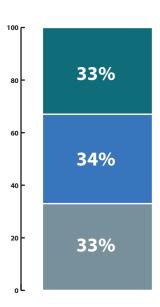


Caregiver Perceptions and Needs:

Behavioral Health

RACE AND ETHNICITY



- Asian/Asian American
- Black/African American
- Latino/Latina/Latinx

"I did think about going to one, but I don't know where to start. Do I go to family doctor, and get referred? I go to school, and school has those kinds of doctors. Got a letter saying school offers therapy. I haven't gone due to limited time, schedule..."

- Parent, Los Angeles County

INTRODUCTION

The Preschool Development Grant-Renewal (PDG-R) helps states assess and streamline the Early Learning and Care (ELC) mixed delivery system to improve quality. The Child Care Resource Center (CCRC) leads California's efforts to engage families in feedback sessions that inform policymakers on ways to improve the ELC system.

CCRC hosted a feedback session in July 2023 to discuss caregivers' perspectives and attitudes toward behavioral health, including behavioral health resources and supports for caregivers and for children. Six caregivers from California participated in the group, representing Los Angeles, Sacramento, San Benito, and San Francisco counties.

CAREGIVER PERCEPTIONS OF BEHAVIORAL HEALTH

Five of the six participants in this group had previously accessed behavioral health services and they all expressed acceptance of the term 'behavioral health' and of accessing these services. However, all caregivers also noted significant barriers to accessing behavioral health services. The **most common barriers were high cost, stigma in requesting services, long waitlists, time conflicts with traditional business hours, and lack of knowledge** on how to request services the first time. Overall, all participants, regardless of whether they had previously accessed services, shared similar information throughout the group. There were only two main distinctions. Among caregivers who had previously accessed services, some shared having had negative experiences with providers due to lack of cultural awareness. The caregiver who had not previously accessed services shared concerns about privacy, and whether his behavioral health services data would be securely stored.

Caregivers overwhelmingly agreed that **the type of behavioral health resource they would prefer were parent groups or community support groups** wherein caregivers can connect with each other and share similar experiences. Caregivers agreed that these groups could offer a space for them to support and learn from each other's stories, as well as share resources. Caregivers noted that these groups could help them feel like they are not alone with their struggles in parenting.

In addition, caregivers shared that **parenting classes** or training sessions would be helpful behavioral health resources. They would like to see topics such as **child development, developmental milestones, school readiness, and behavior management**. For example, learning how to appropriately respond to a tantrum would reduce stress for caregivers and for children. Overall, caregivers would like knowledge on how to effectively support their children in developmentally appropriate ways.

When asked for their opinions on the promotion of behavioral health services, caregivers expressed the desire to see an increase in **marketing to raise awareness** and to normalize access. Caregivers would like to see relatable marketing with representative persons or images they can relate to. For instance, the use of testimonials was one popular suggestion. Behavioral health advertisements can help send the message that caregivers are not alone in their struggle.



Behavioral Health Page 2 of 2

SUPPORTING THEIR CHILDREN'S BEHAVIORAL HEALTH

When asked about what they do to support their children's behavioral health, caregivers all discussed the importance of **meeting their child's individual needs**. For instance, one parent shared that because she knows her child struggles with verbalizing his emotions, they bought him a notebook where he can write his emotions down. A common theme among caregivers was the desire to raise their children differently than the ways in which they were raised as children. For example, one caregiver shared that she encourages her child to express his emotions, regardless of whether they're at home or out at a restaurant. She shared that while it can be triggering for her to remember she was taught to hide her emotions as a child, she pushes through in hopes of raising her child better than how she was raised. Overall, caregivers noted that they try to apply practices like encouraging and normalizing their children's emotional expression according to their child's individual needs.

RECOMMENDATIONS FROM CAREGIVERS

- ➤ Create parent support groups or promote existing parent support groups. Caregivers agreed that meeting with others who can relate to their ongoing experiences as a parent would greatly benefit their behavioral health. Groups could provide a support network (e.g., find resources, learn from other's experiences). Sub-group communities (e.g., single mom groups) could increase usefulness. Groups should be accessible (i.e., nearby, or virtual), held at convenient times for families (e.g., evenings), and marketed to help people find nearby groups.
- ▶ Provide no-cost classes or workshops for parent audiences. To reduce stress, caregivers would like to learn how to better communicate with their children and manage situations, like tantrums, in an effective and developmentally appropriate manner. Helpful course topics may include behavior management, school readiness, and developmental milestones.
- ▶ Increase the promotion of behavioral health services using relatable and diverse marketing. Behavioral health services advertisements that specifically use representative images or people, can help normalize utilization of behavioral health services. Ads can help remind people they are not alone in struggling. Social media could be a great marketing platform for testimonials.
- ▶ Allow flexibility in accessing the behavioral health system. Flexible appointment times that accommodate caregiver's work schedules, child care hours, and children's school schedules would help caregivers access services. Policies that encourage employers to accommodate regular employee access to behavioral health sessions during business hours may also help.



SUPPORTING THEIR OWN BEHAVIORAL HEALTH

Regarding supporting their own behavioral health, caregivers acknowledged both challenges and successes. One common challenge that some caregivers shared was **taking the time to acknowledge their own emotions**. For instance, one caregiver discussed how she was accustomed to not dealing with her stress; and another caregiver voiced that she was raised to hold her emotions in. However, caregivers who experienced this challenge also talked about how they're working to overcome it. All caregivers shared self-care activities that they intentionally engage in to take care of their own behavioral health, the most common being: writing/journaling, permitting themselves to feel their emotions and let their emotions out, spending some quiet time alone, and shopping.

For questions about this study, please contact: Susan Savage, ssavage@ccrcca.org or 818.349.3095.



