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## Foundations for Success

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

### Views of the system of care for early childhood mental health

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.

The initiative is evaluated by Wilder Research. One component of the evaluation is an annual survey of individuals knowledgeable about mental health services for young children in Ramsey County. This report summarizes the results of the second survey administration, completed in fall 2006. The survey was designed to assess the existing system and to guide the future activities of the initiative. The survey was completed by 60 individuals, representing county government, non-profit agencies, school districts, and other agencies. Most of the individuals (88%) were directly involved in providing services to young children (age 0-5).

In general, the results of the 2006 survey were consistent with those obtained in 2005. Several differences did emerge across years, which are highlighted in this summary. Because a somewhat different group of respondents completed the survey each year, variation in results should be viewed with caution.

#### Views of the existing system

#### Level of resource sharing across agencies

Most survey respondents felt that resources were shared across agencies, though there was room for improvement. While most respondents (65%) agreed (either "somewhat" or "strongly") that available resources were shared, the percentage who agreed "somewhat" decreased from 63 percent in 2005 to 48 percent in 2006. Training resources or opportunities were most likely to be shared, with almost all respondents (96%) saying they were shared at least "a little." Volunteers were shared least often, with 71 percent of respondents saying they were "not shared at all." Funding, materials or equipment, and staff were shared sometimes.

Barriers to resource sharing were identified, including limited funding and staff time. To increase resource sharing, respondents requested increased opportunities for collaboration.

#### Ease of making and receiving referrals

More than three-quarters of the respondents agreed (either "somewhat" or "strongly") that they have adequate information about available services for young children with mental health issues (83%) and they are able to easily refer children to other agencies (79%). Respondents who "agreed strongly" that they are able to easily receive referrals from other agencies increased from 23 percent in 2005 to 43 percent in 2006.

While most respondents were able to make and receive referrals, they also identified factors that

prevent referrals. Many said that they had limited knowledge and information about available services and providers. Others felt that referrals were limited by long waiting lists, a lack of insurance coverage, limited staff time, a complicated referral process, language barriers, and limited funding.

The most common suggestion for easing the referralmaking process was to disseminate information about available services. Promoting collaboration and communication among agencies, increasing services and providers, and creating a common referral system were also recommended.

#### Adequacy of funding

Funding for early childhood mental health services was generally seen as inadequate. The percentage of respondents who disagreed at least "somewhat" that funding was adequate increased from 84 percent in 2005 to 97 percent in 2006.

Limited funding sources were seen as a major cause of the inadequate financial situation, including funding cuts. Other felt that early childhood mental health was not seen as a legislative priority and that the public does not adequately respondents understand or recognize early childhood issues.

Respondents had several ideas for improving the funding situation. Most often, they suggested increasing advocacy and support at the legislative level. Advocacy work was recommended for policy makers, legislators, community leaders, and parents. Other recommendations included increasing mental health education, promoting mental health research, and increasing prevention and intervention services.

#### **Barriers to access**

Respondents were asked to rate the extent to which a variety of factors prevented families from accessing mental health services. Virtually all respondents said that issues such as a lack of transportation, difficulty finding child care for other children during appointments, difficulty completing daily living tasks, stigma associated with mental health services, and a lack of food, clothing, or other necessities interfered with services at least "a little." They were especially likely to emphasize the impact of limited information, with more than 80 percent saying that a lack of information about emotional/behavioral issues in young children and limited information about available services for young children interfered "a lot."

When asked to identify other factors that may prevent families from accessing services, most respondents highlighted the lack of support and services for parents and families. Respondents emphasized families' financial situation and parents' own unmet mental health needs. Other barriers included cultural differences and language barriers, the lack of financial resources and insurance coverage, and the lack of qualified providers.

Respondents provided several recommendations for improving access, especially increasing the amount of available services and providers. Several respondents recommended increasing in-home services and educating the public on early childhood mental health issues. Other suggestions included increasing collaboration among agencies, increasing financial aid and low cost services for families, increasing information about available services, and employing diverse and bilingual providers and staff.

#### Adequacy of available services

Most respondents felt that there is not an adequate amount of current services for young children. The percentage who agreed (either "somewhat" or "strongly") that the level of prevention, early intervention, intervention, and intensive intervention services for young children was adequate ranged from only 5 to 14 percent. Respondents were most likely to "strongly disagree" that the amount of intensive intervention was adequate (59%).

