





Infant-Toddler Climate of Healthy Interactions for Learning and Development (I-T CHILD) Symposium











Agenda

- Introduction to the I-T CHILD
- Panel presentations from partnering organizations:
 - Yale CHILD Studies Center
 - Early Care & Learning Council
 - Docs For Tots
 - CUNY Professional Development Institute
 - Youth Research Inc.
- Closing remarks
- Questions

Rate your knowledge about:

Infant-toddler mental health consultation

I-T CHILD model

Classroom climate assessments

Join at menti.com use code 3332 7207

What are you hoping to learn?







I-T CHILD: Building a Stronger and Healthier New York with Evidence-Informed IECMHC

Chin R. Reyes, Ph.D.

June 2, 2023 Albany, NY













Latest Issues

SCIENTIFIC AMERICAN.

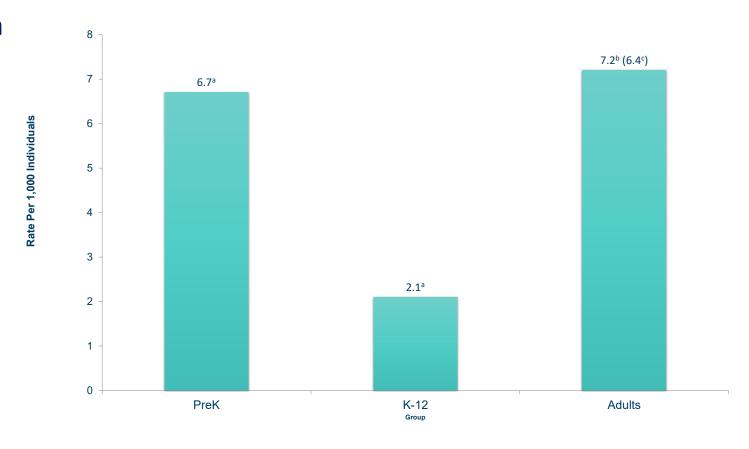
The Washington Post Democracy Dies in Darkness



New federal data shows Black preschoolers still disciplined at far higher rates than Whites



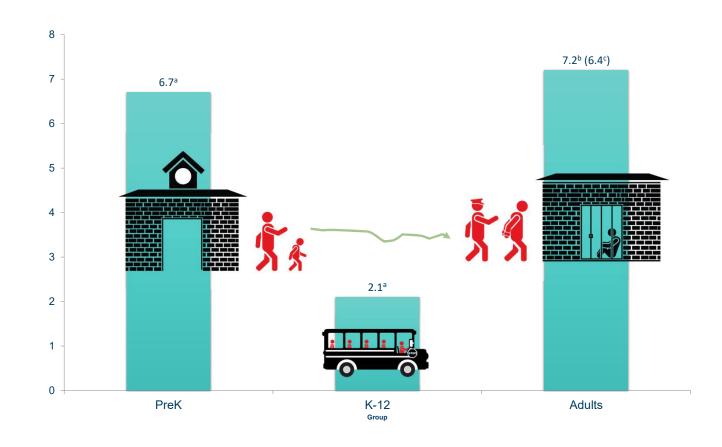




^a Gilliam, WS (2005). Prekindergarteners left behind: Expulsion Rates in state prekindergarten programs. FCD Policy Brief, Series No. 3. Available: www.ziglercenter.yale.edu/publications/briefs.html

^b Walmsley, R. (2013). World prison population list (10th ed). London, UK: International Centre for Prison Studies.

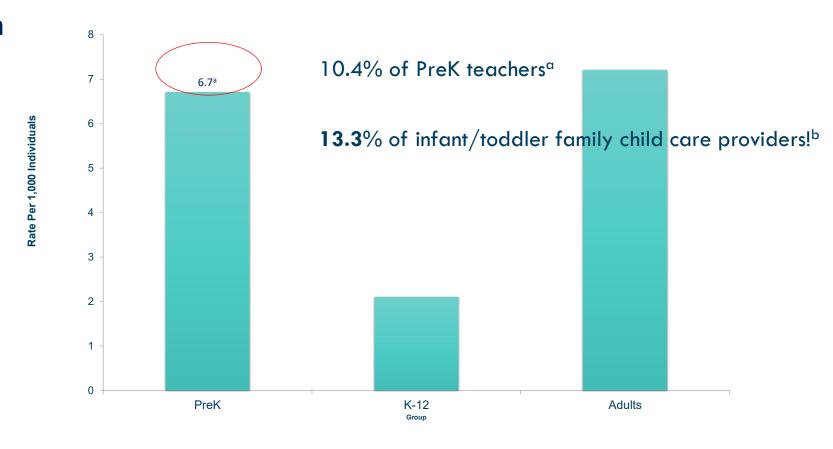




^a Gilliam, WS (2005). Prekindergarteners left behind: Expulsion Rates in state prekindergarten programs. FCD Policy Brief, Series No. 3. Available: www.ziglercenter.yale.edu/publications/briefs.html

^b Walmsley, R. (2013). World prison population list (10th ed). London, UK: International Centre for Prison Studies.

^c Kang-Brown et al. (2021). People in jail and prison in 2020. Brooklyn, NY: Vera Institute of Justice.



^a Gilliam, WS (2005). Prekindergarteners left behind: Expulsion Rates in state prekindergarten programs. FCD Policy Brief, Series No. 3. Available: www.ziglercenter.yale.edu/publications/briefs.html

^b Hooper, A., & Schweiker, C. (2020). Prevalence and predictors of expulsion in home-based child care settings. Infant mental health journal, 41, 411-425.

Classroom Disruption

This child's behaviors interfere with my ability to

maintain control of the class.

Disruption

Teacher Stress

My job as a teacher would be easier if this child were not in my classroom.

Hopelessness

This child's behaviors are not likely to improve significantly.

Fear of Accountability

This child might do something for which I would be held responsible, reflecting poorly on my teaching skills.

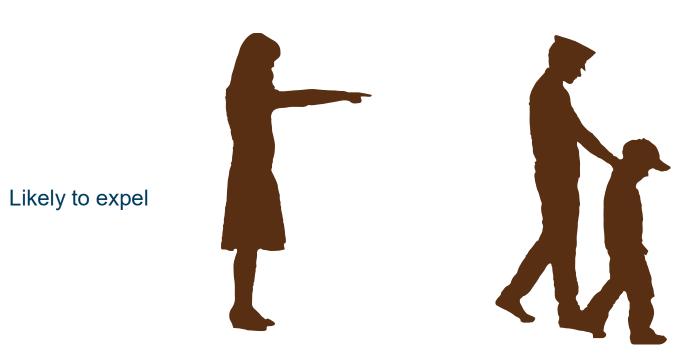


Request early childhood mental health services

Classroom Teacher Disruption Stress	
-------------------------------------	--

maintain control of the class.

This child's behaviors interfere with my ability to My job as a teacher would be easier if this child were This child's behaviors are not likely to improve This child might do something for which I would be



