

Promoting Healthy Early Childhood Development in Partnership with Native Families



PEDIATRIC CARE • SUPPORTING • PARENTING
A Program of ZERO TO THREE

Presenters

- **Jonathan Goldfinger, MD, MPH, FAAP**

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- **Andrea Woolridge, PT, DPT**

- HealthySteps Specialist and Physical Therapist, Whiteriver Indian Hospital

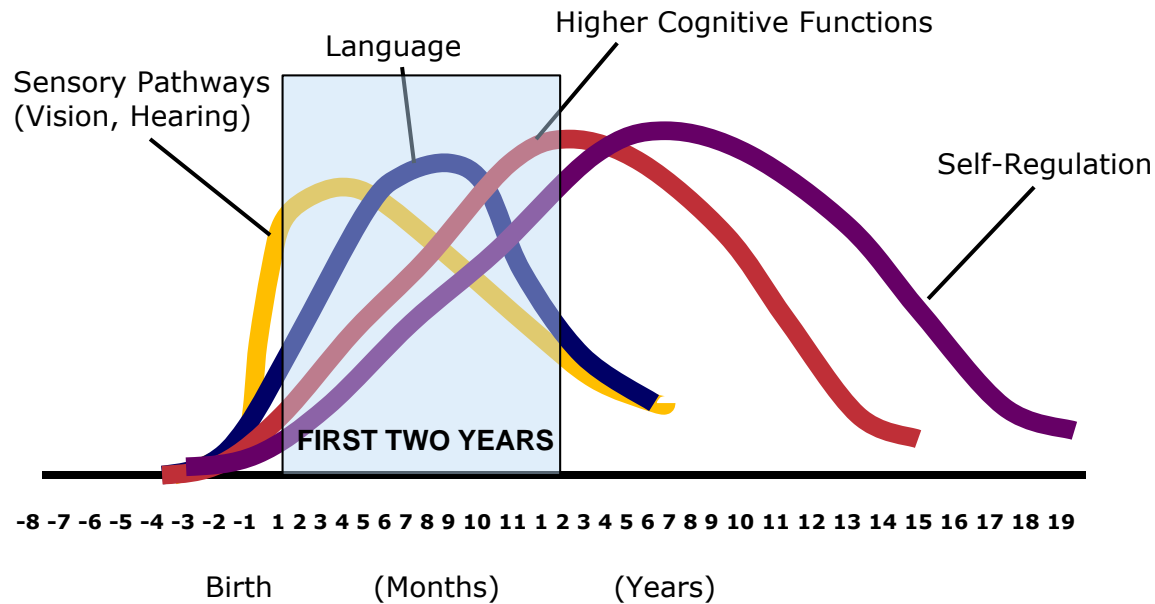


Agenda

- Welcome, Introductions, and Agenda
- Early Investments, Greatest Gains
- HealthySteps: Enhancing Primary Care for Young Children and Families
- HealthySteps in Whiteriver
- Bringing HealthySteps to your Clinic
- Questions
- Closing

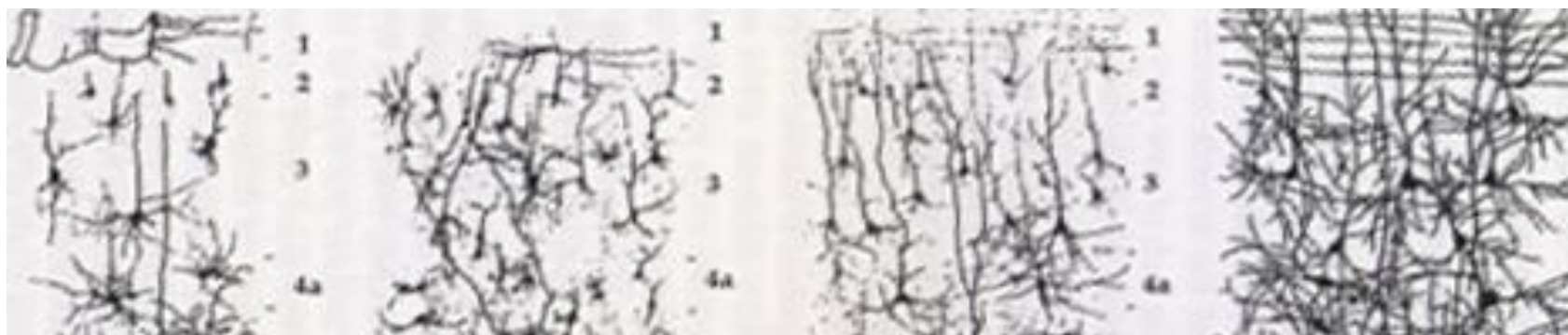


Learning Takes Place in Critical Windows of Brain Development



Source: C. Nelson (2000)

Babies Gain Knowledge at a Staggering Rate



Over 1 Million New Connections Every Second



newborn

1 month

3 months

6 months

Early Investments, Greatest Gains

Benefits of Early Investment

Reductions in:

- Juvenile and adult crimes
- Cases of abuse and neglect
- Intimate Partner Violence
- Welfare dependency
- Special education

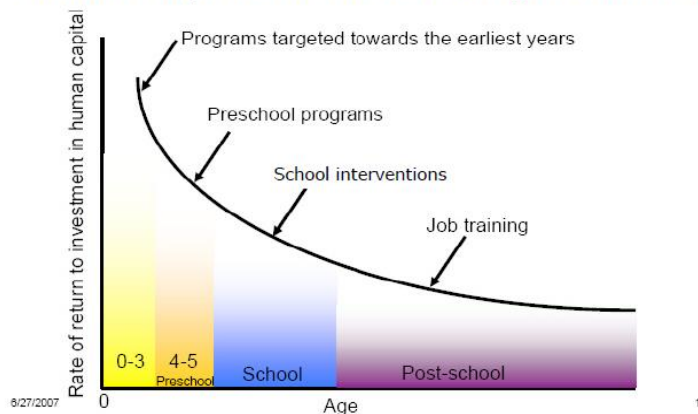
Increases in:

- Children's cognitive and social-emotional development
- Educational performance and graduation rates
- Parental involvement
- Job training and earnings

Higher number of adverse childhood experiences is associated with greater likelihood of: serious emotional problems, health risk behaviors, serious social problems, and adult disease/disability

ROI of Early Investment

Rates of Return to Additional Investments in Human Capital for Disadvantaged Children



Ability to impact brain development decreases with time, while costs to change behavior increase

Heckman, J. "Investing in Disadvantaged Young Children Is Good Economics and Good Public Policy," Testimony before the Joint Economic Committee, Washington D.C., June 27, 2007

HealthySteps: Enhancing Primary Care for Young Children and Families



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Pediatric and Family Practices Reach All Children...



