Office of Child Care Initiative to Improve the Social-Emotional Wellness of Children

December 15, 2020

2:00 p.m.– 4:00 p.m. ET
Welcome

Shannon Christian,
Director of the Office of Child Care, Administration for Children and Families, U.S. Department of Health and Human Services
Introduction of Panelists

- **Jeanne VanOrsdal**, National Center on Early Childhood Quality Assurance
- **Ronna Schaffer**, Child Care State Capacity Building Center Infant/Toddler Specialist Network
- **Lise Fox**, National Center for Pyramid Model Innovations
- **Melody Redbird-Post**, National Center on Tribal Early Childhood Development
- **Katari Coleman**, National Center on Afterschool and Summer Enrichment
- **Neal Horen**, Center of Excellence for Infant and Early Childhood Mental Health Consultation
- **Andrew Williams**, Office Of Child Care
Agenda

◆ 2:00 p.m. Welcome and Context
◆ 2:10 p.m. Social-Emotional Wellness: Why This, Why Now?
◆ 2:15 p.m. Strategies
  ▪ Common Social-Emotional Wellness Strategies
  ▪ Relationship-Based Care for Infants and Toddlers Training-for-Trainers
  ▪ The Pyramid Model
  ▪ Perspective on Social-Emotional Strategies in Tribal Communities
  ▪ Perspective from Out-of-School Time
  ▪ Infant and Early Childhood Mental Health Consultation
◆ 3:15 p.m. Utilization Of Quality Dollars
◆ 3:30 p.m. New Resource Guide
◆ 3:40 p.m. Questions
◆ 3:55 p.m. Next Steps
Social-Emotional Wellness—Why This, Why Now?

- Effects of the pandemic on the social-emotional (SE) health of children, especially those experiencing multiple hardships, include the following:
  - Changes in routines
  - Long-term psychological effects, feelings of uncertainty, fear, and loss of control
  - Isolation from friends and extended family
  - Loss of family members
  - Access to health, community, and social supports
  - Increased stress of caregivers and families:
    - Financial insecurity and challenges in accessing basic needs
    - Tensions in relationships and domestic violence related to household confinement
Indicators of Trauma, Stress, Grief, or Loss

Infants and Toddlers
- Eating and sleeping disturbances
- Irritability, difficulty being soothed—or passivity
- Developmental milestone delays
- Defiant, withdrawn, or aggressive behavior

Preschoolers
- Regression of skills
- Sleep disturbances
- Engaging in traumatic play
- Decrease in social skills
- Hypervigilance

National Child Traumatic Stress network. (n.d.). *Age-related reactions to a traumatic event.*
https://www.nctsn.org/resources/age-related-reactions-traumatic-event
Indicators of Trauma, Stress, Grief, or Loss

School-Age

◆ Difficulty with attention
◆ Mood swings and withdrawn or aggressive behavior
◆ Fights with peers or adults
◆ Wants to be left alone
◆ Frequent headaches or stomach upsets
◆ Regressive behaviors

Adults

◆ Difficulty responding to children in healthy ways
◆ Increased chance of the following:
  ▪ Social risk factors
  ▪ Mental health issues
  ▪ Substance abuse
  ▪ Intimate partner violence

Ways to Support Children Impacted by Trauma

◆ Attachment
◆ Routines
◆ Emotional literacy
◆ Validation of feelings

◆ Continuity of care
◆ Cultural and linguistic responsiveness
◆ Utilization of formal SE wellness strategies
Poll Questions 1 and 2

- Is your state, territory or tribe currently implementing a social-emotional wellness child care initiative to support children, families and, providers? (Choose all that apply.)
  - Yes, for children
  - Yes, for families
  - Yes, for providers
  - No, not at this time

- Is your social-emotional wellness initiative accessible statewide and available to all providers?
  - Yes
  - No
Common Social-Emotional Wellness Strategies

Jeanne VanOrsdal, National Center on Early Childhood Quality Assurance
Common Strategies to Support Young Children

- Implementation of a social-emotional learning program
- Adoption of a positive behavior intervention and support framework
- Embedding of social-emotional indicators within quality rating and improvement systems
- Inclusion of social-emotional development within early learning guidelines
Strategies to Support Child Care Providers

- Increased access to infant-early childhood mental health consultants
- Use of child care health consultants to support developmental surveillance or screening in early childhood settings
- Increased access to coaches who can support responsive relationship-based care
Strategies to Support Child Care Providers

◆ Professional development on the use of social-emotional screening tools

◆ Incorporation of social-emotional professional development aligned with health and safety training requirements

◆ Integration of responsive caregiving and relationship-based care training and professional development

◆ Support of trauma-responsive training for early childhood professionals
Strategies to Support Child Care Providers

- Creation and adoption of a social-emotional toolkit for use by early childhood professionals
- Identification and alignment of social-emotional measurement strategies across initiatives and organizations
- Ensure that core knowledge and competencies for the early childhood workforce include a focus on understanding of best practices to support social-emotional development
Relationship-Based Care for Infants and Toddlers: A Training for Trainers

Ronna Schaffer, State Capacity Building Center Infant/Toddler Specialist Network
Training for Trainers Objectives

◆ Deepen your understanding of how to support infant/toddler development and learning in child care settings.

