

Investing in Caregivers Supports the Mental Health Needs of Young Children

Behavioral Health

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Young children, those ages 0-5, are rapidly developing and much of their opportunity for healthy development is interconnected with the well-being of their caregivers. In the early years, when 90% of a child's <u>brain develops</u>, young children are particularly vulnerable to stress, uncertainty and trauma. Several PolicyLab experts are conducting <u>research</u> around the specific behavioral health needs of young children, and we use this research to inform our guidance on policy strategies to support young children and their caregivers. Research on the mental health of caregivers and children shows that <u>poor</u> caregiver mental health negatively affects children, while <u>positive</u> caregiver interactions yield long-term benefits for child health. As such, policies that support caregivers are important to the mental health of young children.

PolicyLab has previously outlined "<u>a caregiving agenda</u>" in which we recommend how state and federal policymakers can support those caring for children. In this post we dive deeper on the elements of that agenda that are particularly important to the behavioral health needs of young children, as well as opportunities for progress.

4 Policy Levers to Support Caregiver and Young Child Mental Health

1. Support Families' Financial Security

Chronic stress associated with poverty and economic insecurity can affect the mental health of <u>parents</u> and their <u>children</u>. An estimated 10-16% of <u>young children experience mental health conditions</u>, and this increases to 22% for young children living in poverty.

However, there are ways to support the financial security of families so they have the resources to meet their needs, extending from paying weekly bills to child care expenses. Cash transfer policies put money directly into the hands of families as they face high costs of food, child care and other essentials, and <u>research</u>

demonstrates that cash transfers support heathy development and well-being of young children. Examples of these cash transfer policies include the recent COVID-19 child tax credits that contributed to <u>cutting</u> the child poverty rate in half, state efforts to establish <u>Earned Income Tax Credits</u> that support working individuals and families in particular, and a growing number of city-level programs providing a <u>guaranteed income</u> to pregnant and postpartum people.

2. Increase Access to Affordable, High-quality Child Care

Federal and state policies providing <u>child care subsidies</u> can help ensure this essential service is affordable. Affordable, high-quality child care is important as child care providers can support and promote the <u>behavioral health</u> of young children. Children in child care spend a substantial <u>amount of time</u> with early care and education providers, averaging 31 and 47 hours per week for families requiring care during traditional and non-traditional work hours, respectively. However, child care providers report <u>not being equipped</u> to support children with behavioral problems or disabilities, and there is a pattern of <u>expelling children</u> with behavioral health needs, disproportionately affecting young boys of color. Additionally, <u>access</u> to child care remains limited, due to factors such as high costs, availability and work schedule alignment. Broader investment in the early care and education <u>workforce</u> could be one way to attend to these challenges.

3. Boost Paid Leave Policies

<u>Paid Leave</u>—which is job-protected paid time off for caregiving of a new child—is another element of a caregiving agenda that <u>benefits</u> child well-being. Research suggests that mothers' experiences of distress can have long-term <u>impacts</u> on their children and paid family leave is associated with a <u>decrease</u> in maternal psychological distress. Despite this evidence, only an estimated <u>17%</u> of people in the United States have access to paid parental leave and there are racial and ethnic disparities in <u>access</u>. In the absence of a federal policy in place to guarantee paid parental leave, <u>states</u> are enacting policies to ensure at least six weeks of paid family leave, most recently in <u>Minnesota</u>.

4. Integrate Behavioral Health Into Primary Care Settings

Finally, supporting caregivers in the pediatric primary care setting (e.g., dyadic care or two-generational care models such as HealthySteps) <u>supports</u> healthy early childhood development and positive parenting. Integrating behavioral health providers into primary care settings can <u>improve</u> treatment initiation substantially. The American Academy of Pediatrics <u>recommends</u> children attend 15 well visits in their first five years to assess their physical and behavioral health and at times, their caregiver's mental health. Postpartum <u>caregivers</u> are more likely to go to pediatric appointments than their own adult provider, making the pediatric care setting convenient for screening and even brief treatment for <u>commonly</u> occurring perinatal mood and anxiety disorders, such as postpartum depression. Private and public health payors can support payment for screening, assessment, care coordination, and brief evidence-based interventions in the primary care setting for both <u>children</u> and <u>caregivers</u>. In particular, coverage of preventive behavioral health services for children without a diagnosis but at risk for a mental health condition is critical for integrated care.

An Intergenerational Opportunity

Just like the early years of a child's life are full of potential, policies in support of the caregiving agenda offer great opportunity and some very important benefits. As Mental Health Awareness Month draws to a close, let's continue to find ways to support families' needs—including through these evidence-based strategies—and in turn, the behavioral health of children and their caregivers.



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