	Fear of Accountability
	Accountability

This child's behaviors interfere with my ability t

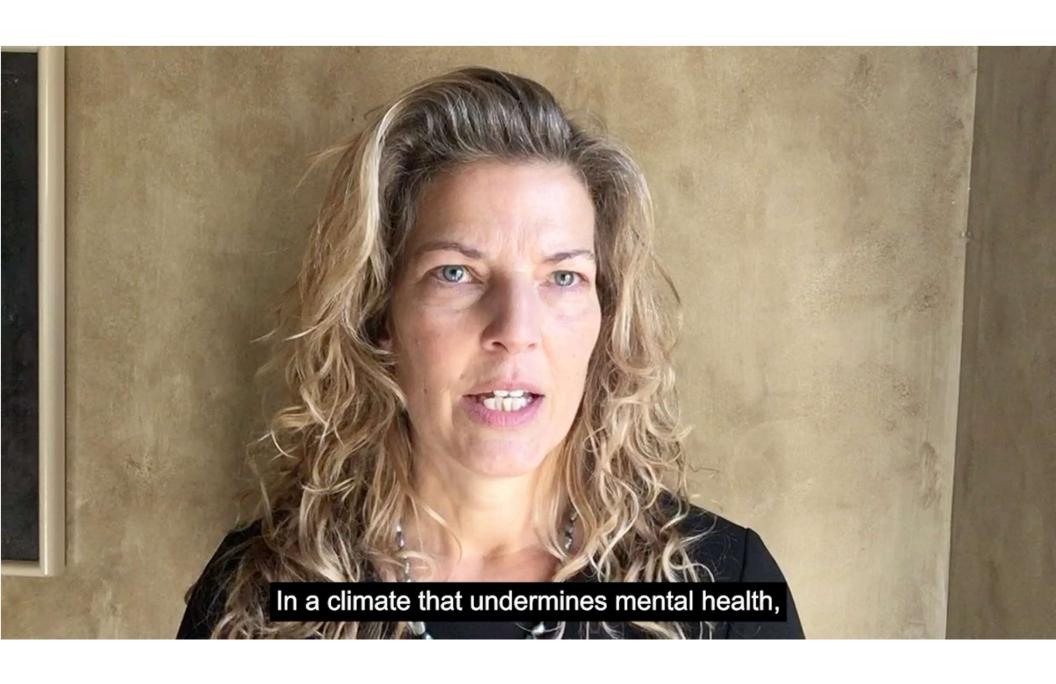
My job as a teacher would be easier if this child were

This child's behaviors are not likely to improve significantly

This child might do something for which I would be held responsible, reflecting poorly on my teaching skills. Preschool expulsion is not a child behavior.

Preschool expulsion is not a child behavior.

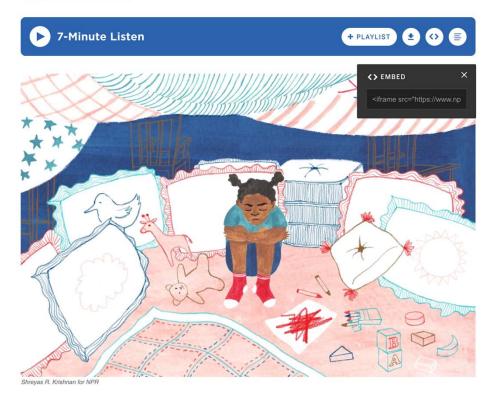
It is an adult decision.



Preschool Suspensions Really Happen And That's Not OK With Connecticut

September 5, 2016 · 6:23 AM ET Heard on Morning Edition







News Pandemic

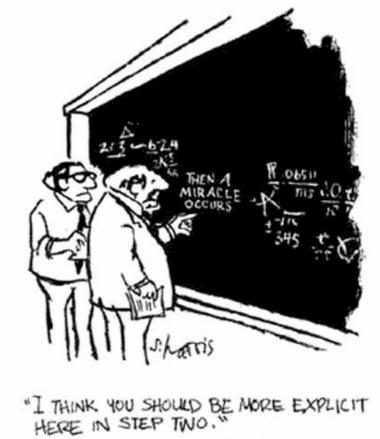
As Early Ed Teachers Prepare for Fall, New Study Backs Efforts to Support Young Children's Mental Health



At Kidango, a network of preschools in the San Francisco Bay Area, all teachers receive training in addressing challenging behavior in the classroom. (Kidango)



To make an impact, good intentions aren't good enough.





"We cannot improve at scale what we cannot measure."



~ Bryk et al (2015)



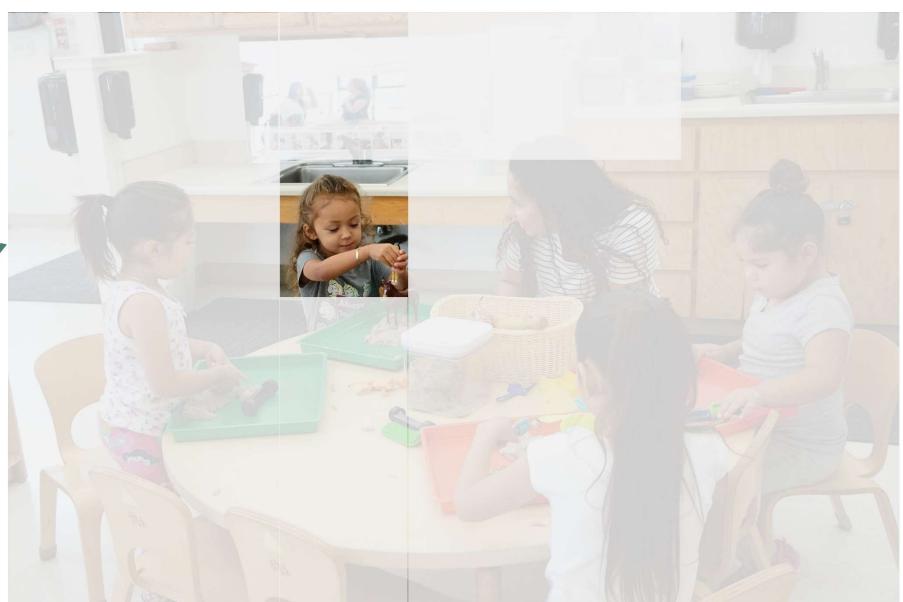










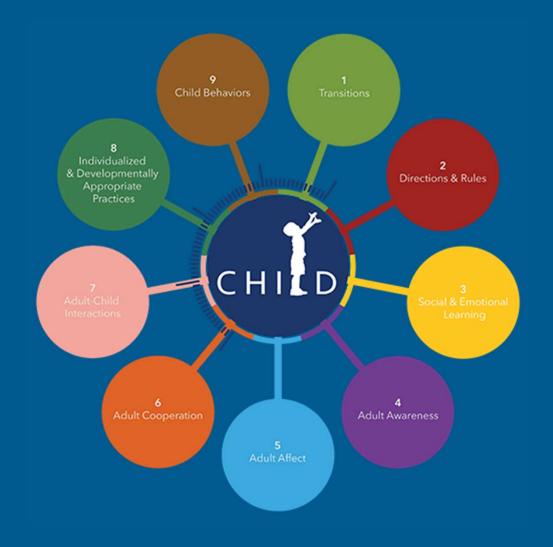










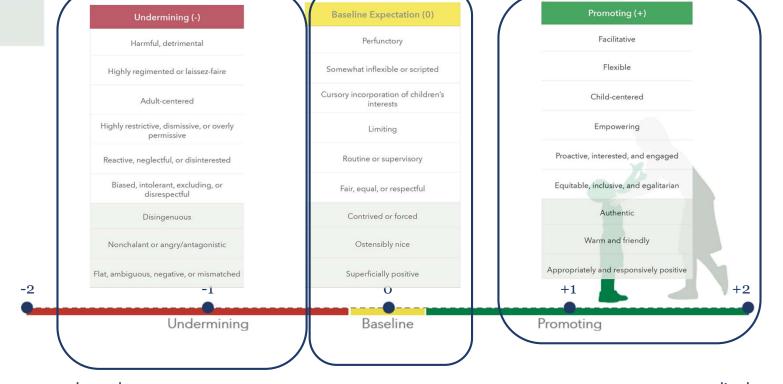




Guiding Principles of a Mentally Healthy Climate					
	Undermining (-)	Baseline Expectation (0)	Promoting (+)		
	Harmful, detrimental	Perfunctory	Facilitative		
	Highly regimented or laissez-faire	Somewhat inflexible or scripted	Flexible		
gogy	Adult-centered	Cursory incorporation of children's interests	Child-centered		
Pedagogy	Highly restrictive, dismissive, or overly permissive	Limiting	Empowering		
	Reactive, neglectful, or disinterested	Routine or supervisory	Proactive, interested, and engaged		
	Biased, intolerant, excluding, or disrespectful	Fair, equal, or respectful	Equitable, inclusive, and egalitarian		
Affect	Disingenuous	Contrived or forced	Authentic		
	Nonchalant or angry/antagonistic	Ostensibly nice	Warm and friendly		
	Flat, ambiguous, negative, or mismatched	Superficially positive	Appropriately and responsively positive		