◆ Explore the Program for Infant/Toddler Care's (PITC) six essential program practices for relationship-based care.

◆ Consider approaches to training and technical assistance and support needed for implementation efforts.
The Importance of Early Relationships

“If you set out to describe a baby, you will find you are describing a baby and someone. A baby cannot exist alone but is essentially part of a relationship.”

PITC’s Six Essential Program Practices

- Relationship-Based Care
- Primary Caregiving
- Inclusive Care
- Small Group Care
- Culturally Responsive Care
- Continuity of Care
- Individualized Care

Setting the Stage for Relationships

The six program practices create an opportunity for responsive interactions which can lead to deep, nurturing relationships between children and caregivers, caregivers and families, among the children themselves, and between caregivers.
The Pyramid Model

Lise Fox, National Center for Pyramid Model Innovations
Implementing the Pyramid Model to Support the Social and Emotional Wellness of Children, Families and Providers

Lise Fox, Ph.D.
University of South Florida
Why the Pyramid Model?

- Link between social-emotional competence in the early years and school and life outcomes
- Impact of trauma on young children
- Impact of COVID-19 on children, families and providers
- Use of harsh and exclusionary discipline practices that negatively impact children’s long-term outcomes
Pyramid Model Faculty

• Early Childhood
• Early Childhood Special Education
• Autism
• Behavior Intervention
• Mental Health
• Infant and Early Childhood Mental Health Consultation
• Implementation Science
The National Center for Pyramid Model Innovations

The goals of the National Center for Pyramid Model Innovations (NCPMI) are to assist states and programs in their implementation of sustainable systems for the Implementation of the Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children (Pyramid Model) within early intervention and early education programs with a focus on promoting the social, emotional, and behavioral outcomes of young children birth to five, reducing the use of inappropriate discipline practices, promoting family engagement, using data for decision-making, integrating early childhood and infant mental health consultation and fostering inclusion.

New to the Pyramid Model?
Get the basics on the Pyramid Model.
What We Built
Pyramid Model for Promoting Social and Emotional Competence in Infants and Young Children

A Framework of Evidence-Based Practices

Tertiary Intervention Few

Secondary Prevention Some

Universal Promotion All
Promoting Infant and Young Children’s Social Emotional Competence
Pyramid Model

Universal Promotion All
It’s All About Relationships

◆ Relationships between children
◆ Relationships between staff and families
◆ Relationships between staff and children
Designing Supportive Environments: The Power of Prevention

- Children are engaged.
- Children know the routines and expectations.
- Adults have time to have meaningful conversations with children.

This means children are less likely to have challenging behaviors.
Pyramid Model

Secondary Prevention *Some*

Universal Promotion *All*
Strategies for Teaching Social-Emotional Skills to All Children

- Friendship skills
- Emotional literacy
- Self-regulation
- Social problem solving
Pyramid Model

Tertiary Intervention Few
Secondary Prevention Some
Universal Promotion All
A Process for Addressing the Social-Emotional Needs of Children When the Other Tiers Are Not Enough
Successful Pyramid Model
Teachers Feel Connected, Confident, and Competent
What We Learned
Changing Practice

- Training alone is inadequate
- Coaching is necessary for translation of training to practice with children and families
- Focus of coaching is fidelity of implementation
- Administrative support and systems change necessary for sustained implementation
- Data decision-making systems are necessary for ensuring targeted program, practitioner, and child outcomes
Institute of Education Sciences

- R324A07212: Examining the Potential Efficacy of a Classroom-Wide Model for Promoting Social-Emotional Development and Addressing Challenging Behavior in Preschool Children With and Without Disabilities
- R324A120178: Examining the Efficacy of a Classroom-Wide Model for Promoting Social Emotional Development and Addressing Challenging Behavior in Preschool Children With or At-Risk for Disabilities
Results

- Reduction of child challenging behavior for children with challenging behavior
- Improvement of observed social interaction skills for children with challenging behavior
- Improvement in ratings of social-emotional skills for children with challenging behavior
- Improvement in ratings of social-emotional skills for all children in the classroom
Program Reported Outcomes

