

**Social/Emotional Workgroup
Meeting Minutes
October 16, 2007**

An overview of the history, vision, mission and work of Great Start Collaborative-Wayne was given by Pat Sargent. This overview was supported by print material including the data collected during the assessment of child well-being, **“How Are the Children”**, the report published by GSC-W based on that data, and a document from Braintree Solution Consulting entitled **“GSC-W Early Childhood System Building Initiative.”**

Colin Newlin briefed group members on the findings from the Infrastructure Review conducted by Braintree Solutions Consulting. This briefing was supported by print material including a one page piece entitled **“Early Childhood Planning Groups and Collaborative Processes in Wayne County, Michigan”** and a four page map entitled **“An Overview of Wayne Counties Service System for Early Childhood.”** Additionally, a multi page document, **“Social-Emotional Development Briefing on Early Childhood”** was reviewed.

Colin led us through a SWOT (Strengths, Weaknesses, Opportunities, Threats) analysis focusing on the **Social Emotional needs and systems** affecting our youngest children and their families.

These Issue Areas were identified by the group:

1. Poor ability of some children to behave appropriately in a group setting
2. Child Care Expulsion Project is helpful but not currently designed to be involved with a child long term, the project often makes referrals.
3. Lack of professional development on issues pertaining to early childhood social emotional development, needs and interventions.
4. Degree to which parents of young children have mental health issues.
5. Difficulty navigating being a parent.
6. Needs of special needs children.

Strengths Pertaining to these Issue Areas:

1. We have a model IMH program in Wayne County.
2. The child care expulsion project, a piece of this program brings a child care center and parents together on behalf of a child.
3. For lots of children, minor adjustments in their environment can improve their behavior quite a bit.
4. Providing support to parents can have a positive impact on the social/emotional health of their children.
5. The focus has shifted from “bad kid” to “What tools can we use to meet this child’s needs?”
6. Childcare workers see their role in setting up nurturing, appropriate environments.
7. There are home based programs
8. There are parent-child groups, particularly for parents of children with special needs.

9. Parent child groups help parents network and support each other.
10. Infrastructure of Early On.
11. Parents advocate for their children.
12. Expanded access to IMH services for Medicaid population.
13. Access IMH services for foster children.

Weaknesses Pertaining to these Issue Areas:

1. Support is difficult to sustain
2. public perception of lack of availability of support
3. Access issues? Target population is medicaid or no insurance but – if need is there for others there are other options.
4. Refer earlier?
5. Professional Development is challenging because workers do not often stay in job.
6. Not enough of a social/emotional component in teaching parenting skills or in professional development.
7. Not enough coordination of services.
8. IMH cannot serve publicly funded early care and education, only private.
9. There is a need for more services (eastside has more than westside.)
10. Need evening and weekend parenting groups.
11. Lack of knowledge of services
12. Families don't recognize need for services or value of services.
13. Transportation to services.
14. Social/emotional health “not much paid attention to.”
15. Professional Development is mostly for new workers.
16. Lack of culturally responsive services.

Opportunities pertaining to these issue areas:

1. More universalize idea of paying attention to mental health, particularly at know critical times (pot partum, toddlerhood...)
2. De-stigmatize mental health issues.
3. Build in social skills to early care.
4. More emphasis generally on social/emotional health.
5. Making lots of effort in home settings.
6. Many more could benefit from services.
7. Some parents are not home at times home based services are offered.
8. Connect children with special needs to the community.
9. Parent advocacy.
10. View children having difficulties in strength based ways.
11. More Professional Development on social/emotional issues, it is not the highest priority for child welfare.
12. More training for foster parents.
13. Collaborations for training
14. Work on building protective factors (css.p.org).

15. Holistic model vs. deficit model.
16. Provide Asset Building information.
17. Shift conversation to promoting resilience.
18. Broaden the number of people who have a stake in social/emotional health.

Threats pertaining to these Issue Areas are:

1. DHS and childcare workers do not often stay at their job long which negatively impacts professional development.
2. “Nobody wants it.”
3. Unreliable funding.
4. Not enough services for non-medicaid.
5. Social/Emotional vs. Mental Health
6. Cost of training – specifically home and relative care.
7. Not enough home based services, only targeted at Medicaid.
8. Getting to parents- particularly working parents.
9. Cultural/media conflict between valuing and punishing aggression makes it difficult for children and parents to understand appropriate social skills.
10. Child welfare seldom brings children into system due to social/emotional abuse or neglect.
11. Lack of understanding of child development and social/emotional health.
12. Ignorance around issue – hidden crisis.

Following this brainstorming, the group conducted an exercise to identify focus areas for the next two meetings. The focus areas that emerged are **“System Access: increasing accessibility and resources in the area of Social/Emotional Health,”** –to be discussed at the November 20th meeting - and **“Changing Perceptions: exploring strategies for de-stigmatizing or bringing into the mainstream, issues about Social/Emotional Health”** –to be discussed at the December 18th meeting.

Prior to our next meeting, Braintree Solutions Consulting will provide our workgroup with research and some national best practices on these issues to review so that we are well prepared to move ahead with our work.

Next Meeting: Tuesday, November 20, 8:45 – 11:00
One Heritage Place, Suite 220, Southgate