Definitions & Descriptions of Core Concepts & Related Resources

Collaborative Coordinators requested a companion piece to define or describe some of the key concepts contained in the statewide strategic framework. This document can also stand alone because so many of these concepts reflect the vision and values of Collaboratives. The purpose of this document is to clarify certain terms or phrases and create common language and understanding around them. There are also some links to other resources providing more context. Many concepts are closely connected or interrelated; thereby, reflecting and reinforcing the collaborative characteristic of integration.

**ACEs (Adverse Childhood Experiences)** can affect children’s developing brains so profoundly that the effects show up decades later. The CDC-Kaiser Adverse Childhood Experiences Study, a groundbreaking public health study, discovered that childhood trauma leads to the adult onset of chronic diseases, depression and other mental illness, violence and being a victim of violence. As the number of ACEs increases, so does the risk for these outcomes.

- [ACEs Connection Network](#)
- [ACEs Too High](#)
- [Adverse Childhood Experience (ACE) in Minnesota (MDH)](#)

**Brain Development:** Early experiences affect the development of brain architecture, which provides the foundation for all future learning, behavior, and health. Just as a weak foundation compromises the quality and strength of a house, adverse experiences early in life can impair brain architecture, with negative effects lasting into adulthood.

- [American Academy of Pediatrics](#)
- [Center on the Developing Child (Harvard University)](#)

**Child Centered** approaches focus on a child’s unique needs and best interests to strengthen the child’s physical, cognitive, and social functioning. Services and supports respect and respond to the qualities (developmental, cultural, etc.) of the individual child to ensure safety and well-being.

- [Child Centred Perspective](#)
- [Principles for Child Centered Practice](#)

**Children’s Mental Health Continuum** refers to a comprehensive range of programs and services for infants, children, and youth with mental health concerns. The continuum extends from less intensive care (promotion/prevention/early intervention) to more intensive care (late/crisis intervention).
Culturally and Economically Affirming, Responsive, and Inclusive: To be culturally responsive means that we proactively and assertively work to understand, respect, and meet the needs of people who come from cultural and economic backgrounds different from our own. Being able to capitalize on diversity so as to enrich the overall experience. Culturally and economically affirming, responsive, and inclusive schools and communities should be places that are welcoming to all, where all narratives are present within the organization. Students and residents should be exposed to a wide variety of cultural experiences and provided with critical thinking opportunities that aid in the development of an expanded world view.

- Respect and understanding for each person’s unique experience of “growing up”
- Behaviors, attitudes, policies, and structures enable agencies and staff to work effectively cross-culturally
- Have the capacity to (1) value diversity, (2) conduct self-assessment, (3) manage the dynamics of difference, (4) acquire and institutionalize cultural knowledge, and (5) adapt to the diversity and cultural contexts of communities
- Have the capacity to communicate effectively, and convey information in a manner that is easily understood by diverse audiences including persons of limited English proficiency, those who have low literacy skills or are not literate, and individuals with disabilities.

Person centered --- Access for all --- Address disparities and ensure equity

“Making sure that the system is available to kids of all ages, ethnicity, culture, socioeconomic status, etc.” (Collaborative Survey)

Data Driven is an adjective used to refer to a process or activity that is spurred on by quantitative or qualitative data, as opposed to being driven by mere intuition or personal experience. In other words, the decision is made with hard empirical evidence and not speculation or gut feel.

- Evidence-based, practice-informed and community-defined practices drive accountability, decision-making, and quality improvement
- Supported by documented scientific evidence or study
- Supported by providers’ and families’ experiences
- Supported by outcomes evaluations

Disparities are the lack of equality to differences in access to or availability of services based on racial, ethnic, social-economic, health, education, age, rank, gender, etc. Health disparities are preventable differences.
Healthy People 2020 defines a health disparity as “a particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

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<th><strong>Children’s Mental Health Reducing Disparities (DHS)</strong></th>
<th><strong>Health Disparities (CDC)</strong></th>
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<td><strong>What are Health Disparities &amp; Health Equity?</strong></td>
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**Equitable Communities** are economically, environmentally, and socially healthy communities with equal access and opportunities to all people within the community. Equitable communities bring knowledge, opportunity, and respect to underserved communities by empowering underserved communities to promote economic and social justice.

Healthy People 2020 defines health equity as the “attainment of the highest level of health for all people. Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities.”

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<th><strong>Creating Healthier, More Equitable Communities</strong></th>
<th><strong>Health Equity (MDH)</strong></th>
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**Family Driven** means families have a primary decision making role in the care of their own children as well as the policies and procedures governing care for all children in their community. This includes: choosing culturally and linguistically competent supports, services, and providers; setting goals; designing, implementing, and evaluating programs; monitoring outcomes; and partnering in funding decisions.

