# Infant Family Early Childhood Mental Health Training Program



## **About the Infant Family Early Childhood Mental Health Training Program**

First 5 Monterey County (F5MC) Infant Family Early Childhood Mental Health (IFECMH) Training is designed to strengthen a diverse workforce of Monterey County partners across systems serving children, prenatal through age five, and their families. WestEd Center for Prevention and Early Intervention (WestEd CPEI) has been providing the F5MC IFECMH Training, aligned with state IFECMH guidelines since 2012.

The training aligns with the F5MC Strategic Plan Framework for July 2017 – June 2023 to build capacity for diverse Monterey County professionals as well as to provide targeted capacity building for F5MC funded projects. Participants build expertise along the continuum of prevention, social emotional support, preventive intervention, and relationship-based family focused treatment for children.

All professionals working with young children and their families need to be grounded in core knowledge and competencies. Those competencies need to be based in a family-centered, healing centered, developmentally appropriate, and relationship-based framework for serving young children and their families across the continuum of infant-family and early childhood services. These competencies are available in the <u>California Compendium of Training Guidelines, Personnel Competencies and Professional Endorsement Criteria for Infant-Family and Early Childhood Mental Health</u>. The F5MC IFECMH Training is aligned with these competencies.

IFECMH training provides a focus on social, emotional and developmental needs of infants, young children and their families including consideration of culture, race, and other contextual factors that may be shaping a young child's development. It does so in a way that fosters relationship-based family focused treatment and connection across diverse service providers in Monterey County. All offerings seek to expand the narrative from "trauma informed care" to include healing-centered engagement practices that embody race, equity, diversity and inclusion (REDI) principals. Consideration is specifically held for the struggles, discrimination and injuries that have occurred to populations in the Salinas Valley. The training program is free for those who work with children prenatal through age five and their families in Monterey County.

### Key Findings from Evaluation of the 2021/2022 IFECMH Activities

IFECMH participants join the training series not only to deepen their knowledge but also their relationships with other practitioners. Participants joining the Spanish cohort also saw it as sharing an experience with their co-workers and as burnout prevention.

IFECHM 21/22 attracted both participants who had previous experiences with IFECMH trainings and those who had never attended IFECMH before; however, there were more returning participants than new participants. Most participants were motivated to join to refresh their existing knowledge and/or learn about new research/content. Over one-half of participants also joined to develop relationships with other participants and to develop leadership skills. A larger proportion of Spanish than English cohort participants joined the training because it was available in Spanish, to have a shared experience with their co-workers and to prevent burnout or have a nurturing experience.

Outcome Area 1: The training series increased practitioners' knowledge and skills to meet the complex mental health needs of young children and families.

- Nearly all IFECMH participants felt the learning series deepened their knowledge of how to work with children and families and that they applied these knowledge gains to their work with children and families.
- Foundational series participants increased their knowledge of how to support families' well being—and they also learned more about the importance of their own self-reflection for their work with children and families.
- Pregnancy and the First Year of Life learning series participants increased knowledge across
  multiple domains of how to appropriately support families during and after pregnancy. They
  also increased their understanding of the perinatal mood and anxiety disorders (PMADs) in a
  number of ways—including the impact of these disorders on babies and how to recognize PMAD
  signs in parents.

Outcome Area 2: The Learning Groups and Capstone Series increased participants confidence in applying their IFECMH skills to their work with families. However, workloads/caseloads often serve as a barrier to implementing learnings (across all training series participants).

- FAN Reflective Practice Learning Group and Circle of Security Learning Group participants gained skills and confidence in working with families. Both groups of participants reported gains related to their own self regulation which in turn supports caregivers/parents in slowing down and reflecting on their relationship with their child.
- Capstone series participants gained additional skills and confidence in facilitating multidisciplinary discussions with other practitioners and using mindful self regulation strategies as facilitators.

All IFECMH participants were asked what supports exist in their workplace to support
implementing their learnings. Only one-third of participants reported that their
workloads/caseloads allow for time to implement or try something new.

Outcome Area 3: The Training Series fostered connections among practitioners across systems of care and support for young children and families. These connections are integral to providing quality support for families in a number of ways.

- IFECMH participants formed relationships during training activities that benefit families. The
  training allowed them to meet new partners and colleagues in their communities, leading to
  sharing of resources and information that participants applied to their work. One-half of
  participants even reported sharing this new information with families and making a referral for a
  family as a result of a connection made during the series.
- The training activities allowed participants to have safe and open conversations about race, equity, diversity and inclusion—crucial for supporting families in the context of racist and inequitable systems that impact children and families well being.
- The training activities increased compassion for and curiosity to learn about others; they also helped participants feel an increased sense of commitment to their work.

