

Youth Research Inc. (YRI) is conducting a process evaluation of IECMHC services using the I-T CHILD framework for service delivery. During the second phase of this evaluation, YRI conducted four focus groups with I-T CHILD trained mental health consultants to understand the challenges faced and lessons learned through providing services to home-based childcare providers. This brief is a summary of the insights shared by eight consultants from Brightside Up, the Committee for Hispanic Children and Families, the Childcare Council of Westchester, the Chinese-American Planning Council, and Docs for Tots. The findings below represent the conversations had during focus groups as well as insights shared in follow-up surveys of the mental health consultants, no child or provider level data was collected or included in this report. Findings are organized by general themes and presented in no particular order.

Engagement in services

- Consultants shared that they were able to engage effectively with providers, partner in goal setting, and provide a range of supports. Supports included providing suggestions, giving material resources, coaching, modeling, and engaging in reflective dialog
- The consultant-provider relationship was centered on developing an equal partnership rather than having a professional come in and tell a provider what to do
- Consultants provided coaching in how to talk about emotions, respond empathetically when children are upset, and extended supports to teach children to self-sooth
- Consultants shared how helpful the I-T CHILD assessment was for setting goals and tracking providers growth over time. Additionally, the I-T CHILD training and consultant guide were valuable in guiding difficult conversations around issues of equity

Barriers

- Recruiting interested providers remains challenging due to stigma around mental health services and/or providers who report that they don't have challenging behaviors
- There is sometimes confusion around what IECMHC services entail and how they differ from other programs
- Family and group family providers have a lot on their plate being both a business owner and a teacher
- When providers' home and work life are very closely intertwined, it can be challenging to give feedback in a way that will not be taken personally
- Homebased providers have difficulty finding time to engage in reflective dialog while maintaining teacher-child ratio and providing active supervision, therefore providers are often participating in follow up conversations in the evenings after working a full day with no additional compensation for their time
- Some underlying traumas and beliefs influence the way in which adults show up with children and were hard to address head-on in this model of services
- Consultants reported challenges in balancing their time, long commutes, and scheduling visits that worked around providers' schedules



Cultural considerations

- Particular cultural norms make discussion of mental health even more difficult as evidenced by some Latinx providers stating “no estamos locos (we’re not crazy)”
- Consultants feel they could not do this work without a solid understanding of issues around diversity, equity, and inclusion
- Consultants facilitate cultural conversations around children’s behaviors, social norms, and families’ perceptions
- Lots of translation responsibilities fall on the consultant

Outcomes

- Providers shared they experienced a reduction in stress because they had someone to talk to, were better able to manage their staff, and set clear boundaries at work
- Providers strengthened relationships with the children, staff, and families they work with – some providers shared that they have had successes using strategies with their own children
- Children benefitted from the changes in the way providers respond to their emotions
- Consultants shared that they saw progress in reducing children’s behaviors by helping providers see situations through the child’s view and to adapt the environment to best support them; viewpoints shifted from “the child is the issue” to “the child has an issue”

Celebrating every day heroes

The mental health consultants participating in this project shared examples of the ways they go above and beyond the duties in their job descriptions to support the providers, children and families that they work with. Consultants bring with them prior experience and knowledge working in the field of early childhood as well as their social work training which helps them understand child development and early childhood systems. When working with home-based providers the consultants are providing supports outside of consultation including helping daycare owners develop contracts, support staff training, and set boundaries between work and home. They also used their unique position of providing in-home supports to bring providers resources such as food, back-packs, and classroom materials that providers would not otherwise been able to access.