Spectrum of Mentally Healthy Climates



severely and consistently Undermining

exceedingly and consistently Promoting

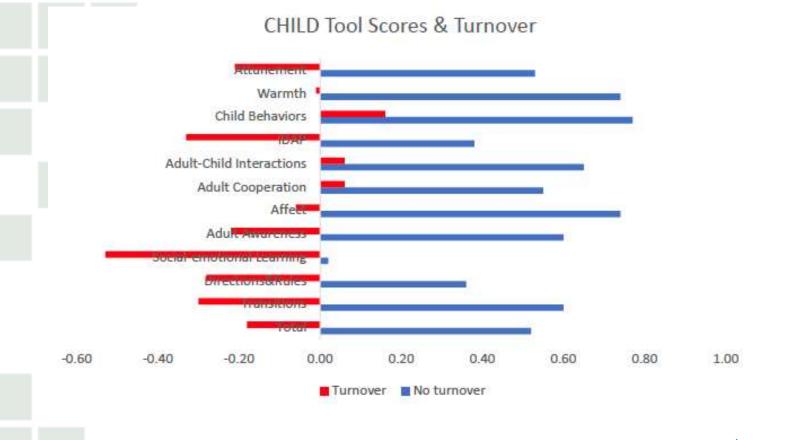


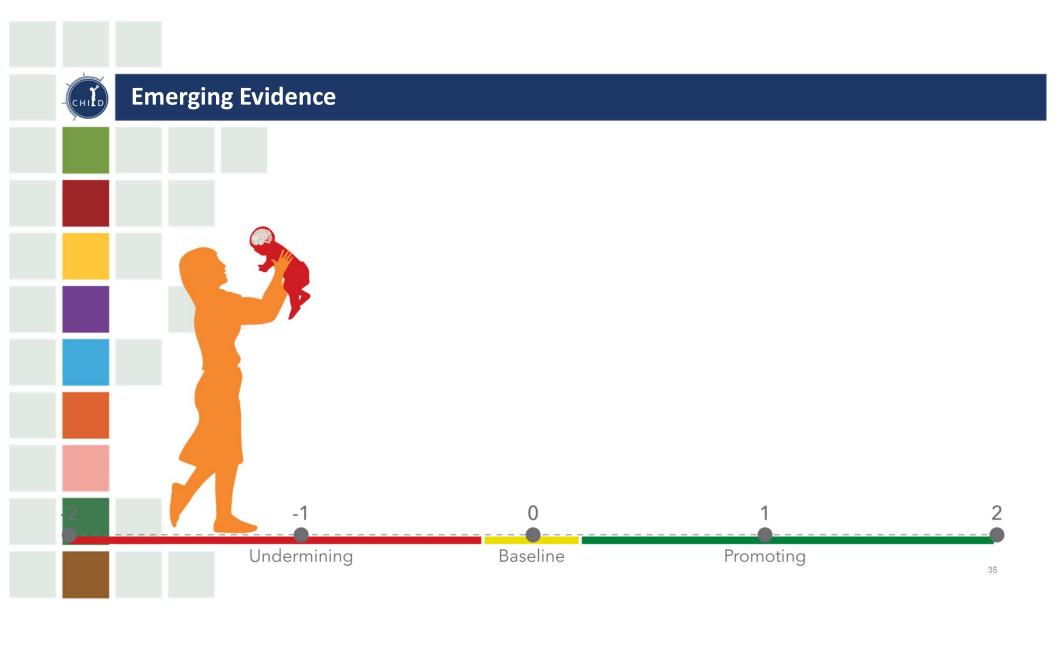


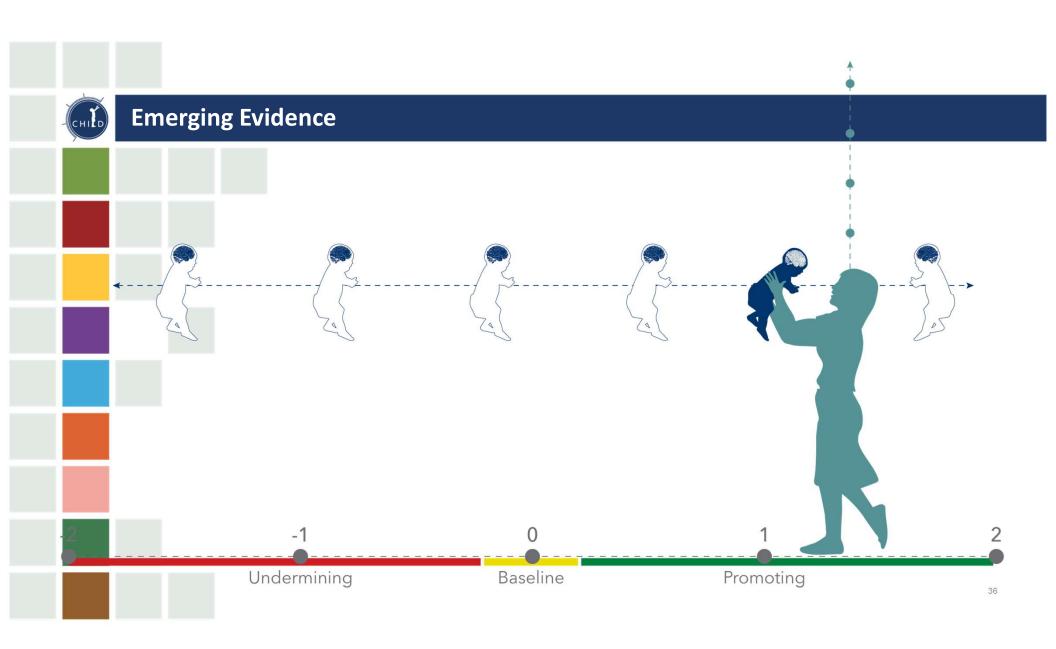




Emerging Evidence







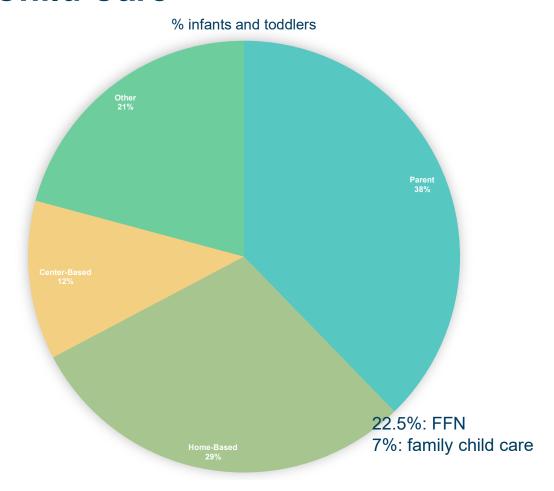
Addressing Inequities in IECMHC Service Provision

- Racial
- Linguistic
- Children with internalizing behaviors
- Children with disabilities

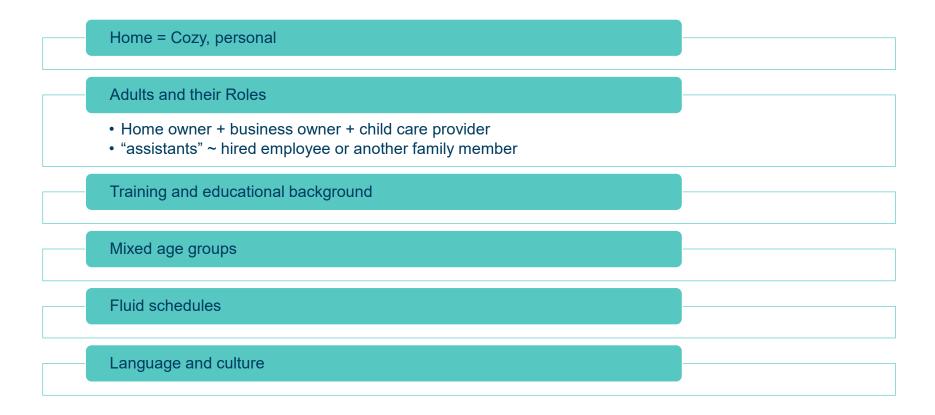


Equity is not a state of being. It's a commitment to action.

