



**Mission Statement:**

*To facilitate person-centered recovery by empowering people of all ages with behavioral health needs and developmental disability challenges to strengthen relationships, establish independence, and enhance their ability to improve their physical health and emotional wellbeing.*

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## **News Release**

### **For Immediate Release**

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### **Capital Area Human Services Hosts Visit with Hawaii Community Foundation and Shriners Hospitals for Children®-Honolulu Representatives to Discuss Model of Care for Early Childhood Behavioral Health Services on March 21**

Capital Area Human Services (CAHS) will host a visit with administrators and medical staff from Hawaii Community Foundation, Shriners Hospitals for Children® - Honolulu and Ira Chasnoff, MD, Consultant, National Training Institute of Chicago, Illinois, to share the innovative model of early childhood behavioral health care implemented 9 years ago at CAHS's Infant, Child, and Family Center.

Dr. Chasnoff worked with CAHS and a collaborative of over 40 agencies to implement a comprehensive, evidence-based model of care in 2007 to expand the agency's services for children under 6 years of age who are experiencing emotional or behavioral disturbances due to trauma, prenatal substance exposure, or impairment in the caregiving relationship.

Since 2007, the Infant, Child, and Family Center (ICFC) of CAHS has provided treatment services to young children who are in foster care in the Greater Baton Rouge area. The ICFC team has advanced training and expertise in infant mental health and developmental psychopathology and works collaboratively with a variety of systems affecting the lives of infants and toddlers, including child welfare, legal, educational, health care, and mental health care systems.

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"In addition to the visit to CAHS in Louisiana, the Hawaii delegation will visit several sites in California to learn about best practices in children's behavioral health programs," said Dr. Chasnoff.

He stated that "it has been extremely valuable to work with CAHS to address needs in the Greater Baton Rouge community and is grateful for the agency's willingness to share their experience with others in the field."

Major collaborating partners with CAHS to provide early intervention children's behavioral health services over the past 9 years include the Louisiana Department of Children and Family Services, Our Lady of the Lake Regional Medical Center, The ARC of Greater Baton Rouge, Louisiana State Office of Behavioral Health, Louisiana State Office of Public Health, the Pennington Family Foundation, the Baton Rouge Area Foundation and Louisiana State University. Several representatives of partner agencies will be participating in discussions at the event.

Jan Kasofsky, PhD, CAHS executive director says "the goal of this event will be to discuss information about key strategies and lessons learned related to our regional experience to develop and implement early childhood behavioral health services. We are pleased to host this event to further advance the development of critical clinical services that can change the life course of high-risk children to reduce secondary problems related to learning, social competence, and overall health".

The meeting will be held on Monday, March 21, 2016, 8:30 am-4:00 pm at Capital Area Human Services located at 4615 Government Street, Bldg. 2, Conference Room 200 in Baton Rouge.

Capital Area Human Services provides community-based services for mental health and addictive disorders in the seven parish Capital area.

For further details and information about the event, contact Vivian Gettys, Director of Prevention for Capital Area Human Services at 225-922-2700 or email at [Vivian.gettys@la.gov](mailto:Vivian.gettys@la.gov).

## Background

Social and emotional development in early childhood is a critical part of the foundation for adulthood and is tied to every other area of development including physical growth and health, communication and language development, cognitive skills, and relationships. Early childhood social and emotional development is influenced by biology, environment, and relationships that exist between consistent caregivers and a child. It is estimated that between 9.5% and 14.2% of children birth to 5 years in the U.S. experience an emotional or behavioral disturbance (Cohen, Zero to Three Policy Center, 2009).

The *Adverse Childhood Experiences Study (ACE Study)* conducted by Kaiser Permanente and the CDC demonstrated that when study participants were asked about 10 types of childhood traumas, the prevalence of emotional abuse was 10.6%, physical abuse 28.3%, sexual abuse 20.7%, emotional neglect 14.8%, physical neglect 9.9%, mother treated violently 12.7%, household substance abuse 26.9%, household mental illness 19.4%, parental separation or divorce 23.3%, and incarcerated household member 4.7%. The number of ACEs was strongly associated with adulthood high-risk health behaviors such as smoking, alcohol and drug abuse, promiscuity, and severe obesity, and correlated with ill-health including depression, heart disease, cancer, chronic lung disease, and shortened lifespan. Compared to an ACE score of zero, having four adverse childhood experiences was associated with a seven-fold increase in alcoholism, a doubling of risk of being diagnosed with cancer, and a four-fold increase in emphysema; an ACE score above six was associated with a 30-fold increase in attempted suicide.

Since 2007, the Infant, Child, and Family Center (ICFC) of CAHS has provided treatment services to young children who are in foster care in the Greater Baton Rouge area. The ICFC team has advanced training and expertise in infant mental health and developmental psychopathology and works collaboratively with a variety of systems affecting the lives of infants and toddlers, including child welfare, legal, educational, health care, and mental health care systems. The Infant Team's goal is to improve the child's developmental trajectory, strengthen the child/caregiver relationship, reduce the chance of further maltreatment, and prevent emotional and behavioral disturbances.

During the past year alone, the program delivered approximately 1,200 therapeutic sessions to 80 children and their caregivers. There were approximately 200 assessments completed along with 45 visits for psychiatric evaluations and medication maintenance. A total of 120 other services were provided including consultations, case conferences, court reports/testimony, and daycare/school/IEP services. In addition to the physical effects of low weight, seizures, and hearing/visual impairments, children receiving services at ICFC have exhibited many neurodevelopmental problems. Deficits are commonly seen in areas of cognitive performance, speech and language development, information processing, following directions/attention to tasks, general developmental delays, behavioral problems (e.g. excessive crying/irritability in newborns, hypo-responsiveness, aggression, hyperactivity in older children, emotional and behavioral dysregulation), and sleep disorders. Environmental factors correlated with low SES/high risk children such as lack of a stimulating environment, community/household violence, and impaired caregiver relationships are also apparent among many families served by the program.

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