

## Research-Informed **Social-Emotional Health Strategies**

1. **Assess the likely health equity impacts of public policies**, including legislative, regulatory and administrative policies, and provide recommendations to reduce identified impacts.
2. **Integrate mental health, physical health and primary care.** Integrated behavioral health care within the patient-centered medical home (PCMH) is a particularly promising strategy to reduce barriers and increase access to mental health care across pediatric populations.
3. **Use a collaborative care model across child-serving systems to ensure attention to early childhood mental health is infused throughout.** Build increased cooperation between mental health providers and the health, education, family supports, and child welfare systems at the community, county and state levels to implement a comprehensive, shared framework for advancing young children's mental health and social-emotional development.
4. **Use data to track community needs, available services, and racial disparities in service provision and outcomes, and use the data to adjust provision of services appropriately.**
5. **Promote public awareness of the impact of early experiences on success in school and life.** Emphasize the importance of social-emotional development for children to succeed in school, be healthy, and enjoy financial stability in adulthood.
6. **Address stigma around mental health and build trust in services, particularly in communities of color.** Mistrust of mental health services deters many individuals from seeking treatment for mental illness.
7. **Expand screening and early identification activities, using diagnostic and screening instruments that are valid for minority populations, to detect social-emotional problems in infants and toddlers**, such as relationship disorders, depression, and self-regulation problems. **Include screening for family risk factors that might affect children's social-emotional development**—for example, poverty, pre- and postnatal parental depression, family isolation, parental mental illness, or parental substance abuse.
8. **Ensure equitable access for linguistically and culturally diverse children and families to a system that includes health care, home visiting, early intervention and high quality early care and education, and a comprehensive array of services from prevention to treatment.**
9. **Improve access for parents and expectant parents to screening, services and supports for substance abuse and addiction, family violence, depression, and other adult mental health disorders**, including by using two-generation strategies.
10. **Ensure access to high quality parenting programs, adult education and workforce training supports**
11. **Improve access to health insurance for children and parents and ensure that children's insurance and Medicaid payment policies provide coverage** for developmental screening, including screening for social-emotional health, payment for preventive services, and payment for appropriate treatments.

12. **Ensure that health care institutions are welcoming and respectful to people of different races and ethnicities** by providing culturally and linguistically competent staff, curriculum, and policies. Attention to providers' cultural and language competence leads to improved mental health outcomes and greater adoption of effective practices
13. **Recruit, train and retain mental health providers of color.**
14. **Build capacity and competence in infant and early childhood mental health practice among providers that serve young children and families by expanding professional development.**
15. **Support the inclusion of ACEs screening and trauma-informed care across governmental agencies at the state and county levels.**
16. **Address social-emotional health and social-emotional learning in schools,** including building social-emotional skills and capacities of children, parents, teachers, service providers and school leaders
17. **Create policies across sectors that collectively lower the burden of stress on families** due to the often interrelated threats of poverty, crime, mental illness, substance abuse, discrimination, and community violence, and support parents and other caregivers in their roles as nurturers and providers.
18. **Encourage family-friendly employment policies.** Employment policies that improve the stability of working hours, give parents more control over their work times, and improve conditions for young low-income parents, including paid family leave for the birth of a child, paid sick leave, and predictable scheduling, promote bonding and attachment, and help new parents get their babies off to a good start in life.
19. In the absence of sufficient mental health system funding, **blend funding sources by centralizing program delivery and creating processes and relationships that establish early childhood systems that can leverage the various funding opportunities.**
20. **Eliminate lead hazards and other toxic substances** in housing, child care locations, schools, and water