

# Learning about Young Children's Challenging Behavior and Impacts on Programs and Families: A State-wide Survey of Virginia's Early Care and Education Teachers

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## INTRODUCTION

State leaders and advocates in a growing number of states are working to increase supports for young children's social-emotional growth in early care and education (ECE) settings, and equip programs to help children with challenging behavior.<sup>1</sup> These supports include research-informed infant-early childhood mental health consultation and professional development focused on social-emotional learning practices. Recently, several states have also developed policies or guidelines to reduce expulsions, in some cases requiring ECE programs to use

infant-early childhood mental health consultation when a child is at risk of expulsion.<sup>2</sup> These efforts are welcome in light of evidence that social-emotional problems in early childhood, if neglected, can contribute to poor mental health and learning outcomes.<sup>3</sup>

This report presents the efforts of leaders in Virginia to learn more about teachers' experience with children who demonstrate challenging behavior in center-based and home-based ECE settings. These leaders partnered with the National Center for Children in Poverty (NCCP) to design and implement a survey of Virginia's ECE teachers that

serve infants, toddlers, and preschoolers. The survey and analysis of responses examined the following questions:

- **How common are different types of challenging behavior?**
- **How many children with challenging behavior, in different age groups, do teachers have in their classrooms or child care homes in the course of a year?**
- **What are the consequences of challenging behavior, and how often does removal from the ECE setting occur?**
- **What are the family circumstances of children with challenging behavior?**
- **How do teachers address challenging behavior and what barriers do they face?**
- **What factors contribute to the incidence of children with challenging behavior and removal from programs?**
- **What supports do teachers believe will help them address the needs of children with challenging behavior?**

Over the past several years, Virginia has expanded professional development for ECE teachers focused on social-emotional learning and infant-early childhood mental health.<sup>4</sup> The survey was designed to help stakeholders gather information that could help them determine the need for additional supports for ECE settings and the types of supports that might be most effective and welcome by teachers.

## **DESIGN AND ADMINISTRATION OF THE SURVEY**

A group of Virginia stakeholders representing the Early Childhood Mental Health Virginia Initiative worked with the NCCP project team to tailor the survey to their interests and to the state's ECE settings and professional development opportunities.<sup>5</sup> This group included the state's mental health coordinator, members of the [Virginia Early Childhood Mental Health Advisory Board](#), lead

administrators at the Department of Social Services and Department of Education, and a representative from Child Care Aware of Virginia (see members in acknowledgments).

The survey was administered through Qualtrics, a secure online data collection system. The Departments of Social Services and Education, and Child Care Aware provided email lists for the distribution of the survey. Email invitations to participate in the survey were sent to program directors and principals in Head Start, Early Head Start, child care centers and Virginia Preschool Initiative programs with a request to forward the invitation to lead teachers since email addresses for lead teachers in these programs were not available. Invitations were sent directly to day home care providers and early childhood special education teachers.

Survey invitees were informed that their survey responses could not be linked to any identifying information, and therefore, their responses would remain anonymous. As an incentive, invitees were also told that they could enter a drawing to receive a \$50 Amazon gift card.

The total number of invitations that were sent was 5,735 and 918 completed surveys were received. However, an accurate response rate cannot be calculated. The actual number of invitees is not known because the project team could not determine the number of invitations sent to program directors and principals that were actually forwarded to lead teachers. In addition, state agencies could not provide the number of classrooms in each program.

## **RESULTS**

The results presented in this brief are based on 918 surveys completed and submitted by lead teachers in center-based programs and day home care providers. For convenience, all participants are referred to as "teachers," and the term "program" is used to refer to both center-based and day home care settings, unless there is a need to specify results related to different types of settings.

## WHAT ARE THE KEY CHARACTERISTICS OF PROGRAMS AND TEACHERS?

### Location and types of programs

Teachers who submitted surveys work across the range of rural to urban settings in the state. Most teachers are either in large cities (31%), defined as places with populations over 20,000 residents, or in small cities, towns, or villages (31%) with populations of 1,000 to 9,999 residents. Others are in cities (23%) with populations of 10,000 to 20,000 residents, and rural towns (14%) with populations under 1,000 residents. Among those who are not in larger cities (n=630), 86 percent indicated their programs are within one hour driving distance of a larger city.

Teachers from the following types of settings are represented in the sample:

- **81 percent (n=747) are center-based teachers**
  - **32 percent VPI**, including Virginia Preschool Initiative (VPI) and Virginia Preschool Initiative Plus (VPI+)
  - **24 percent HS/EHS**, including Head Start; Early Head Start; Head Start and VPI; and Head Start and private child care
  - **23 percent preschool ECSE**, including public school Early Childhood Special Education (ECSE); Head Start, VPI, ECSE; and Head Start, VPI, ECSE, Title I
  - **14 percent licensed child care**, including licensed child day center; EHS child care partnership; and child care and VPI
  - **6 percent non-licensed child care**, including religious-exempt child day center; license-exempt child day center; and unlicensed child day center
  - **1 percent other/unknown**
- **19 percent (n=171) are day home care providers**
  - **74 percent licensed**
  - **22 percent non-licensed** including providers approved by Family Day System; approved by local ordinance; unlicensed; and voluntarily registered

- **4 percent other/unknown**

### Work hours and staffing

Day home care providers reported longer work hours, compared to teachers in all other programs. On average, day home care providers reported having children in their programs for 9.5 hours a day, while teachers in other programs reported having children for 6.2 hours a day. See **Table 1** for complete results.

Teachers in center-based programs were asked about the number of days per month their class did not have a full teaching team. Thirty-five percent (n=264) of teachers in center-based programs reported lacking a full teaching team for 5 days a month.

