Early Brain and Child Development: Supporting Parents and Cultivating Community Relationships
The Case for Rethinking Well Child Care

*Schor 2004*

- Traditional model not meeting families’ needs
- Many missed appointments
- Dissatisfied with content of visits
- Families expect information on child development, parenting, and physical health
- Need
  - New schedule
  - New structure
  - New content
Is there a future for Well Child Care?

_Coker et al 2009, 2013_

- Parents are dissatisfied with the behavioral and developmental advice they receive.
- Does not prevent drivers of the chronic diseases of childhood.
- Does not identify and mediate the psychosocial and environmental risk factors for toxic stress.
Objectives

• Explore how being a pediatrician makes you uniquely positioned to support EBCD in the following ways:
  – As a champion for early childhood systems collaboration
  – As a key player in supporting parents and caregivers

• Identify resources and strategies for building strong foundations for lifelong health
For each of the following people or groups, please tell me how much you would trust their opinion on issues facing children and families? (Read item) How much would you trust their opinion on issues facing children and families – a great deal, a fair amount, not too much, or not at all? [ROTATE]

<table>
<thead>
<tr>
<th>Group of People or Groups</th>
<th>Great Deal</th>
<th>A Great Deal</th>
<th>A Fair Amount</th>
<th>Not too Much</th>
<th>Not at All</th>
<th>(Don’t Know)</th>
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Why the early childhood medical home?

• Unique and comprehensive, unstigmatized access to early childhood
• Public’s deep respect for pediatricians as trusted guardians of child health
• Number of well-child visits from birth to age 5
• 97% of infants and toddlers have regular access to healthcare (CDC, 2006)
It’s what parents want!

• McCune et al reported that 81% of parental questions for pediatricians concerned psychosocial issues
• In their study, parenting issues were parents' predominant concern: 70% of mothers were more worried about some aspect of their parenting or their child's behavior than they were about their child's physical health
What do families want?  
*Radecki et al*

- Focus on Child Development and Behavior
- More information on healthy growth and development
- Pre-visit materials to prepare for the visit
- Seminars
- Workshops
- Technology for information
- Community resources
- Pediatricians recognize the opportunities for change
Maternal Mental Health Promotion (awareness, screening, treatment)

Early Literacy and Early Care

Parental Supports and Education

Financial Literacy, Tax Credit, Education and Legal Supports

Community Support and Advocacy (quality pre-k, child care, home visiting, social services)

Routine Screenings and Surveillance Including Toxic Stress

Community Linkages Across Systems/Relationship: Ongoing Care Management Team

Medical Home

Child/Family
Bright Futures

• Child health must be viewed in its broadest context
• Healthy communities support healthy children
• Attention to health promotion activities and psychosocial factors
• Focus on child and family strengths
• Promoting mental health and child development
• Sets stage for creative models
Promotion Opportunities Within the Clinical Setting From the Simple . . .

- Encourage families to consider emotional development prior to visit (questionnaires, DVDs, newsletters, community events, parent groups, etc.)
- Mental health section on your web site (questions, facts, resources, etc.)
Promotion in the Waiting Room

- Posters
- Books/pamphlets (low-literacy, multi-lingual)
- DVD (“I am Your Child” or maternal depression awareness)
- Waiting room questionnaires
- Volunteers to role-model positive interaction/Group-talks in waiting room
- Parenting groups
- Parent support resources
Promotion in the Clinical Encounter

Relationships as a VITAL SIGN!
Ways to Check in on Relationships

- Use open ended questions as well as screens
- Ensure the mental health of parent and child are addressed at each visit
- Observe the family’s reaction and response when providing a Reach Out and Read book to the child
- Have other staff to engage in education
- Connect families with resources (child care, parenting groups, etc.) on care coordination
Encourage parents and caregivers of young infants to...

- Talk (sing) to their baby while they hold, feed or play with him
- Let him look at their face
- Respond to his gestures, faces and sounds
- Give him colorful objects to look at, including books and pictures
Encourage parents and caregivers of older infants to...

- **Copy** her sounds and expressions
- **Play** peek-a-boo and patty-cake
- **Teach** her to wave “bye bye” and to shake her head “no” and “yes”
- **Read** books together - pointing to characters, letting her pat and taste the book
Encourage parents of toddlers to...

- Be encouraging and supportive, and **set appropriate limits**
- **Be consistent;** establish **routines** for meals, naps and bedtime
- Make time to **play** daily

[YouTube Video](http://www.youtube.com/watch?v=N3PBjecBtos)
Encourage parents and caregivers of toddlers to...

• Choose toys that encourage creativity (blocks, animals, books)
• Listen to and answer her questions
• Rhyme, sing and listen to music together
• Choose books with humor so you will want to read them over and over

Photo is used with permission from the personal collection of Pamela High, MD
Encourage parents and caregivers of toddlers to...

- Encourage drawing, building and creative play
- Introduce simple musical instruments
- Acknowledge desirable behavior often ("I like it when you play so well together" = TIME IN)
  - 5 to 10 “time-ins” for every time-out!!

Photo is used with permission from the personal collection of Pamela High, MD
Encourage parents and caregivers of toddlers to...

• Create ways for your child to play with other children and to have out-of-home social experiences

• Offer simple choices (Which book shall we read together?)

Photo is used with permission from the personal collection of Pamela High, MD
Encourage parents and caregivers of children of all ages to...

• Give lots of warm physical contact and attention – promotes a sense of security and well-being
• Be aware of their moods
• Read their gestures, faces and sounds
• Respond when they are upset and when they are happy
Encourage parents and caregivers of children of all ages to...