When asked to identify the most pressing unmet needs of young children with mental health issues in Ramsey County, many respondents highlighted the limited support available for families, including inadequate education for parents to help their children and parents' own unmet mental health needs. Others highlighted the lack of access to qualified providers and a shortage of appropriate services across the full continuum of care, including assessment, prevention, early intervention, and intensive services.

#### Cultural appropriateness of services

Most survey respondents (91%) disagreed ("strongly" or "somewhat") that there are enough culturally-specific services for young children. They were slightly more likely to feel that culturallycompetent services were available, though more than half (59%) still disagreed. Most respondents (89% to 98%) felt that service providers know at least "a little" about cultural backgrounds and perspectives, culturally-specific programming, and culturally-competent programming. However, approximately half of the respondents (46% to 56%) felt that providers only knew "a little" about these topics; only 4-8 percent felt that providers knew "a lot."

Respondents identified several barriers to providing culturally competent services to young children. The most prevalent response was that there was a shortage of well-trained providers, including individuals who are bilingual or from culturally diverse backgrounds. Respondents also identified inadequate staff training, limited understanding of families' needs, and perceptions of mental health within different cultural communities as barriers to culturally competent services.

Survey respondents provided a range of suggestions for effectively addressing these challenges. The most common suggestion was to provide cultural competency education and training to providers and other staff. Others suggested employing and supporting diverse and bilingual providers and increasing funding for culturally-based services.

When asked what else could be done to improve cultural appropriateness of services, respondents again highlighted the importance of training for service providers and staff. Other recommendations included learning about cultural communities and working with leaders from those communities, increasing collaboration among agencies, and employing diverse staff.

#### Overall effectiveness of the system

Most respondents (91%) rated the system of care serving young children with mental health issues as "somewhat effective." The percentage of respondents who rated the system as "not at all effective" decreased from 15 percent in 2005 to 5 percent in 2006. Four percent of respondents felt the current system of care was "very effective."

### Perceptions of the Foundations for Success initiative

#### **Overall perceptions of the partnership**

While ratings of the Foundations for Success partnership had been positive in 2005, ratings were even more positive in 2006. All respondents agreed (either "somewhat" or "strongly") that the goals of Foundations for Success would be difficult for any one agency to achieve by itself, their agency has something to gain from being involved in the project, and the partnership represents a good cross section of the mental health system for young children. There were large increases across years in the percentage of respondents who "strongly agreed" that there is a clear method for decision making among partners (from 44% to 60%) and that they have a clear understanding of what the project is trying to accomplish (from 30% to 48%).

The level of communication about the initiative received lower ratings. Approximately 30 percent of the respondents disagreed ("somewhat" or "strongly") that they have informal conversations with others involved in the project (31%) and are updated often about the project (29%).

Respondents had generally positive ratings of the individuals involved in the partnership. At least 96 percent agreed ("somewhat" or "strongly") that the partners had a high level of commitment to the project, respected one another, are the appropriate people to include in the process, made decisions using input from each other, communicate openly with one another, are open to different approaches about how the work should be done, and fully participate in the group process. Ninety-two to 93 percent agreed that the partner work together to achieve group goals and have a clear sense of their roles and responsibilities. The percentage of respondents who "strongly agreed" that partners have respect for one another increased from 64 percent in 2005 to 88 percent in 2006.

#### Perceived impact of the initiative

All respondents felt that Foundations for Success has improved mental health services for children age 0-5. When asked to describe these improvements, many respondents mentioned the increase in services, especially screening. Others highlighted increased collaboration across agencies and a greater awareness of early childhood mental health.

Compared to 2005, respondents were less likely to feel that the project has helped shape policies for serving children 0-5 with mental health issues (with a decrease from 96% in 2005 to 77% in 2006). Those respondents who felt that there had been changes typically mentioned increased collaboration among agencies, increased involvement at the state and county levels, and changes in agency practices, including screening and assessment practices.

At least 90 percent of the respondents felt that the initiative has resulted in a wide range of benefits. All respondents felt it had helped at least "a little" to improve the early identification of young children with mental health issues, strengthen effective working relationships among agencies, increase or improve communication among agencies, and increase the appropriateness of the services young children receive.

