Land Acknowledgement

• We acknowledge the stolen land on which we work and live, the land of the Dakota and Anishinaabe Peoples. We recognize that contextual and historical factors impact the mental health of young children and families and we acknowledge that historical trauma continues to be "felt" by Native American families and other communities who have experienced oppression and discrimination on these lands.

• We honor this land and the Anishinaabe value “every child is sacred” by committing to supporting the health and wellbeing of young children, their families and those who support them through our Infant and Early Childhood Mental Health services.

Today’s Objectives

Participants will be better able to answer these questions:
1. What is mental health consultation?
2. What are the foundational components?
3. What are the benefits?
4. What can a child care site/provider expect when signing up for this service?
5. How might a typical consultation session look?

Who are you?

• Please introduce yourself in the chat:
  1. Role and Place of Employment
  2. Length of time in your role
  3. Location
     (e.g. ECMH Coordinator MN DHS; 3 years (25 in the field); South Central MN)
What is Mental Health Consultation?

• Mental Health Consultation is a mental health prevention service focused on building the adults’ capacity to support infant and young children’s emotional development and to prevent, identify or reduce mental health challenges (Zero to Three, 2017).
• Consultants support child care providers (or others who work with children) so they are able to more fully support children.
• Consultants help providers remain curious.

What is Mental Health Consultation ? (continued)

Mental Health Consultation uses a combination of
1. Reflective consultation (active listening, the exploration of the teacher’s attitudes and beliefs about the situation, and problem solving)
2. Training
3. Skill building

Mental Health Consultation is not...

Though the service may feel therapeutic, is NOT a formal mental health assessment or therapy for a child or child care provider.

Poll

• I have participated in Mental Health Consultation
• I know of Mental Health Consultation but have not participated in it.
• This is my first time learning about Mental Health Consultation
Close your eyes and think about a challenging situation you’ve encountered in your work that involved a young child and a care provider.

**Components of Mental Health Consultation**

**Reflective Consultation**

- We wonder about a situation
- We listen
- We consider the experiences and feelings of self and others, including the child, child care provider and parents.
- We provide support and hold hope

**Training**

Within consultation sessions, there are many opportunities to integrate training. The MN Consultation System also has created four more formal trainings.

Develop Approved Training Topics:
- Development
- Working with Parents
- Trauma and Resilience
- Children’s Behaviors that Challenge Adults

*All with a lens of diversity, equity and inclusion.

Consultation and Trainings of Relationship Based Professional Development (RBPD) Events are credited to provider and site through the Develop system.
Skill Building

Consultants partner with the provider to come up with strategies which may include:

- Expanded ways to think about a child, family or situation.
- Practicing self-regulation techniques.
- Suggestions on how to relate to or co-regulate differently with a child, family or situation.
- Ideas on how to shift the environment to facilitate optimal social-emotional development.
- Providing developmental guidance

The Developmental Perspective

Developmental Psychopathology
(The Developmental Perspective)


The Consultative Stance

The Consultative Stance
1. The centrality of relationships
2. Parallel process as an organizing principle
3. Avoiding the position of the expert
4. Mutuality of endeavor
5. Understanding another’s subjective experience
6. Considering all levels of influence
7. Hearing and representing all voices
8. Wondering instead of knowing
9. Patience
10. Holding hope
<table>
<thead>
<tr>
<th>Mutuality of endeavor</th>
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<td>“A consultant’s advice, no matter how intelligent and how ‘right,’ is useless if it does not consider the caregiver’s perspective and understanding (influenced by individual history, culture, and previous experiences with other children and the child) of the situation and, ultimately, the caregiver’s willingness to participate in particular changes.”</td>
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<td>Johnston &amp; Brinamen (2006)</td>
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<table>
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<th>Avoiding the position of expert</th>
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<td>The consultant knows that there is always more to know</td>
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<td>Johnston &amp; Brinamen (2006)</td>
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<th>Understanding another’s subjective experience</th>
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<td>The consultant instills the idea that relationships affect children’s behavior, that patience in the face of crisis is a response, and, most importantly, that “not knowing” is not incompetence but a momentary experience that precedes understanding.</td>
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<td>Johnston &amp; Brinamen (2006)</td>
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<th>Considering all levels of influence</th>
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<td>• Personal history of the caregiver</td>
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<td>• External influences, e.g. programmatic and bureaucratic pressures &amp; program philosophies</td>
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<tr>
<td>• Interpersonal influences, e.g. provider’s relationships with co-workers, administrators, parents, other children</td>
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‘Hearing and representing all voices’— Especially the child’s