Home-Based Child Care

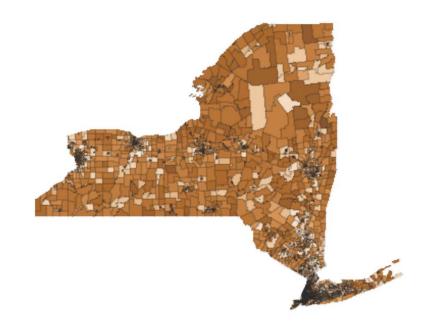


Home-Based Child Care ≠ Center-Based Child Care

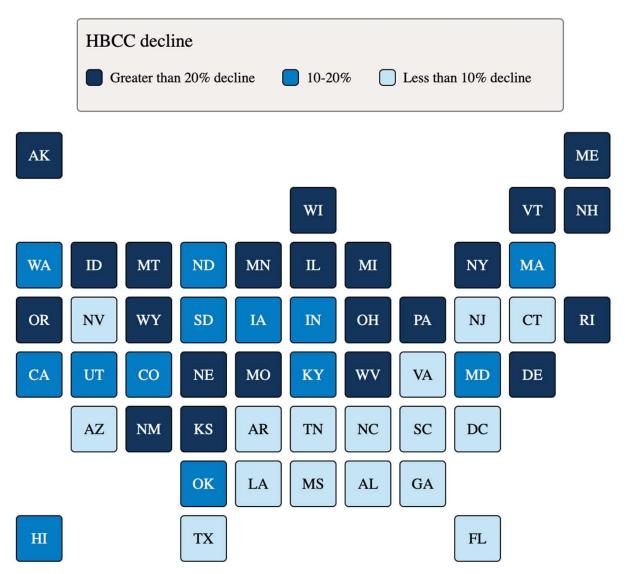


I-T CHILD Project (RCT)

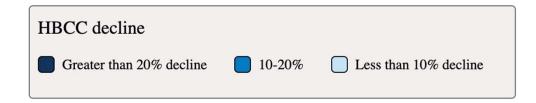
- NYC: infant/toddler care desserts (Stringer, 2019)
- Poverty-stricken neighborhoods in NYC: 36-51% are HBCC (http://data.cccnewyork.org/) of unknown quality (Stringer, 2019)
- COVID-19 pandemic: mental health needs
- NYS is in the early stages of building out its early childhood mental health consultation system (ECMHC)



YALE CHILD STUDY CENTER 41



42



NY

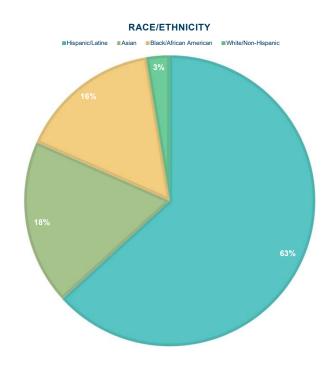
In these uncertain times, we understand your **struggle**. En esta tiempos inciertos, entendemos su lucha.

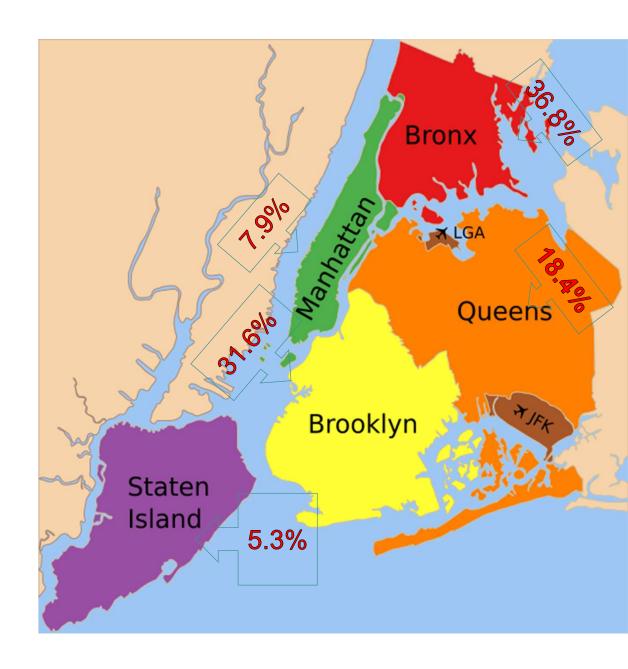


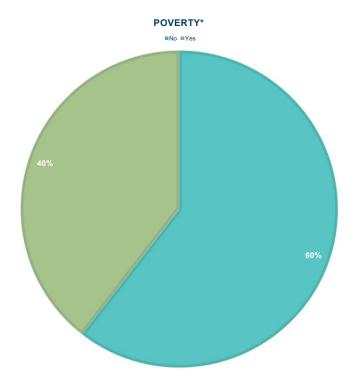
Sample

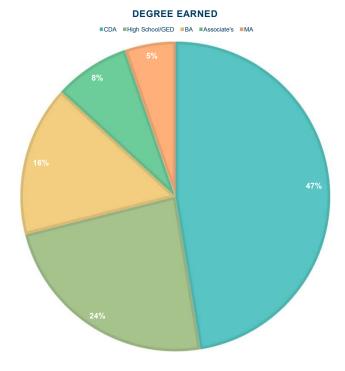
Providers (N=38)

- 28 treatment, 18 waitlist
- 65.8% prefer non-English language for communicating

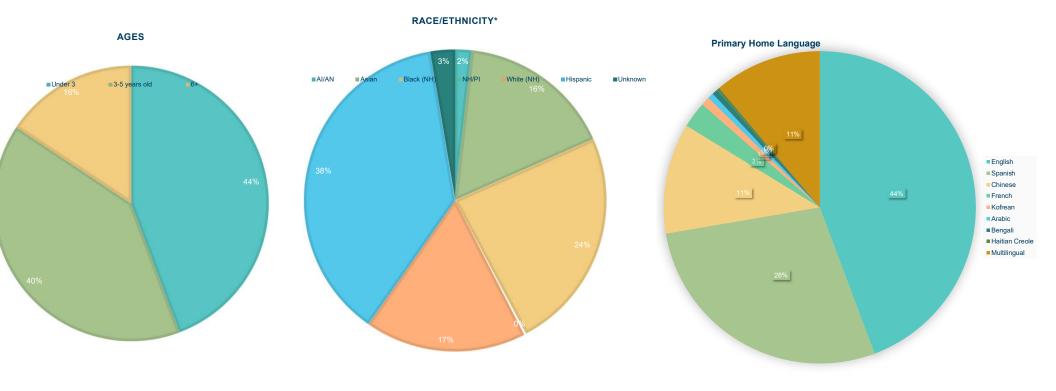








Children (N=332)





Findings

	Consultant I-T CHILD Ratings						
	Pre	Post	Δ				
Transitions	0.32	0.77	*				
Directions & Rules	0.24	0.83	*				
SEL	-0.18	0.41	*				
Awareness	0.78	1.07					
Affect	1.06	1.11					
Adult Cooperation	0.84	1.33	*				
Adult-Child Interaction	0.47	1.04	*				
DAP	0.09	0.74	*				
Child Behaviors	0.93	1.17					
Total	0.45	0.93	*				

CHILD-HBCC Ratings and Teacher ACES

	Abuse- Verb, Psy	Abuse- Physical	Abuse- Sexual	Feeling unloved	Neglect	Parents- Divorce	Violence against women	Addiction	Mental Illness/ Suicide	Incar- ceration
Transitions										
Directions & Rules										
SEL										
Awareness										
Affect									*	
Adult Cooperation										
Adult-Child Interact										
DAP										
Child Behaviors										

CHILD-HBCC Ratings and Teacher Well-Being

	Depress ion (-)	Job Stress - Demand s (-)	Job Stress- FDC (-)	Resilien ce (+)	Internal Locus of Control (+)
Transiti ons					
Directio ns & Rules	*				
SEL	*				*
Awaren					5