- Almost all families take their babies to see a pediatrician or family practitioner
- Parents continue to highly trust these health care professionals
- Universal access and no eligibility criteria create a non-stigmatizing setting
- The well-child visit offers a perfect opportunity for parental learning
- The primary care practice is a powerful point of entry for additional services

...But Pediatric Primary Care Has Room for Improvement



- Integrated behavioral, emotional, and physical health care for children is not yet the norm
- Families need more mental health support in the pediatric office setting
- Social determinants of health are not yet at the forefront of pediatric primary care
- Time and training for positive parenting and parent-child relationship guidance is limited
- Child screening, referrals, and care coordination do not lead to 100% resource access
- Too many children with delays are not receiving needed developmental services

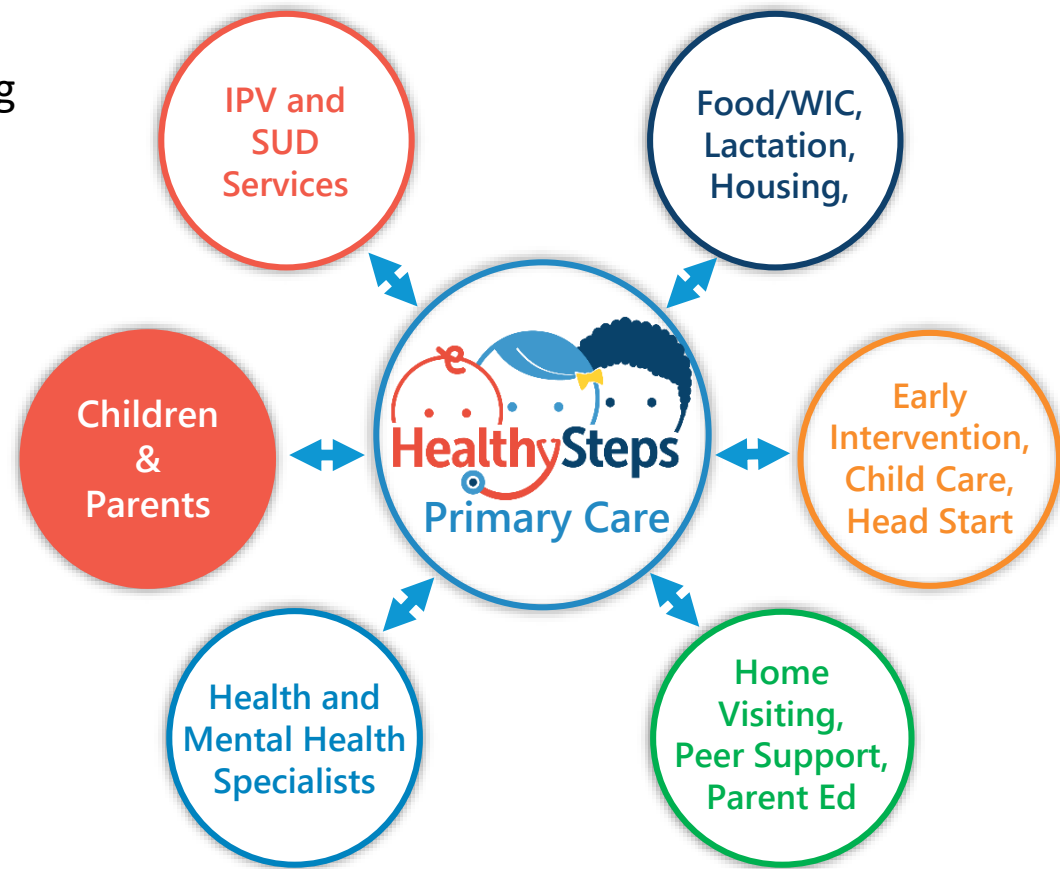
What Is HealthySteps?

- Evidence-based, interdisciplinary primary care that **integrates a child development professional**, known as a HealthySteps Steps Specialist (HSS)
- **Transforms how practices serve children and families**, ensuring:
 - **Universal screening for child behavior, development & social needs**
 - **Services built on strengths and tailored to needs:** guidance, support, consults, team-based well-child visits, referrals, and care coordination
 - **Effective community partnerships** across agencies
 - **Common and complex concerns get addressed:** feeding, behavior, sleep, attachment, adapting to life with a young child, depression, substance misuse, intimate partner violence, and more
- The results are remarkable
 - ✓ *Positive, nurturing parenting and avoidance of physical discipline*
 - ✓ *Access to info and supports for developmental and social needs*
 - ✓ *Healthier children, happier families*



Core Components and Community Connections

1. Child developmental, social-emotional, and behavioral screening
2. Screenings for family need
3. Child development support line
4. Child development and behavior consults
5. Ongoing, preventive team-based well-child visits
6. Care coordination and systems navigation
7. Positive parenting guidance and information
8. Early learning resources



Evidence-Based, Age-Specific Resources For Parents and Professionals

What's Up? Your Baby's Development 1-Month Visit



The first months of baby's life are all about learning to feel comfortable, safe, and secure in the world. By responding to her signals and providing lots of love and comfort, you help your baby form a trusting bond with you. *How are you helping your baby learn to feel safe and secure?*

1–2 Months: What's on Your Mind I have to go back to work soon—will my 6-week-old be okay in child care?

