



2020 Pediatric Brain Health Summit | Agenda

November 5, 2020 | Day 1

- 11:00 AM - 11:30 AM **Welcome and overview**
- 11:30 AM - 1:00 PM **Pediatric Brain Health**
Jack Shonkoff, MD
Director & Professor of Pediatrics
Center on the Developing Child at Harvard University
Harvard Medical School and Boston Children's Hospital
- 1:00 PM - 1:50 PM **Effective State-Level Policies to Strengthen the Early Years ***
Cynthia Osborne, PhD
Associate Dean for Academic Strategies
Director, Child and Family Research Partnership
Director, Prenatal-to-Three Policy Impact Center
LBJ School of Public Affairs
The University of Texas at Austin
- 1:50 PM - 2:00 PM **Closing**

November 6, 2020 | Day 2

- 11:00 AM - 12:00 PM **Bridging Science to Practice**
- | | |
|---|---|
| Sasha Rasco, MPA
Associate Commissioner
Prevention and Early Intervention (PEI)
Division
Department of Family & Protective
Services | David Lakey, MD
Vice Chancellor for Health Affairs &
Chief Medical Officer
The University of Texas System
Administration |
| Jeremy Triplett
Maternal and Child Health Director
Texas Department of State Health
Services | Katherine Butterwick
Program Officer
Episcopal Health Foundation |
| | Kimberly McPherson, MPA
Senior Program Officer
St. David's Foundation |

12:00 PM - 1:00 PM

Panel: Big and Little Steps to Support Families in the Office

Valerie Smith, MD
Pediatrician
Saint Paul Children's Clinic

Marjan Linnell, MD
Pediatrician
Austin Regional Clinic, Plum Creek

Anu Partap, MD
Director
The Center for Prevention of Child
Abuse and Neglect at Cooks Children's
Medical Center

1:00 PM - 2:00 PM

Introduction to the Child Mental Health Care Consortium

Luanne Southern
Executive Director
Texas Child Mental Health Care
Consortium, Office of Health Affairs

Laurel Williams, DO
Chief
Child and Adolescent Psychiatry
Texas Children's Hospital, Baylor
College of Medicine

Continuing Medical Education:

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Texas Medical Association (TMA) through the joint providership of The Texas Department of State Health Services, Continuing Education Service, The University of Texas System, Texas Department of Family and Protective Services, St. David's Foundation, Episcopal Health Foundation, Casey Family Programs, and UT Health Science Center at Tyler. The Texas Department of State Health Services, Continuing Education Service is accredited by TMA to provide continuing medical education for physicians.

The Texas Department of State Health Services, Continuing Education Service designates this live activity for a maximum of 4.25 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Continuing Nursing Education:

The Texas Department of State Health Services, Continuing Education Service is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

The Texas Department of State Health Services, Continuing Education Service has awarded 4.25 contact hours of Continuing Nursing Education.

Social Workers:

The Texas Department of State Health Services, Continuing Education Service under sponsor number CS3065 has been approved by the Texas State Board of Social Worker Examiners (<https://dshs.texas.gov/socialwork>) to offer continuing education contact hours to social workers. The approved status of The Texas Department of State Health Services, Continuing Education Service expires annually on December 31. The Texas Department of State Health Services, Continuing Education Service has awarded 4.25 contact hours of Continuing Social Work Education.

Certificate of Attendance:

The Texas Department of State Health Services, Continuing Education Service has designated 4.25 hours for attendance.



2020 Pediatric Brain Health Summit | Speaker Biographies



**Katherine
Butterwick**

Katherine Butterwick is a program officer at the Episcopal Health Foundation. She serves on several community coalitions including Houston's Infant Toddler Coalition, Maternal Health Initiative, and Non-Profit Leadership Collaborative. She also serves as an internal advisory for inter-divisional project groups focused on early childhood brain development and health equity. Ms. Butterwick has held positions in a variety of philanthropic and non-profit organizations in the Houston area.



David Lakey, MD

David Lakey, MD is Vice Chancellor for Health Affairs and Chief Medical Officer at The University of Texas System. He also serves as Senior Advisor to the President and Professor of Medicine at The University of Texas Health Science Center at Tyler. He serves as the executive sponsor for the Texas Collaborative for Healthy Mothers and Babies, the executive sponsor for the Texas Health Improvement Network, and as the presiding officer of the Texas Child Mental Health Care Consortium. Prior to being appointed to The University of Texas System and The University of Texas Health Science Center at Tyler, Dr. Lakey was the Commissioner of the Texas Department of State Health Services, one of the largest state agencies in Texas.