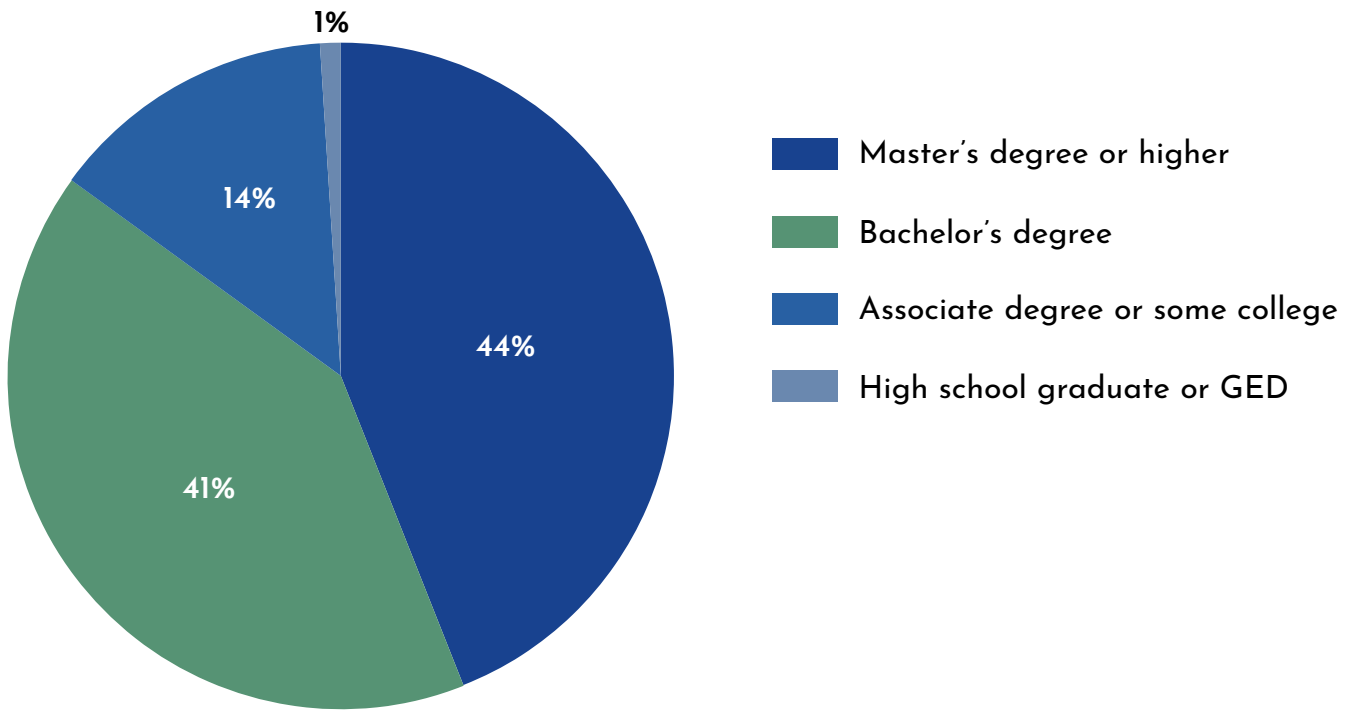
### Education of teachers and day home care providers

Center-based teachers reported higher levels of education than day home care providers did. In center-based programs, 84 percent of teachers had a Master's or Bachelor's degree, while 36 percent of day home care providers had this level of education. Preschool special education teachers had the highest education levels, and non-licensed day home care providers had the lowest levels. The percentage of teachers reporting "early childhood" as their major area of study ranged from 77 percent in Head Start/Early Head Start programs to 43 percent in non-licensed center-based programs. See **Figures 1 and 2** and **Tables 2 and 3** for complete results.

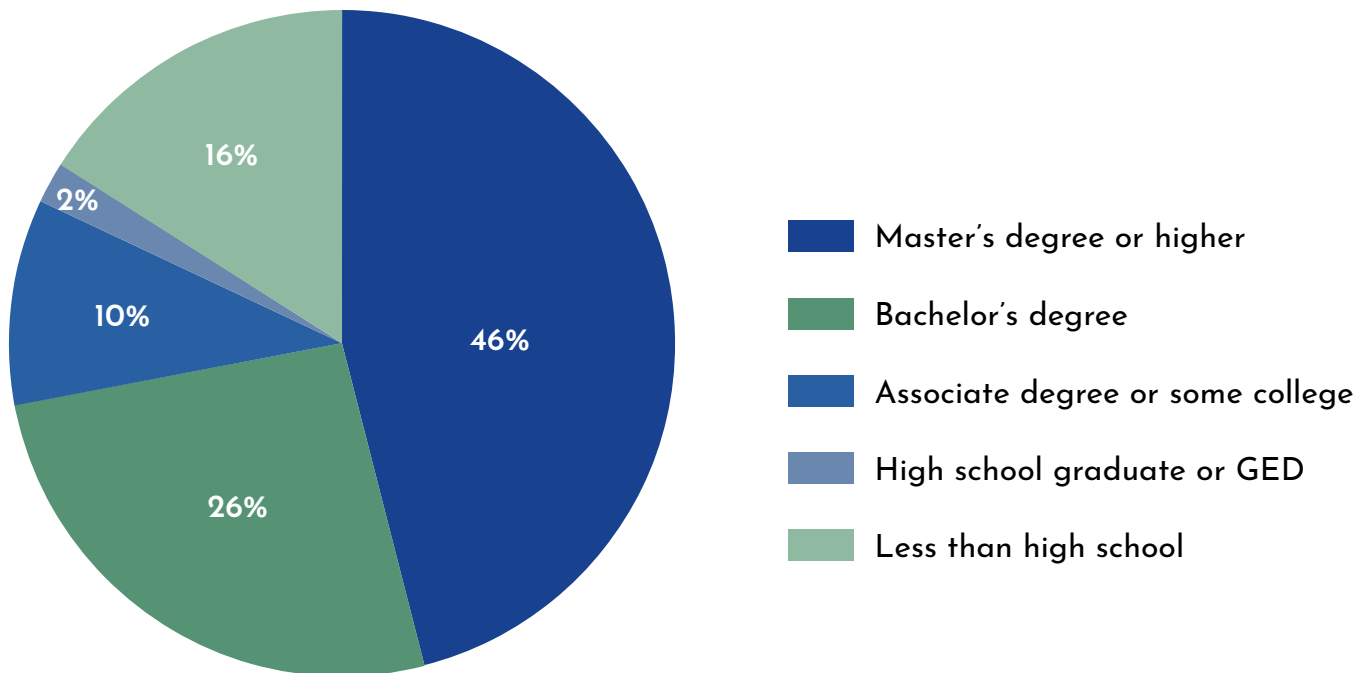
### Certifications and Professional Development

Most teachers did not have special certifications. The most common certification was the CDA (National Child Development Associate Credential), reported by 20 percent of licensed child care teachers, 16 percent of Head Start/Early Head Start teachers, 15 percent of licensed day home teachers, and 8 percent of non-licensed day home teachers. In addition, 11 percent of Head Start/Early Head Start and 13 percent of licensed day home providers had a VA Community College Certificate in Early Childhood (Preschool). See **Table 4** for complete results.