- Improvements in classroom quality
- More intentional instruction around social skills and emotional competencies
- Improved capacity to address challenging behaviors
- Better relationships with families
- Decrease in problem behaviors, increase in social skills, and decrease in overall disruptive behaviors
- Elimination of the use of exclusionary discipline
- Increases in child engagement in learning opportunities
Where We Are Now
Implementation Science: The “What” and “How”

- Stages (2–4 years)
- Implementation teams
- Buy-in and readiness
- Drivers (for example, leadership and competence)
- Goal is high fidelity implementation of the pyramid model
Capacity Building

1. State leadership team
2. Professional development network
3. Implementation programs
4. Data for decision-making
State Leadership Team

Professional Development Network of Program Coaches

Training and technical assistance professionals who guide implementation leadership teams to ensure high fidelity implementation of evidence-based practices

Program leadership team guides implementation, coaching, family engagement, behavior support planning, and data decision-making

Data is collected and used to achieve high fidelity implementation of evidence-based practices.

Practitioners, Families and Children

Implementation Site

Implementation Site

Implementation Site
Program-Wide Implementation Guided by the Leadership Team

- Leadership Team
- Staff Buy-In
- Family Engagement
- Program-Wide Expectations
- Procedures for Responding to Challenging Behavior
- Continuous Professional Development and Classroom Coaching
- Data Decision-Making Examining Implementation and Outcomes
Components of Program-Wide Implementation

1. Establish a leadership team
2. Ensure staff buy-in
3. Promote family engagement
4. Establish program-wide expectations
5. Develop and implement a plan for professional development and staff support
6. Develop procedures to identify and respond to individual children’s social, emotional, and behavioral support needs
7. Monitor implementation and outcomes
Comprehensive Model

◆ Training practitioners
  ▪ Preschool classroom practices
  ▪ Infant/toddler classroom practices
  ▪ Addressing challenging behaviors

◆ Training program-wide leadership teams
  ▪ Implementation process
  ▪ Data decision-making
  ▪ Providing practice-based coaching
  ▪ Using classroom observation tools—TPOT, TPITOS
  ▪ Guiding behavior intervention planning
Considerations in Implementation

- Equity
- COVID-19
- Trauma-Informed Care
- Inclusion
- Partnerships with IECMHC
Getting Started
Join Statewide Implementation

- Use the *Developing Integrated Strategies to Support the Social and Emotional Wellness of Children, Families and Providers Resource Guide* to identify a state lead for the state initiative (32 states).
- Join the cross-sector state team focused on building capacity through training, technical assistance, and collaborative systems development.
Integrate Pyramid Model Initiative

- Integrate into current professional development and quality initiatives
- Train practitioners and programs in pyramid model practices
- Provide practice-based coaching to support implementation fidelity
Allocate Resources for Training and Technical Assistance

Statewide efforts have been funded through the following:

- Child Care and Development Fund (CCDF) quality dollars
- Title 1
- Early Childhood Mental Health
- State preschool
- Foundations
- Individuals with Disabilities Education Act, Section 619
- Legislative allocations
Visit Us Online at ChallengingBehavior.org
Need help implementing the Pyramid Model?

The Consortium can HELP!

www.pyramidmodel.org
The contents of this presentation were developed under a grant from the U.S. Department of Education, #H326B170003. However, those contents do not necessarily represent the policy of the U.S. Department of Education, and you should not assume endorsement by the Federal Government. Project officer, Sunyoung Ahn.
Perspectives on Social-Emotional Strategies in Tribal Communities

Melody Redbird-Post, National Center on Tribal Early Childhood Development
Implementation in Tribal Child Care

Social-emotional supports for child care providers can be funded through CCDF quality dollars if identified as a quality activity in the Tribal CCDF Plan.

- They can be used in all provider settings, including tribally operated centers.
- They provide a framework for teachers to work with families.
- Many resources are available online.
Implementation in Tribal Child Care

◆ Shared as a resource with center-based and family child care home providers
◆ Participate in train-the-trainer opportunities
◆ Component of a trauma-responsive approach
School-Age and Out-of-School Time Social-Emotional Learning Models

Katari Coleman, National Center on Afterschool and Summer Enrichment
Positive Behavior Intervention and Supports (PBIS)

- Connected to the pyramid model
  - Developing nurturing and responsive relationships
  - Creating positive learning environments and opportunities
  - Promoting targeted social-emotional skills
  - Supporting children with challenging behaviors
- Practices based on teaching and modeling proper behaviors
- Clearly defined expectations and goals through lessons that are created to teach and model expected behaviors
- Use of data collected through the tiers that identify behavior learning needs and trends

Collaborative for Academic, Social, and Emotional Learning (CASEL) SEL Framework

The CASEL SEL Framework addresses five broad, interrelated areas of competence and examples for each: **self-awareness, self-management, social awareness, relationship skills, and responsible decision-making**.

