




**STRATEGIES FOR REACHING FAMILIES**  
Rahil Briggs, PsyD  
National Director, HealthySteps


1

## Agenda

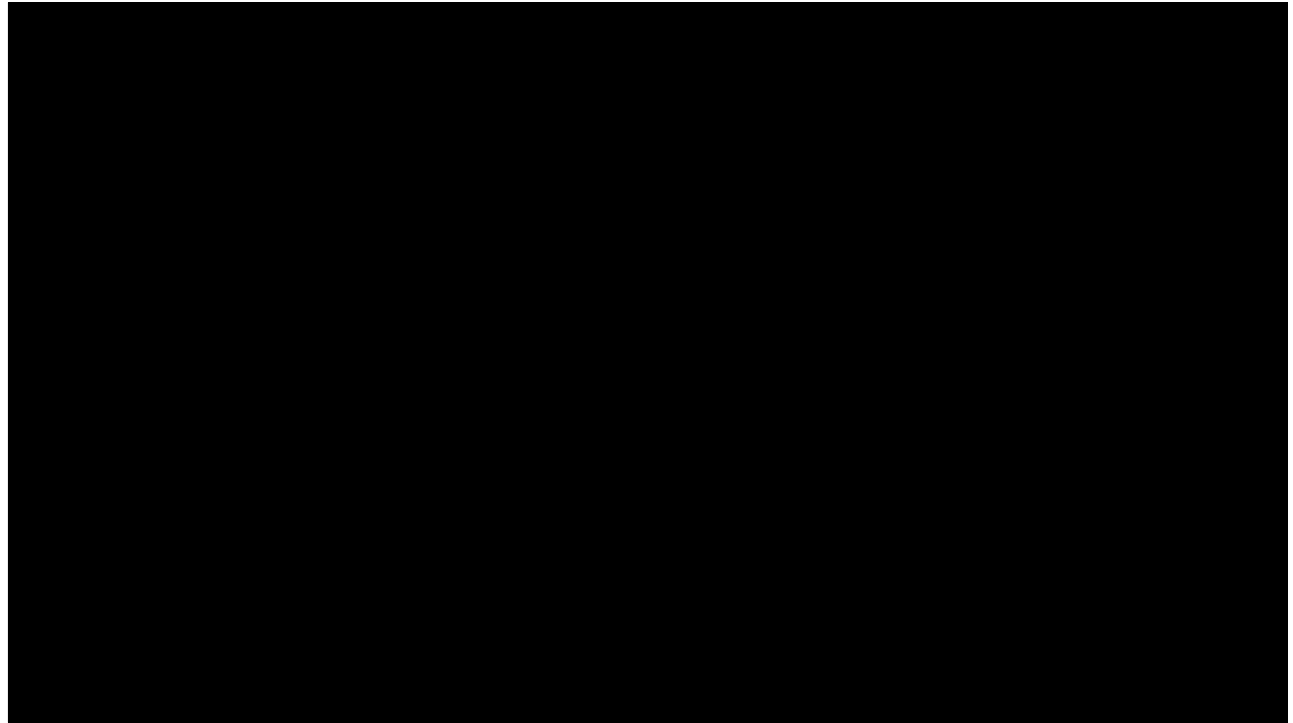
- 1**  
**Highlight the power of family engagement**
- 2**  
**Recognize barriers to family engagement**
- 3**  
**Identify potential solutions and best practices for improved family engagement**



2 © 2025 ZERO TO THREE. All rights reserved.



2



3

“There’s no such  
thing as a baby...

There is a baby  
and someone.”

— D. W. Winnicott



4

© 2025 ZERO TO THREE. All rights reserved.



4

## Centering families

As the Administration for Children and Families explains:

**“strong family engagement is central in promoting children's healthy development and wellness, including:**

- social-emotional and behavioral development;
- preparing children for school;
- seamlessly transitioning them to kindergarten; and
- supporting academic achievement in elementary school and beyond.”

5 © 2025 ZERO TO THREE. All rights reserved.



5

## Centering families

**Many systems are *intended* to serve families, but are they actually *designed* to serve them?**

- Meaningful family engagement can look different depending on the organization and setting, but at its core, it is a **partnership**
- Meaningful family engagement engages the **whole family** (not just moms)

**“I just hope that the voice of parents can be understood and not just heard.”**

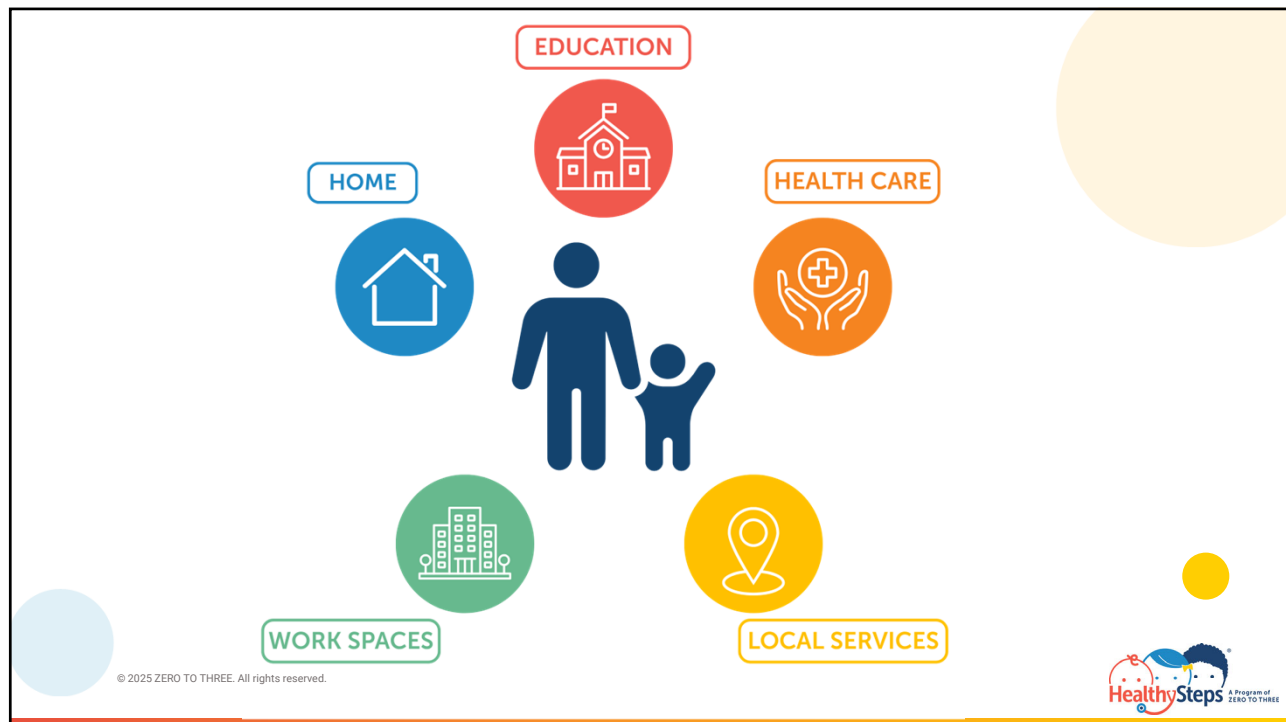
- Parent, Interview Study, Martine Lappé, PhD & Research Team