**Figure 1: Teachers' highest education level in center-based programs (n=747)**



**Figure 2: Teachers' highest education level in day home care settings (n=171)**



**Table 1: Teachers' average daily work hours by type of program**

	VPI (n=233)	HS/ EHS (n=161)	Preschool ECSE (n=161)	Licensed center-based CC (n=100)	Non-licensed center-based CC (n=45)	Licensed day home care (n=99)	Non-licensed day home care (n=36)	Other/ unknown (n=9)	All programs (n=844)
Average work hours a day	6.5	6.3	5.9	6.6	4.7	9.5	9.8	6.6	6.8

**Table 2: Teachers' highest education level by type of program**

	VPI (n=242)	HS/ EHS (n=177)	Preschool ECSE (n=174)	Licensed center-based CC (n=102)	Non-licensed center-based CC (n=46)	Licensed day home care (n=127)	Non-licensed day home care (n=38)	Other/ unknown (n=12)	All programs (n=918)
Master's degree or higher	51%	24%	73%	17%	26%	13%	0	17%	37%
Bachelor's degree	48%	50%	25%	43%	28%	28%	18%	42%	38%
Associate degree or some college	2%	24%	2%	36%	43%	43%	58%	25%	20%
HS graduate or GED	0	1%	0	4%	2%	16%	16%	17%	4%
Less than HS	0	0	0	0	0	1%	8%	0	<1%

**Table 3: Teachers with an EC major by type of program\***

	VPI (n=242)	HS/EHS (n=177)	Preschool ECSE (n=174)	Licensed center-based CC (n=102)	Non-licensed center-based CC (n=46)	Licensed day home care (n=127)	Non-licensed day home care (n=38)	Other/ unknown (n=12)	All programs (n=918)
Early childhood major	73%	77%	74%	61%	43%	63%	45%	75%	69%

\* Teachers' major was coded as "an early childhood major" when teachers reported having a major in child development, early childhood education, or a closely related field indicating an early childhood focus.



Five types of professional development that had social-emotional content were listed in the survey. Over one-third of teachers reported participation in one of these professional development experiences. Percentages of participating teachers in Head Start, licensed day home care and non-licensed day home care were over 50 percent for CLASS training. Participation was 21 percent or higher across all types of teachers for trauma-informed care. Overall, Head Start/Early Head Start teachers showed the highest levels of participation in professional development with social-emotional content. See **Table 5** for complete results.

### HOW MANY CHILDREN WITH CHALLENGING BEHAVIOR DO TEACHERS REPORT?

“Challenging behavior” was defined in the survey as “a repeated pattern of behavior that interferes with the child’s ability to play, learn, and get along with others.” Teachers reported on the prevalence of challenging behavior among children in their classroom or day home care settings in the previous year (fall 2016 to summer 2017).

A high percentage of teachers (90%) reported having at least one child with challenging behavior in their classroom or day home care; on average, teachers reported that four children had challenging behavior. The percentage of teachers reporting children with challenging behavior varied by age of children in the classroom or day home care setting, with the highest percentage for teachers of preschoolers.

- Among teachers of infants, 36 percent (n=42) identified at least one infant with challenging behaviors; on average, they reported 3 infants with challenging behavior.
- Among teachers of toddlers, 67 percent (n=141) identified at least one toddler with challenging behaviors; on average, they reported 2 toddlers with challenging behavior.
- Among teachers of preschoolers, 89 percent (n=727) identified at least one preschooler with challenging behaviors; on average, they reported 4 preschoolers with challenging behavior.

### HOW COMMON ARE DIFFERENT TYPES OF CHALLENGING BEHAVIORS?

As shown in **Figure 3**, over one-third of teachers rated three types of disruptive behavior (e.g., extremely active, impulsive; refuses to cooperate; and hitting or throwing things) as very common (occurring 4 to 5 times a week). A little more than a quarter of teachers also reported that sad behavior (e.g., crying, withdrawn) is very common.

### WHAT ARE THE CONSEQUENCES OF CHALLENGING BEHAVIORS?

Teachers reported on the extent of the negative impact that children’s challenging behavior has on different aspects of the setting; see **Figure 4** for complete results.

Teachers also reported on the number of children with challenging behavior who left their classroom under three different conditions: 1) **Parents told staff** they were leaving because the program could not meet the child’s needs; 2) **Staff told parents** the child must leave because the program could not meet the child’s needs; or 3) **Parents and staff agreed** the child must leave because the program could not meet the child’s needs. Overall, 14 percent of teachers (n=115) reported that children with challenging behavior were removed from their class or day home care setting under any of these three conditions; on average, teachers