It can be taught and applied at various developmental stages and across diverse cultural contexts to articulate what children should know and be able to do for academic success, school and civic engagement, health and wellness, and so on.

Positive Youth Development (PYD) Principles

- Focus on strengths and positive outcomes
- Youth and voice engagement
- Strategies that involve all youth
- Community involvement and collaboration
- Long-term commitment

Sources: ACT for Youth Center for Community Action. (n.d.). *Principles of positive youth development.* http://www.actforyouth.net/youth_development/development/
Infant and Early Childhood Mental Health Consultation

Neal Horen, The Center of Excellence for Infant and Early Childhood Mental Health Consultation
Setting the Stage—What Research Shows

Experiences early on can impact how our children learn.

Sources: Yale University Child Study Center, Journal of Educational Psychology, American Psychological Association
Children of Color Are Disproportionately Affected

African American Children 18%
Of all preschoolers enrolled

42% Suspended
48% Suspended multiple times

American Indian / Alaska Native, or AI/AN Children 0.5%
Of all preschoolers enrolled

2% Suspended
3% Expelled

Source: U.S. Department of Education Office for Civil Rights
Caregivers Need Tools and Support for Our Little Ones

Definition of IECMHC

- IECMHC is a **prevention-based** approach that pairs a mental health consultant with adults who work with infants and young children in the different settings where they learn and grow, such as childcare, preschool, home visiting, early intervention, and their homes.

- Mental health consultation is not about “fixing kids,” nor is it therapy.

- Mental health consultation equips caregivers to facilitate children’s healthy social and emotional development.

- It focuses on equity and partnering with caregivers.
Benefits of IECMHC

IECHMC is an approach that is backed by evidence for the following:

- Improving children’s social skills
- Reducing child externalizing behaviors
- Preventing preschool suspension and expulsion
- Improving child-adult relationships
- Reducing provider stress, burnout, and turnover
- Improving adult self-efficacy
IECMHC Workforce
Mental Health Consultant Skills and Education

Master’s degree in social work, psychology, or related field (preferably licensed)

Have at least 2–3 years experience working as a mental health professional

Possess attributes and skills critical to this work such as a consultative stance, cultural sensitivity, and empathy

Have specialized knowledge and deep understanding of social, emotional, and relational health
The Workforce

Consultant Knowledge

➢ Child development
➢ Typical and atypical behaviors, including the following:
  ➢ Attachment
  ➢ Separation
➢ Medical and genetics information
➢ Cultural understanding
➢ Treatment alternatives
➢ Family systems
➢ Early childhood systems
➢ Adult learning principles

Skills and Experience

➢ Ability to work in group settings
➢ Observation, listening, interviewing, and assessment
➢ Sensitive to community attitudes and strengths
➢ Cultural competence
➢ Respect for diverse perspectives
➢ Ability to communicate
➢ Familiar with interventions and treatments
IECMHC Competency Categories

- The role of the consultant
- Foundational knowledge
- Equity and cultural sensitivity
- Reflective practice
- Child and family focused consultation
- Classroom and home focused consultation
- Programmatic consultation
- Systems-wide orientation

Note: These align with Alliance of Infant Mental Health Competencies but are not the same.
Elements of a Workforce Development Plan

A complete workforce development plan includes five key components:

- Orientation training
- IECMHC service delivery program (or model) training
- Skill building and development
- Ongoing professional development and training
- Reflective supervision
The Evidence Base

IECMHC Evaluation

- Assessment
- Theory of change
- What we know so far
Does It Work?

IECMHC has been shown to
- improve children’s social skills,
- promote healthy relationships,
- reduce challenging behaviors,
- reduce the number of suspensions and expulsions,
- improve classroom quality, and
- reduce provider stress and turnover.
Examples of Measures Used for IECMHC

- Child Level Outcomes
  - Strengths: Devereux Early Childhood Assessment
  - Problem Behaviors: Child Behavior Checklist

- Adult Outcomes
  - Self-Efficacy: Teacher Opinion Survey

- Dyadic Outcomes
  - Relationship: Arnett Caregiver Interaction Scale

- Classroom Outcomes
  - Classroom Quality: the CLASS, the CHILD
What Do We Know About Equity?

