A Conversation on Infant & Early Childhood Mental Health During COVID-19

April 29, 2020

The Institute for Innovation & Implementation Resources:

- HIPAA-Compliant Technology During COVID-19
- Communicating with Your Audience During COVID-19: Five Essential Tips
- A Conversation on Crisis Communication During COVID-19
- Managing & Responding to COVID-19: Special Guidance on Wraparound
- Managing & Responding to COVID-19: Special Guidance on FOCUS
- A State-by-State Guide to COVID-19 Telehealth Medicaid Expansions
- Telebehavioral Health: Tech to Connect with Youth & Families TA Network
- Register for the TA Telegram
- Video Blog: Coping with COVID-19 As A Family from Parent, Infant & Early Childhood Team

Presenter Resources:

- Judge Baker Children’s Center COVID-19 Family Resources
- FREDLA Resources for Talking with Children & Youth about Coronavirus
- Coping with COVID-19 as a Family

Community Resources Shared in Conversation Chat:

Federal Resources
- SAMHSA COVID-19 Information for Discretionary Grant Recipients
- CDC Guide to Stress and Coping During COVID-19
- In Spanish: SAMHSA Taking Care of Your Behavioral Health: Tips for Social Distancing, Quarantine, and Isolation During an Infectious Disease Outbreak
- In Spanish: SAMHSA Talking With Children: Tips for Caregivers, Parents, and Teachers During Infectious Disease Outbreaks
- Latest HIPAA Guidance
- CDC Infographics on Caring for Yourself or Others Who Have Been Infected

Structural Racism & Disproportionate Impact of COVID-19

- It’s about racism, not race, when coronavirus hits communities of color hard
- Community Catalyst Structural Racism & COVID-19
- Racism Impact of Health on Children and Teens
- Embrace Race Disproportionate Impacts of COVID-19
- National Minority Health Month Toolkit National Institute for Children’s Health Quality
- For Black Men, Fear That Masks Will Invite Racial Profiling
- The Impact of Racism on Child and Adolescent Health
• Thinking About Racial Disparities in COVID-19 Impacts Through a Science-Informed, Early Childhood Lens

Resources in Multiple Languages & for Addressing the Needs of Immigrant Families
• Sheltering in Place in a Xenophobic Climate: COVID-19 and Children in Immigrant Families
• COVID-19 Health Literacy Project
• #COVIBOOK Supporting & Reassuring Children Around the World
• Switchboard A Round-Up of Multilingual Resources on COVID-19
• Healthwise: Aprenda sobre el coronavirus (COVID-19)
• PPS Prek-Remote Learning Aprendiendo a Distancia-PPS Pre K
• UNHCR Live Blog: Refugees in the COVID-19 Crisis

Child Development
• What is COVID-19? And How Does it Relate to Child Development?
• AACAP COVID-19 Resource Library
• Zero to Three Tips for Families: Coronavirus
• Center on the Social & Emotional Foundations of Early Learning: Parent Training Modules
• Postpartum Support International COVID-19 Resources
• Center of Excellence for Infant & Early Childhood Mental Health Consultation
• American Academy of Pediatrics Critical Updates on COVID-19
• Mitigating the Impacts of the COVID-19 Pandemic Response on At-Risk Children
• National Association on the Education of Young Children’s Coping with COVID

Telehealth
• MassHealth Provider Resource: Telephone and Internet Connectivity for Telehealth
• National Center for School Mental Health, UMB, Telehealth 101 Video
• Zero to Three Five Tips to Make the Most of Video Chats
• Teletherapy Early Intervention Tips During COVID-19, Help Toddlers Engage & Communicate
• MISD Rolls Out Their WiFi Buses for Remote Learning During the COVID-19 Crisis