Yes, as long as it is a high-quality program. Look for a clean and safe setting with no more than 3 babies for every caregiver. There should be toys and books at the baby's level and child care providers who will let your baby sleep, eat, and play according to her own schedule. Make sure that the caregivers talk and play with the babies, that they comfort them when they are upset, and that they are loving and nurturing.

What Your Baby Can Do	What You Can Do
<p>I am getting to know you and the other people who love and care for me.</p> <ul style="list-style-type: none"> I recognize your faces, voices, and smells. I respond to your smile and touch with pleasure. 	<p>Talk and sing to your baby. This makes him feel loved and helps him bond with you.</p> <p>Hold your baby. Try some skin-to-skin cuddle time with your little one.</p>
<p>I learn to trust you when you respond to my cries.</p> <ul style="list-style-type: none"> I often stop crying when picked up and soothed, but sometimes do not. If I keep crying, it doesn't mean you are doing anything wrong. I may like being rocked, bounced, or swinging in a baby swing. 	<p>Remember that you can't spoil a baby. It is okay to pick up your baby whenever she cries. It's also okay to finish your task while using your voice to comfort her from afar, "I'm right here, just washing my hands, and I will be right over."</p> <p>It will help baby calm down if you can stay calm. If your baby is inconsolable and you have tried everything, keep in mind that just by holding and comforting her you are teaching her that she is not alone and that you will stick by her through thick and thin.</p>

Spotlight on Crying

- Crying, hard as it is to hear, is a normal way babies communicate hunger, discomfort, distress, or a need for your attention.
- Most newborns cry about 2 hours a day in the first 6 weeks. Crying decreases to about 1 hour a day by 12 weeks.¹
- Being with a crying baby who is hard to soothe can be exhausting, stressful, and frustrating. Remember that just being there and staying as calm as possible helps your baby feel safe.
- Crying and fussiness are very common for young babies. Some babies experience intense crying for prolonged periods of time and can be very difficult to soothe. This behavior may be a sign of colic.
- Although colic has been studied by many medical experts, there is no universal definition for colic. One practical definition may be any repeated, inconsolable crying that occurs for more than 3 hours on 3 days of any given week in an otherwise healthy and well-fed infant.

What It Means for You:

Even very young babies pick up on how their loved ones are feeling. When you are calm and relaxed, your baby is more likely to feel calm. When you are feeling stressed out and overwhelmed, your baby is more likely to feel tense. So in order to take good care of your baby, it's really important that you take good care of yourself. Ask trusted friends and family members for help when you need a break. Make time to do things that make you feel good. And be sure to talk to a trusted health care provider if you are feeling down or depressed.

What You Can Do:

- Talk with your health care provider.** Crying may have a medical cause—a food sensitivity, heartburn, or other physical difficulty.
- Try different positions for your baby.** Sometimes a baby will cry less when he is placed facedown on an adult's knee and has his back rubbed. You can also try swaddling.
- Try motion.** Sometimes walking or gently bouncing with your baby leads to less crying.¹
- Use soothing sounds.** Talk or sing softly to your baby. Try running a fan or humidifier in your baby's room—sometimes babies are soothed by this background noise.
- Reduce stimulation.** Lights, sights, sounds, and textures—for your baby. Sometimes less stimulation leads to less crying for babies.
- Beach out for support.** Extended families and friends may be able to step in to give you a needed break. Everyone needs support, and nobody needs it more than the parents of a crying newborn.
- Stay calm.** When you're calm, it helps your baby calm down. If you find yourself feeling frustrated, put your baby on her back in a safe place—like the crib—and take a short break. Crying won't hurt your baby, and taking a break will let you soothe another very important person, you!
- Don't give up.** Soothing your baby is a trial-and-error process. If one strategy doesn't work, try another. Hang in there, and remember that the crying will get better.

Did you know... Babies whose mothers reported high stress cried and fussed more than babies whose mothers reported little stress.¹



