Investing in Young Children’s Mental Health: Promoting School- and Life-Readiness

By Martha Farrell Erickson and Christopher L. N. Watson

Four-month-old Jackson lies crying in his crib, wet, hungry and increasingly agitated by the voices of his parents, who argue loudly nearby. When his mom, Stacy, starts to cry, Jackson’s dad, Curt, stomps outside, slams the screen door and shouts over his shoulder, “There’s no way in hell I can work enough hours to pay all these bills while you just sit home with this kid!”

Stacy slumps onto the couch and continues to sob, remembering how excited she and Curt had been when their tiny baby finally came home from the hospital after all the uncertainty around his premature birth. But now the sleepless nights, the mounting bills, and their powerlessness to calm this tiny, fussy baby are taking their toll; Stacy feels like she just wants to go to sleep and never wake up.

How will Jackson’s mental health, now and in later years, be shaped by what he is experiencing in this stress-filled household? What does he, an underweight, hard-to-soothe baby, bring to the equation that will determine his capacity to manage emotions, relate positively to others, and explore and learn from the world around him? And, most important, where are the windows of opportunity for Jackson and his
parents to get the support and help that will see them through this challenging time and on to better outcomes as individuals and as a family? These are the kinds of questions and challenges that define the field of infant and early childhood mental health.

Many people are surprised by the notion that young children – let alone infants – can possess “mental health.” Even more incredible to some is the assertion that our youngest children can develop mental health problems that contribute to poor outcomes in the future, or that babies can become so distraught that they literally stop eating. The reality is that the foundations of mental health are established in the first years of life. The “health” in mental health includes the critical skills children need to participate in learning activities and thrive in all areas of life, including the regulation of emotions and behavior, the development of trust and empathy, the establishment of a healthy degree of autonomy, and the development of self-efficacy. These foundational strengths develop through ongoing interactions with parents and other caregivers and are shaped by factors within the child, parents (including parental mental health), family, neighborhood, and larger society. All subsequent learning and development build on these foundations. Thus, investing in young children’s mental health is, in fact, one of the most important ways to promote school readiness and reduce educational disparities.

Carol Siegel, a Field Faculty member of the Center for Early Education and Development (CEED) at the University of Minnesota, writes in CEED’s Tip Sheets series (Siegel, 2004), “infant mental health is a developmental process” (p. 1). She notes that it results from the interplay between children’s inborn character-

Infant mental health is the optimal growth and social-emotional, behavioral, and cognitive development of the infant in the context of the unfolding relationship between infant and parent. – Minnesota Infant Mental Health Services Feasibility Study, 1998
between child and adult is the result of this interactive process. Attachment theory is about “how infants use adults to teach them how to survive...until they can do it for themselves,” writes Anne Gearity (another CEED Field Faculty member) in a previous issue of *Early Report* (Gearity, 1996, p. 1). “We know this survival is psychological as well as physical; children need sustenance, protection, and regulation to feel safe and to be able to grow and increasingly take care of themselves.”

The ability, and necessity, of children “using” adults to learn to survive on their own is demonstrated at each developmental stage in early childhood. In the baby, it is at play when the infant cries for food or comfort, and the adult responds. This action-reaction sequence repeated time after time teaches the child several key concepts, among them: “when I cry someone cares enough to come to me”; “when I am upset I can count on getting help to calm down”; and “I’m important! I have the power to draw people to me!” Herein lie the foundations of self worth, behavior control, and self-efficacy.

For the older infant and toddler, having a consistent, responsive caregiver provides the child with a secure base from which to explore the world. Each time the child plays with an unfamiliar toy, ventures into a new place, or encounters a stranger, she or he can either check with the caregiver to make sure everything is all right or return to the adult for “recharging.” Whatever life brings into the child’s world is buffered by the reassuring presence of the caring adult.

The preschooler learns to use adults to provide a consistent and predictable schedule of activities, mediate conflicts with peers, and solve problems. Although he or she sometimes rebels against rules and other limits, the preschooler derives security and a sense of calm and safety from the boundaries set by adults.

To support young children’s mental health, families need easy access to a variety of services and support, from basic information on child development for new parents to very intensive interventions for families experiencing more serious issues. Many mental health problems are preventable. Even non-preventable disorders can be ameliorated – and children’s long-term prospects for learning and development can be improved – through early identification and intervention. A variety of people and systems surrounding the family can help.