6 © 2025 ZERO TO THREE. All rights reserved.

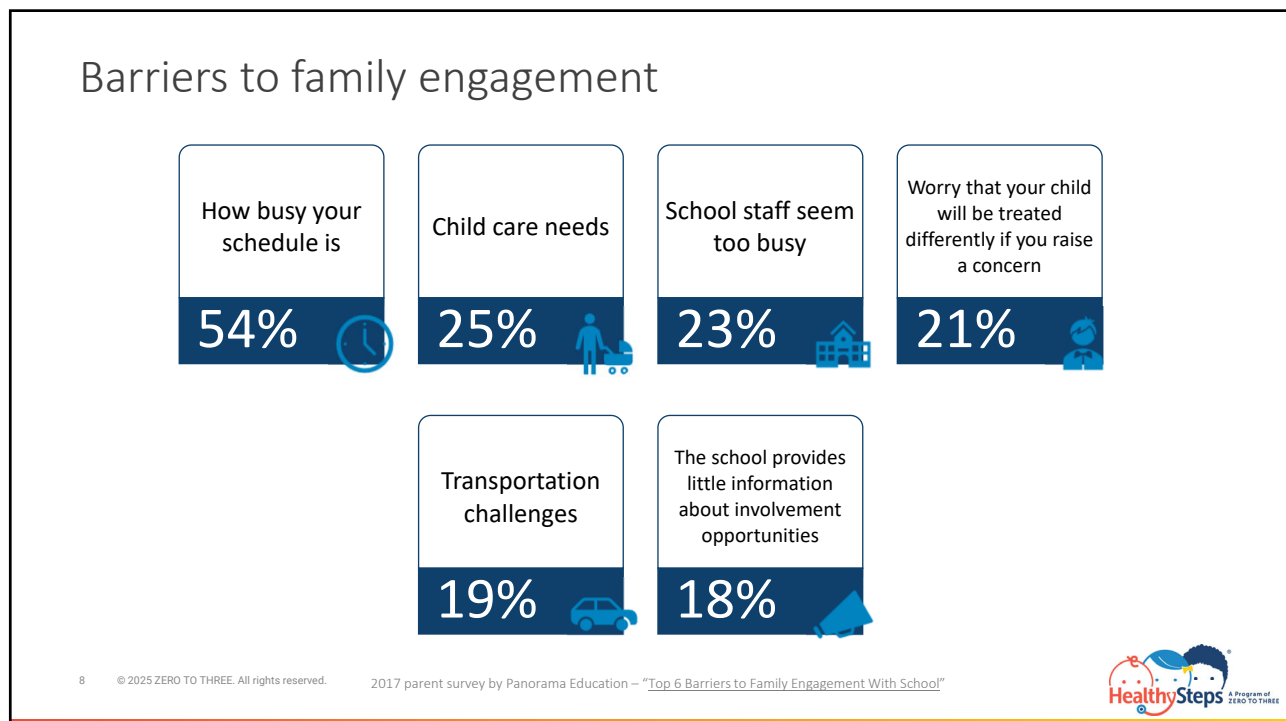
Adapted from: <https://www.acf.hhs.gov/opre/report/engaging-families-state-initiatives-case-study-lessons-learned>



6



7



8

## Barriers to family engagement

- In a [2018 survey](#), Texas families stated they **want to help their children but lack the confidence to support them academically due to uncertainty about how to interact with school personnel**, particularly if there are cultural and language barriers.
- The Texas survey also found that **teachers face several barriers** to family engagement and identified the need for preparation and supports to engage diverse families in their children's learning.
- A [2018 study](#) on family engagement and retention of young children in mental health care found that **key barriers were stigma, lack of integrated health care services, and a shortage of providers** with the necessary expertise in early childhood mental health care.

9 © 2025 ZERO TO THREE. All rights reserved.



9

## THREE MOTHERS, ON THE BRINK

Eleven months, multiple breakdowns, one harrowing realization: They've got to get back up and do it all again tomorrow.

**Why are so many parents 'so stressed they cannot function'?**

**Childcare Now Costs More Than College  
As Parents Fork Over \$36,000 a Year**

Image credit: The New York Times, The Hill, Newsweek



10

## Why Health Care Workers Are Burning Out

### *With Pandemic Money Gone, Child Care Is an Industry on the Brink*

Five months after the expiration of federal funds, running a child care business is more precarious than ever, and many parents struggle to pay tuition, surveys show.

## Solving the Mental Health Provider Shortage

Almost half of the U.S. lives in a mental health workforce shortage area.

Image credit: The New York Times & Psychology Today headlines



11

## Prioritization of public investment

Annual public spending per child on early childhood care.

