Early Childhood Mental Health Consultation: A Developing Profession

Mary Dallas Allen  
*Portland State University*

Eileen M. Brennan  
*Portland State University*

Beth L. Green  
*NPC Research*

Kathy S. Hepburn  
*Georgetown University*

Roxane K. Kaufmann  
*Georgetown University*

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Early Childhood Mental Health Consultation: A Developing Profession

As a career path, early childhood mental health consultation (MHC) is an emerging and growing work force opportunity. In keeping with the vision of an effective transformed service system expressed in the final report of the President’s New Freedom Commission, and communities are expanding capacity to meet the mental health needs of young children and caregivers through mental health consultation. ECMHC supports children in naturalistic community settings. ECMHC includes culturally sensitive and primarily indirect services for children birth- through- six in group care and early education settings. Indirect services include building capacity among staff and family members, observing children and the caregiving environment, and designing interventions that involve changes in the behaviors of caregivers. ECMH consultants collaborate with administrators, staff, family members, and caregivers who intervene directly with children in group care, early education, and/or home settings. ECMHC is intended to promote social and emotional development in children and to transform children’s challenging behaviors. Two types of consultation are: (1) child- or family-centered consultation to address factors that contribute to a child’s (and/or family’s) difficulties in functioning well in the early childhood setting, and; (2) programmatic consultation to improve the overall quality of the program or agency and/or assist the program to solve issues that affect more than one child, staff member, and/or family.3

Illustrative Scenario

Since moving to a new childcare classroom, Robert cries and disturbs other children during naptime. He does not eat very much and does not seem to enjoy classroom activities. At Robert’s teacher’s request, the mental health consultant visits the center to observe Robert at various times during the course of a day. The consultant also assesses the quality of the interactions in the classroom between Robert and the other children. The consultant then meets with Robert’s parents and discovers that Robert’s mother’s new work schedule causes frequent disruptions in the family routine. The consultant helps both parents and child care staff to understand Robert’s behavior and helps them develop new strategies at home and in the classroom so that Robert develops a sense of predictability. By observing and encouraging communication between staff and parents, the consultant helps Robert’s caregivers implement strategies to help him adjust to change (child- or family-centered consultation). In addition, the staff improve how they transition the entire class from lunch to nap time and, as a team, respond to special needs of individual children (programmatic consultation).

What is the Need?

There are a number of compelling reasons for supporting, training, and utilizing consultants. Perhaps most prominent of these is the growing number of very young children who are exhibiting social-emotional problems and who are spending significant amounts of time in non-parental care in early childhood settings. Recent research suggests that expulsion rates for children in preschool far exceed expulsion rates for children in K-12.5 In a national survey of pre-kindergarten programs, Gilliam5 found that teachers who had access to an ECMH consultant were less likely to expel children than teachers who did not have a mental health professional available to them. ECMHC
may also decrease child care provider stress and high rates of job turnover by enhancing caregivers’ abilities to successfully manage difficult behaviors and promote positive social-emotional development. Decreasing turnover also supports the continuity of care essential for children’s social-emotional development and reduce challenging or troubling behavior. In addition, consultants should have knowledge of family systems and feel comfortable working with parents of children enrolled in early childhood settings. Finally, consultants must have a deep knowledge of child development, for-
staff, with evidence that consultation improves their feelings of competency and effectiveness, and increases their attentiveness to the needs of children. Decreases in staff stress were found in several studies, but this finding was not replicated in a recent well-controlled study of consultation. Finally, programs were found to benefit from ECMHC in multiple studies that reported lower staff turnover and fewer children expelled for behavior.

What Comes Next?

Professionals trained in early childhood mental health are in increasingly greater demand. Simultaneously, states are investing heavily in ECMHC as a promising intervention by creating funding initiatives using state general revenue dollars and through the creative use of federal funding streams such as Medicaid, TANF, special education, public health, maternal and child health, mental health, child welfare, and childcare block grants. An informal survey of states conducted by one of the authors found funding that ranged from $200,000 for several pilot sites to $5 million for a large, state-wide effort. While most states still struggle with the difficulty of paying for ECMHC without a designated “client,” a patchwork approach to funding has worked for some.

ECMHC is at the brink of becoming an evidence-based practice, but further evaluation and research are needed. Data are essential to inform the decisions that states, communities and programs make about many aspects of ECMHC and workforce preparation. Such data can answer important questions such as:

- Who is best suited to be an effective consultant?
- What education, competencies, skills, and ongoing training and supervision are needed?
- What components of the model lead to the best outcomes?
- What level of intensity and duration of ECMHC is required to achieve positive outcomes?
- How do we measure the qualities that define a good relationship between the consultant and caregiver?
- Are there disparities among the children being identified for intervention?
- Do consultants have adequate cultural and linguistic competence to work in our diverse nation? And if not, how can we equip them with necessary knowledge and skills?

ECMHC is consistent with the transformation goals set by the New Freedom Commission and embraced by many state agencies. Reducing expulsion from preschool, enhancing the skills of the early care and education workforce, and helping families grapple with the challenges of raising a temperamentally difficult child are all in a day’s work for early childhood mental health consultants. Let’s learn more about what makes this important role most effective.
References


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Authors*

Mary Dallas Allen is a doctoral student in the School of Social Work at Portland State University.

Eileen M. Brennan is Professor and Associate Dean of Social Work, and Co-Principal Investigator with the Research and Training Center on Family Support and Children's Mental Health at Portland State University.

Beth L. Green is Vice President of NPC Research, a human services research and evaluation company.

Kathy S. Hepburn is a private consultant and affiliate faculty at Georgetown University National TA Center for Children's Mental Health.

Roxane K. Kaufmann is Director of Early Childhood Policy at the Georgetown University National Technical Assistance Center for Children's Mental Health.

*Authors listed in alphabetical order*

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**2007 STAFF of the RESEARCH AND TRAINING CENTER ON FAMILY SUPPORT AND CHILDREN’S MENTAL HEALTH**

- Regional Research Institute for Human Services
- Graduate School of Social Work
- Portland State University
- PO Box 751
- Portland, OR 97207-0751
- Voice: 503.725.4040
- Fax: 503.725.4180
- www rtc.pdx.edu

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**Transforming Transitions: Beth Green, Principal Investigator; Anna Malsh, Project Manager; Eileen Brennan, Project Collaborator; Brianne Hood, Graduate Research Assistant; Jessica Green, Student Research Assistant.**

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Janet S. Walker, Editor:
janetw@pdx.edu

Publications Coordinators:
rtcpubs@pdx.edu