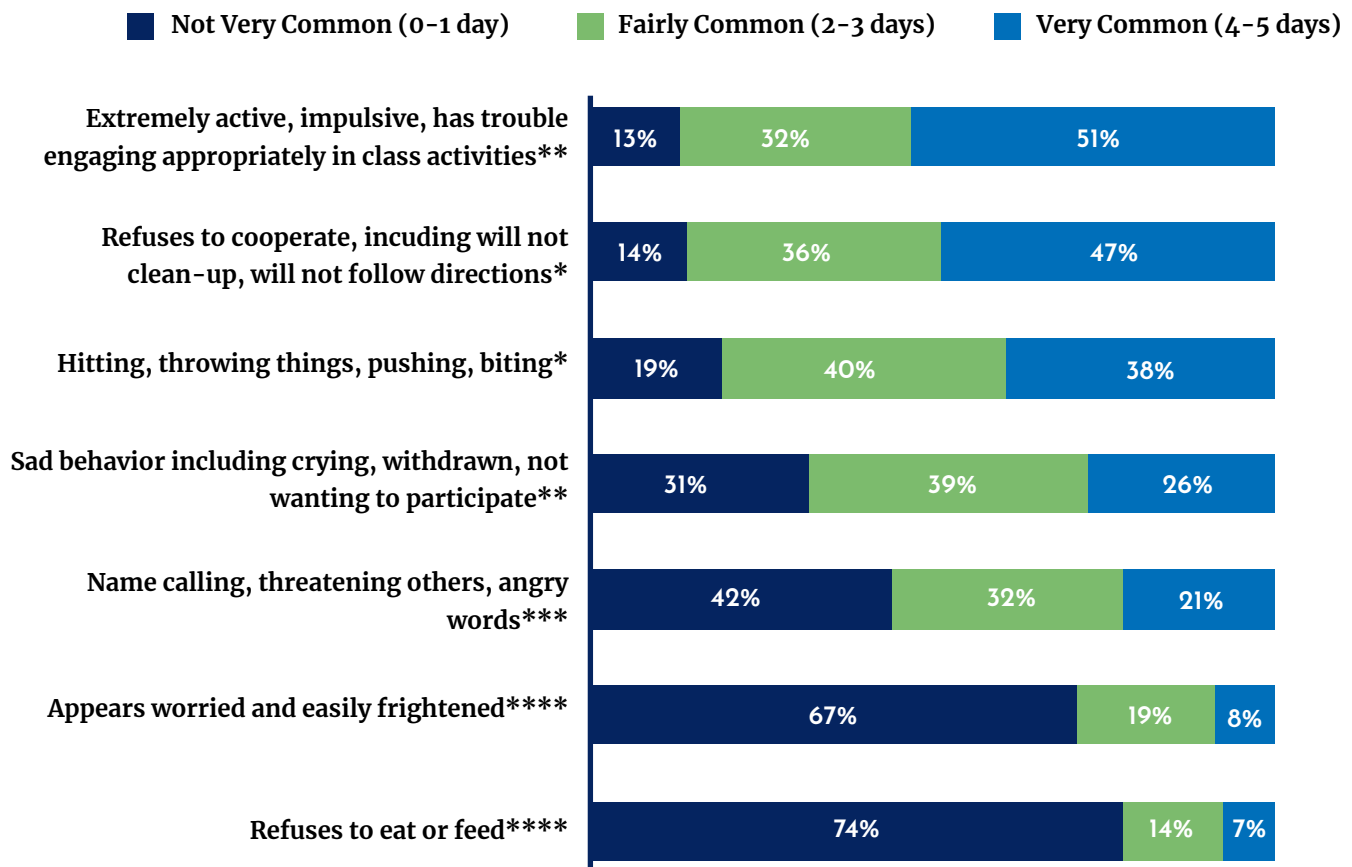
**Table 4: Teachers' certifications by type of program**

	VPI (n=242)	HS/ EHS (n=177)	Preschool ECSE (n=174)	Licensed center-based CC (n=102)	Non-licensed center-based CC (n=46)	Licensed day home care (n=127)	Non-licensed day home care (n=38)	Other/ unknown (n=12)	All programs (n=918)
VA Community College Certificate - EC (Preschool)	2%	11%	1%	6%	7%	13%	3%	17%	6%
VA Community College Certificate - Infant Toddler	<1%	2%	0	1%	2%	4%	0	0	1%
VA Community College One Year EC Development Certificate	2%	2%	0	5%	4%	5%	0	0	2%
CDA	1%	16%	2%	20%	10%	15%	8%	13%	9%
VA Association for Infant Mental Health Endorsement	0	0	2%	1%	0	1%	0	0	1%
None	75%	50%	74%	45%	61%	39%	58%	42%	60%

**Table 5: Teachers' participation in professional development activities by type of program**

	VPI (n=242)	HS/EHS (n=177)	Preschool ECSE (n=174)	Licensed center-based CC (n=102)	Non-licensed center-based CC (n=46)	Licensed day home care (n=127)	Non-licensed day home care (n=38)	Other/ unknown (n=12)	All programs (n=918)
CLASS Training	35%	68%	23%	42%	37%	71%	58%	58%	46%
CSEFEL Pyramid Model	14%	24%	14%	10%	9%	24%	21%	25%	17%
Al's Caring Pals	12%	41%	19%	15%	9%	28%	13%	25%	21%
Trauma-informed Care	21%	41%	36%	25%	22%	28%	34%	25%	30%
ASQ-SE Training	6%	27%	11%	25%	20%	31%	8%	17%	17%

**Figure 3: Percent of teachers rating different challenging behaviors as "Very Common," "Fairly Common," or "Not Very Common" (n=823)**



\*3% of teachers who reported observing challenging behavior in the past 12 months did not respond to this question