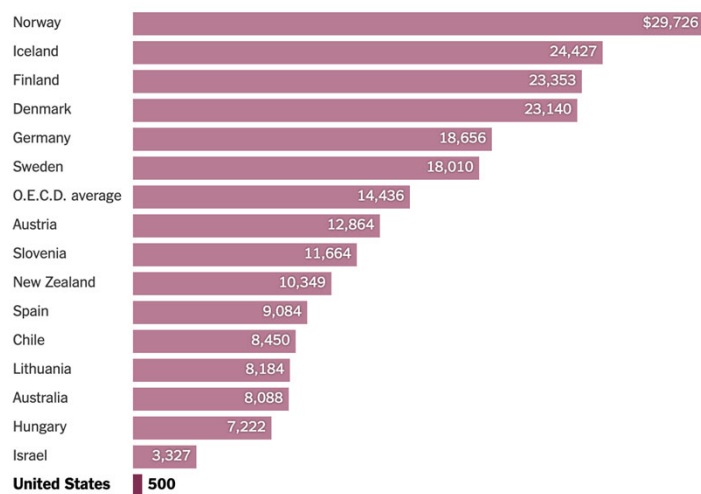


Image credit: The New York Times



12

## New York's public investment in families

### Strong family policies in NY include...

- Paid family leave
- Paid sick time that covers care for child
- Child tax credit (Empire State Child Credit) – including recent expansion!
- State Earned Income Tax Credit
- Medicaid expansion
- Housing access voucher program (pilot)
- Gov. Hochul's investments in programs that advance youth mental health

### Still room for improvement...

- Extend Medicaid/CHIP coverage to cover more behavioral health prevention/promotion
- Addressing the early intervention (EI) workforce shortage and associated barriers to accessing EI services
- Child care assistance

13

© 2025 ZERO TO THREE. All rights reserved.

SOURCES: *State of Babies Yearbook*, ZERO TO THREE, 2023.

Last Look, Schuyler Center for Analysis and Advocacy, May 2025



13

## Disproportionate experience of poverty

	New York	United States
Babies in families with poor or low income	37%	39%
Babies living in poverty	20%	19%
% of Black babies	34%	35%
% of Hispanic babies	25%	25%
% of AANHPI babies	16%	38%
% of White babies	13%	12%

14

© 2025 ZERO TO THREE. All rights reserved.

SOURCE: *State of Babies Yearbook*, ZERO TO THREE, 2023.

14

## Of the 650,000 babies and toddlers in NY...

- **35%** of those in families with low income have a **single parent** (vs. 19% of all babies/toddlers in NY)
- **8%** are in **grandparent-headed households**
- **25%** live in **crowded housing** (vs. 15% nationally)
- **4%** live **outside of a metro area** (vs. 8% nationally)

**Did you know?** The **cost of child care** is more than half (53%) of the average income of a single parent in NY.

15 © 2025 ZERO TO THREE. All rights reserved.

SOURCE: *State of Babies Yearbook*, ZERO TO THREE, 2023.



15

“ I had no one coordinating my son's care, to the point that I had a team of over 10 different health care professionals that I was managing at one point in time, and they all had differing opinions of each other.

**I was doing it all because there was no one, because our health care system is so fractional.**

*- 38-year-old mother of four children, ages 11, 8, 3, & 6 weeks*

16 © 2025 ZERO TO THREE. All rights reserved.

Credit: Parent Interview Study, Martine Lappé, PhD & Research Team



16



“ I would always love to have more information or different ways to like assess, you know, how my son is doing, and anything that we could improve upon.

But I do think the downside is that **parents already have so many checklists and so many expectations, whether direct or kind of assumed...**

*- 37-year-old mother of a 6-month-old son*

17

© 2025 ZERO TO THREE. All rights reserved.

Credit: Parent Interview Study, Martine Lappé, PhD &amp; Research Team



17

“ I could see parents being nervous like, ‘Okay, is this going to be documented like, is somebody going to be calling CPS on me?’ I could see that being the main concern for parents’ feelings. **Or, just feeling like, ‘Is this a safe space for me to open up about things at home?’**

So, I think that it needs to be said: ‘This is a safe space to talk about this.’ Because I did have a CPS case open against me from [my daughter’s] doctor and not going to her visits, and that was extremely hard... and I think that CPS is phenomenal. I think that it is absolutely necessary. **I’m glad that they came to my house, and that they were concerned about my child.**

**But what about parents and their well-being?** Because if CPS is being called, it’s likely that parents’ needs are also not being met... And I would like for parents to be advocated for, as well as children...”

*- 26-year-old mother of a 3-year-old daughter*

18

© 2025 ZERO TO THREE. All rights reserved.

Credit: Parent Interview Study, Martine Lappé, PhD &amp; Research Team



18

## Emily's Story

“ I am a mother from the Bronx that endured great adversity and lack of resources while raising my now 18-year-old son. From domestic violence shelters to being told ‘teen mothers from the Bronx don’t know anything,’ and much more, **urban areas are riddled with stereotypes that are eventually embedded into our DNA and make us hesitant to ask NECESSARY questions about our child’s development and needs... much less to ask questions about our own needs!** These same resources, while more notably available, still seem inaccessible to most.

**The social-emotional needs of so many 0–3-year-olds go unmet because families in low-income areas aren’t presented with the information so they can be better informed and prevent, to the best of their abilities, long-term impacts** of not rendering proper medical care—physical and mental.

19

© 2025 ZERO TO THREE. All rights reserved.



19



Emily Caraballo-Jimenez

Jun 13, 2016 · 2

You come across people in life that are meant to be for whatever the reason... No matter how many years go by, no matter how many conversations are or aren't had, no matter what the high or low points are- they are just in your

Even now, when I encounter someone who THINKS they can speak or treat myself or others in a demeaning manner because we are from a particular socioeconomic background, I think of her and remind myself there are people in the world, in OUR community that are willing to fight the good fight along our sides no matter how different they may be on paper, in color, or in any other way that others seem to feel gives them an upper hand.

son, I already had this strong sense or advocacy to get him the services he needed and not to be treated as another Bronx teen mom stereotype... but man oh man (or woman lol), when I met Dr. Briggs she lit several fires under me that I didn't know existed and even if I had known they were there, I wouldn't have had the courage to let them burn! When people ask me why I am so passionate about helping advocate for the community, she is one of the four people I give a tremendous amount of thanks to.

© 2025 ZERO TO THREE. All rights reserved.



