# **BACKGROUND**

- Early childhood is an important period of behavioral, emotional, and neural development.<sup>1</sup>
- Early adverse experiences are widely prevalent and negatively impact development, leading to psychopathology.<sup>1,2</sup>
- Existing interventions for early childhood are mostly home-based and focus on externalizing disorders.<sup>3</sup>
- Existing school-based interventions are universal rather than targeted.<sup>4</sup>
- School-based interventions remove logistic barriers and can be more holistic.<sup>5</sup>

To study the effects of an integrated school-based behavioral health program (Early Childhood Satellite Clinics; ECSC) on children's disruptive behavior.

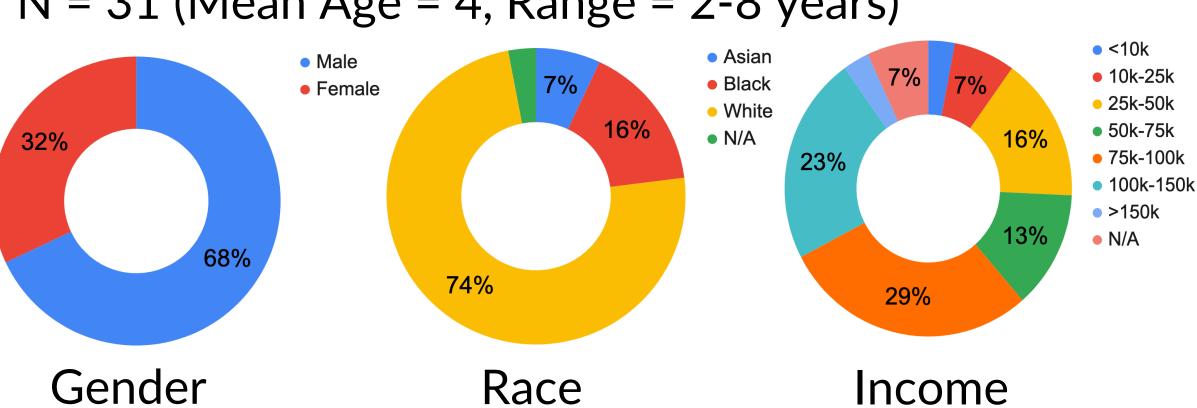
# **METHODS**

# **ECSC Intervention**

- Pilot program for early-learning centers in Ypsilanti,
- Target ages 2-8
- No-cost services provided by graduate students under supervision
- Intake interview with parent & child, parent-child relationship observation, weekly therapy, consultation with schools, skill practice in the classroom, structuring classroom environment
- Attachment-based & CBT approaches

# **Participants**

N = 31 (Mean Age = 4, Range = 2-8 years)



# Measures

- Eyberg Child Behavior Inventory<sup>6</sup>
- Intensity of behavioral problems
- Parents' perception of behaviors
- Completed weekly by parents

# **Data Analysis**

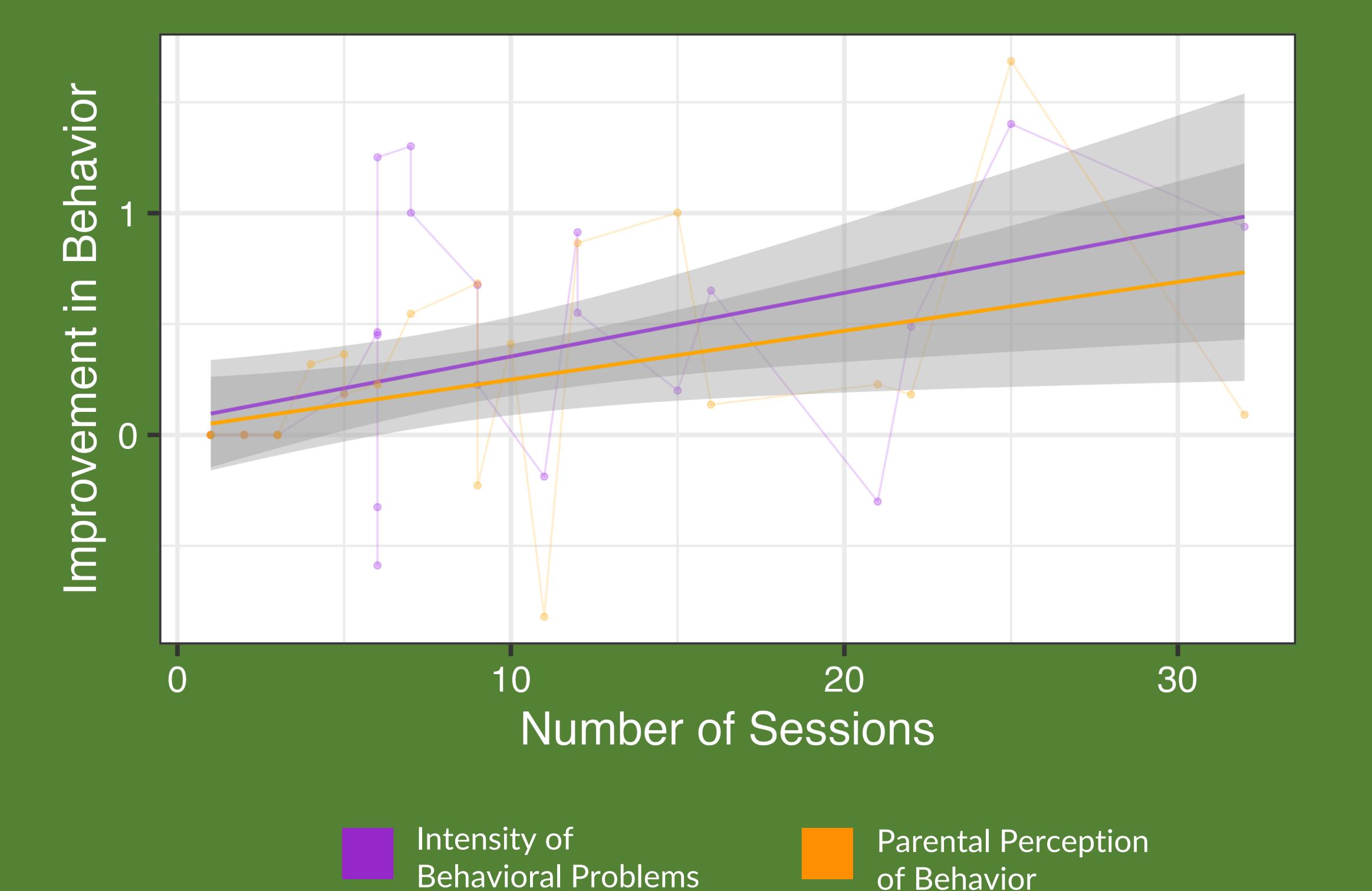
Change scores (average of first and last three)