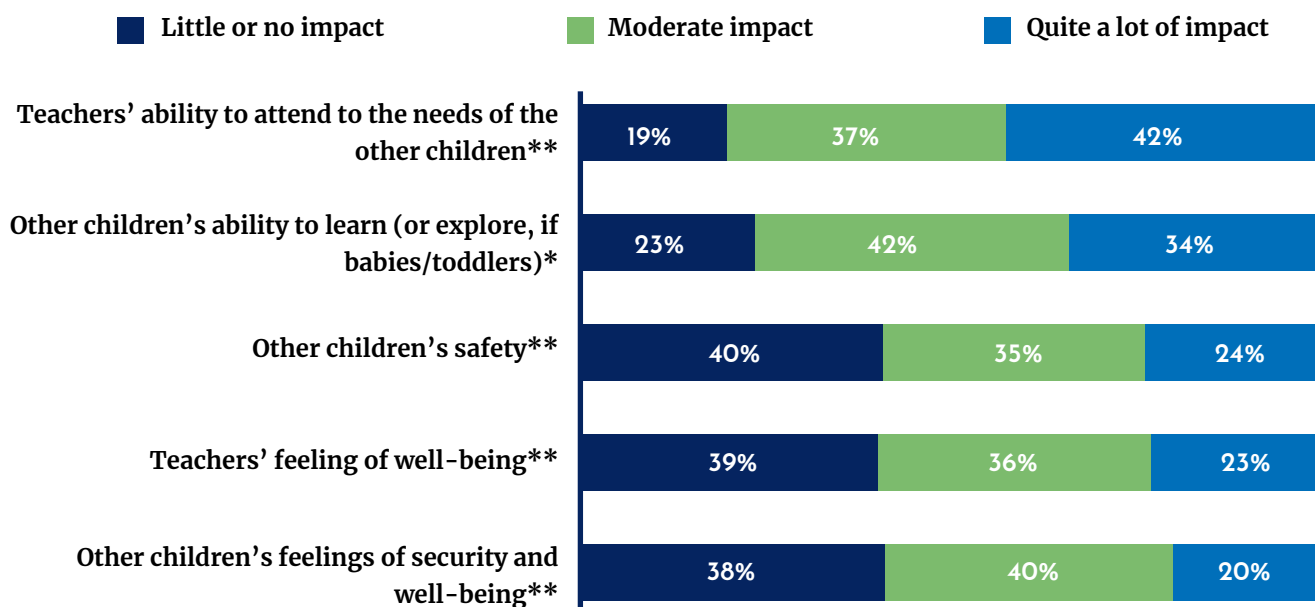
\*\*4% of teachers who reported observing challenging behavior in the past 12 months did not respond to this question

\*\*\*5% of teachers who reported observing challenging behavior in the past 12 months did not respond to this question

\*\*\*\*6% of teachers who reported observing challenging behavior in the past 12 months did not respond to this question



**Figure 4: Percent of teachers rating impacts of challenging behavior on different features of ECE settings (n=823)**



\*1% of teachers who reported observing challenging behavior in the past 12 months did not respond to this question

\*\*2% of teachers who reported observing challenging behavior in the past 12 months did not respond to this question

reported that two children with challenging behavior were removed.

Across these three conditions:

- 5 percent of teachers (n=40) reported that children with challenging behavior were removed when parents told staff they were leaving because the program could not meet the child's needs; on average, they reported one child with challenging behavior was removed.
- 6 percent of teachers (n=50) reported that children with challenging behavior were removed when staff told parents the child must leave because the program could not meet the child's needs; on average, they reported one child with challenging behavior was removed.
- 7 percent of teachers (n=54) reported that children with challenging behavior were removed because parents and staff agreed the program could not meet the child's needs; on average, they reported one child with challenging behavior was removed.

Among the different program types, licensed center-based child care have the highest percentage of teachers (30%) reporting that at least one child with challenging behavior left their program; on average, they reported the removal of two children. The rate of removal was 39 per 1,000 children in licensed center-based child care programs. See **Table 6** for complete results.

The condition described in the survey as "staff told parents child must leave because the program could not meet the child's needs," can be considered "involuntary dismissal" of children, or expulsion. Teachers reported involuntary dismissal of preschoolers at much higher rates compared to other age groups. Among the teachers (n=50) who reported involuntary removal of children, 86 percent reported the removal of preschoolers (one preschooler on average), 8 percent reported the removal of toddlers (one toddler on average), and 6 percent reported the removal of infants (two infants on average).

Among the teachers (n=115) who reported the removal of children with challenging behavior under any condition, 86 percent reported the removal of preschoolers (one

preschooler on average), 10 percent reported the removal of toddlers (one toddler on average), and 8 percent reported the removal of infants (two infants on average).

Teachers also identified another group of children that leave classrooms and day home care settings; these are children whose parents remove them due to concerns about the challenging behavior of other children. Eight percent of teachers (n=76) reported that this happened for at least one child; on average, they reported 2 children were removed. The highest percent are in licensed center-based child care programs; 20 percent of teachers in licensed center-based child care reported that, on average, 2 children were removed due to the parent's concerns about the challenging behavior of children's peers. The rate of removal was 24 per 1,000 children in licensed center-based child care programs. See **Table 7** for complete results.

Overall, 17 percent of teachers (n=153) reported the removal of children due to their challenging behavior or the challenging behavior of peers; on average, they reported 2 children were removed. The highest percent are in licensed center-based child care programs; 39 percent of teachers in licensed center-based child care reported that, on average, 3 children were removed due to the child's challenging behavior or the parent's concerns about the challenging behavior of children's peers. The rate of removal was 64 per 1,000 children in licensed center-based child care programs. See **Table 8** for complete results.

Teachers also reported on the types of settings that children moved to when they were removed from their programs or day home care settings due to challenging behavior. They were asked to indicate the type of setting and the number of children who moved to each setting. The highest percent of teachers (30%) reported that when children with challenging behavior left their program or day home care, parents decided to care for the child at home rather than look for another program; teachers reported one child, on average. See **Table 9** for complete results.

## WHAT ARE THE FAMILY CIRCUMSTANCES OF CHILDREN WITH CHALLENGING BEHAVIOR?

Teachers reported on their knowledge of whether children with challenging behavior were experiencing certain

adverse family circumstances. A high percentage of teachers reported that children with challenging behavior face adverse child and family experiences. See **Figure 5**.

- 43 percent of teachers (n=354) reported that children's families had health, mental health, substance abuse, or domestic violence challenges; on average, they reported 3 children in families with these circumstances.
- 40 percent of teachers (n=329) reported that children's parents had serious financial problems (e.g., had trouble with child care co-pays, asked program staff for information about food or housing assistance); on average, they reported 5 children in families with these problems.
- 33 percent of teachers (n=275) reported that children were in families with an absent parent(s) (e.g. military obligations); on average, they reported 2 children had an absent parent(s).
- 30 percent of teachers (n=250) reported that children were in families monitored by Child Protective Services; on average, they reported 2 children monitored by Child Protective Services.
- 19 percent of teachers (n=159) reported that children were in foster care; on average, they reported 2 children in foster care.
- 16 percent of teachers (n=129) reported that children were homeless; on average, they reported 1 child who was homeless.