Marjan Linndel, MD

Marjan Linndel, MD is a pediatrician at the Austin Regional Clinic. She is a member of the ARC's taskforce bringing Hunger Vital Signs Screening to the clinics and was a member of the Central Texas Pediatric Trauma Learning Collaborative. She also serves on the Texas Pediatric Society's Committee on Nutrition & Health.



**Dorothy Mandell,
PhD**

Dorothy Mandell, PhD is an Associate Professor at University of Texas Health Science Center at Tyler and UT System Population Health. Her research has spanned multiple topics in maternal and child health including understanding the effects of a variety of perinatal and post-natal factors on later development. She has also conducted analyses and research on a variety of public health topics, including work that has supported the Maternal Mortality and Morbidity Task Force, The Texas Collaborative for Health Mothers and Babies, and the strategic plan to align prevention resources between the Department of Family Protective Services and the Department of State Health Services in Texas. She is the primary investigator on several grants focused on improving health and well-being for families with young children.



Kimberly McPherson

Kimberly McPherson is Senior Program Officer at the St. David's Foundation. She develops strategies for programs and grant making in the areas of Childhood Adversity and Housing Wrap Around Services. Prior to joining the Foundation in 2011, Ms. McPherson held positions in the mental health and health policy fields at Health Management Associates, a national consulting firm; the Texas Health and Human Services Commission, which administers Texas' Medicaid and CHIP services; Mental Health America, a state-wide advocacy organization; and Mental Health Network, a managed care organization.



**Cynthia Osborne,
PhD**

KEYNOTE

Cynthia Osborne, PhD is the associate dean for academic strategies and director of the Center for Health and Social Policy (CHASP) at the LBJ School. She is also the founder and director of the Child and Family Research Partnership (CFRP), a group that conducts rigorous research on policy issues related to young children, adolescents and their parents. She most recently launched the new national Prenatal-to-3 Policy Impact Center at CFRP, a resource for state leaders for the evidence on policies that strengthen outcomes for infants and toddlers.

Dr. Osborne has extensive experience leading long-term evaluations of state and national programs, with the aim of helping organizations understand what works, and how to ensure sustainable implementation of effective policies. Her work includes evaluations of one of the largest home visiting programs in the country (Texas) and many critical state-level child welfare and child support programs. She previously was director of the Project on Education Effectiveness and Quality, an initiative that measured state educator preparation programs' influence on student achievement.



**Anu Partap, MD,
MPH,**

Anu Partap, MD, MPH, has been a pediatrician for over 20 years. She began her career at Phoenix Children's Hospital/ Maricopa Medical Center where she completed her pediatric residency and chief residency. During her time in Arizona she practiced in safety net hospitals and clinics, school-based clinics, Native American health clinics and co-launched a private practice and charity clinic. She also served on a variety of appointed governmental, advocacy, and professional society commissions, committees, and advisory groups. Dr. Partap joined The University of Texas Southwestern Medical Center in 2009 to focus her work on improving health outcomes of children affected by abuse and neglect as Medical Director of the Foster Care Clinics at Children's Medical Center in DFW. From 2009-2018, she expanded and redesigned foster care clinical and medical education services with the launch of the state's first multipronged integrated foster care health center, the Rees-Jones Center for Foster Care Excellence. She served as consultant to Health and Human Services Commission on foster care health policy, including design and implementation of the state's new medical evaluation foster care requirements in 2017. In 2018, she returned to prevention work and became the Physician Director of the Center for Prevention of Child Abuse and Neglect at Cook Children's. There she works with a team on identifying effective programs and policies to reduce child abuse in North Texas.



Sasha Rasco

Sasha Rasco is associate commissioner for prevention and early intervention at the Department of Family and Protective Services. Sasha's career began in early childhood education as an infant caregiver in an accredited childcare center. After completing graduate school and a Governor's Policy Fellowship with the Governor of Maryland's Office of Children, Youth and Families, Sasha worked for 14 years in the Child Care Licensing division of DFPS, the last two years as assistant commissioner. In 2009 the Texas Licensed Child Care Association recognized Sasha as an early care and education champion, and in 2010 the Texas Alliance of Child and Family Services honored Sasha as DFPS employee of the year. Sasha also worked for two years developing programs and projects at Texas Department of Assistive and Rehabilitative Services' Early Childhood Intervention program. Since 2013 Sasha has led the growth of the Prevention and Early Intervention division at DFPS.