• Represent the perspective of one participant to another to increase capacity for direct communication with each other

• Amplify the voices of children so that their experience can be included and appreciated in solutions and in the daily functioning of the program

Parallel process as an organizing principle

The relationship created between caregiver and consultant and its quality absolutely create change in the child-caregiver bond in the same way that a child’s behavior in the child-caregiver relationship is strongly influenced by prior relationship experiences, especially the parent-child.

Diversity-Informed Tenets

The Tenets are grounding, guiding and aspirations principles that guide our consultation. We aim to promote diverse, equitable and inclusive Infant and Early Childhood work.

Tenet #1
Self-Awareness leads to better services for families

The FAN
How might a common Mental Health Consultation Session Look?

1. Check-in which may include a centering or mindfulness practice.
2. Setting a shared agenda (“What would you like to think about together today?”)
3. Collaborative Reflective Exploration: Wondering together about the identified topic (this could be a situation, a topic, a feeling and/or other experience and participants wonder without rushing to solutions)
4. Regulating (if necessary)
5. Integration/Next Steps
6. Closing: Identify a word that captures your experience or a “take away”

Anthony’s story

Anthony is a twenty-month-old child in a toddler classroom who has begun biting his classmates, often leaving a bruise. His biting tends to occur during conflict over toys, when children are crowded together and during transition times. Anthony’s mother appears to be very anxious about this and is worried that her son is a “bully.” Other parents are beginning to complain and the teacher is becoming increasingly stressed about his biting and is wondering if Anthony should be excluded from the program.

Thinking about Anthony....

- What’s it like to be Anthony?
- What’s it like to be his mom?
- What’s it like to be his teacher?
- What’s it like to be the other children & parents?
- What’s it like to be you, the RBPD specialist?
- How are you attending to all the relationships?
The Benefits of Mental Health Consultation

- **Reduce staff stress and turnover in child-serving agencies**
  - Research shows that mental health consultation in childcare improves childcare staff retention and morale. (Shivers, E. M., Guimond, A., Steier, A., 2015)

- **Decrease mental health symptoms in young children**
  - A randomized clinical control trial demonstrated that mental health consultation not only prevented mental health disorders in young children, it also reduced mental health symptoms in young children exhibiting impulsivity and hyperactivity. (Shivers, E. M., Guimond, A., & Steier, A., 2015)

- **Reduce the educational disparities experienced by children of color**
  - Research shows that both teachers of color and white teachers worry about the behavior of African American boys more than African American girls, white girls or white boys (Gilliam, W.S., Maupin, A. N., Reyes, C. R., Accavitti, M., Steier, A., 2016)

- **Reduce the expulsion of children from childcare and early learning**
  - Research shows that MH consultation reduces the expulsion of children from childcare (Perry, Dunne, McFadden, Campbell, 2008)

- **Increase early learning staff competence in addressing trauma, adversity and early childhood and family mental health conditions**
  - Increase the capacity of staff to serve high-risk, disrupted families.
  - Improve access to early intervention and direct care services for young children struggling with mental health and developmental challenges.

Implicit Bias in Preschool

- **Coaching**
  - Builds skills of teachers/providers to promote healthy development
  - Target—early childhood settings
  - Theoretical foundation - Education
  - Provided by professional in early childhood education, special education

- **ECMH Consultation**
  - Builds capacity of providers & families to support social-emotional health of children, staff and families
  - Target—early childhood settings and families
  - Theoretical foundations - mental health/trauma/systems
  - Provided by licensed mental health professional
  - Mental & Carlson (2017)

Similarities and Differences

- Coaching
- ECMH Consultation

Coaching & consultation’s Common goals

- Retain and support early childhood professionals in their challenging work;
- Promote children’s mental health and well-being;
- Enhance providers’ mindfulness and skillset for working with children with emotional and behavioral challenges [and their families]. Mondi & Carlson (2017)
Minnesota’s Early Childhood Mental Health Consultation System

Who are the Mental Health Consultants?