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<th><strong>The Evolution: Family-Driven Care as a Practice</strong></th>
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**Healthy Cultural, Racial, and Social Competencies**: Having the (ability to) understanding, appreciation and interactions with persons from cultures and/or belief systems other than your own. Then being able to adapt interventions and approaches to the specific culture of the child, family, or social group/community. People need a place that is not only identity affirming but also systemically affirming.

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<th><strong>Cultural Competency (DHS)</strong></th>
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Healthy Cultural, Racial, and Social Identities: People are able to fully and freely choose, experience, and express their cultural, racial, and social identity. Community members and staff need to have self-awareness regarding their own racial identity development and privilege in order to better be able to meet the educational needs of all students and residents. Promotion and development of social and racial identities must be integrated into systems as a whole.

“Healthy racial, social, and cultural identity development for children’s thriving behavior and academic success throughout school and career” (Collaborative Survey)

Holistic Approaches embrace a healthcare philosophy that takes into full consideration the physical, mental, and social factors of health care before any evaluation or treatment is delivered. Recognizing mental health is a function of the complex interplay between multiple domains of well-being.

Integrated Funds: An integrated fund pools or comingles public and private, local, state, and federal resources (monetary and in-kind) at the local level to accomplish locally agreed upon service goals for the target population. This collective blending of resources concentrates impact to support an integrated service system.

Integrated Mental Health System: An integrated children’s mental health service system means a coordinated set of procedures established for coordinating services and actions across categorical systems and agencies that results in:

- integrated funding;
- improved outreach, early identification, and intervention across systems;
- strong collaboration between parents and professionals in identifying children in the target population facilitating access to the integrated system, and coordinating care and services for these children;
- a coordinated assessment process across systems that determines which children need multiagency care coordination and wraparound services;
- multiagency plan of care; and
- individualized rehabilitation services.

Protective Factors are conditions or attributes in individuals, families, communities, or the larger society that, when present, mitigate or eliminate risk, such as ACEs and trauma, in families and communities that, when present, increase the health and well-being of children and families.
Risk and protective factors are correlated and cumulative and therefore underscore the importance of 1) early intervention and 2) interventions that target multiple, not single, factors. Examples of protective factors include: nurturing and attachment (relationship level), faith or cultural resources and after-school supports (community level), and anti-bullying laws or policies (society level).

Building Community, Building Hope
Protective Factors to Promote Well-Being
Risk & Protective Factors (SAMHSA)
Risk & Protective Factors (youth.gov)

Public Health Approach: By definition, public health aims to provide the maximum benefit for the largest number of people. Programs for primary prevention based on the public health approach are designed to expose a broad segment of a population to prevention measures and to improve health at a population level and increase population impact. The public health approach seeks to improve the health and safety of all individuals by addressing underlying risk factors before problems occur through promotion and prevention programs.

A Public Health Approach to Children’s Mental Health
“The four concepts common to virtually all views of a public health approach are that it:
(1) focuses on populations
(2) emphasizes promotion and prevention
(3) addresses determinants of health, and
(4) requires engaging in a process that involves a series of action steps, most commonly referred to as (a) assessment, (b) policy development, and (c) assurance.”

“Three additional concepts that are also central to public health and a public health approach:
(1) Intervention often means changing policy and broad environmental factors
(2) Uses a multi-system, multi-sector approach
(3) Implementation strategies are adapted to fit local needs and strengths

Research Informed is being informed about current research on what works and what doesn’t and using that knowledge in your practice and/or organizational decision making.
**Resilience** is the process of adapting well in the face of adversity, trauma, tragedy, threats, or even significant sources of stress—such as family and relationship problems, serious health problems, or workplace and financial stressors. It means “bouncing back” from difficult experiences.

- Positive Mental Health: Resilience
- Resilience (Center on the Developing Child)
- Resilience Trumps ACEs
- The Road to Resilience (APA)

**Social Determinants of Well-Being** are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Conditions (e.g., social, economic, and physical) in these various environments and settings (e.g., school, church, workplace, and neighborhood) have been referred to as “place.” In addition to the more material attributes of “place,” the patterns of social engagement and sense of security and well-being are also affected by where people live.

The five key areas of [Social Determinants of Health (Healthy People 2020)](https://www.healthypeople.gov/2020) are: Economic Stability; Education; Social and Community Context; Health and Health Care; and Neighborhood and Built Environment.

- Social Determinants of Health (CDC)
- Social Determinants of Mental Health (WHO)

**Social Emotional Development** or social emotional learning involves the process through which children and adults acquire the knowledge and skills to understand and manage emotions, show empathy for others, establish positive relationships and learn to make responsible decisions. Healthy social emotional development includes growing healthy identities and competencies.

