

# Childrens Mental Health Project Pilot Executive Summary

Prepared by Wilder Research



As a housing intermediary, with the mission to help the affordable housing network meet the needs of families in complex and changing conditions, the Family Housing Fund is tasked with testing system level interventions to end family homelessness. According to Wilder Research's 2012 One-Night Survey of Homelessness, children and their parents now make up approximately one-third of the state's population experiencing homelessness and over half are experiencing long-term homelessness. The National Center on Family Homelessness reports that children experiencing homelessness exhibit four times the developmental delays and three times the rate of behavioral and emotional problems as their housed peers. These avoidable consequences set children up for life-long challenges, including homelessness as adults.

The Family Housing Fund's Visible Child Initiative created the Children's Mental Health Project pilot to address trauma, teach positive parenting skills, and enhance the social emotional wellbeing of homeless children through services paid for by Minnesota Medical Assistance programs. The pilot meets families where they are, by providing access to early childhood intervention and mental health services in supportive housing sites across the Twin Cities. The pilot sought to produce positive changes for young children, parents, supportive housing site staff, and lay the ground work to embed children's mental health services within affordable housing across the region and state.

At the start of the pilot half of the children participating were identified as needing additional support for their healthy development based on the Ages and Stages Questionnaire: Social Emotional (ASQ:SE). After a year of children's mental health services, the follow up screening indicated that only 30 percent of children needed additional support. Even when children still needed additional support, the ASQ:SE indicated that they had made progress achieving social emotional benchmarks for their age. Supportive housing staff reported that the change in parent behavior, as a result of the children's mental health services, had the largest effect on improving children's behavior. Through this pilot, staff and clinicians reported that parent's gained confidence in parenting, improved their understanding of early childhood development, developed increased empathy for their children, increased their recognition of how their behavior affected their children, felt reduced stigma for mental health services, and expanded their family's engagement in the community.

By evaluating the pilot's effect on children and families and assessing the strengths and challenges of the pilot, Wilder Research identified several recommendations for next steps that will maintain the positive effect of this pilot. The recommendations include building a strong pool of early childhood mental health clinicians of color and increasing medical reimbursement rates for early childhood mental health services.