Resources for Families
• Hospital Approved Mask Patterns & Directions
• Conscious Discipline COVID-19 Resources for Families & Educators
• Judge Baker Children’s Center COVID-19 Family Resources
• Zero to Three The Importance of Self Care
• Thriving at Home: A Mental Wellness Workbook for Children and their Families During Quarantine
• NetSmartz Online Safety Web Series for Kids K-5
• Voices of Youth: COVID-19: your voices against stigma and discrimination
• Zero to Three Five Tips to Make the Most of Video Chats
- Child Trends Resources for Supporting Children’s Emotional Well-Being During COVID-19
- Child Life Disaster Relief: DIY Talking to Children about the Coronavirus
- Early Learning Coalition Video Series
- Communicating with Children During the COVID-19 Outbreak – Michigan Dept of Health & Human Services
- The Parent’s Place of Maryland COVID-19 Issues
- Child Mind Institute Helping Children Cope
- Georgetown Center for Child & Human Development
- Child & Family Services COVID-19 Updates & Info Hawaii
- NASP Helping Children Cope With Changes Resulting from COVID-19
- Sesame Street Coronavirus Town Hall

Activities for Families
- Erie Playhouse PLAYtime
- ABCmouse.com Early Learning Academy
- Zero to Three At-Home Activity Guide
- Zero to Three A Year of Play
- Zero to Three Play with Me
- GoodNight with Dolly Parton
- Coronavirus Guide for Kids
- Cosmic Kids: Yoga, Mindfulness, Relaxation for Kids
- My Hero is You: how kids can fight COVID-19
- A Certain Kind of Sick
- Caroline Conquers Her Corona Fears: A Kids Coping & Coloring Book
- Bear hunts and encouraging words are signs of COVID-19 times
- COVID-19 Time Capsule + Free Download & Tutorial
- Autism Educator Book: What is the Coronavirus?
- Sesame Street in Communities Health Emergencies Videos
- Free Yoga Online
- The Story of the Oyster and the Butterfly: the Coronavirus and Me
- Sesame Street: Caring for Each Other
- Kairos: FaceBook Page with Activities
- Autism Little Learners

Social Marketing & PSA Examples
- Julia Louis-Dreyfus’s COVID-19 PSA Hilariously Highlights the Importance of Beauty Professionals
- Univision Teams with Listos California on Pandemic PSA Campaign
- Matthew McConaughey is ‘at war’ with COVID-19 in new PSA
- In Politics, Sometimes the Facts Don’t Matter NPR
Safety Plan Resources

- Love is Respect Safety Plan
- End Violence Against Children Protecting Children During COVID-19
- Unicef Guide Protection of Children During COVID-19 Immediate Response Measures
- Futures Without Violence: Information on COVID-19 for Survivors
- NYT: A New COVID-19 Crisis: Domestic Abuse Rises Worldwide
- National Domestic Violence Hotline

Provider Resources

- Yale’s Happiness Course: The Science of Well-Being by Laurie Santos
- Children’s Behavioral Health Initiative Provider FAQ Massachusetts
- Trauma Training PTSD "A New ERA"
- Conscious Discipline: Resources for Families & Educators During COVID-19
- That Discomfort You’re Feeling is Grief Harvard Business Review
- Does Prioritizing Self-Care Mean Betraying Your Patient Care?
- Working Remotely During COVID-19-Workplace Mental Health
- How to Beat Stress, Trauma, and Adversity with Resilience
- 3 Tips to Avoid WFH Burnout Harvard Business Review
- Center for Workplace Mental Health Working Remotely During COVID-19

Comments from the Chat Box. Thank you for sharing!

How do you being to think about supporting families either through remote means? Or if you are still doing in person contact, how are you doing that?

