A Complexity Approach to Systems of Care for Early Childhood Mental Health

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THE POSSIBILITY
the mental health of ALL infants, toddlers & young children

- Common rationale: “Investment in the future”

THE POSSIBILITY
the mental health of ALL infants, toddlers & young children

- ALSO - Babies are citizens with equal rights
  - Their mental health in the present moment is just as important

THE POSSIBILITY
the mental health of ALL infants, toddlers & young children

- ALSO - Mental capacities developing in infancy/early childhood are core capacities for all human beings

The Scientist in the Crib: What Early Learning Tells Us About the Mind
Gopnik, Meltzoff & Kuhl (1999)

Affect Regulation, Mentalization, and the Development of the Self
Fonagy, Gergely, Jurist and Target (2002)

THE POSSIBILITY
the mental health of ALL

The developing, coordinated capacities to:
- experience, regulate & express emotions
- form close & secure interpersonal relationships
- explore the environment & learn

ZERO TO THREE Infant Mental Health Task Force, 2001

THE POSSIBILITY
the mental health of ALL

“an intuitive sense of emotional security”

“...comes from the inner...knowledge that during times of stress, one can cope, either by [self] regulation or going to others for interactive regulation.”

“Contributions from the Decade of the Brain to Infant Mental Health: An Overview”
Alan Schore, 2001
THE CONCERN

Infants and toddlers are suffering.
- Rates of diagnosable mental disorders comparable to the rates of mental disorders among older children
  - Perry, Kaufmann & Knitzer, 2007
- Disrupted relationships with primary caregivers
  -- Shonkoff & Phillips, 2000
- Disproportional suffering among babies and caregivers who are poor and who are of identities that historically have been discriminated against
  -- Zeanah, 2000

THE CONCERN

Communities are not transforming.
- Systems of Care efforts are not corresponding with significant changes in community-scale indicators of children's mental health.
- Systems of Care change agents are not articulating or demonstrating a coherent understanding of child/family/community development and mental health.
- Systems of Care efforts are not thriving after grants end.

THE CONCERN

Yikes -- What if…?

“In the pseudoscience of [systems/community] rebuilding and planning, years of learning and a plethora of subtle and complicated dogma have arisen on a foundation of nonsense. The tools of technique have steadily been perfected. Naturally, in time, forceful and able men, admired administrators, having swallowed the initial fallacies and having been provisioned with tools and with public confidence, go on logically to the greatest destructive excesses, which prudence or mercy might previously have forbade.”

The Death and Life of Great American Cities
Jane Jacobs, 1961

THE CONCERN

Yikes – What if…?

"Planners, architects of [systems/community] design, and those they have led along with them in their beliefs are not consciously disdainful of the importance of knowing how things work. On the contrary, they have gone to great pains to learn what the saints and sages of modern orthodox planning have said about how [systems/communities] ought to work and what ought to be good for people and businesses in them. They take this with such devotion that when contradictory reality intrudes, threatening to shatter their dearly won learning, they must shrug reality aside."

Jane Jacobs, 1961
THE CONCERN

Yikes – What if…?

“There is a quality even meaner than outright ugliness or disorder, and this meaner quality is the dishonest mask of pretended order, achieved by ignoring or suppressing the real order that is struggling to exist and to be served.”

Jane Jacobs, 1961

AN ALTERNATIVE

“Embarking upon the adventure of probing the real world.”

– “The way to get at what goes on in the seemingly mysterious … behavior of [children / families / communities] is, I think, to look closely, and with as little previous expectation as is possible, at the most ordinary scenes and events, and attempt to see what they mean and whether any threads of principle emerge among them.”


A Complexity Informed Exploration

“COMPLEX ADAPTIVE SYSTEM”
Each child / family / system / community
is a dynamic network of
diverse change agents
interacting with one another
and the environment
to co-evolve
over time

Realities of Complex Adaptive Systems of Human Beings

People & programs:
• have diverse dispositions & identities
• have free will to make decisions and take action
• are linked
• interact with each other
• mutually influence each other
• exist in a context of environmental constraints
• interact with the environment

Patterns emerge through interactions over time
Patterns are evidence of the functioning of the system

A Complexity Perspective

macro-scale patterns
produce

micro-scale (inter)actions

• Flocking birds following 3 “simple rules”
  • Minimum distance
  • Same speed
  • Head toward the center

A Complexity Informed Exploration
A Complexity Perspective

Now we assume:
– Cause-effect pathways are multiple and multi-directional.
– The whole system is more than a sum of its parts.
– Homeostasis might occur sometimes, but it is rare and relatively fleeting.

A Complexity Perspective

– System functioning cannot be predicted
– System functioning cannot be controlled
– System functioning CAN be better understood, in order to:
  – Support desired / healthy patterns
  – Disrupt undesired / unhealthy patterns

Complexity & Early Childhood: “Perfect Together”

- Emergence
- Phase Transitions
- Self-Organization

A Complexity Approach to Exploring The Local Emergence of Early Childhood Mental Health

COMMUNITY LEARNING INITIATIVE around this central question:
How is support actually inter-connecting and being exchanged in Hillsborough County in support of Early Childhood Mental Health?

