

TOOLKIT for PRIMARY CARE PROVIDERS

Prepared by:

The Child Welfare Academy & Pittz Consulting



For the:

All Alaska Pediatric Partnership (A2P2)



With funding provided by Alaska Children's Trust



September, 2016

The Strengthening Families Approach was developed by the Center for the Study of Social Policy (CSSP). <http://www.cssp.org/>

Strengthening Families is a framework developed by the Center for the Study of Social Policy (CSSP) to prevent child abuse and neglect by building five protective factors.

To embed these protective factors into existing programs and systems, CSSP works with national organizations, states and federal partners, including Strengthening Families Alaska. The protective factors are informed by evidence from rigorous research and have widespread support from social researchers, child welfare officials, early childhood practitioners and policy experts. Since 2007, more than 30 states have adopted the Strengthening Families approach into their work with children and families.



strengthening families™

A PROTECTIVE FACTORS FRAMEWORK

Strong Families

Optimal Child Development

Prevention of Child Maltreatment

Medical providers reach the vast majority of American children; parents look to them for reassurance, guidance, expertise and the ability to recognize and understand when things are off track. Their relationships with families give them the opportunity to see patterns of behavior evolve and discern when additional services may be warranted. Medical providers can play an important role in helping parents and caregivers learn to care for themselves as an important part of caring for their children. Sometimes the provision of anticipatory guidance is sufficient; other times they can steer families to needed supports. This document will provide pediatricians and other health care providers with prevention and intervention resources.

Parents are important partners in supporting the health and well-being of children, but sometimes they need support and help building their own capacity to effectively support their children. Strengthening Families is a research-based protective factors framework that provides a set of resources and tools for supporting parents, particularly those who seem to be overwhelmed by parenting, isolated, or struggling to understand and respond to their children's needs. Across the country, states, programs, communities and medical providers are using the Strengthening Families Protective Factors Framework to guide their work and help them to focus on protective factors that all families need.¹

Introductory Points:

- Stress is a normal part of children’s lives. Some stress is healthy and necessary for children to develop the skills they need to make their way through life. Unfortunately, some children experience unhealthy or “toxic” amounts of stress due to factors in their environment or difficult situations in their families. This can impede their normal development.
- Preventing or managing prolonged periods of unhealthy stress is important because of the negative impacts on neurobiological systems and long-term health outcomes. Young children are especially vulnerable to the *experience and effects* of poor caregiving and/or maltreatment. *When stress becomes toxic (repeated and severe) it can impact the physical architecture of the brain—potentially impairing children’s long-term development.* ²
- Alaska children experience significant rates of “Adverse Childhood Experiences” (ACEs). In the 2011-2012 National Survey of Children’s Health (U.S. Department of Health and Human Services, Health Resources and Services Administration), Alaska parents reported that 20% of children experienced income difficulty, 20% experienced the separation or divorce of their caregivers, 9.6% experienced neighborhood violence, 10% were living with someone with a mental illness and 14% were living with someone abusing substances. ³
- Many parents experienced Adverse Childhood Experiences (ACEs) themselves prior to the age of 18. In the 2013 Behavioral Risk Factor Surveillance System (Alaska Department of Health and Social Services, Division of Public Health) 31% of Alaska adults reported experiencing emotional/verbal abuse, 19% physical abuse, 14.8% sexual abuse, 21.9% mental illness in the household, 33.8% substance abuse in the household, 11.5% an incarcerated family member, 31.7% separation or divorce, and 18.7% domestic violence.⁴

Toxic Stress

According to the Center on the Developing Child at Harvard University:

1. Early experiences influence the developing brain.
2. Chronic stress can be toxic to developing brains.
3. Significant early adversity can lead to lifelong problems.
4. Early intervention can prevent the consequences of early adversity.
5. Stable, caring relationships are essential for healthy development.

http://developingchild.harvard.edu/topics/science_of_early_childhood/toxic_stress_response/

- Utilizing an ecobiodevelopmental (EBD) framework for understanding the promotion of health and prevention of disease across the life span has been suggested by the Center on the Developing Child at Harvard University. The EBD Approach recognizes the relationship between “nature (genetic predispositions) and nurture” and acknowledges the key foundations to healthy development as: stable, responsive relationships; safe, supportive environments; and appropriate nutrition. Additionally, caregiver and community capacities such as time and commitment; financial, psychological and institutional resources; and skills and knowledge are significant contributors.⁵
- ***“The single most common factor for children who develop resilience is at least one stable and committed relationship with a supportive parent, caregiver, or other adult. These relationships provide the personalized responsiveness, scaffolding, and protection that buffer children from developmental disruption. They also build key capacities—such as the ability to plan, monitor, and regulate behavior—that enable children to respond adaptively to adversity and thrive.”***⁶
- The well-being of parents and children are closely linked. When parents are overwhelmed with general life and parenting stress their capacity to support their children and contribute to their family is diminished. Parents who receive the support they need; have the capacity to problem solve and manage their own stress; and are able to access assistance when needed are more available to attend to their children’s health and well-being. Research shows that when parents develop protective factors the risk of child maltreatment is greatly reduced, child development is improved and families are stronger.⁷
- All parents need support. Many families are fortunate to have healthy relationships they can depend on for parenting information, help in managing stress, and encouragement in raising their children. Other families

Adverse Childhood Experiences

The ACE Study examined the long-term impacts of abuse and household dysfunction during childhood on adult health status.

Some of the health issues and risk factors that individuals exposed to ACEs in childhood experience at a higher rate included:

- Risk for intimate partner violence
- Multiple sexual partners
- Smoking
- Suicide attempts
- Unintended pregnancies
- Early initiation of smoking
- Early initiation of sexual play
- Alcoholism & alcohol abuse
- Chronic obstructive pulmonary disease (COPD)
- Depression
- Fetal death
- Healthy-related quality of life
- Illicit drug use
- Ischemic heart disease (IHD)
- Liver disease
- Poor work performance

As the number of ACEs increase, the risk for health problems increases in a graded fashion.

<http://www.cdc.gov/violenceprevention/acestudy/index.html>

are more vulnerable and can benefit from strengthening the protective factors that have been shown to keep families strong.

- The Strengthening Families Approach is a research-informed, strengths-based approach originally created by the Center for the Study of Social Policy (CSSP) in 2003. In September 2014, CSSP published a report that updated and synthesized the “ideas and research from the neurobiological, behavioral, and social sciences that further inform, the evidence base of CSSP’s Strengthening Families approach and Protective Factors Framework”. *The Strengthening Families Approach and Protective Factors Framework: Branching Out and Reaching Deeper* report was authored by Charlyn Harper Browne, Ph.D. and can be found on the CSSP website. (http://www.cssp.org/reform/strengtheningfamilies/2014/The-Strengthening-Families-Approach-and-Protective-Factors-Framework_Branching-Out-and-Reaching-Deeper.pdf)
- Rather than requiring a new program, new staff, or new funding, **the Strengthening Families Approach provides a framework for enhancing the work you are already doing**. It provides a simple framework that can help providers be more *intentional and impactful* in helping families strengthen their protective factors. When multiple service providers incorporate the Strengthening Families approach, it creates a common language easily understood by families.
- The American Academy of Pediatrics (AAP) is supportive of the Strengthening Families Approach. The AAP partnered with CSSP to produce a brief for Primary Health Partners entitled: *Promoting Children’s Health and Resiliency: A Strengthening Families Approach*. (http://www.cssp.org/reform/strengthening-families/messaging-at-the-intersection/Messaging-at-the-Intersections_Primary-Health.pdf) (See Appendix)

What is Strengthening Families?

Strengthening Families™ is a research-informed approach to increase family strengths, enhance child development and reduce the likelihood of child abuse and neglect. The overarching goal is the promotion of child and family well-being. It is based on engaging families, programs and communities in building five protective factors that help families succeed and thrive, even in the face of risk and challenges.

The Strengthening Families approach is grounded in seven foundational ideas:

1. **The two generation approach-** promoting young children’s healthy development by developing the capabilities and resources of parents or caregivers.

2. **A consideration of culture**-investigating, understanding, and appreciating cultural differences and commonalities in parenting beliefs, values, expectations, practices and child-rearing goals; being attuned to cultural competence and cultural humility.
3. **The strengths-base perspective**-appreciating and highlighting the relationships and processes that support and protect families and family members, especially during times of adversity and change.
4. **The biology of stress**-understanding the neurobiological impacts of adverse childhood experiences and how supportive parenting and positive relationships can foster positive adaptation.
5. **Resilience theory**-supporting the potential to rebound from adversity strengthened and more resourceful.
6. **A focus on well-being**-focusing on healthy development and well-being for all families, with a particular focus on families whose circumstances include multiple risk factors for child maltreatment.
7. **The nature of risk and protective factors**-acknowledging the individual, relational, community, and societal factors that must be addressed in order to promote healthy child, adult, and family well-being.

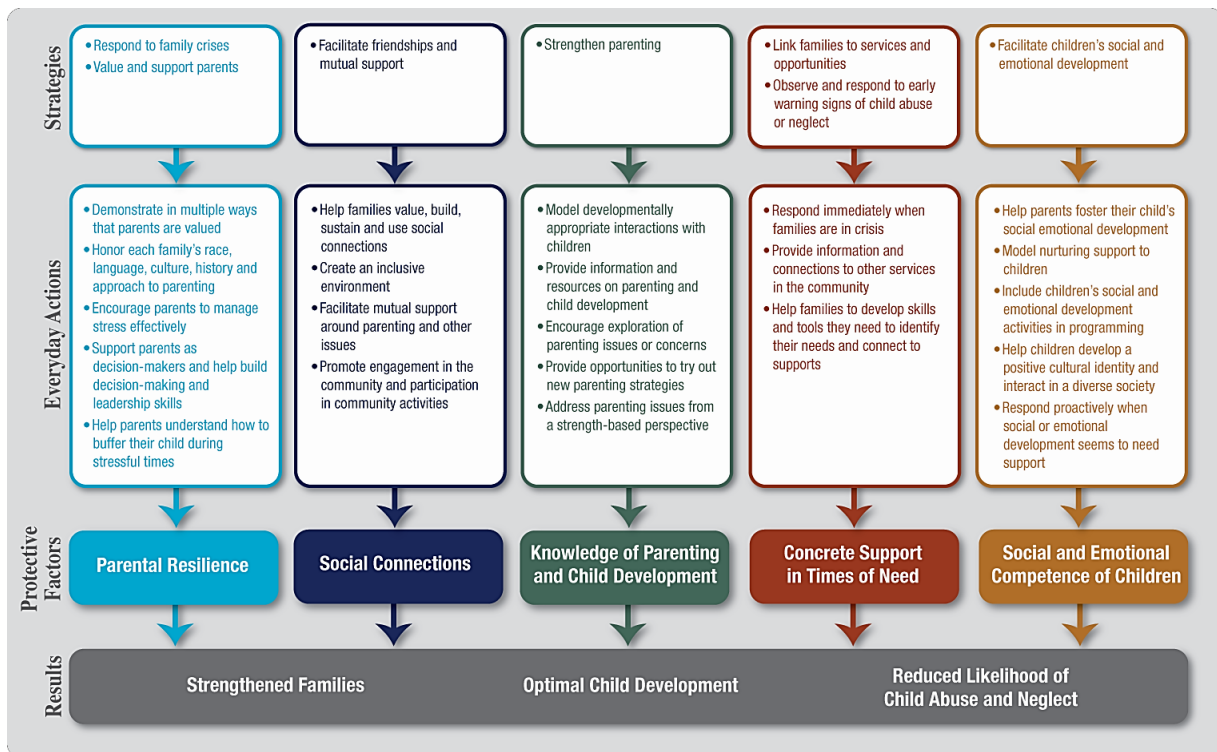
The five protective factors associated in research literature with lower rates of child abuse and neglect are:

- ❖ Parental Resilience
- ❖ Social Connections
- ❖ Knowledge of Parenting and Child Development
- ❖ Concrete Support in Times of Need
- ❖ Children's Social and Emotional Competence

Strengthening Families is a research-informed approach that is grounded in the belief that healthy development and well-being cannot be explained simply as preventing, mitigating, coping with, or eliminating risk factors. Thus, the five Strengthening Families protective factors are interrelated attributes or conditions that simultaneously (a) prevent or mitigate the effect of exposure to risk factors and stressful life events, and (b) build family strengths and a family environment that promotes optimal child development.

The Center for the Study of Social has developed a logic model that describes Strategies and “Everyday Actions” that programs and practices can provide, which help families build and strengthen each protective factor.