- zoom and phone calls
- weekly google meets sessions with families
- ZOOM video calls to continue home visits
- No in person appointments at this time, only via Zoom or phone
- Mainly phone calls with little contact outside of office
- technology-practice
- Helping families access distance learning, language barriers, no computers, limited technology ability
- not allowed to make visits, so SKYPE, FaceTime, Texting, Phone Calls.
- A lot of our families are rural/do not have access to stable internet or technology
- We have accessibility trouble. Not everyone has internet or a device to use data. Therefore, we’ve done phone contact as well as sending home mental health and learning activities
- Encouraging parental involvement and parents feeling overwhelmed with taking all aspects of primary care roles with their children
- Our company (University Settlement) made care packages for clients to pick up in the beginning of this crisis
• daily zoom sessions for children; email, slack and Facebook for parents
• Those who have access we use Remind and Class Dojo in addition to phone contact.
• we created a private fb page for our families with videos of content and resources and we split families up with teachers so we could tag team calling and checking on them, meeting any needs
• Technology has been a barrier. Getting parents to answer the phone when we call as our caller ID does not indicate who is calling. We email them, leave messages, and call back which seems to help.
• We are uploading weekly activities to our social media, and website. This same information is being put out by our teaching staff on class dojo
• Working from home. Doing virtual visits and phone calls with parents to address their needs during this crisis. We are using Google hangouts meet for virtual visits/contact.
• Working from home using teletherapy, food and essential resources, exercise through FT with a couple students before therapy, coming up with online academic plan with family through telephone or face time or zoom
• I use Zoom platform
• From rural America challenges is the broadband speed and having families being able to manage littles and the technology of zoom
• families without technology or WIFI is much trickier so that is why we maintain weekly phone check ins and we also conduct pantry drop-offs
• how to bring closure to a school year for 2-5 year-olds, reentering mid-summer (?), starting a new year and welcoming new families...
• I am filming a Mr. Roger's Neighborhood style for our organization's YouTube and Facebook to supplement services the families are already engaging in
• We are using Doxy.me for our virtual home visits.
• We use whatever the parents have access to. We struggle with parents actually picking up and keeping visits
• Sesame Street also has a lot of good resources for during this time.
• Support groups for closed centers and also support groups for open centers serving Essential Personal Children, Zoom webinars, emails/phone calls to parents/providers, Facebook Live
• Sister is an ICU nurse-folks have been sending food-supporting businesses and staff.
• Supporting pregnant parents with young kiddos right now is also challenging. they cannot go to prenatal visits

What are some of the obstacles of doing this work? What ways do you have in overcoming those obstacles in delivering services and supports to children and their families?

• barriers: language (ESOL students), socioeconomic concerns, access to technology, high levels of parental stress
- 9-18 month olds afraid of people with mask. other than having children play with mask, put on stuffed animals, what else can you suggest, since mask will be a common thing in life
- I like the idea of putting masks on stuffed animals to help the children adjust
- LGBT youth also struggling with isolation.
- many families are reporting to me, that their child's sleep disturbances. staying up very late and sleeping in late; waking in the middle of the night
- We talk about a picture schedule and how that way they can see what is going on for the day and helping them to help them to know what is coming.
- It is important for all of us to try to stick to a routine including our sleep schedule
- Decorating the masks with the child so they have some sense of ownership over it
- I have young children already away from family, one weekly visit, placed in Foster family. Mom on SKYPE, not doing well. A double whammy for the kids!
- we let our children pick out their mask prints and then made some for the toys. we are honest and talks about the new way to do things. and just adding the verbiage so they get used to it.
- We are getting ready to use puppets to explain the mask wearing to children, and this will then be uploaded onto our R & R center's Facebook page.
- If families have the ability, playing a lo-fi/hip hop /chill beats livestream on YouTube is pretty successful for our staff
- We are an adoption and foster care agency in Southern California. The majority of our resource parents do not feel comfortable doing face to face contact with birth parents since most of them use google numbers. They do not feel comfortable sharing their "real" cell numbers with families. We are going now implementing zoom for our visits with families, but they are apprehensive of using this technology with birth parents. For now they will continue to have contact via phone.

Addressing Sleep

- Anticipatory guidance for parents that sleep regression/disturbances can be expected during this time - feels important
- Modeling-so important, thank you for the reminder!
- Provide ideas for inside exercise such as dance contests, marching around to music, play the freeze game, do yoga, and limit sugar
- Good point about definitive routines for start and end of day...during some meetings I am noting kids in pajamas
- examples and sample routines would be great, so many families have never had to establish their own schedules
- Some children like visual schedules so that they can see what they are going to do next and what that looks like.
How do you all address access issues for families?