CHILD-HBCC Ratings and "Cultural Responsivity

	""The consultant was sensitive to cultural and individual differences" (+)
Transitions	
Directions & Rules	
SEL	*
Awareness	*
Affect	
Adult Cooperation	*
Adult-Child	*



CHILD-HBCC Ratings and LENA

Why Early Language Matters to Equity

- protective factor for high-risk children and key predictor of later development (NICHD ECCRN, 2005; Rowe et al., 2008; Rose et al., 2018; Schuth et al., 2017)
- conversational turns (more than adult words) ~ language and cognitive development in children; social-emotional development (Gilkerson et al, 2018; Gomez & Strasser, 2021)

CHILD-HBCC Ratings and **LENA**

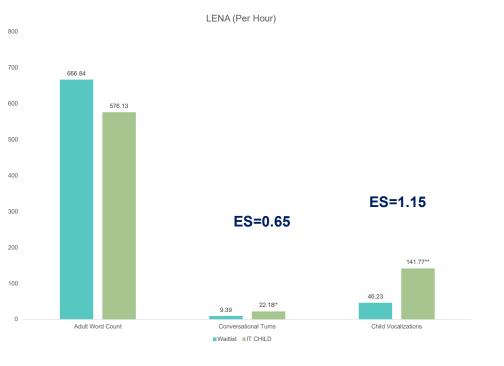
Significant (+)

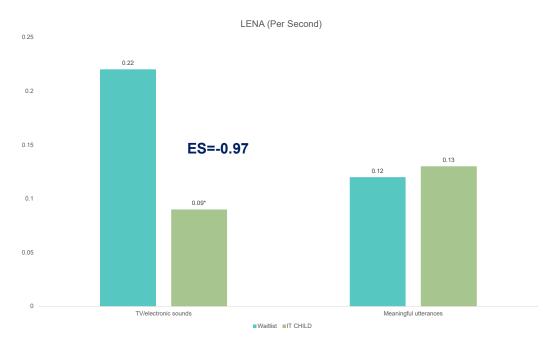
Significant (-)

Baseline

	Adult Word Count (+)	Convers ational Turns (+)	Child Vocaliza tions (+)	TV/elect rones sounds (-)	Meaning ful utteranc es (+)
Transiti ons	•				
Directio ns & Rules	•	•			56
SEL					56

Post-treatment Effects on LENA







Testimonials



In Their Words

"What stuck out in both of my providers' environments is the **communication**...Taking those **purposeful** pauses to elicit more conversation. Adding in the speaking and listening building block into everything they do." - Consultant A

"(I gained) a lot more experience to learn that you are not there to put out little fires, but to help build up the provider's **strengths**." - Consultant B



In Their Words

"...After the (IT)CHILD study, in my daycare classroom, there was a lot of improvement. The children understand their **peers' feelings**" - Provider A

"I have learned a lot. It helped me as a provider, on how to deal with my **stress**" – Provider

"...My staff got the support, which is something they don't normally do. So their **voice matters**, and I really appreciate that... Prior to the research we had a couple of kids that were challenging and then after the research, it's like a whole other setting...we see the **difference**" - Provider C



Our subjects in all these studies are children. They are our partners in this learning enterprise, and we have a special responsibility to use this knowledge—not to fill up journals, but to make the lives of these children better.

Edward Zigler (2007)





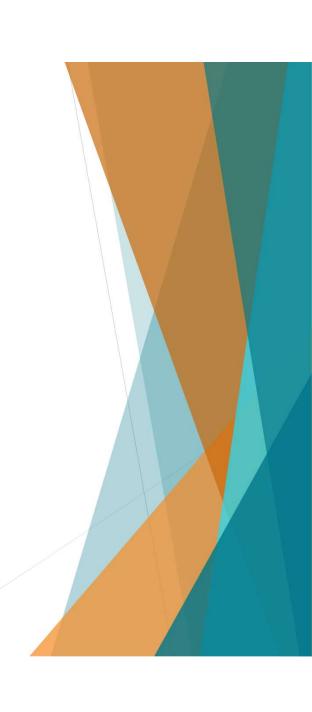
childscale.org/building-babies-brains

IT-CHILD Lessons learned

ECLC, Brightside Up,

Childcare Council of Westchester





Early Care & Learning Council



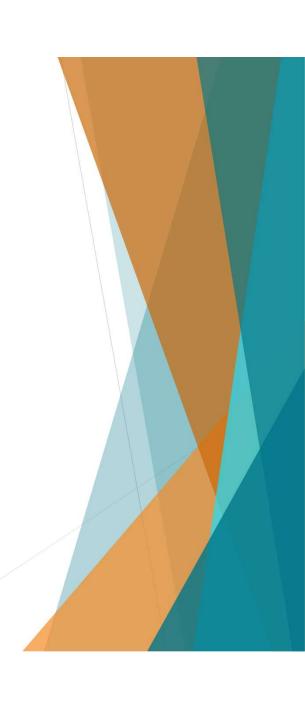
Tamar Izcovich, LCSW

ITMH Program Director

tizcovich@earlycareandlearning.org



Sam Brotmann
ITMH Data Analyst
sbrotmann@earlycareandlearning.org



ECLC's Partnering Child Care Resource and Referral Agencies

Brightside Up

- ▶ Abbe Kovacik, Executive Director
- ▶ Kim Polstein, Director of Mental Health Services
- ▶ Kevin Ainsworth, Social Science Research Analyst

Child Care Council of Westchester

- ► Kathy Halas, Executive Director
- ▶ Jami Flynn, Assistant Director of Professional Development
- ▶ Lilieth Boniello, Infant Toddler Mental Health Consultant
- ► Michelle Guena, Research Analyst

What we learned along the way

Successes

- ▶ Three cohorts have completed a cycle of consultation using the IT CHILD
- ▶ 13-week cycle of weekly visits has proven effective for these cohorts
- We learned that The CHILD tool is effective particularly in supporting planning and implementation
- ► The IT CHILD clearly demonstrated premost test data with significant shifts
- ► The average post assessments showed gains in multiple areas

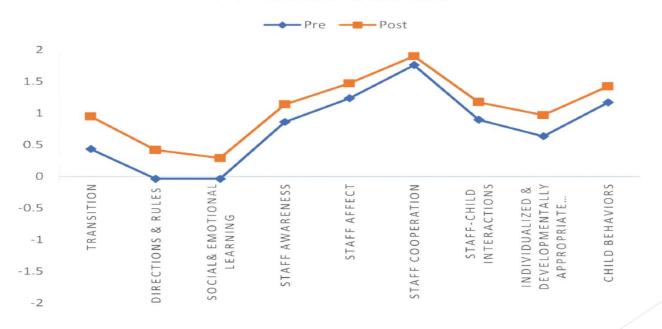
GU0 I might be inclined to give a history of the timeline--cohort 1 dates, cohort 2 dates, cohort 3 dates--this is where we are now.

I also think it could be advantageous to split this into two sections--successes and challenges or opportunities for growth Guest User, 2023-05-24T17:39:01.976

TIO 0 Are those dates listed in the report? Where would I find exact dates? Tamar Izcovich, 2023-05-24T17:44:02.643

Average 2022 IT CHILD Scores





[@Erica Webster] should it be Staff Affect or Staff Effect? Is it that the staff are affected by the results or that there is an effect on the staff?

Jeannette Sheehy, 2023-06-01T19:26:05.918

EWO 0 Yale uses the term Affect

Erica Webster, 2023-06-01T19:30:55.007

Opportunities for Growth

- ▶ Growing waitlist points to the fact that providers are eager to receive this service----more consultants trained on the tool will benefit programs and children across the state
- When we have a bigger data pool, we will be able to learn more
- In the future we will have an opportunity to examine dosage that we have used throughout this pilot
- ▶ Considering other levels of support for programs: Programmatic, Family
- We have learned that a qualitative questionnaire to measure burnout and stress has been more effective than a self-administered questionnaire
- ▶ Challenges were identified regarding debriefing---when staffing is limited

[@Erica Webster] just a small thing...you have 5 dashes in the first paragraph and 3 in the last.