Strategies and Everyday Actions that Help Build Protective Factors



Parental Resilience

Managing both general life and parenting stress and functioning well when faced with stressors, challenges, or adversity; the outcome is positive change and growth

- Although we may be genetically predisposed at birth to have certain temperamental qualities, resilience is not a personality trait one is born with.
- We can learn skills and behaviors that help us to manage stress and seek the support that we need.
- Resilience is highly dependent on the quality of the environments we find ourselves in and may not be consistent in all areas of our lives.
- Resilience mechanisms are contextually and culturally dependent.
- Building parents' capacity to respond to stressful situations in productive ways is an important part of helping them to parent effectively.⁹

THE BUILDING BLOCKS OF RESILIENCE



Implications for practice:

- Ask about questions about how both the parent and child are doing
- Provide support and encouragement whenever possible
- Assist parents in accessing resources to help with stress management, problem solving and coping strategies
- Assist parents in accessing services such as Help Me Grow, etc.
- Acknowledge strengths and abilities
- Address mental health concerns through referrals to appropriate services

Ellie hurried through the door with her five year old son Luke who had an appointment for his kindergarten physical. She apologized repeatedly for being late on their way to the exam room. "I just can't seem to get anywhere on time any more. I have too much going on." "You're feeling stretched pretty thin?" the nurse responded as she took Luke's vital signs. This led to a brief conversation about some of the extra work duties that were assigned to Ellie and the struggle she was having managing the additional demands. "I've got a great tip sheet for managing stress I'll send along with you today. I've found some of the ideas really helpful when things get a little overwhelming."

Communication Openers:

Invitations: "It sounds like you have a concern. Would you like to talk about it?"

Reflections: "It's hard for you to....." (stay calm)
"You're unsure about....." (how to handle it)

Open Questions: "How would you like to handle things?"
"What do you think this is about?"

Social Connections

Having healthy, sustained relationships with people, institutions, the community, or a force greater than oneself

- All relationships are not created equal. Some build us up and provide support while others may be negative, judgmental and full of conflict.
- Positive social support enhances our sense of well-being and ability to handle stress, which in turn impacts our parenting.

- *Parents' healthy, constructive, and supportive social connections are valuable resources who provide:*
 - *Affiliative support* (e.g., companionships or a sense of community)
 - *Emotional support* (e.g., non-judgmental affirmation of parenting skills; empathy; validation of self-worth)
 - *Informational support* (e.g. parenting guidance or recommendations for health care services)
 - *Instrumental support* (e.g., transportation, financial assistance, or links to jobs)
 - *Spiritual support* (e.g., hope and encouragement; a sense of meaning to life)¹⁰



Implications for practice:

- Provide opportunities for parents to develop positive social connections
- Provide opportunities for parents to examine their social network and develop strategies for developing supportive relationships
- Be alert to parents who may be isolated or depressed
- Be available when parents need to reach out
- Employ or contract with a social worker to address these issues with parents

Social Support

Social support is the most powerful protection against becoming overwhelmed by stress and trauma.

The critical issue is reciprocity: being truly heard and seen by the people around us, feeling that we are held in someone else's mind and heart.

Van der Kolk, 2014, *The Body Keeps the Score*

Dr. Peterson had seen several parents that day who didn't seem to have anyone in their lives they could turn to for support, information or help. He noticed the extra strain it was putting on them personally and the impact it was having on their parenting. Occasionally the parents scheduled appointments just so they had someone to talk to. He decided to bring this issue up with his team at their next staff meeting. One idea that seemed to rise to the top was hosting a monthly "Parent Café" where parents could get together to talk about their parenting issues. One staff member offered to take the lead on making the arrangements and facilitating the group. Other members committed to sharing the opportunity with parents and encouraging participation. A small group of parents began attending the groups which often led to play dates and dinners outside the group.

Knowledge of Parenting & Child Development

Understanding the unique aspects of child development; implementing developmentally and contextually appropriate best parenting

- Parents who understand child development have more realistic expectations of their children based on their developmental stage. ¹¹
- Research in the area of neuroscience and developmental psychology have highlighted the importance of the early years as foundational for later development.
- Even parents who wish to do a good job, may not have the knowledge or skills to guide and support their children
- Effective parenting varies with respect to culture and circumstances



Implications for practice:

- Address current parent concerns with information about child development and parenting along with anticipatory guidance
- Encourage exploration of parenting issues and other family concerns that could be impacting the child
- Address parenting issues from a strength-based perspective
- Create opportunities for parents to discuss their parenting concerns with other parents who have common concerns



Lucy and Mark were new foster parents who recently began caring for two young children ages three and five. Their biological children were now in middle and high school and doing well. Staff knew Lucy and Mark to be attentive, effective parents who had done a great job with their own children. Foster parenting threw them for a loop however. Although they applied the same parent techniques that served them so well with their own children, their new foster children didn't seem to respond. The challenging behaviors, tantrums, and sleeping difficulties were disrupting the entire household. When Lucy and Mark met with their practitioner, they were provided information on the impacts of trauma on children's behavior and some of the resources that were available to them. A referral to a mental health clinician made all of the difference in the world. With a plan in place and consistent support, Lucy and Mark were able to provide the stable, nurturing environment these children needed.

Concrete Support in Times of Need

Identifying, seeking, accessing, advocating for, and receiving needed adult, child, and family services; receiving a quality of service designed to preserve parents' dignity and promote healthy development

- We all need help sometimes, even socially connected families may have to reach beyond their informal networks to the more formal set of community supports and services.
- Having access to supports and services can help to minimize the stress caused by challenges a family faces.
- The stigma of asking for help and mistrust of the social service “system” can be significant barriers to families getting many services, including mental health and domestic violence services. Some parents need a trusted ally to help them.



Implications for practice:

- Help parents connect with the resources they need to build a healthy environment for their children
- Be alert for signs a family crisis has occurred or could occur if left unaddressed
- Help families develop the skills and tools they need to assess their needs and access resources

- Reduce the stigma of asking for help and help families to see the ability to engage in and access services as a strength

Janice, an experienced nurse, understood the difference a father can make in a child's life. When a young father brought his daughter in for an ear infection and talked about his challenges as a single parent, Janice took the time to listen. As he talked about the difficulty of finding housing that was affordable and making ends meet, Janice could see how the daily struggle was making his ability to care for his child extremely difficult. Janice provided him with a list of community resources where he could find assistance and encouraged him to call. Knowing how important it is for struggling parents to have hope and see their strengths, she also affirmed his commitment to his daughter and all the efforts he was making to take care of her. "Your daughter is lucky to have such a concerned and caring parent."



Social and Emotional Competence in Children

Providing an environment and experiences that enable the child to form close and secure adult and peer relationships, and to experience, regulate, and express emotions

- Social and emotional competence is especially important because it impacts all other developmental domains
- Children who can regulate and express their emotions and get along with others are easier to parent
- Social and emotional competence does not develop on its own.
- The most significant factors in developing a strong foundation for social and emotional competence are children’s relationships, the activities they have opportunities to engage in, and the places in which they live, learn, and play. Parents can support this development by providing a warm, nurturing, and predictable caregiving environment, provide support and encouragement, protect from harm, and model positive management of emotions and social skills.¹²



Implications for practice:

- Include social and emotional development in anticipatory guidance discussions
- Model age-appropriate, nurturing care with children
- Help parents understand the link between their well-being and their children’s
- Help families access specialized services and resources for their children

“She has these major meltdowns at school and doesn’t seem to get along with anyone anymore”, said Angie’s mom. “What is wrong with her?” After talking with Mom about recent changes in Angie’s life, her practitioner discovered that a young friend of Angie’s had died in a car accident. There was an empty desk at school and Angie’s usual playmate at recess was missing. While the adults had expected the kids to move on, Angie was still struggling and worried about the same thing happening to her. As Mom and her practitioner talked about this, they came up with ways that Mom could talk with Angie about her friend and help her develop strategies for when she became worried or upset. With mom’s new awareness she was able to talk with Angie’s teacher and school counselor and alert them to Angie’s needs.

Social & Emotional Competence

The National Scientific Council on the Developing Child (2004) identified the core features of social and emotional competence as:

- The ability to identify and understand one’s own feelings,
- To accurately read and comprehend emotional states in others,
- To manage strong emotions and their expression in a constructive manner,
- To regulate one’s own behavior,
- To develop empathy for others, and
- To establish and sustain relationships.

The Strengthening Families approach:

- ❖ Benefits ALL families
- ❖ Builds on family strengths, buffers risk, and promotes better outcomes
- ❖ Can be implemented through small but significant changes in everyday actions
- ❖ Builds on and can become a part of existing programs, strategies, systems and community opportunities
- ❖ Is grounded in research, practice and implementation knowledge

EVERYDAY ACTIONS FOR IMPLEMENTING A STRENGTHENING FAMILIES APPROACH

- Have parent friendly materials and resources available in waiting rooms, in offices, and on practice websites.
- Set up waiting rooms to encourage interactions and network building between families
- Help parents understand the link between taking care of themselves and taking care of their child.
- Survey parents and/or regularly ask about their well-being and the protective factors.
- Incorporate measures to identify family- and community- level factors that put children at risk such as maternal depression, domestic violence, community violence, food scarcity, poor social connectedness.
- Educate parents on the protective factors, hang posters and include in discussions.
- Provide anticipatory guidance based on the development of each child as well and address current parental concerns.
- Regularly screening children to identify those at-risk children, provide evaluation, referral and follow-up as needed.
- Keep informed and utilize the full range of community resources.
- Ask for parent feedback about how your practice is doing in support of families.
- Establish parent advisory groups to improve your practice.

MAKING IT STICK- Tips for Organizing Your Office Practice

- Ensure that all of your staff, including practice support and nursing staff are aware and engaged in implementing this approach
- Set practice goals for supporting families
- Establish a workflow for handling questionnaires, sharing materials, making referrals
- Set up a system that prompts inquiry about the protective factors and follow-up on past discussions
- Incorporate the protective factors into your EHR system
- Have regular “lunch & learns” to discuss cases and how the Strengthening Families Protective Factors can help
- Maintain links to community resources

Identifying and Responding to Children Who Have Experienced Trauma

Children who have or are currently experiencing trauma are in need of special attention. Trauma can be the result of exposure to a natural disaster such as an earthquake or flood or to events such as war and terrorism. Witnessing or being the victim of community or domestic violence, bullying, serious injury, or child neglect, physical or sexual abuse can be traumatic.

According to the National Child Traumatic Stress Network about one of every four children will experience a traumatic event before the age of 16. Young children are especially vulnerable, have the highest rates of any age group for child maltreatment and are more likely to be hospitalized or die from drowning, burns, falls, choking and poisoning than older children.

The type of trauma, the age at which a child is exposed, the child’s history of previous trauma or loss, can all make a difference in how a child will respond. When faced with traumatic experiences that are unpredictable and uncontrollable, children must redirect the resources targeting normal development into survival and coping.

Trauma

Individual trauma results from an **event**, series of events, or set of circumstances that is **experienced** by an individual as physically or emotionally harmful or life threatening and that has lasting adverse **effects** on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being.

SAMHSA, 2014, SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach. HHS Publication No. (SMA) 14-4884. Rockville, MD

As we learned from the Adverse Childhood Experiences Study, this can have lifelong impacts on learning, behavior, and physical and mental health. Having a reliable and responsive caregiver that will protect and nurture is critical in helping the child deal with whatever trauma they have experienced.

A primary care provider is often the most likely professional to have a consistent and ongoing relationship with a family. Primary care providers need to be especially alert to identifying children and their families experiencing or dealing with trauma and connecting them with the support that they need.



Implications for Practice:

- Ensure staff are trained in the identification and impacts of trauma
- Ensure the practice has a protocol in place for reporting child abuse and neglect and all staff are aware of their responsibilities
- Be aware that parents may have also experienced trauma and need our support and attention
- Implement the Strengthening Families Protective Factors approach for all families and especially those experiencing high levels of stress in their lives
- Maintain relationships and frequent contact with families

“Research shows that when parents develop protective factors the risk of child maltreatment is greatly reduced, child development is improved and families are stronger.”

