



The Journey to Infant and Early Mental Health Overview of Study and Training

About the Model

Nurturing the Seed: A Developmental Support Model for Indigenous Children and Their Families (NTS) provides caregivers with everyday activities to help the child grow and learn by supporting the child-caregiver relationship. The resource has been developed in partnership with Indigenous practitioners and Elders from across Canada. The goals of the initiative are to:

1. Support the mental health of every child from birth to the age of six;
2. Strengthen the knowledge and skills specific to infant and early mental health among community-based agencies serving this young population and their families;
3. Evaluate the impact of Nurturing the Seed on child outcomes, caregiver stress and practitioner knowledge.

The NTS model offers practitioners a resource to assist in the creation of a Developmental Support Plan (DSP) that provides caregivers with a developmental goal and strategies to support a child's development, particularly when a history of intergenerational trauma due to residential school or other factors may be present. The strategies are intended to provide interim support while a child who has an identified developmental concern may be waiting for further assessment or services.

One of the unique features of the NTS project is that it is co-designed with each of the communities involved. As a result, each community looks slightly different in terms of the data collected.

All members of the research team are trained in Ownership, Control, Access and Possession (OCAP) Principles to ensure that data are ethically owned and controlled by the Indigenous people involved. IMHP and its partners are committed to learning from and working with the communities to create a positive experience for all participants.

Caregivers are active collaborators in this model. Practitioners/helpers work with families to understand a child's development and identify any areas in which a child may benefit from additional support. While the best response may be intensive services, these are not always readily available. NTS provides every practitioner with the knowledge, skills and tools they need to create an immediate developmental support plan that is caregiver-friendly and child-focused. Caregivers and practitioners complete a developmental screen together, four times a year. After the second screen, a child and their family will receive a developmental support plan that provides child-specific goals and strategies a caregiver can use during everyday routines to support the child's development. All strategies are relationship-based and easily embedded in daily routines. Ultimately, the goal is to strengthen a child's development and reduce caregiver stress.

A family's participation in this initiative and its evaluation is voluntary, and they may withdraw at any time without any effect to their future care. All information obtained during this evaluation is strictly confidential and the child's identity is protected at all times.

To be sure that identities are protected, we use ID numbers instead of names. Any information collected is stored in locked files within the community and is available only to the community worker(s) interacting with each family. Specific children will not be identified in any written reports. Additionally, there is a set of optional questionnaires which caregivers can choose to complete to strengthen the understanding of how caregivers are feeling about their child's development and what parts of this initiative are most helpful.

Phase 1: Community Mobilization and Advisory

- Community Advisory Committee formation
- Focus groups with practitioners and families
- Engagement to determine community champions and desired training and implementation modalities

Phase 2: Training and Implementation

- Web-based, 3-part training on Infant and Early Mental Health, Using the Ages and Stages Questionnaires (ASQs) tools, and Creating Developmental Support Plans, as well as study protocols
- Community practitioners implement NTS with families and document progress
- Coaching and mentoring is provided by the project team towards implementing the model

Phase 3: Evaluation Measures

- Practitioner experiences - implementation captured using surveys, key informant interviews, and focus groups
- Evaluation of caregiver experience - using surveys, key informant interviews and focus groups
- Child outcomes - using the ASQs at 4 intervals

The implementation of this model will not require ongoing resources once capacity is built in communities. NTS is about building and enhancing the knowledge and skill of workers – it is a shift in practice and pairing with other resources and tools already used in communities.

Full implementation will involve partnerships with local Chiefs and Councils, health promotion agencies, child welfare agencies, and others serving Indigenous children.

Partners

- Program Development & Training: Infant and Early Mental Health Promotion, SickKids Learning Institute, Toronto, Dr. Chaya Kulkarni, Director, and Nicole Tuzi, Training Coordinator
- Evaluation: Queen's University, Dr. James Reynolds, Associate Dean of Graduate Studies and Scientific Director of Kids Brain Health Network
- Public Health Agency of Canada, Mental Health Innovation Fund

For more information, please contact Chaya Kulkarni , Director, Infant Mental Health Promotion, at 647-285-7407 or chaya.kulkarni@sickkids.ca.

