



## Foundations for Success

*Improving early childhood mental health  
to support successful families and communities in Ramsey County*

### Follow-up screening survey results July 2009

Foundations for Success is a five-year initiative designed to develop and implement a county-wide system for early childhood mental health services in Ramsey County. Funded by the John S. and James L. Knight Foundation and coordinated by the Community Action Partnership of Ramsey and Washington Counties, the initiative promotes culturally competent and family friendly services. Services are developed and implemented by a collaboration of more than 100 community agencies, representing local foundations, government, parents, school districts, health, mental health, early childhood professionals, and the University of Minnesota.

This initiative includes a screening component, in which county school districts, clinics, and social service agencies administer the Ages & Stages Questionnaires®: Social-Emotional (ASQ:SE). This questionnaire is being used to screen young children for emotional or behavioral concerns. Some families receiving screening were invited to participate in a follow-up interview six months later. The purpose of this interview was to explore perceptions of the screening process and subsequent receipt of appropriate services.

Families were randomly selected for this interview if they provided consent and had a child with a screening score at or above the clinical cut-off (indicating the possible presence of social or emotional concerns). Beginning in early 2006, 25 families were selected each month. Some families screened in late 2005 were also interviewed.

This report summarizes the results of interviews completed between October 2005 and June 2009. During this time, 858 families were selected for the interview. A total of 552 interviews were conducted, for a response rate of 64 percent. Most

other families could not be located for the interview. Most interviews (77%) were completed in English; others were completed in Spanish (12%), Hmong (10%), or Somali (less than 1%).

#### **Key findings**

##### **Ratings of the screening process**

Most parents provided positive feedback about the screening process. Most respondents (90%) remembered completing the Ages & Stages Questionnaires®: Social-Emotional (ASQ:SE). Most parents (97%) “agreed” or “strongly agreed” that staff answered their questions about the screening. Overall, 93 percent of the parents “agreed” or “strongly agreed” that staff explained their child’s screening score for them and 90 percent said that staff helped them obtain a more complete assessment for their child. For all three items, Hmong parents were most likely to “strongly agree” (41%-46%) and Spanish parents were least likely to “strongly agree” (2%-3%).

##### **Receipt of referrals**

Overall, almost half of the parents (46%) said that staff gave them referrals to specific programs or agencies that could work with their child. Only 6 percent of the Hmong parents said that they received a referral, however (compared to 52%-60% of the parents interviewed in English or Spanish). Parents were referred to a range of agencies and services, including social service agencies, speech/language therapy and schools.

##### **Entry into services**

Families receiving referrals were relatively likely to access services. Six in 10 parents (62%) contacted the agency to which they were referred. Of those

parents who contacted the agency, 6 in 10 (63%) subsequently enrolled their child for services.

Parents who did not receive a referral at the time of the screening were much less likely to access services. Only 10 percent of these parents enrolled their child into any new programs in the six months following the screening. These services included a range of psychiatric/psychological and recreational services. Parents often learned about these services from friends, relatives, and other service staff.

### **Barriers to service entry**

Most parents who did not pursue referrals felt that services were not needed. Overall, two-thirds of the parents (67%) who did not follow-up on the referral felt that their child did not need services to assist with emotional or behavioral issues. Of those parents who did not receive a referral, 21 percent felt that their child needed services. Hmong parents (8%) were significantly less likely to feel their child needed services with emotional or behavioral issues compared to parents who completed English (22%) or Spanish (33%) forms.

Some parents did not enroll their child into services for a range of other reasons, such as a lack of time to pursue services, inconvenient service times, a concern about their child being labeled as having a mental health or behavior problem, and a belief that they could take care of their child's issues without attending a program (with 21% to 34% of parents saying that this was at least a "minor reason" why they did not follow-up on the referral). Overall, however, most parents did not feel that these issues presented significant barriers. Other potential barriers to access were rarely reported, such as concerns about the cultural appropriateness of services, disliking the staff person who gave the referral, and not wanting other people to know their child was in a program.

### **Service completion and outcomes**

Most parents (82%) who enrolled their child into a program (either with or without a referral) said that their child was still attending. Twelve of the 23 parents who said that their child was not still attending (52%) indicated that services had been successfully completed.

Almost all of these parents whose children were either still attending the program or had successfully completed the program (99%) "agreed" or "strongly agreed" that the program had helped their child. When asked how the program had helped, most parents identified improvements in emotions, behavior, and speech/language, opportunities for their child to socialize with other children, or support provided to parents.

### **Conclusions and recommendations**

- Most parents gave positive ratings of the screening process. Staff conducting screenings should continue their efforts to answer parents' questions about the instrument and their child's score. This may be especially important for Hispanic/Latino parents, who gave somewhat less positive ratings of this process.
- Since all children had elevated screening scores, it is possible that referrals would have been beneficial for some of the 54 percent of children who did not receive them. One in five parents who did not receive a referral was concerned about their child's emotional or social well-being. Staff are encouraged to increase their efforts to provide referrals, especially since families who received referrals were more likely to obtain services within six months than those who did not receive referrals.
- Only 6 percent of the interviewed Hmong parents received referrals. The screening partners should discuss this finding to determine whether it was due to concerns about the validity of the ASQ:SE for Hmong families, a lack of appropriate service options, or other concerns.
- Most parents who did not pursue services for their child felt that services were not needed. Others felt that they could address their child's issues on their own. While these may be accurate assessments in some cases, staff should continue their efforts to explain the child's score, the potential presence of social or emotional issues, and the potential helpfulness of services to parents as appropriate.

#### **For more information**

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