



May 28, 2020

Dear Colleague:

Across the country, the Coronavirus disease 2019 (COVID-19) pandemic has impacted almost every aspect of our daily lives. This is a challenging time for many families and communities. For parents and caregivers with limited resources and supports, the pandemic has exacerbated the uncertainty, stress, and isolation for the most vulnerable children and families living in poverty. The intent of this letter is to encourage family support, maternal and child health, and early childhood programs (including Head Start, home visiting, early intervention, and other early care and learning programs) to promote family strengthening and prevention strategies via virtual, electronic, telephonic, or other safe means during the COVID-19 pandemic. With many Americans living under some type of stay-at-home order and many states closing schools for the remainder of the academic year to help reduce the spread of COVID-19, the network of community and social supports for vulnerable families has drastically changed in a matter of weeks. As schools and businesses have closed, virtual and other remote services are rapidly being deployed to maintain connections and provide a lifeline for these families. The urgency and complexity of the situation requires that we come together to provide the necessary supports to help families build resilience during this challenging time. We recognize and appreciate the tremendous efforts of health and social service providers and frontline staff within states and communities across the country to keep children and families healthy and safe, particularly given the challenges and constraints faced during the pandemic.

With the rise in unemployment and access to resources and routines disrupted, many children and pregnant and parenting caregivers lack access to health, education, behavioral health, and social services, and seek support to provide essential food, housing, and basic supplies for daily living. More parents and caregivers are facing significant isolation, stress, anxiety, depression, and trauma, which may also increase risk of child maltreatment, family violence, and other adverse childhood experiences. The result has been decreased access to health and behavioral health services including screenings for maternal depression and developmental delays, well-child care, and support for children with special health care needs.

As federal agencies with a collective mission to improve the health, economic, and social well-being of children and families across the country, we have joined together as partners to urge our grantees and their state/territory/tribes and local partners to collaborate in new and creative ways to engage and support the whole family. Several states and local jurisdictions have seen decreases in reports of suspected child abuse and neglect as most schools and other child and family-serving programs have closed to prevent the spread of COVID-19. Experts do not believe that child maltreatment has actually decreased during this time and are concerned that the observed decrease is because mandated reporters, such as teachers and child care providers, are no longer seeing children on a daily basis.

It is critical that we come together as cross-sector partners to help families cope, decrease parental stress, support responsive relationships, and build protective factors to strengthen families and communities. Ideally, under normal circumstances, a prevention and whole-family approach proactively connects all children, youth, and their parents/caregivers to health, early learning, and family support services before they are in crisis. We recognize that many families are already in crisis so it is essential that systems coordination, service adaptation, and other innovative strategies are implemented to respond to current needs and to mitigate any additional negative impacts to children and families. In response to the COVID-19 pandemic, several early childhood programs including Head Start, home visiting and other child and family support programs have had to close their offices and classrooms or limit services. As a result, we have seen programs respond by rapidly adapting and implementing innovative practices and solutions to continue serving families through remote service delivery (e.g., via phone, text, email, videoconferencing) and other strategies. We encourage our grantees and their partners to leverage, align, and maximize federal funding and policy flexibilities offered in response to COVID-19 to connect families to what they need, strengthen early childhood systems, and plan for sustainability (see Appendix A for COVID-19 Policy and Funding Resources). Participating in state and local COVID-19 planning response efforts can help meet the needs of vulnerable children and families and the early childhood and family support workforce who are serving these families. Below are examples of actions that family support, maternal and child health, and early childhood programs can take to support families during this challenging time. See Appendix A for additional resources for families and programs.

Partnering with families

- Connect families to state and local resources or information, such as 211, crisis hotlines, or family resource centers for identified needs.
- Increase the frequency of visits or other check-ins to maintain connections with families – especially those identified at elevated risk – and communicate the availability of support to families.
- Support families’ capacity to connect with health and family support professionals through virtual, electronic, and telephonic means, including assisting families with access to technology and internet connectivity.
- Reach out to parents via text to send messages of support and let them know that they are not alone, that there is support for them, and to reinforce the positive things they do for their families. The Office of Head Start has developed sample social media messages that can be used.
- Provide tools to help parents establish or maintain daily routines that support children’s developmental and social-emotional needs, while balancing caregivers’ work or other required tasks. Early care and learning (including Head Start), and infant mental health consultants can be useful partners.
- Talk to parents about strategies to support their own family and build protective factors especially during these uncertain times. The Children’s Bureau has developed several tip sheets for parents that can be used to address a number of topics.
- Establish voluntary peer parenting support groups or partner with a state or local family resource center to connect isolated families with each other virtually.

- Integrate additional questions or protocols into virtual visits as part of home visiting and other early childhood programs to assess family health and social needs as well as safety and risk concerns. Staff should be adequately trained to effectively assess concerns and refer as needed.

