

Top 10 Things We Know About Young Children and Health Equity...

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EXEMPLARY PROGRAMS SHARE KEY THINGS.

Most exemplary program and practice efforts, explicitly or implicitly, adopt an ecological and strength-based framework in working with the family as the child's first teacher, nurse, safety officer and guide to the world. There is a growing understanding of how to put that ecological and strengthening framework into practice.

In general, many exemplary programs and practices focus on the medical provider as “first contact” to screen for customary child medical and developmental issues as well as environmental factors impacting a child's health. This broadened role for practitioners and health practices expands the focus of well-child care and other pediatric visits to be more preventive, developmental and environmental in their focus, often involving developmental surveillance and screening of the child and the child's home life.

Although the exemplary programs and practices tackle somewhat different concerns and do so through somewhat different structures, these effective practices and programs at their core, share the following four critical elements:

1. **Care coordination:** Care coordination is defined as a patient/family centered, assessment-driven and team-based activity designed to meet needs of children, while enhancing the caregiving capabilities of families. Care coordination is operationalized by addressing interrelated needs—medical, social, developmental, behavioral, educational, and financial—to achieve optimal outcomes. It also helps families cultivate skills to utilize, advocate for, and manage resources on their own, and build on strengths.
2. **Community linkages:** Effective community linkages connects services and support coordinated systems to increase continuity, collaboration, and cross-sector sharing in all aspects of service delivery, while ensuring the privacy and rights of families. Exemplary programs and practices work at ensuring that any referral aligns with the family's desires, values, experiences, and goals. Referrals must also complement the strategies of other services and support the family accesses, including those provided through the primary health care practice. Robust linkages among community partners are based on strong, ongoing, and evolving relationships.
3. **Family Engagement:** Exemplary programs and practices view family engagement and family-driven care, with families at the center of the care planning process. They work at maintaining a commitment to family-centered, strength-based services that respect the diversity and unique needs of children and families. They also try to ensure consistent and meaningful, routine two-way communication between providers and families and promote and maintain family dignity and integrity by supporting their active involvement in identifying,

promoting, improving, and managing child development and health in ways meaningful to them.

4. **Health Equity Approach:** The exemplary programs and practices all use intentional actions that promote health equity. Intentionally using a health equity lens while working with families and other programs is critical. Exemplary programs may use a combination of a culturally competent training approach, a measurement approach, or some other action. Some of these examples include: Highlighting cultural competency as a value underpinning the work and program approaches, such as using diversity informed practice, recognize the ethnic make-up and home languages of the community being served, provide resources and time to increase cultural competency of staff, give attention to practice that addresses issues of new Americans, refugees, immigrants, privilege and class

A number of these models have strong research and evaluation components and have demonstrated impacts that qualify them as evidence-based (or evidence-informed). Some have particular strengths with specific populations, and others have developed tools that have shown particular value in their work. These programs and practices continue to refine and develop their approaches. They are also learning how they may need to be contoured to be most effective in different settings and for specific populations. These models also constitute an ecological approach increasingly recognized as necessary to improve the healthy development of young children, particularly children in vulnerable and stressed homes and neighborhoods.

The Center for Study of Social Policy Strengthening Families' protective factors framework is used by many of the exemplary programs and practices in their work with families. The Five protective factors help to identify family needs:

Five Protective Factors:

1. Parental Resilience: Managing stress and functioning well when faced with challenges, adversity and trauma
2. Social Connections: Having a sense of connectedness with constructive, supportive people and institutions
3. Knowledge of Parenting and Child Development: Understanding parenting best practices and developmentally appropriate child skills and behaviors
4. Concrete Support in Times of Need: Identifying, accessing and receiving needed adult, child and family services

5. Social and Emotional Competence of Children: Forming secure adult and peer relationships; experiencing, regulating and expressing emotions

Additional Resource:

- Center for the Study of Social Policy: Strengthening Families - A Protective Factors Framework. <http://www.cssp.org/reform/strengtheningfamilies/>
- [Lessons from Exemplary Programs: Strategies to promote healthy development in young children \(May 2018\)](#)