## IFECMH 2021/2022 EVALUATION REPORT

# **About the FY 21.22 IFECMH Training Program**

IFECMH FY 21.22 was the 10<sup>th</sup> time the program was offered in Monterey County. This year, the program included eight different learning series (Table 1). More information on each of the learning series offered can be found in Appendix A. A total of 194 practitioners were served by the FY 21.22 program—more participants than were served in FY 20.21 (128 practitioners were served in FY 20.21).

194 Practitioners participated in FY 21.22 IFECMH activities

Table 1. List of the FY 21.22 IFECMH Learning Series

Name of Learning Series	Number of Sessions	Number of Participants	
Foundational Series (3 Groups in English, 1 Group in Spanish)	6	127	
Let's Talk about Bruno (Used the movie <i>Encanto</i> to explore themes of trauma, collectivism, and culture)	4	73	
Pregnancy and the First Year of Life	4	40	
Care Coordinator Learning Group	6	21	
Capstone Learning Group	6	20	
Facilitating Attuned Interactions Reflective Group (FAN; 1 Group in English, 1 Group in Spanish)	6	17	
Understanding the Social-Emotional Development of Children Prenatal to 5 (Series designed for County-employed practitioners)	4	14	
Circle of Security Parenting Learning Group (COSP; 1 Group in English, 1 Group in Spanish)	8	11	

<sup>\*</sup>Some participants participated in multiple offerings, thus the table adds to more than 194 (the total unduplicated count of participants)

In addition to the above learning series, there was also a two hour virtual "anchor" event with Dr. Chandra Gosh Ippen titled "Metaphors and Core Concepts to Support Trauma-Informed Care." The anchor event was open to anyone interested; there were 103 people in attendance.

### **About FY 21.22 IFECMH Participants**

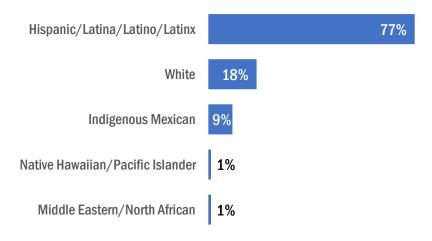
FY 21.22 IFECMH participants included both practitioners new to any IFECMH learning series (43% of participants) and those who had participated in past IFECMH offerings (57% had participated in one or more past training years). Participants represented 55 different agencies and organizations (see Appendix B for a list of all organizations represented).

43% of FY 21.22 participants were attending for their first time

### About FY 21.22 IFECMH Survey Respondents

Data presented in the remainder of the report (except where noted) were gathered via surveys sent out to participants after IFECMH activities had concluded for the year. A survey was sent to Foundational, Pregnancy and the First Year of Life, Facilitating Attuned Interactions (FAN) Reflective Practice Group, and Circle of Security Parenting Learning Group (COSP) participants in May 2022. Ninety-three respondents completed at least some portion of this survey, with 36% reporting they were first-time IFECMH participants. Thus, the survey sample under-represented first-time participants. The survey was available in English and Spanish; 65 respondents completed the English version and 28 respondents completed the Spanish version. Most of the respondents (n=23) who completed the survey in Spanish were members of the Spanish Foundational series cohort. More than three-quarters of survey respondents identified as Hispanic/Latina/Latino/Latinx (Figure 1).





Separate program closure surveys were sent to those participating in the "Let's Talk About Bruno" and Capstone series. The Capstone series survey was different than the others in that it was sent to Capstone attendees from previous fiscal years (not just FY 21/22). It was sent to 37 past Capstone attendees and 16 respondents completed the full survey. "Understanding the Social-Emotional Development" series participants did not take a program closure survey but did take a survey after each session.

### **Motivation to Participate in IFECMH Activities**

Overall, survey respondents ("respondents") most frequently reported that refreshing their existing knowledge or learning about new research motivated them to join IFECMH activities (Figure 2). Two-thirds of respondents reported that developing relationships with other participants motivated them to participate while one-half were motivated to develop their leadership skills. Respondents who were returning IFECMH participants were especially likely to choose "refreshing existing knowledge or learning about new research" as a motivation: 90% of respondents who were returning participants chose this motivation compared to 69% of respondents who were first-time IFECMH participants. The other motivations listed did not differ much between returning and first-time participants.



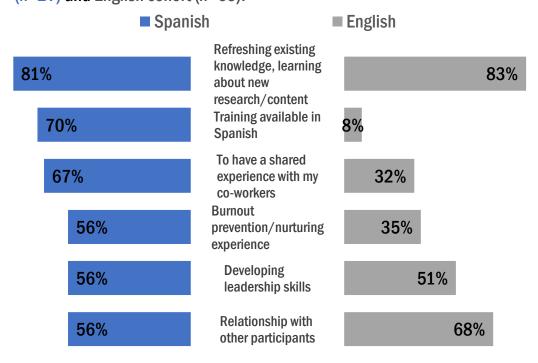
Figure 2. Overall motivations for participating in IFECMH activities

Motivations to participate did differ depending on whether respondents participated in IFECMH Spanish cohorts or the IFECMH sessions offered in English (with Spanish interpretation)<sup>1</sup>. Larger proportions of Spanish than English cohort respondents were motivated to attend by the training being available in Spanish, having a shared experience with co-workers and for burnout prevention (Figure 3).