Partnering with state and local organizations and service providers

- Develop and circulate a list of local emergency resources among staff and partners, covering areas of need including food and essential daily needs (e.g., diapers, electricity/gas providers), child protection hotlines/warmlines, intimate partner violence support, suicide hotlines, early intervention programs, emergency shelter, unemployment assistance, etc.
- Forge partnerships with pediatricians/healthcare providers to consider ways to continue providing well-child visits and preventive check-ups remotely, and develop guidance related to maintaining and promoting healthy child development in the home.
- Refer families to food and nutrition services, including the Special Supplemental Nutrition Program for Women, Infants, and Children and food banks, and assist with essential supply needs.
- Ensure that pregnant and postpartum women have access to prenatal and postnatal care and well-child care for infants.
- Conduct virtual screenings or refer to providers to conduct screenings for developmental delays, maternal depression, and other behavioral health concerns.
- Partner with local health departments to promote dissemination of key public health messages to prevent exposure to COVID-19.
- Partner with local schools to identify children and families who may benefit from virtual family support visits, especially for children not showing up to online classes and their families.
- Work with the state or local child welfare agency to develop local partnerships for families who were reported for abuse or neglect, but were screened out and need support.
- Disseminate resource lists and educational materials through outreach or services conducted through community and faith-based organizations or cross-sector partners (e.g., sharing parenting tip sheets or activity kits at meal pick-up points).
- Partner with infant mental health associations or mental health consultants to identify behavioral health services and supports able to serve families remotely, and to provide consultation or other resources for program staff to manage secondary stress.
- Partner with the local child protective services agency or infant-toddler court program to develop a response protocol for virtual work when child or family safety issues are identified. This includes assigning a “service facilitator,” such as a mental health provider/consultant or parent, family, and community engagement manager, to serve as a point of contact and support for staff and for families with more complex needs.

Some of these practices may live beyond the COVID-19 crisis, practices that we are finding help to build relationships with families that reach beyond classrooms and regular face-to-face visits. We can use this challenging moment to become the system that will help families individually and treats families holistically and with respect, that will keep children safe, be agile and creative to support parents and help strengthen their protective capacities, and that is fair and just. We need a system that sees ourselves in one another, a system that is rooted in kindness. We have

never needed community more. If we can be there for vulnerable families now in these challenging times, we can be there for them in the future. Through partnerships, we can continue to work through this crisis to strengthen families and communities. Please let us know how we can help and support you as you work toward our mutual goals. We appreciate all of the work that you do to support children and families, and thank you for navigating the daily challenges that have resulted from this public health emergency.

Sincerely,

/s/

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/s/

Ms. Shannon Christian
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Appendix A:

Selected Resources for Primary Prevention to Strengthen Families and Support the Whole Family

Resources for Families

National Child Abuse Prevention Month Resources

<https://www.childwelfare.gov/topics/preventing/preventionmonth/resources/resource-guide>

Resources for Child Care

<https://childcare.gov>

Supporting Families in Uncertain Times

<https://eclkc.ohs.acf.hhs.gov/family-support-well-being/article/supporting-families-uncertain-times-social-media-messages>

Understanding Trauma in an Early Childhood Context

<https://eclkc.ohs.acf.hhs.gov/video/understanding-trauma-early-childhood-context>

Understanding How Family Stress and Trauma Impacts Home Visitors

<https://eclkc.ohs.acf.hhs.gov/video/understanding-how-family-stress-trauma-impacts-home-visitors>

National Child Traumatic Stress Network

<https://www.nctsn.org/>

National Network to End Domestic Violence

<https://nnedv.org/>

CDC COVID-19 Stress and Coping Resources

<https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html>

This is the Moment for Community

<https://cbexpress.acf.hhs.gov/index.cfm?event=website.viewArticles&issueid=215§ionid=1&articleid=5545>

Center of Excellence for Infant and Early Childhood Mental Health Consultation

<https://www.samhsa.gov/iecmhc>

Selected Grant Programs

Child Care and Development Fund State Administrators

<https://www.acf.hhs.gov/occ/resource/ccdf-grantee-state-and-territory-contacts>

Community-Based Child Abuse Prevention (Title II of the Child Abuse Prevention and Treatment Act)

<https://friendsnrc.org/cbcap/state-assignments/>

Early Childhood Comprehensive Systems

<https://mchb.hrsa.gov/earlychildhoodcomprehensivesystems>

Head Start Grantee Locator: <https://eclkc.ohs.acf.hhs.gov/center-locator>

Head Start State Collaboration Offices

<https://eclkc.ohs.acf.hhs.gov/programs/head-start-collaboration-offices-state>

Maternal Infant and Early Childhood Home Visiting

<https://mchb.hrsa.gov/maternal-child-health-initiatives/home-visiting-overview>

Preschool Development Grants Birth through Five

<https://www.acf.hhs.gov/occ/resource/pdg-b-5-initiative>

Tribal Maternal, Infant, and Early Childhood Home Visiting program

<https://www.acf.hhs.gov/occ/home-visiting/tribal-home-visiting/grantees>

COVID-19 Policy and Funding Resources

Administration for Children and Families COVID-19 Response and Resources

<https://www.acf.hhs.gov/coronavirus>

Centers for Disease Control and Prevention COVID-19

<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

COVID-19 Maternal and Child Health Bureau Frequently Asked Questions

<https://mchb.hrsa.gov/coronavirus-frequently-asked-questions>

HHS Guidance and Information for Human Services Programs

<https://aspe.hhs.gov/coronavirus>

Centers for Medicare & Medicaid Services - COVID-19 Program Guidance and Information

<https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page>