**Jack P. Shonkoff,
M.D.**

KEYNOTE

Jack P. Shonkoff, M.D., is the Julius B. Richmond FAMRI Professor of Child Health and Development at the Harvard T.H. Chan School of Public Health and Harvard Graduate School of Education; Professor of Pediatrics at Harvard Medical School and Boston Children's Hospital, and Research Staff at Massachusetts General Hospital; and Director of the university-wide Center on the Developing Child at Harvard. He currently chairs the National Scientific Council on the Developing Child, whose mission is to bring credible science to bear on public policy affecting children and families, and The JPB Research Network on Toxic Stress, which is developing new measures of stress effects and resilience in young children.

Under the auspices of the National Academy of Sciences, Dr. Shonkoff has served as Chair of the Board on Children, Youth, and Families and led a blue-ribbon committee that produced the landmark report, *From Neurons to Neighborhoods: The Science of Early Childhood Development*. He has received multiple honors, including elected membership to the National Academy of Medicine, the C. Anderson Aldrich Award in Child Development from the American Academy of Pediatrics, the Distinguished Contributions to Social Policy Award from the Society for Research in Child Development, and The LEGO Prize. He has authored more than 150 publications and has been a visiting professor or delivered named lectureships at more than 35 universities in the United States and around the world.



**Valerie Smith, MD,
MPH**

Valerie Smith, MD, MPH is a pediatrician at St Paul's clinic in Tyler, TX which is focused on providing care and support to economically disadvantaged children and children in foster care. She is the founder and Chair of the Smith County Food Security Council. She is an Executive Board Member of the Texas Pediatric Society and currently chairs the Committee on Foster Care. In addition, she serves on a variety of committees for American Academy of Pediatrics and the Texas Medical Association.



Luanne Southern

Luanne Southern works at the University of Texas System as the Executive Director for the Texas Child Mental Health Care Consortium, which was created by the 86th Texas legislature in Senate Bill 11 to address gaps in mental health care for children and adolescents in Texas. Luanne most recently provided strategic consulting services to the Texas child welfare system, as a Senior Director for Casey Family Programs, a national operating foundation focused on improving - and ultimately preventing the need for - foster care. She previously served as Deputy Commissioner for the Texas Department of State Health Services. Luanne has many years of national, state and local experience in health and human services, with an emphasis on policies and practices that address the behavioral health needs of children, youth and families.



Jeremy Triplett

Jeremy Triplett is the Maternal and Child Health (MCH) Section Director in the Family and Community Health Division at the Department of State Health Services. Mr. Triplett was named the Title V Maternal and Child Health Unit Director in August 2016 and became the Title V Director in Texas in November 2017. He has over 20 years of experience working with the State of Texas. He previously worked as the Operations Manager for the Purchased Health Services Unit, overseeing the daily operations for the Children With Special Needs, Kidney Health Care, and Hemophilia Assistance programs, and for the Texas Workforce Commission, where he processed economic data for the Bureau of Labor Statistics.



**Laurel L. Williams,
D.O.**

Laurel L. Williams, D.O. is Associate Professor and Chair in the Menninger Department of Psychiatry and Behavioral Sciences at Baylor College of Medicine. She is also the Director of Residency Training for Child and Adolescent Psychiatry Fellowship. Dr. Williams has expertise in working with youth who self-injure as well as have chronic suicidality in addition to working with adolescents who are pregnant or post-partum and suffering with a mental health disorder. She is working within the Harris Health System to develop protocols for family centered mental health care. She also serves on the executive committee for the Texas Child Mental Health Care Consortium and is the Medical Director of the initiative's Centralized Operations Support Hub (COSH).



Family Screening Survey










Name: _____

Phone Number: _____

Preferred Language: _____

Best time to call: _____

Email: _____

		YES/NO
	Within the past 12 months, did you worry about running out of food before you got money to buy more?	<input type="checkbox"/> Y <input type="checkbox"/> N
	In the past 12 months, has the utility company shut off your service for not paying your bills?	<input type="checkbox"/> Y <input type="checkbox"/> N
	In the last 6 months, have you ever had to go without health care because you didn't have a way to get there?	<input type="checkbox"/> Y <input type="checkbox"/> N
	Are you worried or concerned that in the next 2 months you may not have stable housing?	<input type="checkbox"/> Y <input type="checkbox"/> N
	Do you have problems getting to work/school due to childcare? (Leave blank if you do not have children)	<input type="checkbox"/> Y <input type="checkbox"/> N
	Do you need help with getting more education? (ESL, GED, etc.)	<input type="checkbox"/> Y <input type="checkbox"/> N
	Do you need help finding a local career and/or job training program?	<input type="checkbox"/> Y <input type="checkbox"/> N
	If you checked YES to any boxes above, would you like to receive assistance with any of these needs?	<input type="checkbox"/> Y <input type="checkbox"/> N
	Are any of your needs urgent? For example: I don't have food tonight; I don't have a place to sleep tonight.	<input type="checkbox"/> Y <input type="checkbox"/> N

