

How IECMH Consultants Can Address Opioid Use Among Families in Early Care and Education Settings

What Is Infant and Early Childhood Mental Health Consultation?

Infant and Early Childhood Mental Health Consultation (IECMHC) is a prevention-based service that pairs a mental health consultant with families and adults who work with infants and young children in the different settings where they learn and grow, such as child care, preschool, and the home. IECMH consultants build adults' capacity to strengthen and support the healthy social and emotional development of children.

Background

Throughout America, families with young children are struggling with the effects of the opioid crisis. Nearly 9 million children have a parent who suffers from a substance use disorder.¹ Deaths from overdose are at an all-time high, with more than 72,000 Americans killed by opioid overdoses in 2017.² Young children exposed to parental substance misuse often face social, emotional, physical, and mental health challenges that can have lifelong effects. Parental opioid use is especially traumatic for children who are born exposed to opioids and other substances, as well as those who are removed from their homes or must endure a parent's death.

While professionals in early care and education (ECE) settings have consistently offered support to families in difficult circumstances, the opioid crisis has accelerated the need for updated information, training, and capacity building around serving families affected by substance misuse. The National Head Start Association has called for providing intensified support to families, as programs are serving more children exposed to opioids prenatally or within their homes.³ Head Start and other ECE programs can support families by providing a safe environment for young children, connecting families to substance use treatment services, and helping them access other important services (including housing, medical care, and nutritional assistance or food pantries).

How Can IECMH Consultants Support ECE Programs?

Increasingly, ECE providers have come to rely on IECMH consultants as trusted partners who can provide support, resources, strategies, and community connections. Consultants have expertise in infant and early childhood mental health, parenting, family engagement, and the impact of trauma and behavioral health issues on children. They can help ECE providers understand and support families who may be affected by opioid use. IECMH consultants can also work with ECE providers to enhance their efficacy, job satisfaction, and engagement.⁴

Consultants can assist ECE providers in many ways:

- **Provide information** about the effects of opioid misuse and its potential impact on families and children. The IECMH consultant can share, for example, information about neonatal abstinence syndrome, addiction, related stress and risk factors that often accompany substance use disorders, and, most importantly, effective strategies to support families. The consultant can be a source of hope and can assist staff in

understanding factors that contribute to resilience in children and families. The consultant may also help staff understand how substance misuse may increase risks for domestic violence, and how family disruptions can affect children.

- **Help staff identify signs** that a child may be experiencing trauma or stress, including possible substance misuse in the family. The consultant can help staff understand symptoms and behaviors, such as outbursts, aggression, high activity levels, attention or concentration problems, and distress. The IECMH consultant can provide tips on how to create a safe environment for all the children—those dealing with opioid-related trauma and others.
- **Help staff strategize and overcome discomfort talking with families** about any concerns related to substance use. This includes education about causes of substance use disorders and effects on parenting, families, and functioning. The consultant can also address stigma, bias, and feelings that staff themselves may have based on their own personal or family experiences with drugs and/or alcohol. Staff may need assistance in recognizing their critical role in supporting positive parenting practices even among parents whose capacities are compromised by substance misuse.
- **Assist with navigation** of community systems, services, and referrals, including:
 - family-centered health care providers who can treat parents with substance use disorders
 - community coalitions that provide substance use prevention and treatment resources
 - programs that work with children who have experienced trauma
 - relevant cultural connections in the community (such as Indian Health Services, tribal healers, faith-based supports, and services that honor families’ cultural practices)
- **Help staff support families** as they grapple with parenting and protecting children while dealing with substance use disorders, including while in treatment or waiting for treatment slots to open. This includes helping staff support other family members (e.g., grandparents) and foster parents. Staff may be able to offer encouragement and strategies for maintaining stability and predictability in children’s lives and home environments. Staff play a vital role in the stability and consistency they offer to children in their classroom.
- **Offer ECE providers training** on a trauma-informed approach that includes recognizing the signs and symptoms of trauma in families, staff, and others; integrating knowledge about trauma into policies, procedures, and practices; reducing stigma; and avoiding re-traumatization.⁵ Consultants can also support programs by conducting classroom observations and providing information about how to assist staff with their emotions and reactions to families’ opioid use.
- **Offer reflective supervision to staff** who are dealing with challenges related to their role as a mandated reporter.
- **Explore [resources](#)** for IECMH consultants working in ECE programs, for example:



- [A Head Start on Treating Our Nation's Opioid Epidemic](#) is a report from the National Head Start Association on actions the Head Start community can take to address opioid use.
- The Early Childhood Learning and Knowledge Center's [Substance Misuse](#) webpage offers a variety of resources about substance misuse for staff working in ECE settings, including resources related to serving pregnant women, caring for children exposed to substances, preparing for sensitive conversations with families, and providing trauma-informed support.
- The National Center on Substance Abuse and Child Welfare webpages on [Infants with Prenatal Substance Exposure](#) and [Neonatal Abstinence Syndrome](#) include many resources on caring for infants exposed to substances and best practices for serving pregnant and postpartum women.
- The U.S. Office of Special Education Programs' brief on [Intervention IDEAs for Infants, Toddlers, Children, and Youth Impacted by Opioids](#) provides an overview of interventions that can improve outcomes for infants, toddlers, and older children affected by opioid exposure.
- The [HealthReach](#) database includes easy-to-read resources (documents, videos, and audio files in English and Spanish) for families on opioids, opioid addiction, and opioid treatment.
- [Opioid Education Resources](#) is a collection of tools intended for schools.
- [Operation Prevention](#) offers tools for classrooms and parents related to opioid misuse education and prevention.

¹ American Academy of Pediatrics. (2018). *America's Opioid Crisis: The Unseen Impact on Children* [Factsheet]. Retrieved from https://www.aap.org/en-us/advocacy-and-policy/federal-advocacy/Documents/Opioid-StateFactsheets/opioid_fs_united_states.pdf

² Ahmad, F. B., Rossen, L. M., Spencer, M. R., Warner, M., & Sutton, P. (2018). *Provisional drug overdose death counts*. Hyattsville, MD: National Center for Health Statistics. Retrieved from <https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm>

³ National Head Start Association. (2018, July). *A Head Start on our Nation's Opioid Epidemic: Cutting Off the Cycle of Substance Misuse, Addiction, and Accompanying Behavioral Outcomes Using Proven Programs*. Alexandria, VA: Author.

⁴ Vivrette, R. (n.d.). *Intervention and Policy Considerations for Young Children Affected by Substance Use and Their Families*. Baltimore, MD: University of Maryland School of Medicine, Division of Child and Adolescent Psychiatry.

⁵ Substance Abuse and Mental Health Services Administration. (2014, Spring). Trauma-Informed Care. *SAMHSA News*, 22(2). Retrieved from https://www.samhsa.gov/samhsaNewsLetter/Volume_22_Number_2/trauma_tip/index.html