Jeannette Sheehy, 2023-06-01T19:26:41.591

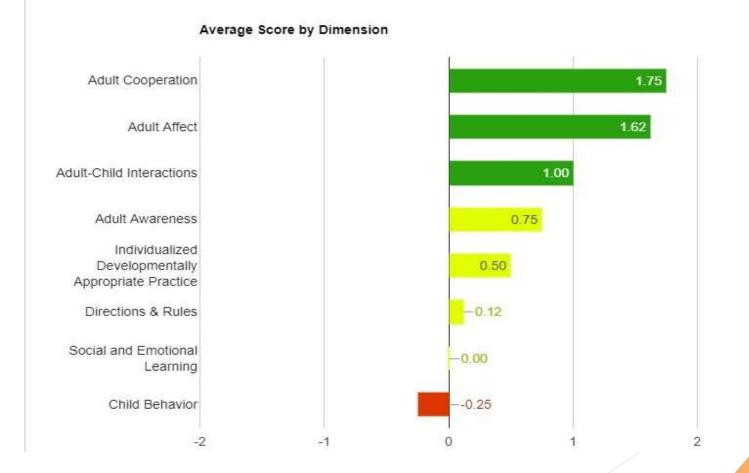
EWO 0 These are actually ECLC's slides so I am not going to make any edits to them

Erica Webster, 2023-06-01T19:31:52.284

A consultant's work

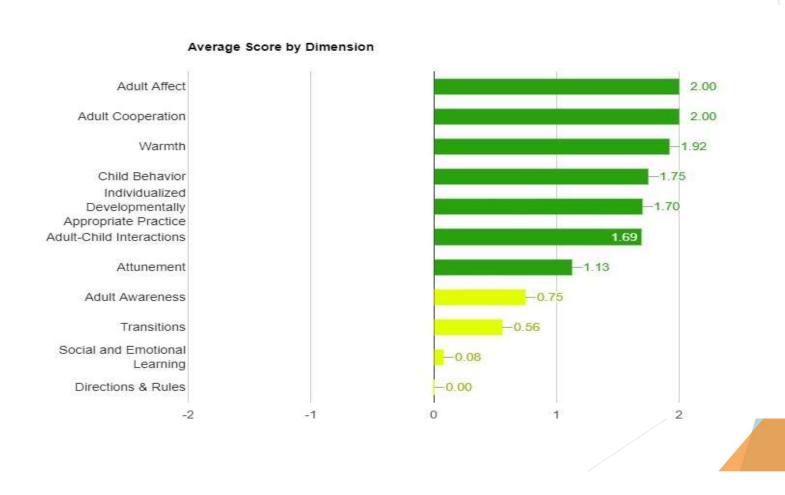


Pre-Test



[@Erica Webster] affect or effect? Jeannette Sheehy, 2023-06-01T19:27:01.357

Post Test



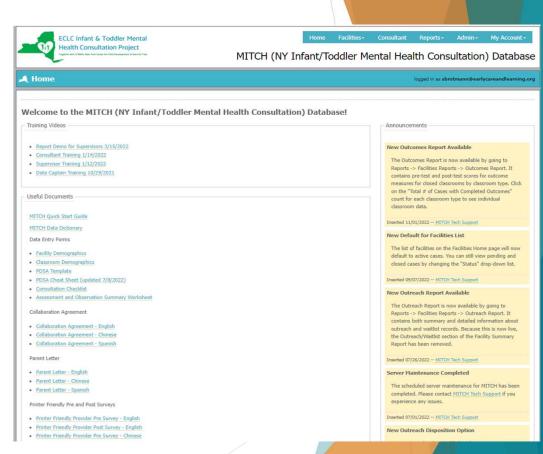
[@Erica Webster] affect or effect? Jeannette Sheehy, 2023-06-01T19:27:29.014

Tracking our Data



MITCH Experience/Adaptation

- ► MITCH was created, through CFS funding, to track ITMH Consultation data around the State. With additional funding from Robin Hood, enhancements were made to MITCH to incorporate IT-CHIL data as well.
- ► MITCH was esigned with the consulta eprocess in mind. A user-friendly system that is intended to benefit Consultants, Supervisors, and Data Specialists alike.
- MITCH Homepage serves as a one-stop shop for all the resources and forms Consultants need in their work.
- MITCH is in a constant state of improvement. It is a flexible system that can grow and shift to meet the demands of the State and of Consultants.



- GUO I believe Sam will work on fleshing out the details of this slide...
 Guest User, 2023-05-24T17:42:36.482
- GU1 How IT-CHILD focused should I keep this? Should I talk about improvements to MITCH that don't directly affect IT-CHILD stuff?

 Guest User, 2023-05-25T14:11:50.510
- GU2 Haven't gotten any comments from Lillieth or Kim. Maybe there are quotes about MITCH in Robin Hood Final Report?

 Guest User, 2023-05-29T22:55:46.742
- GU3 How it benefits consultant, supervisor, and data analysis side by having everything in one place.

 Guest User, 2023-05-29T22:56:13.039
- **GU4** was it created through Robin Hood's funding? Guest User, 2023-05-31T15:02:01.589

Data

- Scope of Work
 - Overall, there have been over 362 hours of IT-CHILD Consultation work across 314 visits to facilities.
 - This work occurred in 20 different facilities around Westchester and the Albany area.
- Success of work
 - ▶ 78% of the consultations with completed outcomes showed positive growth from the IT-CHILD pre to post test.
 - ► The average improvement from pre to post test in Transitions was .52, Directions & Rules was .46, Individualized & Developmentally Appropriate Practices was .33, and Warmth was .32.
- ▶ Although we have had a relatively small sample size thus far, the data we have collected points towards the IT-CHILD tool being effective and this mode of consultation being successful.

GUO Again--more of Sam's work will be found here

Guest User, 2023-05-24T17:43:02.076

GU1 In April RHF meeting, Westchester and BSU both said they were close to closing cases, wonder if these will be able to be included in this presentation?

Guest User, 2023-05-25T13:16:41.546

GU1 0 Also did they give us any important feedback in meeting last friday? Not sure if Allison took notes from that meeting but I don't think I have any.

Guest User, 2023-05-25T13:17:13.141

Recommendations



Recommendations

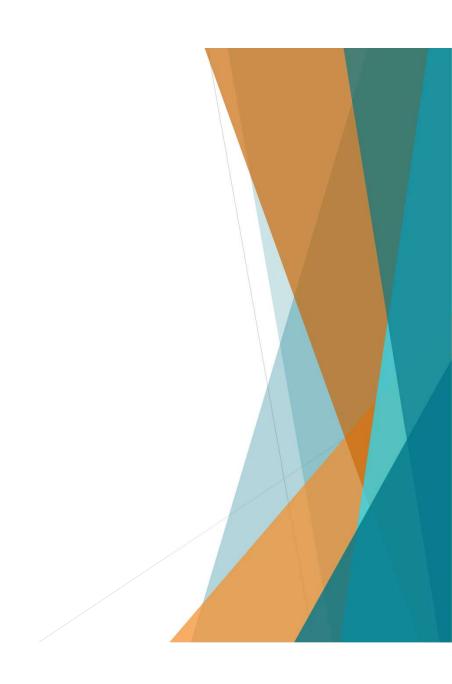
- ► Close examination of caseload and dosage is important
- Hybrid model of consultation allows for more flexibility and access
- Clearly defining and understanding the role of the ITMH consultant in pertinent
- Introducing the tool clearly is important
- ► Having distinct roles of Supervisor and Consultant is important, it can be challenging to engage in a dual supervisory/consultant role.
- Providing incentives to FGF providers to participate in the IT CHILD project has successfully bolstered enrollment. For example, each program that signed a Collaboration Agreement with both agencies received a book bundle containing 15 social emotional and diversity books for their program.

GU0 yes--really like inclusion of recommendations Guest User, 2023-05-24T17:44:19.156

[@Erica Webster] point 3...should the word after consultant be "is" instead of "in"?

