

What is 1st Five?

1st Five is a public-private partnership between primary care and public health operating in 88 Iowa counties

Of these, 74 are served by 15 implementation sites, where the initiative is fully operational. Participating health providers refer children birth to age 5 with identified social, emotional or developmental concerns to 1st Five. Developmental support specialists work with families to identify risk factors and connect them to needed services. 1st Five continues to work with the family on a regular basis and update the provider on the outcome of the referral. The other 14 counties are covered by three community planning sites, which are building community relationships and infrastructure needed to move to full implementation.



505 5th Avenue, Suite 404 Des Moines, IA 50309 www.cfpciowa.org 1st Five Healthy Mental Development Initiative
Annual Report

January 2017

Research shows that brain development is at its most malleable and flexible during the first five years of life. This period offers the greatest opportunities to build strong foundations for cognitive, social and emotional health. It is also when the brain is most vulnerable. Frequent or prolonged exposure to adverse events creates toxic stress that damages the architecture of the developing brain. Children exposed to such stressful events are at risk for lifelong problems with learning, behavior and overall health.¹

In fact, studies show that more than one in five Iowa children ages four months to 5 years are at moderate or high risk of developmental, behavioral or social delays.² Only 50 percent of these delays are detected before school entry when interventions are most effective.³

But there are proven strategies to identify and support families facing stressful events and other challenges that hinder healthy development. Over 90 percent of Iowa children ages birth to 5 are seen by a primary care provider, making health care providers a nearly universal access point for this age group.⁴ The 1st Five Healthy Mental Development Initiative leverages this access, bridging primary care and public health services to identify and intervene with families needing extra support.

Providing comprehensive care for the physical, social and emotional health of children requires addressing the issues that affect their families.

1st Five supports families and communities in the following ways

1st Five facilitates early identification and intervention

In 2016, health providers identified nearly 3,000 social-emotional and developmental needs among the nearly 1,800 children referred to the 1st Five initiative. Experts agree that early detection of such concerns increases the effectiveness of interventions and improves long-term outcomes. It reduces costs to society by reducing family stress, caregiver depression and other environmental factors that contribute to poor health and risky behaviors in adulthood.⁵

1st Five addresses toxic stress

1st Five developmental support specialists identified over 2,000 additional needs among children referred in 2016. Those included family stress, caregiver depression, resource needs and other environmental factors that create toxic stress. 1st Five helped make, on average, three community connections for each family engaged in the initiative for services like family therapy, parent education, housing resources and food banks.

1st Five equips health providers with the tools to identify concerns early

In 2016, 1st Five supported 670 Iowa providers in 194 pediatric and family practice clinics. 1st Five helped them implement standardized surveillance and screening tools to accurately identify concerns early. As a result, providers participating in 1st Five are more likely to use these standardized tools than their non-participating peers. Nearly two-thirds of 1st Five practices currently do so; nationally, fewer than half do.⁶

1st Five employs a "whole-child, whole-family" strategy

Research shows that parents and caregivers are the primary influence on a child's emotional development.⁷ Providing comprehensive care for children's physical, social and emotional health requires addressing issues that affect their families such as parental depression. Recognizing this, 1st Five addresses the needs of the whole family, extending its reach beyond the child referred to the program. The average household size for the nearly 2,000 children referred to 1st Five in 2016 was four, significantly expanding the number of Iowans touched by the initiative.

1st Five bridges primary care and public health

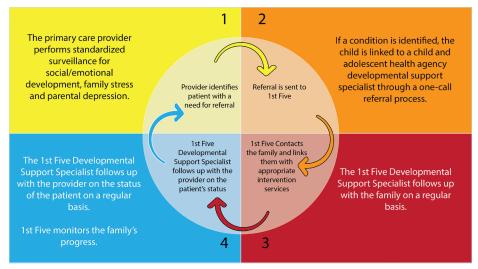
1st Five's role in "closing the loop" on interventions within the medical home enhances child health. Nearly 90 percent of participating providers say 1st Five is "very important" or "essential" to identifying child and families needs and connecting them to services. Said one provider: "If we find an issue, 1st Five takes the referral and runs with it. They know all the referral sources and are extremely knowledgeable. We know the patient/family is going to get the help they need."

