

early childhood mental health program

San Francisco, CA

Overview

The Early Childhood Mental Health Program provides highly trained, well-supported mental health consultants to 46 childcare sites for eight hours per week. The program serves five counties. It began in 1996 as collaboration among Jewish Family and Children's Services, Day Care Consultants/the Infant Parent Program of the University of California, and Community Mental Health Services of the City/County of San Francisco. The program is supported by a combination of public and private funds.

The goal of the Early Childhood Mental Health Program is to improve the quality of childcare for low-income, Bay-area children so that they are emotionally stable and ready to learn. The mental health consultants provided by the program work with childcare teachers to help them better observe, understand, and respond to children's needs. They do this by:

- Helping teachers increase their awareness and understanding of the impact of their interactions with children
- Directing that awareness and understanding toward programmatic and individual behavioral expectations
- Identifying children at their earliest points of need and providing services to them and their families

Profile

Staffing

Consultants: 20
Supervisors: 2
Administrative assistants: 2

Total: 24

Plus managerial support from Jewish Family and Children's Services

Children & Families Served

Program serves 498 childcare providers caring for 2000 children in 30 centers and 7 family homes

Budget

\$1,100,000

Sources

- Local public grants (First Five, Community Mental Health, etc.)
- 10 private foundations

The consultants support childcare centers in enhancing children’s emotional lives and social abilities and in working with children demonstrating difficult behaviors. They observe children, work with teachers individually and in groups, facilitate play therapy groups, facilitate parent education groups, provide individual treatment to children and their families, and make referrals to outside services.

The Early Childhood Mental Health Program works with San Francisco Bay–area childcare centers that serve low-income children aged 0 to 5. The children and families participating in these centers are ethnically diverse; 22% are African American, 18% are Caucasian, 18% are of Chinese heritage, and 26% are Latino.

The consultation that the program provides to childcare staff touches the lives of children and families and other neighborhood service providers. It bridges the gap between childcare providers and other programs, linking families to needed services and enhancing families’ ability to select and use the services that will work for them. This in turn leads to better services and more effective service utilization.

How the Program Builds Protective Factors

The Early Childhood Mental Health Program helps programs build five key protective factors that reduce child abuse and neglect. Programs, services, and characteristics contributing to each protective factor are listed below:

Parental Resilience

- Family Mental Health Services

Social Connections

- Parenting Classes and Workshops
- Referrals
- Support Groups

Services Provided On-Site

For Child Care Providers

- Coaching (individual and group)
- Organizational development
- Referrals
- “Shadowing” (observing / mentoring)
- Support groups
- Training

For Parents/Families

- Case consultation and management
- Parenting workshops
- Referrals
- Support groups
- Therapeutic play groups

Partners

- Day Care Consultants/Infant Parent Program
- Head Start
- San Francisco Unified School District
- Marin Community Mental Health Services
- Marin County Department of Education
- Marin Easter Seals
- Marin Family Service Agency

Ways of Identifying When Families Are at Risk

- All staff are trained to observe children and families for signs of stress.
- Mental health consultants observe and document children’s behavior in response to concerns.
- Staff monitor changes in attendance, payment schedules, and other indicators.

Knowledge of Parenting and Child Development

- Consultant-Teacher Partnerships
- Family Mental Health Services
- Parenting Classes and Workshops

Concrete Support in Times of Need

- Family Mental Health Services
- Referrals

Social and Emotional Competence of Children

- Consultant-Teacher Partnerships
- Family Mental Health Services

Key Program Features

Consultant-Teacher Partnerships

Consultants work with teachers in the classroom, modeling intervention techniques as they interact with children. Through this close partnership, staff learn to recognize potential problems in children, make detailed assessments that can be shared with parents, and design effective therapeutic interventions. Caregivers are encouraged to observe their own actions and to expand on strategies that are successful and shift those that are not.

Consultants also work alongside teachers with parents, helping them build relationships with parents that will help children reach their potential. Consultants are part of a staff team developed in response to the needs of each child or family. The teams work closely with families to address the needs of their children.

When the program started, consultation services were requested mostly by programs for children aged 3 to 5. But requests for support by infant and toddler care centers have increased dramatically as these programs have begun to see the impact of effective early interventions. At these centers, consultants observe in classrooms, help staff identify children who are struggling, and help design appropriate intervention

Response Protocol

If a staff member suspects child abuse or neglect, he or she:

- Follows legal reporting protocols
- Notifies the family of when the report will be made
- With the mental health consultant, supports the family through the whole process

If a staff member suspects domestic violence, child abuse or neglect, or mental illness or a child is at risk of developmental delay or behavior problems, he or she brings the mental health consultant onto the staff team.

With other team members, consultants help assess the situation, develop alternatives, and decide on how best to approach the family.

After the family has been engaged, if the situation is not an emergency, the consultant may be called on to observe the child for several days in the classroom and report to teachers and parents.

After reporting and discussing alternatives, the team (including staff, parents, and the consultant) make a plan to address the situation, and implement it.

What People Say

“The consultants are easy to talk with. [They] like what [they] do, and that comes across.”

—Teacher

strategies, including working with the child's parents. To help staff better understand young children, the Early Childhood Mental Health Program has developed an in-service training, *How I Feel*, that covers the emotional needs of infants and toddlers from these children's perspective.

