

IECMHC in Arkansas: Past, Present & Future

NIKKI EDGE, PHD

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES

UAMS[®]



Overview

- Historical context of IECMHC in AR
- Context of current AR expulsion prevention efforts
- Our approach to IECMHC
- Data highlights
- Lessons learned & Future directions

History of IECMHC in AR

2004

3 regional pilots
Varying models; long-term partnerships
Strong evaluation showed positive results

2011

Re-launched as Project PLAY in 5 regions
One centralized model
Primarily 6 month programmatic consultation
Focus on centers serving children in foster care
Positive evaluation findings

2016

Joined Expulsion Prevention Team
Doubled in size
Statewide (new traveling team)
Primarily child-focused consultation
Positive evaluation findings

Arkansas Expulsion and Suspension Workgroup

Influenced by federal guidance

Multi-disciplinary Workgroup

First meeting held on January 7, 2015.

Internal to DHS/DCCECE:

- Licensing
- QRIS
- State-funded Pre-K Program
- CCDF Unit/Family Support

External Partners:

- DHS Division of Behavioral Health
- Professional Development Contractors (trainers, TA, ECMHC)
- Experienced ECE Professionals
- Special Education
- Head Start Collaboration
- Project Launch



New Policies & Supports

Longstanding DHS/DCCECE policy limits suspension and expulsion for children enrolled in state pre-k programs

- “No child shall be expelled without permission from the DCCECE”
- New monitoring and support efforts started in 2015; expanded in 2016

Similar policy rolled out July 1, 2016 for programs receiving child care vouchers



Behavior Help Online

An electronic behavior help tool for The Division of Child Care and Early Childhood Education.

[Submit a Request »](#)

Sign-in

If you are already a registered user, click here to sign in.
Otherwise, Contact your administrator to get an account.

[Sign in »](#)

Research-Based Behavioral Intervention

There are research proven ways to prevent suspension and expulsion.

- Train teachers to support social-emotional development.
- Access early childhood mental health consultation.
- Develop strong relationships with families.

Behavior Help can do just that!



Support request submitted to DHS

DHS BH Support Specialist interviews
parent/provider

DHS BH Support Specialist assigns case
for support



Tier 1

Concerning behaviors are
developmentally normal
and provider frustration is
not excessively high

DHS BH Support
Specialists share
information and
resources with provider
and/or parents

Tier 2

Concerning behaviors are
more serious and/or
provider frustration is high

Short term technical
assistance from a team of
developmental/social-
emotional experts

Tier 3

Concerning behaviors are
extremely severe and/or
history of trauma or multi-
system involvement

Early Childhood Mental
Health Consultation



Triage Specialists

- ~6 Staff of the DHS/Division of Child Care and Early Childhood Education
 - All have other roles (family support, pre-k specialist, etc.)
 - This is 'other duty as assigned' (no new resources)
- Receive online requests for support and complete structured phone interview
- Provide support or assign to TA or ECMHC
- Represented at weekly staffing with leadership



Technical Assistance

- ~ 15 early childhood specialists with A-State University
 - All have other roles (quality coach, general technical assistance, Conscious Discipline coach, etc.)
 - This is primary role for some, secondary for most
- Services are flexible and short-term (usually 2-10 visits)
- Focused on building skills of teacher, creating a more supportive classroom environment, identifying training needs

IECMHC Child Focused Cases

- When a specific child's behavior is of concern to parents or teachers, the Mental Health Consultant helps these adults understand, assess and address the child's needs by developing an individualized plan with the parents and teachers.