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 Multilevel Model for Change<sup>7</sup> mjain2@emich.edu 🏏 @MaitriJain99 🎧 Maitrijain99

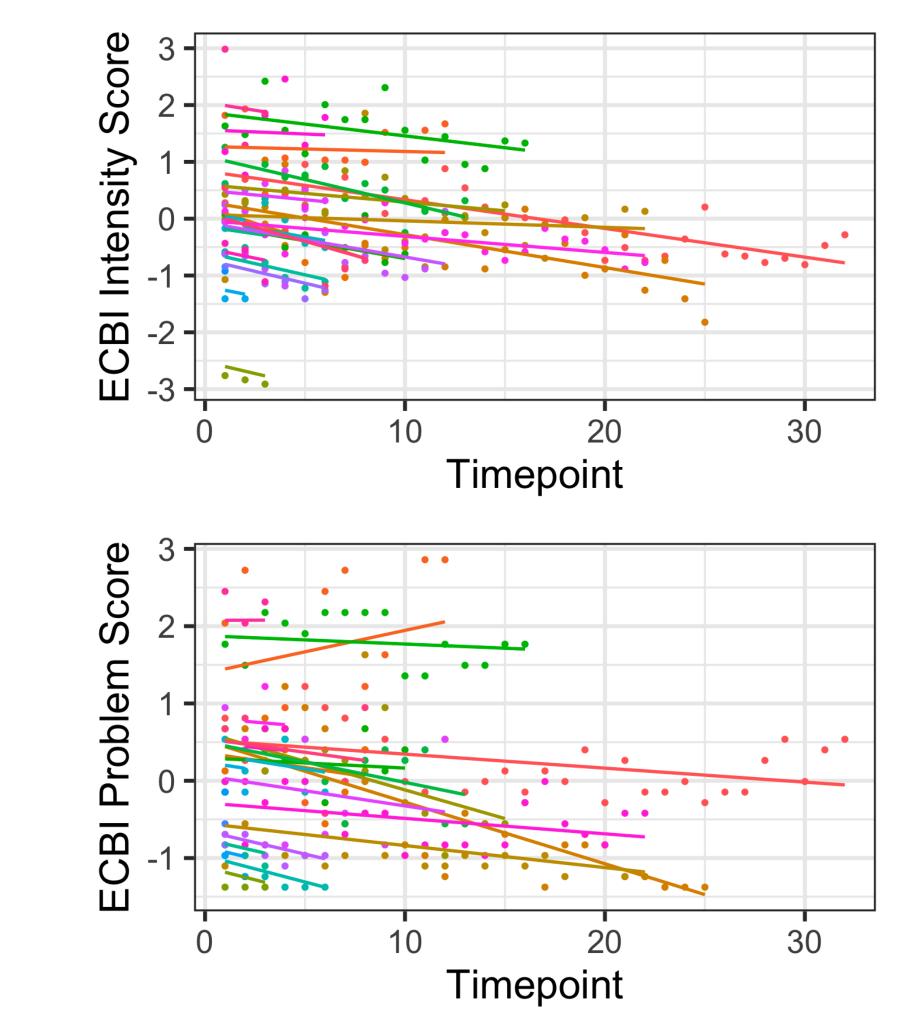
# Integrated school-based behavioral health program

# improves children's disruptive behavior.



# RESULTS

- Mean Number of sessions: 9 (Range = 1-32)
- Results similar for intensity and problem scores
- Decrease in scores over time ( $\beta_{int}$  = -0.06,  $\beta_{\rm prob} = -0.04$ ).
- Large differences between children in their baseline scores ( $\beta_{int} = 1.11$ ,  $\beta_{prob} = 0.73$ ).
- Change in scores over time does not differ much among children ( $\beta_{int}$  = 0.002,  $\beta_{prob}$  = 0.002).
- More number of sessions associated with larger change scores ( $\beta_{int} = 0.03$ ,  $p_{int} < .05$ ,  $\beta_{prob} = 0.02$ ,  $p_{prob}$  < .05).
- Intensity of behavior decreased for all participants, even if parents' perception did not.



## DISCUSSION

- Gives preliminary support for the efficacy of the ECSC program.
- Cost-effective as services provided by student clinicians, and resources by a training clinic.
- Allows training graduate students in early childhood mental health services.
- Can be funded by training grants

# LIMITATIONS AND FUTURE DIRECTIONS

- Low sample size
- Need more robust results from an expanded implementation in low-income regions
- The outcome measure only focuses on externalizing behavior
  - Study internalizing symptoms
- Study factors associated with change
- E.g., income, parent sense of competence, satisfaction with treatment