Among participating families who completed a 1st Five satisfaction survey:

80% were "completely" or "mostly" satisfied

were "somewhat" or "slightly" satisfied were "not at all" satisfied

1st Five development support specialists are the link between health providers and community services



Source: 1st Five Healthy Mental Development Initiative

Sources:

- ¹ Harvard Center on the Developing Child (2007). The Impact of Early Adversity on Child Development (InBrief). Retrieved from www.developingchild.harvard.edu.
- ² Child and Adolescent Health Measurement Initiative, National Survey of Children's Health, 2011.
- ³ ibid.

⁴ ibid.

- ⁵ Shonkoff, J. P., A. S. Garner, B. S. Siegel, M. I. Dobbins, M. F. Earls, L. Mcguinn, J. Pascoe, and D. L. Wood. "The Lifelong Effects of Early Childhood Adversity and Toxic Stress." Pediatrics 129.1 (2011).
- ⁶ Linda Radecki, Nina Sand-Loud, Karen G. O'Connor, Sanford Sharp, Lynn M. Olson. Trends in the Use of Standardized Tools for Developmental Screening in Early Childhood: 2002–2009. Pediatrics, July 2011, Vol. 128(1)
- ⁷ Harvard Center for the Developing Child.

This report is based on evaluation findings conducted by the Child and Family Policy Center.

For more information on the Center's evaluation efforts, contact Mary Nelle Trefz (mnt@cfpciowa.org).

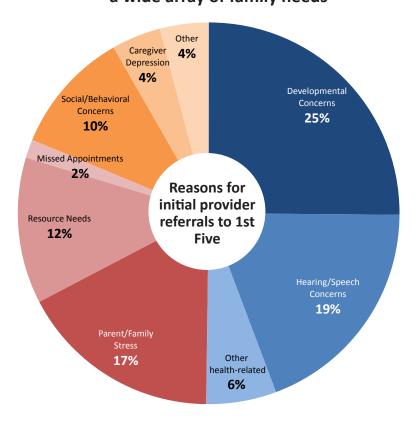
For general information on 1st Five,

contact Michelle Holst (Michelle.Holst@ idph.iowa.gov) or Rebecca Goldsmith (Rebecca.Goldsmith@idph.iowa.gov). Evaluation by the Child and Family Policy Center for



Data snapshot: About the children and families 1st Five serves

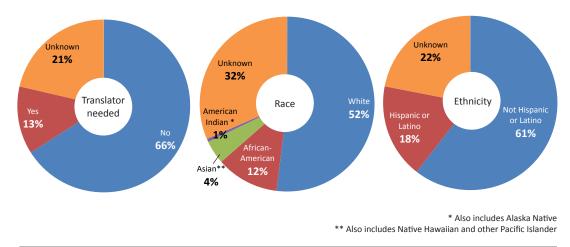
1st Five helps health providers address a wide array of family needs



When a health provider identifies a family need through surveillance or screening, she makes a referral to 1st Five.

For the 1,780 children referred to 1st Five in 2016, 50 percent of the needs identified (some children were referred for multiple reasons) were related to developmental, speech, hearing or other health-related concerns. Another 31 percent were connected to family stress and day-to-day resource needs (food, transportation, housing, childcare/preschool, energy assistance, etc.). The final 19 percent ranged from caregiver depression and social and behavioral worries to language barriers and parent education needs.

1st Five serves a diverse population of children



Putting Iowa children on a path to healthy, productive adulthood

1st Five helps prevent or mitigate the impact of developmental and behavioral disorders and environmental challenges. Unaddressed, these concerns have long-term consequences for Iowa's health, education, child welfare, and juvenile justice systems.