- Families eligible for Medicaid may be eligible for phones and in some jurisdictions, they are also providing internet access
- In Oregon, CPP, PCIT, and GenPMTO as well as other behavioral health therapies are being provided via telemedicine (phone or teleconferencing software like Zoom). Providers are sometimes providing tablets, wireless ear buds or hot spots to assist families with limited access to technology so that dyadic tx can cont.
- In many areas, the local companies are providing free WIFI to teachers, parents and students for 60 days.
- Our cable company spectrum in NYS is offering free internet to all home with school age children
- Yes, it is a privilege to even be on webinars like this for some workers/families. Some don't have access to WIFI or a computer. How can we better support families who do not have time to balance all layers of this crisis, let alone join a virtual support group.
- There are local resources for childcare for essential workers. Check websites of local daycare centers and office for children centers
- phone calls to parents who don't have access to technology or who are having problems accessing platforms
- I've mailed info sheets and information to families. I've also dropped stuff off on porches as well
- In Michigan, some rural communities are loading WIFI routers onto buses and parking in various locations in the district.
- Some libraries and churches have free WIFI if you sit in a car in their parking lot but you have to be able to get there and might not have a car....
- mailing parents resources to use with their children who don't have internet/computer/resources info about basic needs can also be included
- Some of the school districts are using school buses as hotspots here
- send Family Parent Peer support with two phones/tablets to set up a hot spots and be able to use the tablets to connect and do virtual peer support and skill building
- Our school has loaned out computers and hotspots the problem is for families that don't have school age kids.

How are people supporting families where there is a history of child maltreatment or substance misuse? How are people able to put eyes on the young children and assess stress levels in parents?

- Fairfax County is providing meals via our school buses around the county
- Cleveland, TN is providing meals for children through school systems.
- The county where I work is mostly rural and part of my case load is working with families who have had their children removed by DCP. What they are doing is having phone "visits" between the children and the parents with the Resource parents.
- providing education regarding hygiene
What are your thoughts around children that have severe behavior problems, that have limited or no access to behavioral health services? Especially when parents are frustrated and on edge.