At least 60 percent or more of respondents felt that the initiative had helped "a lot" to strengthen effective working relationships among agencies, enhance service coordination, provide supportive services to young children and their families, develop strategies to share clear and up-to-date information on what kinds of assistance different agencies offer, and create opportunities for joint planning between mental health education, social service, child care, and health care agencies. Respondents who felt the initiative helped "a lot" to improve the early identification of young children with mental health issues and to enhance service coordination increased to about 60 percent from 42 percent in 2005.

While most respondents still felt that the initiative had helped in these areas, they were least likely to say that it had helped "a lot" to increase the cultural competence of services and prevent children and families from "falling through the cracks." Respondents who felt the initiative had helped "a lot" to increase the cultural competence of services to young children decreased from 38 percent in 2005 to 21 percent in 2006.

Respondents were enthusiastic about the potential impact of the initiative. Almost all respondents (at least 96%) 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 services, involve parents and family members in the delivery of services to young children with mental health needs, increase collaboration between all of the agencies that provide services to young children with mental health needs, and increase awareness of crosscultural issues in the provision of services. One-fifth to one-third of the respondents (18% to 30%) felt that the initiative would help in these areas to a "very great extent." The percentage of respondents who felt the initiative will develop a service system providing the full continuum of community-based services to children 0-5 with mental health needs to a "very great extent" decreased from 31 percent in 2005 to 19 percent in 2006.

# Strengths of the project and recommendations for improvement

Many respondents felt that their involvement in the Foundations for Success project has met their expectations, indicating that the program has made progress and has strong leadership. Some respondents indicated they were not involved with the initiative, while others said that it was too early for expectations to be fulfilled.

When asked to identify the most positive thing that has emerged from the project, respondents were most likely to mention the increased levels of collaboration and service coordination across agencies. Other benefits were the addition of services and increased awareness of early childhood mental health.

Many respondents said that they would not change anything about the project, or that they did not know what should change. Others recommended more collaboration among agencies, increased awareness of the initiative, increased funding, increased public awareness and reduced stigma, and integration of the initiative into the overall system of care.

#### **Conclusions and recommendations**

While there were some changes in survey results between 2005 and 2006, in general the recommendations issued last year should continue to be addressed by the Foundations for Success partnership. The following conclusions and recommendations should be considered:

A dominant theme in this report is the importance of sharing more information and training related to early childhood and mental health. The partnership should continue to explore opportunities to provide: (1) training for mental health professionals to increase their ability to work with children 0-5; (2) training for allied professionals (such as medical personnel, child care providers, and school staff) to increase their ability to recognize early childhood mental health issues and make appropriate referrals); and (3) community education to increase the public's awareness of early childhood mental health.

- Many respondents felt that there is collaboration across agencies working with young children and that the initiative can play an important role in bringing key stakeholders together to jointly plan and coordinate services. However, many also felt that there was a need for additional collaboration. While time is clearly limited for some providers, it is important to continue to provide opportunities for agencies to learn more about each other and to work more closely to coordinate services.
- Insurance issues were raised as a barrier that prevents services, such as restrictive eligibility guidelines and requirements for reimbursement. Efforts to share information about services for young children with mental health issues, including concerns regarding diagnostic assessment, should be continued in order to revise these policies.
- Many respondents highlighted the difficulties of providing services to young children who may be living in families experiencing multiple challenges, especially parents' own mental health concerns. Strategies for providing additional support to families should be considered, such as sharing additional resources

and referrals, providing transportation and child care to facilitate service delivery, and making services more convenient.

- Culturally-competent and culturally-specific services were seen as limited and many respondents felt that providers needed more information to provide appropriate services. To promote more culturally-competent services, several strategies should be pursued, including providing additional training to service providers, increasing numbers of culturally specific providers, and involving communities in planning and delivering services.
- Foundations for Success was seen as a positive approach towards improving services for young children. Respondents were especially likely to feel that it would play an important role in improving collaboration, promoting broader awareness of early childhood mental health, and increasing access to screening. To ensure that the initiative meets its goals, ongoing efforts to share information with key stakeholders and involve the full partnership in decision making will be important.

#### For more information

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