Tailored Services Meet Universal and At-risk Needs

Comprehensive Services →

← **Short-Term Supports**

← Child developmental,
social-emotional, and
behavioral screening

← Screening for
family needs

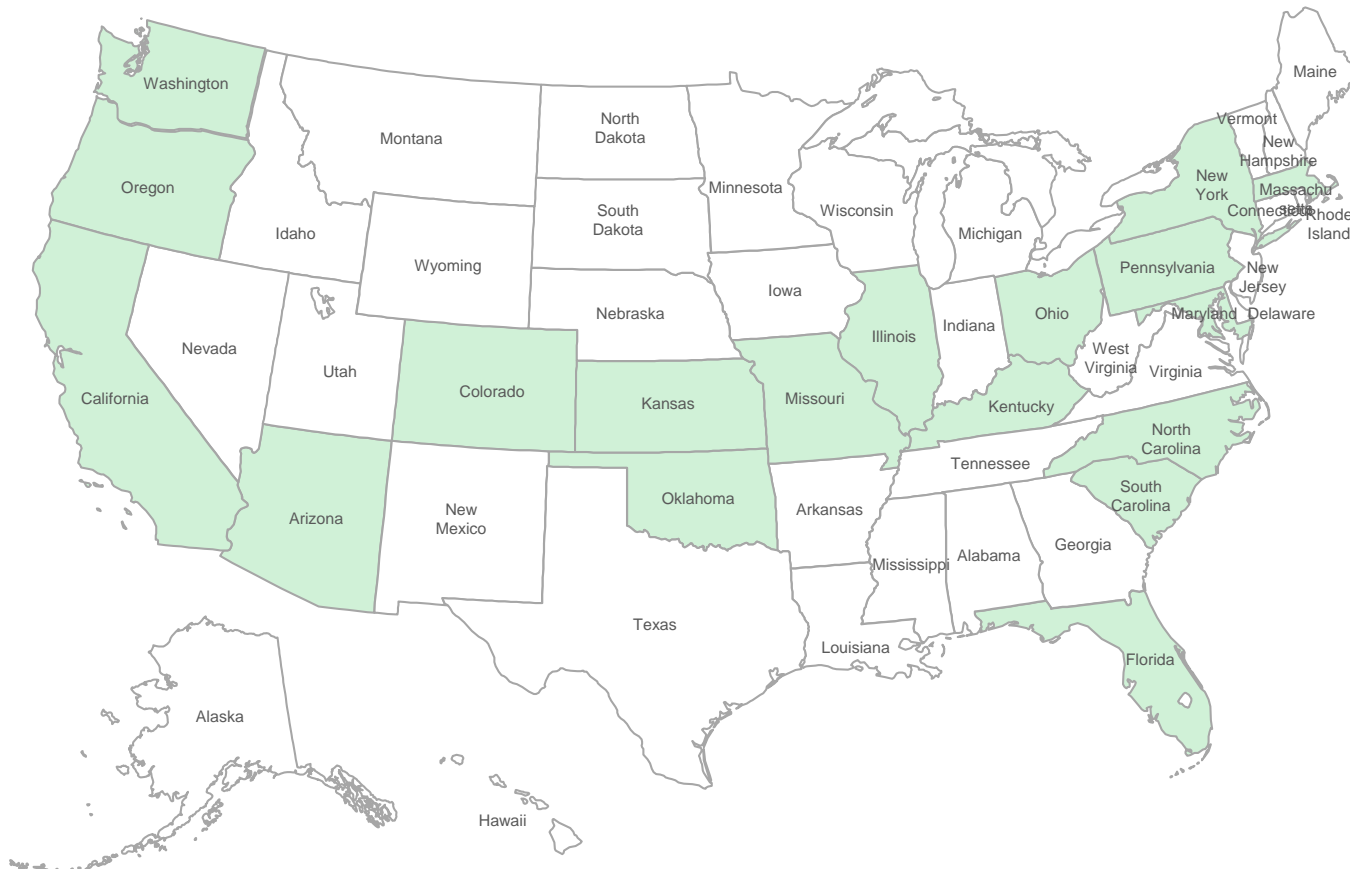
← Child
development
support line

Universal Services

2,000 children total



Goal: 1 Million Children Annually by 2032 (We're in 19 states and counting...)



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Proven Outcomes



Improved Child Development and Family Connections

<p>Child Health & Development</p>	<ul style="list-style-type: none"> ✓ Children were more likely to receive well-child visits on time ^{1,2,3,4} ✓ Children were more likely to receive vaccinations on time ^{1,3,4}, and 1.4x more likely to be up-to-date on vaccinations by age 2 ^{1,2} ✓ Continuity of care was better for both total visits and well-child visits ^{4,5} ✓ Children were 8x more likely to receive a developmental assessment at 30-33 months ¹ ✓ Greater security of attachment and fewer child behavior problems⁷
<p>Connections to Resources</p>	<ul style="list-style-type: none"> ✓ Children were 1.4x more likely to have nonmedical referrals, including for behavior, speech, hearing, child abuse or neglect, and early intervention ¹ ✓ Families were 4x more likely to receive information on community resources ¹ ✓ <i>Parents received more services^{3,4,8} and had longer clinic visits ⁴</i>
<p>Breastfeeding & Early Nutrition</p>	<ul style="list-style-type: none"> ✓ Mothers were 22% less likely to give their newborn water and 16% less likely to introduce cereal by 2-4 months of age (too young for solid foods) ¹ ✓ <i>Mothers reported feeling more supported for breastfeeding ⁹ and breastfed longer than the minimum 6 months recommended by the American Academy of Pediatrics ²</i> ✓ <i>Children identified as being “at risk” of social-emotional challenges demonstrated lower rates of obesity at age 5 than comparable children who did not receive HealthySteps ¹⁰</i>
<p>Early Literacy & School Readiness</p>	<ul style="list-style-type: none"> ✓ Mothers were 22% more likely to show picture books to their infants every day ¹ ✓ <i>Mothers were 12% more likely to have read to their infant in previous week ⁹</i> ✓ Beyond 5 years, families were more likely to report that their child had looked at or read books in the previous week ¹¹ ✓ <i>Parents were more successful in establishing routines, reading to children, and limiting television viewing time ⁴</i>

Improved Parenting, Depression, and Family/Provider Experience

<p>Child Safety Practices</p>	<ul style="list-style-type: none"> ✓ Children were 23% less likely to have emergency room visits for injuries in a 1-year period ¹ ✓ Mothers were 24% less likely to place newborns on their stomachs to sleep, reducing SIDS risk¹ ✓ <i>Parents scored higher on an injury control index, and families were more likely to use stair gates and have access to the local poison control center's telephone number ^{2,9}</i>
<p>Parenting Knowledge & Practices</p>	<ul style="list-style-type: none"> ✓ Parents were 22% less likely to rely on harsh punishment (yelling, spanking with hand) ¹ ✓ Parents were less likely to use severe discipline (face slap, spanking with objects) ^{1,2} ✓ Parents were more likely to notice behavioral cues and provide age-appropriate nurturing ^{1,4} ✓ <i>Families received more anticipatory guidance that matched their needs ^{4,11}</i> ✓ <i>12 key child development and family-specific topics were discussed more frequently ³</i> ✓ <i>Parents demonstrated a better understanding of infant development ⁹</i>
<p>Maternal Depression</p>	<ul style="list-style-type: none"> ✓ Mothers with depressive symptoms were more likely to discuss their symptoms ^{1,2,4} ✓ Mothers were 1.4x more likely to have a maternal nonmedical referral, including for maternal depression ¹ ✓ <i>Providers were more likely to discuss postpartum depression with mothers ³</i> ✓ <i>Mothers with depressive symptoms reported fewer symptoms after 3 months in the program ⁹</i>
<p>Parent & Physician Satisfaction</p>	<ul style="list-style-type: none"> ✓ Parents were 2x more likely to report that someone at the practice went out of the way for them, and they were 1.5x more likely to rely on someone in the practice for advice (rather than friend or relative) ¹ ✓ <i>Parents were 1.8x more likely to remain with the practice through 20 months ¹¹</i> ✓ <i>Parents rated their provider as more competent and caring ⁴ and were more likely to believe that the health plan cared about them as a parent⁹</i> ✓ <i>Physicians were highly satisfied with the program and the role of the Healthy Steps Specialist with parents ⁴</i>



Program Costs and Financing



How Much Does HealthySteps Cost?