20

## Barriers to family engagement

- **Lack of trust/comfort**
  - Culturally sensitive care
  - Need to equip professionals with the training and bandwidth to create that environment
- **Lack of access to services and connection between services**, particularly for lower-income and rural communities
  - Closing the referral loop (many barriers, including changing phone #s and addresses)
  - Transportation; language; formats – lack of accessibility, inconsistencies across services
  - Lack of resources and capacity for professionals makes it harder for them to support (or even identify need for support)
- **Funding/investment**
  - Historical focus on treating issues after they arise, not prevention/promotion; mental block against two-generation approach
  - Lack of reliable, robust data can make it hard to understand specific challenges and make the case for investment

21

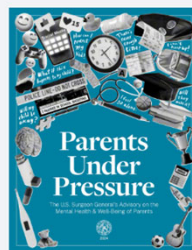
© 2025 ZERO TO THREE. All rights reserved.



21

## Surgeon General: Parents Are at Their Wits' End. We Can Do Better.

Aug. 28, 2024

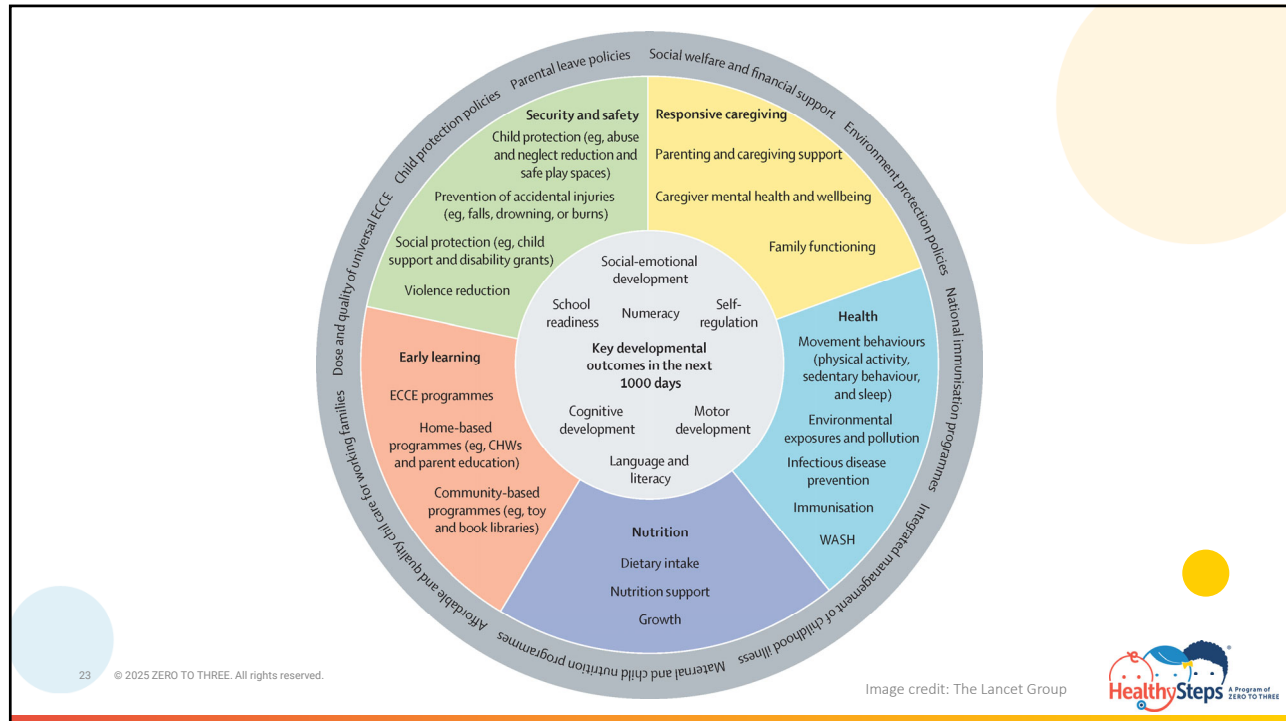


### Parents Under Pressure: The U.S. Surgeon General Advisory on the Mental Health and Well-Being of Parents

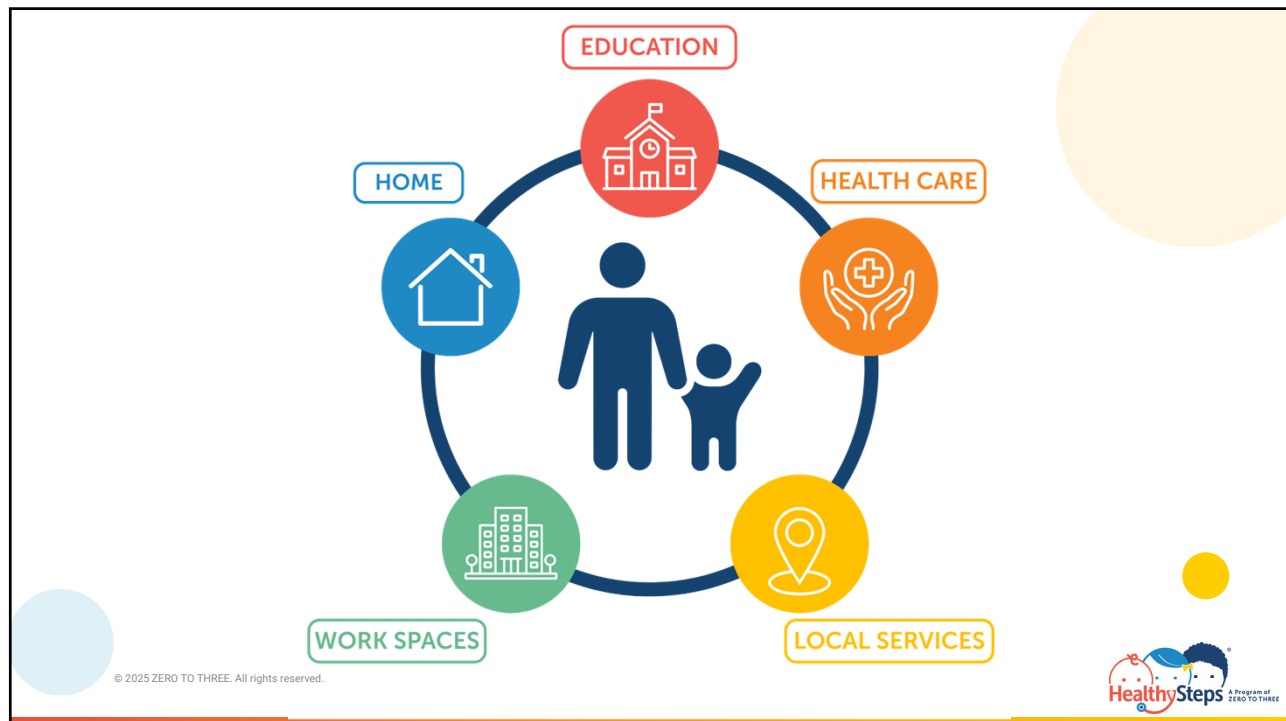
This Surgeon General's Advisory highlights the stressors that impact the mental health and well-being of parents and caregivers, the critical link between parental mental health and children's long-term well-being, and the urgent need to better support parents, caregivers, and families.