Child Focused Consultation



- 3 month partnership
- Weekly visits
- Partner with teacher and family to develop and support individualized plan
- Linkage to other services
- Support for well-being of staff

Project PLAY Approach



- Project PLAY is staffed primarily through partnerships with Community Mental Health Centers
- Caseloads managed at UAMS
- Initial and ongoing training and supervision supported through UAMS
- Supervision includes administrative, individual reflective supervision, group supervision & Facilitating Attuned Interactions (FAN) supervision

- Masters' degree in mental health
- Licensed or license eligible
- Attributes and skills: flexible, empathetic, curious, culturally responsive
- Specialized knowledge: child development, early care and education system, influences on social-emotional development, etc.
- Working toward certificate as ECMH Consultant to Child Care

BehaviorHelp Data Collection

Prevalence

- Surveys to help us understand scope of problem

Program

- Data about classroom strengths and needs to help inform professional development planning

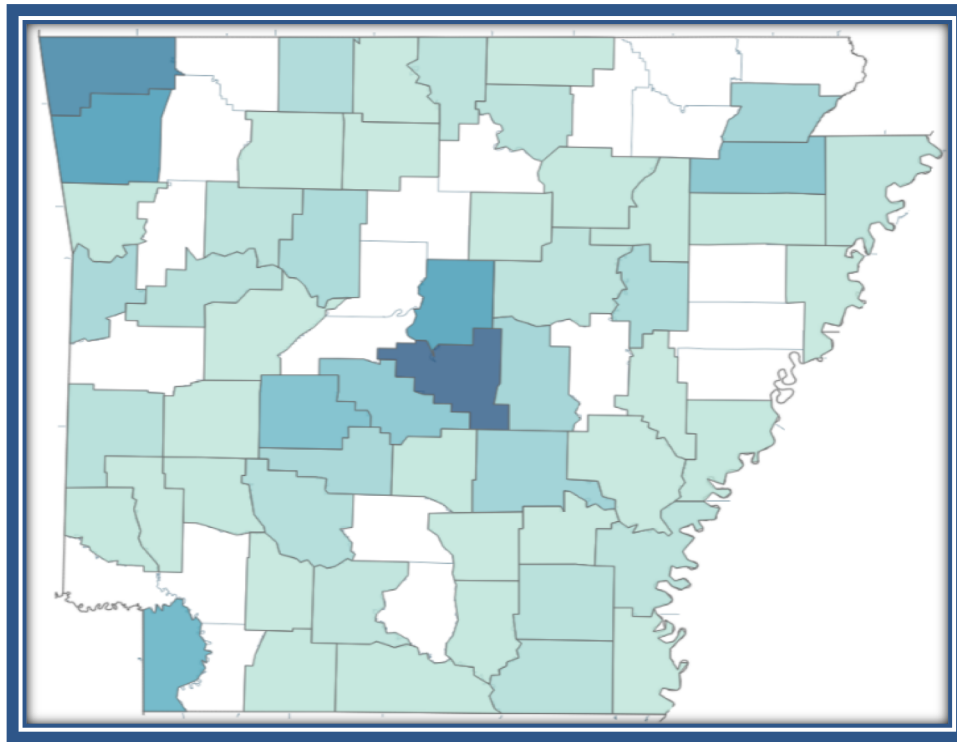
Process

- Referral and service data to help us understand utilization patterns and inform staffing and outreach needs

Progress

- Data on satisfaction, expulsion outcomes and emotions behavior to drive quality improvement and advocacy

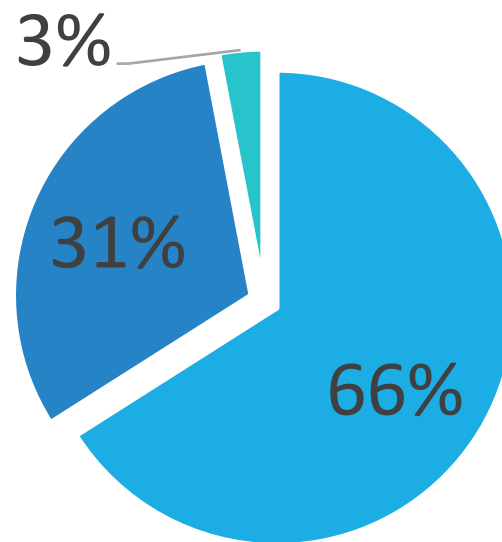
Statewide Reach



IN FY19-20, BEHAVIORHELP
SERVED THE TEACHERS OF:

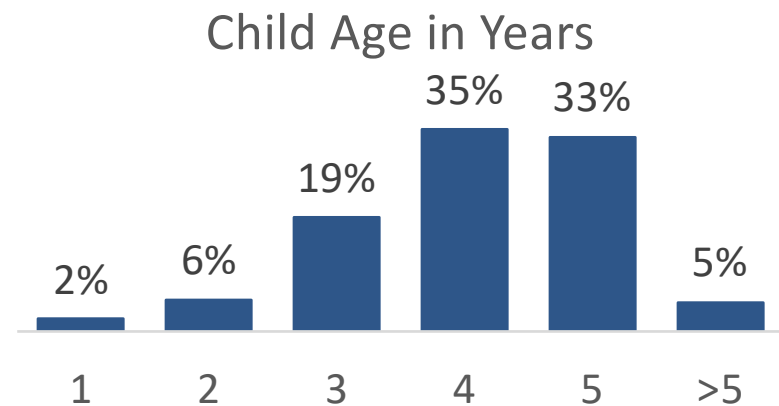
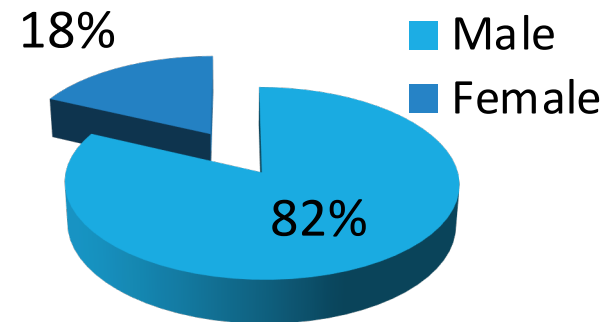
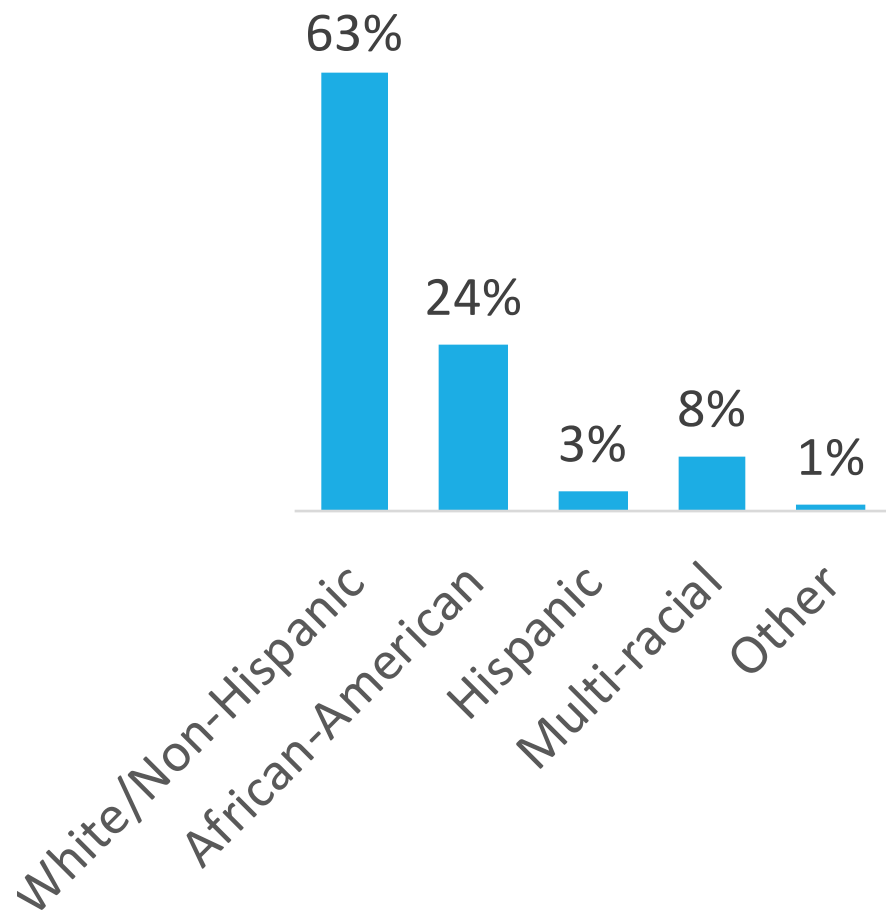
- 388 CHILDREN
- AT 217 CENTERS
- IN 54 COUNTIES.

