

To: All Early Intervention contract managers and FCFC coordinators
From: Nathan DeDino
Date: May 7, 2021
Subject: Early Intervention Program Updates, #2110

MESSAGE FROM THE PART C COORDINATOR

Many families we serve are at an elevated risk for stress and other mental health concerns. The COVID-19 pandemic has increased these concerns for some families. To support you in your work with families during this difficult time, DODD has written an article and provided a listing of resources that accompanies this biweekly. We encourage you to take a look and consider how the information can support you in your work.

I always invite your feedback. Do not hesitate to contact me at nathan.dedino@dodd.ohio.gov. I look forward to hearing from you.

PROGRAM UPDATES

SFY21 45-Day Baseline

Activities related to the 45-Day baseline analysis are wrapping up. Final analyses are in progress and results memos will be sent May 11.

SFY21 Transition Baseline

Activities related to the SFY21 Transition baseline analysis are underway. Data for the baseline analysis were extracted April 2. DODD sent data inquiries to applicable counties April 14, and they were due back to DODD by May 5. Please contact Melissa Courts at melissa.courts@dodd.ohio.gov if you have any questions.

ODJFS CCAC Parent Representative

The Ohio Department of Job and Family Services (ODJFS) Child Care Advisory Council has two parent representative vacancies. The council meets in Columbus quarterly on the fourth Thursday of January, April, July, and October. Information about the council can be found on the child care website <http://jfs.ohio.gov/cdc/advisorycouncil.stm>.

To apply for the vacancy, submit a brief biography and resume to Angela.Kaiser@jfs.ohio.gov no later than May 24.

Family Engagement Resources Survey

The Ohio Inclusion State Leadership Team is comprised of individuals who are family members with children who have disabilities and professionals who work for state agencies or organizations committed to strengthening the inclusion of children with disabilities wherever children learn, play, and live. One of the team's objectives is to create a family engagement resource guide for families, caregivers, and professionals. This resource guide will offer reliable, relevant, and consistent materials about how to engage, build, and support relationships between families and professionals. The goal of the guide is to equip all adults with the information and resources needed to fully support each child's learning trajectory.

You are invited to share resources that you find valuable by taking part in this voluntary, anonymous survey. The information collected by this survey will be utilized for resource guide planning purposes only. You can access the survey here:

<https://www.surveymonkey.com/r/T8JGHG3>

RESOURCES AND TRAINING OPPORTUNITIES

Transition: Best Practices Webinar: Clarification

Please see the following clarifications italicized below about the June Transition webinar.

Join Karen Kincaid and Shelly Palumbo, EI Program Consultants, on June 29 from 8:30-10:00am. *This webinar will focus on how teams can support children/families during the transition process.* The webinar will address best practices for supporting families throughout transition. *The targeted audience is EI Service Coordinators, EISC Supervisors, EI Team Supervisor, EI Team (DS, OT, SLP, PT, Vision, Hearing, ECMH, Nutrition).*

CPDUs will be provided for EI service coordinators, service coordinator supervisors and developmental specialists. Please note this is a reschedule from the webinar originally planned for Jun 15.

You can register here:

<https://register.gotowebinar.com/register/1726448073649277711>

If interested in foundational information, please access the link to the “Transition: Nuts and Bolts” webinar here:

<https://attendee.gotowebinar.com/recording/3381854086805955843>

If you have any questions, please contact Lori Myers at lori.e.myers@dodd.ohio.gov.

Evidence-Based Coaching Training

The Evidence-Based Practice Coaching training is now available on MyLearning (EI-115). Evidence-based coaching is one element of Ohio's efforts to ensure that Developmental Specialists serving infants, toddlers, and their families are well-prepared to provide the best possible services to families served in Early Intervention. This training is required for Ohio developmental specialists and early intervention supervisors holding a valid 5 or 10-year certification who are interested in providing coaching for 1-year certified developmental specialists.



How well do we really know the parents we work with?

This is NOT a guidance document but, rather, an article about how to support families who are struggling with their mental well-being and in crisis. Parents of a child with a disability are at a heightened risk for mental health concerns, and the COVID-19 pandemic has increased these challenges for many people. This article is in response to requests for information and provides suggestions and resources for EI team members when they encounter a situation in which a parent has shared that they are thinking about harming themselves. This past year has been one of unprecedented stress on our families. We do not expect you to be a mental health expert, but to know what to do should the need arise.



www.ohioearlyintervention.org



How well do we really know the parents we work with?