**Table 6:** Percent of teachers reporting the removal of children with challenging behavior across different ECE settings under any condition (i.e. parents told staff, staff told parents, or parents and staff agreed that the child must leave)

Type of program (number of teachers)	Percent of teachers	Average number of children who left their program	Removal rate for every 1,000 children
Licensed center-based CC (n=102)	30%	2	39
Licensed day home care (n=127)	17%	1	18
Non-licensed day home care (n=38)	11%	2	31
VPI (n=242)	11%	1	8
Non-licensed center-based CC (n=46)	9%	2	10
Preschool ECSE (n=174)	9%	1	9
HS/EHS (n=177)	7%	1	6
Other/unknown (n=12)	8%	2	17
All programs (N=918)	13%	2	13

**Table 7:** Percent of teachers reporting the removal of children across different ECE settings due to the challenging behavior of peers

Type of program (number of teachers)	Percent of teachers	Average number of children who left their program	Removal rate for every 1,000 children
Licensed center-based CC (n=102)	20%	2	24
Licensed day home care (n=127)	12%	1	13
HS/EHS (n=177)	10%	1	7
Non-licensed center-based CC (n=46)	7%	3	15
Non-licensed day home care (n=38)	5%	3	22
Preschool ECSE (n=174)	5%	2	7
VPI (n=242)	4%	1	2
Other/unknown (n=12)	8%	1	8
All programs (n=918)	8%	2	9

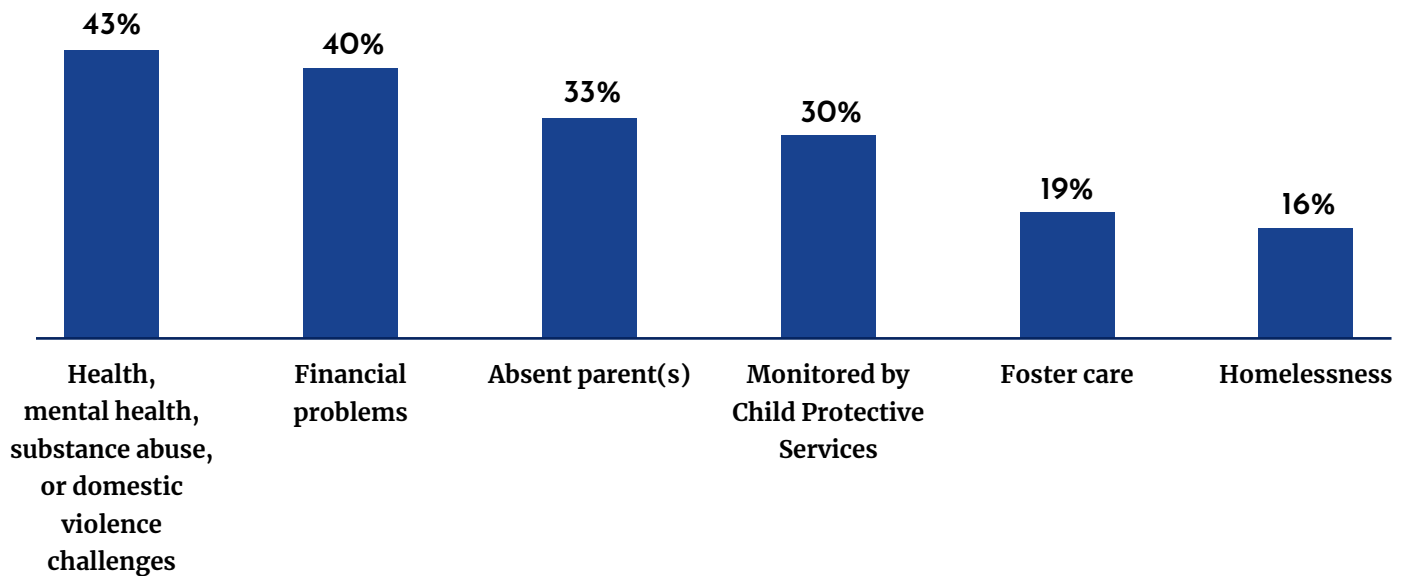
**Table 8: Percent of teachers reporting the removal of children across different ECE settings due to their challenging behavior or the challenging behavior of peers**

Type of program (number of teachers)	Percent of teachers	Average number of children who left their program	Removal rate for every 1,000 children
Licensed center-based CC (n=102)	39%	3	64
Licensed day home care (n=127)	23%	2	31
HS/EHS (n=177)	13%	2	14
Non-licensed day home care (n=38)	13%	2	53
VPI (n=242)	12%	1	10
Preschool ECSE (n=174)	11%	2	16
Non-licensed center-based CC (n=46)	11%	3	25
Other/unknown (n=12)	17%	2	25
All programs (n=918)	17%	2	23

**Table 9: Types of settings that children moved to when they were removed from their programs or day home care settings due to their challenging behavior (n=115)**

	Percent of teachers	Average number of children who left their program
Regulated setting	23%	2
Unregulated setting	10%	1
Parents were unable to find another program at the time the child left	6%	1
Parent decided to care for the child at home rather than look for another program	30%	1
I don't for some or all children	12%	1

**Figure 5: Percent of teachers reporting family circumstances of children with challenging behavior**



## HOW DO TEACHERS CURRENTLY ADDRESS CHALLENGING BEHAVIOR?

Teachers varied in their use of different practices when children demonstrated challenging behavior:

- 84 percent of teachers (n=689) reported that they request a special meeting with parents to discuss child’s behavior.
- 46 percent of teachers (n=381) reported that they request assistance from other program staff.
- 37 percent of teachers (n=306) reported that they request a consultation with an early childhood mental health specialist.
- 36 percent of teachers (n=299) reported that they recommend/facilitate referral for Early Intervention or preschool education.
- 28 percent of teachers (n=232) reported that they recommend referral to child’s pediatrician to ensure medical screenings and exams are up to date.

- 27 percent of teachers (n=221) reported that they request that parent picks up child early from the program.

