

Tip Sheets

Minnesota Infant Mental Health Project Guidelines for Referral: Red Flags

Home visitors have the opportunity to observe parents and children interact repeatedly in their most familiar surroundings. If persistent difficulties are noted in the domains listed above, a referral for more intensive treatment may be indicated. **Please remember to consider cultural variations in parenting as you are making your assessment.**

Parent's Mood/Behavior

- Parent appears significantly depressed, as demonstrated by low energy, unresponsiveness to surroundings, or disinterest in the child's behavior or welfare.
- Parent appears extremely anxious, nervous, stressed, or overwhelmed beyond what is expected of other parents with same-age child.
- Parent appears to have a serious lack of understanding of child development, resulting in unrealistic expectations for the child that may be harmful or dangerous.
- Parent appears to have a serious mental disorder, such as schizophrenia or bipolar disorder, that may impair his or her ability to safely care for the child.
- Parent appears to be abusing substances, such as alcohol or cocaine, that may impair judgment and interfere with his or her ability to safely care for the child.

Child's Appearance and/or Behavior

- Child's physical needs are consistently neglected, as evidenced by dirty or unkempt appearance, poor nutrition, lack of dental care, or frequent untreated illness.
- Child is not developing as expected and underdevelopment is not due to a known medical condition. Signs include lack of weight gain, poor language and socialization skills,, and inability to reach developmental milestones.
- **Child is frequently emotionally upset**, more than is expected for the child's developmental level. Signs include displays of anger and aggression, tantrums, and inconsolable crying.
 - Child is frequently sad, anxious, or worried, more than is expected for children of similar age. Child smiles infrequently, does not show interest in playing, and/or reacts strongly to noise and movement.

• Child is unresponsive to parent and/ or environment, more than is expected for children of similar age. Child does not make eye contact with parent or others, does not engage in interaction with others, and shows little awareness of surroundings.



Parent-Child Relationship

- **Parent and child have difficulty connecting.** Child does not respond to parent's presence. Parent is unable to engage or play with or set limits for child. Parent infrequently talks to child or holds child's hand. Parent and child have frequent miscommunications or parent says he or she does not know how to relate to the child.
- Parent consistently fails to protect the child, allowing child to touch, eat, play with, or climb on dangerous objects.
- Parent is consistently cold or hostile to the child. Parent uses hard tone or offensive words or uses unnecessary force. Parent threatens to hit the infant or calls the child names.
- Parent attributes malignant motives to child's behavior. Parent may say the child deliberately makes him or her angry by waking up at night or that the infant will turn out to be a mean troublemaker "just like his dad."

For additional information on this topic, please visit CEED's web site at http:// cehd.umn.edu/ceed.

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