7

<sup>&</sup>lt;sup>1</sup> This analysis is based on whether participants completed the survey in Spanish or English (used as a proxy for participating in Spanish cohorts); 23 noted they were in the Spanish foundational cohort.

Figure 3. Motivation to participate for Spanish cohort respondents (n=27) and English cohort (n=65).



# Outcome Area 1: Increasing Practitioners' Knowledge and Skills to Meet the Mental Health Needs of Young Children and Families

### Overall Knowledge of How to Work with Families

Most respondents reported joining the IFECMH learning series in order to refresh or increase their knowledge—and also reported that the learning series delivered on this expectation. Nearly all (97%) respondents agreed or strongly agreed that their knowledge of how to work with children and families increased or deepened as a result of the IFECMH series—with 81% **strongly agreeing** with this statement. And, nearly all respondents agreed or strongly agreed that they applied this knowledge to the ways in which they work with children and families—with 78% **strongly agreeing** with this statement.



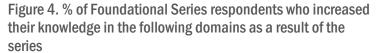
97% of respondents agreed or strongly agreed that their knowledge of how to work with children and families has increased or deepened as a result of IFECMH

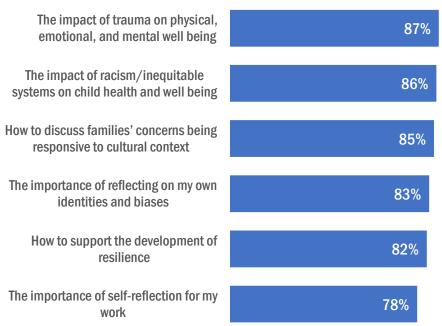
of respondents agreed or strongly agreed that they applied some of the knowledge they learned from IFECMH to expand ways in which they work with children and families

#### **Knowledge Gains in Key Domains**

# Foundational series participants increased knowledge of how to support families' well being—and the importance of their own self-reflection.

Foundational series respondents (n=68) rated their knowledge across six domains, both before the start of the training series and afterwards, using the following scale: not at all knowledgeable, slightly knowledgeable, somewhat knowledgeable, quite knowledgeable or extremely knowledgeable. Figure 4 displays the percentage of respondents who reported increasing their knowledge at least one category (e.g., from "quite" to "extremely") as a result of the series. Nearly all respondents increased their knowledge across the six domains—with the largest percentage of respondents increasing their knowledge of how trauma and racism impact well being.





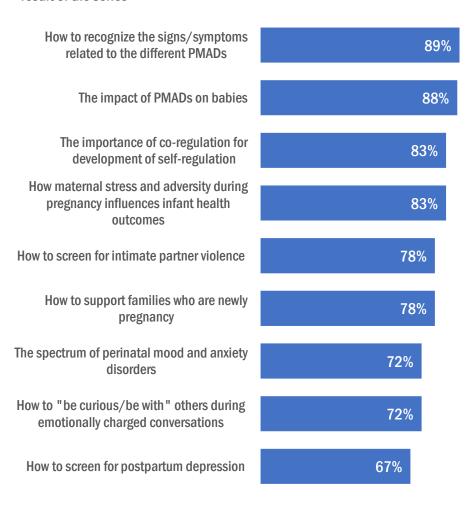
Respondents also provided stories that demonstrate the importance of these particular knowledge gains (See Appendix C for responses by all survey respondents). For example, one participant shared that:

By holding an intergenerational framework and using the CPP [Child-Parent Psychotherapy] triangles of explanations I am able to understand what a caregiver has been through and how this affects the way the caregiver responds to the child. By having this knowledge, I am able to support the caregiver and at the same time recognize and regulate my own strong emotions prior to intervening. There is this family that I have been working with for a few years and [I] wondered what kept getting in the way of [the parent] responding to her children in a more attuned manner. By understanding the CPP triangles of explanation I have a better understanding of how mom's own trauma has impacted her and how small steps matter.

Pregnancy and the First Year of Life learning series participants increased knowledge in many ways of how to appropriately support families during and after pregnancy. They also increased their understanding of the perinatal mood and anxiety disorders (PMADs) in a number of ways—including the impact of these disorders on babies and how to recognize PMAD signs in parents.