### Strategies teachers use to reduce challenging behavior

Teachers also provided responses to an open-ended question that asked them to describe strategies they have found effective in reducing children’s challenging behavior. The following were the most common types of strategies:

- Calm-down methods (e.g., yoga, breaks between activities, mindfulness, breathing exercises)
- One-to-one assistance and support (e.g., “many children in the classroom need to be held and loved,” “children need to be listened to by trusting adult”)
- Positive reinforcement (e.g., rewards or praise for positive behavior)
- Use of consistency and routines (e.g., clean-up routine)

Additional, but less common responses included the following strategies:

- Team-based methods (e.g., teachers sharing best practices for addressing challenging behavior, assistant in classroom “on-board with” teacher’s approach, involved guidance counselor)
- Redirection (e.g., directing attention of child away from problematic behavior)
- Behavior charts (e.g., giving children stickers for positive behavior on chart, using chart to share information with parents about patterns of their child’s behavior)
- Separating child from the group (e.g., time out, sitting out from play time for short periods)
- Creating a special role for the child (e.g., letting child be a leader or helper in the classroom to divert child’s attention into positive action)

### Barriers to addressing challenging behavior

In response to an open-ended question, teachers described barriers they faced when trying to address children’s challenging behavior. The following are the most common responses:

- Inadequate supports for teachers (e.g., lack of mental health and behavioral specialists or waiting list to see specialist, too few assistants in classroom)
- Lengthy process to get assistance (e.g., it takes time to monitor child, it takes time to go through a process to obtain support services)
- Families’ difficulties with addressing problem behaviors or a mental health concern (e.g., families do not acknowledge problem, families unable to address behavior problems at home)
- Families’ lack of capacity to address problems at home that contribute to challenging behavior (e.g., parent mental health or substance abuse; lack of transportation, lack of insurance)

Teachers described the following additional, less common barriers to addressing children’s challenging behavior:

- Lack of teacher training on how to address behavioral or mental health issues; lack of professional development on trauma-informed care and teaching practices
- Large class sizes (e.g., more teachers in classroom are needed, especially in classrooms with high number children needing services; given size of class, teachers cannot deliver one-on-one care)

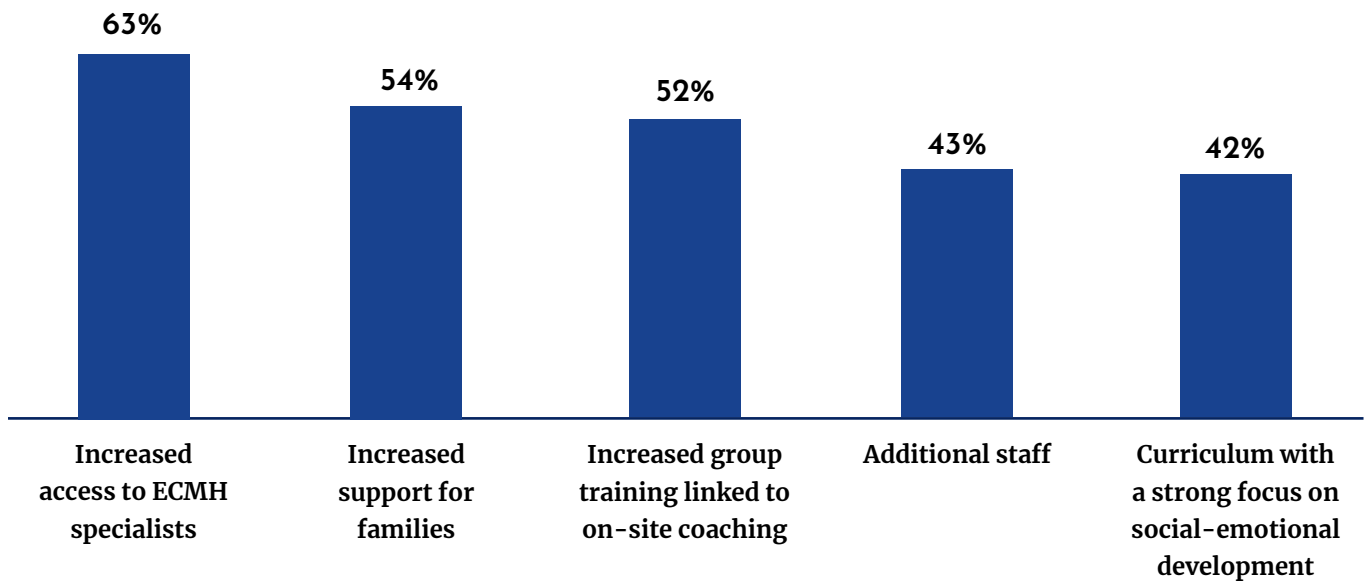
### WHAT SUPPORTS DO TEACHERS BELIEVE WILL HELP THEM ADDRESS THE NEEDS OF CHILDREN WITH CHALLENGING BEHAVIOR?

Among the different types of support listed on the survey, a high percentage of teachers identified “on-site consultation,” “increased support for families,” and “group training” as ones that could help them address the needs of children with challenging behavior. See **Figure 6**.

- 63 percent of teachers (n=522) selected increased access to early childhood mental health specialists who can visit their classroom to develop an individualized, assessment-based support plan and consultation to teachers and families.
- 54 percent of teachers (n=447) selected increased support for families such as staff to help families access services that address housing, mental health, substance abuse problems and other challenges.
- 52 percent of teachers (n=426) selected increased opportunities for group training linked to on-site coaching.
- 43 percent of teachers (n=356) selected additional staff.
- 42 percent of teachers (n=342) selected a curriculum that has a strong focus on children’s social-emotional development.



