



EARLY CHILDHOOD MENTAL HEALTH CONSULTATION: CORE FEATURES OF EFFECTIVE PROGRAMS

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PRESENTATION OVERVIEW

- Defining Early Childhood Mental Health Consultation (ECMHC)
- Knowledge Gaps in the Field
- Findings from Georgetown's New ECMHC Study
- Recommendations and New Directions

WHAT IS EARLY CHILDHOOD MENTAL HEALTH CONSULTATION?

- Intervention designed to reduce the impact of mental health problems among children birth to age six and their families served by ECE settings
- Focuses on capacity-building of ECE staff, families and ECE program
- Collaboration between a professional consultant with mental health expertise and consultees
- Not direct therapy

(Cohen & Kaufmann, 2000)

TYPES OF EARLY CHILDHOOD MENTAL HEALTH CONSULTATION

- **Child- or family-centered consultation:** consultation that focuses on a particularly challenging child and/or the family of that child.
- **Programmatic consultation:** consultation that focuses on a general program or classroom issue that impacts the mental health of staff, children and/or families.

CHILD/FAMILY-CENTERED CONSULTATION

- Child observations
- Education on early childhood mental health topics
- Classroom and home-based strategies
- Modeling/coaching
- Support with strategy implementation
- Link to community resources
- Advocacy for family

PROGRAMMATIC CONSULTATION

- Classroom observation
- Promote staff wellness
- Strategies for prosocial environment
- Address communication issues
- Support for reflective practices
- Promote team building

WHAT THE RESEARCH TELLS US ABOUT ECMHC

○ Context

- Limited body of research
- Systematic Review of ECMHC Research
(Brennan et al., 2008; Perry et al., in press)

○ Findings

- Staff outcomes: improved self-efficacy and confidence, reduced stress, enhanced skill in working with children and families
- Program outcomes: less job turnover, adoption of a consistent philosophy of mental health, inconsistent findings on impact on classroom environments

WHAT THE RESEARCH TELLS US ABOUT ECMHC (CON'T)

○ Findings

- **Child outcomes:** greater gains on socialization, emotional competence and communication, improved social skills and peer relationships, decreased problem behaviors, decreased numbers of children expelled due to behavior
- **Family outcomes:** access to mental health services, improved communication with early childhood staff, improved parenting skills, improved parent-child interaction, no evidence of impact on parental stress

KNOWLEDGE GAPS

- What are the essential components of effective mental health consultation?
- What are the skills, competencies, and credentials of effective consultants?
- What are the training, supervision, and support needs of consultants?
- What level of intervention intensity is needed to produce good outcomes?
- Which outcomes should be targeted and how should they be measured?

GEORGETOWN'S NEW STUDY ON ECMHC

○ **Purpose:**

- Address critical knowledge gaps in the field
- Offer data-driven guidance to states and communities
- Provide a snapshot of the status of ECMHC efforts nationally