Iowa lawmakers, understanding the value of the initiative, have expanded the appropriation for 1st Five since its start in 2007. As a result, 1st Five is supporting the healthy mental development of more children, connecting more families with community resources, and supporting more health providers with resources and technical assistance.

Since 2007 1st Five has:

- Supported the healthy mental development of more than 12,000 children through the early identification of and intervention for social-emotional and developmental concerns that might have otherwise gone unaddressed until school entry.
- **Made over 26,000 connections to community resources** to help families address family stress, caregiver depression, and environmental factors that create toxic stress.

Here are examples of how 1st Five works with families across the state

Supporting self-sufficiency

A family was referred to the New Opportunities 1st Five program for a child's speech delay. 1st Five helped secure needed services for the child, including a speech therapist and dentist. 1st Five was also able to help the previously unemployed mother secure a job with a flexible schedule that allows either her or her husband to be at home with the child, eliminating the need for child care and reducing the family's financial burden.

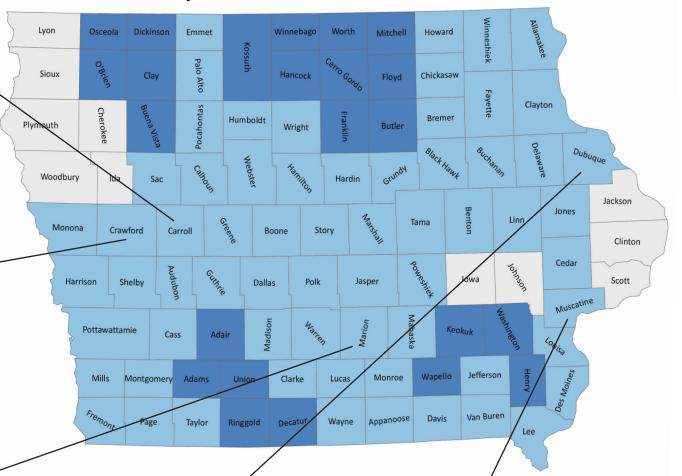
Addressing developmental concerns

A privately insured 2-year-old was referred to the Crawford County 1st Five program for a speech delay. 1st Five helped the mother, who was reluctant to have a professional evaluation, understand that promoting speech at an early age can contribute to future school success. The 2-year-old is now receiving weekly speech therapy through the local AEA and the mother is enthusiastically participating in a parent support and education program.

Addressing environmental determinants of health

A 1-year-old was referred to the Marion County Public Health 1st Five program because the child was not crawling. Working with the family, 1st Five learned that the family was homeless. Without a home with a safe space to crawl on the floor, the child was not developing needed gross motor skills. 1st Five was able to help the family find housing as well as connect the child to developmental services.

1st Five operates in 88 lowa counties



Reducing family stress

New parents of twins were referred to 1st Five at Visiting Nurse Association of Dubuque due to high parental stress and concerns with the home environment. 1st Five staff helped address immediate needs (diapers, infant formula, car seats, home safety) and then worked with the family on longer-term solutions: connecting the children to Medicaid and ongoing support from VNA's Child Health program. The family went on to report lower levels of stress.

Helping new lowans settle in

Trinity Muscatine Public Health's 1st Five program helped a family who recently immigrated to Iowa from Congo obtain services for their young children. They helped them establish a medical home and enroll the children in preschool. 1st Five also helped the parents enroll in ESL classes, find employment and connect to the local Parents as Teachers Program for in-home parenting support.

Legend

1st Five present FY 16 1st Five new FY 17 1st Five not present

The Iowa Department of Public Health contracts with local Title V maternal and child health agencies to implement 1st Five. Currently, 18 of 22 Title V agencies are implementing 1st Five (covering 88 of 99 counties). The Title V service delivery area changed in FY 2017 based on a competitive bid process.