Jeannette Sheehy, 2023-06-01T19:28:28.860

Thank you!









Building Relationships In Infant Toddler Early Education

Liz Isakson MD, FAAP, Executive Director, Docs for Tots Dalila Jarvis, LMSW Melisa Vasquez, MSW

The Rundown

What is BRITE

What we've accomplished

Review data/how we did it

Lessons learned

Who we are: Building Relationships in Infant Toddler Early Education (BRITE)

Docs for Tots BRITE

 A program that works with family & group family providers to support and help improve the social emotional wellbeing of the classroom environment.

What we do

- 10-12 hybrid sessions with weekly check-ins
- Mental Health Consultant collaborates with providers to develop goals that foster the social-emotional environment in family-based childcare programs





Consultation

- 15 home-based childcares
- Predominately group family
- Provider and Child demographics:
 - overwhelming POC, multi-lingual
- Average visits: 12-14 per case
- 2 Plan-Do-Study-Act cycles of continuous quality Improvement with co-created goals

Community

- Chit Chats
- Building community connections
 - QSNY
 - CCCN
 - NYC networks
 - HMGLI
- BRITE Advisory Board





Recruitment was main barrier



Once in door – much could be accomplished

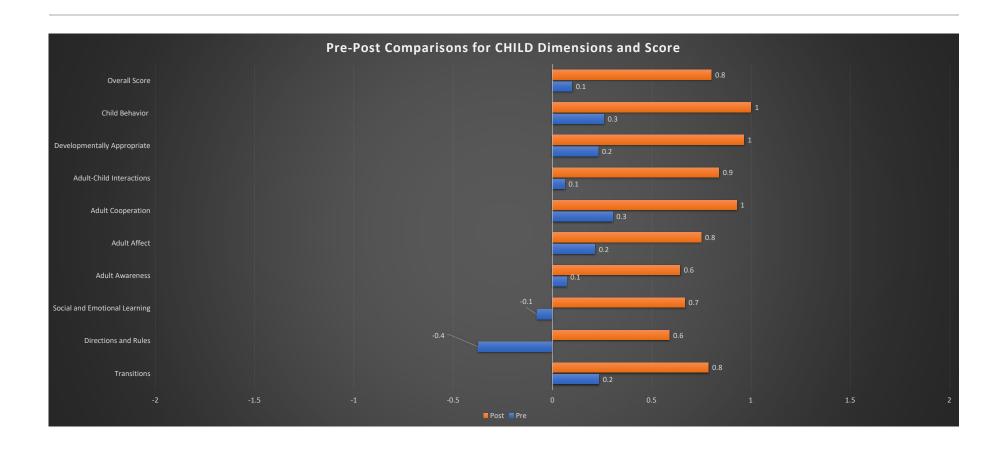


Satisfaction of providers was very high



Connecting to additional services common

Average CHILD Score by Dimension: Pre and Post



[@Erica Webster] Affect or effect? Jeannette Sheehy, 2023-06-01T19:28:51.423



How we get the job done-PDSA



The goal:

• Support adult cooperation & adult child interaction.

Plan:

- Creating a team atmosphere by learning work styles and assessing individual strengths and weaknesses.
- Consultant to support adult child interaction during circle time



How is this done?

- Director & teachers fill out "how to work with me grid" & talk over their strengths and weakness. Further discuss, how this can help each other during transitions, routines, classroom activities, & etc.
- Consultant gives a tip sheet and talks through strategies to support adult child interaction during circle time. Example: using Spot of emotion.

Study

- Teachers test out strategies & reports back to consultant on how it went
- Consultant observes classroom

Act

Applying strategies across all classroom activities

Lessons Learned

- · What we would keep
 - The flexibility of in-person and virtual visits
 - Continuous relationship building with referral agencies/CBO's
 - Collaborative mindset
 - PDSA/Goal Setting
 - Providing engagement opportunities for providers (Chit Chats/ Lunch and Learns)
- What we would lose
 - Paperwork anxiety for provider
 - Provider Surveys
 - Taking no for an answer
- What we wish we could fix
 - Recruitment
 - · Engaging the unengaged
 - Partners not competitors



What does this all mean?

Lens of the child necessary to truly build high quality childcare

Improving the capacity of adults impacts the experience of young children (and children's behavior)

Systems matter – both in the support of childcare and within the childcare setting itself

"Early Childhood Mental Health is not the absence of mental illness, but rather the presence of a feeling of safety and emotional security, comfort in connecting with trusted others, confidence in one's developmental trajectory, an expectation that dependency needs will be met, and an assumption of one's right to move, explore, and communicate."



Contact:

Liz: Liz@docsfortots.org

Dalila: <u>Dalila@docsfortots.org</u>

Meli: Meli@docsfortots.org





INFANT TODDLER MENTAL HEALTH CONSULTATION

PDI+ NYC CONSORTIUM



OUR WORK



We aim to establish and implement quality across the early childhood workforce system.

In this project, we are interested in learning more about the Provider and Consultant workforce



NYC CONSORTIUM CCR&R's



Committee for Hispanic Children and Families Chinese American Planning Council Daycare Council of New York Child
Development
Services
Corporation











OVERVIEW



NYC Consortium cohort started February 2023

- 4 NYC CCR&R's
- 6 MH Consultants
- 22 home based providers so far (recruitment ongoing)
- Data Collection



CHILDREN SERVED



153 total children enrolled at childcare sites receiving Mental Health Consultation.

78%
of enrolled children
are receiving
supports indirectly
from the IT CHILD

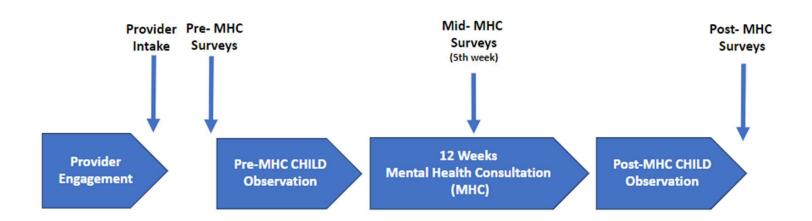
37	83
Infants	Toddlers
24	47
male	male
13	36
female	female

PROVIDER	FACILITY	CONSULTANT	IT CHILD	IMPLEMENTATION
Education level	Facility type (Family/Group Family)	Education level	Total and domain for PRE MHC	# of onsite visits
Primary language	QUALITYstarsNY participation	Languages spoken	Total and domain for POST MHC	# of virtual visits
Years of experience	QUALITYstarsnNY rating	Training		# of consultation hours
Years at site	Hours of operation	Familiarity with each provider community		# of providers on caseload
Highest level of education	Number of children enrolled by: •Sex •Age in months/years •Race •Refugee status Enrollment capacity Funding source Number of children asked to leave in the last year Types of external support staff	Average commute time one way per provider		# of children served indirectly
				Average PRE- POST gains



DATA COLLECTION POINTS







PROVIDER WORKFORCE



CREDENTIALS

9 PROVIDERS WITH CDA	13 PROVIDERS WITHOUT CDA
5 + High School Diploma	2 less than HS Education
2 + Associates Degree	6 + High School Diploma
2 + Bachelors Degree	1 + Associates Degree
	4 + Bachelors Degree

YEARS OF CHILDCARE EXPERIENCE

<1 yr	2-4	5-9	10-14	15-20
1	3	4	4	10

NUMBER OF PROVIDERS



LANGUAGES



Primary Language	Number of Children/ Families	Number of Childcare Staf f
English	44	17
Spanish	58	29
Mandarin	8	2
Cantonese	2	0
French	6	0
Hindi	3	0
Russian	1	0

Languages Spoken by Mental Health Consultants
English
Spanish
Mandarin
Cantonese
French
Haitian Creole



CONSULTANT WORKFORCE

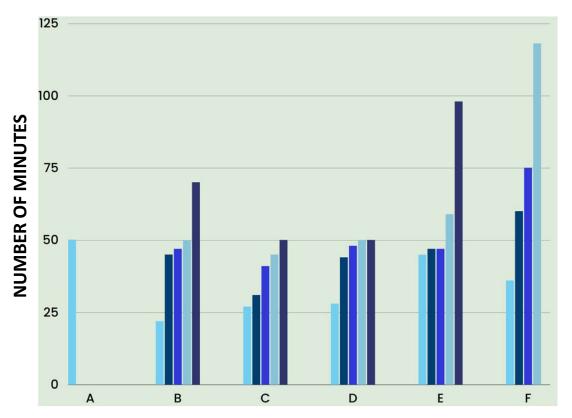


- All have a degree in Psychology or Social Work
- Relevant Experiences range from 6 months to 6 years
- All consultants want to have a direct impact on teacher-child interactions



COMMUTE TIME





мнс	AVG
Α	40m
В	47m
С	50m
D	43m
E	59m
F	72m

HOME BASED PROVIDERS GROUPED BY CONSULTANT



WE ASKED PROVIDERS...