Harper Browne, C. (2014, September). The Strengthening Families Approach and Protective Factors Framework: Branching out and reaching deeper. Washington, DC: Center for the Study of Social Policy. This

FOOTNOTES:

1. *Primary Health Partners- Promoting Children’s Health and Resiliency: A Strengthening Families Approach*, Center for the Study of Social Policy & AAP, http://www.cssp.org/reform/strengthening-families/messaging-at-the-intersection/Messaging-at-the-Intersections_Primary-Health.pdf
2. Harvard Center on the Developing Child at Harvard University. http://developingchild.harvard.edu/topics/science_of_early_childhood/toxic_stress_response/
3. Sidmore, P. Alaska Mental Health Board & Advisory Board on Alcoholism and Drug Abuse, <http://dhss.alaska.gov/abada/ace-ak/Pages/default.aspx>
4. Sidmore, P. Alaska Mental Health Board & Advisory Board on Alcoholism and Drug Abuse, <http://dhss.alaska.gov/abada/ace-ak/Pages/default.aspx>
5. Harvard Center on the Developing Child at Harvard University (2010). *The Foundations of Lifelong Health Are Built in Early Childhood*. <http://developingchild.harvard.edu/resources/the-foundations-of-lifelong-health-are-built-in-early-childhood/>
6. Harvard Center on the Developing Child at Harvard University. <http://developingchild.harvard.edu/science/key-concepts/resilience/>
7. Harper Browne, C. (2014, September) (*The Strengthening Families Approach and Protective Factors Framework: Branching out and Reaching Deeper*). Washington, DC: Center for the Study of Social Policy. http://www.cssp.org/reform/strengtheningfamilies/2014/The-Strengthening-Families-Approach-and-Protective-Factors-Framework_Branching-Out-and-Reaching-Deeper.pdf
8. Harper Browne, C. (2014, September) (*The Strengthening Families Approach and Protective Factors Framework: Branching out and Reaching Deeper*). Washington, DC: Center for the Study of Social Policy. http://www.cssp.org/reform/strengtheningfamilies/2014/The-Strengthening-Families-Approach-and-Protective-Factors-Framework_Branching-Out-and-Reaching-Deeper.pdf
9. *Primary Health Partners- Promoting Children’s Health and Resiliency: A Strengthening Families Approach*, Center for the Study of Social Policy & AAP, http://www.cssp.org/reform/strengthening-families/messaging-at-the-intersection/Messaging-at-the-Intersections_Primary-Health.pdf
10. Jordan, A., (*Tapping the power of social networks. Understanding the role of social networks in strengthening families and transforming communities*). Retrieved from the Annie E. Casey Foundation: www.aecf.org/m/resourcedoc/AECF-TappingthePowerofSocialNetworks-2006.pdf

11. *Primary Health Partners- Promoting Children’s Health and Resiliency: A Strengthening Families Approach*, Center for the Study of Social Policy & AAP,
http://www.cssp.org/reform/strengthening-families/messaging-at-the-intersection/Messaging-at-the-Intersections_Primary-Health.pdf
12. Harvard Center on the Developing Child at Harvard University.
<http://developingchild.harvard.edu/resourcetag/resilience/>

RECOMMENDED:

Websites:

AAP, The Resilience Project: <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/resilience/Pages/default.aspx?nfstatus=401&nftoken=00000000-0000-0000-0000-000000000000&nfstatusdescription=ERROR%3a+No+local+token>

Alaska Mental Health Board, Adverse Childhood Experiences in Alaska:
<http://dhss.alaska.gov/abada/ace-ak/Pages/default.aspx>

A2P2: <http://www.a2p2.org/>

Center on the Developing Child, Harvard University: <http://developingchild.harvard.edu/>

Child Welfare Academy: <https://www.uaa.alaska.edu/academics/college-of-health/departments/school-of-social-work/child-welfare-academy/>

Help Me Grow Alaska: <http://www.helpmegrownational.org/pages/affiliate-states/affiliate.php?AffId=30>

National Child Traumatic Stress Network: <http://nctsnet.org/>

Strengthening Families Alaska: <http://dhss.alaska.gov/ocs/Pages/families/default.aspx>

Strengthening Families, Center for the Study of Social Policy:
<http://www.cssp.org/reform/strengtheningfamilies>

Articles/Reports:

AAP- Lifelong Effects of Toxic Stress:
<http://pediatrics.aappublications.org/content/pediatrics/129/1/e232.full.pdf>

AAP-Early Child Adversity, Toxic Stress and the Role of the Pediatrician:
<http://pediatrics.aappublications.org/content/pediatrics/129/1/e224.full.pdf>

Addressing Adverse Childhood Experiences and Other Types of Trauma in the Primary Care Setting
<http://pediatrics.aappublications.org/content/pediatrics/129/1/e224.full.pdf>

Becoming a Trauma Informed Practice: <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/resilience/Pages/Becoming-a-Trauma-Informed-Practice.aspx?nfstatus=401&nftoken=00000000-0000-0000-0000-000000000000&nfstatusdescription=ERROR%3a+No+local+token>

Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescents- Promoting Family Support: https://brightfutures.aap.org/Bright%20Futures%20Documents/2-BF_Promoting_Family_Support.pdf

Bright Futures Promoting Community Relationships:
<https://brightfutures.aap.org/Bright%20Futures%20Documents/CommunityResources.pdf>

Core Meanings of the Protective Factors:
<http://www.cssp.org/reform/strengtheningfamilies/2015/Core-Meanings-of-the-SF-Protective-Factors-2015.pdf>

Early Childhood Adversity, Toxic Stress, and the Role of the Pediatrician: Translating Developmental Science into Lifelong Health:
<http://pediatrics.aappublications.org/content/129/1/e224.full?sid=23890cdd-dd37-48d6-9b5a-3c15ea20510b>

The Foundations of Lifelong Health: <http://46y5eh11fhgw3ve3ytpwxt9r.wengine.netdna-cdn.com/wp-content/uploads/2010/05/Foundations-of-Lifelong-Health.pdf>

In Brief: The Foundations of Lifelong Health:
<http://developingchild.harvard.edu/resources/inbrief-the-foundations-of-lifelong-health/>

In Brief: The Science of Early Childhood Development:
<http://developingchild.harvard.edu/resources/inbrief-science-of-eed/>

In Brief: the Impact of Early Adversity on Children's Development:
<http://developingchild.harvard.edu/resources/inbrief-the-impact-of-early-adversity-on-childrens-development/>

Primary Health Partners, Promoting Children's Health and Resiliency: A Strengthening Families Approach: http://www.cssp.org/reform/strengthening-families/messaging-at-the-intersection/Messaging-at-the-Intersections_Primary-Health.pdf

The Strengthening Families Approach and Protective Factors Framework: Branching out and Reaching Deeper: http://www.cssp.org/reform/strengtheningfamilies/2014/The-Strengthening-Families-Approach-and-Protective-Factors-Framework_Branching-Out-and-Reaching-Deeper.pdf

Tools to Support Strengthening Families Implementation
<http://www.cssp.org/reform/strengtheningfamilies/2014/Tools-to-support-SF-Implementation.pdf>

APPENDIX for Toolkit Resources

TITLE:	PAGE NUMBERS (enter in search box):
Small But Significant Changes	22
Protective Factors Action Sheets	23
Self-Assessment Revised	34
Primary Health Partners	47
Positive Discipline Brochure	52
Pro Factors & Websites	54
Resilience Brochure	56
Resilience Brochure Brief	58
Temperament Brochure	59

SMALL BUT SIGNIFICANT CHANGES WE CAN MAKE TO BUILD PROTECTIVE FACTORS

PARENTAL RESILIENCE

Managing both general and parenting stress and functioning well when faced with challenges or adversity; the outcome is positive change and growth

SOCIAL CONNECTIONS

Having healthy, sustained relationships with people, institutions, the community, or a force greater than oneself

KNOWLEDGE OF PARENTING & CHILD DEVELOPMENT

Understanding the unique aspects of child development and implementing developmentally and contextually appropriate best parenting

CONCRETE SUPPORT IN TIMES OF NEED

Identifying, seeking, accessing, advocating for, and receiving needed adult, child and family services

SOCIAL AND EMOTIONAL COMPETENCY IN CHILDREN

Providing an environment and experiences that enable the child to form close and secure adult and peer relationships and to experience regulate, and express emotions

Parental resilience

Protective & Promotive Factors

Being a parent can be a very rewarding and joyful experience. But being a parent can also have its share of stress. Parenting stress is caused by the pressures (stressors) that are placed on parents personally and in relation to their child:

- *typical events and life changes* (e.g., moving to a new city or not being able to soothe a crying baby)
- *unexpected events* (e.g., losing a job or discovering your child has a medical problem)
- *individual factors* (e.g., substance abuse or traumatic experiences)
- *social factors* (e.g., relationship problems or feelings of loneliness and isolation)
- *community, societal or environmental conditions* (e.g., persistent poverty, racism or a natural disaster)

Numerous researchers have concluded that how parents respond to stressors is much more important than the stressor itself in determining the outcomes for themselves and their children. Parents are more likely to achieve healthy, favorable outcomes if they are resilient. Resilience is the process of managing stress and functioning well even when faced with challenges, adversity and trauma.

Some stressors parents face can be managed easily so that problems get resolved; for example, calling a relative or friend to pick-up a child from school when a parent is delayed. But some stressors cannot be easily resolved. For example, parents cannot “fix” their child’s developmental disability, erase the abuse they suffered as a child or be able to move out of a crime-plagued neighborhood. Rather, parents are resilient when they are able to call forth their inner strength to proactively meet personal challenges and those in relation to their child, manage adversities, heal the effects of trauma and thrive given the unique characteristics and circumstances of their family.

Demonstrating resilience increases parents’ self-efficacy because they are able to see

evidence of both their ability to face challenges competently and to make wise choices about addressing challenges. Furthermore, parental resilience has a positive effect on the parent, the child and the parent-child relationship. By managing stressors, parents feel better and can provide more nurturing attention to their child, which enables their child to form a secure emotional attachment. Receiving nurturing attention and developing a secure emotional attachment with parents, in turn, fosters the development of resilience in children when they experience stress.

Sometimes the pressures parents face are so overwhelming that their ability to manage stress is severely compromised. This is the case with parents who grew up in environments that create toxic stress. That is, as children, they experienced strong, frequent and prolonged adversity without the buffering protection of nurturing adult support. As a result, these parents may display symptoms of depression, anxiety, or other clinical disorders that inhibit their ability to respond consistently, warmly and sensitively to their child’s needs. For example, depressive symptoms in either mothers or fathers are found to disrupt healthy parenting practices so that the child of a depressed parent is at increased risk of poor attachments, maltreatment and poor physical, neurological, social-emotional, behavioral and cognitive outcomes. However, numerous research studies show parents can be helped to manage clinical symptoms and reactions to their own histories of poor attachments and trauma, to protect children from adversity and trauma as best they can and to provide more nurturing care that promotes secure emotional attachment and healthy development in their children.

All parents experience stress from time-to-time. Thus, parental resilience is a process that all parents need in order effectively manage stressful situations and help ensure they and their families are on a trajectory of healthy, positive outcomes.

PARENTAL RESILIENCE: ACTION SHEET

Your role

Your daily interactions with parents can help them to build their resilience and their belief in themselves as parents and capable decision-makers. You can:

- Projecting a positive and strengths-based approach to all families
- Support parents as key decision-makers for their families and provide opportunities for decision-making that affects the program or community
- Encourage parents to take care of themselves, particularly during stressful times
- Normalize the fact that parenting is stressful and help the parent plan proactively about how to respond to stressful parenting situations
- Validate and support good decisions

Questions to ask

- Where do you draw your strength?
- How does this help you in parenting?
- What are your dreams for yourself and family?
- What kind of worries and frustrations do you deal with during the day? How do you solve them?
- How are you able to meet your children's needs when you are stressed?
- How does your spouse, partner, or closest friend support you? When you are under stress, what is most helpful?
- What do you do to take care of yourself when you are stressed?

What to look for

- Problem solving skills
- Ability to cope with stress
- Self-care strategies
- Help-seeking behavior
- Receiving mental health or substance abuse services if needed
- Not allowing stress to impact parenting

Activities to do with parents

- Ask the parent to write down their self-care strategies and ensure that they are taking time for self-care each day.
- Ask the parent to identify situations they find stressful and make a plan in advance for how they will keep themselves calm and centered in these circumstances.

social connections

Protective & Promotive Factors

People need people. Parents need people who care about them and their children, who can be good listeners, who they can turn to for well-informed advice and who they can call on for help in solving problems. Thus, the availability and quality of social connections are important considerations in the lives of parents. Parents' constructive and supportive social connections—that is, relationships with family members, friends, neighbors, co-workers, community members and service providers—are valuable resources who provide:

- *emotional support* (e.g., affirming parenting skills or being empathic and non-judgmental)
- *informational support* (e.g., providing parenting guidance or recommending a pediatric dentist)
- *instrumental support* (e.g., providing transportation, financial assistance or links to jobs)
- *spiritual support* (e.g., providing hope and encouragement)

When parents have a sense of connectedness they believe they have people who care about them as individuals and as parents; they feel secure and confident that they have others with whom they can share the joy, pain and uncertainties that come with the parenting role; they seek timely assistance from people they have learned to count on when faced with challenges; and they feel empowered to “give back” through satisfying, mutually beneficial relationships. Several research studies have demonstrated that—for both mothers and fathers—high levels of emotional, informational, instrumental or spiritual support is associated with positive parental mood; positive perceptions of and responsiveness to one's children; parental satisfaction, well-being and sense of competence; and lower levels of anger, anxiety and depression.

