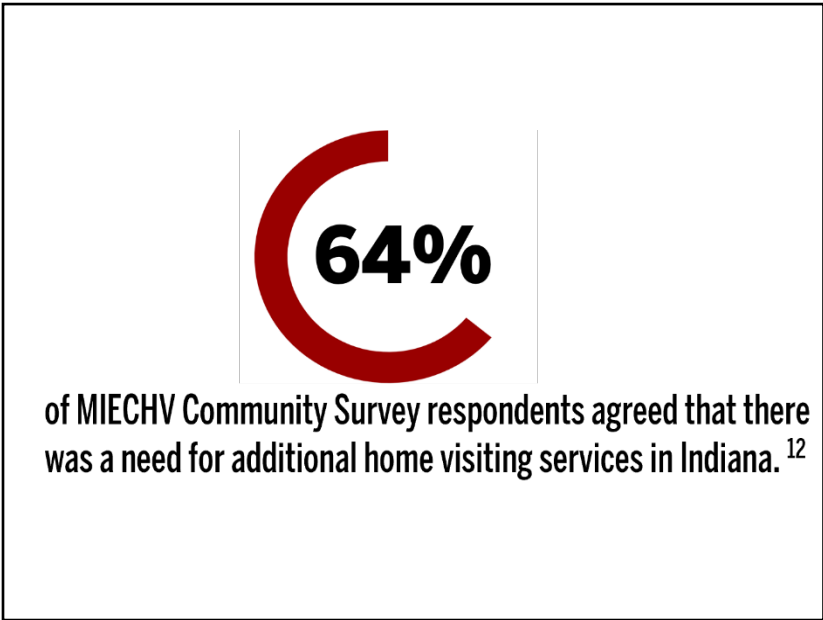
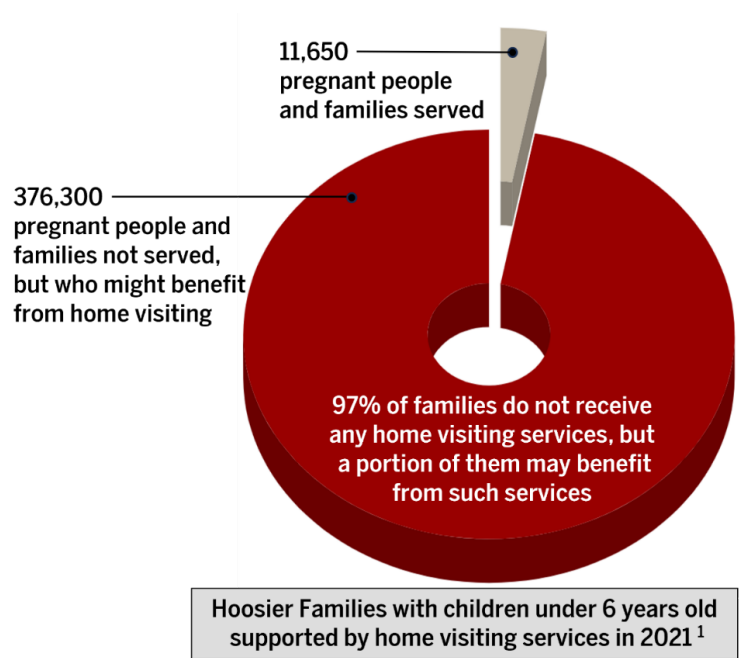
Supporting infant and early childhood mental health requires providing adequate mental health services for adult caregivers as well as providing mental health services and safe, trauma informed care for infants and young children. Supporting children means supporting and uplifting parents and caregivers.

Top Needs Listed by Parents/Caregivers in the Maternal Infant Early Childhood Home Visiting (MEICHV) Needs Assessment¹²



There seems to be a need for increased home visiting services to support every corner of the state.