**Figure 6:** Percent of teachers reporting different supports that can help address the needs of children with challenging behavior



## SUMMARY

The following are key findings from the survey:

- A high percentage of teachers (90%) reported having at least one child with challenging behavior; the percentage of teachers reporting children with challenging behavior was highest for teachers of preschoolers.
- About half the teachers rated two types of disruptive behavior (extremely active, unable to engage in activities and refuses to cooperate) as very common; over one-third identified hitting, pushing, biting as very common; and about one-quarter rated sadness and withdraw behavior as very common.
- Over half the teachers rated the amount of negative impact challenging behavior had on other children's learning and safety and on teachers' ability to attend to the needs of other children as moderate or a lot.
- Rates of removal of children from classrooms due to challenging behavior varied across types of programs, with the highest rate found in licensed child care, where almost one-third of teachers reported an average of 2 children removed; across different types of programs, almost half of the teachers reported that children did not move into another regulated setting.
- About forty percent of teachers reported that children with challenging behavior live in families that experience health and mental health problems, substance abuse, or domestic violence and/or severe financial difficulties.
- More than half of the teachers recommended increasing access to early childhood mental health consultants, increasing supports for families, and increasing opportunities for group training linked to on-site coaching.

## RECOMMENDATIONS

The survey's results show a high incidence of young children's challenging behavior in the state's ECE settings and the fairly commonplace removal of children from these settings due to challenging behavior. These results suggest the need to expand supports to ECE programs and the families they serve in order to help prevent harmful outcomes for large numbers of children. These outcomes include a progression to more serious child mental health and related learning problems, and children's exclusion from ECE programs that can enrich their early learning and development. The following recommendations strongly reflect the goal of prevention and include critical supports identified by teachers that took part in the survey.

**1. Build on the strengths of VA's current infant early childhood mental health (IECMH) consultation program to support the healthy development and school readiness of young children, 0 to 5 years, in ECE settings throughout the state.** A high percentage of teachers cited the need for IECMH consultation. Expansion of IECMH consultation should aim to:

a) Serve children birth through age five and ensure that IECMH consultation is available to all ECE programs state-wide by expanding the capacity and reach of VA's current infant-toddler IECMH consultation program

b) Build capacity with research-based strategies through a partnership with the [National Center for Excellence in IECMH Consultation](#).

**The National Center on Excellence in IECMH Consultation** assists states in expanding or developing IECMH consultation programs to achieve wide reach and the use of effective practices. The Center also helps states identify financing strategies such as CCDF quality set aside dollars and Medicaid administrative funds for training.

**2. Expand professional development and coaching focused on practices that promote children's social-emotional growth and align these supports with a state-level IECMH consultation system.** A high percentage of teachers cited the need to expand professional development focused on

promoting children's social-emotional development and positive behavior. Expanded, research-based professional development that promotes children's social-emotional growth, aligned with state-wide IECMH consultation, would enhance Virginia's professional development efforts offered through a variety of sources (e.g., Virginia Quality, Virginia Preschool Initiative, Early Childhood Mental Health Virginia Initiative, Infant Toddler Specialist Network). Alignment would allow an IECMH consultation specialist to coordinate their work in programs with professional development specialists, as needed, to maximize resources.

**3. Establish a process for further developing Virginia's ECE expulsion policy, building on the existing Virginia expulsion reduction guidance document ([Guidelines for the Prevention of Suspension and Expulsion of Young Children \(2017\)](#)).**

Consider options for:

a) Applying guidance across ECE sectors and raising expulsion guidance to the level of formal policy

b) Promoting the use of IECMH consultation and coaching as expulsion prevention strategies, using them as early as possible when behavior concerns arise (see Arkansas' policy as a model for this approach).<sup>6</sup>

**4. Establish the Help Me Grow (HMG) system in Virginia to help address the needs of families of children with challenging behavior.** A high percentage of teachers indicated that many children with challenging behavior live in families experiencing adversities. [Help Me Grow](#) connects families, early learning providers, health care providers, and child-serving state and local agencies to services for young children and families, including behavioral health screening, assessment and interventions, and family support services. A centralized help line and resource specialists help callers (including ECE providers and parents) connect with resources to address child and family needs.

## REFERENCES AND NOTES

<sup>1</sup>Early Childhood Mental Health Consultation: Policies and Practices to Foster the Social-Emotional Development of Young Children (2016) Washington, DC: ZERO TO THREE

Collaborative for Academic, Social, and Emotional Learning. (2016). State scan scorecard project. Available at <https://casel.org/state-scan-scorecard-project-2/#info>.

<sup>2</sup>Administration for Children and Families, US Department of Health and Human Services. (nd) State and local action to prevent expulsion and suspension in early learning settings. Available at [https://www.acf.hhs.gov/sites/default/files/e cd/state\\_and\\_local\\_profiles\\_expulsion.pdf](https://www.acf.hhs.gov/sites/default/files/e cd/state_and_local_profiles_expulsion.pdf)

<sup>3</sup>Jones, D.E., Greenberg, M., & Crowley, M. (2015). Early social-emotional functioning and public health: The relationship between kindergarten social competence and future wellness. *American Journal of Public Health*, 105, 2283-2290.

<sup>4</sup>This professional development has included training and coaching to promote practices in the CSEFEL Pyramid Model, the program Als Pals, CLASS, and trauma-informed care.

<sup>5</sup>A starting point in developing the Virginia survey was a survey developed and administered by NCCP in collaboration with a stakeholder group in Maine.

See [report](#) on Maine survey: Smith, S. and Granja, M.R. (2017) *The Voices of Maine's Early Care and Education Teachers: Children with Challenging Behavior in Classrooms and Home-based Child Care*. New York: National Center for Children in Poverty, Mailman School of Public Health, Columbia University.

The Maine and Virginia surveys are available upon request from NCCP; contact: [Granja@nccp.org](mailto:Granja@nccp.org).

<sup>6</sup>Administration for Children and Families, HHS. (n.d.) State and local action to prevent expulsion and suspension in early learning settings. See: [https://www.acf.hhs.gov/sites/default/files/e cd/state\\_and\\_local\\_profiles\\_expulsion.pdf](https://www.acf.hhs.gov/sites/default/files/e cd/state_and_local_profiles_expulsion.pdf)

**The National Center for Children in Poverty (NCCP) is a non-partisan public policy research center at Columbia University's Mailman School of Public Health. Founded in 1989 with endowments from the Carnegie Corporation of New York and the Ford Foundation, NCCP is dedicated to promoting the economic security, healthy development, and well-being of America's low-income children and families. Using research to inform policy and practice, the center seeks to advance family-oriented solutions and strategic use of public resources at the state and national levels to produce positive outcomes for the next generation.**

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