

### Supplement 3.

#### ECI programme components implemented at municipal level in Germany

<b>Cross-sectoral networks</b>	<p><b>A network coordinator for each municipality</b></p> <p>Roles and responsibilities include:</p> <ul style="list-style-type: none"><li>– developing a shared vision of ECI in Germany in close collaboration with all other network members (including local authorities)</li><li>– contributing to the build up of the ECI network and its further development</li><li>– developing goals and ideas and acting as a mediator in the ECI network, which includes different professional interests and attitudes</li><li>– contributing to the development of local infrastructure to enable families to make use of ECI measures and benefit from support</li><li>– promoting the implementation of methods to assure and develop the quality of the network</li></ul> <p><b>Network members</b>, made up of stakeholders from the health, social services, and other sectors</p>
<b>Voluntary targeted psychosocial support measures</b> (most widely implemented approaches out of a broad variety)	<p><b>Home visits by “family midwives/nurses” and comparable professionals</b></p> <p>Long-term home visitation services mainly by health-care professionals who have additional qualifications specifically related to psychosocial care for families with a child aged 0-3 years (called <i>family midwives/nurses</i>).</p> <p>They conduct confidential interviews to assess the family’s needs. Their work focuses on the health and development of the infant, the health and relief of the primary caregiver, and the relationship and interaction between primary caregiver and the child in the child’s first year of life.</p> <p>Interdisciplinary collaboration with other institutions and professional groups is an integral part of their work. There is sound scientific evidence for the effectiveness of home visitation programmes using such professionals, including approaches from the USA context, which were then adopted and adapted by European states including Germany, the Netherlands and England.<sup>1</sup></p>

Examples of services provided include, among many others:

- confidential interviews to assess the family’s needs and to tailor support accordingly
- support if needed: counselling the caregiver how to care for the child (sensitive care, nutrition, health, etc.), how to manage the household, how to write approvals for financial support, and how to address social isolation
- helping the caregiver to express her needs for, and access, additional professional help

**Targeted long-term home visiting services by unsalaried personnel**

Volunteers, usually trained and supervised, share their own life experiences with young families in need. They have often dealt with the same challenges and contribute to developing the families’ self-help capabilities. The services provided vary widely from municipality to municipality. For example, volunteers can take care of the children or help to manage the household. They can advise and recommend further suitable support measures.

**Targeted more intense support by qualified professionals**

A wide range of targeted more intense support than provided by a family midwife/nurse, offered to families with high burdens who are not "cases" for indicated (non voluntary) support. Services are usually center-based, but sometimes also involve home visits.

One example is STEEP (Steps Towards Effective and Enjoyable Parenting), a programme that supports the development of secure infant-parent attachment (a powerful predictor child social and emotional outcomes), starting with weekly meetings which taper down over time, sometimes over 2 years.<sup>2 3 4</sup>

**Other ECI services known as “pilotage services”**

i.e. information, early identification of mothers or families in need,

**Maternity clinics**

If staff notice that a pregnant woman may be psychosocially burdened, an appropriately trained professional (e.g. a social worker, a midwife, in certain programmes called “Babytose”) makes the first contact and – if the mother agrees – assesses her needs. They then determine the family’s need for psychosocial support. If the need is sufficiently high, they offer an in-depth diagnostic interview and, together with the mother/family in question, make plans for appropriate support measures and organize referrals. After the family has left the maternity clinic, they monitor whether

counselling, and referral to appropriate support services (most widely implemented practices out of a broad variety)	the family receives the planned support and also remain available to the families for further consultation.
	<p><b>Practice-based paediatricians</b></p> <p>A similar strategy is being piloted in some municipalities with social workers offering regular need assessment and counselling in the practises of paediatricians and gynaecologists, who recommend this service to families they feel would benefit from it.</p>
	<p><b>Home visits</b></p> <p>One “welcome” visit after birth usually by a social worker to provide information on the diverse support measures offered in the municipality.</p>

<sup>1</sup> Olds DL, Sadler L, Kitzman H. Programs for parents of infants and toddlers: Recent evidence from randomized trials. *Journal of Child Psychology and Psychiatry*. 2007;48:355-391. Doi: 10.1111/j.1469-7610.2006.01702.x.

<sup>2</sup> Erickson MF & Egeland B. Die Stärkung der Eltern-Kind-Bindung: Frühe Hilfen für die Arbeit mit Eltern von der Schwangerschaft bis zum zweiten Lebensjahr des Kindes durch das STEEP™-Programm [Strengthening parent-child bonding: Early childhood intervention for working with parents from pregnancy to the child's second year through the STEEP™ programme]. Klett Cotta, 2009. German.

<sup>3</sup> Suess GJ, Bohlen U, Carlson EA, Spangler G, Maier MF. Effectiveness of attachment based STEEP™ intervention on a German high-risk sample. *Attach Hum Dev*. 2016;18(5):443-460. doi: 10.1080/14616734.2016.1165265. <https://www.tandfonline.com/doi/full/10.1080/14616734.2016.1165265>

<sup>4</sup> Suess GJ, Erickson MF, Egeland B, Scheuerer-Englisch H, Hartmann HP. Steps Toward Effective, Enjoyable Parenting: Lessons from 30 Years of Implementation, Adaptation, and Evaluation. In: Steele H, Steele M, editors. *Handbook of Attachment-Based Interventions*. New York: Guilford Press; 2017.