- Each HSS can offer comprehensive services to up to 300 children for as low as \$400 per child per year
- **HealthySteps costs vary by state and site, and costs per child** are driven by:
 - HSS salary and fringe benefits (which depend on credentials)
 - Overall caseload and intensive services caseload
 - Materials/supplies
 - Practice-specific model enhancements (e.g., home visiting)
- **Training costs are low:** For approximately \$15,000 (plus trainer expenses), new HealthySteps practices receive customized National Office support
 - On-site, two-day group training for all practice staff
 - Follow-up technical assistance calls during first 6 months of implementation
 - Support from broad array of National Office subject matter experts



How Much Does HealthySteps Cost?

- HealthySteps has value for patients, trainees, and practices
- Many HealthySteps services are eligible for reimbursement from Medicaid, CHIP, and other payers
- Dedicated National Office Policy and Finance Team provides technical assistance to sites
 - Create state Medicaid Billing and Coding Toolkits
 - Provide site education on billing opportunities and data collection
 - Develop HealthySteps business cases to illustrate program impact
 - Customize short-term annualized cost saving estimates for state Medicaid agencies and other payers
 - Broker conversations with Medicaid, health plans, and other payers to explore unique payment opportunities



Interventions Driving Short-Term Medicaid Cost Savings

Child-Focused Interventions	Adult-Focused Interventions
<ul style="list-style-type: none">• Well-child visit and immunization rates• Oral health• Inappropriate use of care for ambulatory sensitive conditions	<ul style="list-style-type: none">• Breastfeeding• Postpartum maternal depression• Postpartum maternal substance misuse• Intimate partner violence• Unhealthy birth spacing

A recent single-state analysis conducted by the HealthySteps National Office demonstrated annualized savings to Medicaid of up to \$1,150 per family, for an *annual* return on investment of **83%.***

*Analysis did not include savings attributable to postpartum maternal substance misuse interventions.

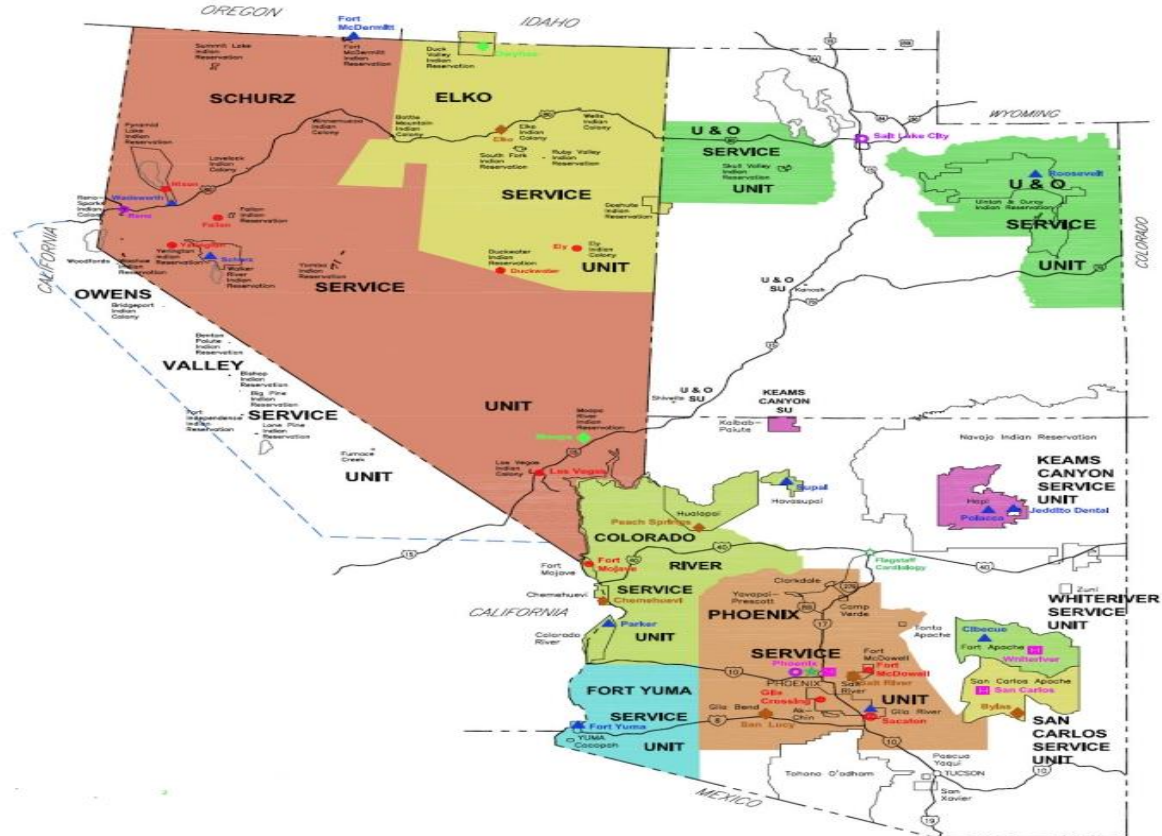


HealthySteps at Whiteriver



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Arizona and Phoenix Area IHS



Whiteriver Indian Hospital





Why Is HealthySteps Needed in Whiteriver?



