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Early Identification and Prevention of Emotional and Behavioral Disorders: Personal Research Agenda

Broad Overview and Previous Efforts

One of the key components to establishing prevention programs is the adequate identification of children at risk for the development of mental health disorders. Without psychometrically valid identification procedures, children in need of early prevention and intervention services may remain unidentified and without appropriate care. My research interests represent the development and investigation of (a) screening systems to promote the early identification of preschool aged children at risk for mental health problems and (b) mental health preventive interventions linked to these screening systems that can be implemented at each of the universal, selective, and indicated levels in a comprehensive prevention model. These interests stem from the numerous research projects in which I have been involved, as well as from a prevention science minor where I first learned about the high prevalence rates and negative outcomes of mental health problems, coupled with the unavailability, inaccessibility, and ineffectiveness of some treatments. Specifically, I have been involved in research projects promoting the *early identification and prevention of emotional and behavioral problems*, including one study to evaluate a mental health screening system for elementary students, one study to design and evaluate a preschool mental health screening system, one collaborative multi-site grant involving a screening system for both academic and behavioral problems that was directly linked to preventive interventions, and various studies examining the effectiveness of an early prevention parenting skills program. My work in this area to date has resulted in my dissertation, publications, manuscripts in preparation, and presentations at conferences, as well as a training session on the selection and implementation of a mental health screening system. In addition, as a postdoctoral fellow at Vanderbilt University, I am currently involved in both school and parent based preventive intervention research projects, as well as a multisite mental health promotion project for the early childhood population. This position is enabling me to receive further training in the development and evaluation of preventive intervention programs.

Specific Questions to be Addressed within the Next Three to Five Years

- 1) What are the most psychometrically sound and useful methods of screening preschool age children for mental health problems?
- 2) How can we combine parent and teacher screening data to determine preschool student risk-status for mental health problems?
- 3) Which screening methods best identify preventive interventions for early childhood mental health problems at the universal, selective, and indicated levels?
- 4) Which preventive interventions are effective in reducing student risk status for mental health problems?

Implications for the Practice of Psychology in the Schools

Amendments to IDEA legislation (P.L. 99-457), have set the precedent for screening among preschool age populations by requiring states to implement child-find systems that identify young children in need of intervention services (Feil, Severson, & Walker, 1998). School psychologists can be essential contributors to the child find process by promoting the early identification of mental health problems within early childhood settings. They can receive specialized training to (a) implement program wide screening systems and (b) educate teachers and parents about how to recognize symptoms of mental health problems early, so that children are identified and are referred for preventive intervention services before they develop mental health disorders. This education can also be used to reduce the stigma associated with mental health problems and with early mental health screening. When children's mental health is identified as being at-risk, school psychologists can receive training to (a) provide conjoint consultation to families and early childhood providers, (b) provide evidence-based early preventive intervention programming, and/or (c) refer families for appropriate preventive intervention services.

References

- Feil, E. G., Severson, H. H., & Walker, H. M. (1998). Screening for emotional and behavioral delays: The early screening project. *Journal of Early Intervention, 21, 3*, 252-266.

Early Identification and Prevention of Emotional and Behavioral Disorders:
Collaborative Multi-site Research Program

Specific Issues and Questions to be Addressed

A school-based screening method is needed so that young children at-risk for mental health problems can be identified to receive preventive intervention services. Amendments to IDEA legislation (P.L. 99-457) set the precedent for screening among preschool populations by requiring states to implement child-find systems that identify young children in need of intervention services (Feil, Severson, & Walker, 1998). Unfortunately, a routine system for proactive screening in the school setting is not yet established (Kratochwill, Albers, & Shernoff, 2004). The proposed study is designed to answer the following research questions by comparing mental health screening systems on a common sample:

- 1) *Is a multiple stage screening system or a brief rating scale more effective at identifying preschool student risk status for mental health problems?* A classical test theory framework will be used to evaluate and compare two methods of screening. Predictor variables will include identification based on each of the two systems. The criterion variable will be a full form rating scale with established psychometric properties.
- 2) *How can we combine parent and teacher screening data to determine preschool student risk status for mental health problems?* Predictor variables will include identification based on teacher ratings and based on parent ratings. The criterion variable will be a full form rating scale with established psychometric properties.