○ **Funders:**

- Annie E. Casey Foundation
- The A.L. Mailman Family Foundation

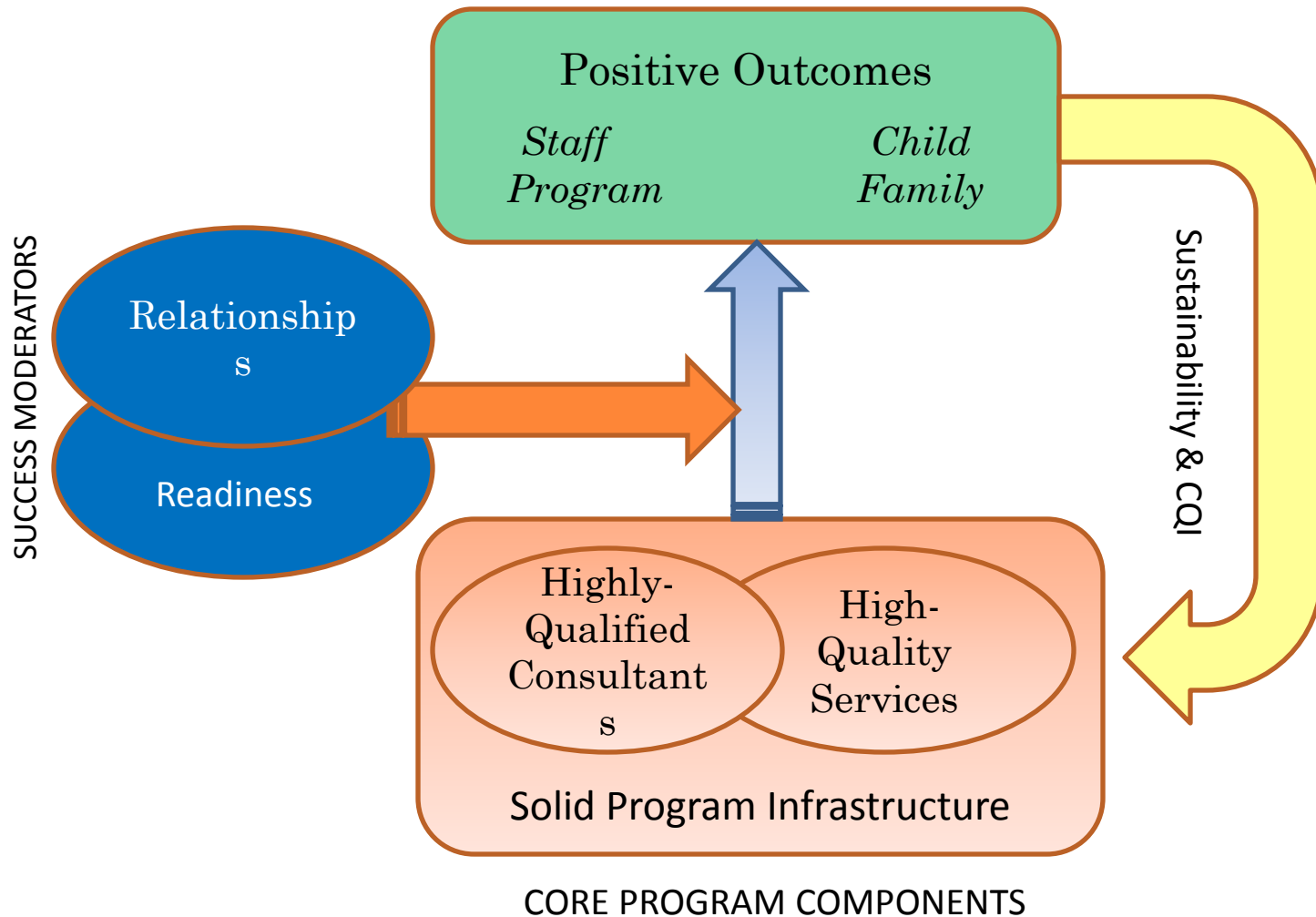
STUDY DESIGN

- Site Visits
 - Six diverse ECMHC programs w/ good outcomes
 - Interviewed broad group of stakeholders
 - Standardized data collection tool for consultant qualifications and activities
- Brief Online Scan
 - To all states' and territories' Children's Mental Health Directors and ECCS Coordinators
- Meeting of Experts

STUDY SITES

- Child Care Expulsion Prevention (Michigan)
- Early Childhood Consultation Partnership (Connecticut)
- Early Intervention Program/Instituto Familiar de la Raza (San Francisco, CA)
- Early Intervention Project (Baltimore City, MD)
- Kid Connects (Boulder, CO)
- Together for Kids (Central Massachusetts)

Core Features of Effective ECMHC Programs



CORE FEATURES OF EFFECTIVE ECMHC

- Solid Program Infrastructure
 - Strong leadership
 - Clear model design
 - Clear organizational structure
 - Hiring and training program staff
 - Supervision and support mechanisms for consultants
 - Strategic partnerships
 - Community outreach and engagement
 - Clear communication
 - Evaluation
 - Financing

CORE FEATURES OF EFFECTIVE ECMHC

- Highly-Qualified Mental Health Consultants
 - Education and Content Knowledge
 - Skills
 - Attributes/Characteristics
- High-Quality Services
 - Service Array
 - Frequency and Duration of Services
- Success Moderators
 - Positive Relationships
 - Readiness for Consultation

WHAT ARE THE SKILLS, COMPETENCIES, AND CREDENTIALS OF EFFECTIVE CONSULTANTS?