Why We Pursued HealthySteps: Prevalence of Key Risk Factors

*From the 2014 First Things First Regional Needs & Assets Report*¹²

- **High Rates of Poverty**
 - 63% of children 0-5 living in poverty
 - 54% of children 0-5 living in single parent households
 - 43% of children 0-5 living in female-headed single parent households
 - Median family annual income = \$28,176-\$32,473^{12, 13}
 - For female-headed single parent household, median income = \$10,962
 - Regional unemployment rate of 25-41%^{12,13}
 - 85% of children 0-5 receiving SNAP benefits (twice statewide rate)
- **Exposure to Other Key Risk Factors**
 - 10% of babies born at a low birth weight, 100 per 1000 births
 - 18% of births to teen mothers, age 14-19
 - Observed trend of 2-4 month old infants with weak tummy time skills
 - Exposure to intimate partner violence, substance use, and other trauma (ACEs)

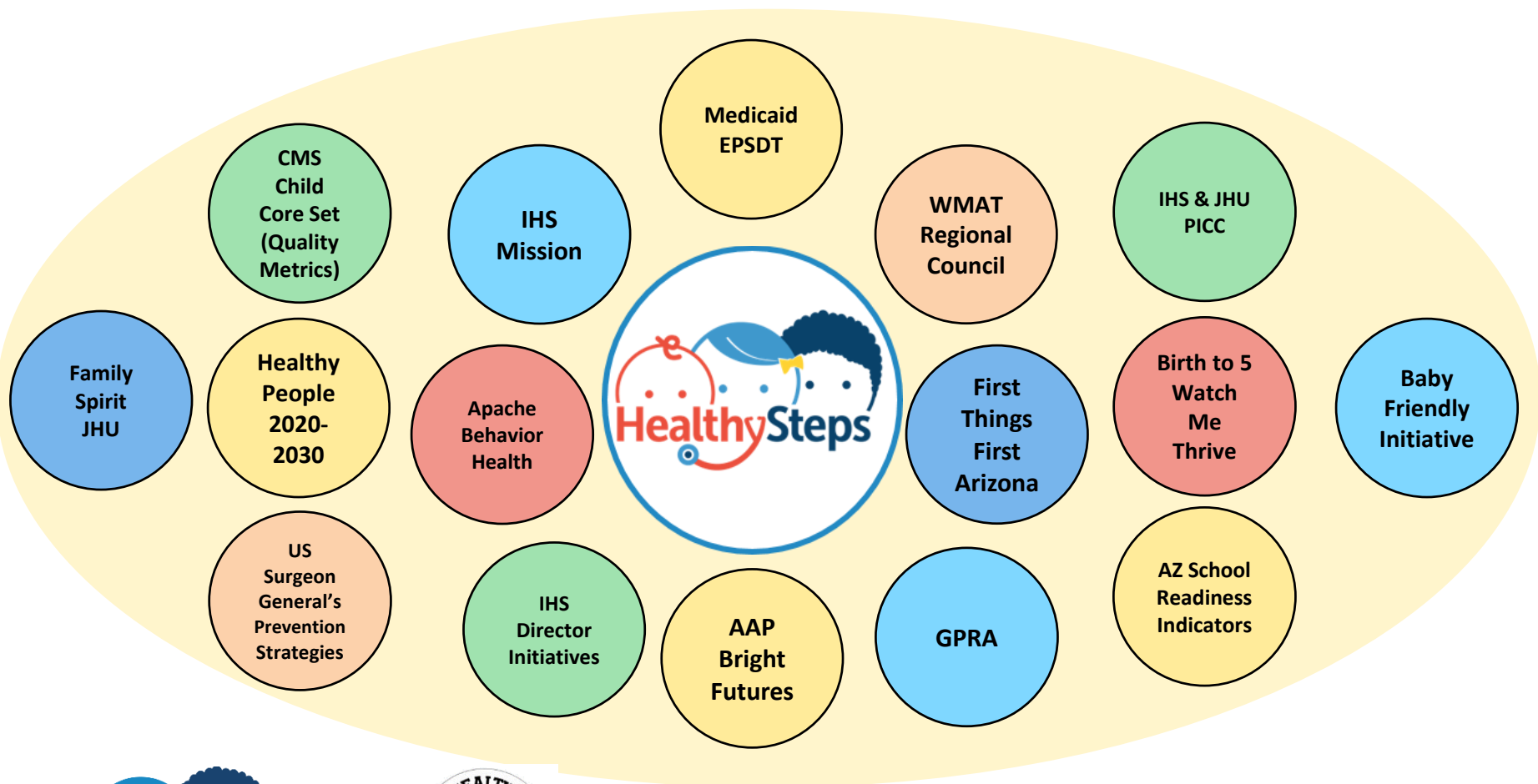


Why We Pursued HealthySteps: Barriers to Service Delivery in 2014

- **Restrictive Criteria for Arizona Early Intervention Program Services**
 - Must have minimum 50% developmental delay or qualifying medical diagnosis
 - Many children with lesser delays need services but do not qualify
 - 1/3 of ASQ3 screens fall in At Risk scores
- **Limited Child Care and Preschool Opportunities**
 - 2 Public Pre-K facilities and 1 Spec Ed WR School District Pre-K
 - Significant unmet demand for quality infant and toddler child care
 - 64% of children aged 3-4 were not enrolled in a nursery school or preschool
- **Commitment to IPC Medical Home at Whiteriver IHS Facility**
 - <70 babies/year born at WR IHS, ~75% born at non-IHS hospital in Show Low
 - Many children getting pediatric primary care at other facilities, off of tribal land
 - HealthySteps model well-established at partnering non-IHS hospital in Show Low
- **State Grant Opportunity Through First Things First**
 - To implement HealthySteps as Care Coordination-Medical Home strategy



HealthySteps Advances the Goals & Missions of Many Initiatives





What Does HealthySteps Look Like In Whiteriver?



Whiteriver HealthySteps Brochure



Indian Health Service Mission:
to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level.

Contact us with any questions:
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• (928) 338-4911
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200 W. Hospital Drive
Whiteriver, AZ 85941

- Lactation advise-OB Department (928) 338-3728
- Nurse Advise line (877) 617-0395
- Postpartum Support International-Arizona warm line (888) 434-MOMS, AZPOSTPARTUM.ORG
- ABHS - Thrive Birth to Five (928-338-4811)

HealthySteps
PROMOTING CARE • SUPPORTING • PARTNERING

FIRST THINGS FIRST

Whiteriver Indian Hospital
INDIAN HEALTH SERVICE
1955 - 1985



Whiteriver HealthySteps Brochure

Wish your baby came with a user's manual?