Pregnancy and the First Year of Life respondents (n=22) rated their knowledge across nine domains both before (retrospectively) and after the series. The majority of respondents increased their knowledge at least one category (e.g., from "not at all knowledgeable" to "slightly knowledgeable") across all domains (Figure 5). The largest percentage of respondents gained knowledge for how to recognize the signs related to the different PMADs and an understanding of the impact of PMADs on babies. The smallest percentage of respondents gained knowledge in how to screen for postpartum depression—although over two-thirds did report doing so. While many respondents likely were already screening for depression prior to the series, they clearly gained a better understanding of the range of PMADs and how to support families during and after pregnancy.

Figure 5. % of Pregnancy and the First Year of Life respondents who increased their knowledge in the following domains as a result of the series



# Outcome Area 2: Applying IFECMH Skills and Increasing Confidence in Working with Families

### **Learning Groups**

IFECMH programming includes opportunities to gain confidence and practice skills to support the socioemotional and mental health needs of families. Three programs specifically focus on gaining confidence in using IFECMH skills: Facilitating Attuned Interactions (FAN) Reflective Practice Group; Circle of Security Parenting (COSP) Learning Group; and, the Capstone Learning Group. The FAN Reflective Practice Group supports service providers in integrating and applying the FAN reflective strategies in everyday work. The COSP Learning Group supports providers with successful implementation of Circle of Security parenting groups. The Capstone Learning Group allows providers to deepen their FAN facilitation skills by working with the instructors and leading small groups during the learning sessions. The following section outlines some of the ways these groups built participants' confidence and skills.

#### FAN Reflective Practice participants gained confidence and skills in working with families.

Overall, most FAN<sup>2</sup> Reflective Practice respondents (n=16) thought the learning group was helpful for practicing their skills and increasing their confidence to work with families (Figure 6). More specifically, nearly all FAN respondents felt they increased their confidence in using FAN processes for working with families (e.g., mindful self-regulation and empathic inquiry; as reported in pre/post confidence ratings). Fewer participants felt the learning group was helpful for discussing a case<sup>3</sup> with the group and networking with colleagues.

<sup>&</sup>lt;sup>2</sup> For more information on FAN: https://www.erikson.edu/academics/professional-development/district-infancy-programs/facilitating-attuned-interactions/

<sup>&</sup>lt;sup>3</sup> All client confidentiality is maintained when participants discuss cases with the group

Figure 6. % of FAN respondents who said the learning group was helpful for:



Are there changes in how families respond to your interventions as a result of using FAN?

"Parents are open, willing to share struggles and/or successes because I am able to ask those open-ended questions with confidence. They pause and take a deep breath—and so do I, which they recognize and they relax their tone of voice."

Circle of Security Parenting Learning Group participants gained confidence in supporting caregivers to observe and reflect on their children's needs. Nearly all respondents (n=29) gained confidence across all skills surveyed. A few of those skills are included below.



of Circle of Security Learning Group respondents gained confidence in supporting caregivers to accurately observe children's exploratory and attachment development needs

of Circle of Security Learning Group respondents gained confidence in helping caregivers talk about and reflect on what they are doing (and not yet doing) to meet their children's needs

of Circle of Security Learning Group respondents gained confidence in promoting caregivers' reflections on the co-regulation of their children's emotions

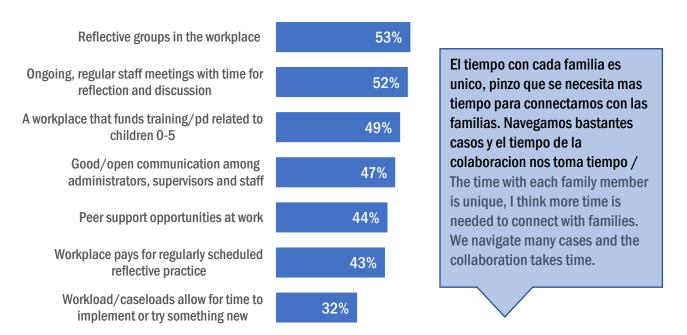
Capstone Learning Group participants gained skills in facilitating small group multidisciplinary discussions. Respondents (n=16) were asked to rate their level of confidence in their ability to use the communication strategies of the FAN Group Framework ("Framework") both before their Capstone participation as well as their current level of confidence. Nearly all respondents reported increased confidence in their abilities to use the 17 strategies of the Framework as a result of participating in Capstone, with the largest gains in confidence around their ability to recognize their own dysregulation

when leading a group, and using mindful self-regulation strategies to remain present. Additionally, nearly all (13 out of 16 respondents) reported using their FAN skills often or always in their work, with the remaining three respondents noting they use their FAN skills "sometimes."