In the article, *The Real Confessions of Special Needs Parents*, Katie Swenson asked parents of children with special needs to confide in her. She asked for their secrets, confessions, and their deepest, darkest thoughts. A total of 225 parents responded and their answers are gut wrenching. Parents' responses were submitted prior to the pandemic. Here are a few:

"I'm scared I don't love my son enough. Through the trauma of the diagnosis and the daily difficulties we face I sometimes fantasize about running away. I wish my life was different."

"I'm addicted to over the counter sleeping pills. My anxiety is so high over not sleeping that I have to take a sleeping pill just to fall asleep. And I don't even care."

"I have to message this one because it is so dark to me and the thought scares me and breaks my heart simultaneously. I fear my son will require constant care for his whole life and I'm scared one day I may resent him for it."

"I fake everything. I am always smiling. I am always laughing. People say I am the strongest woman they know. LIES. I am heartbroken. I love my kids. I love my husband. But I am a different person. And no one understands. I feel like a shell of the woman I used to be."

"I relive my pregnancies trying to figure out what I did wrong."

"In the past I have contemplated suicide."

COVID-19 has only added to the everyday stressors parents are experiencing. It has increased the financial burdens on families, heightened their isolation, added home schooling to their daily schedule, and increased the fear and anxiety over keeping their family healthy and safe. Dr. Julie Gentile, Professor of Psychiatry and Chair at Wright State University, states that there has been an increase in mental health conditions across all groups associated with COVID-19. Fear and anxiety about this new disease and what could happen can be overwhelming in adults and in children.

Many individuals experienced:

- worsened mental health and chronic physical health outcomes;
- difficulty sleeping or concentrating;
- changes in sleep or eating patterns;
- increased substance use;
- depression;
- anxiety;
- and suicidal ideation.

Some of the stressors that put people at higher risk include isolation, loneliness, a lack of structure or routine, financial stress, and various forms of violence and physical, emotional, mental, and sexual abuse.

In July 2020, The Columbus Dispatch ran an article that stated that 37 of our 88 counties have surpassed the national suicide rate. In November, an Ohio Early Intervention program had two parents who attempted to commit suicide. This led staff to add questions about depression to their check-ins with families. After questions around depression were made a part of their check-in, they had a parent disclose that they were having suicidal thoughts, which allowed them to reach out immediately and get the parent help. The EI supervisor shared that the response from parents about the questions related to depression and their emotional status has been overwhelmingly positive. Parents have been very open about how they are feeling and if they are struggling.

How can we help?

- Care: Ask questions about their well-being and self-care.
- Listen: Actively listen to what parent is sharing or not sharing.
- Respond: How can EI help? What supports and resources do they need?

Care: Questions we can ask our parents to dive deeper into their emotional well-being during family directed assessments, check-ins and intervention visits:

- How are you feeling today, really? Physically and mentally.
- What is taking up most of your thoughts right now?
- What have you been doing for exercise or fun?
- What did you do today that made you feel good?
- What are you going to engage in today that will bring you joy?
- What is something you can do today that would be good for you?
- What is something you are looking forward to in the next few days?
- What are you grateful for right now?
- What was your last full meal?
- Have you been drinking enough water?
- How have you been sleeping?
- Have you thought about hurting yourself or others?
- Are you feeling depressed?
 - If yes, have you been having suicidal thoughts?
 - If yes, what does that look like?
 - If no, ask about plans over the next week.

Listen: What to listen or watch for (Red flags):

There are signs that you can listen or watch for that may indicate a parent is suicidal. One is a change in behavior or the presence of entirely new behaviors, especially if concern is a new or changed behavior related to a painful event, loss, or change. Most people who take their lives exhibit one or more warning signs, either through what they say or what they do.