BehaviorHelp Triage



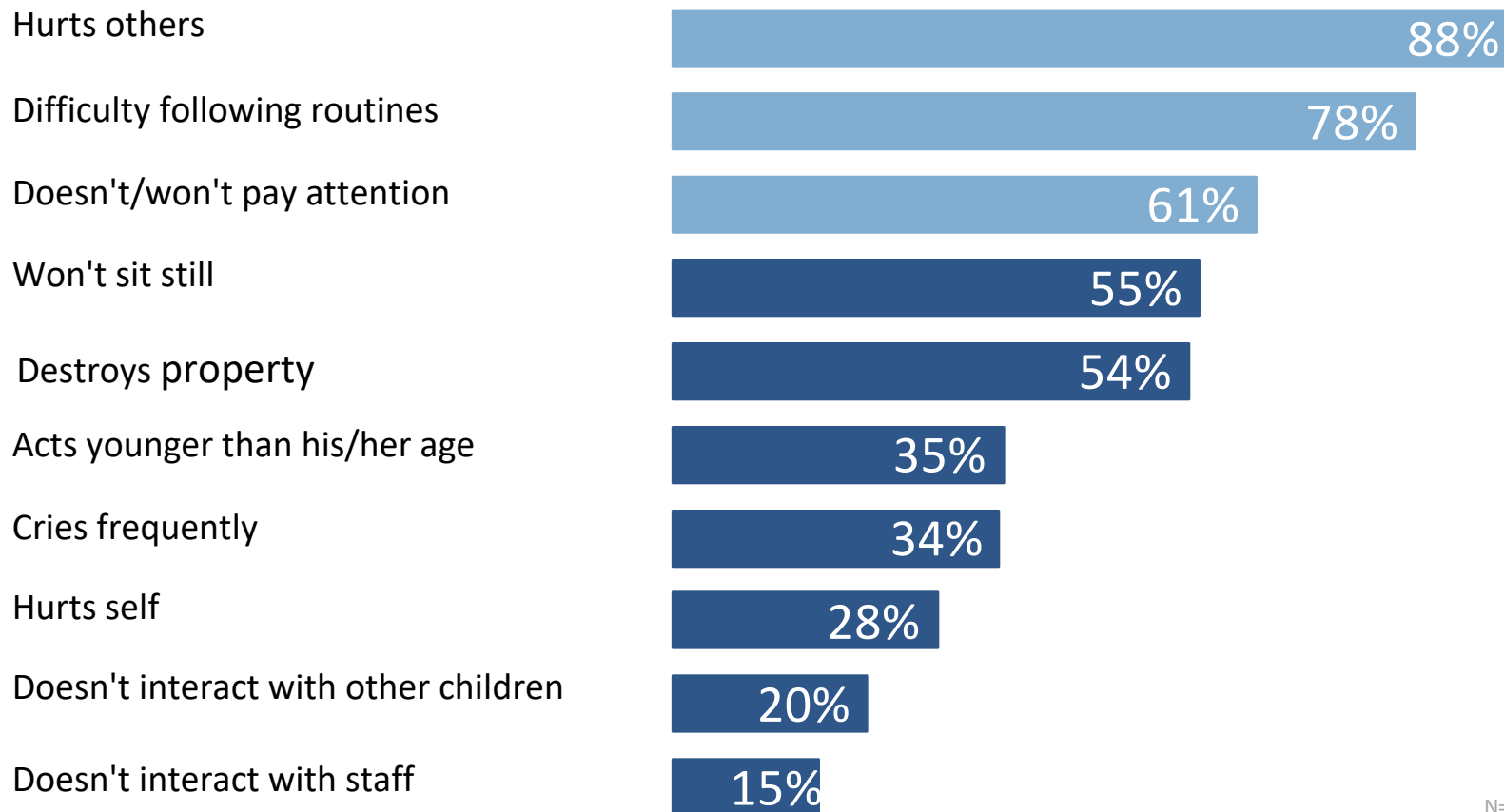
- Technical Assistance
- Mental Health Consultation
- Both