FOR STAFF USE ONLY:

____ Resource sheet given
 ____ Referral to Social Worker

Services provided by
 ____ Clothes Closet
 ____ Food Pantry
 ____ Benefits Assistance



Medical

Dental

Administration

Encuesta de selección familiar










Nombre: _____

Número de Teléfono: _____

Lenguaje Preferido: _____

Mejor Horario para Llamar: _____

Email: _____

		SÍ/NO
	En los últimos 12 meses, ¿se preocupó por quedarse sin alimentos antes de obtener dinero para comprar más?	<input type="checkbox"/> S <input type="checkbox"/> N
	En los últimos 12 meses, ¿la compañía de servicios públicos ha cerrado su servicio por no pagar sus facturas?	<input type="checkbox"/> S <input type="checkbox"/> N
	En los últimos 6 meses, ¿alguna vez tuvo que dejar de recibir atención médica porque no tenía manera de llegar?	<input type="checkbox"/> S <input type="checkbox"/> N
	¿Le preocupa que en los próximos 2 meses no tenga una vivienda estable?	<input type="checkbox"/> S <input type="checkbox"/> N
	¿Tiene problemas para llegar al trabajo o la escuela debido al cuidado de niños? (Deje en blanco si no tiene hijos)	<input type="checkbox"/> S <input type="checkbox"/> N
	¿Necesita ayuda para obtener más educación? (ESL, GED, etc.)	<input type="checkbox"/> S <input type="checkbox"/> N
	¿Necesita ayuda para encontrar una carrera local y / o un programa de capacitación laboral?	<input type="checkbox"/> S <input type="checkbox"/> N
	Si marcó Sí en alguna de las casillas anteriores, ¿le gustaría recibir ayuda con alguna de estas necesidades?	<input type="checkbox"/> S <input type="checkbox"/> N
	¿Alguna de sus necesidades es urgente? Por ejemplo: no tengo comida esta noche, no tengo dónde dormir esta noche.	<input type="checkbox"/> S <input type="checkbox"/> N

FOR STAFF USE ONLY:

_____ Resource sheet given
 _____ Referral to Social Worker

Services provided by
 _____ Clothes Closet
 _____ Food Pantry
 _____ Benefits Assistance



PARENTING IS HARD. ASK FOR HELP.

Tips to manage COVID-19 stress

Right now, things may feel stressful and uncertain for parents. Remember, we are all in this together! Here are some tips to help you still feel connected and supported.

Find ways to cope with COVID-19 social distancing guidelines

More people are staying home and you may not be doing your usual activities because of the new restrictions. Social distancing doesn't mean you're alone.

- Stay in regular contact with family, friends and neighbors by phone, social media or other technology. Even a few minutes of conversation a day is important.
- Take part in healthy activities that relieve stress. Go outside, take a walk, read or tell stories. Find ways to find joy and make connections.

Reduce the pressures of parenting

You may feel like you have a lot more on your to-do list, especially with kids at home.

- Feel good about what is going well and celebrate the small things! Pat yourself on the back for a decent meal, a funny joke or just quiet moments.
- Build a new routine at home. Remember to include breaks for everyone to take care of themselves with downtime, playtime and exercise.
- Speak up when you need help and offer support to others when you can.

Reach out for help

Sometimes the pressure can be too much. Reaching out for help is important for you and your family. Following are **24-hour**, free help lines for different needs.

- For confidential support when you need help with the stresses of parenting, contact Child Help:
 - Call or text 1-800-4-A-Child (1-800-422-4453) or live chat at childhelp.org
- For help with teen-specific concerns:
 - Call Texas Youth Helpline: 800-989-6884 or text 512-872-5777
- For help with parenting tips, local resources and to learn about family fun:
 - Visit helpandhope.org
- For mental health support and crisis care, contact iCARE:
 - Call or text iCARE at 817-335-3022
- For access to services through a social service hotline:
 - Dial 2-1-1 or 877-541-7905 or visit 211texas.org

For all other questions/updates on COVID-19, visit cdc.gov.





SER PADRES NO ES FÁCIL. PIDE AYUDA.

Consejos para sobrellevar el estrés ante el COVID-19

En este momento, las cosas pueden ser estresantes y inciertas para los padres. Recuerda que estamos todos juntos en esto. Estos son algunos consejos para ayudarte a que te sientas conectado y respaldado.