HealthySteps is an early childhood service (ages birth to 3 years). It is a unique, proven pediatric primary care program committed to healthy child development and nurturing parenting skills. A child and family development professional, known as a HealthySteps Specialist, connects with families during pediatric well visits as part of the primary care team. Individual visits are also available. The HealthySteps Specialist offers screening and support for parenting challenges like feeding, behavior, sleep and adapting to life with a baby or young child. HealthySteps Specialists are trained to provide guidance and referrals for families who want them. HealthySteps is a program of ZERO TO THREE.

As the expert of your own child, this information will help you decide what is right for you and your family and help you understand the needs of your young child.

Do you wonder when do you start Tummy Time? Should I use a baby-walker or bouncer? When should I start reading with my baby? How do I cope with feeling sad or overwhelmed, child temper tantrums, and toilet training? Where can I find other community resources?

We will support your success and help you feel more confident as a parent. HealthySteps is available to all parents and families who receive medical care at Whiteriver Service Unit-Indian Health Service.



You Choose the Service(s) Right for You:

- Information about what your child knows and what your child can learn
- Developmental screening to see what your baby or child is ready to learn next
- Social Emotional screening
- Vision and Hearing screenings
- Injury prevention education
- Information about food, shelter and other family needs
- Assistance when your child needs a referral into other services



HealthySteps Mobile Clinic: Clinics A1, A2, B, & C



- Program launched 2015, supported in-part by a three-year First Things First grant for Medical Home & Care Coordination
 - Year 1 = \$32,500
 - Year 2 = \$24,000
 - Year 3 = \$22,000
- Part-time HealthySteps Specialist (PT), also serving as ASQ trainer for community
- Physician champion-Dr. Amy McAuley
- New First Things First grant, totaling \$90,000 over four years, beginning July 1, 2018
 - Second HealthySteps Specialist (RN)
- As HealthySteps, provide developmental, behavioral, and post-partum depression screens, and added vision & hearing screens
- Contribute to health fairs & tribal radio talks

ASQ3 and ASQ-SE2 Training



HealthySteps Enrollment Priorities: Filling in the Service Gaps

- **Infants and Toddlers At-Risk for Developmental Delays**
 - ASQ At Risk consult form
 - Not eligible for AZEIP-Early Intervention Services
 - Premature Infants (<37 weeks)
 - Fetal alcohol/drug exposure
 - Recent hospitalization
 - Depressed parent/post partum depression
 - Family stressors
- **Children Cared for by Teen/First-Time/Grand Parents/Foster and/or Guardians**



OB Nursing: Three-to-Five Day and Two-Week Visits



Relationships Are Key to Success

Hospital Bulletin Boards & Good Health TV



Sensory Screening Team

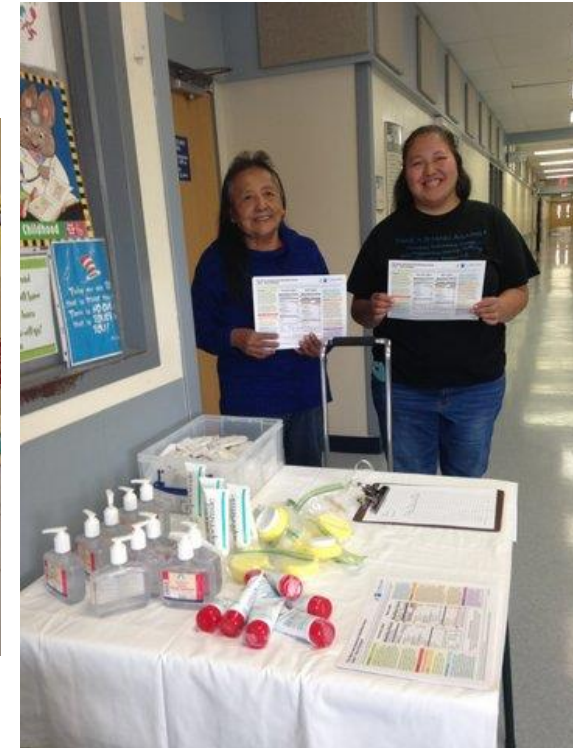


And Many Other Advisors and Partners

- Parents/Caregivers
- Family Spirit-JHU
- Tribal Child Find
- Tribal Day Care
- Apache Behavioral Health
- Patient Advocate
- Hospital Administrators
- Clinical Providers
- Health Techs
- Inpatient Unit
- Dieticians
- Community Nutrition
- MCH Committee
- Public Health Nurses



Relationships Are Key to Success





How Is HealthySteps Benefiting Children and Families?



A HealthySteps Story: Tummy Time Play for Nathan



Care Coordination



- Family Spirit
 - Novalene Goklish and her team at Johns Hopkins University-Whiteriver program
 - Care coordination with developmental screens for close follow up
 - ASQ staff training by HealthySteps Specialist
- Apache Behavioral Health Services
 - Warm hand off to Family Counselor
 - Sharing of educational resources
 - Story of HealthySteps lactation handout for Nathan's mom

Quality Improvement

- 1 year QI Project-PDSA, IHI format
- ASQ training for clerks, health techs, RNs, primary care providers
- **Questions:**
 - Were the ASQs being done? Goal 90% completed
 - 90% of ASQ screens completed at WCC by RN or HT with family
 - Did we have missed opportunities to prevent developmental delays with the screen results? Goal 0% missed
 - 65% missed opportunities with *at-risk/grey scores* for intensive follow up
- Created ASQ at-risk referral in EHR, trained providers, and launched January 2018
- **Current reality:**
 - # ASQ *at-risk* referrals received = 45
 - % missed opportunities Jan-March 2018 = 13% (ongoing)



HealthySteps Promotes IHS & JHU PICC: Pediatric Integrated Care Collaborative

- Nine-month project, launched March 2018, with core and extended teams
- **Goal:** To achieve trauma-informed integrated care for children and families exposed to trauma or chronic stress
- **Collaborative Change Framework** in six key areas that HealthySteps also promotes:
 1. Develop & foster a trauma and resilience-informed work environment
 2. Build community relationships to support families
 3. Engage with families in their own care
 4. Assess whole family health and resilience
 5. Address whole family health and resilience
 6. Coordinate services and supports for families