Image credit: *The New York Times*; HHS Office of the Surgeon General

22



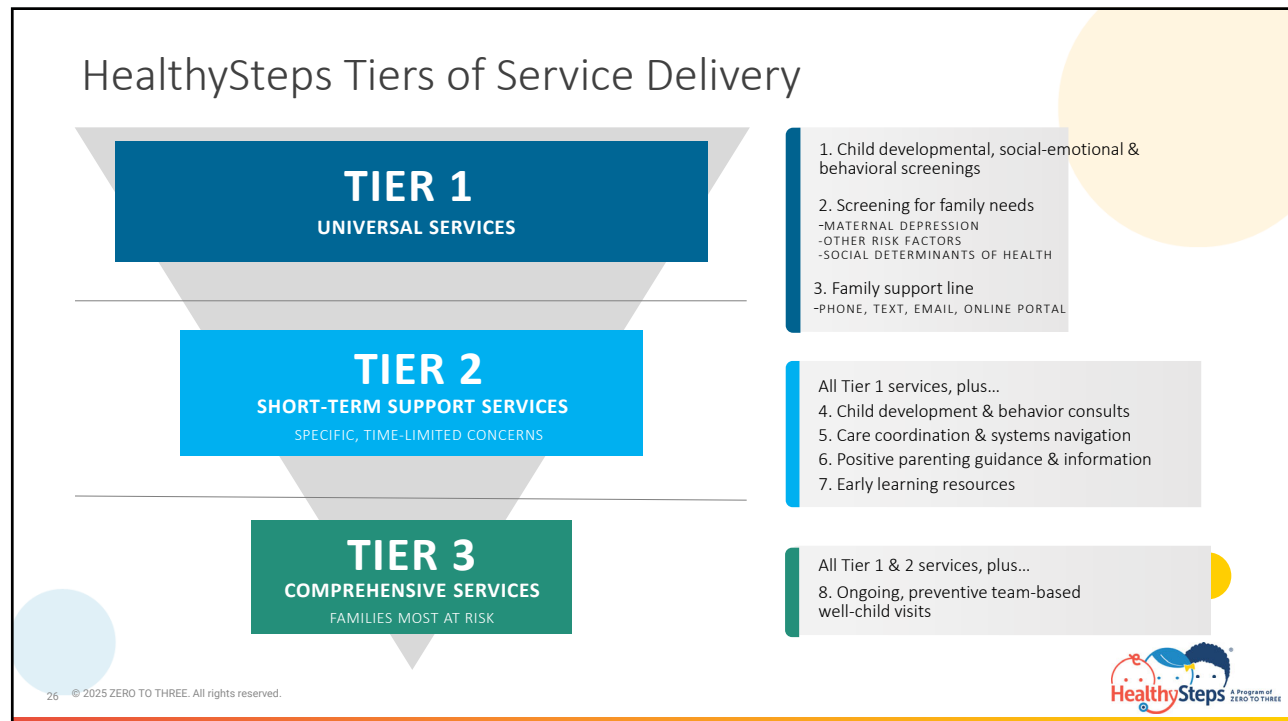
23



24

© ZERO TO THREE. All rights reserved.

25



26

## Pediatric Setting

<b>ACCESS</b>	Almost all families take their babies to see a pediatric primary care provider
<b>TRUST</b>	Parents trust their pediatric primary care provider
<b>ACCEPTED</b>	The pediatric office is a non-stigmatizing setting
<b>FREQUENT</b>	New parents attend 12-13 well-child visits within the first 3 years of life; half occur in the first year

27 © 2025 ZERO TO THREE. All rights reserved.

