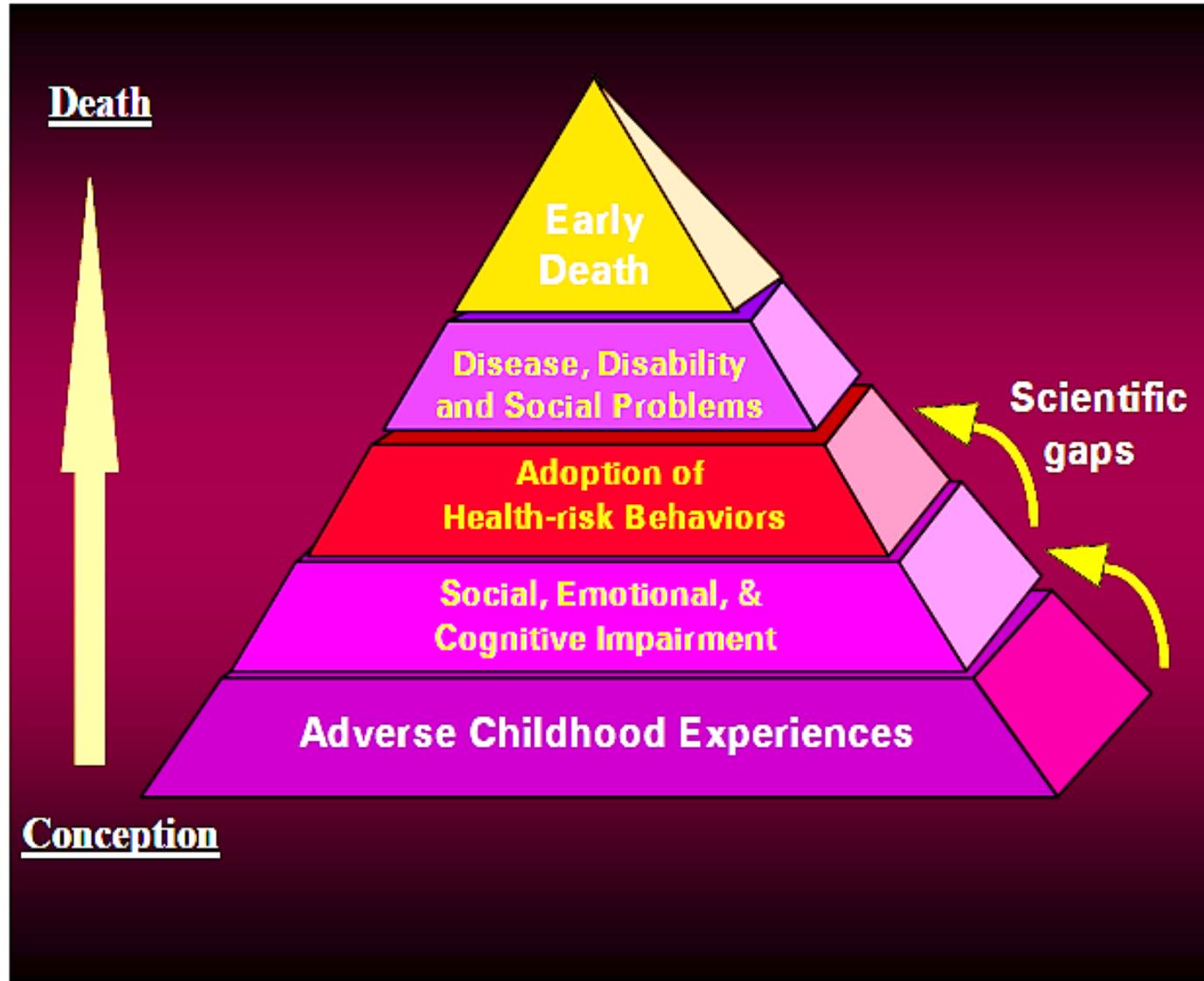


Environmental Factors in Children's Socioemotional Development

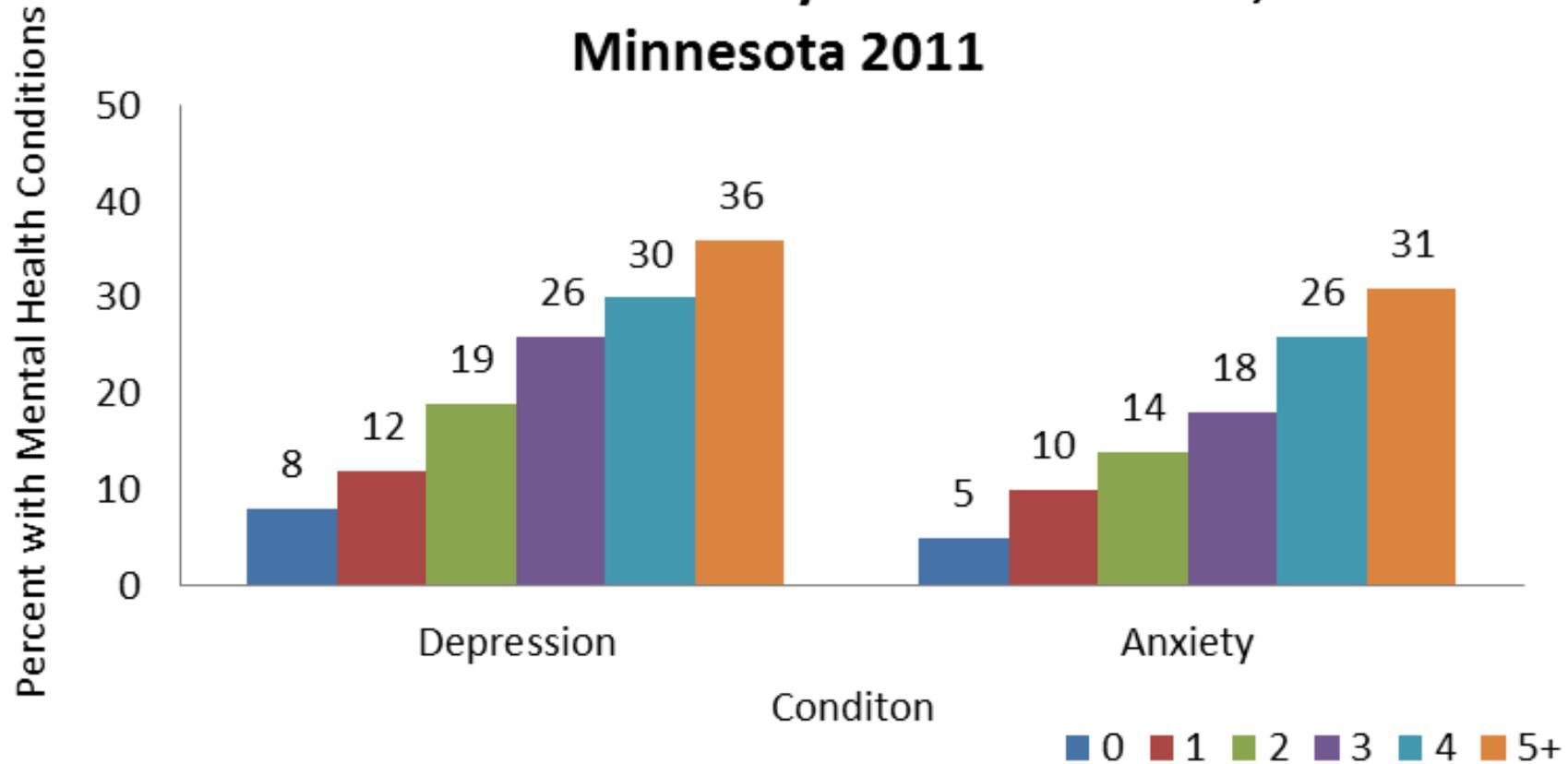
Cross-Systems Collaboration
National Academy for State Health Policy
Chicago, IL
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Trauma and Developmental Neurobiology

- ▶ Extreme or prolonged trauma creates toxic stress, condition of elevated stress hormones which negatively affects brain development as well as playing role in immune system adaptations
 - ▶ Privileges development of emotional responsivity over more reflective, reasoned strategies
- ▶ Relation between ACEs and negative outcomes is probabilistic, not deterministic because even high levels of stress can be mediated to be made tolerable
 - ▶ Critical role of relationships at all ages, but especially for infants and toddlers
 - ▶ Timing also critical: systems most vulnerable at periods of most rapid growth and change