- All are by licensed mental health professionals (Therapists) under contract with the Behavioral Health Division at the State of Minnesota (we have 60 throughout the state).
- All consultants hold expertise and skills in early development, early childhood mental health, relationship building, and motivational interviewing.
- All consultants are content area expert trainers and Relationship Based Professional Mental Health Consultants in Minnesota’s Quality Rating Training System (this is so teachers get credit from participating in mental health consultation).
- All consultants will be actively pursuing or will have Infant Mental Health Clinical Endorsement at Level 3 or 4.
- All have received training through the DHS system (75-100 hours initially), at least 3-5 days training annually and monthly reflective consultation.

Types of Mental Health Consultation Programs offered through MN DHS

A Visual of the Current Mental Health Consultation System in Minnesota

Types of Mental Health Consultation Offered

A combination of:

- Program-focused consultation—Center directors and family child care providers are supported by the Consultant to make changes in their childcare practices and/or policies to the benefit of all of the children and adults in their setting.

- Classroom-focused consultation—The Consultant also works with teachers to improve the care offered to all children in their classroom or family home childcare by helping to identify attitudes, beliefs, practices and conditions that may be challenging the quality relationships between teachers and children.

- Child-focused consultation—When a specific child's behavior is of concern to parents or teachers/child care providers, the Consultant helps the adults understand and address the child's needs by developing an individualized plan with the parents and teachers/child care providers.

Types of Mental Health Consultation Programs offered through MN DHS

- Mental Health Consultation to Parent Aware Enrolled Sites
  - Must be Enrolled in Parent Aware
  - 30-50 hours Family Child Care and 50-100 hours Center-based Child Care
  - 2-4 meetings per month per site/classroom (Consultant arranges a schedule with the Director/Owner). Virtual during the pandemic.
  - 1 year

- Brief Mental Health Consultation
  - Any licensed child care site (outside of Head Start)
  - 5 session Limit
  - Virtual meetings

- Special Projects Consultation
  - Hubs
  - Trauma and Healing Learning Communities

Impact Measurement

- MBI: Maslach Burnout Inventory for Educators
- PERM: Preschool Expulsion Risk Measure (Walter Gilliam)
- CHILD: Yale Climate of Healthy Interactions for Learning and Development tool
- IAT: Harvard Implicit Association Test

The CHILD (Yale)

- Transitions – smooth, efficient, flexible, and productive transitions between activities.
- Directions and Rules – behavior management characterized by setting, modeling, and clear, consistent, and developmentally appropriate rules of conduct and applying proactive and positive behavior strategies.
- Staff Awareness – monitoring and attunement to both overt and subtle signals and signs for assistance.

- Staff Affect – emotional state of adults.
- Staff Cooperation – adults’ demonstration of teamwork, camaraderie, and genuine enjoyment of each other’s presence.
- Staff-Child interactions – adult interactions with children characterized by dignity, respect, genuine relationships, equity, and the celebration of diversity.
- Individualized and Developmentally Appropriate Practices – promotion of holistic development through a child-centered and individualized approach.
- Child Behaviors – child behaviors exhibiting positive affect and self-regulation.
What is the funding for the System?

- State appropriation (ECMH funding since 2009)
- Behavioral Health Federal Block Grant
- Childcare Development Block Grant (for MH Consultation)
- Preschool Development Block Grant

Where do the consultants work?

ECMH Consultation Reach

As Dec 2021
Cumulative number of childcare sites that have received consultation

Break into groups and consider each perspective with YOUR example
If you would like to participate in Mental Health Consultation have your Quality Coach make a referral. If you have questions, contact:

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