Why Whiteriver Loves HealthySteps

- **Evidence-based model** meeting multiple initiatives
- **Flexibility** to implement the model in scalable ways and to adapt the model to current practice methods, staff, service gaps, local priorities, & needs of specific populations
- **A focus on both prevention and treatment** using a trauma informed care approach
- **A medical home model-IPC-family-centered care** to engage the *whole* family in the health of the *whole* child
- **Enhanced well-child visits** that complement care provided by physicians and address areas that PCPs do not have time to cover (which also helps with staff shortages)
- **A free resource for all families** with flexible enrollment priorities *responsive to needs*





Bringing HealthySteps to your Clinic



Aligned Missions and Principles



IHS Mission:

To raise the physical, mental, social and spiritual health of American Indians and Alaska Natives to the highest possible

Builds on cultural strengths and traditions.

Takes a developmental, strengths-based, and reflective approach.

Uses trauma-informed approaches to well-being.

Takes a two-generational/intergenerational approach.¹⁴



HealthySteps Mission:

To transform the promise of pediatric care to improve the health and well-being of babies and young children so that they thrive in school and in life.



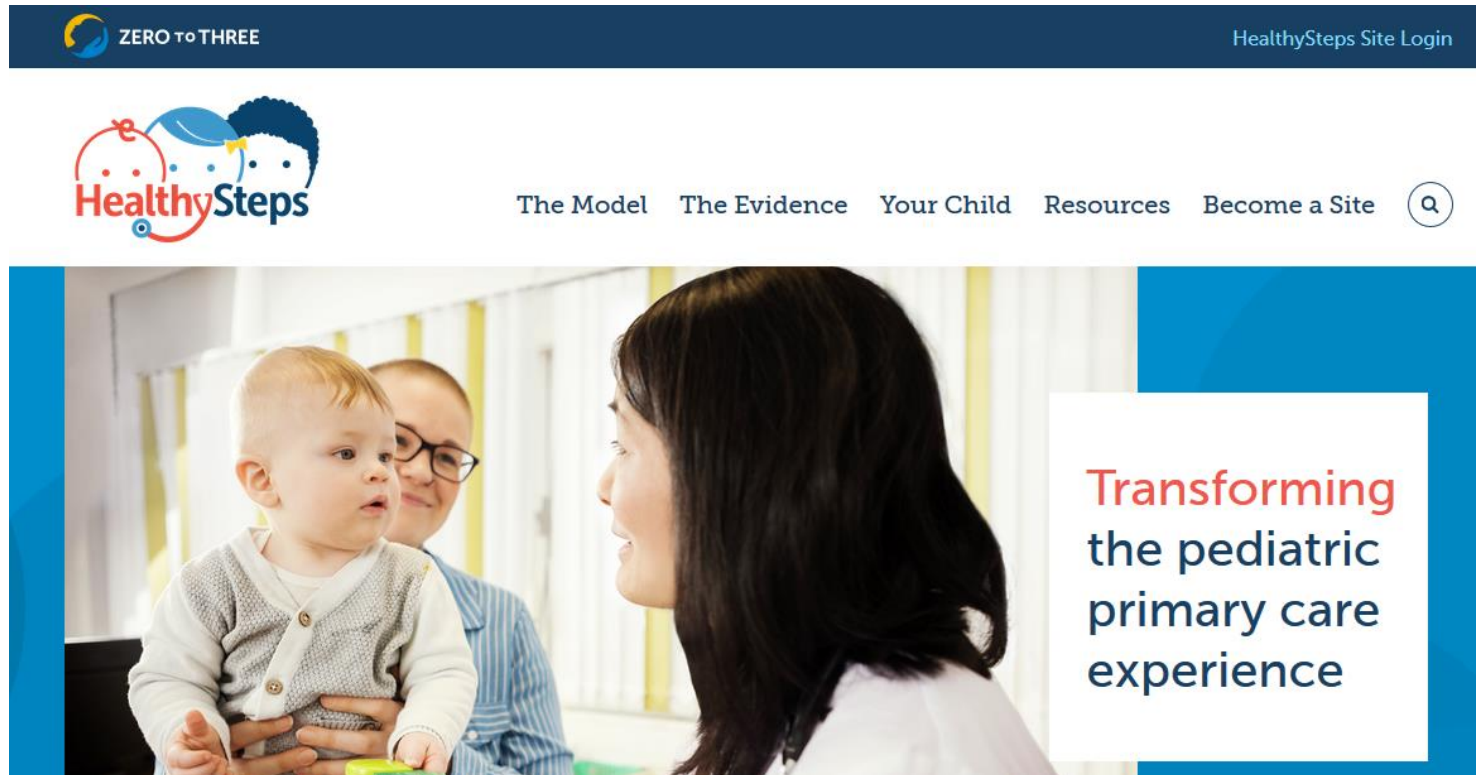
Bringing HealthySteps to your Clinic

- Connect with the **HealthySteps National Office** (ongoing!)
- Start to **document the need** you wish to meet and **the opportunities** you have, incorporating tribal and community resources, strengths, and challenges
- Identify facility/system/clinic **decision-makers** and recruit a **physician champion**
- Bring **potential partners together to set a shared vision** and decide how to work together
 - Cooperation → coordination → collaboration, or even collective impact framework
- Create an **implementation plan**: start small, but plan for growth, sustainability, and measurement, learning, and improvement
- Create a **staffing plan** clearly outlining individual/organizational roles and responsibilities and including bilingual tribal members/subject matter experts
- Create a **budget** aligned with potential funding sources
- Collaboratively pursue and **secure the resources** necessary to launch HealthySteps
- **Communicate and assess continuously**, to enhance and grow the program



Bringing HealthySteps to your Clinic

www.healthysteps.org



Questions



Contact Information

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