Encuentra formas de adaptarte a las pautas de distanciamiento social por el COVID-19

Más personas se quedan en casa y es posible que no estés haciendo tus actividades habituales debido a las nuevas restricciones. El distanciamiento social no significa que estás solo.

- Mantente en contacto con tu familia, amigos y vecinos de manera regular a través del teléfono, las redes sociales u otros medios tecnológicos. Incluso unos pocos minutos de conversación al día son importantes.
- Participa en actividades saludables que alivien el estrés. Sal, camina, lee o cuenta historias. Encuentra formas de alegrarte y conectarte.

Reduce las presiones del estrés parental

Puede parecer que tienes muchas más cosas en tu lista de pendientes, en especial con los niños en casa.

- ¡Alégrate por lo que está bien y celebra las pequeñas cosas! Felicítate por una buena comida, una broma divertida o por los momentos simplemente de tranquilidad.
- Construye una nueva rutina en casa. Recuerda incluir pausas para que cada uno se ocupe de sí mismo con descansos, juegos y ejercicio.
- Solicite ayuda cuando lo necesite y ofrece apoyo a los demás cuando puedas.

Conseguir ayuda

Algunas veces, la presión puede ser demasiada. Conseguir ayuda es importante para ti y tu familia. A continuación, encontrarás líneas de ayuda gratuitas las 24 horas para diferentes necesidades.

- Para obtener apoyo confidencial cuando necesites ayuda debido a estrés parental, comunícate con Child Help:
 - Llama o envía un mensaje de texto al 1-800-4-A-Child (1-800-422-4453) o al chat en vivo en childhelp.org
- Para obtener ayuda con cuestiones específicas de adolescentes:
 - Llama a Texas Youth Helpline: 800-989-6884 o envía un mensaje de texto al 512-872-5777
- Para acceder a consejos para padres, recursos locales y aprender sobre la diversión familiar:
 - Visita helpandhope.org
- Para soporte de salud mental y atención de crisis, contacta a iCARE:
 - Llama o envía un mensaje de texto con la palabra iCARE al 817-335-3022
- Para acceder a los servicios a través de una línea directa de servicios sociales:
 - Marca 2-1-1 o 877-541-7905 o visita 211texas.org

Para otras consultas/actualizaciones sobre el COVID-19, visite cdc.gov.



Parenting is Hard. Ask for H.E.L.P. Provider Reference to Help Families Manage COVID-19 Stress

Addressing Basic Needs of Families

Due to COVID-19, things can feel stressful and uncertain for parents. This quick-reference document supports **healthcare providers, social workers, and other professionals** as they address the needs of caregivers and families.



Food & Formula



Family Support



Childcare & School



Well-being



Shelter & Sanitation



Injury Prevention



Work & Income



Internet Access

Community needs associated with COVID-19

Parenting is Hard. Ask for H.E.L.P.

The acronym **H.E.L.P.** is a simple outline for healthcare providers, social workers, and other professionals to quickly **assess the basic needs of caregivers and their families**.

H. Health.	Does your family have access to food/formula? Healthcare? Mental health? Dental care? Medication?
E. Environment.	Do you and your child feel safe and secure at home?
L. Learning.	How is your child doing with online learning?
P. Parenting.	How are you coping with the stress of parenting?

H.E.L.P.ful Services, Hotlines, & Evidence-Informed Resources

To address the identified needs of caregivers and their families, this information is provided as a quick reference for healthcare providers, social workers, and other professionals.

Local Health and Human Services

211 Texas Dial 2-1-1 or 877-541-7905, 211texas.org
Aunt Bertha auntbertha.com
Tarrant Cares tarrantcares.org
One Safe Place 817-916-4323
Help me Grow Family Resource 844-NTX-KIDS
Tarrant County Dept of Human Services 800-942-3678
WIC Health & Nutrition 800-942-3678

Evidence-Informed Resources

Centers for Disease Control (COVID-19 related)
Coping ([Link](#)) | Print Resources ([Link](#)) | Pregnancy ([Link](#))
Texas Department of State Health Services
Communication Tools ([Link](#)) | COVID-19 Info ([Link](#))
American Academy of Pediatrics
Parenting Website ([Link](#)) | Critical Updates ([Link](#))
Cook Children's
COVID-19 Information ([Link](#))
United Way of Dallas
Parenting Tips & Resources ([Link](#))

