

A Model for Embedding Infant Mental Health in Community Health and Social Services

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In December of 2014, the Public Health Agency of Canada (PHAC) provided funding to Infant Mental Health Promotion at the Hospital for Sick Children to create a collaborative, community-based process to explore the current landscape for infant mental health in Ontario. Through this project, IMHP consulted with five communities in Ontario (Niagara, Simcoe, Muskoka/ Parry Sound, Ottawa, and Regent Park Toronto) to gain a better understanding among all agencies and sectors concerned with infant mental health as to the existing gaps or barriers, opportunities for improved service delivery, and potential solutions for inter-systemic supports.

Model Objectives

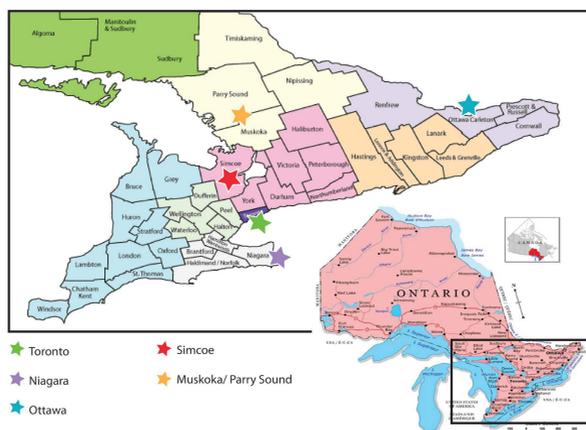
- **Assess the strengths** of current infant mental health programs, services, and initiatives in each community.
- **Identify opportunities** to improve current practices, policies, and knowledge around infant mental health.
- **Strengthen collaboration** between agencies and sectors within the community to improve services for infants, toddlers, and their families.
- **Produce a report** for community partners to be shared with key decision makers and to be used as a work-plan for the community.

Methods: Learning About Each Community

The process consisted of **facilitated face-to-face meetings** with senior level staff who best understood their agency's current practices and policies concerning infant and toddler population. Community tables were gathered to include representation from all service sectors working with infants and families, including a **combined 81 agencies** from: Child Protection, Early Learning and Care, Public Health, Education: Pre-K Programs, School Boards, Early Intervention Services, Children's Mental Health, Young Parent Support Agencies, Hospitals and Community Health Centre, and Existing Collaborations and Planning Tables in the Community.

A template was created to **examine core prevention and intervention activities, competencies, and organizational policies**, guided by the Infant Mental Health Promotion Best Practice Guidelines (2011). The information was organized into the categories below:

- Current programs and/or services considered to be part of the system of infant mental health services that were available to all families or targeted toward high risk families.
- Current strategies for developmental screening and what aspects of this looked at mental health.
- Current early intervention programs with a focus on those addressing infant mental health.
- The current state of knowledge and skill of practitioners in the community working with this age group.
- Short term opportunities to strengthen practices, services, and policies - activities the community felt could be achieved within one year.
- Long term opportunities to strengthen practices, services and policies - activities the community felt would require more than one year to achieve.
- Organizational policies and procedures specific to infant mental health. For instance, examining reflective supervision models, caseload management within agencies, and support for vicarious trauma.



Continuing the Work

- In **Niagara** an Infant Mental Health Promotion Advisory Committee was formed and is embarking on a pilot study to evaluate the implementation and effectiveness of a developmental screening and interim planning intervention model for all children under five.
- In **Simcoe County** a flagship initiative, Early Screening Matters (ESM) intends to expand early screening and referrals for infants, which will also result in shared electronic record among agencies involved with a child.
- In **Muskoka/ Parry Sound**, which is a rural region with a prevalent First Nation, Métis, and Inuit population, will focus on infant mental health as a priority area, and aims to increase accessibility to services.
- In **Ottawa**, the Growing Up Great Initiative has defined an approach to build community capacity to promote attachment and self-regulation in young children and families through training and capacity building.
- In **Regent Park Toronto** an Infant Mental Health Advisory will be embedded within the existing community planning tables and expand capacity to serve newcomer families.

Moving Forward

- Infant Mental Health Promotion will continue to engage with communities to improve systems of care for infants and families. Funding has been secured to **establish community tables across Canada**, to further understand the state of infant mental health services on a National scale.
- IMHP will be developing **manualized facilitation materials** to support implementation of this model in additional communities.

Overall Themes and Recommendations

Common themes emerged across communities about infant mental health practices, policies, services and in relation to the knowledge and competencies of those working with this population and their families.

1. The current system of supports for families is fractured. Increased communication and transparency between sectors is imperative.
2. Practitioners working with infants and families often do not have specific expertise or knowledge of infant mental health and early development.
3. Screening initiatives, protocols and tools for developmental screening and observation including social and emotional aspects of mental health are not consistently available or used.
4. Agencies are often unaware of other existing programs and services.
5. Transparency is key to collaboration and effective referral.
6. Wait lists are a significant barrier to effective access to intervention and treatment.
7. Existing protocols do not facilitate effective follow up with clients.
8. There is little existing data on early mental health, prevalence, and program efficacy.
9. Each child and family is different and client engagement is a key concern.
10. There needs to be more information regarding organizational policies and practices that support infant mental health in order to identify gaps and opportunities.



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