School-Based Early Childhood Mental Health Consultation

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School-based mental health consultation recognizes and understands the importance of children’s emotional and behavioral needs in conjunction with educator/caregiver competencies. In early childhood classrooms, mental health consultation utilizes a problem-solving approach, creating collaborative relationships with educators to build their skills and expertise (Duran et al., 2009). Early childhood mental health consultation (ECMHC) works to maximize the social–emotional skills of all children while minimizing the vulnerabilities of children experiencing behavioral difficulties (Low & Shepard, 2010). Supporting educators in improving the quality of their teacher–student interactions consequently impacts prosocial development in early childhood. The emotional climate of the early childhood classroom is an important predictor of children’s social–emotional adjustment, and the quality of interactions with their teachers is predictive of further social skills development (Conners-Burrow et al., 2012). As emotional and behavioral challenges are increasing in early childhood settings, it is evident that mental health consultation is becoming increasingly necessary and beneficial (Green et al., 2006).

Characteristics of Effective Early Childhood Mental Health Consultation

- Consultants that form positive, collaborative relationships with staff members have better outcomes (Green et al., 2006).
- An increased frequency of consultation services provided tends to correlate with positive relationships with staff (Green et al., 2006).
- Engaging families in the consultation process, specifically when consulting on individual children, correlates with better outcomes (Virmani et al., 2013).
- Consultants clearly articulate their consultation model, including explanations of supervision and support options, to staff so services are clear and understandable (Duran et al., 2009).
- Consultants address promotion, prevention, and intervention in concrete terms so staff are aware of what resources are available at all levels (Duran et al., 2009).
- Consultants recognize and understand differences in early childhood education versus K–12 education and attend to those differences in consultation processes (Duran et al., 2009).
- Consultants who offered teachers information about age-appropriate capacities in the context of the classroom and child’s behavior had greater gains towards high-quality teacher–child interactions (Virmani et al., 2013).
- Consultants who offered teachers more information, resources, and services had greater gains towards positive interactions as teachers felt more empowered to be involved with their students (Virmani et al., 2013).
- Include evaluation as part of the consultation process, as feedback and quality improvement is necessary for effective consultation (Duran et al., 2009).

Models of Early Childhood Mental Health Consultation

- Program-centered consultation focuses on broader issues impacting the classroom climate and the overall early childhood program (Virmani et al., 2013).
- Program-centered consultation can be through both formal and informal means, such as observations, training, mentoring, coaching, staff meetings, and professional developments (Virmani et al., 2013).
• Child and family centered consultation focuses on strategies and supports for specific children (Virmani et al., 2013).
• Both program-centered and child and family centered consultation provide teachers the opportunities to develop competencies in addressing difficult behaviors and communicating with families about concerns (Virmani et al., 2013).
• Program-centered consultation focuses on broader concerns but applies to individual child concerns (Virmani et al., 2013).
• Child and family centered consultation for one child often increases teacher efficacy in applying the skills to similar concerns with different children in the future (Virmani et al., 2013).

Outcomes of Early Childhood Mental Health Consultation

• Children develop greater social skills with higher quality emotional interactions with their teachers (Virmani et al., 2013).
• Significantly lower ratings of hyperactivity, restlessness, externalizing behaviors, problem behaviors, and total problems (Gilliam et al., 2016).
• When consultation was available, preschoolers were less likely to be expelled than when consultation was not available (Low & Shepard, 2010).
• Teachers displayed improvements in areas of detachment and punitiveness, changing towards greater involvement and less harsh interactions (Virmani et al., 2013).
• Teachers reported lower job-related stress after effective consultation and links to reduced staff turnover were noted (Brennan et al., 2008).

REFERENCES