What causes the most stress in your work?



PROVIDERS RESPONDED...



childrens eating habits

new children

not having an assistant challenging behaviors

parents too much paperwork

increasing enrollment staff conflicting views



WE ASKED CONSULTANTS...



How do you plan to build and support your relationship with child care providers?



CONSULTANTS RESPONDED...



"By being a good listener but also a great observer"

"Listen to what the provider needs for their programs"

"Make them feel their voices matter also their work"

"Making them feel that I can put myself in their shoes"

"Building relationships where trust and respect are the main focus"

"Provide child care providers with appropriate instructional supplies as appropriate"

"Be culturally competent, respectful and provide support"



INITIAL OBSERVATIONS



Mental Health Consultation is most successful when consultants:

- Are responsive to provider needs
- Are connected to and utilize community resources
- Facilitate collaborative partnerships with providers
 - Engage in ongoing capacity building
 - Participate in communities of practice
 - Are culturally competent



PARTING WORDS



"Consultants are bridge makers between teachers and children, teachers and parents, teachers and other staff members, parents and children, and programs as a whole and families."

-Reyes, Chin (2020). Consultant's Guide to the CHILD. Yale.

Process Evaluation

- 1. Program Administrator Survey
- 2.Mental Health Consultant Focus Groups
- 3. Child Care Provider Survey
- 4. I-T CHILD Assessment Data





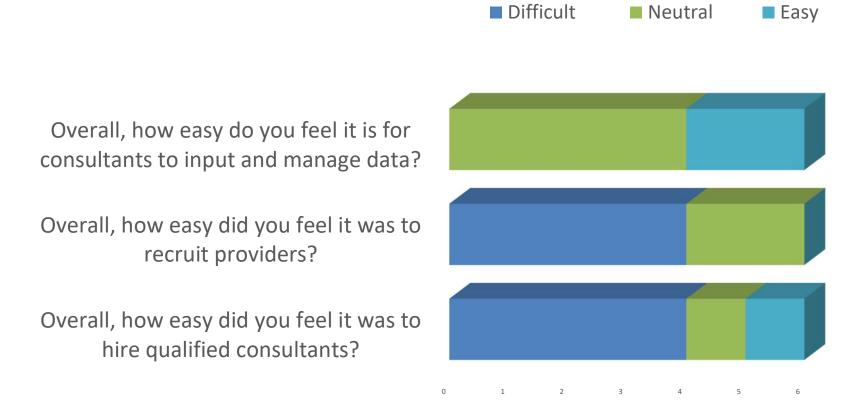
Dr. Erica Webster <u>erica.webster@yriny.org</u> https://www.yriny.org/iecmhc



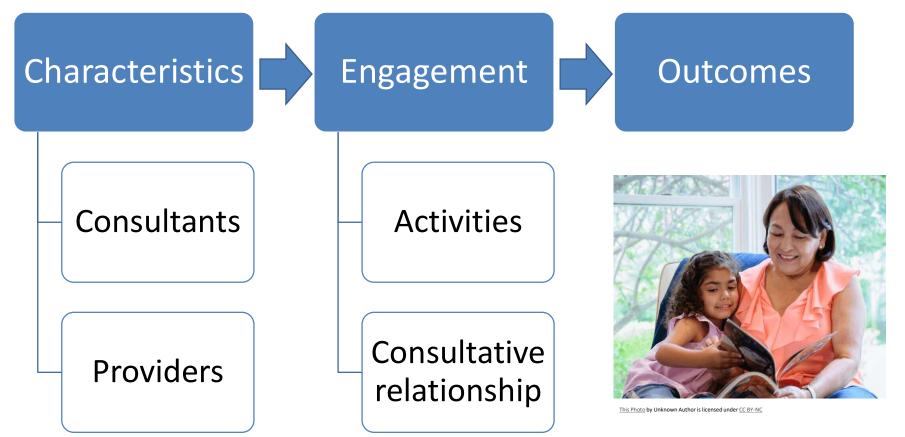
Key Components of Program Administration

- Hired qualified staff that are culturally and linguistically representative was key
- Consultants training & supervision varied, but consistently included IECMHC principles and reflective supervision
- Provider outreach recruitment strategies included broad outreach, personal communication, referrals from other programs and the use of incentives
- Services were most frequently delivered in a hybrid format

Program Administrators shared



Consultant Focus Groups





Outcomes

Shift from:

"the child is the issue"

to:

"the child has an issue"

Providers shared

■ Strongly Agree ■ Agree ■ Neutral ■ Strongly/Disagree

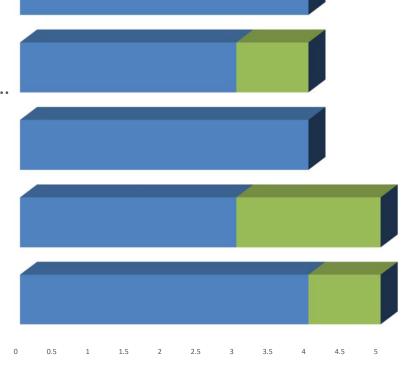
I would recommend consultation services to a friend

The recommendations from my consultant were in line with my cultural...

The recommendations from my consultant fit well into my daily routines

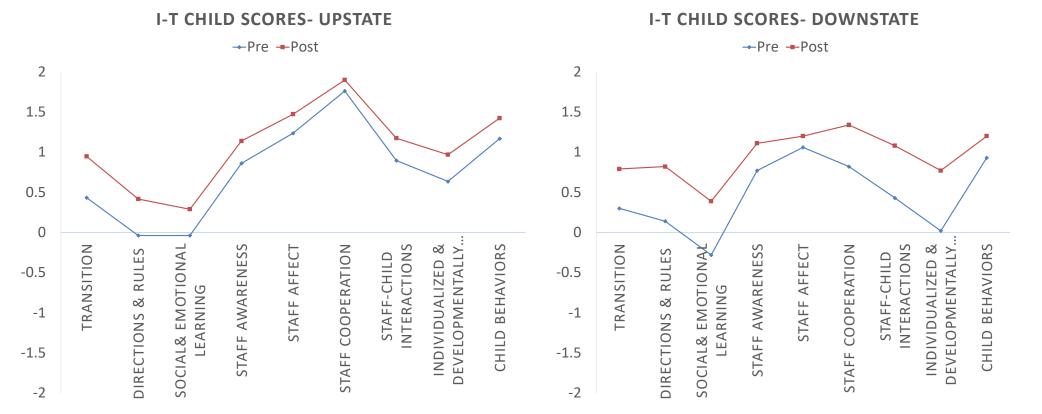
I have a positive relationship with my consultant

I found the recommendations from my consultant helpful



ISO

I-T CHILD Assessment



[@Erica Webster] affect or effect? Jeannette Sheehy, 2023-06-01T19:29:11.251

Recommendations

- 1. Standardize hiring, training and supervising
 - a. Community of Practice (CoP)
 - b. Train the Trainer Model
- 1. Expand outreach and access to consultation
 - a. Establish suspension/expulsion hotline to drive referrals
 - b. Provider incentives
 - c. Count consultation as training hours
- 2. Uniform data collection and transparency

Closing Remarks

Nora Yates
Deputy Commissioner
Division of Child Care Services



Questions