Percent of Minnesotans with Chronic Mental Health Conditions by Number of ACEs, Minnesota 2011



Adverse Experiences in Minnesota Children

Nelson and Schiff (2015) mined data for Minnesota children receiving health coverage through public programs:

- ▶ 397,306 children ages 0-17 had coverage for at least 3 months based on parent eligibility; constitutes 1/3 of all children in Minnesota
- ▶ 83% below poverty level, and 32% lived in areas with concentrated poverty
- ▶ 28% had immigrant parent, with 25% speaking language other than English most of the time
- ▶ 19% subject to child protection

Adverse Experiences, continued

- ▶ 17% lived in households in which at least one child had complex, chronic medical condition
- ▶ 13% had parent with serious mental illness, and 10% had parent with chemical dependency diagnosis in past 18 months
- ▶ 8% had parent with very high level of medical care
- ▶ 8% experienced episode of homelessness in past 5 years

Families and Risks to Resilience

Focus on ACE variable of familial mental illness:

- ▶ In DHS data across public programs (Nelson and Schiff, 2015) maternal mental illness a powerful predictor of child mental health diagnoses, for all children as well as for birth - six
- ▶ Depression or substance abuse can undermine best intentions of primary caregivers to provide consistent, basic care, emotional support and stimulation (Earls, 2010);

Correlates of Caregiver Depression

- ▶ Reduced responsiveness to child need for interaction
- ▶ Reduced verbal interaction with child, critical to language development
- ▶ Modeling of depressed affect
- ▶ Reduced capacity for establishing secure attachments
- ▶ Reduced capacity for differential response to child behavior
- ▶ Linked to increased risk of child diagnosis of depression as well as other children's mental health problems, notably disruptive behavior disorders and anxiety

Caregiver Mental Illness and Parenting Sensitivity

Conway and McDonough, S. (2006)

- ▶ Measured maternal parenting sensitivity and infant negative affect at 7 months
- ▶ At 33 months, measured toddlers' emotional resilience and behavior problems
- ▶ Emotional resilience positively correlated and behavior problems negatively correlated with parental sensitivity; neither predicted by earlier infant emotional status

Catherine Wright's dissertation research similarly documents difficulties with parenting sensitivity among mothers with SPMI; average ACE = 7

Intervening for Caregivers: Beginning with Screening

Efforts to treat or reduce depression in parents is key prevention strategy for healthy child outcomes (Beardslee, et.al., 2011; also referenced by Masten, 2014)

American Academy of Pediatrics Guidelines call for screening during well-baby checkups; Minnesota learned from Illinois example during ABCD initiative

- ▶ Maternal depression screening covered as a Child & Teen Checkup (EPSDT) service, or at other pediatric visits within child's first year; billed separately but on same claim as child visit. Child developmental and socioemotional screening can also be billed for same visit.

Beginning with Screening, continued

- ▶ Up to 3 screenings in child's first year of life
- ▶ Approved screening instruments include PHQ-9 and PHQ-2, and Edinburgh; at least one clinic also invested in use of Beck Depression Inventory
- ▶ Recently added enrolled mental health providers to those who can perform and bill for all screenings

Treatment for Caregivers and Children

- ▶ Adult mental health interventions include both medication and psychotherapy (CBT, interpersonal therapies)
- ▶ MN-DHS studying trauma-focused interventions for adults, recognizing high likelihood of trauma histories among those with symptoms of depression and anxiety
- ▶ Mothers with more serious depression and other mental health diagnoses may be able to attend partial hospitalization programs with their infants
- ▶ Parent-child relationship highly likely to be affected by parental depression or other mental health diagnoses; MN-DHS has been systematically training mental health providers in interventions targeting these relationships, e.g. PCIT, CPP/IPP, ABC
- ▶ ACE work in Washington and elsewhere raises questions about social supports: quality v. quantity?

Contact Information

Glenace Edwall, Psy.D., Ph.D., LP, M.P.P.

gedwall@comcast.net

651.633.0673

Catherine Wright, Psy.D.

Minnesota Department of Human Services

catherine.wright@state.mn.us

651.431.2336