DEVELOPING THE SOCIAL-EMOTIONAL HEALTH OF GEORGIA’S YOUNGEST CHILDREN

Infant and Early Childhood Mental Health (IECMH) refers to how well a child develops socially and emotionally from birth to age 5.

PARENTS AND CAREGIVERS INFLUENCE BABIES’ SOCIAL AND EMOTIONAL DEVELOPMENT FROM THE START

As early as 3 months, babies experience a range of emotions, from joy to sadness to anger to interest.

Children who feel loved, comforted, and have the freedom to play form more brain connections, resulting in increased ability to trust, relate, communicate, and learn.

INFANTS AND TODDLERS CAN FACE SERIOUS MENTAL HEALTH CHALLENGES

Negative experiences can affect a child’s social and emotional health.
- WITNESSING VIOLENCE
- LIVING IN FAMILIES DEALING WITH SUBSTANCE DEPENDENCE
- UNTREATED PARENTAL OR CAREGIVER MENTAL ILLNESS

THE IMPACT OF TRAUMA ON INFANTS + TODDLERS INCLUDES:

- Difficulties coping with stress
- Feelings of helplessness, worthlessness, and hopelessness
- Low self-esteem and feeling responsible for bad things that happen
- Physical symptoms
- Behavioral challenges such as excessive crying, distress, regression, aggression, withdrawal, and acting out traumatic events during play.
- Cognitive and language delays that place them at risk for early learning difficulties and later academic challenges

TRAUMA EXPERIENCED BY INFANTS + TODDLERS interferes with the development of executive function and self-regulation skills, which allow individuals to plan, focus attention, and regulate emotion.

Nationally, 1 IN 10 CHILDREN endure three or more adverse childhood experiences—highly stressful or traumatic events.¹

9.5-14.2% of children birth to 5 years old experience emotional, relational, or behavioral disturbance.²

¹ Brauner & Stephens, Public Health Reports
² Sacks, Murphy & Moore, Child Trends
Research demonstrates that early prevention and treatment are more beneficial and cost-effective than attempting to treat emotional difficulties and their effects on learning and health after they become more serious.

**OUR OBJECTIVES FOR SUPPORTING THE SOCIAL-EMOTIONAL HEALTH OF GEORGIA’S YOUNGEST CHILDREN AND THEIR FAMILIES**

**DEVELOP A STATEWIDE NETWORK OF MENTAL HEALTH SPECIALTY SERVICES**
for infants, toddlers, and their parents/caregivers.

**ENSURE THAT MEDICAID PROPERLY COVERS MENTAL HEALTH SCREENINGS + SERVICES**
for infants, toddlers, and their families.

Medicaid should consider that families are included in the treatment of young children with social-emotional concerns and that DC:0-5\(^4\) is the diagnostic tool used by professionals who work with children 0-5.

- Nearly 50% of children under age 6 receive health coverage through Medicaid or CHIP.
- States, including Georgia, should leverage Medicaid payment to support IECMH prevention, assessment, diagnosis, and treatment services for young children and their families.

**DEVELOP A CROSS-AGENCY INFANT AND EARLY CHILDHOOD MENTAL HEALTH SERVICES LEADERSHIP STRUCTURE**
to drive strategic direction of statewide efforts.

Join the several agencies that are already working in this area and create a statewide structure to align and coordinate efforts.

**SUPPORT SOCIAL-EMOTIONAL HEALTH STUDY COMMITTEE**
Conducted in 2019, the House Study Committee on Infant and Toddler Social Emotional Health recommends:
- an IECMH coordinator position housed at the Department of Early Care and Learning
- Medicaid properly cover mental health screenings and services tailored for young children.
- Developing a mental health workforce that can serve infants, toddlers, and their families.

Additional recommendations include:
- A public awareness campaign on early brain development
- Extending pregnancy Medicaid for women to 12-months postpartum

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\(^3\) Washington State Institute for Public Policy
\(^4\) Diagnostic Classification of Mental Health & Developmental Disorders of Infancy & Early Childhood