White Male Preschoolers are Majority of Those Referred



Behavior Description

Reports often indicated children harmed others and had difficulty following routines and paying attention.



N=644

Program data

Classroom Strengths and Opportunities to Improve Supports for Social-Emotional Development

Strengths

- 61% of teachers support children in problem-solving
- 60% of teachers support children in managing anger
- 95% of classrooms have at least 4 learning centers
- 85% of teachers have conversations with children
- 65% of teachers use positive, calm tones

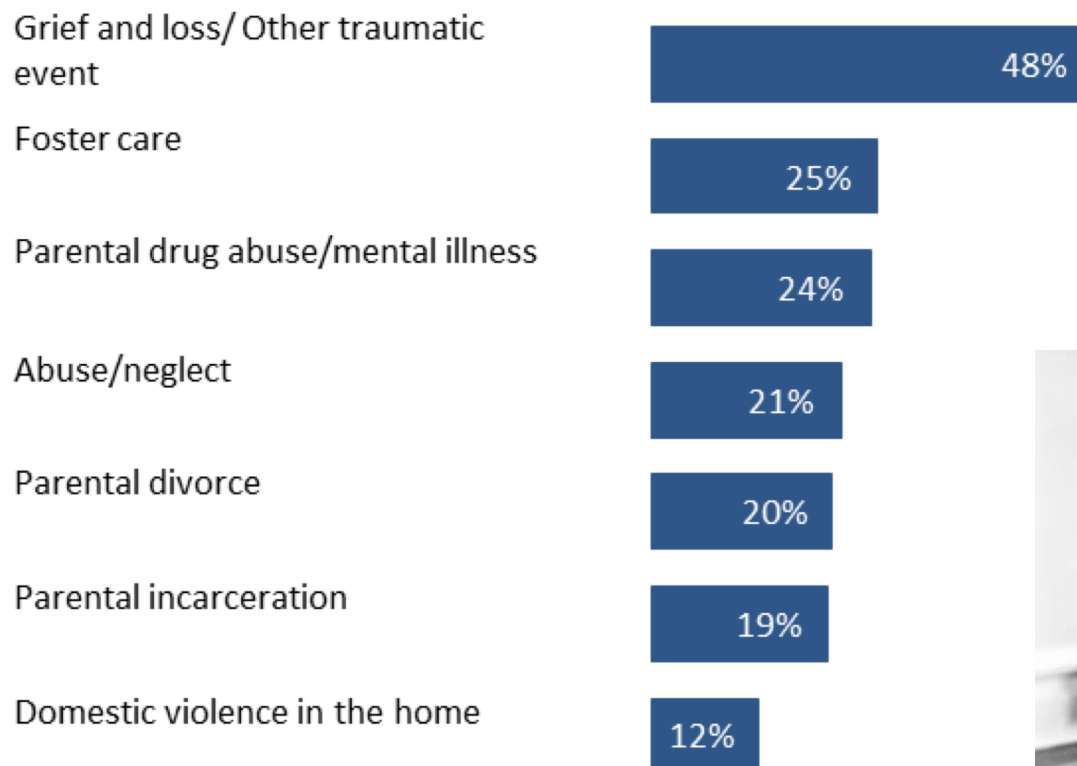


