

The Architecture of Early Childhood Mental Health Consultation (ECMHC): The Bricks and Mortar of Conducting a Consultation

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What is ECMHC?

"A problem-solving and capacity-building intervention implemented within a collaborative relationship between a professional consultant with mental health expertise and one or more caregivers, typically an early care and education provider and /or family member" (Duran, F., et al., 2009, p.3)







What are the Aims of ECMHC?

Build capacity by improving ability and competence of staff, families, programs and systems to:

- Prevent, identify, treat and reduce the impact of mental health problems among children birth to 6 and their families.
- "Develop the capacity of the children from birth to age 6 to: experience, regulate, and express emotions; form close and secure interpersonal relationships; and explore the environment and learn -- all in the context of family, community, and cultural expectations for young children."
- Promote the optimal developmental capacity of children birth to 6 across developmental domains.







Case-Specific Consultation

- Addresses the factors that contribute to an individual child's (and/or family's) difficulties functioning well and developing optimally in an early care and education setting and
- Is a collaborative process of problem-solving and formulation of a plan to address the child's presenting challenges in adjustment and development. (Cohen & Kaufmann, 2005)



Programmatic Consultation

- Focuses on the early care and education program as a whole and
- Addresses how factors specific to that early care and education program impact the social-emotional development of the children (families) enrolled there. (Boothe & Nagle, 2013)





The Context of Consultation: Early Care and Education

- Care is a way of feeling and a set of actions that involve:
- Attentiveness
- Responsibility
- Competence
- Responsiveness (Tronto, 2001)







Education

• The deliberate activity of helping learners through the transaction of relating, teaching, learning, content and the environment to develop understanding and skills and make meaning from what is learned. (Ball & Forzani, 2008; Casper & Theilheimer, 2010)





What is Curriculum?

Curriculum is the organized framework that delineates the following:

- The content that children are to learn
- The processes through which children achieve the identified curricular goals
- What teachers do to help children achieve these goals
- The context in which teaching and learning occur. (NAEYC, 2003)





A Curricular Continuum

Child-Centered

- Child-focused/relationship-based
- Family friendly
- Culturally sensitive
- Play and development driven
- Learning through exploration and discovery
- Attention to individual differences







A Curricular Continuum

Teacher-Centered

- Teacher directed
- Highly structured
- Content focused
- Direct teaching
- Group cohesion and conformity







Examples of Curricula

- Head-Start Trauma-Smart
- Tools of the Mind
- Incredible Years
- High Scope
- Creative Curriculum







Comprehensive Approaches

- Montessori
- Waldorf
- Progressive education
- Reggio Emilia







Classroom Management and Structure

- Consistency of care(givers) and predictability of place
- Safety
- Has a curriculum
- Organized and predictable schedule and routines
- A balance of quite and active experiences/individual and group learning with attention to sensory and "muscular" activities
- Attention to transitions
- An organized environment with developmentally appropriate materials
- Attention to the sensory qualities of the environment





Classroom Management and Structure

- Appropriate space and materials for play
- Well designed learning centers with attention to content and materials
- Opportunities for creative and expressive experiences
- Optimal use of activities of daily living and physical caregiving for relating and learning
- Defined expectations and limits
- Classroom as community
- Language and literacy enriched environment
- Attention to school readiness
- Keeping the parents and family in mind
- Cultural sensitivity, accommodation and individual differences
- A cohesive well functioning classroom team
- Attention to family-school relationships (Casper & Theilheimer, 2010)







Social-Emotional Development in the Classroom

- Attachment, emotional safety, responsiveness
- Support and coping with the stressors of separation, reunion, transitions, teasing, limits
- Exploring emotions and practicing self-regulation
- Conflict resolution: rupture and repair
- Navigating difficult experiences and challenging conversations
- Being known-building and sustaining peer relationships
- Learning and practicing prosocial skills: taking turns, negotiation, compromise, sharing,
- Learning roles and rules
- Understanding through play (Casper & Theilheimer, 2010)







Behavior Management

Time Out (Behavioral)

- Removal from stimulus-neutral reinforcement
- Short duration (3-5 minutes)
- Caregiver: non-reinforcing but close by
- Self-regulation
- Positive reinforcement upon recovery
- Non-punitive







Behavior Management

Time In (relational)

- Behavior as communication
- Behavior as proximity seeking (attachment)
- Caregiver as co-regulator
- Bottom up approach-affect to reason
- Narration at appropriate language level
- Repair (making-up)







Preconditions

- Solid program infrastructure: leadership, defined model, evaluation
- High quality services

Building a working alliance (mutuality of endeavor)

- Helper rather than authority: There is no place for hierarchy in consultation
- Collaborator rather than expert-mutuality and reciprocity
- Generative solutions through collective problem solving
- Engage the classroom team: Network
- Engage the family from the start and include them as members of the team
- Promote a posture of: wondering, authentic interest and reflection
- Support the consultees as holders of valuable knowledge and agents of change



Framing, assessing and defining the presenting concerns

- Collect data from all constituents
- Observe
- Complete any formal or informal assessments
- Understand from another's subjective experience
- Consider all levels of influence and contributions from the child, parent, relationship, teacher/caregivers (functioning of classroom team), peers, environment (emotional climate), history (trauma, chronic stress, environmental/relational stressors)







Collaborative problem solving, formulation and intervention

- Sufficient time for meeting with classroom team, family and all relevant "voices"
- Reflection
- Defining strategies that are clear, operationalized and have relevance for home as well as school
- Review and draw from evidence-based resources
- Establish clearly defined duration and intensity of intervention; goals, objectives and expected outcomes; implementation/fidelity criteria







Implementation /coaching

- Modeling
- Reflective coaching
- Heighten reflective function
- Parallel process
- Reflective supervision/follow-up
- Use of video analysis







Outcome assessment

- Goal attainment scaling
- Formal and informal measures
- Changes in classroom practices promoting socialemotional competence
- Generalization of intervention and treatment effect
- Functioning of classroom team
- Parental appraisal
 (Duran, et al., 2009; Cohen & Kaufman, 2005; Johnston & Brinamen, 2012)







ECMHC Exercise

- Break into teams of 5
- View vignette
- Plan a strategy for what to do next in what sequence and who to involve
- Provide any immediate feedback
- Report back to whole group







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