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Foreword by Jane Knitzer

Mental Health Consultation

in Early Childhood

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by

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Foreword

Mental Health Consultation in Early Childhood is a timely and important book. Throughout the United States, staff and directors working in Head Start, Early Head Start, preschool, and child care programs are asking for help. Reports are consistent from all parts of the country. Too many young children are showing behaviors that are troubling, some so provocative and challenging that they are asked to leave their programs because staff do not know how to help them. Families are experiencing greater and greater stress levels, and early childhood staff report feeling burdened despite the enormous dedication and commitment of many. This book can help.

The insights and wisdom that Dr. Paul Donahue and his colleagues Drs. Beth Falk and Anne Gersony Provet have amassed in *Mental Health Consultation in Early Childhood* provide a framework for enhancing the quality of early childhood programs, particularly center-based ones, and for helping staff as well as children and families. The book is about how to use clinical mental health perspectives and skills in the service of promoting healthy emotional development in young children, including those who are already scarred by harsh early experiences, who participate in early childhood programs. It provides an insider's view of the consultation process, highlighting the central importance of building mutually respectful collaborations between consultants and administrators and consultants and teachers. It also articulates clearly the many roles that mental health consultants can play. These include problem solving with staff about individual children and families or classroom management issues; guiding staff to solve collective problems; helping staff members recognize and celebrate their hard work and importance to the children; modeling alternative approaches and behaviors for caregivers; offering guidance to families; facilitating referrals if necessary; helping staff respond to crises, such as community violence or family disasters; and, most important, helping to restart the healthy growth process for young children who have experienced damaging early relationships and experiences.

The authors bring a unique perspective to the task of getting inside the consultation process. They are grounded in the daily realities of the kinds of pressures that pervade the lives of early childhood program administrators and staff, as well as the children and families in the programs. From this knowledge, they have built a rich resource for others—a book filled with a sophisticated blend of clinical insights and common sense, organized in a way that is useful for practitioners and

students seeking to master the complexities and possibilities of effective consultation. Theirs is not a “cookbook approach,” a behavior management curriculum for all children or a set of guidelines for workshops. Rather, what the authors describe is a form of ethnographic and psychological consultation. It is ethnographic in that the consultants enter into the life of the center, viewing it as a culture, and psychological in that the role of the consultant is to try to assess and understand not just the dynamics of individual children, caregivers, and families, but the program culture and dynamics as well. The aim is to understand and intervene respectfully to enhance the caregiving context for all staff, children, and families involved.

Key to the vision of consultation espoused in this book, and underscored in virtually every chapter, is the importance of building relationships with the staff and the directors—trying to walk, as it were, in their shoes. This book does not offer a quick-fix set of tools, although it is rich with ideas and specific activities that consultants can undertake. The point is also clear that to do their job well, early childhood mental health consultants must make a sustained investment in the many (and sometimes tangled) relationships in a particular setting. They must be strategic about how to enter into an ongoing context; to develop interventions that work for the culture of each program; to respond with sensitivity and openness to issues of class, race, and ethnicity; and to help staff cope with the varied challenges they face. Yet mental health consultants also get to share in the victories, small or large.

The authors are well aware that mental health consultation is no substitute for having staff trained in early childhood development and quality child care and early education practices. But they also recognize that training in these basics is often woefully inadequate and that it is even less adequate in equipping staff to address the widespread—indeed, virtually predictable—stresses and even trauma that so many young children and families experience. Hence, the authors pay particular attention to coping with trauma in young children in the context of early childhood environments.

This book fills a gap in the early childhood and mental health literature, which offers relatively few resources for enhancing mental health in the context of early childhood settings. But it also signals a larger societal challenge, that of paying more attention to the emotional well-being and development of young children. Although this is not a new perspective, it is one that often gets lost in the efforts to promote the cognitive and physical well-being of young children, particularly by funders and policy makers. Yet, as recent research on early brain development has reconfirmed, the emotional pathways and patterns established in early childhood are key to the later success of young children. This gives special significance to the authors’ view that early

childhood programs provide an opportunity to check the “wellness” of young children.

This book is targeted to practitioners, both new and experienced. (It would, for instance, be especially useful for those supervising new consultants.) But it is my hope that the message of this book will also reach two other very important audiences. The first audience is those studying early childhood education, early intervention, social work, and psychology. For these students, this book offers a gold mine of real-life experiences to discuss and role play, drawing on the many vignettes illustrating both successful and unsuccessful strategies.