A primary role for consultants has been to help staff confront and understand their own differences of opinion, experience, culture, and race, as well as other differences, instead of sweeping them under the rug or allowing them to cause conflict. Staff trust the consultant to neutrally mediate and facilitate communication among people with different and sometimes conflicting perspectives. These activities provide staff with a model for their work with parents.

Facilitating Children's Transitions

In response to centers' requests, the mental health consultants have focused on reducing the stress and trauma of children's transition from one classroom or one caregiver to another. In staff meetings, consultants have trained staff on recognizing the emotional issues children face during these transitions and have helped create strategies for preparing children and their families in advance.

Family Mental Health Services

The overall goal of mental health consultation is to create a coordinated system of care that corresponds to the needs of children and families. Consultants work with teachers to link families with the specific family mental health services that they need. In some cases, families and children receive short-term counseling directly from mental health consultants. In other situations, the consultant links the family to appropriate public and private services and ensures that the family accesses and is helped by them. The focus of most mental health consultation is to support parents' and extended family members' ability to meet the social and emotional needs of their young children.

"Our consultant has come to be viewed as a non-biased person ... who has helped staff talk with each other. [She] recently had to take a medical leave, and when a difficult issue came up, one staff member remarked, 'I wish [our consultant] was here. She knows how to help us talk with each other.'"
—Center director

"Having [the consultant] on-site one day every week, our parents ... have an increased willingness to ... meet with [the teacher] if there are questions or concerns about the child."
—Teacher

"[The consultant] has definitely helped the teachers increase their willingness and ability to talk with parents in a more direct and thoughtful way. The teachers are also more willing to talk about the 'hard things' with parents."
—Staff member

"Trust is not about words but about how you do things."
—Consultant

"I think my job is not about teaching. It's about learning, the same as a teacher's job has to come from what she learns about the children she's working with."
—Consultant

"The difference is that I 'wonder' with staff instead of telling them what to do."
—Consultant

Organizational Development

At any given center, the mental health consultant also serves as an organizational development coach. He or she works with the director and teachers to assess the center's status, design and implement service plans, and improve the center's environment.

Because early childhood research shows that the relationships among adults in a center impact the quality of its programs, consultants have developed systems that enable staff to work out their difficulties. They regularly attend staff meetings and spend a healthy portion of their time working with staff members to improve their working relationships. Through this work, staff also learn ways of developing effective relationships with family members.

Parenting Classes and Workshops

Parents at all centers served by the program have access to parent education classes and workshops and many other services at four Parents Place family resource centers in Palo Alto, San Rafael, Santa Rosa, and San Francisco. This relationship is made possible through the program's host, Jewish Family and Children's Services. Many of the sessions are conducted in Spanish.

Program Evaluation

In June of 2003, a formal evaluation overseen by Sharon Lynn Kagan, Ph.D., of Columbia and Yale Universities, confirmed the efficacy of the Early Childhood Mental Health Program model. Among other conclusions, the study determined that the program's model of mental health consultation results in higher-quality centers and fosters teachers' ability to interact with children in positive ways. Based on teacher self-assessment, the consultation enhances teachers' abilities in ways targeted by the program, including enhancing teacher self-sufficiency.

Jewish Family and Children's Services is applying these results—along with the contents of the Early Childhood Mental Health Program manual, which

describes the elements needed for mental health consultation—in advocacy of policy changes and implementation of early childhood mental health services in childcare centers.

Qualified, Supported Consultants

Mental health consultants are recruited for their expertise, flexibility, and experience in the settings in which they will be working. After their initial training, but before they begin providing consultation, they make weekly visits to childcare providers, which last two to six hours each. These visits allow them to build trusting relationships with site directors and teachers, which are essential for the success of their work. A great deal of attention is paid to matching consultants with compatible childcare providers; consultants must participate fully in the life of a center—including having lunch and “hanging out” with teachers and attending social events—in order to do their jobs well. Each consultant must match his or her experience with the unique culture of a given center.

Consultants often work with staff and families in delicate and tense situations to help resolve conflicts or problems in a positive, productive way. To nurture the consultants’ ability to sustain such work, the program provides downtime as well as ongoing support and back-up from other consultants and from supervisors.

Services for Children with Special Needs

In all five counties served by the Early Childhood Mental Health Program, advisory boards are actively involved in improving referral mechanisms for children who need specific services and communication regarding these children. They have helped develop lists of pediatric psychologists, occupational and physical therapists, developmental psychiatrists, speech and language assessment agencies, and legal advocates, which they use when families need specialized services. Each community has special

expertise based on the members of its advisory board; for example, the Peninsula advisory group includes experts on Asperger Syndrome, pervasive development disorders, and autism.

Challenges

Economic Changes

Childcare teachers throughout the area have been personally affected by cutbacks, layoffs, and closures resulting from downturns in the economy. The program's consultants have been called on to help these staff deal with these changes.

Recruitment

The Early Childhood Mental Health Program is challenged by the need to recruit consultants who:

- Are bilingual and bicultural and match the variety of cultures represented in Bay area
- Have experience in group care situations
- Are knowledgeable about caring for and promoting the development of the youngest children