○ Education/Knowledge

- Masters degree in a related field, e.g., social work, psychology
- Core content knowledge

○ Skills

- Relationship-building
- Communication
- Able to work with infants/children in group settings
- Able to motivate parents/providers to try new strategies

WHAT ARE THE SKILLS, COMPETENCIES, AND CREDENTIALS OF EFFECTIVE CONSULTANTS?

- Attributes/Characteristics
 - Respectful
 - Trustworthy
 - Open-minded/non-judgmental
 - Reflective
 - Approachable
 - Good listener
 - Compassionate
 - Team player
 - Flexible
 - Patient

WHAT ARE THE TRAINING, SUPERVISION, AND SUPPORT NEEDS OF CONSULTANTS?

○ Training

- Program model (philosophy & processes)
- Early childhood mental health topics
- Consultation topics
- Mentoring/shadowing
- Ongoing professional development opportunities

The consultative stance describes a consultant's "way of being" and is characterized by elements such as avoiding an expert posture and understanding another's subjective experience.

(Johnston & Brinamen, 2006)

WHAT ARE THE TRAINING, SUPERVISION, AND SUPPORT NEEDS OF CONSULTANTS?

- Supervision
 - Clinical and administrative supervision
 - Reflective in nature
 - Regular and ongoing
- Support
 - One-on-one and with peers (i.e., group)
 - Formal and informal

Reflective supervision provides support and knowledge to guide decision-making, offers empathy to help supervisees explore their reaction to the work, and helps supervisees manage the stress and intensity of the work.
(Parlakian, 2002)

WHAT LEVEL OF INTERVENTION INTENSITY IS NEEDED TO PRODUCE GOOD OUTCOMES?

- Variability across and within study sites regarding frequency and duration of services
- Diversity is reflective of
 - variation in program models and characteristics
 - the individualized nature of ECMHC
- Additional research is needed to examine if there is a certain “dosage” of consultation that leads to positive outcomes

WHICH OUTCOMES SHOULD BE TARGETED AND HOW SHOULD THEY BE MEASURED?

- ECE staff outcomes
 - Increased knowledge regarding ECMH, particularly greater understanding of possible causes of behavior
 - Improved ability to identify and address social/emotional concerns early
 - Improved interactions with children
 - Application of learned strategies to other children
- ECE program outcomes
 - Increased quality of early childhood settings
 - Reduced staff turnover

WHICH OUTCOMES SHOULD BE TARGETED AND HOW SHOULD THEY BE MEASURED?

- Child outcomes
 - Decreased expulsion rates
 - Increased numbers of children in placements that meet their needs
 - Decreased problematic behavior
 - Increased pro-social behavior
 - Increased school readiness
- Family outcomes
 - Decreased parent stress
 - Improved parent/child interaction
- Measurement tools

UNANSWERED QUESTIONS

- What is the “dosage” of consultation needed for efficacy?
- What is the cost-benefit of ECMHC?
- What are the longitudinal impacts of ECMHC?
- What is the impact of each model component on outcomes (e.g., consultant skills, service array)?
- Which consultation models are most effective for certain children, families and/or settings?
- What are the best measurement tools for evaluating ECMHC and where is there need for development of new tools?

Take Home Messages and Recommendations

- Begin with a clearly articulated model, grounded in evidence-based practices
- Strong commitment to rigorous evaluation paired with ongoing administrative data collection
- Workforce development: competencies & reflective supervision
- Fiscal policies: core support and creative strategies
- Integration with quality rating systems, credentialing and/or accreditation

FOR MORE INFORMATION

- Final study report will be available online Summer 2009 at:
<http://gucchd.georgetown.edu/>
- Additional resources on ECMHC:
Early Childhood Mental Health Consultation (2000)
<http://mentalhealth.samhsa.gov/publications/allpubs/svp05-0151/>

Early Childhood Mental Health Consultation:

An Evaluation Toolkit (2007) - on GUCCHD website

Brennan, E. M., Bradley, J. R., Allen, M. D., & Perry, D. F. (2008).
The evidence base for mental health consultation in early childhood
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Early Education and Development.

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review). The evidence base for mental health consultation in early
childhood settings: Research synthesis addressing children's
behavioral outcomes. *Early Education and Development*