But even more important, it is my hope that the message of this book will be translated back to a second group, policy makers. We face a policy context that is inhospitable to strengthening and expanding early childhood mental health consultation. Too often, there seems to be no way to pay for the kind of work that is described in this book. Many of the children are at risk of developing behavior and emotional disorders, especially if they do not have access to ecological and supportive interventions. Yet current mental health reimbursement and other policies typically require children to have a diagnosable disorder in order to receive treatment or consultation. Even for young children, being at risk of developing a disorder is not a sufficient gateway to services.

Perhaps this book will inspire a rethinking about the need to target more mental health resources toward young children and to use them in ways that support the kind of consultation strategies highlighted throughout this book, as well as to provide treatment to the young children and families facing the greatest difficulties. Perhaps it will also spur the increased use of Head Start and Early Head Start dollars for this kind of on-site mental health consultation. Equally important, it may stimulate the still too small but growing initiatives to use child care quality enhancement dollars to support efforts like these. This book is a practical, grounded guide to helping those who work directly with young children and families. Yet it is also a wake-up call to include program and case consultation as a routine part of efforts to promote the well-being of young children and families, particularly those burdened by poverty, disability, and other risk factors that have potentially and—sadly—often predictable deleterious effects. In short, this book is a call to reinvent a societal commitment to strengthening the tools, strategies, and policies that will allow every child to enter school emotionally ready to succeed.

Jane Knitzer, Ed.D.

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Preface

The model presented in this book reflects our experiences as consulting psychologists in a variety of preschool and child care settings. We were introduced to early childhood consultation through our affiliation with The Center for Preventive Psychiatry (the Center), a community mental health center in White Plains, New York. We have drawn extensively from our clinical work at the Center and from the seminal work of many of our colleagues there as well as from our experiences in school systems and in private practice as consultants. A number of researchers, clinicians, and educators have made considerable strides in developing school-based consultation and prevention models (Alpert, 1982; Cowen et al., 1996; Gutkin & Curtis, 1990) and on-site interventions in early childhood programs (Edlefsen & Baird, 1994). This book should be viewed as an extension of previous school-based efforts to reach out to young children and their families, with a particular emphasis on building collaborations between mental health professionals and early childhood educators.

We are often contacted by program directors who want their staff to learn more about child development and to gain strategies in dealing with children who pose challenges in the classroom. Sometimes there is a particular crisis in the school that warrants our immediate intervention. In other cases, we are asked to address long-standing conflicts between staff members or to make suggestions for improving specific program areas, such as parent outreach. Usually we contract to be on site on a weekly basis for at least 1 academic year and spend anywhere from 3 hours to 3 days per week on site.

In our initial meetings with the preschool staff, we emphasize three features of our work. First, we talk of possible roles that we might play as consultants and try to define the initial parameters of our work based on the individual program's needs. Second, we emphasize that although we strive to enhance the workings of the entire system, we can best accomplish this goal by developing trusting relationships with the individuals in the program, including teachers, families, and children. To do this we must have the freedom as clinicians to respect the confidentiality of our clients and to define the boundaries of our communication with administration and other staff members (see Tobias, 1990). Last, we encourage the school staff to view our work as an ongoing process that may not lead to immediate change or a "quick fix" but, given time, should influence the system in positive ways.

We expand on these themes throughout the book and try to bear in mind the opportunities and perils present at each step in the collaborative process. The book is arranged in three sections. First, we explore ways of establishing a collaborative relationship between the consultant and the staff of the school, focusing initially on the entry process and then proceeding with specific suggestions and techniques for working with administrative staff and teachers. Second, we examine the consultant's on-site work with children and parents, including classroom-based prevention strategies and therapeutic group activities. This section also focuses on dealing with crises in the school and designing interventions for individual children and families who experience trauma. Finally, we reflect on the challenges we have faced in this work and the rewards, for both the consultants and the early childhood centers, of developing a strong partnership. We also discuss practical ways of establishing and maintaining a collaborative relationship and end with a review of the broader implications of this model.

This book is intended to enhance the working relationship between mental health professionals (also referred to as consultants, therapists, and clinicians throughout this book) and early childhood educators. It is designed for individuals from traditional clinical settings as well as administrators, directors, and special needs professionals from early childhood programs who share the goal of meeting the mental health needs of young children. We also expect the book to be of interest to graduate students in clinical and school psychology, social work, and education. The book may also be a useful resource for policy makers and community activists looking to build more effective community-based programs for young children.