Conversely, inadequate, conflicting or dissatisfying social connections can be the source of parental stress, rather than a buffer. For example, maternal and paternal grandparents may be very willing sources of informational and instrumental support to new parents, but their advice and manner of caregiving may be at odds

with the new parents' beliefs and preferences. At the extreme end of the continuum of poor social connections are social isolation (i.e., the lack of available and quality relationships) and loneliness (i.e., feelings of disconnectedness from others). Social isolation is a risk factor consistently associated with disengaged parenting, maternal depression and increased likelihood of child maltreatment. Similarly, loneliness may be a major stressor that inhibits parents' ability to provide consistent, nurturing, responsive care to their children.

It may seem that increasing the number of people who could provide constructive social support to parents would be the “cure” for social isolation and loneliness. Providing opportunities for parents to create and strengthen sustainable, positive social connections is necessary but alone is not sufficient. Parents can feel lonely and isolated even when surrounded by others if relationships lack emotional depth and genuine acceptance. Thus, parents need opportunities to forge positive social connections with at least one other person that engender emotional, informational, instrumental or spiritual support so that meaningful interactions may occur in a context of mutual trust and respect.

Constructive and supportive social connections help buffer parents from stressors and support nurturing parenting behaviors that promote secure attachments in young children. Therefore, parents' high quality social connections are beneficial to both the adults and the children.

SOCIAL CONNECTIONS: ACTION SHEET

Your role

You can help parents to think critically about their social network and how they could utilize it more effectively, as well as the skills and tools they need to expand it. The following strategies may assist you in engaging families in developing social connections:

- Model good relational behavior and use your interactions with families as an opportunity to help parents develop stronger relational skills
- When engaging the family's broader network in teaming or other supports, be sensitive to the quality of existing relationships and help the family identify supporters in their network who will contribute positively
- Invite parents to events where they can get to know each other – with or without their kids – and reach out especially to those parents that may be socially isolated
- If there are specific issues that serve as barriers for the family in developing healthy social connections such as anxiety or depression, encourage the family to address them

Questions to ask

- Do you have friends or family members that help you out once in a while?
- Are you a member of any groups or organizations?
- Who can you call for advice or just to talk? How often do you see them?
- What kind of social support do you need?
- Do you find it easy or challenging to make friends? If it is challenging, what specific things represent a barrier for you?
- What helps you feel connected?

What to look for

- Does the parent have supportive relationships with one or more persons (friends, family, neighbors, community, faith-based organizations, etc.)?
- Can the parent turn to their social network for help in times of need (for instance, when they need help with transportation, childcare or other resources)?
- Is the parent willing and able to accept assistance from others?
- Does the parent have positive relationships with other parents of same-age kids?
- Does the parent have skills for establishing and maintaining social relationships?
- Does the parent provide reciprocal social support to peers?

Activities to do with parents

- Work with the parent to develop an EcoMap showing the people and institutions that are sources of support and/or stress in his or her life.
- Role play with the parent to help them practice skills in approaching another parent to develop a friendship. Have the parent choose a realistic scenario such as starting a conversation at a school event, on the playground or at a place of worship.

Knowledge of Parenting and Child development

Protective & Promotive Factors

No parent knows everything about children or is a “perfect parent.” An understanding of parenting strategies and child development helps parents understand what to expect and how to provide what children need during each developmental phase. All parents, and those who work with children, can benefit from increasing their knowledge and understanding of child development, including:

- physical, cognitive, language, social and emotional development
- signs indicating a child may have a developmental delay and needs special help
- cultural factors that influence parenting practices and the perception of children
- factors that promote or inhibit healthy child outcomes
- discipline and how to positively impact child behavior

Gaining more knowledge about child development and developing greater skills in parenting are particularly important given the recent advances in the fields of neuroscience, pediatrics and developmental psychology. Scientists in these fields have provided much evidence of the critical importance of early childhood as the period in which the foundation for intellectual, social, emotional and moral development is established. Furthermore, numerous research studies show this foundation is determined by the nature of the young child's environments and experiences that shape early brain development.

Developing brains need proper nutrition, regularly scheduled periods of sleep, physical activity and a variety of stimulating experiences. Developing brains also need attuned, emotionally available parents and other primary caregivers who recognize and consistently respond to the needs of young children, and interact with them in an affectionate, sensitive and nurturing manner. Such care gives rise to the development of a secure attachment between the child and the adult. Young children with secure attachments develop a sense of trust, feel safe, gain self-confidence and are able to explore their environments because they feel they have a secure base.

Numerous longitudinal studies have demonstrated that parental behaviors that lead to early secure attachments—and which remain warm and sensitive as children grow older—lay the foundation for social-emotional, cognitive and moral competencies across developmental periods. For example, when a young child solicits interaction through babbling or facial expressions and a parent responds in a similar manner, this type of parent-child interaction helps to create neural connections that build later social-emotional and cognitive skills. In addition, advances in brain research have shown that parental behaviors that forge secure emotional attachments help young children learn to manage stress. Secure attachments can offset some of the damage experienced by highly stressed young children as a result of trauma (e.g., maltreatment or exposure to violence.)

In contrast, parental care that is inconsistent, unresponsive, detached, hostile or rejecting gives rise to insecure attachments. Young children who experience insecure attachments display fear, distrust, anxiety or distress and are at risk for long-term adverse effects on brain development including developmental delays, cognitive impairments, conduct problems, psychopathology and relationship challenges. For example, young children who have limited adult language stimulation and opportunities to explore may not fully develop the neural pathways that support learning.

What parents do and how they treat children is often a reflection of the way they were parented. Acquiring new knowledge about parenting and child development enables parents to critically evaluate the impact of their experiences on their own development and their current parenting practices, and to consider that there may be more effective ways of guiding and responding to their children. Furthermore, understanding the mounting evidence about the nature and importance of early brain development enables both parents and those who work with children to know what young children need most in order to thrive: nurturing, responsive, reliable and trusting relationships; regular, predictable and consistent routines; interactive language experiences; a physically and emotionally safe environment; and opportunities to explore and to learn by doing.

KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: ACTION SHEET

Your role

Each contact you have with the family provides an important opportunity to link them to parenting resources, provide child development information and model and validate effective caregiving. You can:

- Connect parents to parenting education classes or home visiting as appropriate for their situation
- Model appropriate expectations for the child
- Engage parents in dialogue when their expectations are not in line with the child's developmental phase
- Underline the importance of nurturing care to help the parent in valuing the importance of their own role
- Provide "just in time" parenting education: crucial information a parent needs at the time when parenting issues arise
- Help the parent identify a series of trusted informants that they can turn to when they need parenting information

Questions to ask

- What does your child do best and what do you like about your child?
- What do you like about parenting? What do you find challenging about parenting?
- How have you learned about parenting skills?
- How do you continue to learn about your child's development?
- What has helped you learn about yourself as a parent?
- Are there things that worry you about your child's development or behavior?
- Have other people expressed concern about your child?

What to look for

- Does the parent understand and encourage healthy development?
- Is the parent able to respond and manage their child's behavior?
- Does the parent understand and demonstrate age-appropriate parenting skills in their expectations, discipline, communication, protection and supervision of their child?
- Does the child respond positively to the caregivers' approaches?
- Does the parent understand and value their parenting role?
- Does the parent have a reliable source for parenting information when issues come up?
- Does the parent know how to encourage social-emotional development and apply a range of age-appropriate disciplinary strategies?
- Is the parent involved in their child's school, preschool or other activities?
- Does the parent understand the child's specific needs (especially if the child has special developmental or behavioral needs)?

Activities to do with parents

- Ask the parent what their hopes and dreams are for their child(ren). Discuss any worries the parent has about ensuring those hopes and dreams are met. Then discuss what the parent is doing today (or wants to do) to help achieve those hopes and dreams.

ConCrete Support in timeS of need

Protective & Promotive Factors

All parents need help sometimes—help with the day-to-day care of children, help in figuring out how to soothe a colicky baby, help getting to the emergency room when a bad accident happens, help in managing one's own temper when fatigued or upset. When parents are faced with very trying conditions such as losing a job, home foreclosure, substance abuse, not being able to feed their family or trauma, they need access to concrete support and services that address their needs and help to minimize the stress caused by very difficult challenges and adversity. Assisting parents to identify, find and receive concrete support in times of need helps to ensure they and their family receive the basic necessities everyone deserves in order to grow (e.g., healthy food, a safe environment), as well as specialized medical, mental health, social, educational or legal services.

When parents are faced with overwhelmingly stressful conditions they need to seek help, but for some parents asking for help is not an easy thing to do. It may be embarrassing for some parents because it feels like an admission of incompetence; that they don't know how to solve their own problems or take care of their family. Other parents may not seek help because they don't know where to go for help, or the services needed have a stigma associated with them such as mental health clinics and domestic violence or homeless shelters. Thus, parents need experiences that enable them to understand their rights in accessing services, gain knowledge of relevant services and learn how to navigate through service systems. Family and child-serving programs must clearly communicate to parents that seeking help is not an indicator of weakness or failure as a parent. On the contrary, seeking help is a step toward improving one's circumstances and learning to better manage stress and function well—even when faced with challenges, adversity, and trauma. When parents ask for help, it is a step toward building resilience.

When parents seek help, it should be provided in a manner that does not increase stress. Services should be coordinated, respectful, caring and strengths-based. Strengths-based practice is grounded in the beliefs that:

- It is essential to forge a trusting relationship between parents and service providers and among service providers working with the same families
- Regardless of the number or level of adverse conditions parents are experiencing, they have assets within and around them, their family and their community that can be called upon to help mitigate the impact of stressful conditions and to create needed change
- Parents have unrealized resources and competencies that must be identified, mobilized and appreciated
- Parents must be active participants in the change process and not passive recipients of services
- Parents must first be guided through, and subsequently learn how to navigate, the complex web of health care and social service systems
- In addition to addressing each parent's individual difficulties, strengths-based practitioners must understand—and work to change—the structural inequities and conditions that contribute to these difficulties

A strengths-based approach helps parents feel valued because they are acknowledged as knowledgeable and competent. They develop a sense of self-confidence and self-efficacy because they have opportunities to build their skills, experience success and provide help to others. Thus, access to concrete support in times of need must be accompanied by a quality of service coordination and delivery that is designed to preserve parents' dignity and to promote their and their family's healthy development, resilience and ability to advocate for and receive needed services and resources.

CONCRETE SUPPORT IN TIMES OF NEED: ACTION SHEET

Your role

As a professional working with families, your role is not just to provide referrals to needed services, but to identify any barriers the families may have in accessing those services. Helping families overcome those barriers is crucial to ensuring that their concrete needs are met. Such help may entail:

- Encouraging help seeking behavior
- Working with the family to understand their past experience with service systems and any stigma they attach to certain services
- Helping the family to navigate complex systems by explaining eligibility requirements, filling out forms or making a warm handoff to an individual who can help them negotiate getting access to the services they need
- Helping the parent understand their role as an advocate for themselves and their child
- Giving parents opportunities to help meet concrete needs of other families in the program or the community, to encourage reciprocity

Questions to ask when a family is in need

- What do you need to _____ (stay in your house, keep your job, pay your heating bill etc.)?
- What have you done to handle the problem? Has this worked?
- Are there community groups or local services that you have worked with in the past? What has been your experience accessing their services?
- Are there specific barriers that have made it difficult for you to access services in the past?
- How does dealing with these issues impact the way you parent?

What to look for

- Is the parent open to accessing and utilizing services?
- Has the parent had positive experiences with services in the past?
- Does the parent have specific barriers (literacy, lack of transportation, etc.) that will make it difficult to access services?
- Are there personal behavioral traits (e.g., punctuality, willingness to share personal information, etc.) that the parent could address to more effectively utilize services?
- Does the parent try to buffer the child from the stress caused by the family's concrete needs?