• Read together and tell stories daily (bedtime routines)
• Speak second languages when natural to do so
• TV/Screens aren’t recommended for children under 2 yo; instead, spend time playing together
• For children >2 yo, limit TV and screen time to no more than 2 hrs of educational viewing/day
Every Day Every Child:
5 Rs of Early Childhood

• ROUTINES – help children know what to expect of us - what is expected of them
• READING together – daily
• RHYMING, playing and cuddling
• REWARDS for everyday successes – PRAISE is a powerful reward
• RELATIONSHIPS, reciprocal and nurturing – foundation of healthy child
Exemplary Programs Supporting Healthy Child Development – and many more!

ABCD
Assuring Better Child Health & Development

Connecticut’s Help Me Grow program

Children’s Trust Fund

Bright Futures
prevention and health promotion for infants, children, adolescents, and their families

Healthy Steps

Community Care of North Carolina
Reach Out and Read

• Integrated into primary care clinical practice (in approximately 5,000 hospitals and health centers today)

• At 6-month visit through age 5, medical providers:
  – give child a developmentally-appropriate, culturally sensitive, high-quality book
  – model effective reading techniques for the parents/caregivers and encourage routine reading with child at home
  – help families understand developmental milestones and provide guidance to foster stable relationships with their child
Reach Out and Read Research Findings

• Families read together more often
• Children enter kindergarten with:
  – larger vocabularies,
  – stronger language skills, and
  – a six-month developmental edge
• Program is located in approximately 5,000 hospitals and health centers in all 50 states... and expanding

Source: http://www.reachoutandread.org/why-we-work/research-findings/
CORE COMMUNITY LINKAGES—
It Takes a Village

- Child Care Resource and Referral (CCR&R)
- Early Education and Care Systems
- Women, Infants and Children (WIC)
- Mental Health Supports
- Parenting Groups (fatherhood initiatives)
- Domestic Violence Support
- Breast Feeding Supports
- Early Intervention
Approaches

• Awareness and referral
• Sharing materials
• “Promoting”
• Co-location: service and education models
• Contributing
• Project
• Working to achieve a common vision
Childcare Resource and Referral Agency (CCR&R)

Help parents take the guesswork out of choosing care by providing:

- Referrals to local child care providers
- Information on state licensing requirements
- Information on availability of child care subsidies
- CCR&Rs provide guidance by phone, in person, and in other ways, even online, that are tailored to each family FOR FREE!
You can find your local CCR&R with a click!

www.childcarehelp.com
Early Head Start/Head Start

• Federal programs designed to promote school readiness for low-income children ages 0-5
  – EHS: for pregnant women and families with children under age 3 (with strong home-based component)
  – HS: for children ages 3-5 and their families, in preschool center model

• Comprehensive approach: whole child and family
  – cognitive, social, and emotional development
  – screenings and referrals to health, nutrition, and social services
  – family support and family/community engagement
Early Head Start: National Evaluation Documents Strong Positive Impacts

• Positive child outcomes (at 36 months) include:
  – Larger vocabularies
  – Greater ability to solve problems and understand basic concepts
  – Higher levels of functioning
  – Better outcomes on several aspects of social emotional development

• Positive parent outcomes include:
  – Parents more likely to read to their children daily
  – Parents more positive with their child and greater repertoire of discipline strategies
Home Visiting Programs

- A voluntary service, designed to reach expectant parents, babies and young children, who face barriers in supporting their child’s healthy development
- Offers support and information in the home environment
- Increasing recognition of need to coordinate with other early childhood programs (e.g. Early Head Start)
The Research on Home Visiting Programs

• High quality programs have positive outcomes for parents and children including:
  – Improved parenting skills and quality of home environment
  – Improved intellectual development
  – Enhanced maternal employment and education
  – Improved detection and management of postpartum depression
  – Improved childhood immunization and breastfeeding rates

• Nurse Family Partnership Home Visiting Model has $5.70 Return on Investment per Tax Dollar Spent

* As home visiting programs expand, evaluation is increasingly important to determine which delivery models have greatest impact and savings.
EI: Early Intervention Program for Infants and Toddlers (IDEA Part C)

• A system of services that helps babies and toddlers with developmental delays or disabilities*

• Serve eligible children from birth through age 2

• Eligible children have an Individualized Family Service Plan (IFSP) developed by a team of professionals with the family
  – Services vary based on individual child’s needs; may include: assistive technology, audiology or hearing services, medical services, nutrition services, PT, speech therapy, psychological services, and/or counseling and training for the family
Positive Impacts of EI

• Specialized services and supports increase the chances young children will develop to their full potential
• Young children who receive EI are better prepared for school and later life
• Family needs are addressed by providing emotional support and information to help them promote their child’s development and function as their child’s best advocate
Local Resources/Asset Maps

- Map out the assets in your community
- So much to gain
Early Learning

Health, Mental Health and Nutrition

Family Support

Special Needs/ Early Intervention

Comprehensive health services that meet children’s vision, hearing, nutrition, behavioral, and oral health as well as medical health needs.

Early care and education opportunities in nurturing environments where children can learn what they need to succeed in school and life.

Economic and parenting supports to ensure children have nurturing and stable relationships with caring adults.

Early identification, assessment and appropriate services for children with special health care needs, disabilities, or developmental delays.
Your Role in the Community

It is limitless!

• Linkages
• Advisor
• Presenter
• Media
• Projects
• Outreach
As a pediatrician, you are well positioned to serve as an advocate for parents and caregivers to:

• Help them build a strong foundation for their child’s lifelong health
• Help them link to community resources to support their needs