#### **Supports and Barriers to Implementing IFECMH Learnings**

Some IFECMH participants need more supports in the workplace in order to implement the knowledge and skills gained during their learning activities. All survey respondents were asked to reflect on the supports they have at their work or organization to implement their IFECMH learnings (Figure 7). Over one-half reported they did have reflective groups in the workplace and ongoing staff meetings for reflection and discussion. Only one-third of respondents reported that their workload/caseloads allow them time to implement or try something new.

Figure 7. % of respondents who said they had the following supports in their workplace to implement their IFECMH learnings.



Respondents were also asked: What other complexities (including barriers or challenges) have you encountered in applying IFECMH to your work? Respondents discussed a lack of support from their organization or supervisor—noting there were organization-wide policies serving as barriers or that the organization/leadership did not understand or value IFECMH and early childhood.

Respondents also reflected on heavy workloads as barriers to implementing their learnings—demonstrated in Figure 7 and also in open-ended responses. Relatedly, respondents noted a focus on quantity over quality that serves as a barrier to implementing the IFECMH learnings. One respondent noted the difficulty with both organizational policy and the heavy workloads:

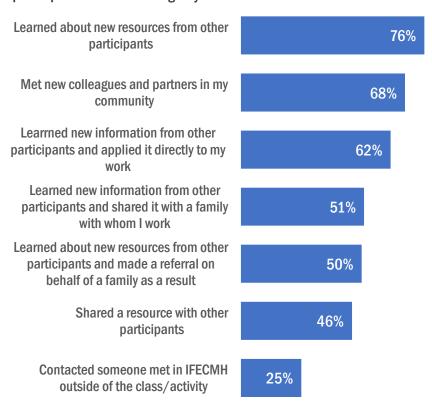
Policies that have been in place for many years that continue to be implemented that make it difficult to have honest and open communication with supervisors. At times, supervisors are

aware of the amount of workload and push for mindfulness and well being of employees but nothing is done to make changes to the workplace. When talking about self-care, it is always brought back to "what can you do on your own time?"

# Outcome Area 3: Fostering Connections among Practitioners across Systems of Care and Support for Young Children and Families

IFECMH participants formed relationships during training activities that benefit families. One goal of the IFECMH programming is to bring together practitioners from across Monterey County—offering an opportunity for them to develop new relationships and gain a greater understanding of one another's systems and resources. Respondents to the FY 21.22 IFECMH survey reported learning from colleagues in a number of ways (Figure 8)—and in ways that benefited the families they work with. For example, three-quarters of respondents learned about new resources from other participants, two-thirds directly applied information learned from other participants to their work and one-half made a referral on behalf of a family as a result of learnings about resources from other participants.

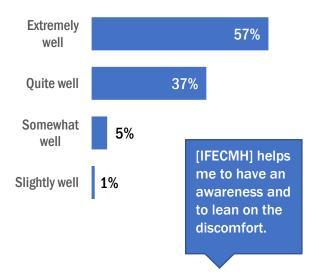
Figure 8. % of respondents who reported connecting with other participants in the following ways:



**IFECMH learning activities allowed participants to have safe and open conversations about race, equity, diversity and inclusion.** IFECMH activities provides a focus on social, emotional and developmental needs of infants, young children and their families including consideration of culture, race, and other contextual factors that may be shaping a young child's development. Integral to this, IFECMH participants are asked

to reflect on their own racial and ethnic backgrounds, experiences with discrimination and their own biases. Thus, the IFECMH facilitators are tasked with creating spaces where participants feel safe having these conversations. The majority of FY 21.22 survey respondents felt that their training activities did allow them to have open and safe conversations about race, equity, diversity and/or inclusion (Figure 9).

Figure 9. Respondents responses to the question, "How well did your IFECMH activities provide open and safe conversations about race, equity, diversity and/or inclusion?"



Pues como me cuesta trabajo tener mente abierta en comunidades diversas. Estas clases apoyan y muestran cómo practicar. / It's hard for me to have an open mind in diverse communities. These classes support and show how to practice.

Overall, IFECMH participants reported that the learning activities increased their compassion for and curiosity about others and they felt an increased sense of commitment to their work. IFECMH learning activities also supports relationship building and connection by helping participants feel more compassion for others, more curious to learn more about those they work with or serve and an increased sense of commitment to their role, work or practice (Figure 10).

Figure 10. Nearly all respondents felt the series increased their sense of compassion, curiosity and commitment to their work quite a bit or a great deal.

