

## MICHIGAN

# Michigan child care workers were unprepared for kids' post-pandemic mental health crisis



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As Detroit child care owner Betty Favors waited out the worst of the pandemic shutdowns, she looked ahead to when she could safely reopen Cribs2College Academy and welcome back the 75 children she prayed were safe at home. After more than 25 years in business, Favors figured when things finally got back to normal, so would the kids.

Cribs2College, like most child care centers, did reopen relatively quickly. But things weren't the same. And three years after COVID-19 first hit, child care providers continue to notice the fallout. The crying. The aggression. The inability to focus.

Many of these young children are struggling with mental health issues that have become more noticeable and more urgent as time goes on. Without the qualified staff or resources to help them, Favors says it's a problem that will follow these kids into their school years and beyond.

## **Preschool brain development lays groundwork for the rest of life**

"It's getting progressively worse," Favors said. "The children's behavior, their mental state, their learning capabilities."

It hasn't been that long since people started talking openly about adult mental health. Then the effects of COVID-19 on school-age kids sparked national concern as new research

revealed bounding levels of anxiety, depression and suicidal ideation.

Much less attention has been paid to society's youngest members, but child development experts say mental health for infants, toddlers and preschoolers is just as important — maybe more so, since brain development at that age lays the circuitry for everything from language acquisition to motor, social and cognitive skills.

Brain research has revealed that up through age 3, more than 1 million neural connections are made every second. If those connections are made under stress or during neglect or trauma, children's brains can get wired to operate in those conditions.

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“Young children, even under 1 year of age, are affected by these things, even if it's not immediately apparent,” said Alison Miller, professor of health behavior and health education at the University of Michigan.

“Grief, grieving parents, stressed parents, stressed caregivers, a lot of uncertainty ... all of these things can contribute to interruptions of typical development for kids, particularly in the emotion regulation domain.” The result: disruptive behavior, tantrums, hyperactivity. All things child care providers around the country are seeing now.

For many of these children, the answer could be relatively simple. Kids can improve their mental health by having consistent, loving relationships with caregivers. Those who need additional help can benefit from play therapy. But that requires having caregivers whose own mental health is sound enough to provide that kind of stable, positive engagement, and counselors with space in their schedules to accommodate the growing numbers of children who need intervention.

## **COVID-19's mental health toll on babies and toddlers**

When Katie Wisniewski visits child care centers these days through the state's mental health counseling service, the behaviors she notices aren't a surprise. Little kids are bouncing all over the classroom, unable to sit still. Toddlers are knocking over each other's block towers. One hits, one cries, another hides.

All of these behaviors can be completely normal, and Wisniewski guides child care providers in Wayne County in understanding typical development in kids. It can be hard to tease out which behavioral challenges are part of being small, which are the symptoms of underdeveloped social and emotional skills and which speak to a mental health problem.

But she won't deny seeing a swell in the numbers of children exhibiting these behaviors more often, or more intensely. "I think, because of the pandemic, those challenges have just been increased," Wisniewski said.

Younger and younger children have presented with anxiety at the Judson Center, a nonprofit providing behavioral health services in southeast Michigan, according to its director Jamila Stevens. She says many children showing up for kindergarten or first grade lack adequate social contact to have developed the skills to deal with in-person interactions, or the words or ability to express what that isolation and uncertainty felt like.

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In child care settings, the toll is obvious. And it's beyond what workers were prepared for.

"Certain behaviors are what we look for and are trained to deal with," said Tracie Bettison, who runs four after-school care centers and provides consulting and professional development to other child care centers, including Favors'. But Bettison says she can glean through their play and the things they say to each other that many children — and their caregivers and providers — need help.

Children have been hitting teachers and their parents. Screaming at the top of their lungs. Even acting out sexually explicit acts they saw while at home or unsupervised on the internet.

Stevens adds to the list issues such as sleep issues, food refusal, nightmares, even self-harming behavior.

"We've seen some things that we have never seen or dealt with that we're dealing with," Bettison said.

It's not just Cribs2College Academy. "In every single state that I work with, across the board, it's a really significant issue," said Meghan Schmelzer, Senior Manager of Infant and Early Childhood Mental Health at the ZERO TO THREE Policy Center.

"We're not just dealing with the traditional mental health concerns for babies and young toddlers who have experienced trauma or attachment issues or, for example, are in foster care," Schmelzer said. "All of those issues have been exacerbated by the pandemic in many, many different ways, because across the board, parents and families have been more stressed in lots of different ways."

## **Child care centers are not equipped to deal with this**

Recognizing that babies', toddlers' and preschoolers' mental health have been affected by the pandemic is the first step in addressing it. But many child care centers dealing with this issue have no Band-Aid to apply. They are short-staffed, overworked and underpaid. And many caregivers are suffering themselves.

