

McCabe, L., Brooks-Gunn, J., Berlin, L., Earls, F., Carlson, M., Fuligni, A., Lara, S. (2000, April). The emotional health of low income children over time: Influences of neighborhood, family, Head Start, and early school experiences. In L. Tarullo (Chair), Recent Findings from the Head Start Mental Health Research Consortium. Symposium conducted at the National Head Start Association 27th Annual Training Conference, Washington, DC.

University of New Mexico

Project Title:

Systematic Early Detection and Self Determination Approach for Mental Health Intervention in Head Start

Grantee:

Special Education/At-Risk Program, College of Education, University of New Mexico

Project Funding Years:

1997-2002

Project Staff:

Loretta A. Serna, Elizabeth Nielson, Steven R. Forness

Project Abstract:

This project is a partnership between the University of New Mexico and the Albuquerque Youth Development, Inc., for the purposes of improving mental health of Head Start children and their families. The project emphasizes use of two critical approaches. The first is the Early Screening Project (ESP), a multiple-gating procedure for early detection and screening that is not only extremely user-friendly for Head Start staff but also provides multiple sources of teacher, parent, and observational data on potentially high-risk children. The second is a 10-week Self-Determination Curriculum, a primary prevention approach to develop protective factors in both children and caregivers that not only enhances the Head Start curriculum but also serves a universal strategy from which nonresponders can be targeted for the next levels of intervention in the primary grades.

The research design not only takes advantage of the pre/post-testing capabilities of the ESP but also follows Head Start subjects into kindergarten and first grade. A "rolling wait list" design enables control classrooms in each previous year of the project to serve as experimental classrooms in the following years, for added practical benefit. In addition to quantitative analyses, qualitative data from classroom ethnography and focus groups will be used to enhance the interventions at the end of each Head Start

experience for use in the next year. A specific transition approach will also be studied for its impact on nonresponders who remain at risk for the self determination intervention. We will also examine the difference in potential impact, if any, between the intervention package as delivered by university staff as compared with that delivered independently by Head Start staff after training.

University of North Carolina

Project Title:

UNC-Head Start Partnership on Mental Health Interventions

Grantee:

Frank Porter Graham Child Development Center, University of North Carolina at Chapel Hill

Project Funding Years:

1997-2002

Project Abstract:

Head Start and other early childhood teachers report an increasing number of children with severe disruptive behavior in their classrooms. Some prevention and intervention studies with elementary-aged children show promising effects, but at the preschool age, very little information exists to guide parents or teachers about the choice of prevention or intervention approaches to use with disruptive children.

This project will test both the efficacy and the effectiveness of a theory- and research-based, multi-modal intervention with components drawn from the best recent research. The intervention will provide a universal prevention curriculum to all children within a classroom and an indicated intervention program to children with severe disruptive behaviors. For 2 years, project-supported therapist-consultants (T-Cs) will work directly with teachers and coordinators to learn and implement the intervention. During this time the efficacy of the intervention will also be evaluated. As T-Cs move on to new classes, the effectiveness phase of research will study whether and how Head Start teachers and coordinators can maintain any positive effects achieved during the first 2 years.

This interest in providing a universal intervention to all children is consistent with the Head Start goal of providing experiences and activities that foster the development of social competence among all Head Start participants and the indicated intervention is in response to the clear need for more intensive approaches to help parents and teachers of disruptive children.