Although many of our case illustrations and substantive clinical discussions emerged from our work in Head Start and other programs serving disadvantaged children in urban environments, we have selected examples and themes with relevance for diverse ethnic, cultural, and programmatic contexts. Early childhood environments include full-day child care centers, school-based prekindergarten programs, Head Start centers, and private nursery schools. Child care programs are sometimes less structured and academic than preschools that offer more formalized education, but the central issues and educational goals for these programs are quite similar. We therefore expect that the majority of the material will be applicable to both environments. Although we do not specifically address the concerns of in-home child care providers, we believe that some of the material will be relevant to them.

There are salient differences that can be expected across program settings, geographic location, and population served, but a central feature of our collaborative model is the absence of a simplistic blueprint

that rigidly prescribes the activities and roles of the mental health professional or presumes to predetermine the needs of the preschool program. Rather, the model emphasizes the transactional relationship between the consultant and the child care center: Both parties work together to determine goals and select from a multitude of possible roles, activities, and structures whereby the mental health professional strives to meet the early childhood program's needs. Although there are a number of general principles—as well as philosophical and ethical beliefs—that remained fixed, the form and content of the partnership is indeed fluid so that a wide range of collaborators can work effectively with diverse populations in a variety of environments.

Our goal is to provide both a conceptual framework and concrete guidance for mental health professionals and educators who may find themselves in situations and settings for which their training has not adequately prepared them. By highlighting the difficult but extremely rewarding nature of this work, we hope this book encourages partnerships that foster children's development and ultimately strengthens the resilience and coping abilities of young children and their families.

Acknowledgments

This book's model emerged from a longstanding mental health–early childhood education partnership. For several years, large numbers of teachers, social workers, and directors in early childhood programs in our region, Westchester County, New York, had been reporting increases in challenging behaviors and family problems. Many directors stated that adding on-site mental health services was their number one priority. As a result of these requests, the social service agency overseeing many of the Head Start and child care programs, the Westchester Community Opportunity Program (WestCop), decided to expand its contract for consultation services with The Center for Preventive Psychiatry (the Center), where all of this book's authors have served on staff. Funding for the program came primarily from Head Start, which in 1998 changed its program mandate to include a goal of on-site mental health services in all Head Start centers. In addition, the Center secured a grant from the Community Development Block Grant program of the U.S. Department of Housing and Urban Development to support its efforts in child care and preschool programs. We are perhaps proudest of this source of funds, with its symbolic recognition that quality child care and preventive mental health services are essential building blocks of a community.

The Center for Preventive Psychiatry is an outpatient mental health clinic that for more than 30 years has emphasized prevention and early intervention services for young children and their families, with a particular focus on childhood trauma. Clinicians from the Center have been consulting to nursery schools, child care centers, and Head Start programs almost from its inception. Since the early 1990s, the Center has greatly expanded its community-based projects, and its staff have focused a good deal of time and energy on developing its early childhood consultation service as a cornerstone of these programs. As of 1999, the Center provided on-site mental health services to more than 20 nursery schools, Head Start programs, and child care centers in Westchester County and offered professional training to child care staff and educators throughout the region.

We owe our gratitude to many of our colleagues at the Center. A number of current and former staff members have imparted their clinical wisdom to us and allowed us to tap into a deep reservoir of early childhood experiences. We would especially like to cite the work of Arthur Zelman, Medical Director of the Center; Ann Kliman, Director

of the Situational Crisis Service; and Tom Lopez, Director of the Cornerstone Nursery. All were forerunners in providing community-based mental health services to young children and their families, and they continue to train and inspire the next generation of clinicians regarding the value of prevention and early intervention. We also want to thank Karen Roser, who made a substantial contribution to the conceptual development of this book and the early stages of the manuscript and always approached her consultation work in a thoughtful and compassionate manner. We are indebted to Monica Morton, whose ability to connect with families having multiple stressors and commitment to treating young children affected by trauma served as benchmarks for our own clinical and training endeavors. Our colleagues in the Early Childhood Consultation service deserve special mention for their efforts on behalf of young children and families, their collective clinical wisdom, and the *esprit de corps* that they brought to our group discussions. In particular, we thank Susan Davis, Amy Resnick, Ann Spiegel, and Rita Stewart. We also appreciate the administrative support of Sylvia Bloom, Jonathan Cohen, Harvey Newman, and Rosetta Rhodes at the Center.

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*To my wife, Jennifer, my partner in love and work;
to our children, Sean and Nora, who are a constant
source of wonder and joy in my life
(PJD)*

*To my husband, Daniel Herman, and our children,
Matthew and Rachel, my wellsprings of love and learning
(BF)*

*To my husband, Peter, and our sons, Jeremy, Jackson,
and Samuel, who are the center of my life; also to
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(AGP)*

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