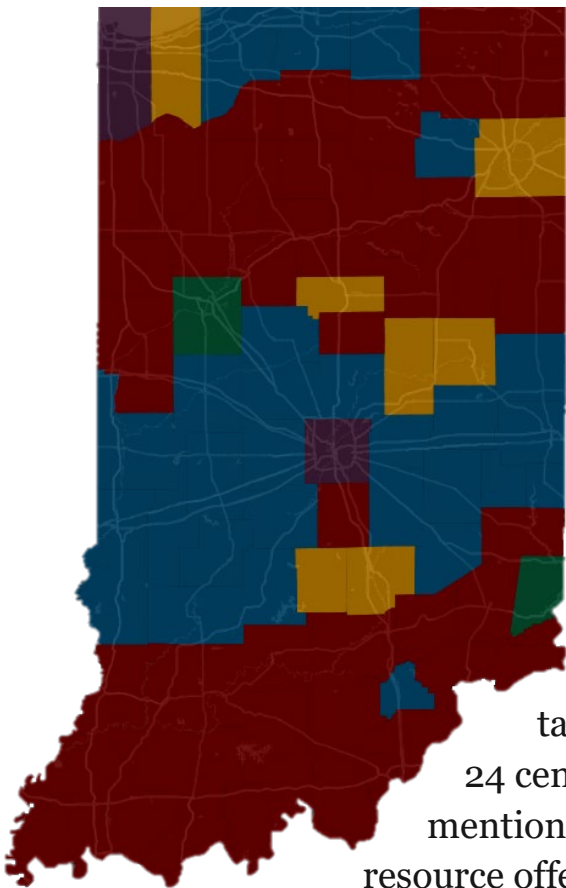
Multiple needs assessments support this need and highlight vulnerable populations that may be particularly under-served, such as families experiencing homelessness.¹²



To address data showing that the biggest barrier for new parents receiving home visiting services was little to no knowledge of the available services, The Department of Health introduced “My Healthy Baby” in 2023 which is a hotline that families can use to find out about multiple programs and determine which program is the best fit for them.

Infant Mental Health Endorsement® & Early Childhood Mental Health Endorsement® By County

Note: Most individuals are endorsed in, and provide services to residents of, multiple counties.



The map to the left shows where IECMH endorsed providers are located who provide direct clinical services to families with young children. The investigator polled 77 professionals who provide direct services to families. Of the 13 responses, only 2 are currently accepting new clients.

When community mental health centers were asked to provide referrals for young children (younger than they serve), none of the 24 centers mentioned the Infancy Onward endorsement registry as a source of information.

When the investigator asked where else she could take a 2-year-old with challenging behavior, 22 of the 24 centers didn't have suggestions. Two centers mentioned 211. When the investigator called 211, the only resource offered was First Steps.

LEGEND

- Counties highlighted in **CRIMSON** have 0 providers with a direct service-related endorsement.
- Counties highlighted in **BLUE** have 1 provider with a direct service-related endorsement.
- Counties highlighted in **GOLD** have 2 providers with a direct service-related endorsement.
- Counties highlighted in **GREEN** have 4 providers with a direct service-related endorsement.
- Counties highlighted in **PURPLE** have 20+ providers with a direct service-related endorsement.

Conclusion

“The quality of a child’s earliest experiences can shape the architecture of the brain for better or for worse. Infant and toddler mental health lays the foundation for lifelong resilience, social and emotional competence, and cognitive development.”

– Dr. Jack P. Shonkoff, MD, Director of the Center on the Developing Child at Harvard University



Infant/early childhood mental health is defined as “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.”⁵

This report used this definition to organize existing data from a wide range of needs assessments, data sets and reports. The data demonstrates that some Indiana families with young children are encountering barriers to the three components of infant/early childhood mental health.

Fortunately, Indiana is innovative and is creating several new initiatives to address infant/early childhood mental health. However, it can be challenging to make these initiatives known to the professionals and families who need them.



Indiana needs to continue to fund and innovate early childhood initiatives related to mental health. Existing agencies and organizations need to continue to expand intentional and thorough communication to maximize the efficacy of new mental health offerings.