Activities to do with parents

- Ask the parent to identify one concrete need that, if met, would lighten his or her burden. Come up with a list of at least three possible avenues to get that need met (e.g., agencies to approach, people to ask for help, cutting back on other expenses).
- Talk to the parent about what their family's socioeconomic status was in their childhood and what effect that had on them. Discuss things their parents did or did not do to buffer them from the stress of poverty, to teach them the value of money or to make sure their needs were met.

Social-Emotional competence of children

Protective & Promotive Factors

Early childhood is a period of both great opportunity and vulnerability. Early childhood experiences set the stage for later health, well-being and learning. In the past, most of the focus was on building young children's academic skills in an effort to ensure they were prepared for school. However, in recent years a growing body of research has demonstrated the strong link between young children's social-emotional competence and their cognitive development, language skills, mental health and school success. The dimensions of social-emotional competence in early childhood include:

- self-esteem - good feelings about oneself
- self-confidence - being open to new challenges and willing to explore new environments
- self-efficacy - believing that one is capable of performing an action
- self-regulation/self-control - following rules, controlling impulses, acting appropriately based on the context
- personal agency - planning and carrying out purposeful actions
- executive functioning - staying focused on a task and avoiding distractions
- patience - learning to wait
- persistence - willingness to try again when first attempts are not successful
- conflict resolution - resolving disagreements in a peaceful way
- communication skills - understanding and expressing a range of positive and negative emotions
- empathy - understanding and responding to the emotions and rights of others
- social skills - making friends and getting along with others
- morality - learning a sense of right and wrong

These dimensions of social-emotional competence do not evolve naturally. The course of social-emotional development—whether healthy or unhealthy—depends on the quality of nurturing attachment and stimulation that a child experiences. Numerous research studies show that a relationship with a consistent, caring and attuned adult who actively promotes the

development of these dimensions is essential for healthy social-emotional outcomes in young children. Actively promoting social-emotional competence includes activities such as:

- Creating an environment in which children feel safe to express their emotions
- Being emotionally responsive to children and modeling empathy
- Setting clear expectations and limits (e.g., "People in our family don't hurt each other.")
- Separating emotions from actions (e.g., "It's okay to be angry, but we don't hit someone when we are angry.")
- Encouraging and reinforcing social skills such as greeting others and taking turns
- Creating opportunities for children to solve problems (e.g., "What do you think you should do if another child calls you a bad name?")

Children who have experiences such as these are able to recognize their and others' emotions, take the perspective of others and use their emerging cognitive skills to think about appropriate and inappropriate ways of acting. Conversely, research shows children who do not have adults in their lives who actively promote social-emotional competence may not be able to feel remorse or show empathy and may lack secure attachments, have limited language and cognitive skills and have a difficult time interacting effectively with their peers. Evidence shows, however, that early and appropriate interventions that focus on social-emotional development can help to mitigate the effects of negative experiences in ways that lead to improved cognitive and social-emotional outcomes.

SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN: ACTION SHEET

Your role

It is important to increase parents' awareness of the importance of early relationships and of their role in nurturing their child's social-emotional development by:

- Providing concrete tips and resources to parents to help them build their skills
- Modeling developmentally appropriate interactions with children that help them to recognize and manage their emotions and build other social and emotional skills
- Connecting families to resources that can help support their children's social-emotional development—these might be simple (such as classes like Second Step, or books and games that help children to name or recognize their emotions) or more intensive (such as mental health counseling)
- Staying attuned to trauma and how it impacts the child's behaviors and relationships, including taking time to explain and discuss children's behavior with parents when they are "acting out" due to trauma

Questions to ask

- How is the emotional relationship between you and your child?
- How do you express love and affection to your child?
- How do you help your child express his or her emotions?
- In what situations are your child's emotions hard for you to deal with?

What to look for

- Does the child feel safe to express emotions in the relationship with the parent?
- Is the parent emotionally responsive to the child?
- Does the parent model empathy?
- Does the parent set clear expectations and limits (e.g., "People in our family don't hurt each other")?
- Does the parent separate emotions from actions (e.g., "It's okay to be angry, but we don't hit someone when we are angry")?
- Does the parent encourage and reinforce social skills such as greeting others and taking turns?
- Does the parent create opportunities for children to solve problems? (e.g., "What do you think you should do if another child calls you a bad name?")?

Activities to do with parents

- Have the parent sketch out (or write out) an interaction with their child. Begin with an experience that typically makes the child happy, sad, frustrated or angry. Then have the parent illustrate or describe what the child does when he or she feels those emotions, how the parent responds and how the child responds. Identify and talk through positive or negative patterns in the interaction.
- Ask the parent to think of an adult who they loved as a child. What was it about the relationship with that adult that made it so important? Ask them what elements of that relationship they can replicate in their relationship with their child(ren).

CSSP'S Protective and Promotive Factors

The Center for the Study of Social Policy (CSSP) works to create new ideas and promote public policies that produce equal opportunities and better futures for all children and families, especially those most often left behind. The foundation of all of CSSP's work is a child, family and community well-being framework that includes a focus on protective and promotive factors. Using an ecological perspective:

- protective factors are conditions or attributes of individuals, families, communities or the larger society that mitigate or eliminate risk
- promotive factors are conditions or attributes of individuals, families, communities or the larger society that actively enhance well-being

Taken together, protective and promotive factors increase the probability of positive, adaptive and healthy outcomes, even in the face of risk and adversity.

The Strengthening Families™ and Youth Thrive™ frameworks exemplify CSSP's commitment to identify, communicate and apply research-informed ideas that contribute to the healthy development and well-being of children, youth and families. As numerous studies affirm the importance of early childhood experiences in influencing adolescent and adult behavior, these frameworks provide a view of two interrelated phases of the lifespan developmental continuum: Strengthening Families focuses on families of young children (years old) and Youth Thrive on youth ages 11-26.

<p>The Strengthening Families Protective Factors</p> <ul style="list-style-type: none"> • Parental Resilience • Social Connections • Knowledge of Parenting and Child Development • Concrete Support in Times of Need • Social-Emotional Competence of Children 	<p>The Youth Thrive Protective and Promotive Factors</p> <ul style="list-style-type: none"> • Youth Resilience • Social Connections • Knowledge of Adolescent Development • Concrete Support in Times of Need • Cognitive and Social-Emotional Competence in Youth
--	---

Parents, system administrators, program developers, service providers and policymakers can each benefit from learning about and using the Strengthening Families and Youth Thrive frameworks in their efforts to ensure that children, youth and families are on a path that leads to healthy development and well-being.

STRENGTHENING FAMILIES SELF-ASSESSMENT TOOL FOR PRIMARY CARE



PARENTAL RESILIENCE	Doing Great	Needs Improvement
How do practices demonstrate that parents are valued?		
Staff strive to recognize and affirm the central role of parents in their children's lives through every interaction with families including policies practices and informal communication.		
The practice has multiple avenues for regular communication with families.		
The practice provides an orientation for families about the program philosophy, goals and objectives.		
The practice uses a variety of methods to provide information and gather input from families about service and resources for parents in the community (small groups, individual conversations, email, written questionnaires, etc.)		
All family members are made to feel welcome.		
Someone is available to greet families when they come in.		
Staff are respectful even when family visits are unexpected.		
Staff develop mutually respectful relationships with all family members by:		
Taking the time to get to know family members individually by name.		
Listening and learning about their interests, current activities, hopes and expectations for themselves and their children.		
Regularly inquiring about what is happening in their lives.		
Providing emotional support and encouragement.		
Recognizing and acknowledging parents' strengths, efforts and contributions.		
Taking time to understand the complex needs of individual parents, such as navigating child custody or the child support system, single parenting, etc.		
Staff show that they value fathers and are sensitive to their unique needs by:		
Providing information specific to fathers/males family members on bulletin boards, websites, in brochures.		
Establishing ongoing partnerships with community resources that provide services to fathers.		
Being aware of barriers that limit father involvement, such as difficult relationship with the child's mother, lack of information or a non-custodial relationship with the child.		

Encouraging fathers and male family members to engage in the child's services.		
How do practices honor each families race, language, culture, history and approach to parenting?		
Practice staff ensure that all families regardless of family structure; socio-economic, racial, religious, and cultural backgrounds; sexual orientation; abilities; or preferred language are included in all aspects of the program.		
The practice gathers information about family interests, beliefs and expectations, including those relating to the child's culture and language development, and seeks to partner with families in incorporating those features into practice activities and information.		
Staff engage grandparents, elders and extended family members upon request.		
The practice displays diverse families and family structures in brochures, posters, and practice materials.		
Practice information is linguistically and culturally designed to reflect the culture(s) of the families served.		
The practice seeks to reflect the community and families it serves by:		
Intentionally recruiting and employing staff members who are skilled at working with the diversity of the families in the practice or that reflect the community and families served.		
The practice supports participating immigrant and refugee families by:		
Ensuring staff are knowledgeable about immigrant and refugee families unique challenges and can help address them in a respectful manner.		
Maintaining up-to-date information on supports and services most relevant to immigrant and refugee families.		
How do practices encourage parents to manage stress effectively?		
The practice provides regular opportunities for parents to relieve stress through:		
Linking parents to organized support groups.		
Making staff or consultants available for parents to talk to individual about issues that are troubling them.		
Staff respond appropriately to family crisis by:		
Talking with families about difficult issues and helping them access additional help.		
Maintaining confidentiality.		
Recognizing domestic violence, depression, developmental delays, mental illness, chronic health problems, substance abuse and other signs of imminent crisis and responding appropriately.		
Recognizing child maltreatment and responding appropriately.		

How do practices support parents as decision makers and help build decision-making and leadership skills?

Staff reinforce parental authority by:

Respecting parent's directions and/or decisions about their children.		
Asking about parents' expectations and limits for their children.		
Talking respectfully with parents about how to handle differences in expectations regarding children's behavior and development.		
Understanding the parenting and child behavior norms of the parents' culture.		
Being careful not to contradict a parent in front of his or her child or other children.		

Parents are engaged as partners in developmental screenings or assessments of their child:

Parents participate in the screening and are informed of the results.		
Parents work with staff to develop plans and accommodations for their children based on the screening.		
The practice assists parents in finding and connecting to specialists for further evaluation when necessary.		
Staff identify other community resources and opportunities that may help families.		

The practice provides opportunities and support for families to serve as leaders and decision-makers by:

Involving families in evaluating the practices' services (e.g. parent questionnaires, focus groups, etc.)		
Linking parents to community events that help raise awareness of emerging community needs and assets.		
Connecting parents to advocacy groups that work on issues related to child, family and community needs.		
Connecting parents to groups that inform and shape policy at the local, state or national level.		

The practice promotes participation in activities by:

Addressing topics, issues and skills that families identify as important to them.		
Designing activities to address interests of different family members (e.g. fathers, mothers, other family members).		
Conducting face-to-face or telephone outreach to families who might not otherwise participate.		

How do practices help parents understand how to buffer their child during stressful times?

Staff are able to talk with parents about:

How stress impacts the child's brain, behavior and development.		
How to recognize the signs of stress in children.		
How to shape adult responses to the child's behavior.		
The important role that parents and caring adults play in buffering children during stressful times.		
Parents and staff have access to a mental health consultant who can help them proactively address the needs of children and other family members during stressful times.		

SOCIAL CONNECTIONS		
How do practices help families value, build, sustain and use social connections?	Doing Great	Needs Improvement
Families have access to a comfortable space where they can meet informally.		
The practice provides opportunities for families with similar interests, children's ages and/or circumstances (such as those with twins, parents of infants, parents with special-needs children or parents who speak the same language, teen parents, dads, grandparents) to connect with one another:		
Formally, through parent support groups.		
Through parent mentoring and matching for one-on-one support.		
Informally, by introducing parents to one another.		
The practice provides opportunities for families to socialize and foster a sense of community by organizing/hosting:		
Regularly scheduled parent-child activities such as Play and Learn groups.		
Social media groups or web pages where parents can get program information and interact with one another.		
The practice offers or connects families to resources to strengthen relationships between adults (e.g., healthy marriage skills, communication skills, conflict resolution, co-parenting).		
Practice staff encourage newcomers and isolated or marginalized families to participate in practice activities by:		
Calling, sending emails encouraging them to practice activities.		
Connecting with them on social media platforms through program pages or groups.		
Connecting them with resources (including mental health consultation) that can help them explore difficulties with forming social connections.		
How do practices create an inclusive environment?		
Staff welcome all families.		
Newcomers and reluctant families are encouraged to participate through special outreach efforts.		

