

## Background

The NC Early Childhood Action Plan was created to help ensure all young children in NC are 1) healthy, 2) safe and nurtured, and 3) learning and ready to succeed by 2025.



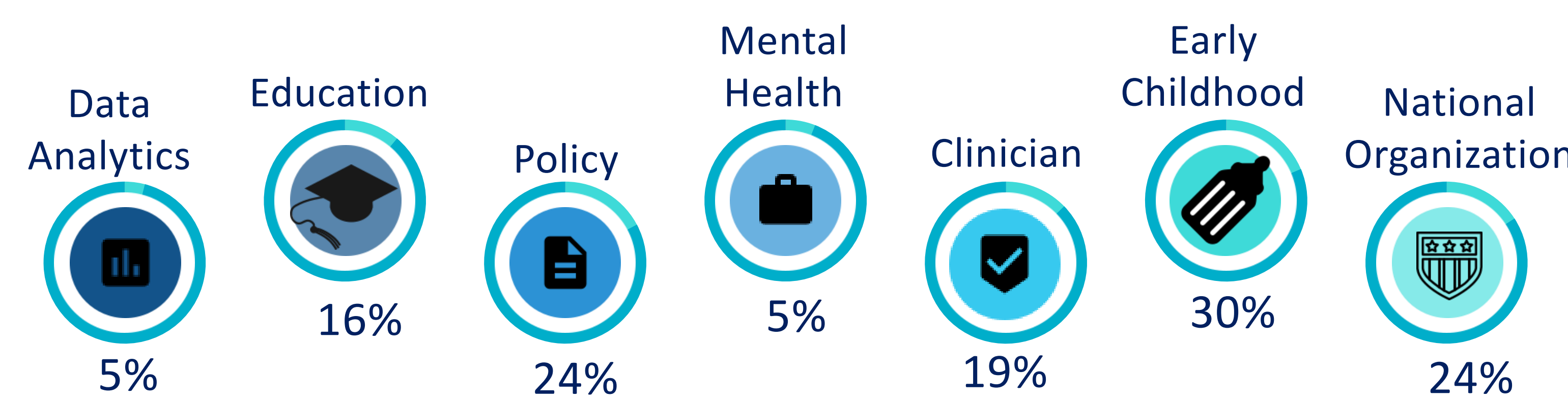
- One of the 10 overarching goals is to have a reliable, statewide measure of young children’s social-emotional health (SEH) and resilience at the population level.
- SEH is defined as a broad domain and includes emotional regulation, temperament, the ability to follow directions, and the ability to express wishes.
- SEH predicts long-term health and economic outcomes. Understanding and supporting SEH in young children is critical for ensuring optimal adult outcomes.

**Objective:** Create a national landscape of SEH screening and determine best practices to measure young children’s (0-5 years old) SEH at the population level in NC.