Opportunities to Improve

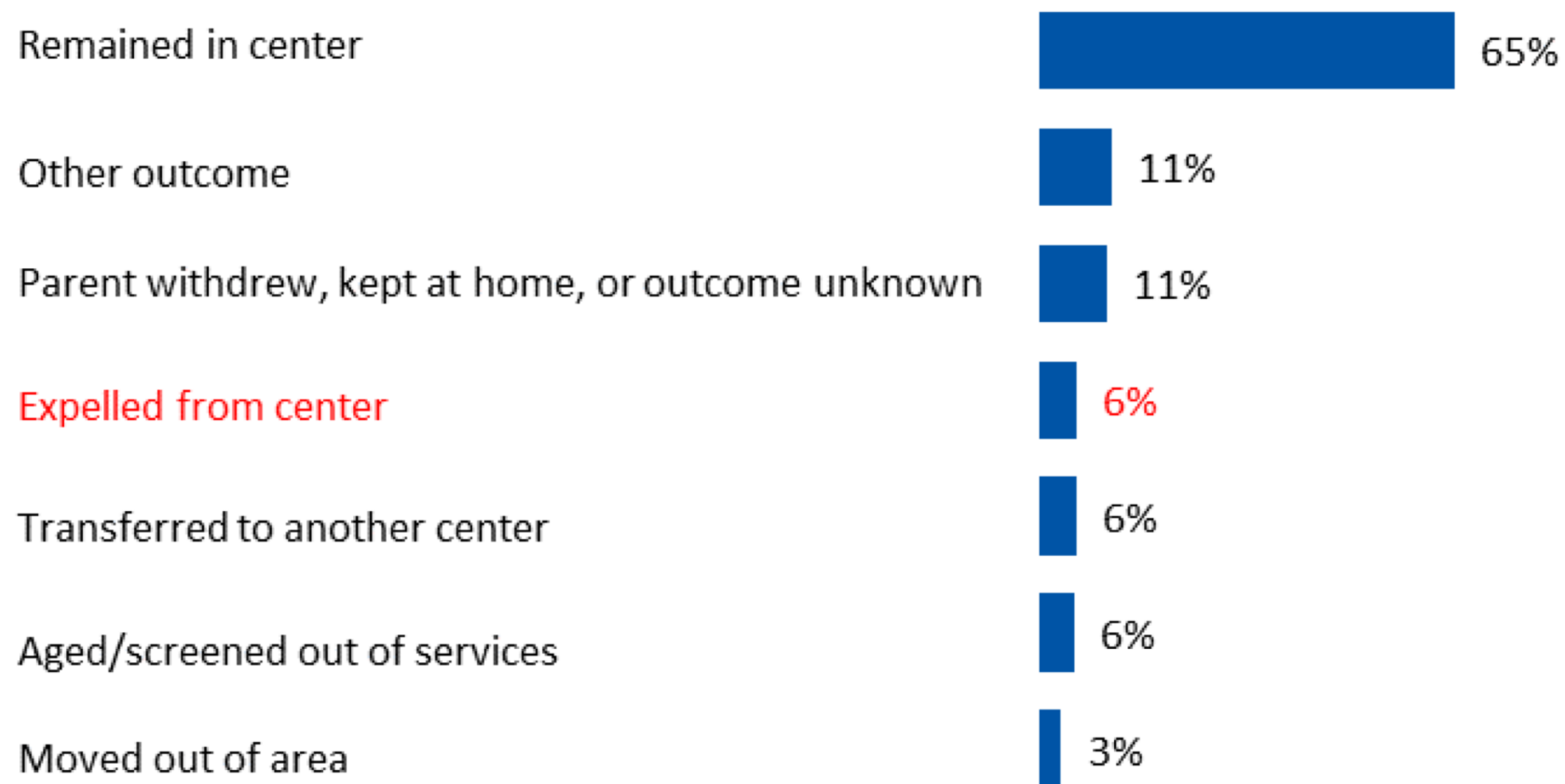
- 56% of teachers rarely discuss emotions in classroom
- 61% of teachers do not remind children of behavioral expectations
- 65% of classrooms have chaotic transitions between activities
- 55% of classrooms have no visual schedule for the day
- 28% of teachers rarely join children's play

Trauma in 50+% of Cases

Among children with a history of trauma, the experiences below were most common:



At the time their case closed, most children remained in the center who referred them to BehaviorHelp.