The practice helps staff learn how to reduce stereotyping and bias by:		
Modeling inclusive behavior among the staff.		
Intervening appropriately to counteract prejudicial or discriminatory statements (e.g., discussing similarities and differences; establishing rules for fair treatment of others).		
Regularly reviewing policies, forms and documents to ensure that all content discourages beliefs and practices that stereotype, marginalize or discriminate against families.		
Ensuring that any instances of prejudice are quickly and explicitly addressed, and that staff use any such incidents as opportunities to demonstrate program values of inclusion and respect.		
How do practices facilitate mutual support?		
The practice encourages parents to set up mutual support mechanisms (e.g., phone trees, car pools, babysitting co-ops, social media groups or pages where parents can communicate with one another).		
The practice provides information on outside activities for parents to attend together (for example, gathering at playgrounds, fun fairs or libraries).		
Staff seek opportunities to build good relations within the immediate neighborhood or local community.		
The practice connects parents to local opportunities that promote family enrichment (e.g., reading hours at the library, parent-child book groups, cultural heritage events).		

KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT	Doing Great	Needs Improvement
How do practices model developmentally appropriate interactions with children?		
Staff demonstrate a strong understanding of child development:		
Staff model developmentally appropriate responses to children's behavior, interests, temperaments and need for exploration and learning.		
Staff understand and can explain the development arc for young children.		
Staff can explain to parents how various activities and interactions support their child's development.		
Staff work collaboratively with parents to coordinate support for children's development:		
Staff develop an ongoing partnership with parents to ensure regular communication, common understanding of the child's development and coordinated action to provide each child with the appropriate experiences for their developmental stage.		
Staff and parents together use appropriate assessment tools to screen for developmental concerns and monitor development.		
When staff talk with parents about discipline, they:		

Provide information on age- appropriate positive discipline techniques and reasonable expectations.		
Offer ideas for alternate ways to manage children’s behavior and to recognize and reinforce desired/appropriate behavior.		
Encourage parents to discuss behavior challenges they may have at home.		
Connect parents to other parents who can share or model positive parenting approaches.		
Recognize different parental and cultural approaches to discipline and discuss them with parents.		
Make arrangements to have appropriate language and cultural interpreters to support difficult conversations with families.		
How do practices provide information and resources on parenting and child development?		
Parenting education classes are offered (in a way that reflects best practice) as one among several strategies for increasing parents’ knowledge of parenting and child development.		
Parents go through a series of classes as a group – with other forms of contact between classes to maintain their engagement.		
Course content is focused on parenting information and developmental information for a particular age group or targeted population, such as children with special needs.		
Parents have opportunities to try out new parenting techniques in the context of parent-child activities and/or as “homework” assignments between classes.		
Classes are engaging and interactive with opportunities for discussion and reflection (rather than being overly reliant on lecture and written information).		
Classes and programs are delivered by staff with appropriate training and credentials for the program.		
Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.		
Child care is offered while parents are in classes.		
Transportation, food or other supports are provided as appropriate to enable parents to participate.		
If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.		
Anticipatory guidance is provided to parents including the stages of child development and what to expect of their children at each stage.		
Parenting and child development information is provided through multiple avenues to meet diverse learning styles, including books, videos, classes, support groups, bulletin boards, websites and/or social media pages.		
Parents are connected to a variety of resources that can help them explore different ways of parenting such as:		
Parent education groups, counseling, support groups, and/or mentors/coaches.		

Parenting groups and organizations that promote social inclusion and host groups that correspond to different ethnic, cultural and linguistic groups represented in the community.		
Parent education offerings and staff coaching on parenting are responsive to the needs of parents in different circumstances. For example:		
• Different parenting styles of mothers and fathers and the strengths of each		
• Needs and concerns of first time parents		
• Needs of parents who are parenting a child with a disability		
• Noncustodial parents		
• Nontraditional caregivers (e.g., grandparents, foster parents)		
Staff provide “just in time” parenting tips and discuss parenting issues with parents when:		
Child behavior or development issues arise (e.g., potty training, changes in eating or sleeping patterns, separation issues, aggressive behavior).		
A parent appears to be frustrated or stressed and in need of support.		
A parent appears to be having difficulty relating to or communicating with their child.		
How do programs encourage parents to observe, ask questions, explore parenting issues and try out new strategies?		
Parents and staff work together to design and organize opportunities for parent led discussions (such as a Community Café or Parent Café series) to explore:		
Cultural/ethnic expectations and practices about parenting.		
Different parenting practices.		
Parent/child relationships.		
How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).		
Staff recognize and support the parenting challenges experienced by families with children who have special needs by:		
Regularly checking in with parents about parenting issues.		
Being sensitive to parents’ frustration, protectiveness, guilt, loss and other related feelings, and acknowledging the challenges families may be experiencing.		
Supporting parents in understanding appropriate developmental expectations for their children with special needs.		
Checking in with parents about the impact their children’s special needs may have on family dynamics and parental stress.		
Being especially supportive at the time that special needs are initially identified.		

Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.		
Staff reinforce positive parent-child interactions by:		
Noticing and acknowledging when parents are attuned to their children's needs or are communicating effectively with their children.		
Sharing something positive with parents about their children's behavior and development.		
Staff proactively and respectfully address concerns about parenting techniques or behavior by:		
Asking open-ended questions to understand the behavior from the parent's perspective.		
Acknowledging young children's frustrating behavior and recognizing parents' efforts to deal with it effectively.		
Sharing concerns about a child's behavior and/or about the parents' parenting practices and respectfully offering alternatives.		
Connecting parents to resources and supports that may help to address parenting issues.		

CONCRETE SUPPORT IN TIMES OF NEED	Doing Great	Needs Improvement
How do practices respond immediately when families are in crisis?		
Staff listen, show concern and encourage families to ask for help in the event of a crisis.		
Staff proactively respond to signs of parent or family distress by:		
Expressing concern and offering help in line with the practice's philosophy and resources.		
Offering to connect families to resources, including help lines, mental health specialists, community resources or public agencies.		
Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issues and a report is made).		
How do programs provide information and connections to services in the community?		
The practice maintains up-to-date information about services in the community that includes hours of operation, fees, locations, eligibility requirements, language capacities, etc. Services to be included are:		
• Food pantries		
• Domestic violence services		
• Shelters		
• Respite care for children		
• Alcohol and substance abuse services		

• Mental health services (for adults and children)		
• Economic supports		
• Legal assistance		
• Quality early care and education		
Parents are encouraged to share information about community resources (e.g., toy exchanges, resale shops, play lots, family activities), as well as more formal services.		
The practice actively builds collaborative links with other service providers by:		
Bringing services on site, when possible.		
Easing the referral process by ensuring the workers in different programs know each other and work together.		
Coordinating follow-up efforts across service providers, ensuring that the family is involved in service coordination and informed about all communication.		
Developing memorandum of understanding or established processes with partners to coordinate services for families in crisis.		
Using input from parents to identify and advocate to fill gaps in the services available to families.		
How do practices help families to develop skills they need to identify their needs and connect to supports?		
Staff help parents to identify and mobilize their own resources to address their families' needs by:		
Encouraging families to take the lead when creating a plan to address family needs, including addressing barriers and anticipated outcomes.		
Communicating to families that seeking help is not an indicator of weakness or failure as a parent, but rather is a step toward building resilience.		
Encouraging parents to advocate for themselves and their child.		
Providing information and guidance to families so that they understand their rights in accessing services, gain knowledge of relevant services and learn how to navigate through service systems.		
Connecting parents to peer-to-peer navigation support.		
When staff make referrals to outside services, they support family leadership by:		
Brainstorming with families about what resources would be helpful.		
Respecting when a family is not comfortable with a specific provider by helping them to either address and resolve the issue or identify other resources.		
Helping parents learn how to address barriers to utilizing services (e.g., lack of transportation or childcare, fees, language barriers, lack of translation services, lack of cultural sensitivity and inclusiveness).		

Coaching parents as they fill out initial paperwork required to access these services, (e.g., insurance and eligibility forms).		
Following up with families on referrals to ensure that they were satisfied with the services they received, and providing help in advocating for themselves if they were not satisfied.		
Making a personal connection between families and service providers (if families have agreed to share information through written consent).		

SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN: How do programs help parents foster their child's social emotional development?	Doing Great	Needs Improvement
The program introduces family members to social and emotional development by:		
Providing parents with information on the importance of supporting children’s healthy social and emotional development— and its connection to success in school and life.		
Helping parents understand age- appropriate social and emotional skills and behaviors.		
Providing opportunities to discuss social and emotional issues within a racial and cultural context.		
Offering parents ideas on how to foster a child’s social and emotional learning at home.		
Asking about parents’ observations of their child’s social and emotional development.		
Practice activities provide opportunities to strengthen bonds between parents and their children (e.g., parent-child playgroups, playing together in cooperative play, etc.).		
Staff respect families’ knowledge and expertise about their children’s unique strengths and challenges as they share information about social and emotional competence.		
Staff nurture children and model nurturing for parents by:		
Responding consistently to children in a warm, supportive manner.		
Creating an environment in which children feel safe to comfortably express their emotions without fear of judgment.		
Showing warmth through appropriate physical contact.		
Demonstrating mutual respect between children and adults (e.g., listening attentively, making eye contact, treating children fairly).		
Responding sympathetically to help children who are upset, hurt or angry.		
Encouraging children to express their feelings through words, artwork and expressive play.		
Modeling empathy and appropriate emotional responsiveness.		
How do practices include children’s social and emotional development activities in programming?		

The program supports children’s social and emotional development with intentional practices that include:		
Encouraging children to express their feelings in ways that are the most comfortable for them.		
Encouraging and reinforcing social skills such as sharing, taking turns and cooperative play.		
Actively involving children in solving their conflicts and problems (e.g., helping children talk out problems and think of solutions; sensitizing children to feelings of others).		
Setting clear expectations and limits for behavior.		
Helping children separate emotions from actions (e.g., not reacting by hitting even when angry).		
Mental health consultants provide support for individual staff in working with children and parents around social and emotional issues, including challenging behaviors.		
How do practices help children develop a positive cultural identity and learn to interact in a diverse society?		
The practice welcomes and affirms the cultures of families it serves by Inviting families to define and express their ethnicity or culture, including the experiences and values they hold to be most important.		
Staff are encouraged to enhance their own understanding and appreciation for different races, ethnicities, sexual orientations, languages and cultural expressions through:		
Being encouraged to share and reflect on their own cultural background, including self-awareness of biases they may hold.		
Being provided with professional development opportunities that allow them to learn more about the history and experiences of different racial and cultural groups.		
Practice policies and practices support the preservation of home languages by building upon the home languages and dialects of the children and families they serve.		
The practice’s mental health consultant offers consultation that is respectful of differences in parenting behaviors and child behaviors that stem from traditions and cultural roots.		
How do programs respond proactively when social or emotional development needs extra support?		
When staff are concerned about a child’s social and emotional development, they respond by:		
Discussing concerns (including objective descriptions of behaviors) with the child’s parents without casting blame on the parents.		
Arranging for appropriate screenings and assessments.		

Connecting the family to resources that can support the child’s social and emotional development (e.g., play therapy, mental health services, parenting classes).		
Helping parents develop strategies for addressing the issue at home.		

STRENGTHENING FAMILIES IN SPECIAL CIRCUMSTANCES	Doing Great	Needs Improvement
How do practices respond to possible child abuse or neglect?		
When children enter the practice, staff discuss child abuse and neglect prevention with all parents and caretakers. This discussion includes explanations of:		
The practice’s policies and practices that are designed to keep children safe from harm.		
Staff members’ responsibility as mandatory child abuse and neglect reporters.		
How the state defines child abuse and neglect.		
The practice’s protocols regarding child abuse and neglect reports.		
All staff members are trained according to their state’s mandatory child abuse reporting laws.		
The program’s protocols for reporting possible child abuse and neglect:		
Are consistent with state child welfare reporting guidelines.		
Are reviewed annually or anytime changes are made to state guidelines.		
Staff members are trained that when a child abuse or neglect report needs to be filed, they have specific responsibilities to both the child welfare agency and to families that include:		
Coordinating with investigative authorities to ensure that staff actions and interactions with the family do not hinder the investigation.		
Providing objective and accurate information on the concerns that led to the report, as well as information on family strengths.		
Explaining their status as mandated reporters to families and their commitment to the goal of keeping children safe.		
Striving to be calm, caring and supportive of the family during the reporting process.		
Answering questions that the family may have regarding the reporting process and how the Child Protective Services system typically responds.		
Offering support for families by answering questions, connecting them to resources they may need listening attentively and providing and friendly advice.		
If a child is placed into child welfare custody, staff are trained to continue to support the child and the family by:		
Maintaining contact with the child and family, if possible.		
Advocating for the family with the Child Protective Services system, when possible.		