## Data & Methods

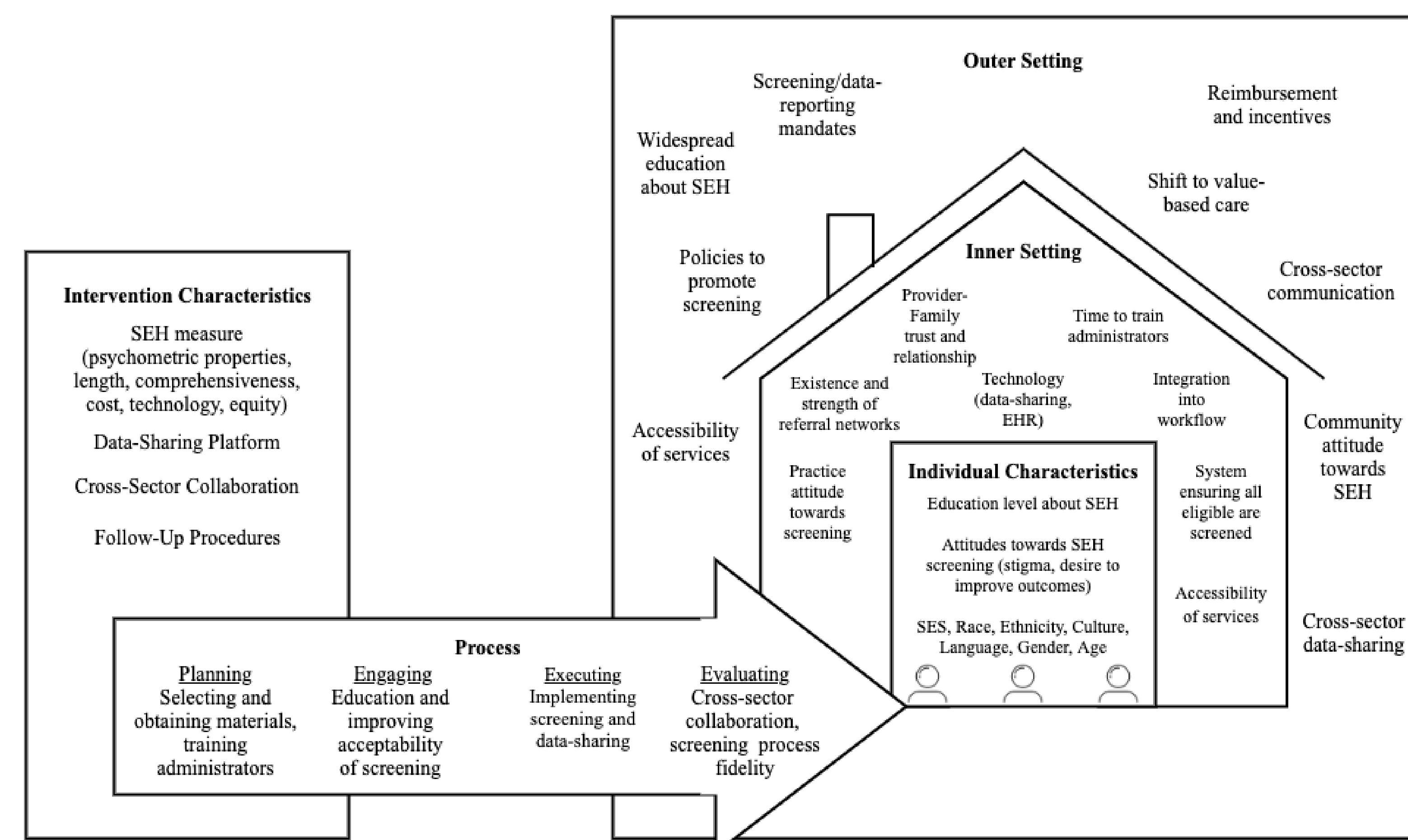


- 37 SEH experts in various sectors were interviewed (Figure 1).
- Key informants represented 19 states and 8 national organizations.
- Interviews centered around current efforts to monitor and collect data on early childhood SEH, implementation barriers, and policy levers for population-level screening.
- Content analysis of interviews was performed to guide our recommendations.



## Implementation Framework

An adapted Consolidated Framework for Implementation Research (CFIR) addressing several components to consider when implementing SEH measurement and monitoring



## Key Findings: Policymakers

Area	Primary Barrier	Recommendation
Population Level Screeners	Individual screeners cannot be aggregated	Use both individual and population level screeners
Equity	Lack of screeners that are validated for diverse populations	Ensure diverse screening population Make follow-up resources accessible to all
Data-Sharing	Lack of current data sharing system	Develop a statewide data-sharing system
Reimbursement	Lack of funding for SEH screening	Implement state policies to fund SEH screening for providers

## Key Findings: Providers

Area	Primary Barrier	Recommendation
Prioritizing SEH	Lack of understanding of importance of SEH	Education programs Incentivize SEH screening
Selecting an SEH Measure	Balancing length & comprehensiveness Workflow integration	Integration of measure into EHR
Accountability	Provider and family apprehension to screen	Establish follow-up procedures Utilize data-sharing systems
Ensuring Equity	Screening process is universally accessible but not equitable	Flexibility in selecting a measure

**Conclusion:** Many opportunities exist to improve the health of NC children by monitoring SEH and providing adequate follow-up.