27

## National Network

MAY 2025

# 500,000+ children

ACROSS

# 346 sites

# 25 states

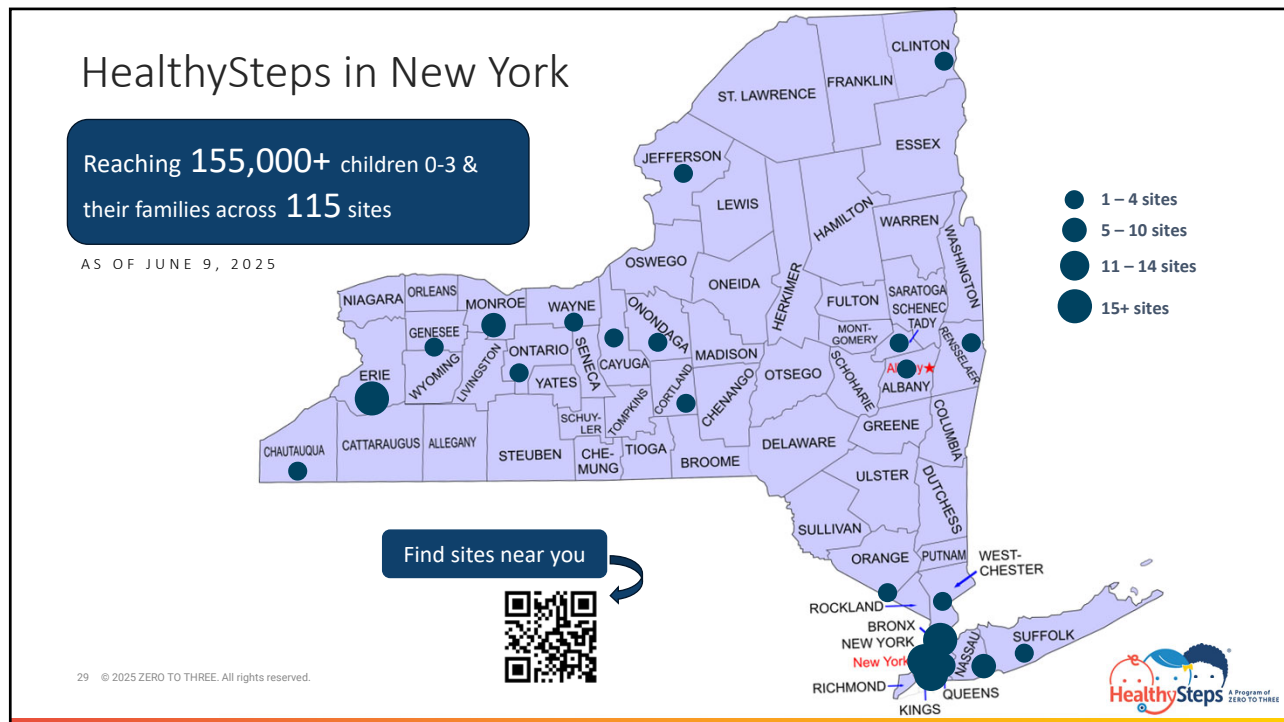
+ Washington, DC & Germany\*

28 © 2025 ZERO TO THREE. All rights reserved.

\* In partnership with the U.S. Department of Defense

28





29

## HealthySteps in New York

- Expanded from **1 site in 2006** to **115 sites** (and growing!)
- Private + public investment
  - NYS Office of Mental Health multi-year investment to fund ~200 new HS sites through a competitive procurement process (visit [the procurement page](#) to monitor for potential future RFAs)
  - Preventive psychotherapy benefit
- Legislation introduced (S7833, A8048) to provide enhanced reimbursement for pediatric practices with HealthySteps

30 © 2025 ZERO TO THREE. All rights reserved.

HealthySteps  
A Program of ZERO TO THREE

30



HealthySteps is so many things, I don't know where to begin. [M]y HS Specialist and everyone involved have been a **pillar of support** for my family. Getting testing, evaluations and a diagnosis for my son, I can attribute to my HS Specialist **steering me in the right direction by always taking my concerns seriously**. Applying for early intervention services not once, not twice, but three times and finally getting accepted—I can also attribute this to my HS Specialist being an **advocate for my family**. [...]

HealthySteps has changed the trajectory of my child's life for the better. **Sometimes it seems too good to be true**—the care, support, and resources. I can't imagine my life without HealthySteps."

- Victoria, Brooklyn, NY

31

© 2025 ZERO TO THREE. All rights reserved.



31



32

© 2025 ZERO TO THREE. All rights reserved.



32



## HealthySteps Specialist Competencies

Knowledge & Skills	Dispositions	The HealthySteps Specialist
	Area 1: Diversity, Equity, Inclusion, Accessibility & Belonging (DEIAB)	
	Area 2: Child Development & Well-Being	The Caregiver-Child Relationship
	Area 3: The Caregiving Relationship	
	Area 4: Caregiver & Family Well-Being	Contexts
	Area 5: Health Care Systems	
	Area 6: Community & Early Childhood Systems of Care	
	Area 7: The HealthySteps National Network	
	Area 8: Supervision for HealthySteps Specialists	The HealthySteps Specialist Supervisor

33

© 2025 ZERO TO THREE. All rights reserved.



33

## Key Principles

- Holding the **three unique perspectives in the room – the caregiver, baby, and professional** – with the family in the center
- **Trauma-informed care** – changing perspective from “what is wrong with you?” to “what happened to you?”
- **Avoid offering information without first asking the caregiver if they want the information;** don’t make assumptions about what they know or what they want to know; respect the expertise of the caregiver (**strengths-based approach**)



34

© 2025 ZERO TO THREE. All rights reserved.



34



35

“ It's always finding the delicate balance of delivery, right? **And not making it feel like the parents aren't doing enough. Because parents are already struggling as it is to try and feel like they're doing the right thing...** That's kind of by far the most important thing... It's just that delivery that can make such a difference.

- 29-year-old Salvadoran American, married father of a 19-month-old son

**[Our HealthySteps Specialist] always listens without judgment and takes her time with us.** She sent us home with an immediate resource but also let us know she was going to do her own research to find a better match for our family's situation. To know that she cared enough to do that is amazing.”

- HealthySteps parent

36

© 2025 ZERO TO THREE. All rights reserved.

Credit for first quote: Parent Interview Study, Martine Lappé, PhD &amp; Research Team



36

## Case Study: Maternal Depression Screening Rates

- **Summit Healthcare Regional Medical Center** serves families in rural northeastern Arizona. They chose to undertake a continuous quality improvement (CQI) project focused on improving maternal depression screening rates.
- **The problem:** 41% completion rate for maternal depression screening (EPDS)
- **Potential factors:**
  - Stigma about maternal depression
  - Lack of mental health care providers and vast service area
  - Prohibitive costs or insurance issues
  - Lack of awareness of the impact of maternal depression on child development
  - Gaps in data collection and entry

37 © 2025 ZERO TO THREE. All rights reserved.

<https://www.healthysteps.org/resource/cqi-snapshot-summit-healthcare-regional-medical-center-improves-maternal-depression-screening-rates-in-rural-arizona/>



37

## Case Study: Maternal Depression Screening Rates

- **Solution:** Script for staff to introduce the maternal depression screening, with language aimed at decreasing stigma. And a different script for follow-up screening.

**The Script:** You may remember hearing about how common it is to have feelings of depression or anxiety during this time of so many changes. All of us here really care about you and we want to check in on how you are feeling. To help us with that, it's important that you complete this short questionnaire before you leave today.

**Rescreening script for subsequent visits:** We've given you the postpartum depression screen before. At this visit we screen again to check on how you are feeling. I'll leave this for you to complete before the end of your visit.

38 © 2025 ZERO TO THREE. All rights reserved.

<https://www.healthysteps.org/resource/cqi-snapshot-summit-healthcare-regional-medical-center-improves-maternal-depression-screening-rates-in-rural-arizona/>



38

## Case Study: Maternal Depression Screening Rates

- **Result:** Improved screening rate from **41% to 92%** over 19 weeks!

This project allowed our HealthySteps Specialists to **reflect on their personal discomfort addressing maternal depression**. Barriers included religious beliefs, general comfort addressing sensitive topics, and concerns about 'prying' into moms' mental health status during pediatric well-child exams. During reflective supervision, we were able to talk through the barriers.

