

The EarlyWell Coalition is focused on the following six policy priorities that strengthen mental health support for infants, toddlers, and young children and families in North Carolina.



DOULA CARE INCREASES POSITIVE OUTCOMES FOR BABIES AND PARENTS

Doulas are highly trained to provide tailored emotional and physical support and information to families before, during, and immediately after childbirth. Research shows that people who work with a doula throughout the perinatal period are less likely to have a preterm delivery or low birthweight baby, are less likely to experience postpartum depression, and continue breastfeeding longer.

RECOMMENDATION: North Carolina Medicaid should cover birth doulas as a benefit for every pregnant individual utilizing Medicaid health insurance.

GROUP PRENATAL CARE BUILDS RESILIENCETO CARE FOR ONESELF AND THEIR BABIES

When pregnant women and their families have support and other parents to talk to, they build resilience that allows them to take care of themselves and their children. Group prenatal care has been shown to decrease preterm delivery and low birth weight while increasing breastfeeding rates and birth spacing.

RECOMMENDATION: North Carolina Medicaid should ensure every pregnant individual utilizing Medicaid health insurance has access to group prenatal care.

FAMILY SUPPORT IN NAVIGATING A DISABILITY INCREASES POSITIVE OUTCOMES

Families with young children desire and deserve to have support that can help them safely navigate life with children. When families are facing uncharted territory and navigating services for their child with a mental health challenge, they especially want this support. Since 1985, the Family Support Network of North Carolina provides caring connections and support to families of children with disabilities, mental health challenges, and special health care needs.

RECOMMENDATION: The Family Support Network of North Carolina should receive a \$200,000 recurring state budget allocation and/or expanded state contract with the NC Department of Health and Human Services.



About The EarlyWell Coalition

Founded in 2019, The EarlyWell Coalition brings together families and organizations across North Carolina who value infant and early childhood mental health to ensure all families are supported in ways that work best for them.

The EarlyWell Coalition, co-led by NC Child and the North Carolina Early Childhood Foundation, is a nonpartisan group that, through public policy, seeks to ensure North Carolina's children aged 0-8 and their caregivers are thriving in healthy relationships, with positive mental health and without barriers.

The Process

In June 2022, the EarlyWell Coalition released the <u>'From Equity to Issue Campaigns'</u> report highlighting 30 policy and practice recommendations that will strengthen North Carolina's Infant and Early Childhood Mental Health system.

Since that time, the EarlyWell Coordinating Team, composed of 16 individuals across the state, including family leaders, have reviewed the recommendations and prioritized them with the use of a policy rubric.

Through this process, we have prioritized the policy and practice recommendations and developed a roadmap for the next 10 years.

Contact

Morgan Ray EarlyWell Policy Director 919-670-2712 morgan@ncchild.org



REACH OUT AND READ PROVIDES SUPPORTIVE CONNECTIONS & PROMOTES HEALTH

The achievement of literacy skills happens within emotional connections, and everyday moments that are positive childhood experiences. As such, greater literacy skills support stronger health outcomes. As a tier-one public health intervention, the ROR model is a critical tool to support both clinicians and families through the unmatched touchpoint of primary well care visits. When medical providers utilize the Reach Out and Read model, they are supporting families in creating meaningful interactions that are more than memories; they form a fundamental foundation for cognitive, social, and emotional well-being.

RECOMMENDATION: As a proven model that is endorsed by the AAP, ROR should be widely implemented in North Carolina as a standard component of primary care, and a natural extension of child health best practices. North Carolina, in collaboration with Medicaid, should include ROR as a core component of primary care for children in the state, and ensure an integrated and sustainable way to scale the intervention as well as secure a recurring state budget allocation.



ADDRESSING THE CHILDREN'S MENTAL HEALTH CRISIS AND SUPPORTING THE CHILD CARE WORKFORCE

The Pyramid Model supports positive coping skills in early childhood through evidence-based research and innovative techniques. The Pyramid Model is being utilized, with excellent outcomes, by the North Carolina Exceptional Children's Preschool Program, Healthy Social Behaviors Project, and Early Intervention.

RECOMMENDATION: North Carolina Department of Health and Human Services, through enhanced funding to DPI, DCDEE, and DCFW, should ensure that the Pyramid Model is a foundational component of all early care and education classrooms and early intervention family services by providing continuing education resources and coaching offered by professionals trained in this evidence-based framework for developing young children's social and emotional competencies.



CHILDREN AND THE ADULTS WITHIN THE NORTH CAROLINA FOSTER CARE SYSTEM NEED SUPPORT

There are over 10,000 children in North Carolina's foster care system. North Carolina has approximately 5,400 licensed foster care homes and approximately 5,100 relative-kin foster care homes. Foster families have requested more support and training. The Child Welfare staff also desire professional development.

RECOMMENDATION: North Carolina Division of Social Services will increase accessibility to Kin Gap Training and Resource Parent Curriculum for the caregivers of North Carolina's foster care population. North Carolina Division of Social Services will provide Trauma Training Toolkit to Child Welfare staff within 2 years of hire.