24/7 Crisis & Support Hotlines

Childhelp National Child Abuse Hotline for caregiver support
Call/Text: 800-422-4453 or 800-4-A-CHILD, childhelp.org
Texas DFPS Texas Abuse Hotline to report child abuse
800-252-5400, txabusehotline.org
National Suicide Prevention Lifeline
800-273-8255 (TALK), suicidepreventionlifeline.org
Texas Youth Helpline
800-989-6884, Text: 512-872-5777
iCARE Crisis Line for Mental Health & Substance Use
800-866-2465, Text: 817-335-3022
Texas COVID-19 Mental Health Support Line
833-986-1919, mhmrct.org
National Domestic Violence Hotline
800-799-7233 (SAFE), thehotline.org

MANAGING COVID-19 STRESS

TIPS FOR HEALTHCARE PROVIDERS

Healthcare providers are not invulnerable to experiencing emotional distress during global infectious disease outbreaks. During the COVID-19 pandemic, you may be experiencing a rise in care demands, increased risk of infection, and equipment challenges. **In addition to medical care, you may also be providing support to distressed patients, their families, your staff, and your own family. All of these factors can lead to psychological stress. Taking care of yourself sustains your ability to care for others.**



RECOGNIZE THE SIGNS OF STRESS

Responding to COVID-19 can be stressful. Some stress can be healthy, keeping you going at your job and giving you a sense of purpose. But when too much stress builds up, it can cause burnout and secondary traumatic stress (STS). Burnout and STS can impact anyone helping people through a traumatic event. Recognizing the signs, both physical (e.g., fatigue, insomnia, or a racing heart) and mental (e.g., fear, withdrawal, guilt), can remind you to take care of yourself. Signs of burnout and STS are listed on the CDC website (<https://emergency.cdc.gov/coping/responders.asp>).



MEET YOUR BASIC NEEDS

To take care of others, you must be feeling well and thinking clearly. For that to happen, it is important that you meet your own basic needs. Make time for regular physical activity and high-quality sleep. Also, during stressful periods, we often find ourselves over-indulging, forgetting to eat, or avoiding food. Set reminders for yourself to drink plenty of water and to eat nutritious foods.



PRACTICE SELF-CARE ACTIVITIES

Create a menu of personal self-care activities that you enjoy, such as exercising, reading books, journaling, listening to music, or connecting with loved ones. Make a plan to work these activities into your daily schedule. Find a few trusted news sources and limit your media exposure to only the amount necessary for you to stay informed of critical information.



MAINTAIN SUPPORTIVE RELATIONSHIPS

Connect with colleagues and receive support from each other. Rather than isolating yourself in fear and anxiety, find and reach out to your colleagues who are nurturing and supportive, listen to each others' stories, and allow yourself to be vulnerable when sharing. Communicate with your loved ones, as they can be an anchor of support outside the healthcare system.



ASK FOR HELP

People with preexisting mental health conditions should continue with their treatment and be aware of new or worsening symptoms. If you have a therapist or psychiatrist, continue your sessions virtually. If you are having difficulty coping, seek out help for the first time. Texas Health and Human Services has launched a 24/7 statewide mental health support line to offer trauma-informed support and psychological first aid to Texans experiencing stress and anxiety related to COVID-19. Counseling services are confidential and free of charge to people who call the hotline. The Statewide COVID-19 Mental Health Support Line is available 24 hours a day, 7 days a week toll-free at 833-986-1919.

FOR MORE INFORMATION, VISIT:

- <https://txpeds.org>
- <https://emergency.cdc.gov/coping/responders.asp>
- <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html>
- https://www.cstsonline.org/assets/media/documents/CSTS_FS_Sustaining_Well_Being_Healthcare_Personnel_during.pdf

This tip sheet was developed as part of the Central Texas Pediatric Learning Collaborative, made possible by St. David's Foundation.

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**Texas
Pediatric
Society**

The Texas Chapter of the
American Academy of Pediatrics
INCORPORATED IN TEXAS

STRENGTHENING YOUR FAMILY

DURING SCHOOL CLOSURES



MAKE A PLAN

Routines are key. Make a visual schedule and talk to your kids about how you'll structure your days, how much time kids can spend online, and when you will take breaks from work to relax, sleep, exercise regularly, and connect with each other. You can also assign kids age-appropriate chores, like bed-making or helping with meal prep. Refer to your schedule throughout the day. For example, say, "Now it's time to wash our hands," and point to a handwashing image on the schedule.



FIND EDUCATIONAL ACTIVITIES ONLINE

There are lots of educational activities available online for free. PBS Kids (<https://www.pbs.org/parents>) is sending out a daily newsletter with show and activity ideas. Podcasts and audiobooks are also great ways to keep kids' minds engaged. School districts may be able to help connect low-income families to free Wi-Fi or devices.