In 2022, researchers completed the largest-ever national study of the physical and mental health of U.S. child care professionals and found that nearly 46% of them were depressed. Two-thirds of them reported moderate or high stress levels — almost twice the estimate for other adults. Updated data provided by study author and Yale psychology professor Walter Gilliam showed that by 2021, rates of depression among child care providers had risen "to a staggering 56%."

Experts say anxiety, grief and depression in a caregiver can quickly taint the mental health of a young child in her charge.

"Baby's mental health is inextricably tied to their caregiver's mental health, whether that be their primary caregivers ... or their child care providers," said Schmelzer. "When we see adult stress levels increase and depression rates increase and suicide rates increase, that absolutely is going to impact baby's mental health because that's who's caring for them."

Child care workers were stressed before the pandemic, feeling undervalued and overlooked. Dealing with even more behavioral issues and overburdened, distracted parents is not a job modification they relish.

Favors has repeatedly had staff ghost her, never appearing for work. She recently hired one young woman who showed up for her first day to find three children crying inconsolably. An hour later, she said she went to retrieve her cellphone from her car. The woman never came back inside.

## **Mental health help is spread thin**

While having access to an infant and early childhood mental health consultant is viewed as a wonderful resource, those personnel don't stay on-site to witness and respond in the moment. And just as staffing issues have affected child care centers, they've hit the departments providing consultants as well.

Wisniewski is currently the only DHHS consultant serving Wayne County. "I've been overstretched," she admitted. Not wanting to turn down requests or make providers wait too long, Wisniewski said that since the pandemic, she stopped advertising her training and consulting services through community events and passing out flyers as she once did.

DHHS, which collaborates with the Michigan Department of Education to provide infant early childhood mental health consultation to child care providers across the state, is expanding its roster of consultants to cover 28 counties, up from its current 18.

Wisniewski says other programs will also begin providing consultation services in Wayne County within the next few months.

## **'It's not nearly enough'**

The effects of the pandemic on mental health have garnered attention and resources for school-age children who are struggling. But much less notice and funding has been paid to younger children.

DHHS received American Rescue Plan Act money to provide enhanced services for child care providers to help them cope during COVID-19, according to Mary Mackrain, who leads Michigan's infant early childhood mental health consultation work. Her team offered virtual professional development, virtual office hours and online reflective groups where providers could, as she said, "come in and really just talk about what they were carrying around as they care for children and families."

As that money goes away, Child Care Development Block funds will pick up the slack, Mackrain says. She hopes 2024 will see continued expansion. “It’s really an exciting time of growth for a highly critical need in our youngest kids,” Mackrain said.

Schmelzer, who previously served as the infant early childhood mental health coordinator for the state, thinks Michigan could do more.

“Michigan does have these services. They are not sufficient to be statewide or have equitable access across the state,” she said. “Michigan has put more funding into that and that’s doubled the budget — up to \$3 million a year — which is wonderful. And it’s still not enough ... it’s not nearly enough.”

Providers such as Favors and Bettison say they are extremely grateful for COVID-19 relief money they got from the state. Favors says she’d probably be out of business without it. But the money went toward immediate needs, not mental health prevention or response.

“Oh, are you kidding me? That still wasn’t enough,” Favors said. After paying salaries and buying cleaning supplies, masks, air purifiers, individual bins for separate toys destined for toddler mouths, the relief money helped her center stay open despite lower enrollment, but nothing more.

“If mental health care is the issue,” said Bettison, “then all the money doesn’t need to go to K through 12.”

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## **In the absence of money, what can be done?**

Most child care providers who’ve been in the industry for a long time aren’t in it for the money or the glory, that’s for sure. They do it for the children. So, they’re not ready to give up just because their work got harder.

Without extra money, they’re casting about for ways to help their kids cope that won’t cost them their livelihoods. Experts say it’s out there.

“There might not be enough bodies,” said Schmelzer, “but there are so many resources that are out there and that are available and that can be at low or no cost.”

Wisniewski says she thinks child care owners and providers should continue to advocate. Industry professionals took their messages to Lansing last month and are planning continued advocacy efforts: For more training, more resources and more professional development that would allow them to better address trauma, and for wages that would allow them to begin addressing their own mental health.

In the meantime, Wisniewski says caregivers and teachers of young children can focus on providing nurturing and consistent relationships. “The relationships they have with children are so important,” Wisniewski said. “And what they do matters.”

*Jennifer Brookland covers child welfare for the Detroit Free Press in partnership with Report for America. Make a tax-deductible contribution to support her work at [bit.ly/freepRFA](http://bit.ly/freepRFA). Reach her at [jbrookland@freepress.com](mailto:jbrookland@freepress.com).*