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The focus of all infant mental health work is to support healthy relationships between young children and their primary caregivers. As mental health work is extended up through the preschool years, it expands to support the child in relationships with other caregivers, teachers, and peers. It is not about relying on medications or other behavior management solutions in isolation. The goal is to provide opportunities for children to successfully interact with, learn from, and connect with, others. As the saying goes, “It’s all about relationships.” We all become contributing members of our communities through our relationships with our families, friends, and co-workers.

There is no single system that touches the lives of all young children, so efforts to support mental health must be directed to the many people and systems that interact with young children and their families, including childcare providers, preschool teachers, primary care physicians and nurses, social service providers, and employers. Thus, we need systematic ways to engage and educate those groups in how to promote healthy social-emotional development, recognize risk, and encourage families to get the help they need. Because mental health professionals often have inadequate education in early development and parent-infant relationships, there also is a pressing need to build the capacity of mental health professionals to serve young children and their families and provide consultation to other “frontline workers” who serve them, including nurses, child care providers and teachers.

To succeed in promoting young children’s mental health, we need to get serious about developing, disseminating, and sustaining evidence-based prevention, intervention, and treatment approaches.

Three key opportunities for investment include:

1. Rigorous evaluation of intervention strategies through university-community research partnerships.
2. Timely and efficient dissemination of research findings and information on best practices.
3. Continuous high-quality training, consultation and support for service providers to ensure program fidelity and service quality.

References


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Natalia Yzaguirre doesn’t like to think about what her life and her relationship with her daughter, who is now five, would have been like without Steps Toward Effective, Enjoyable Parenting (STEEP™)* and her home visitor Kathi Bloomquist.

Clean of methamphetamines not even a year when she became pregnant with Raven, the 24-year-old had a very difficult pregnancy, rife with health issues and a deep depression, exacerbated when her doctors took her off antidepressants in an effort to control gestational diabetes. Then after a harrowing labor and delivery, she was discharged with no support system and few if any infant-care or parenting skills. She was soon at her wits end with her newborn and felt she had nowhere to turn.

Days after she was released from the hospital, she returned with her screaming infant, who was diagnosed with an ear infection. Yzaguirre, weeping uncontrollably herself, was asked gently by the attending nurse if she’d ever heard of STEEP™ and whether she might like to try it. She agreed, and within hours someone was at her home.

“I didn’t have a close woman in my life,” says Yzaguirre. “My mother didn’t really raise us; I was raised by my dad. So I didn’t really know how to be a mom, and I didn’t really have a mom. I needed somebody physically, mentally, and emotionally, and then I met Kathi [Blomquist] and I thought, with relief, finally someone’s here to help me!”

Over the next three years, Yzaguirre and Blomquist formed a deep relationship that filled that gap in Yzaguirre’s life. She says it was an incredible safety net to know that Blomquist was only a phone call away, day or night, “She’s my hero. She’s a great person, warm and generous, and I could always call on her if I needed help, or wanted to tear my hair out, or was in a panic and didn’t know what to do.”

Not only did Blomquist help by being a maternal figure Yzaguirre could rely on, she also used a very powerful tool during her bi-weekly home visits. By videotaping the interactions between mother and baby, Blomquist enabled Yzaguirre to see her own relationship with Raven evolve and grow deeper and stronger. Seeing their relationship more objectively, without the interference and stressors of everyday life – trying to get laundry done

* Steps Toward Effective, Enjoyable Parenting (STEEP™). Guided by attachment theory and research, STEEP™ works on the premise that a relationship with a sensitive, responsive parent helps a baby develop trust, confidence, motivation and the ability to regulate emotions and behavior. For further information about STEEP™, see articles on pages 17 and 21.
or get out the door — was invaluable. The videos taught her how she might have handled a situation differently and also reinforced that there were many things she was doing well.

“There’s video of us at the park, and I noticed how much I kissed her and cuddled her. The videos made me realize how fast Raven was growing and that I needed to appreciate every moment.”

The other powerful piece of the STEEP™ puzzle was the bi-weekly meeting where Yzaguirre met other women who had similar misgivings and fears about their parenting skills, “Other people would say to me, ‘Why aren’t you happy? You should be happy — you’ve got a new baby!’ I thought there was something wrong with me until Kathi introduced me to the group where moms from all walks of life were all feeling the same things I was feeling.” The group sessions were a nice way to refresh, reenergize, not have to pay for childcare. Both Yzaguirre and Raven looked forward to them a great deal: “I liked that the kids learned how to interact with each other and got social skills and that we learned to be better parents all at the same time.”

