Foundations for Success
Improving early childhood mental health
to support successful families and communities in Ramsey County

Views on the early childhood mental health system in Ramsey County

Foundations for Success is a five-year initiative to create 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 mental health services for children age 5 and younger.

More than 100 community agencies - representing local foundations, government, parents, school districts, health, mental health, early childhood professionals, and the University of Minnesota - are developing and implementing services through the initiative.

Wilder Research, the evaluator for Foundations for Success, conducted the first of five annual surveys of people knowledgeable about mental health services for young children in Ramsey County. This report summarizes the results of that survey, completed in fall 2005. The 118 survey participants represented nonprofit agencies, county government, school districts, and other agencies. Most of them (88%) were directly involved in providing services to young children.

Resource sharing among agencies
Three out of four survey participants agreed that available resources are shared, though most (63%) only agreed “somewhat.” Training is the most commonly shared resource with almost all respondents (98%) saying it is shared at least “a little.” Volunteers are shared least often, with 71 percent saying they are “not shared at all.” Funding, materials or equipment, and staff are shared sometimes.

The main barriers to sharing resources, according to the survey, are lack of staff time to collaborate, lack of knowledge about other programs, limited funding, and competition among agencies. To increase resource sharing, respondents suggested opportunities for collaboration, increased levels and flexibility of funding, and more opportunities to learn about other agencies and their services.

Making and receiving referrals
Two-thirds of the respondents (64%) agreed “somewhat” that they have adequate information about services available for young children with mental health needs; another 17 percent agreed “strongly.” About three-quarters agreed (either “somewhat” or “strongly”) that they are able to easily refer children to other agencies (72%) and receive referrals from other agencies (79%).

While most respondents are able to make and receive referrals, they also identified barriers, including limited information about available services, a shortage of providers serving young children, and long waiting lists for services. Insurance guidelines for reimbursement and eligibility restrictions for services were also mentioned. Additional barriers included a lack of time to pursue referrals, families’ difficulty in pursuing referrals, cumbersome procedures for releasing information to other agencies, and poor communication among agencies.

The most common suggestion for easing the referral process was to share information about available services, such as through a centralized database or resource directory. Reducing eligibility or insurance restrictions and promoting collaboration were also
recommended. Other suggestions included providing education to professionals and community members, making services more accessible, and developing procedures for sharing information.

**Adequacy of funding**

Funding for early childhood mental health services was generally seen as inadequate. Most respondents (84%) disagreed at least “somewhat” that funding was adequate; more than half (51%) disagreed “strongly.”

Survey participants saw lack of understanding about the importance of early childhood mental health as a major contributor to the funding situation, including limited awareness of the long-term benefits. Others mentioned the impact of budget cuts, the competition for available funding, the current political environment, and difficulty obtaining insurance reimbursement.

The most commonly suggested idea to improve funding was to promote understanding of early childhood mental health. This education was recommended for the general community, as well as for policy-makers and legislators. Other recommendations included increasing funding through both government funding and other sources, and improving the quality and quantity of available services.

**Barriers to access**

More than 80 percent of survey participants said that lack of information about emotional and behavioral problems in young children and lack of information about available services for young children both interfere “a lot.” Virtually all respondents saw at least “a little” interference from transportation, difficulty finding child care for other children during appointments, difficulty completing daily living tasks, stigma associated with mental health services, and lack of food, clothing, or other necessities.

When asked about other factors that prevent families from accessing services, some respondents highlighted the lack of available services and the shortage in providers trained to provide mental health services to young children. Others described the impact of other problems in the family, such as homelessness or parents’ chemical dependency or mental health needs. Cultural and language barriers, the cost of services, and stigma related to mental health were also seen as contributing factors. Other potential barriers included the convenience of services, lack of support for families, and lack of information about mental health issues and services.