Graph displays responses to the question: "To what extent did you experience the following

■ Not at all/A li	ittle bit	■ Somewhat	Quite a bit	A great deal
An increased sense of compassion for others	0%	1%	36%	63%
An increased sense of curiosity to understand more about those I work with or serve	0%	3%	42%	55%
An increased sense of commitment to my role/work/practice	0%	1%	49%	50%
My concerns and questions were addressed	0%	4%	49%	47%

### **APPENDIX A. Description of FY 21.22 IFECMH Activities**

- **IFECMH Foundational Series.** Offered in 3 English language cohorts and 1 Spanish language cohort. Each of the cohorts offered sessions for clinical providers as well as diverse service providers and educators. Sessions focus on IFECMH foundational topics that include a focus on the social and emotional development of infants and young children and their caregivers within the sociopolitical context of their environment and communities.
- Let's Talk about Bruno: Offered in English with simultaneous Spanish interpretation. An interactive four session series to explore themes of trauma, collectivism and culture through the lens of the movie "Encanto."
- Pregnancy and the First Year of Life. Offered in English with simultaneous Spanish interpretation.
   This seminar series focused on maternal and parental mental health and child development during the pregnancy period and into the first year of life. Participants gain a deeper understanding of how we can support families during these critical periods of development.
- Capstone Learning Group. Offered in English. This learning group is for those with multiple years of IFECMH training (completed at least eight Foundational training sessions in previous years). Participants develop and deepen reflective practice skills using the Facilitating Attuned Interaction (FAN) model. Participants also support the learning of others by practicing their facilitation skills in small groups during the IFECMH Foundational Series. By developing these skills, participants are strengthening their abilities to facilitate a variety of groups in their own program settings.
- Facilitating Attuned Interactions (FAN) Reflective Practice. Offered in two cohorts: one in English
  and one in Spanish. Six, 1.5-hour sessions designed to support service providers in the integration
  and application of FAN reflective strategies in their everyday work. They also help build a
  community of practice for providers currently using the FAN. Successful completion of FAN Level 1
  training is required for participation.
- Understanding the Social-Emotional Development of Children Prenatal to 5. Offered a series of
  four sessions designed to increase knowledge of the social emotional needs of young children—
  designed for those who may not have much experience with IFECMH topics. Participants could
  participate in just one—or all four sessions. Session topics included: creating emotional safety for
  oneself while ensuring the physical and emotional safety of young children; understanding the
  complex ways that young children communicate needs and anxieties; strengthening relationships
  to promote healthy attachment; and identifying developmental risk factors.
- Circle of Security Parenting (COSP) Learning Group. Offered in two cohorts: one in English and one in Spanish. These 1.5-hour reflective sessions are open to those who have completed COSP training and who are currently implementing parenting groups in Monterey County. This learning group is designed to support successful implementation of COS parenting groups.

# APPENDIX B. List of Organization/Agencies Participating in IFEMCH Activities

#### Name of Organization/Agency

Agape Academy Preschool

Alianza For Youth Justice

Alisal Union School District

**Almaden Valley Counseling Services** 

Anthem Blue Cross/Beacon Health Options

**Basic Needs Initiative** 

Bay Area Community Services -BACS

**CAPSLO** 

**CASA of Monterey** 

Catalyst Kids/ Kings City Migrant

Center for Community Advocacy

Centro binacional para el desarrollo indigena oaxaqueno

City of Salinas/ Salinas Public Library

**Community Hospital** 

**Community Human Services** 

County of Monterey Behavioral Health Early Childhood Services

**CSUMB** 

Door to Hope

Elizabeth Ramirez Child & Family Counseling

F5MC

Family Child Care

Family works

Family, Friend and Neighbor

Fleet & Family Support Center

Go Kids, Inc.

Greenfield Union School District, VVMS

Harmony-At-Home

Hartnell College Child Development Center

Homeless Garden Project

Interim

**Jacob's Heart Support Services** 

MCOE Early Learning Program

Mexican American Opportunity Foundation

Monterey County Behavioral Health

Monterey County Behavioral Health, Early Childhood Services Team

Monterey County Dept of Social Services - CalWORKs Employment Services

Monterey County FCS (Family and Children Services)

Monterey County Health Department

Monterey County Office of the Public Defender

Monterey County Probation Department Child Advocate Program

**New Horizon Community Services** 

North Monterey County Unified School District

Pajaro Valley Unified School District

**Parenting Connection of Monterey County** 

Parents' Place / Pacific Grove Adult School

Pueblo Del Mar (Sun Street Centers)

**PVPSA** 

**Quality Matters Monterey County** 

Rebekahs Children Services

Salinas city elementary school district

Salud Para La Gente

Santa Cruz County Office of Education

Seneca Family of agencies / Kinship

Young Interventions, Inc.

YWCA

# APPENDIX C. Responses to the Question: How Has the Content from your Training Activities Impacted your Work?

Thinking about what you have learned, how has the content from your training activities impacted your work? Please provide AT LEAST ONE STORY from your work with children and families. These stories may be used to provide information on this training series to First 5 Monterey County. No names, agency names, or any identifying family information will be shared.

