The New Face of Mental Health: Early Intervention in Kindergartens

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The New Face of Mental Health
What does a mental health program look like in kindergarten?

- Imagine a 4 year old boy talking about what “happy” feels like while icing a biscuit face.
- What about a little girl learning how to relax by “doing the noodle” and pretending to be cooked spaghetti.
- Or a kinder class singing “going on a bear hunt” and talking about what scared feels like.
The CAST Kinder Program

• The CAST Kindergarten program is a short-term early intervention program designed to promote social and emotional learning for children in kindergarten.

• This program has been developed as an extension to the CAST Schools Program, which is an early intervention program for children in prep to grade two with emerging disruptive behaviours.

• A partnership program between:
  - Ballarat Health Services - Infant & Child MHS
  - Grampians Region - DEECD
  - Catholic Education – Ballarat Diocese
CAST Kinder Program

- **Professional Development for Teachers**
  (including kinder educators, assistants, and parent helpers if appropriate)

- **8 week Child Program**
  (universal program for the whole class incorporated into the kinder session)

- **Parent Program**
  (Tuning into Kids – 6 week parenting program)
Child Program Sessions

• The CAST kinder program components are incorporated into the general kinder curriculum each week. The session structure is designed with flexibility to enable the program to fit within individual kinder programs.

• Each session outline follows the same structure:
  – Teaching point
  – Puppet time
  – Story
  – Song
  – Optional Activities
Why offer a social and emotional early intervention program in Kinders?

– Emotional and behavioural problems of childhood are often evident by three years of age.

– Early identification and intervention is necessary to reduce the risk of developing long-term emotional and behavioural disorders.

– Parents and educators have more influence in early childhood in managing and shaping children’s behaviour. The earlier the intervention the more positive the outcome is likely to be for the whole family.
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Social & Emotional Learning

- All people are born with a temperament; some of us are born more placid while others more active.

- We learn how to interact with others, express our emotions and manage our behaviour based on our experience of how others interact and respond to us.

- Parents and teachers both spend large amounts of time with children and play an integral role in shaping how a child socialises, behaves and manages their emotions.
Teaching Prosocial Behaviour

- Research clearly demonstrates that children with behavioural difficulties are best managed when:
  - the rules or expectations of their behaviour are known
  - we set up opportunities for success
  - when they are praised or rewarded for appropriate behaviour
  - when there are clear and consistent consequences for inappropriate behaviour.
Emotion Coaching

- Emotion coaching provides a means of helping children to learn what their feelings are, to articulate them and cope with them rather than become overwhelmed by them.

- One approach to managing children’s disruptive behaviour is to look at the emotion underlying the behaviour.

- All of us behave differently depending on our emotional state and our capacity to deal with annoyances and frustrations fluctuates.

- Even our own behaviour varies according to whether we feel happy, irritable, excited or tired.
Social and emotional competence is:

- Significant contributor to positive outcomes in life along with intelligence.

- Associated with:
  - greater life satisfaction
  - better relationships
  - lower rates of psychological difficulties

- Being able to regulate our feelings helps us to regulate our behaviour, therefore less conduct problems.
Kinder Program Results

A paired-samples t-test was conducted to evaluate the impact of the CAST program on students’ Total Difficulties scores on the SDQ. There was a statistically significant decrease in Total Difficulties scores from pre-intervention ($M= 7.67, SD= 5.17$) to post-intervention ($M= 6.56, SD= 4.86$), $t(84) = 2.33$, $p< .05$ (two-tailed). **The intervention had a small - moderate effect size ($r = .25$).**

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Kinder Program Results

- Emotion Subscale – small to moderate effect size ($r = 0.26$)
- Peer Problems Subscale – small to moderate effect size ($r = 0.22$)
- Prosocial Behaviour Subscale – moderate effect size ($r = .35$)
- There were no statistically significant difference on the Conduct Problems and Hyperactivity subscales
Summary

• Mental health services can work together with education providers to deliver early intervention to improve mental health outcomes for preschool children.
Questions?

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