KEEP AN EYE ON MEDIA TIME

Keep media time structured and, when possible, use media together. For positive content, Common Sense Media has been compiling ideas for families who are stuck inside (<https://www.commonsensemedia.org/blog/what-to-watch-read-and-play-while-your-kids-are-stuck-indoors>). Be mindful of your own technology use as well. Kids can notice when news or social media is stressing you out. Make sure you're taking care of your own mental health, too.



COMBAT SOCIAL ISOLATION

Social distancing can be isolating, both for children and parents. Use social media to check in with your loved ones while you can't see them in person. If kids are missing their friends or other family, use video chats or social media to stay in touch.



FIND ACTIVITIES TO DO TOGETHER

Bond and relax as a family by watching a movie, playing board games, going for walks, running around outside, reading, or cooking a healthy meal together. For older kids, encourage them to make up a workout or dance to keep them moving.



ASK FOR SUPPORT

Parenting during the COVID-19 outbreak can be especially stressful and you may have lots of new demands placed on you. Reach out for support as needed. For support with parenting stress, visit www.helpandhope.org, www.childhelp.org, or call 1-800-4-A-CHILD. For food or other community resources, dial 2-1-1 or visit www.211texas.org.

If anyone in your home starts showing symptoms of COVID-19, call your doctor to discuss what to do or visit the Centers for Disease Control and Prevention website for guidance: <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>.

FOR MORE INFORMATION, VISIT:

- <https://txpeds.org/parent-resources>
- <https://www.aap.org/en-us/about-the-aap/aap-press-room/Pages/AAP-Finding-Ways-to-Keep-Children-Occupied-During-These-Challenging-Times-.aspx>
- <https://www.healthychildren.org/English/health-issues/conditions/chest-lungs/Pages/2019-Novel-Coronavirus.aspx>

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INCORPORATED IN TEXAS

The Hunger Vital Sign™:

A NEW STANDARD OF CARE FOR PREVENTIVE HEALTH

Early childhood health depends on consistent access to an adequate and nutritious diet. Unfortunately, one in five U.S. families with children under age six struggles to provide enough food to lead active, healthy lives (are **food insecure**).¹ To identify young children living in households at risk for food insecurity, Children's HealthWatch validated the **Hunger Vital Sign™**, a 2-question food insecurity screening tool² based on the US Household Food Security Scale. The Hunger Vital Sign™ measures families' concerns about and access to food, much the way health care providers check other key vital signs, such as pulse and blood pressure. **Healthcare providers, social service providers, community-based outreach workers, teachers, and anyone who works with young children can use the Hunger Vital Sign™ to identify young children and families who may need assistance.**

The Children's HealthWatch Hunger Vital Sign™

Drs. Erin Hager and Anna Quigg and the Children's HealthWatch team validated the Hunger Vital Sign™, a 2-question screening tool, suitable for clinical or community outreach use, that identifies families with young children as being at risk for food insecurity if they answer that either or both of the following two statements* is 'often true' or 'sometimes true' (vs. 'never true') :

- "Within the past 12 months we worried whether our food would run out before we got money to buy more."
- "Within the past 12 months the food we bought just didn't last and we didn't have money to get more."

What Does the Hunger Vital Sign™ Tell Us?

When compared to children under the age of four who screened as food secure using the Hunger Vital Sign™, young children screening as at risk of food insecurity using the Hunger Vital Sign were:

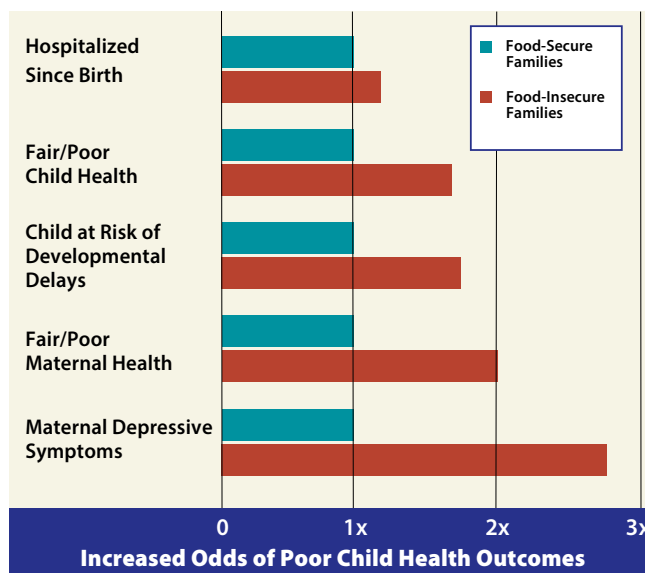
- 56 percent more likely to be in fair or poor health
- 17 percent more likely to have been hospitalized
- 60 percent more likely to be at risk for developmental delays

Compared to mothers screened as food-secure, mothers screening as at risk of food insecurity were:

- Almost twice as likely to be in fair or poor health
- Almost three times as likely to report depressive symptoms

Figure 1:

Families at risk of food insecurity had worse child health outcomes and worse maternal mental and physical health.