Yzaguirre says STEEP™ gave her many other life-changing gifts besides a healthy, loving relationship with Raven. She says without it, she would never have had the strength to stop the cycle of co-dependency and neglectful parenting in her primary relationship and family of origin. With the backing of Blomquist and her STEEP™ group, she left her meth-addicted boyfriend. “Being in STEEP™ made me realize that I could do it without a spouse. I went back and forth, thinking I needed a family unit, probably not the healthiest thing for her, more unhealthy than healthy. Just seeing other women doing it and the support from them gave me the strength to walk away from him and keep myself clean.”

STEEP™ indirectly taught Yzaguirre the importance of picking a mate with good parenting skills and the ability to have a healthy relationship, something she has in her current relationship, “Finding Tom later, it wasn’t me just jumping into another bad relationship — he’s a great parent and a very loving, kind man.”

While STEEP™ helped her appreciate her father and the sacrifices he made to raise her and her sister more deeply than ever, she also gained the strength she needed to stand her ground on her style of parenting. “I finally knew how I wanted to do it — I was given the tools to learn that, so I could say to my dad, ‘I love you, but I’m going to do things my way, not your way.’”

All in all, Yzaguirre believes that without STEEP™, she would have been doomed to repeat the mistakes of her parents. “I think our bond is way stronger, and we had a better relationship because of STEEP™. I had someone there to help me parent, and I can’t say how grateful I am.”

For more information about training for the STEEP™ program, visit http://education.umn.edu/CEED/coursesandtrainings/trainings/steepsib.htm or call 612/625-3058.

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Environments Support Early Essential Relationships

By Barbara Murphy

Young children in our country can spend thousands of hours in childcare settings, away from home, in the first five years of their lives. Over the past several decades, a great deal of research has looked at the effect of quality of care on children’s development, but it is only in the last 10 years that researchers have begun to consider the effects of the physical environment specifically. One such pioneer researcher was Anita Rui Olds, a developmental psychologist turned architect. After years of studying children in childcare settings, she concluded that the majority of childcare settings were operating as institutions instead of as homes-away-from-home, which is what children need. Olds understood that the physical space in which children spend most of their day has a powerful effect on the development of mind, body, and spirit (Olds, 2000). Other recent research on children’s development shows that children grow and learn best in the context of relationships with the people and places that reflect their families, cultures, and communities, and that they must feel comfortable and secure for healthy development and learning to occur. Because many children spend the majority of their waking hours away from their homes and families, early childhood programs need to create environments that help children maintain connections with their homes and families while they form new relationships with adults and peers and become part of a larger community. When environments are cozy and homelike, they support strong connections among the people there, as well as a sense of belonging and security.

Creating early childhood environments that have a home-like feel is very do-able. The arrangements and provisions in the physical environment create the context for the social-emotional climate and quality of interactions among the people there. Some practical considerations that promote relationship building in early childhood settings are:

- Create entryways, hallways, and other areas of the building that give an initial impression of welcome. Pay careful attention to the warmth and comfort of these communal spaces in terms of organization and aesthetics, which will convey a sense of openness, belonging, and invitation to connect with others.

The physical space in which children spend most of their day has a powerful effect on the development of mind, body and spirit.

- Purchase furnishings that foster relationship building, such as adult-sized couches or loveseats where adults and children can sit together comfortably, as well as child-sized chairs, tables, and shelves where children can sit together and manage themselves independently.

- Install lighting that is homelike, utilizing natural or indirect sources. Warm colors, interesting textured fabrics, plants, water, fish, and gardens have
all been shown to create an atmosphere where people feel emotionally and physically at ease.

- Create adequate, attractive, well-organized storage areas, which would eliminate the clutter that accumulates in so many early childhood programs.
- Fill classrooms with interesting and inviting materials and activities that reflect the individual identities, as well as the families and cultures, of the children, such as family photo boards, displays of children’s work and objects from home.
- Plan that some of the equipment and materials would require or suggest use by more than one person and encourage collaboration and connection among children. The environment would be rich with open-ended materials that are suited to developmental needs of the children.

- Finally, staff the environment with adults who are knowledgeable about children and are friendly, warm, and nurturing as well as respectful of all children and families.

Further Information


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Questions About Kids is a series of handy fliers that answer questions frequently asked by parents and early childhood educators. They are available on the Web at http://education.umn.edu/ceed/publications/questionsaboutkids/, and titles include the following:

- Am I spoiling my baby?
- Do dads really matter?
- How do I get to know my newborn?
- How can I survive these temper tantrums?

- Can a mom’s depression affect her toddler or baby?
- How can I get my baby to sleep through the night?
- What does it mean when my young child is assessed?