By holding an intergenerational framework and using the CPP triangles of explanations I am able to understand what a caregiver has been through and how this affects the way the caregiver responds to the child. By having this knowledge, I am able to support the caregiver and at the same time recognize and regulate my own strong emotions prior to intervening. There is this family that I have been working with for a few years and wondered what kept getting in the way of [the parent] responding to her children in a more attuned manner. By understanding the CPP triangles of explanation I have a better understanding of how moms own trauma has impacted her and how small steps matter.

I am able to use better age related and situation appropriate terminology with my new parents.

I observed a child that I was curious if trauma had occurred and was able to initiate a call to inquire more and get context to their behavior.

We serve vulnerable populations of customers. Some customers who are from other countries who do not understand our customs and do not know about some of the resources available to them. There are some cultural differences (familial, childcare, etc.) that are challenging for the children and parents.

I work with a family who has a child with a large cast. I spoke to a few ladies about this and it was brought to my attention that there is a cast that is waterproof and not as heavy so that the child is able to go swimming, sleep better and take a bath because they struggle with bathing now. This family is looking into this referral and hoping to move forward with getting the support needed to purchase the cast

I have learned and shared with my families and used examples of my training to help them understand me better

This is a great opportunity to learn more resources to support our work with children. I loved that this training gave so many ideas about creating strong connections with the families. I have had a great schools year and been working with the families in a more meaningful way.

My clients are usually on survival mode.. i encourage my clients to focus on the positive in their lives and to not [dwell] on what they have no control over. Everyone has something positive to bring to the table.

I was able to put into practice Vilma's presentation of CPP triangle in working with a family to visualize their symptoms, behaviors of concern and experience lived.

Reflecting on the impact systems have made either negatively or positively and seeing families continue to seek support from during times of hardship has been useful to name when working with families. It gives a sense of validation and commitment to understand their full stories.

I do not want to share a story. However I would like to share that I have learned to be more aware of my biases. I have learned the art of listening and to slow it down when completing an intake.

I have a family I'm working with that is experiencing reintegration anxiety. Family is very nervous about coming back to in person activities like school, family and social spaces

I participate in the Encanto series....I have brought it into my work on several occasions as a therapist and as a reflective practitioner, the use of metaphor, story and universal experiences.

Working with a parent of a 3yro., who per mom was acting out by hitting, biting, and having screaming fits almost all the time. Mom wanted to know how to teach her 3yro. to stop doing this. After listening, acknowledging and empathizing with parent's experience, parent shared that she had a young baby boy who needed a lot of attention. I began to wonder how the 3yro child might feel about the baby now crawling around and getting into toys that belong to her. After mom shared her observations of how much the baby wants everything his sister has and does not like mom to hold her. Mom seemed to develop empathy for the 3yro. Asked mom if she though, she would make time/space to play with her 3yro. for 5 to 15 min. every day when the baby is sleeping. Mom stated that, if it would make a difference in her 3yro behavior, she would do it. Explained to mom that maybe her little girl was just missing her and wanted to feel close to her. Asked parent if I could call to check in a week or two to check in; mom consented and when i did call 10 days later. It took a lot less time for mom to share her experiences with her kids at home. She was happy to say the behavior of her 3yro. had improved. Mom reported that her little girl was more receptive to her brother's invitations to play. Mom also reported on how she has extended play time with the baby also and made changes she thinks are helpful to keep her motivated.

The first 5 Trainings are great. They provide so much helpful information. These Trainings have helped me in flagging red flags amount the Customers my program serves.

#### Connecting activity

It has been invaluable the way this training has helped my staff shape their understanding of IMH and trauma. The capacity they each have to connect previous experience with current behaviors, symptoms and relational strengths and challenges has been applied to so many family-situations that they have brought to supervision. So important!

knowing how mental health illness affects parents and their children is important, because it leaves lasting impacts on both the parents and the children.

During the covid\_19 pandemic it has magnified the limited resources and supports with health care that the majority of the families I work with should not be without and as a result some children are behind in their health care for events.

Coping with Covid situations in the classroom

I have referred families to other community agencies for help with concerns they have about their children

Las sesiones me ayudaron para proveer materiales para una estudiante afroamericana que no se sentía cómoda con su pelo, gracias a las sesiones tuve bástates ideas y recursos para hacerla sentir que su pelo es hermoso y especial / The sessions helped me to provide materials for an African American student who did not feel comfortable with her hair, thanks to the sessions I had enough ideas and resources to make her feel that her hair is beautiful and special

Tomar estas talleres con Carlos Guerrero nos ayuda a ir adentro de nosotros y reflexionar. Desde el año pasado estoy trabajando con un niño autista por primera vez y estás clases me han ayudado mucho para comprender como ve el mundo el. Como poder ayudarlo a sacar su máximo potencial desde sus limitaciones y mantéenle una comunicación contante con los padres. / Taking these workshops with Carlos Guerrero helps us to go within ourselves and reflect. Since last year I have been working with an autistic child for the first time and these classes have helped me a lot to understand how he sees the world. How to help him get the most out of his limitations and keep him in constant communication with his parents.