Source: Children's HealthWatch Data, 1998-2005. All increases statistically significant at $p < 0.05$.

*These two statements are the first two items in the US Food Security Scale.³

Research Summary

Children's HealthWatch™ has developed the Hunger Vital Sign, a 2-question screening tool to identify young children in households at risk of food insecurity.

Compared to young children in food-secure households, young children in families at risk of food insecurity are more likely to:

- Be in fair or poor health
- Have been hospitalized
- Be at risk for developmental delays

Compared to food-secure mothers, mothers of young children who are at risk of food insecurity are more likely to:

- Be in fair or poor health
- Report depressive symptoms

The Hunger Vital Sign™ identified young children and mothers at high risk of food insecurity in order to help them obtain assistance if needed.



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Children's HealthWatch is a nonpartisan network of pediatricians, public health researchers, and policy and child health experts that conduct primary research to inform public policies that impact children's health.

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Apart from the harm to mothers themselves, poor maternal mental health affects mothers' ability to provide care for their children, and can impede children's development.⁴

Putting the Hunger Vital Sign™ Into Action – Health Care Settings and Beyond

Health care providers can use the Hunger Vital Sign™ during routine primary or acute care visits as well as visits to the emergency room, treating food security as a vital sign just like temperature, blood pressure or pulse, all essential measurements for understanding a child's health and prognosis. The screening tool is also very useful when incorporated into electronic medical records, so that it becomes part of the child's medical history. The Hunger Vital Sign™ may also be used by emergency food assistance programs, community outreach workers, advocates, and social workers, among others.

Hospitals and other health care institutions can improve the food security, and ultimately the health, of the children they serve through a variety of interventions, including:

- Referring families to nutrition assistance programs, such as the Supplemental Nutrition Assistance Program (SNAP) and the Special Supplemental Nutrition Assistance Program for Women, Infants, and Children (WIC)

- Some hospitals provide application assistance through their financial assistance departments (or the departments where patients register for health insurance)
- Collaborating with partner food pantries to provide onsite food pantries and/or WIC offices in health care facilities
- Using hospital facilities as sites for community-based summer and after-school feeding programs

Healthcare settings using the Hunger Vital Sign™:

- Minnesota Department of Health and Family Home Visiting Program
- Baltimore City Health Department
- Community Health Center of Burlington, Vermont
- Addison Gilbert and Beverly Hospitals of Lahey Health in Beverly, Massachusetts
- Orange County, California community health clinics
- Fletcher Allen Health Care in Burlington, Vermont

Conclusion

The validated Children's HealthWatch Hunger Vital Sign™ is a 2-item screening tool that provides a straightforward means of identifying families who struggle to access food and whose children are therefore at greater risk of fair or poor health, hospitalizations and developmental delays, and whose mothers are at greater risk of fair or poor health and depression. By routinely screening for food insecurity as a vital sign, healthcare providers and others who work directly with families of young children can connect families at risk of food insecurity with effective resources to sustain and improve their mental and physical health, reducing health care costs for the families and society as a whole.

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¹ Coleman-Jensen, A., Nord, M., Andrews, M., and Carlson, S. (2012). Household food security in the United States in 2011. Economic Research Report no. 141. U.S. Department of Agriculture.

² Hager, E. R., Quigg, A. M., Black, M. M., Coleman, S. M., Heeren, T., Rose-Jacobs, R., & Frank, D. A. (2010). Development and validity of a 2-item screen to identify families at risk for food insecurity. *Pediatrics*, 126(1), e26-e32.

³ Hamilton WL, Cook JT, et al. "Household Food Security in the United States in 1995: Technical Report." A report provided to USDA/FCS under Contract No. 53-3198-5-028 by Abt Associates Inc., Alexandria, VA, September 1997.

⁴ Kiernan, K. E., & Huerta, M. C. (2008). Economic deprivation, maternal depression, parenting and children's cognitive and emotional development in early childhood. *The British Journal of Sociology*, 59(4), 783-806.