People considering suicide often show one or more of the following signs:

- Talk about:
 - Killing themselves
 - Feeling hopeless
 - Having no reason to live
 - Being a burden to others
 - Feeling trapped
 - Unbearable pain
- Exhibit high-risk behaviors, such as:
 - Increased use of alcohol or drugs
 - Looking for a way to end their lives, such as searching online for methods
 - Withdrawing from activities
 - Isolating from family and friends
 - Sleeping too much or too little
 - Visiting or calling people to say goodbye
 - Giving away prized possessions
 - Aggression
 - Fatigue
- Display one or more of the following moods:
 - Depression
 - Anxiety
 - Loss of interest
 - Irritability
 - Humiliation/Shame
 - Agitation/Anger
 - Relief/Sudden Improvement

Care: How to help a parent who is considering suicide:

- Ask “Are you thinking about suicide?” If you suspect a parent is considering suicide, it is okay to ask them directly. Make sure to use clear language so there is no confusion as to what you are asking.
- Other ways to ask:
 - Do you ever feel so bad that you think about suicide?
 - Do you have a plan to take your own life?
 - Have you thought about when you might do it (today, tomorrow, next week)?
- Show the parent you care. Many people who are suicidal feel as if they are a burden to those around them. This feeling is called perceived burdensomeness and prevents them from reaching out for help. Showing you care may help a parent share how they are feeling.
- Listen with zero judgement. When a parent is suicidal, they may be afraid to tell you how they are feeling because they fear being judged. Take some time and really listen when you think a parent is in crisis and allow them to speak freely without interruption.
- Refer them to appropriate resources. Encourage the parent to get in touch with a therapist, a family doctor, a friend, a spiritual leader, a family member, or the National Suicide Prevention Lifeline. Do not leave them alone. Call a suicide prevention number with your parent and provide support by staying on the line (phone or virtually) and support them while they make the call and schedule their appointment. You may need to reach out to your supervisor or another team member to assist you so that you can continue to speak with the parent and communicate via text while the other team member assists with making calls behind the scenes to support both you and the parent. Stay on the call until the parent receives the support they need and there is a plan in place.
- Do not be afraid to check-in. After the initial referrals have been made and completed, continue to check in on your parent, as necessary. A resource-based family outcome to support the family can be developed, so that needed services can be coordinated.

When working with parents, we must be asking ourselves:

- How well do we know our parents?
- What questions should we be asking during check ins?
- What red flags should we be looking and listening for?
- What should we do if a parent shares that they are depressed or are contemplating suicide?
- What resources are available in our community?
- What is our agency plan to support staff and families?
- What support is needed as an EISC or provider to be more comfortable talking with families about sensitive topics such as depression, suicide, and addiction?

Respond: What resources are available if a parent is in crisis:

Aunt Bertha:

<https://www.auntbertha.com/>

This is a network linking up non-profits and social programs with people who need them. Resources include help with paying for groceries, healthcare, housing, utilities, or help finding a job or getting legal aid.

Crisis Text Line: Text the keyword "4hope" to 741741

<https://www.crisistextline.org/text-us/>

Crisis Text Line is here for any crisis. A live, trained Crisis Counselor receives the text and responds, all from a secure online platform. To be connected to a trained Crisis Counselor within 5 minutes, text "4hope" to 741741.

- The first two responses are automated. They tell you that you are being connected with a Crisis Counselor and invite you to share a bit more. The Crisis Counselor is a trained volunteer, not a professional. They can provide support, but not medical advice. It usually takes less than five minutes to connect you with a Crisis Counselor. (It may take longer during high-traffic times).

- When you have reached a Crisis Counselor, they will introduce themselves, reflect on what you have said, and invite you to share at your own pace.
- You will then text back and forth with the Crisis Counselor. You never have to share anything you do not want to. The Crisis Counselor will help you sort through your feelings by asking questions, empathizing, and actively listening.
- The conversation typically ends when you and the Crisis Counselor both feel comfortable deciding that you are in a “cool,” safe place.
- The goal of any conversation is to get you to a calm, safe place. Sometimes that means providing you with a referral to further help, and sometimes it just means being there and listening. A conversation usually lasts anywhere from 15-45 minutes.

Early Childhood Mental Health Consultant (ECMH):

The ECMH consultant who attends your EI team meetings can assist you in locating appropriate resources. Additional information about Ohio’s ECMH initiative, including printable materials, is available at <https://mha.ohio.gov/Schools-and-Communities/Educators/Early-Childhood-Mental-Health>.

Local Resources:

Do you have a local crisis center? What counseling agencies are available in your community? Community Resource Directories by county are available here: https://www.escneo.org/Resources_HMG.aspx.