Helping parents connect with resources to help reunite them with their child.		
Practice staff seek to collaborate with child welfare caseworkers and Child Protective Services staff to promote the child's ongoing healthy development by:		
Helping to maintain stability for children involved in the system.		
Engaging in co-case management practices, if possible.		
Conducting joint home visits.		
Attending Child Protective Services meetings to share information.		



Primary Health Partners

Promoting Children's Health and Resiliency: A Strengthening Families Approach

Pediatricians reach the vast majority of American children; parents look to them for reassurance, guidance, expertise and the ability to recognize and understand when things are off track. Their relationships with families give them the opportunity to see patterns of behavior evolve and discern when additional services may be warranted. Pediatricians can play an important role in helping parents and caregivers learn to care for themselves as an important part of caring for their children. Sometimes the provision of anticipatory guidance is sufficient; other times they can steer families to needed supports. This document will provide pediatricians and other health care providers with prevention and intervention resources.

Parents are important partners in supporting the health and well-being of children, but they sometimes need support and help building their own capacity to effectively support their children. Strengthening Families is a research-based protective factors framework that provides a set of resources and tools for supporting parents, particularly those who seem to be overwhelmed by parenting, isolated, or struggling to understand and respond to their children's needs.¹ Across the country, states, programs, communities and pediatricians are using the Strengthening Families Protective Factors Framework to guide their work and help them to focus on protective factors that all families need. The protective factors are defined to the right. The pediatrician's role in strengthening each protective factor might include:

- **Parental Resilience:** Building parents' capacity to respond to stressful situations in productive ways is an important part of helping them to parent effectively. Checking in on parents' mental health – particularly including post-partum depression – and encouraging the use of positive coping strategies can help to ease stress and, in extreme cases, prevent child abuse and neglect.
- **Knowledge of Parenting and Child Development:** Parents who understand child development have more realistic expectations of their children based on their developmental stage. The pediatrician plays an important role in sharing this knowledge with parents, empowering them to do a better job meeting their children's physical and developmental needs. This also enables parents to more quickly identify when their children's development is off track, so support can be sought from their pediatrician and others.
- **Social Connections:** Parents who are engaged in positive social relationships receive emotional and operational supports that can help them deal with the daily stresses of parenting, as well as health crises and responding to their child's health needs. At a minimum, physicians can encourage parents to develop and nurture positive social connections. More proactively, pediatricians, clinics and health systems can provide parenting groups and other opportunities for parents to form connections with others raising children of the same age.

About Strengthening Families

Strengthening Families was developed by the Center for the Study of Social Policy to help those who work with young children and their families take action to support families and reduce child abuse and neglect. The approach focuses on five protective factors associated in research literature with lower rates of child abuse and neglect:

- **Parental Resilience:** The ability of parents to form nurturing relationships and respond to stressful situations in productive ways.
- **Knowledge of parenting and child development:** A parent's understanding of how children develop and the role families play in fostering development.
- **Social Connections:** The many positive relationships families need for emotional and concrete support.
- **Concrete Supports in Times of Need:** A family's ability to access help and resources when needed, from informal and/or formal support networks.
- **Social-Emotional Competence of Children:** Children's ability to express and control their emotions in a developmentally appropriate way.

More than 30 states have active Strengthening Families initiatives with programs being funded, trained and supported to help build protective factors with families with young children. Your state may have tools, training and other resources you can access. To find out if your state is participating and find materials and tools from the national Strengthening Families work go to:

www.strengtheningfamilies.net

¹<http://www.cssp.org/reform/strengthening-families/resources/body/LiteratureReview.pdf>

- *Concrete supports in times of need:* Parents often need help accessing the resources they need to build a healthy environment for their kids. Many programs are available to help parents deal with issues from lead abatement, to healthy and nutritious food, to developmental services to support a child with delays. Helping build parents' awareness of the available resources and providing support as they navigate the service sector can keep families strong.
- *Children's social and emotional competence:* Social-emotional competence is critical to a child's overall development. The pediatrician's role can be to help parents understand the importance of attachment and social-emotional development, provide resources to help parents nurture that development and raise a red flag when there are concerns about a child's development of these foundational skills.

Strengthening Families: Action Steps

Be Prepared: Health issues, challenging behaviors and other circumstances can cause family stress. Providers can connect families to other supports that can help them deal with these issues.

- Build relationships with local programs that can support families under stress. In most communities there are a host of programs and resources available to support families. These may include family resource centers, home visiting programs, parent education programs and support groups. Have information about these programs available for families or encourage these providers to come into your offices to talk with families about the services they provide.
- In a number of states resources such as *Help Me Grow* and 211 can provide an important and easy way to connect families with needed resources and support. These help lines connect families to a trained support person who can work with them to learn more about what they need and connect them to appropriate resources. The *Help Me Grow* National Center recently released a [policy brief](#) summarizing a study demonstrating that its services supported families in developing protective factors to promote optimal development. Learn more about whether [Help Me Grow](#) or [211](#) are available in your area.

Help parents understand the link between taking care of themselves and taking care of their child:

Children's health and development issues have an impact on parents and their parenting – and parenting has an impact on children's health. Parents often already know that the stress they experience has an impact on their parenting and their children. Pediatricians are ideally situated to encourage them to develop healthy ways to deal with it.

- Ask questions not just about the child's health but about the parent's experience and how they are coping with health or developmental issues that are coming up.
- Share information and materials about child development and parenting as part of anticipatory guidance for parents. [Bright Futures](#) may be supplemented with resources from Zero to Three, which provides a number of [resources for families with young children](#). The Nemours Foundation provides a variety of [tip sheets for parents on how to support their child's health](#).
- Encourage families to make connections with others dealing with common issues. Especially when health or developmental issues are identified, families can benefit from the advice and listening ear of others who have experienced the same issue. Each state's Family to Family Network² or [Family Voices](#) can be a good resource for families with children with special health care needs. Organizations such as [Parents Anonymous](#) and [Circle of Parents](#) can also provide important peer support for families simply struggling with the challenges of parenting. The state Children's Trust Fund may also support these informal support networks.

² Family to Family Networks exist in many states. Although there is not one central site which links to all Family-to-Family networks, they can easily be found through a web search using the terms Family-to-Family and the state name.

Identify easy opportunities to build protective factors: Clinic and office waiting rooms can serve as venues for building protective factors.

- Set up waiting rooms to encourage interaction and network building between families
- Provide parenting and child development information in easy digestible forms
- Join Reach Out and Read and encourage parent-child interaction and bonding through books
- Have games and toys available that encourage parent-child interaction and bonding

Identifying and Responding to Children who Have Experienced Trauma

While pediatricians, parents and communities work to ensure that children grow in a safe and healthy environment, this does not always occur. A growing body of research and information ties the experience of trauma in childhood, including exposure to violence, to poor health outcomes throughout life. More than sixty studies of Adverse Childhood Experiences (ACEs) confirm that childhood stressors can compound to produce serious emotional and physical illnesses in adolescence and adulthood, impacting health outcomes as diverse as risk of diabetes, likelihood of alcohol or substance abuse, likelihood of mental illness, suicide risk and more.³ Moreover, new research on child development shows us that when stress becomes toxic (repeated and severe) it can impact the physical architecture of the brain—potentially impairing children's long-term development.⁴

Children may be traumatized by any number of experiences, from abuse and neglect to exposure to violence to the loss of a parent or other loved one through death, divorce or separation. Studies of ACEs also characterize a variety of living situations as adverse experiences such as living in a household with a parent with untreated mental illness or substance abuse problems or experiencing the incarceration of a family member. When children experience trauma it can adversely impact fundamental developmental tasks—when this trauma is severe, prolonged, repeated or unrelieved by a caring adult it can actually impact brain structure and function.

Ideally, parents and children have protective factors in place, like those described above. These protective factors can be used during stressful events to help build resiliency and mitigate the effects of the trauma. For many, however, these protective factors are not in place or not as strong as they could be. For these families, pediatricians and others need to be prepared to respond.

Responding to Trauma: Action Steps

Be Prepared: Before a child is even identified as having been exposed to trauma, medical homes need to be prepared with a response. They can start by:

- Building relationships with local programs that can support families whose children have been exposed to trauma:
 - Trauma-informed counseling services for children
 - Resources within the health system of which the practice may be a part
 - Contact numbers for domestic violence shelters, supportive services, peer support groups and other programs that can be easily accessed by both staff and families
- Having materials (brochures, Web-based information, etc) that can explain to families the effects that traumatic experiences can have on their child in both the immediate and long-term future – and constructive ways for them to respond and build resilience
- Ensuring that all staff members know and understand the protocols for making referrals to child protective services

³http://www.acestudy.org/files/Review_of_ACE_Study_with_references_summary_table_2_.pdf

⁴http://developingchild.harvard.edu/topics/science_of_early_childhood/toxic_stress_response/

Look for Signs: In some cases, the child may directly report having seen or experienced violence or other traumatic experiences. In other cases, the child will show characteristics that may have roots in exposure to trauma:

- Developmental regression
- Changes in behavior at home or school
- A variety of functional somatic complaints
- Bruising or injuries that are unexplained or explanation does not match

While these presentations may not confirm an experience with trauma, the pediatrician, primary care physician and other medical home team members should consider the possibility and ask appropriate questions to determine what, if any, actions should be taken. Learn about other signs of trauma from the [National Child Traumatic Stress Network](#).

Ask Questions: Pediatricians have influence and authority with families, and multiple opportunities to ask questions about children's experiences and living situations during preventive and sick visits. A variety of questions can be used to identify children who may have been exposed to trauma. Some of these can be found on the American Academy of Pediatrics (AAP) Web site and are outlined on the sidebar.

Follow-up: If a child has been identified as having been exposed to trauma, providers should be prepared to:

- Ensure that the child's environment at home or school is safe – and contact child protective services if it is not
- Make referrals, as appropriate, to evidence-based treatment options
- Make plans for appropriate follow-up with the family
- Provide educational materials for parents and children on appropriate topics
- Provide support for parent or caregiver as they cope with a potentially stressful situation
- Discuss protective factors that may contribute to strengthening the bond between caregiver and child and building resiliency in children
- Help the parent understand how trauma can impact children's development and behavior and encourage them to seek help and support for themselves and their child

Additional guidance on next steps following exposure to various types of trauma can be found on the [AAP Web site](#).

Medical Home for Children Exposed to Violence

The American Academy of Pediatrics has established the Medical Home for Children Exposed to Violence Project with the support of grant funding from the Department of Justice. This project aims to increase awareness of the impact that exposure to violence and trauma has on children and their health, and to provide pediatric medical homes the resources needed to identify and care for these children more effectively.

Pediatricians can only know what they ask about. The project has identified a series of questions that pediatricians and medical home teams can use to begin conversations with parents and children:

1. Are there any behavior problems with the child at home or school?
2. Has anyone come or gone from the household lately?
3. Are there any problems with sleep and enuresis?
4. Has your child ever witnessed anyone being harmed at home or in the community?

Futures Without Violence has a broader question that can also be used:

"Violence is an issue that unfortunately affects nearly everyone today and so I have begun asking families in my practice about exposure to violence."

For more guidance during the patient visit, go to www.aap.org/medhomecev

Pediatricians Doing This Work

[Center for Youth Wellness \(http://centerforyouthwellness.org/\)](http://centerforyouthwellness.org/)

Founded and led by Nadine Burke Harris, MD, MPH, FAAP, the Center for Youth Wellness provides pediatric primary care with a multidisciplinary team that allows for on-site mental health referrals and access to community support services. This practice serves the Bayview-Hunter's Point neighborhood of San Francisco, which struggles with high rates of poverty and violence. Dr Burke Harris started the Center after making the connection with high parental ACE scores, environments that produced toxic stress in children, and difficulty in managing chronic health issues like asthma and obesity.

[Chicago Youth Programs \(http://chicagoyouthprograms.org/\)](http://chicagoyouthprograms.org/)

The long-standing wellness approach of the Chicago Youth Programs serves high risk children living in Chicago's public housing projects and other distressed neighborhoods was co-founded and continues to be led by Karen Sheehan, MD, MPH, FAAP. The program began with supportive services and programs for the neighborhood children and grew to include the primary care clinic that now provides multidisciplinary services, including mental health supportive services.

[Health Center at Lincoln \(http://thehealthcenterww.org/\)](http://thehealthcenterww.org/)

Alison Kirby, MD, FAAP is medical director for the Health Center at Lincoln, a school-based health center in rural Walla Walla, WA, that focuses on teens who often have higher ACE scores themselves and have parents with high ACE scores, as well. The school and the health center work in partnership to provide an approach to medical care and school discipline that incorporates the science of toxic stress and resiliency, resulting in more effective methods that improve student behavior and health outcomes.