The most frequent recommendations for improving access to services dealt with education and training – training service providers to work with young children, training related personnel (such as medical staff) to provide information and referrals, and promoting awareness of mental health among the general public. Another prevalent theme was to address logistical barriers to access, including transportation, child care and convenience of services. Other suggestions included increasing staff cultural competence, promoting screening and referrals, increasing funding, and expanding service availability.

**Adequacy of available services**

Most respondents felt that current services for young children are inadequate. The percentage who agreed (either “somewhat” or “strongly”) that the level of prevention, early intervention, intervention, and intensive intervention services for young children is adequate ranged from 13 to 23 percent. Respondents were most likely to “strongly disagree” that the amount of intensive intervention is adequate (56%).

When asked about the most pressing unmet needs of young children with mental health needs in Ramsey County, many highlighted the limited support available for families, especially those experiencing multiple challenges, and limited provision of information and resources. Others highlighted the shortage of appropriate services across the full continuum of care: assessment, referral, prevention, early intervention, and intensive services, including psychiatric services. Other identified needs included stigma and limited awareness of early childhood mental health, limited funding and insurance restrictions, and cultural barriers.

**Cultural appropriateness of services**

Most survey respondents (92%) disagreed (either “strongly” or “somewhat”) that there are enough culturally specific services for young children. They were slightly more likely to feel that culturally competent services are available, though more than two-thirds (68%) still disagreed.

Most respondents (82% to 94%) felt that service providers know at least “a little” about the following
things: cultural backgrounds and perspectives, culturally-specific programming, and culturally-competent programming. However, approximately half of the respondents (47% to 52%) felt that providers know only “a little” about those topics; and only 2 percent felt that providers know “a lot.”

The most-mentioned barrier to culturally competent services for young children is a shortage of providers from diverse backgrounds. Providers were also seen as lacking knowledge about cultural communities, including understanding of the ways in which different groups view mental health concerns. Reluctance of some cultural communities to seek assistance for mental health was also seen as a barrier. Other challenges include lack of interpreters, limited availability of services, negative provider attitudes, poor understanding of cultural competency, lack of funding, limited involvement of communities in planning services, and competition among agencies.

The most common suggestion on this issue was to provide training to staff to promote cultural competence. Others suggested increasing collaboration among agencies and communities, recruiting new staff, developing new services or improving existing services, expanding staff viewpoints, promoting public awareness of early childhood mental health, changing the political environment, and increasing funding.

**Overall effectiveness of the system**
Most respondents rated the system of care serving young children with mental health issues as “somewhat effective.” Fifteen percent rated the system as “not at all effective,” while only 2 percent felt that it was “very effective.”

**Overall perceptions of Foundations for Success**
More than 90 percent agreed (“somewhat” or “strongly”) that the goals of Foundations for Success would be difficult for any one agency to achieve by itself (96%), that their agency has something to gain from being involved (94%), that the partnership represents a good cross-section of the mental health system for young children (92%), and that they have a clear understanding of what the project is trying to accomplish (90%).

However, more than 20 percent of the respondents disagreed (“somewhat” or “strongly”) that there is a clear method for decision-making among project partners, that they are updated often about what goes on in the project, and that they have informal communication with others involved in the project.

Respondents had generally positive ratings of the individuals involved in the partnership. Almost all agreed (“somewhat” or “strongly”) that the partners had a high level of commitment to the project (98%), worked together to achieve group goals (98%), respected one another (97%), and made decisions using input from each other (97%). Ninety-two to 94 percent also agreed that the initiative includes the right players, that the partners communicate openly with one another, that they are open to different approaches about how the work should be done, and that partners fully participate in the group process. Fewer (83%) said that participants have a clear sense of their roles and responsibilities.

**Perceived impact of the initiative**
All respondents (100%) felt that Foundations for Success has already improved mental health services for children age 0-5. When asked to describe these improvements, many respondents mentioned the increased availability of services, including screening, prevention and intervention services. Others mentioned increased collaboration among professionals and greater awareness of early childhood mental health.