Context and Participants

The proposed study will include participants in daycare and/or preschool programs with children ages three to five. Teachers and parents will complete mental health screening systems and a rating scale of children's social and emotional functioning. The principal investigator and graduate assistants will be responsible for recruiting participation sites, as well as monitoring implementation. Using a standard

protocol, the principal investigator will train graduate assistants and site coordinators for their roles in participation.

Requisite Number of Participants and Estimate of Budget

The proposed study could be implemented at three or more institutions across the United States to achieve a sample with representation from various ethnic groups reflective of the current United States census data. An estimate of the budget for one site is depicted in the table below, with the total cost being \$418,725.00, not including the costs associated with institutional overhead.

	Number	Cost per individual	Total Cost
Children	200	N/A	N/A
Lead teacher/daycare provider	67	\$150.00	\$ 10,050.00
Assistant teacher/ daycare provider	67	\$25.00	\$1,675.00
Parent	200	\$50.00	\$10,000.00
Graduate assistant	5	\$40,000.00	\$200,000.00
Principal investigator	1	\$60,000.00	\$60,000.00
Consultants	1	\$7,500.00	\$7,500.00
Professional assistant	1	\$10,000.00	\$10,000.00
Rating scale manuals/software/screening protocols			\$3,000.00
Photocopying			\$1000.00
Mailing			\$500.00
Travel (data collection, recruitment, presentation)			\$100,000.00
Other Technology			\$15,000.00
TOTAL			\$ 418,725.00

Advantages and Challenges of Multi-site Research Program

There would be several advantages associated with a multi-site research program. The use of multiple sites would allow one to draw on the strengths of principal investigators at each site, presenting learning opportunities for all involved in the research program. Senior researchers could provide mentorship to early career scholars, giving invaluable guidance that would help promote more successfully designed and implemented projects. Not only would this benefit early career scholars, but graduate assistants would also have the opportunity to learn from faculty and other graduate students nationwide, obtaining an important training experience. Additionally, the use of multiple sites would result in data from

different regions of the United States, to achieve a sample representative of the population reflected in the United States census data. A nationally representative sample is necessary for setting normative scoring criteria for screening instruments.

There would also be challenges associated with a multi-site research program. Different university institutional review boards (IRBs) may have specific requirements that could prolong the human subjects' approval process. Principal investigators could compare university IRB requirements and IRB meeting dates beforehand to determine an appropriate timeline for the IRB process. Authorship issues would also have to be discussed to meet all principal investigators' publication goals. One of the main challenges with multi-site research would be communication across sites. Having dedicated principal investigators who are willing to set aside specific time for phone calls, meetings, and potential trainings, as well as make a plan to ensure and monitor standardized implementation and data entry across all sites, would be very important. Therefore, prior to the commencement of the project, principal investigators could meet to develop a standardized implementation protocol and procedures for training graduate assistants, as well as a database for consistent data entry and data reliability checks at each site. Following this meeting, principal investigators could participate in weekly phone calls, with one individual keeping a written record of the discussions and decisions to ensure a process for coordination, communication, and accountability across sites. Principal investigators could then share the outcomes of the weekly phone calls with project staff.

References

- Feil, E. G., Severson, H. H., & Walker, H. M. (1998). Screening for emotional and behavioral delays: The early screening project. *Journal of Early Intervention, 21, 3*, 252-266.
- Kratochwill, T. R., Albers, C. A., & Shernoff, E. S. (2004). School-based interventions. *Child and Adolescent Psychiatric Clinics of North America, 13*, 855-903.