- Not nearly enough (Albritton et al., 2018).
- IECMHC may have a larger positive effect for the educators of African American and Latino boys than for educators of their White peers (Shivers, Farago, Guimond, & Steier, manuscript in preparation).
- Only for boys of color did the alliance predict key outcomes … (Davis et al., 2018).
IECMHC and Pyramid Model
IECMHC and the Pyramid Model Have Similar Goals

Both

- focus on the critical importance of positive relationships in the early years of a child’s development,
- build the capacity of professionals and families, and
- support children’s social-emotional development.
How Do Consultants and Coaches Work Together?

- Multiple lenses are beneficial.
- Children’s behaviors and life circumstances are complicated; multiple perspectives and areas of expertise are needed.
- Coaches can get stuck too!
- Complementary approaches can be used.
IECMHC in an Early Childhood System
Early Childhood Systems

Partnerships for IECMHC work

Local and statewide IECMHC programs

Federal, state, and local initiatives such as LAUNCH, PDG B-5, CCDBG, Head Start, and foundations

State infant mental health associations and local chapters

Maternal mental health, primary care, and public health allies

State office of early childhood, early learning, and early education
IECMHC and Systems

- Identified as a promotion and prevention strategy
- Core components of an IECMHC system:
  - Collaborative and strategic partnerships
  - Implementation planning
  - Workforce development
  - Data-driven approaches
  - Strategic financing

Financing
Typical Funding Streams

- State general funds
  - Local departments of education
  - Tobacco or other specialized tax dollars
- Federal block grants
  - CCDBG
  - Title V
- Federal grant programs
  - Project LAUNCH
  - MIECHV
- Foundations, whether private or philanthropic
Supporting IECMHC to ADVANCE and IMPACT the mental health of young children, their families and staff in early childhood settings across the country.
Thank You!
Connect with Us!

www.iecmhc.org
IECMHC@Georgetown.edu
@IECMHC
Use of Quality Dollars

Andrew Williams, Office of Child Care
Appropriate Use of Quality Funds

- Lead Agencies are required to provide quality improvement activities. Activities should be aligned with statewide needs assessment.
- The law designated set-asides, or percentages of funding that must be set aside for use on specific topics, such as quality improvement and infant/toddler care.
- The following table describes the phase-in of these set-asides.

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<th>Type of Set-Aside</th>
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<th>FFY 2017</th>
<th>FFY 2018</th>
<th>FFY 2019</th>
<th>FFY 2020 (&amp; ongoing)</th>
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<td>7%</td>
<td>8%</td>
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<td>11%</td>
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<td>0%</td>
<td>3%</td>
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</table>

Other quality improvement activities can be implemented that improve the quality of child care services provided, so long as outcomes related to the improvement of provider preparedness, child safety, child well-being, or entry to kindergarten can be measured.
Poll Questions 3 and 4

Where is your state, territory, or tribe in thinking about this work?
- Excited to start exploring
- Engaged in planning
- Piloting an initiative
- Partially implementing
- Fully implementing

Would you be interested in receiving technical assistance or joining a community of practice related to the following?
- Pyramid model implementation
- IECMHC implementation
- Relationship-based care training-for-trainers
- School-age implementation
Coming Soon: A Series of Resources

◆ A Stage-Based Framework for Implementing a Social and Emotional Wellness Strategy for Children, Families, and Providers
◆ The Pyramid Model for Promoting Social Emotional Competence in Infants and Young Children
◆ Infant and Early Childhood Mental Health Consultation (IECMCH)
◆ Relationship-Based Care for Infants and Toddlers: A Training for Trainers Professional Development Strategy
◆ Social and Emotional Strategies for School-Age Children
◆ Integrating Social-Emotional Supports as Part of the Child Care and Development Fund Quality Activities
More Resources

- Landscape of IECMH Consultation Implementation
- Examples of Social and Emotional Development in State QRIS Standards
- Pyramid Model Resources
- IECMHC Resources
- General Social and Emotional Wellness Resources
QUESTIONS
Next Steps—Accessing Technical Assistance

- National Center on Early Childhood Quality Assurance
  - QualityAssuranceCenter@ecetta.info

- National Center on Afterschool and Summer Enrichment
  - ncase@edc.org

- National Center on Health, Behavioral Health, and Safety
  - health@ecetta.info

- National Center on Tribal Early Childhood Development
  - nctecd@ecetta.info

- National Center for Pyramid Model Innovations

- Child Care State Capacity Building Center Infant/Toddler Specialist Network
  - CapacityBuildingCenter@ecetta.info

- Center of Excellence for Infant and Early Childhood Mental Health Consultation
  - https://www.iecmhc.org/
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