My3:

<https://my3app.org/>

With the MY3 app, you define your network and your plan to stay safe. With MY3 you can be prepared to help yourself and reach out to others when you are having thoughts of suicide. MY3 is available in the [Apple App Store](#) and [Google Play](#), free of charge.

National Alliance of the Mentally Ill: 1-800-950-6264 Toll-free Confidential hotline operating Mon.-Fri., 10 am - 6 pm (EST). Trained volunteers provide information, referrals, and support to anyone with questions about mental illness

National Suicide Hotline: 1-800-SUICIDE (784-2433)
24-hour, confidential hotline, connects you to a trained counselor at the nearest suicide crisis center.

National Suicide Prevention Lifeline Number: 1-800-273-8255
The National Suicide Prevention Lifeline is free, confidential, and available 24/7. Skilled crisis workers answer incoming calls and will listen, provide support, and offer helpful resources to those in need.

Ohio CareLine: 1-800-720-9616
The Ohio CareLine is a toll-free emotional support call service created by the Ohio Department of Mental Health and Addiction Services and administered in community settings. Behavioral health professionals staff the CareLine 24 hours a day, 7 days/week. They offer confidential support in times of personal or family crisis when individuals may be struggling to cope with challenges (stress, anxiety, fear, sadness, loneliness, etc.) in their lives. When callers need additional services, they will receive assistance and connection to local providers.

The Disaster Distress helpline

Helps people experiencing a crisis, such as this pandemic. Call 1-800-985-5990 or text TalkWithUs to 66746.

Additional Resources:

Mental Wellness with Dr. Gentile: Tips for Suicide Prevention

<https://dodd.ohio.gov/wps/portal/gov/dodd/about-us/mental-wellness/prevention>

DODD Check-In. Make a Difference

https://dodd.ohio.gov/wps/wcm/connect/gov/3e7e2719-8371-4e28-b90b-408852bc809e/Check+in+with+Others.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_M1HGGIK0N0JO00QO9DDDDM3000-3e7e2719-8371-4e28-b90b-408852bc809e-nqMzODI

Substance Abuse and Mental Health Services Administration (SAMHSA)

<https://findtreatment.samhsa.gov/>

American Foundation for Suicide Perfection: What to do when someone is at risk

<https://afsp.org/what-to-do-when-someone-is-at-risk>

Ohio Suicide Prevention Foundation

www.ohiospf.org

The OSPF works to raise awareness and promote suicide prevention as a public health issue and advance evidence-based awareness, intervention and methodology strategies which will support all Ohio-based suicide prevention efforts.

National Alliance on Mental Illness (NAMI)

www.namiohio.org

A grassroots organization for people with mental illness and their families. NAMI has affiliates in every state and in more than 1,100 local communities across the country. NAMI on Campus clubs are student-run, student-led organizations that provide mental health support, education, and advocacy in a university or college setting.

Citations:

"The Real Confessions of Special Needs Parents." Finding Cooper's Voice, 10 June 2018, www.findingcoopersvoice.com/2018/06/10/real-confessions-special-needs-parents/

<https://dodd.ohio.gov/wps/portal/gov/dodd/about-us/mental-wellness/Mental+Wellness-Covid-19>

Anne Saker, (2020 July 6) 'Suicide in Ohio: 37 of 88 counties above US average, coronavirus could cause spike' Megan Henry, The Columbus Dispatch, <https://www.dispatch.com/story/news/healthcare/2020/07/06/suicide-in-ohio-37-of-88-counties-above-us-average-coronavirus-could-cause-spike/42105689/>

(2020 March 24) 'Just checking: 10 minutes, 10 questions, The best way to check in with people you love, no matter where they are' IDONTMIND Mental Health America <https://idontmind.com/journal/just-checking-in-ten-minutes-ten-questions>

<https://mha.ohio.gov/Families-Children-and-Adults/Suicide-Prevention>

Ohio Mental Health Addiction Services (2020 April 22) Ohio Launches Toll-Free 'COVID CareLine' to Provide Emotional Support for Ohioans Amid Coronavirus Pandemic: 1-800-720-9696 [Press Release]

<https://mha.ohio.gov/Portals/0/assets/ResearchersAndMedia/News%20and%20Events/Press%20Releases/2020/COVIDCarelineFIN.pdf?ver=2020-04-22-100155-770>