I had to get more down on his level and interact with him, talk with him, and get more focused on him.

**IT FELT LIKE WE WERE BUILDING MORE OF A CONNECTION.**

*Kristin*

Shortly after the birth of her son Calvin in fall 2013, Kristin had doubts about her ability to care for her newborn. “I didn’t feel I was a very good mom, and I wasn’t bonding very well with my baby. It didn’t feel natural to me,” she said.

After receiving her prenatal care at Family Health Centers of San Diego (FHCSD), she expressed her concern to the child development staff there. They suggested that she enroll in their infant massage class, which met weekly for four weeks. Infant massage strengthens the bond between the parent and baby, increases trust, and creates a comforting experience for the baby that leads to a greater sense of security. This sense of security and trust builds the foundation for a child to then explore his world with confidence.

Initially Calvin did not respond well to massage. He was very active and tended to get fussy. During the sessions, however, Kristin learned how to read and respond to Calvin’s cues, and how to comfort him. Now Calvin usually responds by calming down.

Once the infant massage sessions were completed, Kristin wanted to learn more about how to be a better parent.

Kristin enrolled in services offered by the Newton Center for Affect Regulation (NCAR) in partnership with FHCSD and funded through First 5 San Diego’s Healthy Development Services. In this program, Kristin learned about parent-child attachment, emotional regulation, and child development. She and the other caregivers in her program learned how to interact with their babies in a more responsive and supportive way and how their babies’ brains develop.

Kristin explained, “I had to get more down on his level and interact with him, talk with him, and get more focused on him. It felt like we were building more of a connection.”

By the end of her services, Kristin could understand her son’s needs by watching him more closely. She could now tell the difference between when he was hungry or when he was tired.

Kristin feels that tuning into and responding to Calvin’s needs, and supporting his physiological and social-emotional development, have improved their relationship and made her a better mother. She said “[the classes] have opened new doors of connecting me more with my son and showing me the best way to raise him.”

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EARLY CHILDHOOD MENTAL HEALTH

Infant-early childhood mental health, sometimes referred to as social and emotional development, is the developing capacity of the child from birth to 5 years of age to form close and secure adult and peer relationships; experience, manage, and express a full range of emotions; and explore the environment and learn—all in the context of family, community, and culture.²

Mental health problems for infants and toddlers may manifest in harder-to-recognize physical and behavioral symptoms, such as poor weight gain, delayed development, inconsolable crying, sleep problems and impulsive behaviors.

Because young children develop in the context of their families and close relationships, their own emotional health is tied to that of their caregivers.

Mental health issues in young children and their parents are treatable and sometimes preventable.

²Zero to Three: National Center for Infants, Toddlers and Families, 2012

RECOMMENDATIONS

Support relationship-based education to parents and caregivers with an emphasis on quality parent-child interaction, attachment and child development.

Promote programs where the parents can learn how their own emotional world impacts their child, and how to regulate their emotions so they can provide a safe and secure environment that supports their child’s healthy development.

Integrate ECMH services into existing services, like the medical home, to make it easier for the parent to access the services.

STRENGTHS OF SAN DIEGO’S ECMH SYSTEM OF CARE

Co-location of Services
Relationship-based Parent Education and Skill Building