N=290

Reductions in Teacher-Reports of Challenging Behavior

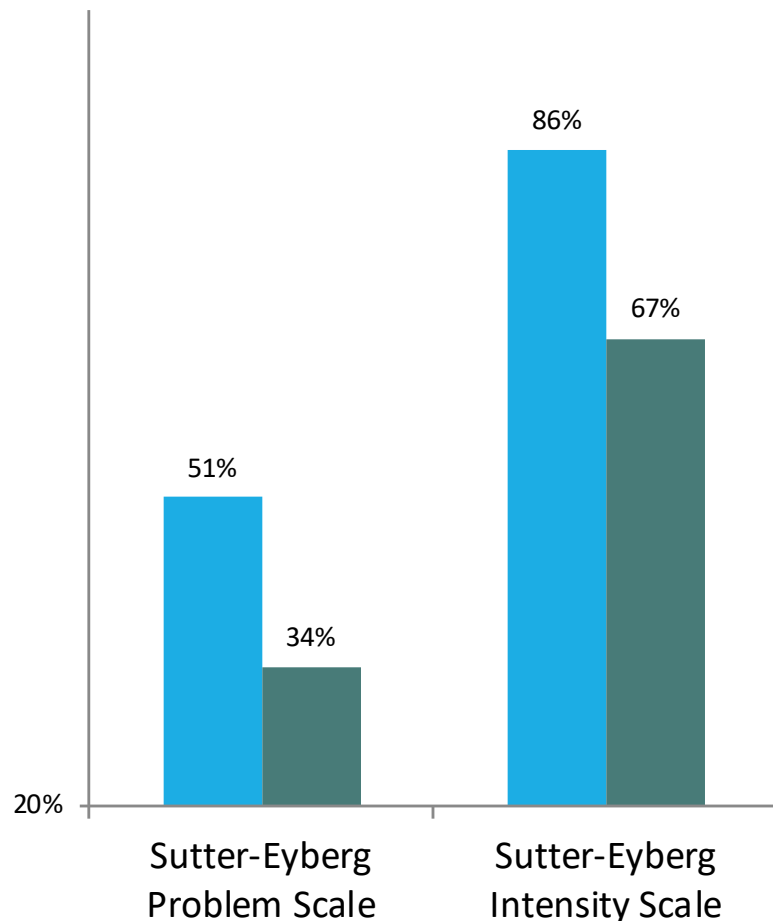
Strengths & Difficulties Questionnaire

Significant decrease in conduct & hyperactivity problems such as:

- Often fights with other children.
- Often argumentative with adults.
- Constantly fidgeting or squirming.

Significant increase in prosocial behaviors such as:

- Considerate of other people's feelings.
- Shares readily with other children.
- Often offers to help others.



Participants said they would **use BehaviorHelp again** and would **recommend BehaviorHelp** to other teachers.



Exploring Disparities in Outcomes

Children who get expelled during BH services are significantly more likely to

- Have a teacher without training in social-emotional development
- Be in a lower quality-rated center
- Have exposure to more types of traumatic events
- Be in foster care

Conners Edge, N.A., Kyzer, A., Abney, A., Freshwater, A., Sutton, M. & Whitman, K. (2021) Evaluation of a statewide initiative to reduce expulsion of young children. *Infant Mental Health Journal*, 42, 124-139 doi:10.1002/imhj.21894.

Lessons Learned

- Partnerships at the state and community level are critical
 - BehaviorHelp team partners
 - Early Childhood Special Education
 - Child Welfare
 - ECE Professional Development Providers
 - Mental health
 - K-12 education



Lessons Learned New Directions

- BehaviorHelp partners exploring trauma-informed care initiatives at every level
 - Foundational online training through naptime academy
 - Intensive organizational change model – FIRST: ECE
- New ways organizing professional development
Organizing the professional development offerings into a continuum
 - Partnering in regional hubs
 - Offering needs assessments to ECE program leadership
 - Offering center-wide training and coaching

QUESTIONS?