To that end, the Riley Child Development Center and the IU Early Childhood Center are collaboratively planning a second

Infant/Early Childhood Mental Health Summit for Fall 2023 with a focus on breaking down silos across organizations and agencies, highlighting the noteworthy work already being done and identifying the next steps forward.

Bibliography

1. 2022 National Home Visiting Yearbook US Census Bureau Week 51 Household Pulse Survey (11/2-11/14/22)
2. National Survey of Children's Health, 2022
3. Schmitt, S.A., Litkowski, E., Duncan, R., Elicker, J., Purcell, M., Purpura, D.J. Preparing for the Future: Indiana's Preschool Development Grant. Website: <https://brighterfuturesindiana.org/pdg-reports/indianas-birth-to-age-five-mixed-delivery-system-needs-assessment>
4. Zero to Three, 2017
5. 2019 National Survey of Children's Health (2021)
6. Personal communication, FSSA
7. 2022 Spark Professional Development Needs Assessment Analysis: <https://public.tableau.com/app/profile/spark.learning.lab/viz/2022SPARKPDNeedsAssessmentAnalysis/Demographics?publish=yes>
8. First Steps Annual Report 2022: <https://www.in.gov/fssa/ddrs/files/FirstStepsICC-2022AnnualReport.pdf>
9. 2022 Continuums of Care to the US Department of Housing and Urban Development: <https://www.huduser.gov/portal/sites/default/files/pdf/2022-AHAR-Part-1.pdf> pg 40
10. Adoption and Foster Care Analysis and Reporting System (AFCARS) Report: Indiana: estimates as of June 28, 2022-No. 29. <https://www.acf.hhs.gov/sites/default/files/documents/cb/afcars-tar-in-2021.pdf>
11. Indiana Youth Institute: KidsCount 2023: <https://www.iyi.org/indiana-kids-count-data-book/>
12. Indiana Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Statewide Needs Assessment 2020 Update: <https://www.in.gov/health/mch/files/MIECHV-Needs-Assessment-01Oct2020-2.pdf>
13. Early Learning Advisory Committee (ELAC) Needs Assessment (no longer available online)
14. Erica Webster, Youth Research Inc., presented at NAEYC in 2022

15. Summary of Indiana Early Childhood Needs Assessments. Prepared by Data Aims. With support from: Amadou Sylla, LEND student.
16. McDaniel & Lowenstein (2013). Depression in Low-Income Mothers of Young Children: Are They Getting the Treatment They Need? The Urban Institute.
17. Buka, S.L., Beers, L.S., Biel, M.G., Counts, N.Z., Hudziak, J., Parade, S.H., Paris, R., Seifer, R., Drury, S.S. 2022. The Family is the Patient: Promoting Early Childhood Mental Health in Pediatric Care. *Pediatrics*, 149, s5, May 2022. e2021053509L
18. <https://mhanational.org/issues/2022/mental-health-america-adult-data>
19. Muller, P., Kemp, A. Early Childhood Mental Health Supports Evaluation: Pilot Phase (2022).
20. State-level Data for Understanding Child Welfare in the United States, Child Welfare, April 27, 2023. <https://www.childtrends.org/publications/state-level-data-for-understanding-child-welfare-in-the-united-states>
21. CANS Manual: https://dmha.fssa.in.gov/darmha/Documents/CANS5-17ManualSFY2019_06222018.pdf
22. CANS Data from DARMHA database shared with permission from DCS and DMHA.



INDIANA INSTITUTE ON DISABILITY AND COMMUNITY
EARLY CHILDHOOD CENTER

Indiana Institute on Disability and Community (IIDC)
Indiana University 2810 E Discovery Parkway
Bloomington, IN 47408-980 1

Phone: 812-855-6508

Fax: 812-855-9630

Email: eccenter@indiana.edu

<https://www.iidc.indiana.edu/ecc>