[Project DULCE: Developmental Understanding and Legal Collaboration for Everyone \(http://bmc.org/Project-DULCE.htm\)](http://bmc.org/Project-DULCE.htm)

Robert Sege, MD, PhD, FAAP is the Principle Investigator of Project DULCE. This project is designed to implement the Strengthening Families Approach within the patient-centered medical home. Families meet with the DULCE Family Specialist at all routine visits, and for home visits and telephone check-ins depending on the needs of the family. At six months, the DULCE Family Specialist hands off care to the primary care team and any other ongoing services at Boston Medical Center or in the family's neighborhood, as necessary. DULCE combines elements of two existing programs: Healthy Steps and Medical-Legal Partnerships |Boston (MLP|Boston), and has been funded by the Quality Improvement Center for Early Childhood.

Disclaimer

This content was produced in partnership with the American Academy of Pediatrics with support from award #2010-VF-GX-K009, awarded by the Office for Victims of Crime, Office of Justice Programs, US Department of Justice. The opinions, findings, and conclusions or recommendations expressed in this material are those of the contributors and do not necessarily represent the official position or policies of the US Department of Justice.



GIVE CHOICES- Instead of just saying “no”, give children an acceptable choice. “You can go outside if you want to throw the ball.”

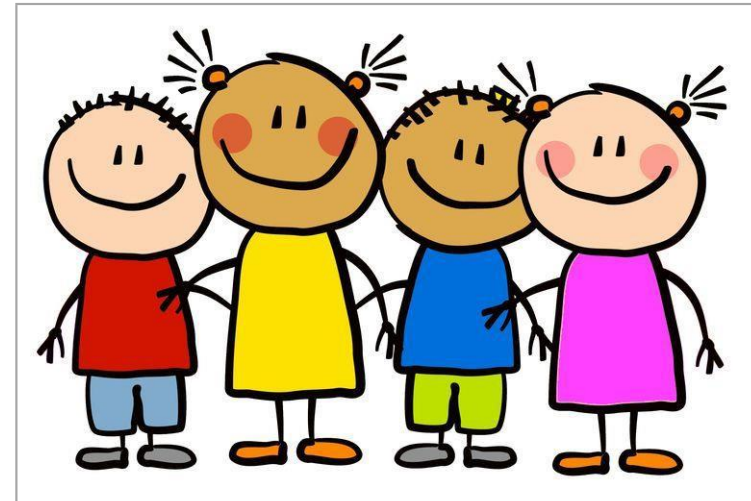
USE CONSEQUENCES THAT MAKE SENSE- Consequences should be reasonable and related to the misbehavior that occurred. “If you leave the yard you will need to come back in the house.”

If you are stuck on a problem behavior, work through the following process:

- Describe the behavior in detail, when and where it happens.
- Ask yourself if this typical for a child this age.
- Ask yourself if this comes from a temperamental characteristic your child has.
- Think of things that could be done to prevent this problem.
- Make a plan for how to handle the behavior when it occurs.

REMEMBER, it takes time to change a behavior. Be willing to try something several times before you give up!

Positive Discipline



ALL ALASKA
PEDIATRIC
PARTNERSHIP

www.strengtheningfamilies.alaska.gov

www.cssp.org

Discipline includes **all the things** we do to manage children's behaviors. Children learn in 3 ways:

- By **being taught** directly through teaching or demonstration
- By **watching** what others do
- By the **consequences** that follow their behaviors.

Discipline techniques should be geared to the child's developmental stage and temperament. As children grow older and have more self-control, your discipline will change too.

Preventing Problems

PLAN AHEAD- think about what you and your child need to be successful.

CHANGE THE ENVIRONMENT- Remove temptations, add interesting playthings, invite a friend over, or go for a walk.

DEVELOP ROUTINES- When children can predict what comes next they do better. Have a bedtime routine or regular time for chores.

ADJUST YOUR SCHEDULE IF NECESSARY- Sometimes changing **when** you do something can prevent problems.

PREPARE CHILDREN FOR WHAT IS COMING UP- Explain ahead of time what is going to happen before you go somewhere or try something new.

PLAN TRANSITIONS- Think of the best way to move from one activity to another. If you are going from active play to bedtime, transition by playing a quiet game or reading a book.

BE CLEAR ABOUT WHAT YOU EXPECT- Have a few clear rules and consistently enforce them. State your rules positively by stating "what to do" instead of "what not to do".

Guiding Behavior

PROVIDE CHOICES- "Would you like to do this now or after lunch?"

IGNORE ATTENTION SEEKING BEHAVIOR- Only use ignoring if your child's behavior is motivated by the need for attention and the behavior is not dangerous. Give plenty of attention when your child is behaving well.

USE PRAISE AND REWARD TO ENCOURAGE THE BEHAVIOR YOU WANT TO SEE- Be specific and sincere when you praise your child.

Parenting Resources:

ALL AGES:

Healthy Children

www.healthychildren.org

Center for Disease Control & Prevention

www.cdc.gov/ncbddd/childdevelopment

PBS-Parenting

<http://www.pbs.org/parents/>

YOUNG CHILDREN:

Center on the Social Emotional Foundations of
Early Learning

www.csefel.vanderbilt.edu/resources/family.html

Zero To Three

www.zerotothree.org/parenting

One Tough Job

www.onetoughjob.org



www.strengtheningfamilies.alaska.gov

www.cssp.org



ALL ALASKA
PEDIATRIC
PARTNERSHIP

Parenting Resources:

ALL AGES:

Healthy Children

www.healthychildren.org

Center for Disease Control & Prevention

www.cdc.gov/ncbddd/childdevelopment

PBS-Parenting

<http://www.pbs.org/parents/>

YOUNG CHILDREN:

Center on the Social Emotional Foundations of
Early Learning

www.csefel.vanderbilt.edu/resources/family.html

Zero To Three

www.zerotothree.org/parenting

One Tough Job

www.onetoughjob.org



www.strengtheningfamilies.alaska.gov

www.cssp.org




ALL ALASKA
PEDIATRIC
PARTNERSHIP


The Strengthening Families Protective Factors

FAMILIES NEED ALL OF THESE TO THRIVE!


1. Parental Resilience

 Be strong, not stressed


2. Social Connections

 Get and give support


3. Knowledge of Parenting and Child Development

 Learn more so you can parent better

4. Concrete Support in Times of Need

 Get help when you need it


5. The Social-Emotional Competence of Children

 Help your child manage feelings and relationships


The Strengthening Families Protective Factors

FAMILIES NEED ALL OF THESE TO THRIVE!


1. Parental Resilience

 Be strong, not stressed


2. Social Connections

 Get and give support


3. Knowledge of Parenting and Child Development

 Learn more so you can parent better

4. Concrete Support in Times of Need

 Get help when you need it

5. The Social-Emotional Competence of Children

 Help your child manage feelings and relationships

Things I want to try:

Contact Us:



www.strengtheningfamilies.alaska.gov

www.cssp.org



ALL ALASKA
PEDIATRIC
PARTNERSHIP

Taking Care of Yourself.....



HELPS YOU TAKE CARE OF YOUR CHILD

Managing Stress

Being a parent comes with stressful moments and sometimes it can be overwhelming. Long-term stress can be unhealthy and takes a toll on our body and our brain. Here are some helpful hints about managing stress:

1. Learn to recognize when stress is coming on

What is your body's IMMEDIATE response to stress? Does your heart beat faster? Are you breathing faster? Are your muscles tensing up? Notice overall changes when you have ongoing stress- getting frustrated or angry easily, losing sleep, increasing alcohol and other substance use, or feeling down or depressed, etc.

2. Slow yourself down

When you feel stress coming on- focus on your breathing and try to slow it down..... slowly inhale for 5 counts and slowly exhale for 5 counts. Repeat several times. When we slow our body down, we can think more clearly and make better choices.

3. Notice the things that stress you out and make a plan for dealing with them

When we have a plan in place, we are better prepared to manage a stressful situation if it should happen again.

4. Take time to think about the things that are going well

At the end of each day, note what you have accomplished even if only small progress was made. Think about something you like about each of your children and celebrate their positives!

5. Eat healthy foods and get regular exercise and adequate sleep

Increase your vegetables and cut down on processed foods. Walking is a good activity to prevent and combat stress. Playing active games with your kids is great exercise and fun for everyone. Enjoy the outdoors! Also, put yourself to bed on time. Getting good sleep is a key ingredient for managing stress.

6. Connect with people who are supportive and helpful

Reach out, share concerns, and ask for help. Find other parents who have children the same age as yours and compare notes. Arrange play dates or take turns watching each other's children. Connecting with others is one of the most powerful stress busters there is!

TAKING CARE OF YOURSELF.....

.....helps you take care of your child



Being a parent comes with stressful moments and sometimes it can be overwhelming. Here are some helpful hints about managing stress:

- 1. Learn to recognize when stress is coming on***
- 2. Slow yourself down- remember to breathe***
- 3. Notice the things that stress you out and make a plan for dealing with them***
- 4. Take time to think about the things that are going well – think of the things you like about your child***
- 5. Eat healthy foods, get regular exercise and adequate sleep***
- 6. Connect with people who are supportive and helpful***

TAKING CARE OF YOURSELF.....

.....helps you take care of your child



Being a parent comes with stressful moments and sometimes it can be overwhelming. Here are some helpful hints about managing stress:

- 1. Learn to recognize when stress is coming on***
- 2. Slow yourself down- remember to breathe***
- 3. Notice the things that stress you out and make a plan for dealing with them***
- 4. Take time to think about the things that are going well – think of the things you like about your child***
- 5. Eat healthy foods, get regular exercise and adequate sleep***
- 6. Connect with people who are supportive and helpful***

Understanding Your Child's Temperament



*What characteristics cause you the most difficulty?
How are you and your child alike or different?
How does your temperament “mesh” or “fit with your child’s?”
How can you help your child manage those parts of her temperament that are most challenging?*

There is no “good” or “bad” temperament and regardless of what kind of temperament a child has, he can be successful.

When there is a “good fit” between parent and child, the child has a higher probability for healthy development and a successful outcome.

Parents can help children learn to **manage** their temperamental characteristics. Once we understand “how” children are we can help them learn ways to cope with those challenging parts of their personality.

Contact Us:



www.strengtheningfamilies.alaska.gov

www.cssp.org

Most parents recognize that every child is different. What many parents don't understand is WHY and HOW they are different.

Why are some children easier than others to parent?

Why do the same parenting strategies work with one child in the family but not the other?

Children come into the world with their own “temperament” or approach to things. Temperament is “how” a child reacts to various situations as opposed to “why”. Temperament is partly genetic is also shaped by experiences.

TEMPERAMENTAL CHARACTERISTICS

Complete the following questionnaire on your child's characteristics. Then review it again and consider your own temperament.

ACTIVITY LEVEL. How much does your child wiggle and move around when you read to him, at the table, or playing by himself?

1	2	3	4	5
active		quiet		

REGULARITY. Is your child regular about eating times, sleeping times, amount of sleep needed, and bowel movements?

1	2	3	4	5
regular		irregular		

ADAPTABILITY. How quickly does your child adapt to changes in his schedule or routine? How quickly does he adapt to new foods and places?

1	2	3	4	5
adapts quickly		slow to adapt		

APPROACH/WITHDRAWAL. How does your child usually react the first time to new people, new foods, new toys, and new activities?

1	2	3	4	5
initial approach		initial withdrawal		

PHYSICAL SENSITIVITY. How aware is your child of slight noises, slight differences in taste and differences in clothing?

1	2	3	4	5
not sensitive		very sensitive		

INTENSITY OF REACTION. How strong or violent are his reactions? Does he laugh and cry energetically or does he just smile and fuss mildly?

1	2	3	4	5
high intensity		mild reaction		

DISTRACTIBILITY. Is your child easily distracted or does he ignore distractions? Will he continue to work or play when other noises or children are present?

1	2	3	4	5
very distractible		not distractible		

POSITIVE OR NEGATIVE MOOD. How much of the time does your child show pleasant, joyful behavior compared with unpleasant crying and fussing behavior?

1	2	3	4	5
positive mood		negative mood		

PERSISTENCE. How long does your child continue with one activity? Does he usually continue if it is difficult?

1	2	3	4	5
long attention span		short attention span		

Taken from: Without Spanking or Spoiling: A Practical Approach to Toddler and Preschool Guidance by Elizabeth Crary.