



April 2014

The Foundation for Educational Success and Economic Prosperity in Michigan: Supporting Social and Emotional Health

To succeed in school and life, children need the social and emotional skills that are the necessary foundation for their ability to learn – skills that are developed in the earliest years of life. Unfortunately, too many young children – particularly children of color – are exposed to the stresses of poverty, as well as untreated parental depression, substance abuse and family violence as a result of gaps in opportunity caused by Michigan's profound economic hardships coupled with structural barriers by race or ethnicity. Exposure to such high levels of stress very early in life can create long-term social and emotional problems that thwart children's development, and result in disparities in child well-being. These gaps then contribute to differences in educational success, high school graduation and college enrollment, leading to clear disparities in earnings and other outcomes over a lifetime.

THE REALITY:

Failure to address the social and emotional problems of young children ultimately affects school achievement.

- Nearly half of all children with diagnosed emotional, behavioral or developmental conditions also have learning disabilities, compared to less than 3 percent of children without those conditions.¹
- More than one quarter of school-age children with emotional, behavioral or developmental conditions repeat a grade, compared to only 8 percent of those without those conditions.²
- African American children who would be eligible at 24 months of age for early intervention services are five times less likely to receive services than white children, ultimately impacting the achievement gap.³

The social and emotional needs of many young children are not being identified and treated.

- Between 10 and 14 percent of all young children birth through age 5 experience social, emotional and behavioral problems, yet most do not receive mental health services—even when their mental health conditions have been identified.⁴
- Because of limited funding and local differences in the mental health services available, prevention and early intervention services for children are scarce.⁵

Parents of children with social and emotional problems face problems in the workforce, and are often forced to quit their jobs because they can't find child care.

- Nearly 60 percent of parents with children ages 2 to 5 with social, emotional and developmental problems report that their children are in some type of non-parental care. These parents were twice as likely to report having to quit, not take, or greatly change their jobs arrangements because of child care difficulties.⁶
- An estimated 7,000 children are expelled from child care centers and preschools in Michigan every year. By comparison, less than 2,000 Michigan K-12 students are typically expelled each year.

THE SOLUTION: Michigan must ensure that young children, and their parents and caretakers, have access to needed mental health services, beginning with the following priorities:

1. Increase the number of infants, young children and parents who are screened by well-trained staff for social and emotional problems through the use of standardized instruments. Standardized screening and assessment tools, when used in pediatric practices, health and mental health clinics, Early On services (Part C early intervention), and in Early Head Start and other early care and education settings, can improve outcomes for children by detecting social and emotional problems early.
2. Provide state funding to support Early On (IDEA Part C) early intervention services. The federal Individuals with Disability Act (IDEA) Part C provides funding to identify children with developmental delays and to provide service coordination. Most states supplement this federal funding with state resources to provide services to low-income families who have been identified as needing Part C services. Unfortunately in Michigan, funding for direct services for infants and toddlers who have been identified as eligible for Early On services has been insufficient to meet the need.
3. Provide consultation services to non-parental caregivers. Consultation services for non-parental caregivers can help ensure that the mental health needs of infants and young children in child care, preschool and other early learning settings are identified and addressed through services with proven outcomes.

THE RESULTS: Evaluations show that children whose social and emotional problems are identified and addressed early on are more likely to succeed in the early learning programs that have been shown to increase school achievement and later success. In addition, their parents are more likely to be able to participate successfully in education and job training programs, and to maintain employment.

- A study of Michigan’s Infant Mental Health program found that participation in services not only improved the social and emotional development of infants and toddlers, but also allowed parents to spend more time working or participating in education and training activities. When entering the program, 38 percent of parents relied on public cash assistance; by the time they finished services, only 26 percent received cash assistance benefits. The percentage working full-time more than doubled (from 11 percent to 25 percent), while those working part time increased by more than 40 percent⁷
- Children involved in Michigan’s Infant Mental Health program were less likely to be exposed to physical abuse and violence in the home.⁸
- Preschool age children with access to mental health consultation services are less disruptive in class and are less likely to be expelled. A four-year evaluation of Michigan’s Child Care Enhancement program that provided mental health consultation to providers and children in state-subsidized child care showed improvements in young children’s behaviors and fewer disruptions in their parents’ work and school schedules.⁹

¹ *The Mental and Emotional Well-Being of Children: A Portrait of States and the Nation 2007*, The National Survey of Children’s Health, Health Resources and Services Administration, U.S. Department of Health and Human Services (June 2010).

² Ibid.

³ Feinberg, E., Silverstein, M., Donahue, S. & Bliss, R. The impact of race on participation in Part C Early intervention services. *Journal of Developmental and Behavioral Pediatrics* (2011).

⁴ *Unclaimed Children Revisited*, National Center for Children in Poverty.

⁵ *Mental Health in Michigan*, prepared for the Ethel and James Flinn Foundation by Public Sector Consultants, Inc. (July 2010).

⁶ Ibid.

⁷ Abbey, J. M. *Evaluation of Infant Mental Health Services in Wayne County*, Eastern Michigan university School of Social Work (October 2009).

⁸ Ibid.

⁹ *Child Care Enhancement Program 2010 Evaluation Report*, Michigan State University (currently in draft form).