Me impacto mucho la resilencia de cómo se puede ayudar a los niños cuando de pequeños viven en familias disfuncionales traumáticas / I am very impressed by the resilience of how children can be helped when they live in traumatic dysfunctional families as a child.

E aprendido a ser más sensible con los demás, cada persona es individual y tiene su manera de pensar y hacer las cosas y hay que respetar. / I have learned to be more sensitive with others, each person is individual and has their own way of thinking and doing things and you have to respect them.

A impactado en mi trabajo a tener más empatía con familias del estado de Oaxaca, escucharlas detenidamente, darles un espacio un tiempo exclusivo cuando ellos tienen preguntas o preocupaciones por sus niños y lo más importante hable con ellos con palabras simples ya que algunas ocasiones son aprendices de Español. / It has impacted my work to have more empathy with families in the state of Oaxaca, listen to them carefully, give them an exclusive space when they have questions or concerns about their children and most importantly talk to them with simple words since sometimes they are learners of Spanish.

Con referente al trabajo con los niños me ah ayudado bastante ya que ahora pongo en práctica lo aprendido y mis dias son mejores. Gracias ah estas reuniones aprendemos unos de otros y mejoramos nuestro trabajo. Y la relación con los niños y padres. / Regarding the work with the children, it has helped me a lot since now I put into practice what I have learned and my days are better. Thanks to these meetings, we learn from each other and improve our work. And the relationship with the children and parents.

Quiero compartír una experiencia con las familias del estado de Oaxaca. Al inicio de la temporada ,planeamos un open house para las familias(media hora para cada familia, a diferente horario), dar ese tiempo exclusivo para cada familia fue de mucho aprendizaje, los padres se sintieron en confianza, escuchados, al igual que yo me sentí en el grupo de capacitación. Pude observar como ellos se miraban emocionados de conocer el lugar donde irían sus hijos,el material con el que juegan , el personal del centro y sobre todo les explicamos el funcionamiento del centro con palabras claras y sencillas para el

entendimiento. Ya que son familias aprendices de Español e Inglés. / I want to share an experience with the families of the state of Oaxaca. At the beginning of the season, we planned an open house for the families (half an hour for each family, at different times), giving that exclusive time to each family was a lot of learning, the parents felt confident, listened to, just like me I felt in the training group. I was able to observe how they looked excited to know the place where their children would go, the material with which they play, the staff of the center and above all we explained the operation of the center with clear and simple words for understanding. Since they are families learning Spanish and English.

Gracias, por compatrir material. / Thank you for sharing material.

Para mi el hecho de reflexionar junto con los padres sobre alguna situación o preocupación, trato de entender su preocupación y logró que nos conectemos, me hace sentir que he logrado algo fabuloso con esta familia. en vez de ir corriendo para hacer y terminar mi trabajo. / For me, reflecting together with the parents on some situation or concern, trying to understand their concern and making us connect, makes me feel that I have achieved something fabulous with this family. instead of rushing to do and finish my work.

Tener mas empatia con las personas al hablar sobre la paternidad, los sentimientos, los valores cada uno tenemos historias diferentes y al escuchar las historias podemos tener herramientas que nos ayuden a hacer cambios en los retos de la vida. / Having more empathy with people when talking about parenthood, feelings, values, each one of us has different stories and by listening to the stories we can have tools that help us make changes in life's challenges.

Ha impactado de manera positiva, me ayuda a reflexionar y tambien prestar ayuda amis familias porque los temas de las secciones son de Mucha ayuda, aprendi que para poder ayudar a otros primero me tengo que ayudar yo misma. Si yo estoy bien puedo ayudar mejor. / It has had a positive impact, it helps me reflect and also help my families because the topics in the sections are very helpful, I learned that in order to help others I first have to help myself. If I'm okay I can help better.

tengo a la familias [name of family removed] ella tiene cincos ninos con diferentes edades estaba en una situacion muy dificil pero se pudo ayudarla con los servicios que ofrecemos pero gracias a las capaitaciones de salud mental que he recibido me ayudado a darle fortaleza a esta familias. / I have the [name of family removed] family, she has five children of different ages, she was in a very difficult situation, but we were able to help her with the services we offer, but thanks to the mental health training I received, it helped me give strength to these families.

intervencion temparana. / early intervention.

Tenemos un niño de tres años que actua como niño de dos y estamos Trabajo do con el y su familia no tiene mucho vocabulario / We have a three-year-old who acts like a two-year-old and we're working with him and his family doesn't have a lot of vocabulary.