Almost all participants (96%) also felt that the project has helped shape policies for serving children 0-5 with mental health needs. When asked what kind of changes have occurred, respondents mentioned increased awareness of early childhood mental health, stronger connections to government agencies, and increased availability of screening.

At least 90 percent of the respondents felt that the initiative has resulted in a wide range of benefits. All respondents felt it has helped at least “a little” to create opportunities for joint planning among mental health, education, social service, child care, and health care agencies; to provide high-quality mental health services to young children and their families; to provide supportive services to young children and their families; and to improve the early identification of young children with mental health concerns.

Fifty-eight to 60 percent of the respondents felt that the initiative had helped “a lot” to create opportunities for joint planning, strengthen effective working relationships
among agencies, and develop strategies to share clear and up-to-date information on what kinds of assistance agencies offer. While most respondents felt that the initiative had helped in the following areas, they were least likely to say that it had helped “a lot” to: prevent children and families from “falling through the cracks,” increase the cultural competence of services, and coordinate services among agencies to meet the individual needs of children and their families. Thirty-one to 42 percent of the respondents felt that the initiative had helped “a lot” in these areas.

Respondents were enthusiastic about the potential impact. Almost all (at least 98%) felt that the initiative will help at least “a little” to develop a service system providing the full continuum of community-based services to children 0-5 with mental health needs, increase collaboration among all of the agencies that provide services to young children with mental health needs, involve parents and family members in the delivery of services to young children with mental health needs, and increase awareness of cross-cultural issues in the provision of services. One-quarter to one-third of the respondents (24% to 31%) felt that the initiative would help in these areas to a “very great extent.”

**Strengths of the project and recommendations for improvement**

Most said that their involvement in Foundations for Success has met their expectations so far, saying that the program has already accomplished a great deal and that they expect more benefits to come. Some felt that their expectations had not yet been met, but were optimistic about the project’s potential. Some said that their expectations had not been met due to factors such as lack of communication about the project, limited input in decision making, and failure to receive anticipated referrals.

When asked to identify the most positive thing that has emerged from the project, the most common response was the improved collaboration and service coordination among agencies. Others mentioned increased community awareness of early childhood mental health and improved availability of services, such as screening. Many respondents said that they would not change anything about the project, or that they did not know what they would change. Some said they would like more information about the project, while others said the partnership should be expanded. Specific recommendations included increasing the involvement of schools, parents, and representatives from different cultural communities. Some said that they did not have enough time to adequately participate in the project.

**Recommendations**

- Share more information and training regarding early childhood mental health, including:
  - Training for mental health professionals on working with young children
  - Training for allied professionals (such as medical personnel, child care providers, and school staff) to make appropriate referrals
  - Public information to increase awareness of early childhood mental health
- Continue and strengthen efforts to bring key stakeholders together to plan and coordinate service delivery.
- Develop a central directory of available services and referral procedures.
- Work with insurance guidelines and program eligibility requirements to appropriately cover services for young children with mental health issues.
- Provide additional support and referrals to families experiencing multiple challenges such as poverty, homelessness, and parents’ chemical dependency or mental illness; and reduce logistical barriers to service.
- Promote culturally competent services by training service providers, increasing numbers of culture-specific providers, and involving communities in planning and delivering services
- Continue to widely promote screening and referrals
- Address the limited funding and general shortage of services for early childhood mental health.
- Renew efforts to share information with key stakeholders and involve the full partnership in decision-making.

---

**For more information**

This summary presents highlights of the Foundations for Success report prepared in December, 2005. For more information about this report, contact Cheryl Holm-Hansen at Wilder Research, 651-647-6424 or cah1@wilder.org. For more information about the Foundations for Success project, contact Catherine Wright at the Community Action Partnership of Ramsey and Washington Counties, 651-603-5823 or cwright@ramseyactionprograms.org.

Author: Cheryl Holm-Hansen

DECEMBER 2005