



# Mental Health Consultation: Positive Partnerships with Diverse Rural & Urban Programs

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# Presenters

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# Overview of Presentation

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- Summary of MHC Focus Groups
- ECMHC Definition
- Need for MHC
- Role of MHC
- Support & supervision
- Positive relationships with EC staff
- Resources
- Questions & discussion

# MHC Focus Groups

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- Purpose: To learn directly from rural and urban MHCs about how they develop relationships with Head Start staff
- 8 telephone focus groups: 2 groups of rural AK MHCs; 3 groups of rural OR MHCs; 3 groups of urban OR MHCs
- 26 MHCs participated:
  - 15 social workers; 8 counselors; 2 psychologists; 1 psychiatrist
  - 25 had Master's degree & 1 had PhD
  - 5 identified as persons of color
  - 4 employed by HS



# Early Childhood Mental Health Consultation (ECMHC)

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- A problem solving & capacity-building intervention implemented within a collaborative relationship between a MH professional & EC staff (Cohen & Kaufmann, 2005)
- Includes culturally sensitive, indirect services for children birth through six in groups care and early education settings
- Purpose: To promote social and emotional development in young children and to transform children's challenging behaviors



# ECMHC: The Services

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- Observation and assessment of children & caregiving environment
- Support and capacity building for staff & family members
- Designing interventions that support staff in promoting social & emotional competence of young children



# ECMHC: The Need

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- Mental health consultation is a widely used strategy for addressing the mental health needs of young children, their families, and early childhood care providers
- ECMHC is important for early identification of children's needs & preparation for school
- Mental health consultation is a key strategy for reducing expulsion rates in early childhood programs (Gilliam, 2005)
- For children in rural areas, ECMHC may be the only available MH services for children this age,



# Mental Health Consultant: The Role

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- It's important that early childhood staff work collaboratively with social workers in order to define the role.
- Depending on location, demographics, and need, the duties and responsibilities of MHCs vary.

# Mental Health Consultant: The Role

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- Lack of role definition caused stress and confusion for the consultants and Head Start teachers and staff.

*"One thing that was difficult is I was unclear of my own role. I didn't really know what was the expectation and what it was that I could provide...For example, therapeutic intervention versus just a consultative intervention was confusing to me."*



# The role: Based upon relationships

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- Mental health workers should expect their role to evolve as relationships develop with early childhood teachers and staff.
- Lack of resources in rural and urban communities cause early childhood staff to rely on MHCs to provide a broad range of services (outside of their perceived role).



## The role: Based upon relationships

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*"We do end up taking on things that really should be something that we are referring on. Like there isn't enough adult mental health, especially individual treatment for a lot of our parents so we end up taking that on. Then we end up supervising visits and doing half of DHS's job. We end up wearing so many hats that that is part of what is exhausting."*

# Boundaries

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- Mental Health Consultants must create boundaries in order to help clarify their role and create consistency in early childhood settings.

*"I think it is important for the consultant to understand what the limits are, and to be able to convey them, because there is a lot more that needs to be done, and I agree there is a tendency to at least want to help in all areas, but to recognize that that is just not possible. The consultant would need to be able to set the limits and consistently keep them, because people forget and try again."*



## MHC Role

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- MHCs also believe that training and supervision help to lessen role confusion from the start.

# MHC Support & Supervision: Reduce Isolation

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- Skills needed by ECMH Consultants
  - Knowledge of Early Childhood Development / Early Childhood Classrooms
  - Ability to observe children objectively & formulate assessments/recommendations
  - Familiarity with disorders that present in Early Childhood as well as resources to refer families to / potential treatments
  - Able to conduct trainings & work in a consultative role.
  - Comfort integrating current resources utilized by programs (Positive Behavioral Supports, Positive Discipline, CSEFEL, Incredible Years)

# MHC Support & Supervision: Resources for new ECMHC

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- Orientation & training from Program for which you are providing consultation
- Investigate/utilize websites & printed materials
- Network to find ECMHC experience & expertise
  - Early Childhood Special Education (Local ESD)
  - Local therapists with Early Childhood experience
  - Contact other Early Childhood programs or Head Start programs to learn who they utilize for consultation

# Supervision of Interns in an ECMH Consultation Role

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- Strategies for supporting them
  - Offer supplemental training that addresses the specialty of this role
  - Clearly define their role, both to them and with other staff
  - Peer Consultation
  - Consistent Supervision



# Positive Relationships: Key to Successful Consultation

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- Mental health consultants who build positive relationships with staff & parents have been found to be most successful in helping to reduce children's behavioral problems & improve their positive social behavior



# Positive Relationships

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- Building relationships take time
- Opportunities to meet with EC staff
- Program administrators are key
- Establish credibility
- Use strengths based approach
- Cultural sensitivity
- Listen to staff



# Building relationships take time

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*"...just to take time to get to know the people they are working with and visit the classrooms and spend time and not feel an urgency to start diving right in right away."*

# Opportunities to meet with EC staff

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*"I wish that I would have been more properly introduced to all the staff so that they knew who I was and that I knew who they were, so when I stepped into that system I knew who they were, what role they played in the students' and in the staffs' lives and what they expected of me."*



## Program administrators are key

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*"I think what was really helpful to us is that ... the [management] had social work backgrounds, so they really understood what mental health was about and welcomed it, and were supportive about it..."*



# Establish credibility

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*"You can have all of the clinical expertise in the world, but if you look like a deer in the headlights when you go into the classroom, you lose credibility."*



## Use strengths based approach

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*"Try to be positive. Hopefully, if you are consistently present there in her classroom, you are helping out, and you are being positive, then she will eventually come to you and talk with you about specific children that she is concerned about. Just put some faith in the building of that relationship."*



# Cultural sensitivity

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*"So from the very beginning really... recognition of one's own self, one's own values, one's own belief system, one's own culture, to really know yourself in a certain way so that ...you can be open and helpful and not condescending and not off-putting to the people that you are working with. So...the first piece is knowing yourself and then having great insight...into your own self and your own culture."*



## Listen to staff

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*"I just solicit her opinions about the kids that I see without actually saying I think they have behavior problems. I just ask her opinions about those kids, what she thinks about them and what she has done with them, just to let her have a chance to speak before I would venture to saying anything about them. I hope that maybe she might say something that I can concur with that would lead into a discussion of further intervention."*

# Questions & Discussion

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Thank You!