- wraparound program is there for high behavior families across the states
- I have been using DBT to speak with parents about anxieties they have in returning to work and sending children to childcare. Many parents are anxious about placing their child in care with possible Essential Workers children.
- States are treating family visits for kids in care differently. Some states have completely suspended in-person visits, while others are still having them. I am concerned about all kids who are not able to visit with their parents because they are in the temporary guardianship of their respective departments. I am mostly concerned about infants who need that contact with their parents to establish bonds. What is your opinion regarding this? AND what are your states doing regarding in-person visits?
- if each of us shares "real" stories about COVID's impact (illness, death) with our circles (friends/ colleagues) these circles can continue to grow, and the information will continue to be disseminated
- regarding parents and addictions, meetings are being held via zoom and other services. keep encouraging parents to stay with the steps and the program
- Worst case scenario, for one of my cases, the mother moved out of stated (at 11pm) during all this! The DCP worker did put a referral in for the new state (county) Children and Youth services to alert them about the family.
- A lot of places offering counseling or substance use assistance have started virtual courses and meetings
- In our state what's happening for infants in foster care varies dramatically. It seems to be up to the foster family. Some parents are able to video chat and at least see their babies. Others are just receiving pictures. It is truly heartbreaking for these parents and children, although I do understand the difficulties faced by child welfare workers. I'd be interested in hearing from states where visits are continuing.
- Referring children with behavioral problems to behavioral services which can be provided via telemedicine when available is a good way to not just get through COVID but positively impact the child and family's long-term functioning.
- I think shorter and more frequent communication is a great idea.
- child with special needs are at most risk for child abuse and neglect normally so listening to parents, acknowledging that they are challenging and that they are doing their best. the caregivers need to take turns and allow themselves to sleep. time to themselves for parents of children with special needs is so important. our DFS is providing virtual parenting groups. Many places of worship are also having virtual services.
- Foster parents can using call blocking if they are uncomfortable giving their phone number out to birth families. I have heard that some foster families are actually MORE comfortable using technology to maintain these connections compared to in-person visits.
• Support group for parents in PA is parents to parent
• Our MH consultant is going to do a PowerPoint 2-part for teachers. First one is on teacher's acceptance of children coming back into the daycare and being prepared to basically start over. Start will rules but be mindful of feelings and potential behaviors. Adults have to take care of self and be in control such as self-regulating before dealing with our children. Second half if what to expect from our children coming back to daycare and how to handle and respond to them. Great support system.
• Do your pandemic best!
• as a special educator doing early intervention, I have been doing joint sessions with our social workers with the families. The SW has been wonderful at focusing on the mental health of the parents while I am able to focus on the child
• Encourage families to reach out to their support system on a regular basis via some type of technology where they can see each other. They could have a zoom family and friends meetings. Having the opportunity to see each other provides social/emotional regulation. We have also asked our social workers to maintain more frequent contact with their children and families.
• keeping children engaged ==parallel play- games or dress up etc
• Google Meets does not identify callers
• Highly recommend the Facebook group: Tele-PLAY therapy resources and supports. There are a ton of ideas about games, activities, approaches to keep kids engaged via video.
• Keeping 'littles' engaged during teleintervention has been challenging, best case scenario is getting parents involved and observing and coaching parents on "try this" One great intervention I have had is helping them set- up a 2-3 obstacle course in the house and then have fun, running through it with their kids. These kids so love getting some of their extra energy out in this acceptable way.
• WNY CPS home visits are being made. Most times families come outside
• Zoom and face time are also being used to see food supply etc
• not all apps are all HIPPA approved
• My question is what the appropriate step is to apply for unemployment for parents/providers who have no income right now or any resource to share.
• HIPPA has loosened up some of their guidelines with screen time therapy state by state
• Apply for unemployment online and or thru telephone. Most times someone will call you back according to families and finish application
• Yes, and resources for single parents who have no help at home right now and are expected to work full time with their children at home. Phone call check-ins are one thing, yes, but these families are important to acknowledge that they may not be reaching out as much for supports because they don't have the capacity or the time
• The federal Health and Human Services Dept. has put out guidance that many teleconferencing platforms that wouldn't usually be considered HIPAA compliant may be used during the pandemic if those are the only option and the provider has documented
that they have discussed the limits to confidentiality with whatever platform they are agreeing to use and that the parent still agrees.

- There are several virtual groups for single parents right now. Facebook groups
- Response to Katie's comment... we must be careful not to miss those children who seem to be transitioning with ease back into childcare. They may need attention from MH worker also
- There overall early intervention referrals are drastically lower right now. Any thoughts or suggestions about why
- I think we need to advertise early childhood intervention is up and running. Teleworking.
- Our agency is providing online parent training groups for parents with children with behavioral issues.
- Mental health stigma may be in an issue depending on home situations- who is in the home, etc
- early intervention is somewhat up and running. we are providing distance learning. we cannot complete all assessments virtually at this point
- Our company is providing Webinar series at night (8-9pm) for families on different topics. We provide ABA for children with Autism. A way to bridge any gaps between our regular services and their needs
- I think having diversity among providers can be helpful in getting the word out. also using places of worship to share accurate info may help
- more factual info about numbers/rates of infection put on the social media sites used by teens and young people in the African American community
- STAT News had become my go to resource for medical information but may be too technical for some parents
- Spanish resources for helping at risk communities engage with their children
- For professionals- The State Public Health Departments and the CDC are sites for COVID 19 data
- Information on free or low-cost play therapy activities with littles using telehealth.
- the WHO has a great informational page on screen time for young children; however completely unrealistic for all my families. It recommends no screen time for kids 0-3, except live chats with families
- I know in Baltimore City a project we work on that works with immigrants reported fears about access resources due to being undocumented.
- Resources, talking to them, monitoring them encouraging them ..... grief work for those who have lost loved ones to the disease.
- Bedtime and routines were discussed, can there be information both Spanish and English about tips for bedtime that can be shared with clients
- Children and teens with ASD are struggling through this as well, on a different level. since they assess information differently. And they struggle with wearing a mask. Any thoughts on this