As professionals, we want to provide the best possible care for families, but measuring our success with this and taking concrete steps to improve can be elusive.

39 © 2025 ZERO TO THREE. All rights reserved.

<https://www.healthysteps.org/resource/cqi-snapshot-summit-healthcare-regional-medical-center-improves-maternal-depression-screening-rates-in-rural-arizona/>



39

“ I think the reason that they're so guarded is because a lot of our families have worked with social services, CPS, and foster care. So, when you come in and introduce yourself, and then you're giving them these screening tools, they're thinking, **"Why do you want to know all of this?"** Especially ACEs.

And they don't always tell the truth. And that's okay. Because **their narrative over time tells me the truth**. But I think that **the bottom line is that it's fear, it's distrust**. They don't know me. They could tell me something very personal, and then they may think, "Well, she'll probably tell CPS—she'll call me in." But again, **slowly, they realize that's not the case**.

- Bernadette McDaniels, HealthySteps Program Manager & Specialist, Ellis Medicine, Schenectady, NY

40 © 2025 ZERO TO THREE. All rights reserved.



40

“ My HealthySteps Specialist was able to **understand my culture and it made it easy to speak to her** about my son’s health and what he needs help with.”

- *HealthySteps mom*

41

© 2025 ZERO TO THREE. All rights reserved.



41

## HealthySteps Caregiver Resources



### WHAT’S UP? AGE-BASED NEWSLETTERS

Developmental newsletters, written with caregivers of infants and toddlers in mind. Each issue follows the well-child visit schedule and includes what to expect from ages 0-3, Q&As, and tips for supporting development.



### EARLY LEARNING HANDOUT SERIES

Each handout suggests no- and low-cost activities to enhance caregivers’ ability to stimulate their baby’s development and promote school readiness. Activities are offered in the following areas: language, managing feelings, science & math, problem-solving, physical skills, and art & music.



### TOPICAL HANDOUTS

Short articles written for caregivers, that provide information on a range of infant and toddler topics (sleep, feeding, tantrums, etc.). These materials include helpful takeaways for caregivers to address particular concerns.



### SPARKS PARENT VIDEO SERIES

A [free, online video curriculum](#) for caregivers that blends social-emotional-cognitive development with medical, safety, sleep and nutrition topics, and promotes positive parenting behaviors. Features both family and professional voices. Caregivers can sign up to receive via text.

All handouts available in Arabic, Bengali, English, Haitian Creole, Simplified Chinese, Spanish, & Vietnamese.

42

© 2025 ZERO TO THREE. All rights reserved.



42

# Positive Parenting Handout: Tantrums

## Temper Tantrums



Tantrums are normal and common during the toddler years. They often begin when a toddler gains new skills and independence. Some children have a lot of tantrums and other children have fewer. They can be mild or intense. However, they are to be expected!

Children have tantrums when they are frustrated. They might also tantrum when they are hungry, tired, or getting sick. Tantrums tell you that your child has lost control and needs help. They can't stop themselves from acting on their desires and feelings. The part of the brain that allows them to regulate their emotions and behavior isn't well developed yet.



### SOME TIPS FOR BEFORE YOUR CHILD LOSES IT

- **Decide which behavior really matters.** Sometimes you can avoid the power struggle that might lead to a tantrum. Get clear on what is important, and where you can be flexible. For example, can you live with an outfit that doesn't match if your child wants to choose their own shirt?
- **Do some behavioral "detective work."** You can sometimes help by understanding your child's need and changing your behavior. Does your child have an easier time at the grocery store after a nap? Make changes to your schedule and routines when you can.
- **Offer advance notice when an activity is about to end.** Say, "When this book is finished, we're going home." This heads-up will work sometimes, but not all the time.
- **Try distraction, sometimes called redirection.** If your child is focused on something they want or stuck in a feeling, try a change of activity or scenery. Sing a silly song. Let them play with water.
- **Give some choices.** Ask, "Do you want the blue or red cup?" But avoid asking questions if they have no choice. For example, when it's bedtime, don't ask, "Do you want to go to bed?"
- **Offer an acceptable way to "get the mad out."** Try ripping paper, stomping feet, pushing the wall, or punching a pillow.

© 2025 ZERO TO THREE. This is a reprint of the program approved by the HealthySteps National Office (Program) and which is an asset of the HealthySteps National Office. It is not to be reproduced or distributed in any form for the personal use of any individual, organization, institution, or entity, including but not limited to translations, and/or replication of the materials are expressly prohibited without the prior written authorization of ZERO TO THREE.

43

© 2025 ZERO TO THREE. All rights reserved.

- **Explanation of developmental context**
- **Concrete tips for what to do**

Provide parents with anticipatory guidance, education, information and resources that can help them parent through the different stages of child development and focus on being a proactive, positive parent



43

“ We want parents to be the hands that let their child go out and explore and welcome them back, but **sometimes parents need hands, too**, and so how can we be that support for them?

— Allison Leiber, HealthySteps Specialist & Program Manager, One Brooklyn Health

This is all I know and it's the **only place that I really feel safe and accepted.** ”

— Anna, HealthySteps parent, NY

44

© 2025 ZERO TO THREE. All rights reserved.



44

## HealthySteps Helps Close Gaps



Ensures more frequent screenings, opportunities for prevention, and connection to treatment for maternal depression



Provides age-appropriate nutritional guidance



Strengthens early social-emotional development



Connects families to early intervention services



Helps mothers find success with breastfeeding



Increases attendance at well-child visits

45 © 2025 ZERO TO THREE. All rights reserved.



45

## Family-Centered Design



An approach to creating programs, services, products, or systems that **puts families' needs, values, experiences, and goals at the center of decision-making**. Key principles are:

- Families as partners
- Respect for family uniqueness
- Holistic support
- Accessibility and usability
- Empowerment and strengths-based approach

**Resource:** Family Voices' [Family Engagement in Systems Assessment Tools](#) (FESAT)

- Self-assessment that early childhood organizations can use to plan, assess, and improve family engagement in policies, programs, and other systems-level initiatives. (More info [here](#).)

46 © 2025 ZERO TO THREE. All rights reserved.