A Complexity Approach to Exploring The Emergence of Early Childhood Mental Health

Questions
Comparing to Theory(s)-to-Date
Observant Participation
Storymodeling
Cross-Scale Case Studies

Community Database Tracking

“Spotting Interconnections Forming for Early Childhood Mental Health in the Local Community”

micro
meso
macro

Physical – Skeletal
Nuclear family

Family & Friendship circle / class / neighborhood block

School / Neighborhood Service Program

Service Agency

Service District / Network

Social

Economic

Safety

Emotional

Learning

Spiritual

Neurological

Cultural

Economic
Of the 108 identified referral sources, who is actually referring caregiver-baby dyads to the Birth-8 Info & Referral Network?

Of the 68 identified concerns, which particular concerns are caregivers voicing?

Of the 125 identified supports, which particular supports are caregiver-baby dyads being referred to in the community?
Who’s Available When the Time is Right?

- There is a time in the morning when they go down for a nap, and I can talk on the phone, and in the afternoon, talk to moms on the phone, and when I pump I’m on the computer...every three hours, but sometimes go for five hours when by myself...and I get up at night...

- In the past, when [my daughter] has been sick they have weekend hours, which is nice since kids get sick on the weekends. I called and asked them something and the nurse said, **“We can’t answer questions on the weekends...we don’t do triage on the weekends...we don’t answer questions, but you can make an appointment and bring them in.”** And I thought...I need...I don’t know who would do this but why isn’t there a place where you can go to ask unimportant, so to speak, questions where you can go without paying a co-pay? To go to the doctor to sit in the office for three hours so they can tell you, **“Oh yeah, just give them some Tylenol”**...why can’t you tell me that on the telephone?

- I’ve gotten that a lot – the way [parents] say [how thank they are], I’ve gotten the sense that no one else has taken the time. And you can feel people rushing on the phone as if I’ve had better things to do than talk to them. And our experiences with the statewide insurance – being on both ends of that – and really what that feels like to call some place and keep getting people that are rushed and say no. And I think that’s a real problem, that unresponsiveness, that you get continuously. So then you add to that the stress of a new parent... So I think if everyone that works with families – take a deep breath, count to ten, and then try, listen – rather than this continuous, “No.”

Who’s Available When the Time is Right?

- Something that bugs me is how a doctors office...they will not give you advice over the phone...you have to take them in And I called the other day, when they weren’t feeling well. They encourage you to call, they say call, call, call, so I called and they say come in. And I wanted to know how much...on all the medicines they say under 24 pounds, ask a doctor, that’s just all the time [not for you honey...are you ready for your nap? No, but you can play with the bag...elmo?] so I called [that is not for you...not a toy]...So I called and said, “I am going to give my kids some Tylenol, they are not feeling well...how much for 17 pounds?” And they said you should bring them in. And I said, “I’m not going to come in...I’m going to give them some Tylenol, how much should I give?” And I had a pretty good guess, but they didn’t want to tell me, they wanted me to bring them in. “Okay thank you for your help.”
Barriers to Connection for Exchange of Supports

- One of the ladies in the Neighborhood Service Center, I spoke with her about getting the charge for his first school paid off and she was like - they couldn’t do it because I didn’t have the money and I was like if I had the money I wouldn’t be coming to you guys for help. And she was like well we’re going to have to be sure you’re going to be able to do it next time. And I was like well I have money coming in now, and she was like well we can’t do it and I was like, ok.

- And there was a place right next to it, a little white building next to it in between a restaurant and what used to be the food stamp place… I went in there to ask for help with my school books, and they were like you gotta fill out these forms and leave a message for this person, they’ll call you back. So I was like ok, I filled out those forms and called that person and when I came when they called me to come back in they were like, well I’m not the right person you need to speak with this person, so go fill out this form and go speak with this person. So I did that and two days later I got another call from that person and I came in and they told me well we don’t have money in our pockets to do that kind of thing and I was like, ok.

Identifying Cross-Scale Similarities

- What is the same across scales about how support is inter-connecting and being exchanged?

Facilitators of Connection for Exchange of Supports

- With the community based social service program it feels like they’re more willing to help, it’s like everybody there is making that effort. They want to make that effort to make your life better, to help you out… whereas if you go to another place you kind of get that feeling that they’ve got them so they don’t care if you get yours or not… with [CBSSP] it’s more of like an urgency, we need to do this for this person” type of feeling, and I was just really happy to find them.

- [How did you find them?]

- We moved into the complex and I ran into [program director] and [program director] knew my mom and told me to come into see her in her office. And when I came in she told me she was going to have me fill out some paperwork and I was like ugh, paperwork, but I only had to fill that out once, and it was like a page and a half, and I turned that in and they gave me a case manager and got the ball rolling. So long story short [program manager] is an old family friend and mom got to talking to her about what we were going through and [program manager] had already talked to mom about helping her to deal with her issues and told mom when she saw me she was going to talk to me about dealing with my issue and she did.

Cross-Scale Similarities

- Just-in-time sensemaking
- Seeking out knowledge hubs
- Emergence of feedback loops
Opportunities for Increasing Attuned Responsivity upon Recognizing Local Patterns

- Relationship-based:
  - neighborhood centers
  - information & referral systems
  - care management services
  - training & technical assistance
  - cross-sector, cross-scale collaboratives

…so that knowledge can “catch and spread” within and throughout communities