**Strengths Based** is an approach with a perspective that emphasizes the strengths, capabilities, and resources of a child/youth and family. Those who embrace a strength-based perspective hold the belief that all children/youth and their families have strengths, resources, and the ability to recover from adversity. This perspective replaces an emphasis on problems, vulnerabilities, and deficits. Strength-based approaches are developmental and process orientated.

- [mentalhealth4kids.ca](https://www.mentalhealth4kids.ca)

**Toxic Stress** response can occur when a child experiences strong, frequent, and/or prolonged adversity - such as physical or emotional abuse, chronic neglect, caregiver substance abuse or mental illness, exposure to violence, and/or the accumulated burdens of family economic hardship - without adequate adult support. This kind of prolonged activation of the stress response systems can disrupt the development of brain architecture and other organ systems, and increase the risk for stress-related disease and cognitive impairment, well into the adult years.
Well-Being is an individual, family, or community condition characterized by a balance between resources and challenges across multiple life domains which results in optimal health, positive functioning, and a sense of happiness/fulfillment. Youth well-being must be understood in context of family and caregiver well-being, culture, and community, and measured according to developmental stages.

- “Life domains” may include: Cognitive, Social, Emotional/Behavioral, Physical, Environmental, Economic, Spiritual, and Educational/Vocational.

Investing to Improve the Well-Being of Vulnerable Youth & Young Adults (YTFG)

Measuring Client Well-Being

Well-being is similar and closely related to wellness which is not the absence of disease, illness, or stress... but the presence of purpose in life, active involvement in satisfying work and play, joyful relationships, a healthy body and living environment, and happiness. (SAMHSA)

The Eight Dimensions of Wellness (SAMHSA)

Wellness (SAMHSA)

Whole-Family is a multigenerational service approach built on the understanding that children live and grow in families and therefore the most effective services will be personalized and holistic and will work across systems to meet complex needs. This shift in mindset focuses on the unique strengths and challenges of the whole family rather than those of the parent/caregiver or child in isolation. One important aspect of this approach is building adult capabilities to improve child outcomes. This approach respects children grow up in families and many adults are also parenting children.

Building Adult Capabilities to Improve Child Outcomes: A Theory of Change

Creating Opportunities for Families: A Two-Generation Approach

Family Well-Being

The Two-Generation Approach

Wraparound is a type of intensive, individualized care coordination involving a team process that wraps services, supports, and resources around a child or youth with a severe emotional or behavioral disorder to meet goals set by the team. This multiagency approach focuses on the strengths and needs of the child/youth and family to develop and implement a wraparound plan to meet goals set by the wraparound team.

Definitions (CMHC)

National Wraparound Initiative

Wraparound Milwaukee
Young Adults usually refer to persons in their teens or early twenties. However, the description of this age range varies. Descriptions to consider:

Collaborative Target Populations for CMHCs and FSCs correspond to terms for service eligibility, such as educational and mental health services. For example, to be eligible for CTSS (Children's Therapeutic Services and Supports), recipients must be under 21 years old. The CMHC statute states: “Target population’ means children up to age 18 with an emotional or behavioral disturbance or who are at risk of suffering an emotional or behavioral disturbance as evidenced by a behavior or condition that affects the child’s ability to function in a primary aspect of daily living.” The FSC statute states: “The delivery system shall provide a continuum of services for children birth to age 18, or birth through age 21 for individuals with disabilities.”

Emerging Adults include late adolescence and early adulthood up to 27 years. “The term describes young adults who do not have children, do not live in their own home, or do not have sufficient income to become fully independent in their early to late 20s.” Five features of emerging adults: age of identity exploration; age of instability; age of self-focus; age of feeling in between; and age of possibilities.

Transition Age Youth/Young Adults range from approximately 14 – 25 years. This group is navigating the challenges of changing from children’s service systems, such as mental health, foster care, or disabilities, to adult service systems.

Science has influenced the evolving expansion of the age range for young adulthood. Research now shows brain development most likely lasts until at least the mid-20s and possibly until the early 30s. Neuroscience has shown that a young person's cognitive development continues into this later stage and their emotional maturity, self-image, and judgement will be affected until the prefrontal cortex of the brain has fully developed. This may have played a part in the recent policy to allow health coverage on parent’s insurance for young adults under 26.

Emerging Adults: The In-Between Age
What is a Young Adult?
Youth & Transition Services (DHS)

Youth Guided means that young people have the right to be empowered, educated, and given a decision-making role in the care of their own lives as well as the policies and procedures governing care for all youth in the community, state, and nation. This includes giving young people a sustainable voice and the focus should be toward creating a safe environment enabling a young person to gain self-sustainability in accordance with their culture and beliefs. Through the eyes of a youth guided approach, we are aware that there is a continuum of power and choice that young people should have based on their understanding and maturity in this strength-based change process.

Systems-Based Practice: Family-Driven, Youth-Guided Care
Young Adult-Driven Systems & Services
Youth Move National