46



# Family Advisory Purpose Statement

*The HealthySteps Family Advisory Group supports the expansion of services to help make materials and programming more approachable and user friendly for real life families. We are deeply dedicated to an all-inclusive experience for every family, every dynamic, every (healthy) step of the way!*

47 © 2025 ZERO TO THREE. All rights reserved.



47

## Parent Leaders: Keys for Implementation

- There is a **high level of commitment** to support parent leadership.
- There are **at least two parent leaders** to support each other and represent parent voice at the site, state, or national level.
- There is an **identified staff support person** within the program committed to parent leaders that can provide a reflective space and can ensure parent leaders have adequate preparation, time to debrief, and support within the team.
- There is **clarity of everyone's role**, and it is clearly explained to all, including parent leaders.
- Parent leaders have the **information and resources they need to participate** (for example, virtual accessibility, interpreters, etc.).
- Parent leaders have **equal voice/partnership** with the other professionals on the team.
- Parent leaders are **representative** of the races, ethnicities, gender, cultures of the state/site demographics.
- Parent leaders can **bridge the gap** between families and other professionals in the decision-making process of practice change.
- Parent leaders are **active participants** in priority initiatives/collaboratives.

48 © 2025 ZERO TO THREE. All rights reserved.

Adapted from ZERO TO THREE, Safe Babies, "Parent Leaders Are Vital for Stronger Early Childhood Systems," 2023.



48



“ We need advocates for families that can't advocate for themselves. Maybe because they don't have the capacity to, they don't have the means to, the list goes on. But I feel like it's not fair to let people slip through the cracks.

### Why not have a safety net?

And the medical system has let me slip through the cracks quite a bit... so I think having advocates connected to it would help.

- 26-year-old Native American, single mother of a 3-year-old daughter

49

© 2025 ZERO TO THREE. All rights reserved.

Credit: Parent Interview Study, Martine Lappé, PhD &amp; Research Team



49

## Call to Action

- Think about your work, the system(s) you're a part of and/or have influence over.
  - Are there things you can start doing on your own? Are there things that may be feasible on a larger scale?
- Share resources with your team, especially leadership when possible; ask:
  - “How do we think about family engagement as part of our work and overall guiding strategy?”
  - “Did you know that there is [RESOURCE] from [CREDIBLE SOURCE]?”

*Consider different ways to share... is it in a conversation with your supervisor and/or supervisees, in a team meeting, in a digital channel, a brown bag lunch and learn.*

*Are there others you work with that are willing to advocate with you?*

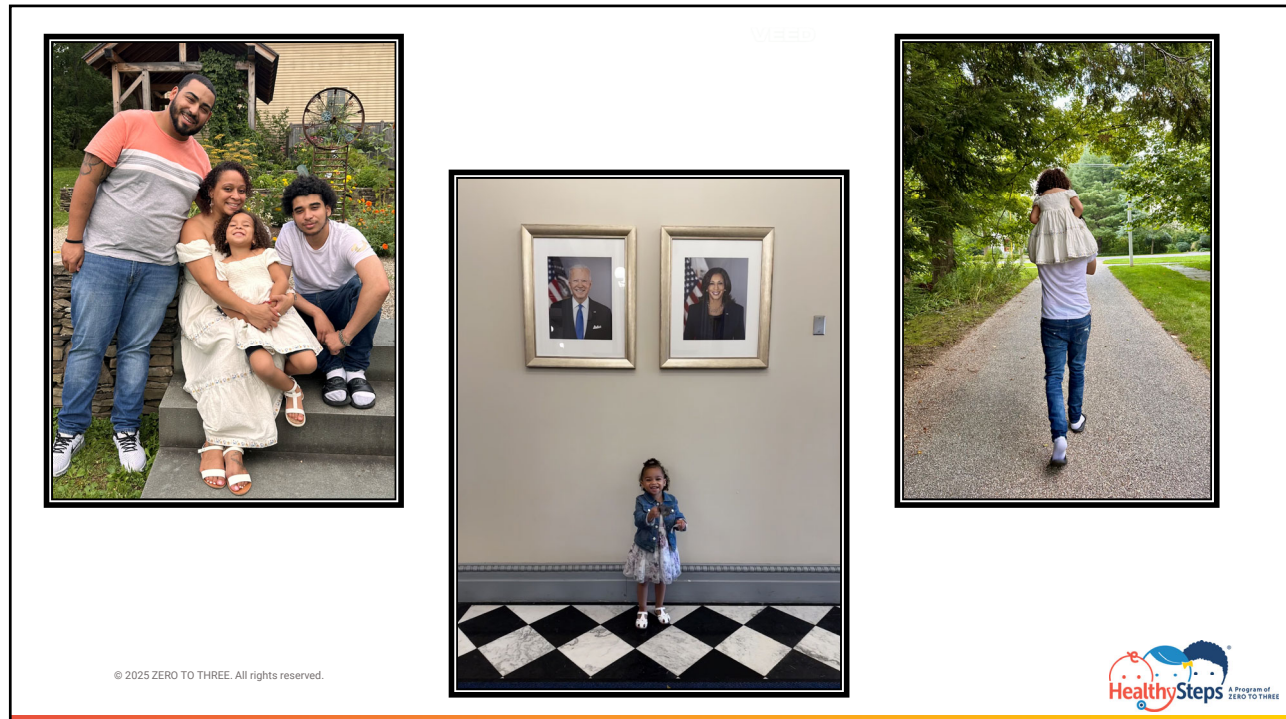
- What positive outcome(s) will this approach offer? Make sure that's part of your pitch.
  - When possible, include tangible examples of professionals and families validating the value of implementing the resource/strategy
  - Back it up with data when possible

50

© 2025 ZERO TO THREE. All rights reserved.



50



51

“I would just call in, I would just talk to [my HealthySteps Specialist] **even for 5 minutes, and I just felt better.**”

— Teresa Cox-Bates, HealthySteps mom, One Brooklyn Health, Brookdale

Kholood Eid for NPR

52 © 2025 ZERO TO THREE. All rights reserved. <https://www.npr.org/sections/health-shots/2023/11/29/1215606941/parent-help-to-prevent-childhood-trauma>

HealthySteps  
A Program of  
ZERO TO THREE

52

Thank You



HealthySteps.org



HealthyStepsZTT

