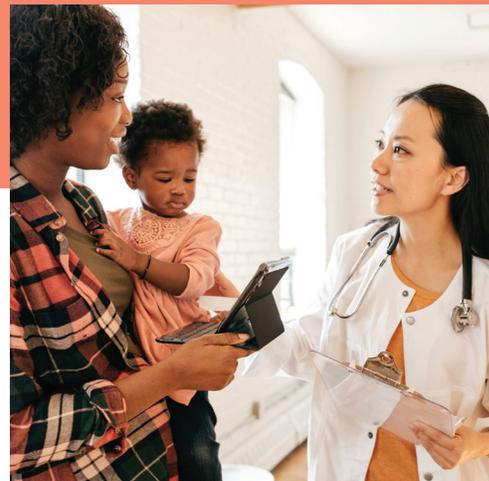


IMPACT Executive Summary

April 2019

Building Resilience in Young Children: Experiences Promoting Protective Factors in Six Pediatric Practices



Pediatric primary care practices can play a critical role in promoting protective factors and positively affecting children's developmental trajectories. This IMPACT report reviews results from an initiative, carried out in 2018, that was designed to train pediatric practices to support families in a way that enhances protective factors and mitigates the impact of toxic stress in young children.

CHDI partnered with the Help Me Grow® National Center, a program of Connecticut Children's Office for Community Child Health to prepare this IMPACT. The report was authored by Abby Alter and Erin Cornell.

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The earliest years of life are critical to a child's healthy growth and development, as a large part of brain development occurs during this period. Many families with young children—especially those who are most vulnerable due to poverty, violence, mental illness, and other potentially toxic exposures—experience stressors in their homes, communities, and work. These factors can impede their ability to provide positive and healthy support to their young children, which, in turn, limits a child's ability to learn, function, and achieve healthy development. On the other hand, the presence of protective factors helps children thrive, despite adversity, a phenomenon known as resilience.

The complex interplay of adversity and protective factors shapes a child's physical, social-emotional and intellectual development. The opportunity to intervene so that children develop resiliency in the face of adverse conditions is highlighted by the Center for the Study of Social Policy's Strengthening Families™ initiative, which presents five protective factors as critical for supporting optimal child development:

- Parental Resilience;
- Social Connections;
- Knowledge of Parenting and Child Development;
- Concrete Support in Times of Need; and
- Social-Emotional Competence of Children.

About the Project

In 2018, the Help Me Grow National Center partnered with the Child Health and Development Institute (CHDI) to test the feasibility and efficacy of training child health providers to promote the protective factors framework and supporting them, through a quality improvement activity, to apply the protective factors framework. Pediatric primary care was selected as the venue for promoting the protective factors because it is a universal service used by nearly all families, who often look to their pediatricians for guidance and expertise in child development. Six pediatric practices from Connecticut, California, and Vermont were recruited from the Help Me Grow affiliate network to participate in promoting the protective factors in their everyday workflows with families of young children and to monitor their progress through a quality improvement program. The project was funded by a grant from The JPB Foundation.

Executive Summary (continued)

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Results from the project found:

- 1) **It is feasible for pediatricians to promote the protective factors.** Practices demonstrated longitudinal improvement over the course of the project in documenting discussions of the protective factors in their charts, particularly for three of the five factors: parental resilience, social connections, and knowledge of parenting and child development. The remaining two factors—social-emotional competence in children and concrete support in times of need—were more challenging for practices to fully adopt.
- 2) **The protective factors enabled a universal, strength-based approach** focused on health promotion and early detection of concerns, as compared to a deficit-based approach that focuses on screening for risks and adverse events.
- 3) **Help Me Grow served as an important vehicle to diffuse and support pediatric interventions** related to protective factors by offering seamless access to helpful community-based services and by leveraging relationships with local practices to support adoption of the protective factors framework.
- 4) **Attention to practice and process workflows are important**, as they were found to help or hinder implementation of new services, including discussions about protective factors.
- 5) **There is a need to further develop measures** that can be used to determine whether practices sufficiently addressed protective factors, and whether that in turn influenced parent knowledge, confidence, and behaviors.

Recommendations for building resilience among vulnerable populations with young children include:

- 1) **Disseminate the protective factors framework broadly** to educate parents, providers, and other health system partners in the most effective strategies for strengthening families and promoting children's optimal health, development, and well-being.
- 2) **Develop, test, and disseminate strategies to measure and understand** how to best communicate with families about social-emotional competence.
- 3) **Explore the use of technology (electronic medical record prompting)** to assist child health providers in promoting the protective factors.
- 4) **Introduce the concept of the protective factors early in pediatric residency training** to continue to ensure that a strength-based, promotion-focused approach to care is and remains a part of training.
- 5) **Ensure funding for rigorous research** demonstrating the link between protective factors and long-term outcomes.
- 6) **Incorporate child health services within the broader early childhood system**, leveraging an “all-sectors-in” approach to strengthening families.
- 7) **Strengthen the physician outreach component of all Help Me Grow systems** by engaging child health providers in early childhood systems development, implementation, and evaluation.