The Questions About Kids Series is available in Hmong, Somali, and Spanish.
What is Meant by “Infant Mental Health?”

Infant mental health refers to an infant’s intellectual, physical, and emotional growth and development. Unlike the term adult mental health, which usually describes a defined outcome, infant mental health is a developmental process. It is based on children’s inborn characteristics, such as their temperament, their interactions with their caregivers, and the environment in which they are raised. This means that children’s development depends on their parents and other caregivers to provide a “good enough” environment. British pediatrician and psychoanalyst D.W. Winnicott coined the term “good enough” when he described an environment where parents respond consistently enough and well enough to their children. From those consistent responses, children learn to expect care, comfort, and pleasure in their achievements. And “good enough” means exactly that — good enough. No parent responds to babies’ cries each time, nor should they. It would not be good for babies to have their every uncomfortable feeling soothed from the outside, because then they would not learn how to wait, to tolerate some discomfort, and to soothe themselves.

Over time, as babies are cared for, responded to, and encouraged to grow and develop. They form the expectation that the world is a safe, interesting place and the people in it are responsive and kind. As they grow, babies who have a positive expectation of the world around them develop more satisfying relationships with other adults and children, are better able to handle everyday stresses, and show greater curiosity and interest in learning.

How Do I Learn to Provide a “Good Enough” Environment for My Baby?

Most parents naturally give babies the attention and responsiveness that they need. It feels natural because we learn how to hold, comfort, and delight in our babies from our parents. Parenting is not instinctive — it is learned from our experiences as children. Some parents were not given consistent positive attention, encouragement, and empathy when they were children. It is very difficult to “naturally” transmit these qualities to the next generation when they were not provided to you. However, babies and parents are predisposed to connect with each other, and you can learn to provide a “good enough” environment for your baby to get your relationship off to a secure start.

Connection

More than anything, babies need to connect with their parents. As newborns, they need contact through touch and sound as much as they need food. Many parents are confused if their babies still cry even though they are fed and changed. Sometimes parents are afraid that holding a baby just because the baby “wants attention” will lead to spoiling. When a baby cries and a parent responds, the baby learns that there is a connection and begins to expect to be cared for. That is what happens when the baby stops crying just by hearing your voice or your footsteps, or by being picked up. Contrary to the fears about spoiling, holding and comforting a baby helps the baby feel secure and comfortable. Will the baby expect you to hold him or her when upset? Yes, and that means your baby has connected you with care and comfort. You have succeeded!
Education

Educate yourself about your baby's developmental needs and stages. This knowledge helps you respond to your baby's needs when your "instinct" does not. For instance, if your baby begins to fuss even though fed and dry, you will know that babies get bored, as all people do, and need new stimuli for learning and entertainment. Knowing what your child can do during different developmental stages can help control your frustrations.

Empathy

Emotional understanding builds a strong relationship between parent and child. Start when they are babies and toddlers. Children whose parents acknowledge their feelings, even when they do not give in to their demands, are easier to comfort and satisfy than children whose feelings are ignored. One way to build emotional understanding and empathy is to try to understand an event from the child's point of view. That helps your child believe that you are on their side. It does not mean that you give in to your child's wishes or change your plans, but children do much better when their wishes are acknowledged even if they are not granted. A small amount of reassurance and acknowledgment can help your child learn to adjust to disappointment without falling apart ("You didn't like it when I said no to ice cream. I know you really wanted that ice cream. Now let's go ride on the swings.").

Emotional understanding also helps children learn that their feelings and behavior are connected. Even with your baby or toddler, the more you acknowledge that your child's behavior and feelings are connected, the more your child will feel understood. Over time, they can learn that feelings and behavior are separate — that it's possible to be mad but still not throw a fit.

A "Good Enough" Environment Over Time

Parenting groups, friends, family, counseling, and books and articles about parenting can help you maintain the relationship you want with your child as they grow. Parenting presents new challenges as children develop. Staying connected with a young baby requires different parenting techniques, education, and empathy than staying connected with a two-year-old or a teenager. Luckily, parenting groups for parents of older children offer contact with people who have survived or even flourished during the parenting years. Many are more than willing to share ideas with others. Creating a supportive environment for yourself with experienced parents, friends, and family members will help you provide a "good enough" environment for your child.

For More Information

For more information, please see the Web sites below. Each site will provide links to additional Web sites and materials about parenting and child development —

- http://www.zerotothree.org/ztt_parents.html
- http://www.pbs.org/wholechild/

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Questions About Kids is on the Web at —
http://www.harristrainingcenter.org
http://education.umn.edu/ceed

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